

## Public Consultation on “Roadmap for Social Inclusion: Mid-Term Review”

This public consultation on the Roadmap for Social Inclusion was prepared by the Department of Social Protection and IPSOS.

The purpose of the consultation is to evaluate progress in implementation, assess the Roadmap ambition, goals and commitments in the current environment, and examine the existing Roadmap indicators.

In response to this consultation, ALONE has prepared this submission in support of the many older people we work with. We have aimed to answer the questions above and provide recommendations that will enable solutions.

ALONE would welcome the opportunity to support this work in a more formal capacity should this option arise.

Should you require any further information or wish to engage further with ALONE, please contact Senior Policy & Advocacy Officer Gráinne Loughran: [grainne.loughran@alone.ie](mailto:grainne.loughran@alone.ie)

### About ALONE

ALONE is a national organisation that enables older people to age at home. Our work is for all older people and aims to improve physical, emotional and mental wellbeing. We have a National network of staff and volunteers who provide an integrated system of Support Coordination, Practical Supports, Befriending, a variety of Phone Services, Social Prescribing, Housing with Support and Assistive Technology. We use individualised support plans, to address health, financial benefits and supports, social care, housing, transport and other arising needs using technology and harnessing other services.

## Introduction

*“Social exclusion can be succinctly described as cumulative marginalisation from production (unemployment), from consumption (income poverty), from social networks (community, family and neighbours), from decision making and from an adequate quality of life.”*

ALONE works with older people nationwide experiencing a variety of difficulties. The majority of these challenges fall under the broad definition of social exclusion.

Economic and income poverty is a particularly important issue and one which is partially addressed through commitments in the Roadmap for Social Inclusion.

Other difficulties experienced by older people with regard to social exclusion include the below. It should be noted that these are summaries of information and do not highlight all of the difficulties being experienced by older people that fall within the category of social inclusion. Further information can be provided on these areas should it be required.

### Healthcare

Access to services:

Older people have difficulty in accessing the health services they need. The below figures were retrieved from HaPAI data from 2018<sup>1</sup>:

- 9.7% of people aged 50+ had difficulty when seeing a doctor in the past 12 months.
- 13% of people aged 56+ report unmet need for a community care service.

While more recent HaPAI statistics are not available, based on anecdotal evidence, ALONE would expect these figures to have increased since 2018. A significant number of older people we work with have referenced difficulties in accessing health care services, in particular GPs and Occupational Therapists. Older people have noted it is very difficult to make an appointment with a GP, and very few are taking on new patients.

Access to home care services:

Despite funding to the Home Support Service having increased substantially in recent years, older people still struggle to access the care they need at home due to lack of carers and workforce.

- As of end March 2022; 5,136,354 Home Support hours were delivered nationally to 55,080 people. Also, as of this date, there were 286 people assessed and waiting for funding for new or additional home support, while 5,458 people were assessed and approved for home support but awaiting a carer to be assigned<sup>2</sup>.

<sup>1</sup> Health and Positive Ageing Indicators, 2018 <https://assets.gov.ie/34280/dad478b61ccb470eab22195a14bdeb8c.pdf>

<sup>2</sup> <https://www.hse.ie/eng/about/personal/pq/2022-pq-responses/may-2022/pq-22042-22-verona-murphy.pdf>

### Ageism:

Ageism, as highlighted by Brian Harvey in his 2022 synthesis paper on ageism conducted on behalf of the Irish Senior Citizens Parliament, “is a particular problem in the health services. The list of evidence of ageism in the health services is long. It starts with the low status of gerontology; the inadequate supply of geriatric services and care; the lack of anti-ageism training; cut-off ages for screening diagnosis and treatments; and age-based clinical judgements. There can be poor communication with older patients, coupled with assumptions of dependency and helplessness; negative expectations; non-availability of rehabilitation compared to younger patients; and exclusion from clinical trials. Accumulated, this becomes self-directed, older people reducing their desire to seek help and expressing a greater preparedness to accept pain.” ALONE note that these impacts of ageism can be seen across numerous areas; often, older people we work with express unwillingness to accept help if there are others in need more than they are, even (and sometimes particularly) if they are experiencing severe difficulties such as homelessness.

### Loneliness

Loneliness in older people has increased significantly since the COVID-19 pandemic. 55-69 year olds experiencing loneliness all or most of the time increased from 2.6% in 2018 to 8.3% in 2021<sup>3</sup>. Using Census 2016 figures as a guide<sup>3</sup>, that is an increase from 18,725 people in 2018 to 59,776 in 2021.

Loneliness has also increased among other age groups. As a founding and current member of the Loneliness Taskforce, ALONE is cognisant of the impact loneliness is having across all age groups.

The Roadmap for Social Inclusion committed to developing an action plan to combat loneliness; as did the Programme for Government. In the Roadmap for Social Inclusion reports, it was indicated that this had begun in 2019 and was continuing in 2020; the estimated completion date was then Q4 2021.

### Digital exclusion

More than half of people aged 75+ have never or do not regularly use the internet. On an international basis, organisations such as the UN, the EU, and the OECD have highlighted the digital divide experienced by older people. In Ireland, CSO data from 2021 further illustrates this<sup>4</sup>

- Nearly half (46%) of persons aged over 75 years have never used the internet, and a further 5% had not used the internet in the last three months.
- 19% of persons aged 60-74 have never used the internet, and a further 3% had not used the internet in the last three months.
- According to TILDA research from 2020, over 30% of people aged 50+ living alone do not have access to internet<sup>5</sup>

<sup>3</sup> CSO, <https://www.cso.ie/en/releasesandpublications/ep/p-cp3oy/cp3/agr/>

<sup>4</sup> Central Statistics Office, <https://www.cso.ie/en/releasesandpublications/ep/p-isshict/internetcoverageandusageinireland2021/frequencyofinternetusage/>

<sup>5</sup> TILDA, <https://tilda.tcd.ie/news-events/2020/2016-%20covid19-techhabits/>

**Housing**, including housing conditions, proximity to services, housing adaptations, accessibility, housing with supports etc

Older people want to age at home but this is challenging for many reasons.

Housing adaptations and facilities: Of older people who are owner-occupiers or who live in their own home, often this home is not suitable to their needs. This may be due to not having a wheelchair accessible bathroom, suitable hand railings or aids for going up and downstairs, and other accessibility difficulties, but also due to the standard of the home itself. ALONE have worked with older people for example who do not have an indoor toilet, who may be sleeping on the floor due to the lack of a bed, or do not have proper cooking facilities. Housing adaptation grants are complex and difficult to access for many older people.

Housing conditions: According to a survey report published in June 2018 under the Healthy and Positive Ageing Initiative (HaPAI), a survey of people aged 55 and over (Gibney, et al., 2018), a quarter reported having difficulties associated with housing maintenance. A further 10% reported having 'housing condition' problems, which included rot in windows, doors or floors, and damp or leaks in walls<sup>6</sup>.

A significant proportion of older people live in older buildings, resulting in increased amounts of maintenance required but which often goes undone due to lack of funds. More generally, older people are more likely to live in homes with low energy ratings, leading to increased heating and energy costs, which is further impacted by increased fuel prices. About 57% of people aged 75 and over live in BER EFG rated properties<sup>7</sup>.

Supports to live at home: A significant problem for older people is the lack of intermediate supports between those that can be received while living independently at home, and those that can be received in a nursing home. As highlighted previously, while the home support service is well funded, there is still a waiting list due to lack of carers. Community supports for older people are often localised and arise to meet an immediate local need, rather than standardised services that are available nationwide.

In our experience, older people who are renters, those who live alone, and those who have health and mobility difficulties are particularly impacted by housing difficulties.

**Food poverty/malnutrition:** Over one-third of older adults admitted to an Irish Emergency Department are either malnourished or at risk of malnutrition<sup>8</sup>. Malnutrition was associated with a longer stay in the ED, functional decline, poorer quality of life, increased risk of hospital admissions and a greater likelihood of admission to a nursing home at 30 days. The HSE note that approximately one third of patients in publicly funded long stay residential care beds, i.e. nursing homes, are at risk of malnutrition, and 25% of patients receiving home help/home care packages are at risk of malnutrition<sup>9</sup>.

<sup>6</sup> Health and Positive Ageing Indicators, 2018 <https://assets.gov.ie/34280/dad478b61ccb470eab22195a14bdeb8c.pdf>

<sup>7</sup> ESRI, 2014 <https://www.esri.ie/system/files?file=media/file-uploads/2016-12/WP489.pdf>

<sup>8</sup> Griffin, O'Neill, et al 2020 <https://bmccgeriatr.biomedcentral.com/articles/10.1186/s12877-020-01852-w>

<sup>9</sup> HSE, accessed 2022 <https://www.hse.ie/eng/services/list/2/primarycare/community-funded-schemes/nutrition-supports/malnutrition-in-ireland/>

**Energy poverty:** Ireland has one of the highest levels of Excess Winter Deaths in Europe. There are significantly more deaths in winter than in the rest of the year, particularly amongst older people and those on low incomes. Older people ALONE work with have highlighted the difficulties they experience with energy poverty; these include staying in bed during the day to keep warm, traveling on buses and public transport to avoid the additional cost of heating their home during the day, and selling off items to support themselves. ALONE has also recently made a submission to the Department of Energy, Environment and Climate Action in relation to the Strategy to Combat Energy Poverty.

**Participation in social, political, civic life:** 39% of people aged 50+ have difficulty accessing essential services<sup>10</sup>. Public transport (bus, metro, tram, etc.) was the service that most people had difficulty accessing (36%), followed by banking services (17%), and grocery shops/supermarkets (7.1%). 32% of people aged 50+ have difficulty accessing social facilities. Based on anecdotal evidence, ALONE would expect this figure to have increased since 2018, given that many social facilities and services for older people stopped and did not restart again during the COVID-19 pandemic. For example, there remains day care centres across the country which have not yet reopened following the pandemic.

**Ageism and discrimination:** 34% of people aged 50+ reported experiencing discrimination in 2011. This had increased to 45% in 2016 according to The Positive Ageing indicators report (Department of Health, Ireland, 2016). Today we can safely assume the figure has increased again.

ALONE recognise that the Roadmap for Social Inclusion is across all ages and cohorts of society. It contains 66 unique commitments. We note that solutions to the difficulties experienced by older people as listed could potentially double the number of commitments required of the Roadmap for Social Inclusion if all were to be addressed by this mechanism. ALONE's recent Pre-Budget Submission highlighted 50 recommendations to Government.

ALONE and other age NGOs have experienced difficulties in finding solutions to many of these difficulties through other fora, strategies and mechanisms. For example:

- The National Positive Ageing Strategy, which was written in 2013, covered many of these areas; but to date, an implementation plan for NPAS has not been published or specific actions funded.
- Establishing a Commission on Care was committed to in the Programme for Government; two years on, there has been no further update as to its establishment.
- The Joint Policy Statement on Health and Housing for Older People was published in 2018 and while numerous actions were committed to and achieved, the implementation group was wound up in June 2022 with many of the actions left incomplete.

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<sup>10</sup> Health and Positive Ageing Indicators, 2018 <https://assets.gov.ie/34280/dad478b61ccb470eab22195a14bdeb8c.pdf>

**As well as recommitting to the measures for older people already included in the Roadmap for Social Inclusion, ALONE would therefore recommend that a minimum of three further actions are included as a priority:**

- Review and develop an implementation plan for the National Positive Ageing Strategy
- Expedite the activities of the Commission on Care
- Establish a working group to continue the work of the Implementation Group for the Joint Statement and publish a timeline for delivery of the actions which have not yet been completed

This document aims to more fully illustrate the difficulties being experienced by older people with regard to the difficulties listed above and highlight the areas in which older people require further action within the Roadmap for Social Inclusion.

## What progress do you feel has been made in reducing poverty and social exclusion since publication of the *Roadmap for Social Inclusion 2020 – 2025* in January 2020?

ALONE works with older people aged 60 plus and therefore all answers will be related to this cohort.

Unfortunately, Ireland has in fact gone backwards in terms of both poverty and social exclusion for older people since January 2020.

### Poverty

- The latest CSO Survey on Income and Living Conditions (SILC) data indicates that those aged 65+ were the only cohort to see increases across all three poverty rates between 2020 and 2021 – at risk of poverty (9.8% to 11.9%); deprivation (8.1% to 8.4%); and consistent poverty (1.0% to 2.5%)<sup>11</sup>.
- Over 65s were the only group to see an increase in the at-risk of poverty rate from 2020 to 2021, from 62,482 people to 75,870. That's more than the entire population of Roscommon.
- Older people living alone are among those struggling most. For older people living alone, the at risk of poverty rate increased from 20.5% to 21.5%; deprivation increased from 10.6% to 12.1%; and consistent poverty almost doubled, increasing from 2.2% to 4.3% (ibid).
- This data is related specifically to before 2022, which has seen inflation levels skyrocket. Therefore, we can safely assume that these figures for 2022 are substantially higher. CSO data shows that people aged 65+ are experiencing among the highest inflation rates<sup>12</sup>
- More than one third (38.6%) of households made up of one adult aged over 65 experienced at least some difficulty making ends meet in 2021. 4.3% had failed to make a mortgage or rental payments on time in last 12 months, and 7.2% had failed twice or more<sup>13</sup>
- The 2016 Census indicated that 2.4 per cent of the over 65s and 10 per cent of people between 50 and 54 are renting from private landlords, a proportion we expect to have increased in the 2022 Census. According to the CSO, close to half (49.5%) of tenants who are 65 or over are spending more than 35% of their disposable income on rent<sup>14</sup>.
- According to the Vincentian MESL Research Centre, in 2021, €333.47 was the necessary weekly income for an older person living alone in a rural area to meet the minimum standard of living. The current State Contributory Pension is €253.30, while the Non-Contributory Pension is €242; this will increase by €12 in January following Budget 2023. Even with the increase, an older person reliant on the pension and other state benefits still does not meet the threshold. An October 2022 Budget 2023 MESL impact briefing indicates that older people living alone in urban

<sup>11</sup> CSO SILC, 2022 <https://www.cso.ie/en/releasesandpublications/ep/p-silc/surveyonincomeandlivingconditionssilc2021/>

<sup>12</sup> CSO, 2022

<https://www.cso.ie/en/csolatestnews/pressreleases/2022pressreleases/presstatementestimatedinflationbyhouseholdcharacteristicsjune2022/>

<sup>13</sup> CSO SILC, 2022 <https://www.cso.ie/en/releasesandpublications/ep/p-silc/surveyonincomeandlivingconditionssilc2021/povertyanddeprivation/>

<sup>14</sup> CSO, 2021 <https://www.cso.ie/en/releasesandpublications/fp/fp-trsi/therentalsectorinireland2021/tenants/>



areas will also not meet the threshold for the minimum essential standard of living this year<sup>15</sup>. This falls specifically within the definition of social exclusion, which indicates “an adequate quality of life” as an indicator.

Four actions involved in benchmarking the State Pension were made in the Roadmap for Social Inclusion. These included finalising the approach for benchmarking, developing any necessary changes to legislation, applying the Benchmark in adjusting pension rates for Budget 2021, and the preparation of a report to Government on the potential application of benchmarking to other welfare payments. These actions all had timelines of 2020 for completion, but unfortunately none have been completed.

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<sup>15</sup> Vincentian MESL research centre <https://www.budgeting.ie/publications/budget-2023-mesl-impact-briefing/>



## **In your experience, what has worked well in reducing the number of people in Ireland experiencing poverty and social exclusion?**

Increasing welfare payments, expanding eligibility criteria for payments (such as the expansion for Fuel Allowance in the most recent Budget) are among the most effective measures for reducing poverty.

There are several measures that we know reduce poverty amongst older people. For example, having a pension benchmarked to the average industrial wage or to the living wage as has been demonstrated in Holland<sup>16</sup> does help in improving the socio-economic conditions of older people. Other economic factors such as the implementation of Free Travel for older people and the GP visit card are also factors that have alleviated some economic pressure from older people.

ALONE note that the work so far completed through the implementation of actions in the Roadmap for Social Inclusion has been successful in reducing social exclusion in other groups.

Support coordination services such as that provided by ALONE nationwide enables reduction of poverty and social exclusion in several ways. These operate by taking a unique approach to every older person who engages with ALONE's services depending on their individual needs and desires. These could include, for example:

- Support to access all their entitlements, which they may not have been aware of or had struggled to access before (including Living Alone Allowance, Fuel Allowance, Urgent and Additional Needs Payments, medical card, etc).
- Linking into social supports through volunteer visits, phone calls and social prescribing.
- Linking into technology supports including support to access and use the internet, in some cases for the first time.
- For those experiencing housing difficulties, ALONE supports the older person to access supports including decluttering, Housing Adaptation Grants, the housing ALONE provide as an AHB, Local Authority and other housing, and any other supports that can be utilised.
- Support through hospital discharge and access to health services such as home supports.

The ability to provide supports across this range of contexts and key areas enables reduction in social exclusion.

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<sup>16</sup> <https://www.oecd.org/els/public-pensions/PAG2017-country-profile-Netherlands.pdf>

## And in your experience, what has not worked so well or is challenging in reducing the number of people in Ireland experiencing poverty and social exclusion?

In ALONE's experience there are several barriers that prevent reduction of poverty and social exclusion for older people. These include:

- Complexity of the system to access entitlements
- Prioritisation of digital supports and digital-first access to services
- Recent increases in vital costs for older people including fuel and food: While these increased costs are of course challenging in themselves, they also result in older people cutting back in what are seen as 'extras'; going for a cup of coffee with a friend, getting a birthday gift for a grandchild, etc. This results in increased isolation and other difficulties.
- Housing conditions for older people
- Social exclusion in the form of services not having reopened since the COVID-19 lockdowns
- Ageism and attitudes towards older people

It is also noted that while one-off measures in the context of the current energy crisis are welcomed, they do not resolve poverty and social exclusion on a long term basis. Measures such as increasing welfare payments, expanding eligibility criteria (such as for Fuel Allowance in the most recent Budget) are among the most effective measures.

We will examine some of these challenges in more detail below:

### Complexity of the system

Currently access to public services for older people is difficult. A range of services are available, with different means of application for each. For example:

- To avail of free travel, an older person needs a public services card.
- They must send the Living Alone allowance form to the Department of Social Protection.
- For the GP visit card, they must apply online or download a form and post it to the National Medical Card Unit.
- To get an Additional Needs Payment, the form is downloaded online and sent to the local Community Welfare service.
- To apply for the State Pension, they must submit the form at least three months before they turn 66, which cannot be done online. Their social insurance record contribution statement however is accessed through MyWelfare.ie

If they are in receipt or in need of HAP or housing assistance, home care, the drugs payment scheme, housing adaptation grant, carers allowance etc – all supports require different forms, all have different systems and eligibility criteria, and are sent to many different organisations and Government departments, some with online accessibility, and some without.

Different entitlements have different eligibility criteria in terms of age, means, etc. This makes simply understanding and applying for the relevant entitlements extremely difficult. It is also administratively burdensome, as the older person must answer the same questions repeatedly across different forms.

It is ALONE's view that by streamlining the documents and processes, older people would more easily engage with the system and Government Departments would save time and money currently being spent on the administration of various entitlements with complex criteria.

### **Prioritisation of digital supports and digital-first access to services**

The reduction in paper-based services locks older people out of accessing support and information they may need. For example:

- Eir have announced planned additional charges to paper bill and phone payment customers due to come into place in 2023. In January Eir will be adding a further €5.99 per month to have either a paper bill or paying over the phone. This will add more than €70 per year to the bill of many older people who do not use online services.
- Easy-to-access price comparison between service providers is not available offline. For example, price comparison websites such as bonkers.ie do not have paper-based services. This makes it extremely difficult and time intensive for older people trying to identify which services, such as energy providers, are the best value for them. Many older people do not switch suppliers regularly at all because they do not have access to the relevant information.

### **Housing conditions for older people**

As noted in the introduction to this submission, older people experience considerable difficulty with housing conditions. Housing conditions often pose a barrier to social inclusion; for example, where an older person is sleeping in their sitting room because they can no longer access their upstairs bedroom and are awaiting a Housing Adaptation Grant for a stairlift, they are often reticent to have friends to their house.

Housing conditions can be a barrier to discharge from hospital, to home support workers entering the home and more. Often discharge from hospital must be postponed until works have been completed to the home, decluttering is carried out, etc. This poses substantial challenges because the longer an older person is in hospital, the more likely they are to experience frailty and other issues post-discharge.

On a very practical level, ALONE have worked with older people living in apartment blocks where the elevator has broken down and not fixed for months on end, and the older person has been unable to leave their apartment for that length of time because they cannot manage flights of stairs.

The lack of accessible, age-friendly housing close to amenities often excludes older people from social inclusion.

### **Ageism and attitudes**

Over the last number of months and in the run-up to Budget 2023 there has been a lot of ‘Old vs. Young’ discourse in the media and unwelcome attempts at stoking intergenerational tension. We know from our work around loneliness, health, income and housing that the oldest and the youngest in the country are experiencing similar difficulties and have so much more in common than what divides them.

Much is made of the rhetoric that older people are wealthier, often home-owners, and have generally received support from the Government on issues relating to pensions and income. However, the statistics and lived experience (evidenced throughout this document) shows that this is not true of many older people. ALONE believe that this attitude poses a barrier to achieving change for older people.

**What would you like to see prioritised in terms of moving people out of poverty and social exclusion, up to the end of the *Roadmap for Social Inclusion 2020 – 2025* in 2025?**

ALONE would like to see prioritisation of the actions relating to the benchmarking of the State Pension, and the development of an action plan to combat loneliness.

Benchmarking of the State Pension is significantly delayed, and was committed to be implemented by Budget 2021 in the Roadmap for Social Inclusion. It will now be Budget 2024, at the earliest, before this is completed.

We believe the development of an action plan to combat loneliness is key in the aftermath of COVID-19 restrictions, given significantly increased loneliness across age groups following this period.

**If there are any specific aims, ambitions, commitments or targets in the *Roadmap for Social Inclusion 2020 – 2025* that you would like to comment on, please provide details. This can include identifying gaps in what is included in the Roadmap, or any other comments you may have.**

As referenced at the beginning of this document, as well as recommitting to the measures for older people already included in the Roadmap for Social Inclusion, ALONE would recommend that a minimum of three further actions are included as a priority:

- Review and develop an implementation plan for the National Positive Ageing Strategy
- Expedite the activities of the Commission on Care
- Establish a working group to continue the work of the Implementation Group for the *Joint Policy Statement: Housing Options for our Ageing Population* and publish a timeline for delivery of the actions which have not yet been completed

ALONE believe that achieving these actions, in conjunction with living up to the commitments to older people already highlighted in the Roadmap, would represent a significant step forward in achieving social inclusion for older people.

### **Update, fund and implement the National Positive Ageing Strategy**

ALONE and other organisations working with older people (including our colleagues in the Age Alliance) have repeatedly called for the National Positive Ageing Strategy (NPAS) to be

implemented. The Strategy is now almost ten years old. To date, an implementation plan for NPAS has not been published or specific actions funded. ALONE is calling for NPAS to be reviewed and updated, and for an implementation plan with clear objectives and actions to be written, funded and delivered, in collaboration with older people themselves and organisations involved in working with older people.

### **Expedite the activities of the Commission on Care**

In the Programme for Government, a commitment was made to establish a Commission on Care: “Learning from COVID-19, we will assess how we care for older people and examine alternatives to meet the diverse needs of our older citizens. We will establish a commission to examine care and supports for older people.”

Two years on, this Commission has not been formally established. Minister Mary Butler indicated in March this year that initially, an extensive review of age-related strategies was to take place, which would “strengthen older person policies and strategies” and “ensure the needs of communities across Ireland are accurately reflected in the Terms of Reference and subsequent work of the commission.”<sup>17</sup> While this diligence is commendable, ALONE believe that elements of this work need to be urgently expedited and include a review of the experiences of older people during the pandemic. Two years on, the Commission should be significantly further ahead in its activities than developing Terms of Reference.

Evidence suggests that COVID and resulting lockdowns and isolation had a severely detrimental impact on the physical and mental health of older people<sup>18</sup>. The HSE’s interim report on the impact of cocooning<sup>19</sup> has also highlighted the likely longterm impacts on older people’s physical and mental health; including increased risk of cognitive decline and depression, cardiovascular disease, diabetes, osteoporosis and fractures, physical frailty, and decrease in quality of life. These impacts are being experienced by older people today.

Thus far, no actions have been recommended by the Commission on Care. Therefore, ALONE would recommend a dual approach to be taken by the Commission:

- A short to medium term view, considering urgent recommendations to be actioned in the short to medium term to improve the lives and wellbeing of older people who are still feeling the impact of the pandemic.

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<sup>17</sup> <https://www.oireachtas.ie/en/debates/question/2022-03-01/608/>

<sup>18</sup> Bailey, L., Ward, M., DiCosimo, A., Baunta, S., Cunningham, C., Romero-Ortuno, R., Kenny, R., Purcell, R., Lannon, R., McCarroll, K., Nee, R., Robinson, D., Lavan, A. and Briggs, R., 2021. Physical and mental health of older people while cocooning during the COVID-19 pandemic. QJM: An International Journal of Medicine

<sup>19</sup> <https://www.hse.ie/eng/services/publications/olderpeople/interim-report-on-the-impact-of-cocooning-measures-on-older-people.pdf>

- A long term view, considering the approaches to be taken long-term to care and support of older people, including housing options for older people, the home support and nursing home schemes, and other significant areas.

**Establish a working group to continue the work of the Implementation Group for the *Joint Policy Statement: Housing Options for our Ageing Population* and publish a timeline for delivery of the actions which have not yet been completed**

The Joint Policy Statement released by the Departments of Health and Housing was warmly welcomed as a significant step forward in housing policy for older people, and organisations supporting older people have described it as being key to planning for the housing needs of our ageing population. However, the reports from the Implementation Group have indicated that the Group has now ended their reporting on the progress of the implementation of the actions identified in the Statement. This is despite the fact that many of the actions identified have not been implemented, something that is acknowledged by the Implementation Group itself. The final report, which was uploaded on June 2nd this year, states that “More in-depth consideration of outstanding Actions at Subgroup level has concluded that advancing the objectives of these actions may require revised perspectives and approaches<sup>20</sup>”.

The report also states that “To address these [outstanding actions], and to maintain the momentum established since 2019 to the linked policy issues that are so vital to older persons policy the two Departments are developing a new framework for joint co-operative policy making and implementation, at national and local level, for housing and supports for our increasing ageing population. These remaining actions will form a key element of the work programme envisaged under this framework and will be advanced and concluded in this way.”

As there has been no further update on the gov.ie website page since this report was published in June, it cannot be established what has been done so far to implement this new framework. Nor is there a timeline for delivery of the remaining actions.

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<sup>20</sup> <https://assets.gov.ie/226143/5d6ed6ca-94b7-441f-b3bb-97a2c668cc81.pdf>



There are many additional actions which could and should be included in an updated Roadmap for Social Inclusion. These include:

**Benchmark the Living Alone Allowance:** Older people living alone are most susceptible to being at-risk-of poverty, experiencing deprivation, and experiencing chronic poverty.

For older people living alone, between 2020 and 2021, the at-risk of poverty rate increased from 20.5% to 21.5%; deprivation increased from 10.6% to 12.1%; and consistent poverty almost doubled, increasing from 2.2% to 4.3%. The most recent MESL figures highlight that older people living alone in urban and rural areas now have income below the MESL target.

The Living Alone Allowance is a targeted benefit that supports those struggling most. However, like the State Pension, it is not currently benchmarked against anything. The €22 per week does not adequately protect older people against the added cost of living alone. This is surely evidenced by the fact that the rates of poverty are so much greater among this cohort.

**Review the Exceptional and Urgent Needs Payments schemes, including a note of the total number of applications and rate of success. Streamline the criteria for application nationwide:** ALONE staff have highlighted that in recent years, access to HEOs in the Department of Employment Affairs and Social Protection (formerly Community Welfare Officers or CWOs) has become limited, decreasing the ability for people to access the Exceptional and Urgent Needs Payments. Granting of the Exceptional Needs Payment “are at the discretion of the officers administering the scheme”<sup>21</sup>.

In ALONE’s experience, successful applications for the Exceptional Needs Payment can depend on individual HEOs as well as geographical location. Anecdotally, ALONE staff have highlighted that in more rural areas the criteria for granting the payment is higher compared to more urban areas. The process lacks consistency and there needs to be a unified approach to the payment.

A review of the scheme and streamlining of application criteria (where possible, and allowing for individual circumstances to be taken into account) would both highlight the areas in which applicants are commonly struggling, and indicate where additional resources are needed.

**Deliver choice in housing and Housing with Supports:**

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<sup>21</sup> <https://www.oireachtas.ie/en/debates/question/2022-06-21/616/>

Age-friendly housing and universal design are key steps in supporting older people to age well at home. In order to meet the additional needs of the population as we age, we must also ensure that ongoing supports, such as home care and step-down facilities are available where needed.

Older people, particularly those with health difficulties, require a range of choices in housing so that their health needs can be met cost-effectively and in a manner which is suitable and appropriate for them. ALONE is calling for investment in Housing with Supports as an alternative to nursing homes. Our research, which takes into account population projections to 2031 and take-up of this option elsewhere, indicates that 4,341 housing units with support will be needed.

Housing with supports refers to housing that is purpose designed with embedded on-site 24/7 support. Such housing typically includes self-contained accommodation with its own front door, an ethos of supporting independence, flexible care packages, access to activities and social events and various communal facilities. It is further characterised by a number of design features such as universal design, lifetime adaptable principles, and assisted technology incorporated into the scheme design. This type of housing is based on the premise that some people with high support needs can live independently or semi-independently with more intensive social and health care supports, including personal care and some nursing care. UK research demonstrates that, for some older people, a move to high support sheltered housing is associated with a better quality of life when compared with living in mainstream housing. Housing with supports clearly offers a dignified response to many people who can no longer live in their own homes but who do not require nursing home care.

Research by The Housing Agency shows that there is a strong financial benefit of such models of Supported Housing, which can replace more expensive nursing home beds or delays the need for the older person to access nursing home care, and also due to reduced health and social care needs<sup>22</sup>. The research by the Housing Agency shows that the State could save €900 million over 30 years as a result of direct public investment in Supported Housing for older people. Housing development, taking in consideration the demands from the ageing population, is in essence a long-term investment.

### **Simplify the processes for applying for entitlements to enable ease of accessibility for older people.**

For the Department of Social Protection, for example, this would mean:

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<sup>22</sup> The Housing Agency, 2020. Thinking Ahead: The Financial Benefits of Investing In Supported Housing For Older People. Dublin: The Housing Agency, p.5.

Developing a 'one-stop shop' approach for accessing and applying for pension, fuel allowance, Living Alone allowance, the Household Benefits package and Telephone Support Allowance. This may mean, for example:

- o Adapting the form and process for applying for the State Pension, so that the person does not have to fill out an additional form to apply for the Living Alone allowance, Household Benefits Package and/or Free Travel
- o Streamlining of eligibility criteria (eg age at which one becomes eligible for various entitlements) across the entitlements available from this Department, as far as possible.