



a tide for change
an taoide ag casadh

Galway City Partnership
Comhpháirtíocht Chathair na Gaillimhe

***Community Profile of Supports and Services
for Older People in Galway City***

**Conducted by
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On behalf of Galway City Partnership**



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*Anile*

She feels like running a marathon, climbing Mount Everest, going skiing,

But she's a woman and she's old.

She wants to dress up, eat out, have sex, have fun,

But she's a woman and she's old.

She wants to buy a car, take a holiday, get a job,

But she's a woman and she's old.

She'd like to show off, see a show, go to the ball,

But she's a woman and she's old.

She'd like to do a course, learn the piano, take up bowling,

But she's a woman and she's old.

She hasn't got chilblains, yellowing dentures, a rocking chair,

And they are surprised.

But she's a woman and she's old.

She doesn't potter in the garden, nod by the fire, or tell the same story over and over.

And they wonder why not.

But she's a woman and she's old.

She doesn't lose her balance, her concentration, her wits,

And they shake their heads.

But she's a woman and she's old.

She wears bright clothes and lets her hair grow,

They chide "too gaudy" and "put it up in a bun".

But she's a woman and she's old.

She's rarely sick but when she is they complain

What do you expect?

You're a woman and you're old.

Her sight is good, her hearing too, she's fit and able.

They suggest a hearing-aid, a walking-aid and what about glasses?

After all, she's a woman and she's old.

They give her presents, they mean well.

Hankies, slippers, a box of soap.

She'd love perfume, a pretty blouse, a skipping rope.

But she's a woman and she's old.

She's strong, motivated, enthusiastic and flexible,  
And they portray her  
As senile, incontinent, doddering and dependent.  
A silly old moo.

What price older and a woman to boot.

- Helen Mortimer, 1993.

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# Executive Summary

## **Background to the Study**

Galway City Partnership commissioned this research in March 2008. The study seeks to establish a community profile of the needs of older people in Galway City, especially those experiencing disadvantage. The research combined primary and secondary techniques. This report is based on a series of interviews, consultation forums, a questionnaire survey, observations and documentary analyses.

## **Profile of Older People in Galway City**

There are 11,600 people aged over 55 in Galway City, which represents 16% of the overall population of the city. There are 6,386 females and 5,214 males. The Rockbarton, Renmore and Lough Atalia communities have the highest percentage of older people.

## **Services and Supports**

Nineteen services are working specifically to support older people in Galway City and at least thirty-seven organisations provide services to older people as part of their overall service. The range of organisations reflects the diversity of older peoples' needs and interests. Most referrals to organisations come through professional health services, particularly the Public Health Nurse Service.

## **Issues for Older People**

- The stretched and under-resourced services, particularly some of the health/social care services, are not supporting this stage of life change in a positive, empowering manner.
- The lack of primary care teams in the community is seen by many service providers as a problem, as is the lack of co-ordination and liaison between services.
- Different parts of the city present different needs for older people.
- Loneliness and isolation are highlighted as key issues for older people. Service providers feel that older people could be more active, more involved in the community, more self-reliant, but the "*for the elderly*" label stops people from getting involved.
- The lack of societal connections in the community, and the fact that support structures are breaking down, were recurring themes.
- An increasing number of older people present with addiction problems and associated conditions such as depression and other mental health issues.

- Key gaps in services include the lack of day centres, respite for carers, information centres, out-of-hours service, sheltered housing and advocacy.
- The home help service is not meeting the practical needs of older people.
- Elder abuse is becoming increasingly common.

### **Recommendation 1: Support Infrastructure**

- Day care centres with a full suite of services (showers, food etc.) and supports (counselling, advice services etc.), including transport, should be strategically developed in areas throughout the city.
- The feasibility of establishing Lunch Clubs similar to those established by COPE in the Imperial Hotel should be examined in other parts of the city, where demand or population numbers do not allow for the establishment of Day Care centres.
- The City Council should meet with community and voluntary groups in the city to begin establishing sheltered housing schemes throughout the city.
- An Older People's Resource Centre and a dementia-specific respite centre should be developed in conjunction with older people, carers, state agencies and community and voluntary organisations.
- The HSE should develop a call centre for older people where they can have their queries dealt with effectively and sensitively and be directed to the most appropriate service within the HSE.

### **Recommendation 2: Raising Awareness**

- An awareness-raising campaign on the dangers of addiction and on sources of support should be aimed at older people.
- The work of Care and Repair and Westside Age Inclusion should be highlighted in the local media to inform service users and providers.
- A safety and crime-prevention campaign should be developed to raise awareness among older people in the city on how to stay safe in their homes and communities.
- Local media, both radio and newspapers, should develop an older people's advice and information slot every four to six weeks, to ensure that older people hear about rights, entitlement, social and community events, etc.

### **Recommendation 3: Building Supports**

- Visitation programmes such as Galway Contact and Care Service (Care and Repair) should be expanded and structured accordingly with adequate staff, resources and volunteers.
- A phone link service should be established in the city to check in on older people living alone and to remind them of appointments.
- An Advocacy Service for older people should be developed to help them find information, make informed decisions, support those decisions and tell families and services what they want.
- A local study should be carried out with older people and organisations supporting visitation programmes, to ascertain the levels and causes of and solutions to loneliness, isolation and lack of social contact in Galway City.
- The HSE should review their home help service and evaluate its effectiveness and the level of customer satisfaction.

### **Recommendation 4: Representation**

- All service providers should meet annually to exchange information on activities and issues, and to seek joint projects for collaboration.
- Galway City Partnership, in conjunction with community and voluntary groups, should build capacity, train in policy making, and lobby communities of older people around the city before the local council elections in 2009, with the specific aim of achieving sheltered housing schemes in Galway City.
- A local action plan should be developed by older people's service providers and communities, to help address some of the issues raised in this report.

# Introduction

This study was undertaken to determine the needs of older people in Galway City. It is concerned with people over 55, but more data on people over 65 was available to the researchers. An advisory group comprised representatives from Galway City Partnership, Age Action West, the HSE Health Promotion Unit, Contact Galway and the Active Retirement Association. This group met on three occasions, to design the timetable of activities, to provide feedback and critical comments on the draft report, and to review the content of the final report.

## **Research objectives**

This study is concerned with establishing a community profile of the needs of older people in Galway City, with a particular emphasis on those experiencing disadvantage. The principle objectives of the study are to establish:

- The demographic profile of older people in Galway City.
- A typology of existing services available to older people in Galway City.
- The needs of older people, particularly those who are experiencing marginalisation, poverty and social exclusion.
- How and where older people are accessing the existing services.
- The gaps in support and services to older people.

The overall objective of this research is to signpost the potential levers for change and the development of future services and supports for older people in Galway City. Finally the research aims to provide recommendations to help future policy making at local and national levels. It is hoped that this will enable the development of targeted initiatives by relevant stakeholders aimed at addressing the issues raised in this report.

## **Methodology**

The research process combined both primary and secondary techniques. This report is based on a series of interviews, consultation forums, a questionnaire survey, observations and documentary analyses.

## **Research design**

Steering group members were consulted on the development of the interviews, focus groups and questionnaires, to assess their suitability for research.

## **Secondary data gathering**

Much of the secondary data gathering involved collating existing demographic information. Data in the following section was sourced from GAMMA, provided to the researchers by Galway City Partnership and from the Central Statistics Office Small Area Population Statistics (SAPS). In addition, submissions were invited from groups supporting or representing older people. Four submissions in total were received, from Sonas, Care & Repair, the Irish Wheelchair Association, and the Gay and Lesbian Equality Network.

## **Primary data gathering**

The primary aim of the consultation phase of the study was to elicit views and perceptions of older people from the key actors involved, namely the statutory and voluntary and community sectors. This phase was designed to provide space for discursive comment on the needs of older people and the existing support and services available. It sought to establish a profile of the needs of older people and the services available, to identify the gaps in services, and to establish how and where older people are accessing services.

## **Consultation with service providers**

In consultation with the steering group, the researchers compiled a list of 70 statutory and community and voluntary sector organisations in Galway City. A representative from each of these organisations was contacted and asked to participate in a semi-structured interview. In total, 43 local service providers participated in the interview process.

## **Consultation forums**

Five semi-structured guided consultation forums with older people were facilitated between May and June. These included one organised by Contact Galway (30 participants), one organised by Respond! Housing Association (15 participants), one organised by Knocknacarra Day Centre (24 participants) and two with members of the Traveller Community (20 participants).

Analysis of qualitative data from the consultation forums and from service providers provides the basis for developing an insight into the needs of older people, and for identifying recommendations for future development of services and supports in the city.

## **Structure of the report**

Following this introduction, which provides background information on the study, the report is divided into five main sections:

**Section 1** briefly describes the context within which the research takes place, and outlines some of the policy documents that have emerged in recent years.

**Section 2** provides a demographic profile of older people in Galway City.

**Section 3** provides a typology of existing services and supports available to older people in Galway City, and examines how and where they are accessing them.

**Section 4** outlines the needs of older people and the gaps in services and supports.

**Section 5** makes a series of recommendations addressing the unmet needs of older people and the organisations supporting them.

## Section 1: Overview

This section provides an overview of some recent documents concerning older people in Ireland. This overview is necessarily selective and is not intended to be comprehensive, but to summarise pertinent documents which relate specifically to the ‘older voices’ that emerged from this study. An increasing number of reports have been produced in recent years in Ireland, aimed at influencing the planning and development of social inclusion strategies and services for older people. In the following section, three such documents are outlined:

### 1.1 A Social Portrait of Older People in Ireland<sup>1</sup>

*A Social Portrait of Older People in Ireland* is a significant report whose aim was to provide information on older people in Ireland. It was expected to assist in promoting a more co-ordinated and integrated approach to meeting older people’s needs. The report points to the fact that older people’s average incomes “*are a good deal lower than the working age population or the population as a whole*”. The report refers to the 2000 Living in Ireland Survey, which shows the dependence of pensioners on social welfare income, which constitutes 60% of their income, while “*Occupational pensions make up only one fifth of their total income while investment income and earnings constitute 9% and 13% respectively*”.

The report also indicates that only a small number of older people, “*almost 7%, are at work*” and the majority are men. The rate of consistent poverty among older people is lower than that among people of working age. The report outlines the reasons for this, as older people:

- “*experience lower housing costs;*
- *benefit from the value of non cash benefits;*
- *are more likely to be able to draw on accumulated resources; and*
- *are particularly likely to enjoy support from family members.*”

However, the report states that in relation to the risk-of-poverty indicator,<sup>2</sup> “*the position looks somewhat different for older people than under the consistent poverty measure*”. More than one quarter of those aged 65 and over fell below the ‘at risk of poverty’ threshold; “*this is about one and a half the rate for the total population and the working age population*”. In addition, ‘at risk of poverty’ rates among older women (28%) are marginally higher than

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<sup>1</sup> Fahey *et al.* (2007) Economic and Social Research Institute, Office Social Inclusion. Dublin: Government Publications.

<sup>2</sup> A person is said to be at risk of poverty when their household receives less than the 60% median income.

among men (26%). Older people are also less likely than those of working age to report experiencing economic pressures; for instance, stress in relation to debt or arrears are much less common in the older age group. However, there is very little difference between older people and the working age population in terms of economic vulnerability.

Household type is also referred to in the report: according to the EU-SILC 2004,<sup>3</sup> “*almost 96% of older people are found in three forms of household. About 12% are living in a household of at least three adults (without children), 36% in single households and 47% in a household with two adults only.*” In relation to access to services such as housing, health, social contact, information and communication technologies, the reports outlines that “*most older people in Ireland own their own house and very few have an outstanding mortgage*”. Therefore it appears that older people have low incomes but high housing wealth. The report also indicates that only a small minority of older people (1 in 10) live in rented accommodation and that most of these are in local authority rented housing, with only 2–3% renting in the private sector.

In relation to use of health services, the report states that older people had a higher number of free GP visits and that twice as many older people spent at least one night in hospital compared to those of working age (2004 figures). Interestingly the reports states that 35% of older people have private health insurance, despite the fact that since 2001 everyone over 70 is eligible for a medical card.

In relation to social contact, the report’s authors point out that “social isolation is a particular risk to older people”. There is limited data on this subject and the authors had to return to a Living in Ireland Survey from 1997, which reported that “*two thirds of older people talk to the neighbours most days, with most of the rest doing so once or twice a week*”. Interestingly the survey indicated that older people living alone had the same levels of contact with other people. But it also shows that older people were less likely than younger people to be members of sports or social clubs or organisations. Finally, the report points out that older people are among the groups that require help “*if they are to participate fully in the information society*”. Older people use computers far less than younger adults do. According to CSO figures in 2005, only 14% of people aged 65 to 74 have used a computer and only 9% of the same age group have used the Internet.

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<sup>3</sup> EU Survey on Income and Living Conditions (EU-SILC)

## 1.2 HSE: 2006 Healthy Ageing conference report and action plan

Galway Healthy Cities Project<sup>4</sup> hosted a one-day conference in November 2006 to help develop an action plan for Healthy Ageing in Galway City. Participants identified issues affecting older people in the city, and an action plan was formulated to address these issues. The report is useful because it names issues pertinent to older people at a local level, and prioritises them for action. Ten priority issues were raised:

| <b>Priority:</b>                                         | <b>Proposed actions include:</b>                                                                                                                                                                                                                                                                                  |
|----------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Sheltered housing                                        | <ul style="list-style-type: none"> <li>○ Identifying a site</li> <li>○ Lobbying of politicians</li> <li>○ Media awareness of this need</li> </ul>                                                                                                                                                                 |
| Loneliness, isolation and accessing those living in fear | <ul style="list-style-type: none"> <li>○ Identifying older people living alone in the west side of the city</li> <li>○ Identifying organisations providing services to older people in the area</li> <li>○ Identifying organisations who visit them and communicating this information to older people</li> </ul> |
| Nursing homes and lack of stimulation                    | <ul style="list-style-type: none"> <li>○ Researching the level of activity taking place in nursing homes</li> </ul>                                                                                                                                                                                               |
| Integration of people with intellectual disabilities     | <ul style="list-style-type: none"> <li>○ Providing opportunities to take part in mainstream ageing groups and activities</li> <li>○ Ensuring that their voices are represented</li> </ul>                                                                                                                         |
| Using the expertise of older people                      | <ul style="list-style-type: none"> <li>○ Making contact with as many older people as possible</li> </ul>                                                                                                                                                                                                          |
| Inadequacy of support for carers                         | <ul style="list-style-type: none"> <li>○ Including carers in discharge planning for hospitals</li> <li>○ Helping people stay in their own homes longer, and enabling a good quality of life for patient and carer</li> <li>○ Day care services</li> </ul>                                                         |
| Service provision: osteoporosis                          | <ul style="list-style-type: none"> <li>○ Convening an osteoporosis awareness group</li> <li>○ Increasing awareness and communicating accurate information</li> <li>○ Promoting responsibility for prevention and management</li> </ul>                                                                            |
| Exploitation of older people                             | <ul style="list-style-type: none"> <li>○ Lobbying consumer authority</li> <li>○ Getting articles published in newspapers</li> <li>○ Lobbying politicians regarding planning of hotels</li> </ul>                                                                                                                  |
| Consumer panels                                          | <ul style="list-style-type: none"> <li>○ Having an older person on HSE consumer panels in the area</li> </ul>                                                                                                                                                                                                     |
| Active Retirement /                                      | <ul style="list-style-type: none"> <li>○ Reviewing and comparing leisure facilities in Galway</li> </ul>                                                                                                                                                                                                          |

<sup>4</sup> As part of the World Health Organisation's Healthy Cities Project

|                 |                                                                                                                                                                                         |
|-----------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Positive Ageing | <ul style="list-style-type: none"> <li>○ Physiotherapist to visit Active Retired Groups</li> <li>○ Investigating the possibility of using school facilities for older people</li> </ul> |
|-----------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

### 1.3 Attitudes to ageing and older people<sup>5</sup>

This report was commissioned by the Western Regional Council of Active Retirement Associations and was based on survey responses. It indicated that people are generally positive about old age and ageing. The study examined a range of policy documents and directives that focused on older people. It concluded that an “inherently ageist” approach assumed that older people “*are a separate ‘other’ and homogenous group*”. “*Many of the respondents in the survey agreed that older people prefer activities that include both younger and older people and that older people generally had the same interests as younger people, providing strong support for the idea that older people are not a ‘special’ group or a group apart*”.

The study also found that health policy is ageist in that it focuses on the biological ageing process and assumes that old age leads inevitably to “*infirmity and also dependency*”. There is an “*almost exclusive focus in health policy on illness, disability and service provision*”. The study states that that if policy directives for service provision were implemented, the “*basis of much service related policy has been to promote independent, dignified community living*”.

### 1.4 Summary

The documents outlined highlight the following:

- Older people are more at risk of poverty than the working population.
- Social contact among older people appears to be satisfactory (though data on this issue is dated).
- Older people usually own their homes and are mortgage free.
- A small percentage of older people live in private rented accommodation.
- The need for sheltered housing, day care centres and representation were among the issues in 2006 for older people in Galway City.
- Older people do not wish to be seen as a separate group, focused on only in terms of the biological ageing process.

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<sup>5</sup> Hodgins (2004) *Attitudes to Ageing, and Older People*. Galway: Centre for Health Promotion Studies, NUI, Galway.

## Section 2: Demographic profile

### 2.1 Introduction

This chapter comprises a demographic profile of older people in Galway City. The profile aims to provide a context for the empirical research to be undertaken and to inform the development of the research instruments. Analysis of the demographics aims to provide a better understanding of the characteristics and patterns that may affect the delivery of services and supports in the city. The chapter is divided into four principal sections. First, basic national demographic characteristics are outlined. Then the local demographic composition is provided. Subsequently we outline the demographic profile of older people in the twenty-two electoral districts (EDs) in Galway City in terms of gender, age and marital status. Finally we provide a brief analysis and summary of the data.

### 2.2 Basic national demographic profile and projections

Ireland has experienced population growth of 20.3% over the past fifteen years. The Census of Population 2006 indicated that the State's total population was 4,239,848, of whom 2,121,171 were male and 2,118,67 were female. Those aged between 65 and 75 years account for 6.2% of the population, while those aged 75 and over account for 4.8%. According to the Central Statistics Office (CSO) the *"number of persons aged 65 and over has increased at every census since 1961 from 315,000 in that year to 468,000 in 2006. This category now represents 11 per cent of the total population. The State's population has aged half a year since 2002 leading to an average age of 35.6 years in 2006 compared with 35.1 four years earlier"*.<sup>6</sup> Table 1 below indicates the number of men and women over the age of 65.

**Table 1: Age breakdown of older population by gender (2006)**

|                     | <b>Male</b> | <b>%</b> | <b>Female</b> | <b>%</b> |
|---------------------|-------------|----------|---------------|----------|
| Aged 65 to 74 years | 127,435     | 6.0%     | 135,113       | 6.4%     |
| Aged 75 plus        | 79,660      | 3.8%     | 125,718       | 5.9%     |

Source: GAMMA

As Table 1 indicates, there are more females over the age of 65; they outnumber males by 53,736. GAMMA statistics reveal that in 2006, the number of people living alone in the State who are 65 years and over was 121,157 or 8.2% of the population. The statistics further

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<sup>6</sup> Census 2006 – Principal Demographic Results.

reveal that in terms of economic status there are 206,529 males and 171,407 females who are retired.

With regard to life expectancy, the CSO's Regional Population Projection<sup>7</sup> (2005) indicated that Irish males had a life expectancy of 75.1 years in 2002, set to rise to 79.5 years by 2021; Irish females had a life expectancy of 80.3 years in 2002, set to rise to 84.1 years by 2021. Male life expectancy in Ireland ranks 13<sup>th</sup> highest of 30 European countries, while female life expectancy ranks 17<sup>th</sup>.<sup>8</sup> The CSO projects that the number of older people (65 years and over) will increase in every region and that the number of those over 80 will increase by two thirds by 2021.

### 2.3 Basic local demographic profile

The area of concern to this study is Galway City, which excludes County Galway. As stated previously, Ireland has experienced a population growth of 20.3% over the past fifteen years. The West Region has grown by 20.8%. Galway City's population, by contrast, has grown by 42.4% over the same period, the fourth largest growth overall and the fastest growth of any county outside the Greater Dublin Area. The population of Galway City increased from 65,832 in 2002 to 72,414 in 2006 – an increase of 10%.

The fastest growing electoral districts (ED) within Galway City were Barna (187.3%), Ballybane (133.4%), Ballybrit (125.5%), Eyre Square (111.2%) and Castlegar (107.8%), all of which have more than doubled their population. A number of areas registered a significant population decline, including Newcastle (-35.2%), Renmore (-27.5%), Mervue (-26.4%), Lough Atalia (-17.7%) and Nuns Island (-14.6%). Table 2 below indicates the number of people in Galway City classified by age groups.

**Table 2: Galway City: Age breakdown of total population (2006)**

| Population<br>0-14 | Population<br>15-24 | Population<br>25-44 | Population<br>45-64 | Population<br>65-74 | Population<br>75+ | Population<br>Total |
|--------------------|---------------------|---------------------|---------------------|---------------------|-------------------|---------------------|
| 11,150             | 17,025              | 25,430              | 12,669              | 3,531               | 2,069             | 72,414              |

Source: GAMMA

**Table 3** below indicates the number of people in Galway City classified by age groups over 55 years.

<sup>7</sup> Regional Population Projects 2006-2021. Dublin: Central Statistics Office.

<sup>8</sup> *Ibid.* p. 15.

**Table 3: Galway City: Age breakdown of population aged 55+ years (2006)**

| Population<br>55-59 | Population<br>60-64 | Population<br>65-69 | Population<br>70-74 | Population<br>75-79 | Population<br>80-84 | Population<br>85+ | Total<br>55-85+ |
|---------------------|---------------------|---------------------|---------------------|---------------------|---------------------|-------------------|-----------------|
| 2,999               | 2,461               | 1,961               | 1,570               | 1,189               | 793                 | 627               | 11,600          |

Source: CSO

There are 11,600 people aged over 55 in Galway City, which represents 16% of the population. There are 6,140 persons over the age of 65. Table 4 below outlines the population aged 55+ by gender.

**Table 4: Galway City: Age breakdown by gender of population aged 55+ years (2006)**

| Population<br>55-59 |      | Population<br>60-64 |      | Population<br>65-69 |      | Population<br>70-74 |     | Population<br>75-79 |     | Population<br>80-84 |     | Population<br>85+ |     | Total  |
|---------------------|------|---------------------|------|---------------------|------|---------------------|-----|---------------------|-----|---------------------|-----|-------------------|-----|--------|
| M                   | F    | M                   | F    | M                   | F    | M                   | F   | M                   | F   | M                   | F   | M                 | F   |        |
| 1425                | 1574 | 1167                | 1294 | 931                 | 1030 | 717                 | 853 | 489                 | 700 | 290                 | 503 | 195               | 432 | 11,600 |

Source: CSO

An analysis of the age profile by gender reveals that there are 6,386 females over the age of 55, compared to 5,214 males. A more dramatic difference in male/female population numbers is evident from 75 years onwards, with females outnumbering males by almost 60%. This is in line with the national picture that females are more likely to outlive their male counterparts.

In relation to marital status, the following three tables indicate the widowed population aged 55+ in Galway City (Table 5), the single population aged 55+ in Galway City (Table 6), and the married population aged 55+ in Galway City (Table 7).

**Table 5: Galway City: Widowed population aged 55+ (2006)**

| Population<br>55-59 |     | Population<br>60-64 |     | Population<br>65-69 |     | Population<br>70-74 |     | Population<br>75-79 |     | Population<br>80-84 |     | Population<br>85+ |     | Total |
|---------------------|-----|---------------------|-----|---------------------|-----|---------------------|-----|---------------------|-----|---------------------|-----|-------------------|-----|-------|
| M                   | F   | M                   | F   | M                   | F   | M                   | F   | M                   | F   | M                   | F   | M                 | F   |       |
| 38                  | 116 | 53                  | 166 | 60                  | 184 | 71                  | 270 | 58                  | 307 | 69                  | 279 | 66                | 310 | 2047  |

Source: CSO SAPS

**Table 6: Galway City: Single Population aged 55 years (2006)**

| Population 55- 59 |     | Population 60-64 |     | Population 65-69 |     | Population 70-74 |     | Population 75-79 |     | Population 80-84 |     | Population 85+ |    | Total |
|-------------------|-----|------------------|-----|------------------|-----|------------------|-----|------------------|-----|------------------|-----|----------------|----|-------|
| M                 | F   | M                | F   | M                | F   | M                | F   | M                | F   | M                | F   | M              | F  |       |
| 230               | 264 | 177              | 178 | 149              | 153 | 113              | 155 | 92               | 134 | 55               | 119 | 38             | 84 | 1941  |

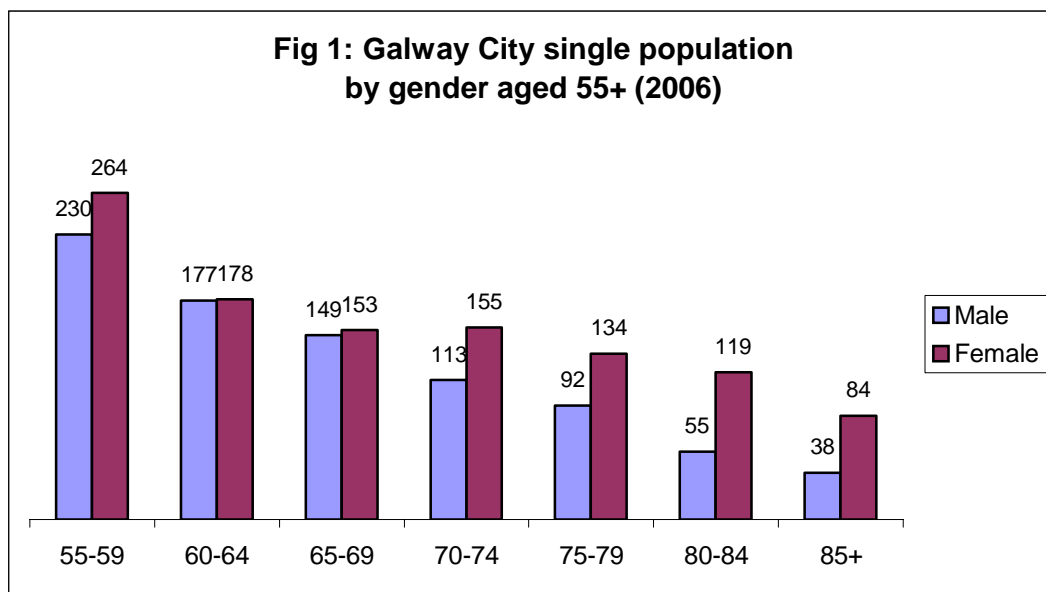
Source: CSO SAPS

**Table 7: Galway City: Married Population aged 55 years (2006)**

| Population 55- 59 |      | Population 60-64 |     | Population 65-69 |     | Population 70-74 |     | Population 75-79 |     | Population 80-84 |     | Population 85+ |    | Total |
|-------------------|------|------------------|-----|------------------|-----|------------------|-----|------------------|-----|------------------|-----|----------------|----|-------|
| M                 | F    | M                | F   | M                | F   | M                | F   | M                | F   | M                | F   | M              | F  |       |
| 1134              | 1005 | 851              | 834 | 675              | 633 | 499              | 388 | 327              | 241 | 162              | 102 | 89             | 36 | 6876  |

Source: CSO SAPS

There are 6,876 married people over the age of 55 years. Males in Galway City are more likely to be married, whereas females are far more likely to be widowed. Of the 2,047 people widowed, approximately 80% are female whereas just 20% are male. In each age category (55 and over), females outnumber their male counterparts. This reflects the established likelihood of male partners/husbands dying before their female partner/wife because they have shorter life expectancies. A total of 1,939 older people in Galway City are single. Figure 1 below compares the figures by gender.



There are 854 single males and 1,087 single females aged 55 plus. The data further reveal that in all age categories, single females outnumber single males.

There are 464 separated people in Galway City, 197 male and 267 female (see Appendix 1). In addition there are 272 divorced people over 55 in Galway City, 161 female and 111 male. Most of these are under 74 – there are only 25 separated people aged 75 or over (5.3% of the total separated population), and 18 divorced persons aged 75 or over (just 6.6% of the overall divorced population of the city). These figures are not surprising, considering that the introduction of divorce legislation was just twelve years ago.

As people move through their old age they are increasingly likely to live alone, mainly because of bereavement but also because of separation or divorce. Table 8 below outlines the numbers living alone in Galway City.

**Table 8: Galway City: People living alone by age group (2006)**

| Total private households | Persons living alone 45+ | %     | Persons living alone 65+ | %    |
|--------------------------|--------------------------|-------|--------------------------|------|
| 25,353                   | 3,122                    | 12.3% | 1,357                    | 5.4% |

*Source: GAMMA*

The GAMMA figures reveal of the 25,353 private households in Galway City, 1,357 persons aged 65+ live alone (5.4%). This figure is lower than the national figure of 8.2%. The CSO indicates that there are 4,949 persons over the age of 65 living in private households, of whom 1,357 are living alone. Therefore 23.4% of those over 65 living in private households are living alone in Galway City.<sup>9</sup> The gender breakdown<sup>10</sup> indicated that 946 females and 411 males are living alone in Galway City.

There has been a continuous decline in the age dependency rate<sup>11</sup> throughout Ireland over the past 15 years. Table 9 below indicates a dependency rate (aged 65+) of 8.5%.

**Table 9: Galway City: Age dependency rate (2006)**

| Total Population | Dependent population aged 65+ | %    |
|------------------|-------------------------------|------|
| 72,414           | 6,140                         | 8.5% |

*Source: GAMMA*

Table 10 below indicates that there are 6,000 people in Galway City with a disability, of whom 29.2% are over the age of 65.

<sup>9</sup> Census 2006 CSO.

<sup>10</sup> *Ibid.*

<sup>11</sup> The proportion of the population under 15 years and over 64 years.

**Table 10: Galway City: People with disability by age group (2006)**

| Total people with a disability | People with a disability 45-64 | %     | People with a disability 65+ | %     |
|--------------------------------|--------------------------------|-------|------------------------------|-------|
| 6,000                          | 1,619                          | 27.0% | 1, 751                       | 29.2% |

*Source: GAMMA*

While it can be assumed that most of the 29.2% of people with a disability over the age of 65 have age-related disabilities such as impaired vision, hearing and mobility loss, osteoporosis, arthritis and rheumatism, not all disabilities will be age related.

In relation to economic status the total number of retired people living in Galway City is 5,349 (2,740 male and 2,609 female). The number of those over the age of 65 totals 5,140 and it can be assumed that the majority of those who are retired are over the age of 65.

In relation to ethnic minority groups there are 22,369 people from the Traveller community resident in the State, of whom 1,176 live in Galway City. Census 2006 figures indicate that just 6.2% of Travellers (1,391 persons) are aged over 55 years.

Other ethnic minority groups' figures at a local level are difficult to access. But according to Census 2006 the national figure indicates that of the 40,525 of those categorised as African, just 0.7% (304) are over the age of 55 years. A similar picture appears for those categorised as 'other black background', with just 2.5% of 3,793 people aged over 55. Just 2.5% (420) of the 16,533 Chinese are over 55. Of those categorised as 'any other Asian background' only 2.5% (912) of 35,812 are over 55. Finally those from 'other including mixed backgrounds' account for 46,438, of whom 6.9% (3,207) are over 55.

## **2.4 Demographic profile of Galway City electoral divisions**

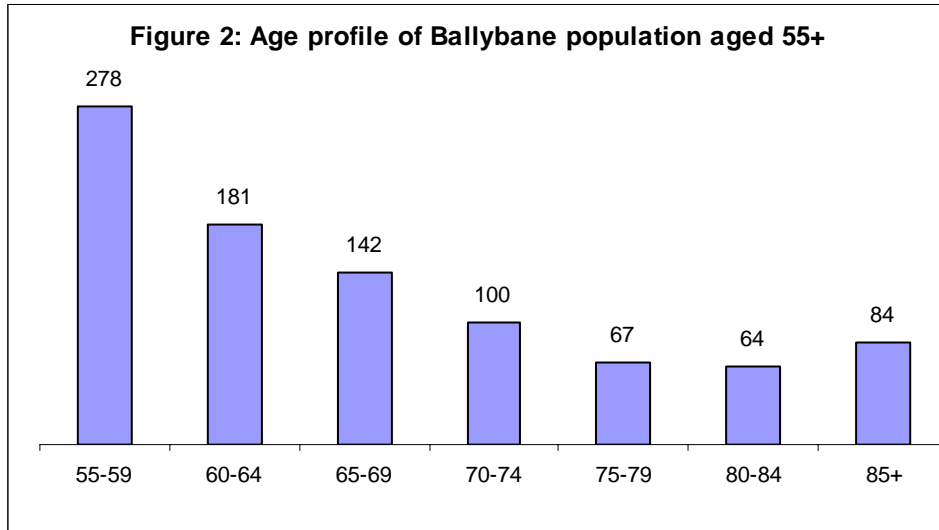
This section of the report profiles each of the twenty-two electoral divisions (EDs) in Galway City in relation to the 55+ population.

### **Ballybane (Ballybaan)**

According to the Census of Population 2006, Ballybane has seen a rapid 78.9% increase in population from 5,522 in 2002 to 9,878 in 2006. *"The main location of this expansion is in*

*the Doughiska region to the east of Ballybane. No housing estate existed in the Doughiska area prior to 2000.*"<sup>12</sup> The area represents 13.8% of Galway City's population.

The age profile of the population of the Ballybane area is young adult and child, with approximately 2,197 children (1122 male and 1,075 female) under the age of 15 years. In addition there are 6,758 people (3,302 males and 3,456 females) between the ages of 15 and 54 years. Figure 2 below indicates the age profile of people over the age of 55.

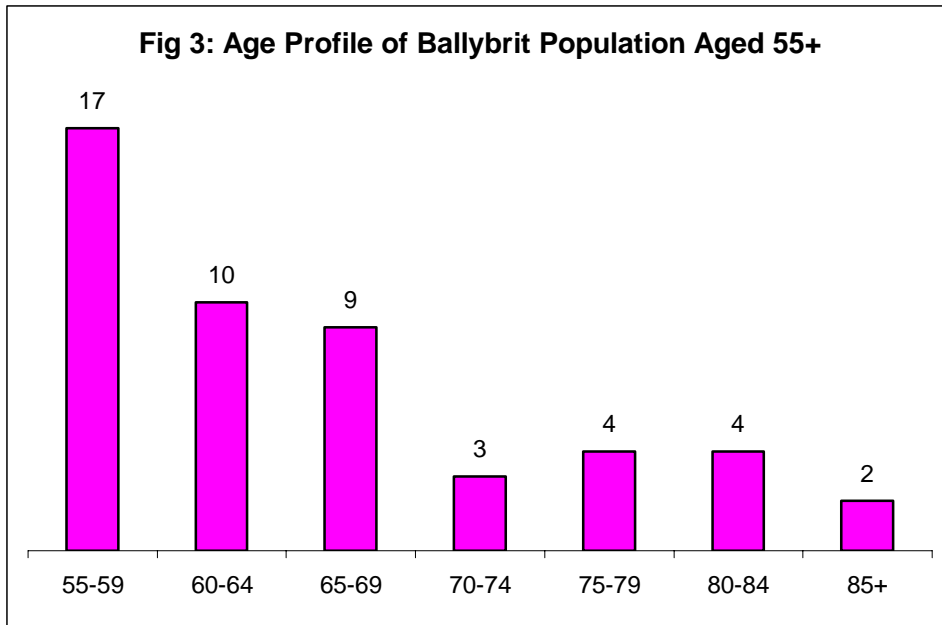


A total of 916 people over 55 years of age reside in the Ballybane area, of whom 443 are male and 473 are female. There are 457 people over the age of 65. Therefore, **those over the age of 55 represent approximately 10.7% of the Ballybane population.** Of the population over the age of 55 years, 173 people are single (100 male and 73 female), 475 are married (257 male and 218 female), 52 are separated (21 male and 31 female) 23 are divorced (14 male and 9 female) and 193 are widowed (51 male and 142 female).

### **Ballybrit (Baile an Bhriotaih)**

This area represents 0.9% (724) of Galway City's population. The age profile of the Ballybrit population is young adult and child, with approximately 136 (73 male and 63 female) children under 15. In addition there are 539 people (282 males and 257 females) between the ages of 15 and 54 years in the area. Figure 3 below indicates the age profile of people in Ballybrit over 55.

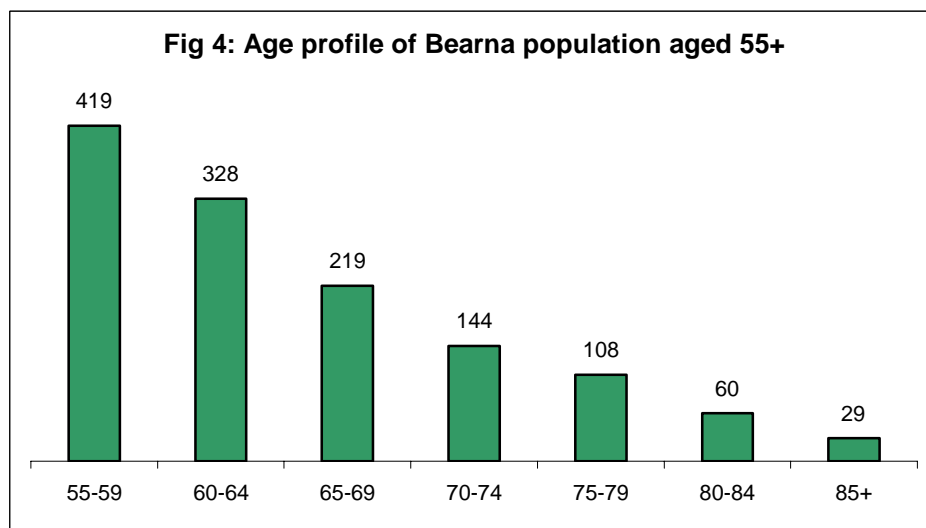
<sup>12</sup> Lally, J. & Mortimer, H. (2006) *Doughiska: A Community Profile and Needs Analysis*. Ballybane Mervue Community Development Project 2006.



A total of 49 people over 55 years of age reside in the Ballybrit area, of whom 22 are male and 27 are female. There are 22 people over 65. Therefore, **those over the age of 55 represent approximately 6.7% of the Ballybrit population.** Of the population over 55, 3 are single (2 male and 1 female), 30 are married (15 male and 15 female), 1 is separated (male), 2 are divorced (1 male and 1 female) and 11 are widowed (1 male and 10 female).

### **Barna (Bearna)**

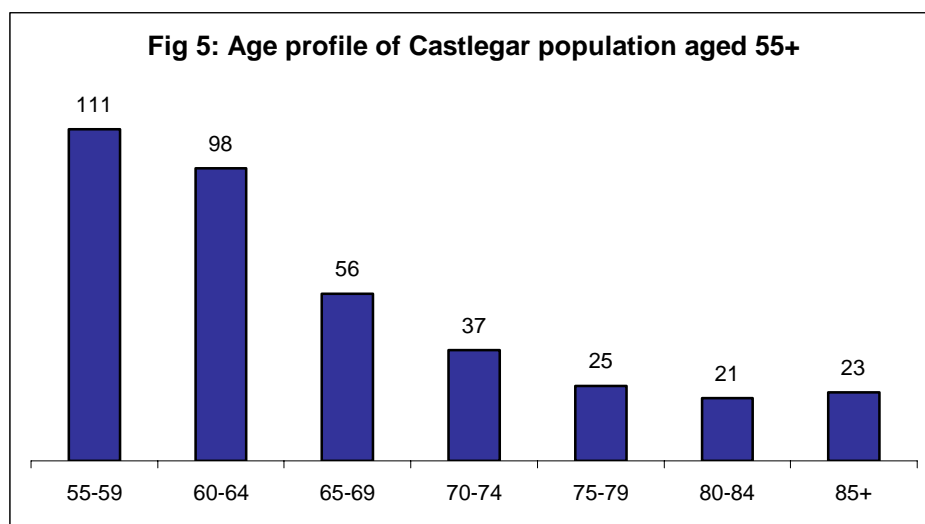
This area represents 17.6% (12,792) of Galway City's population. The Barna population increased by 18.2% between 2002 and 2006. The age profile of the population of the area is young adult and child, with approximately 573 children (300 male and 273 female) under 15. In addition there are 8,407 people (3,833 males and 4,574 females) between the ages of 15 and 54 years. Figure 4 below indicates the age profile of people over the age of 55.



A total of 1,307 people over 55 years of age reside in the Barna area, of whom 585 are male and 722 are female. There are 560 people over the age of 65 years. Therefore, **those over the age of 55 represent approximately 10.2% of the Barna population.** Of the population over 55, 159 are single (58 male and 101 female), 847 are married (457 male and 390 female), 79 are separated (31 male and 48 female), 44 are divorced (11 male and 33 female) and 178 are widowed (28 male and 150 female).

### Castlegar (An Caislean Gearr)

This area represents 4.8% (3,537) of Galway City's population. The Castlegar population increased by approximately 52% between 2002 and 2006. The age profile is young adult and child, with approximately 573 children (300 male and 273 female) under 15. In addition there are 3,537 people (1,830 males and 1,707 females) between the ages of 15 and 54 years. Figure 4 below indicates the age profile of people over the age of 55.

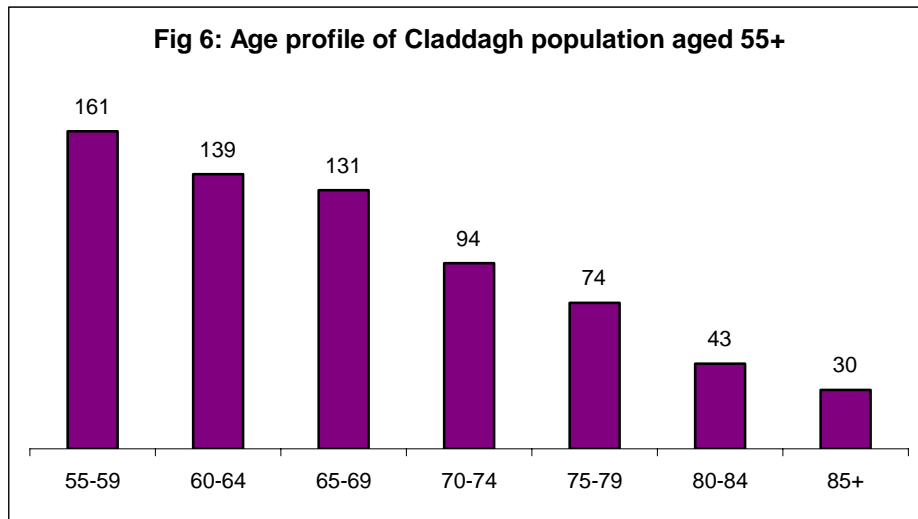


A total of 371 people over 55 years of age reside in the Castlegar area, of whom 183 are male and 188 are female. There are 69 people over the age of 65 years. Therefore, **those over the age of 55 represent approximately 10.4% of the Castlegar population.** Of the population over the age of 55 years, 73 people are single (40 male and 33 female), 216 are married (116 male and 100 female), 21 are separated (9 male and 12 female), 8 are divorced (6 male and 23 female) and 53 are widowed (12 male and 41 female).

### Claddagh

This area represents 3.6% (2,614) of Galway City's population. The population decreased by approximately 8.4% between 2002 (2,856) and 2006. There are 1,739 people (829 males and 910 females) between the ages of 15 and 54 years in the Claddagh area, with the majority

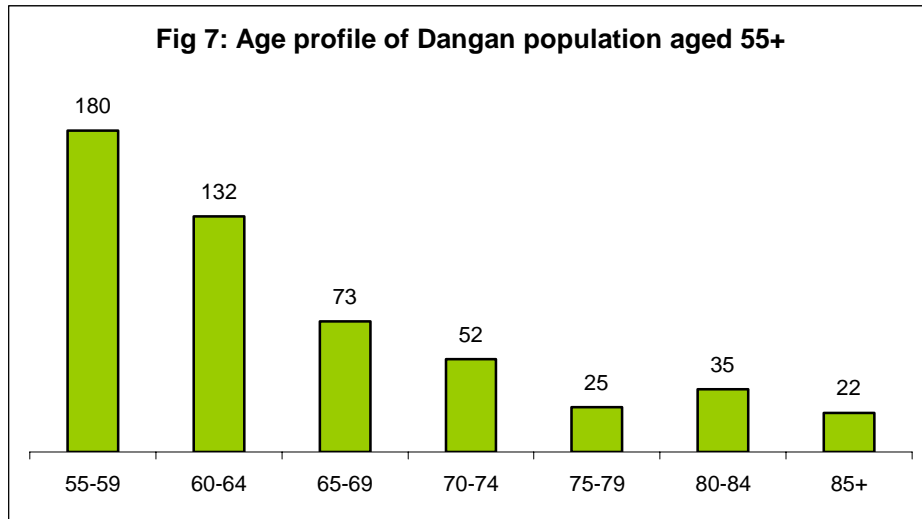
(1,040) aged 20–34. Just 203 children (108 male and 95 female) live in the area. Figure 6 below indicates the age profile of people over the age of 55.



A total of 672 people over 55 years of age reside in the Claddagh area, of whom 292 are male and 380 are female. There are 375 people over the age of 65. Therefore, **those over the age of 55 represent approximately 25.7% of the Claddagh population.** Of the population over the age of 55 years, 125 people are single (56 male and 69 female), 382 are married (199 male and 183 female), 21 are separated (7 male and 14 female), 12 are divorced (3 male and 9 female) and 117 are widowed (27 male and 90 female).

### **Dangan**

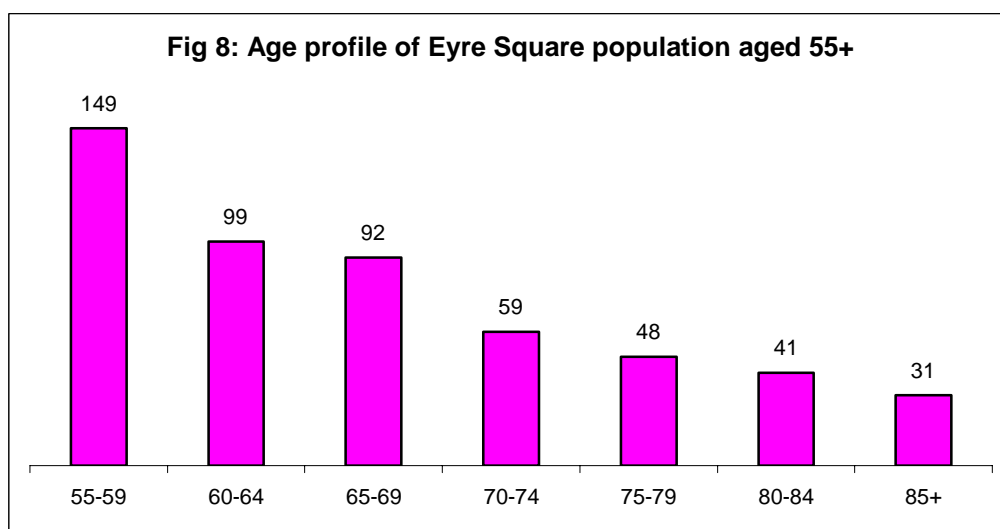
This area represents 5.8% (4,206) of Galway City’s population. The population decreased by approximately 14.7% between 2002 (4,923) and 2006. There are 2,752 people (1,089 males and 1,663 females) between the ages of 15 and 54 years in the Dangan area, and 598 children (304 male and 294 female) between the ages of 0 and 14 years. Figure 7 below indicates the age profile of people over the age of 55.



A total of 519 people over 55 years of age reside in the Dangan area, of whom 221 are male and 298 are female. There are 207 people over the age of 60). Therefore, **those over the age of 55 represent approximately 12.3% of the Dangan population.** Of the population over the age of 55 years, 100 people are single (21 male and 79 female), 298 are married (162 male and 136 female), 22 are separated (10 male and 12 female), 19 are divorced (6 male and 13 female) and 80 are widowed (22 male and 58 female).

### Eyre Square

This area has a population of 4,105, of whom 2,075 are male and 2,030 are female, representing 5.6% of the city's population. There are 121 children between 0 and 14 years of age (67 male and 54 female), and 3,586 people between the ages of 15 and 54 (1,829 male and 1757 female). Figure 8 below indicates the age profile of people over the age of 55.

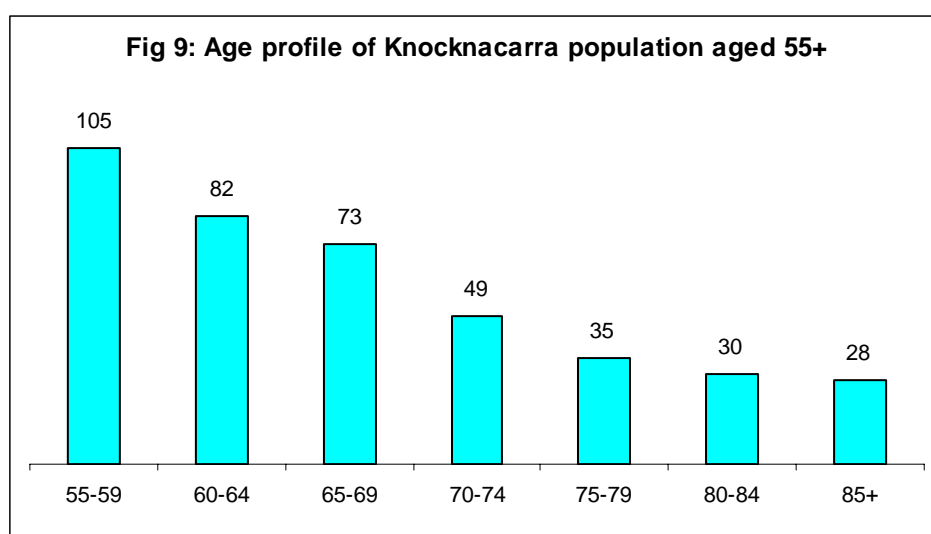


A total of 519 people over 55 years of age reside in the Eyre Square area, of whom 246 are male and 273 are female. There are 271 people over the age of 65 years. Therefore, **those**

**over the age of 55 represent approximately 12.6% of the Eyre Square population.** Of the population over the age of 55 years, 148 people are single (78 male and 70 female), 268 are married (138 male and 130 female), 14 are separated (10 male and 4 female), 12 are divorced (6 male and 6 female) and 77 are widowed (14 male and 63 female).

### **Knocknacarra (An Cnocan Carrach)**

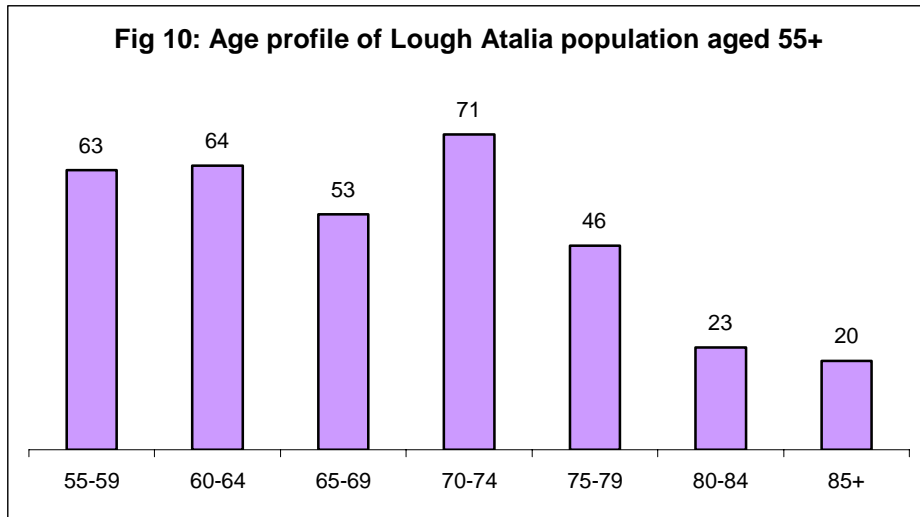
This area has a population of 1,428, of whom 660 are male and 768 are female, representing 1.9% of the city’s population. There are 192 children between 0 and 14 years of age (91 male and 101 female), and 834 people between the ages of 15 and 54 (391 male and 443 female). Figure 9 below indicates the age profile of people over the age of 55.



A total of 402 people over 55 years of age reside in the Knocknacarra area, of whom 178 are male and 224 are female. There are 245 people over the age of 65. Therefore, **those over the age of 55 represent approximately 28.1% of the Knocknacarra population.** Of the population over the age of 55 years, 39 people are single (13 male and 26 female), 274 are married (141 male and 133 female), 12 are separated (5 male and 7 female), 6 are divorced (3 male and 3 female) and 71 are widowed (16 male and 55 female).

### **Lough Atalia**

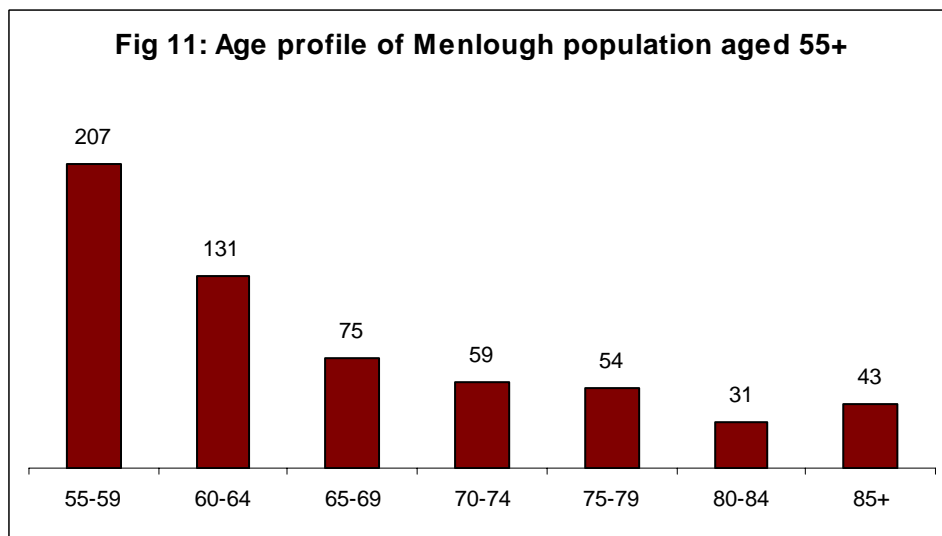
Lough Atalia has a population of 1,103, of whom 571 are male and 532 are female. The area represents 1.5% of the city’s population. There are 115 children between 0 and 14 years of age (45 male and 70 female), and 652 people between the ages of 15 and 54 (383 male and 269 female). Figure 10 below indicates the age profile of people over the age of 55.



A total of 340 people over 55 years of age reside in the Lough Atalia area, of whom 143 are male and 193 are female. There are 213 people over the age of 65 years. Therefore, **those over the age of 55 represent approximately 30.4% of the Lough Atalia population.** Of the population over the age of 55 years, 41 people are single (18 male and 23 female), 234 are married (120 male and 114 female), 9 are separated (3 male and 6 female), 5 are divorced (2 male and 3 female) and 57 are widowed (10 male and 47 female).

### Menlough (Mionladh)

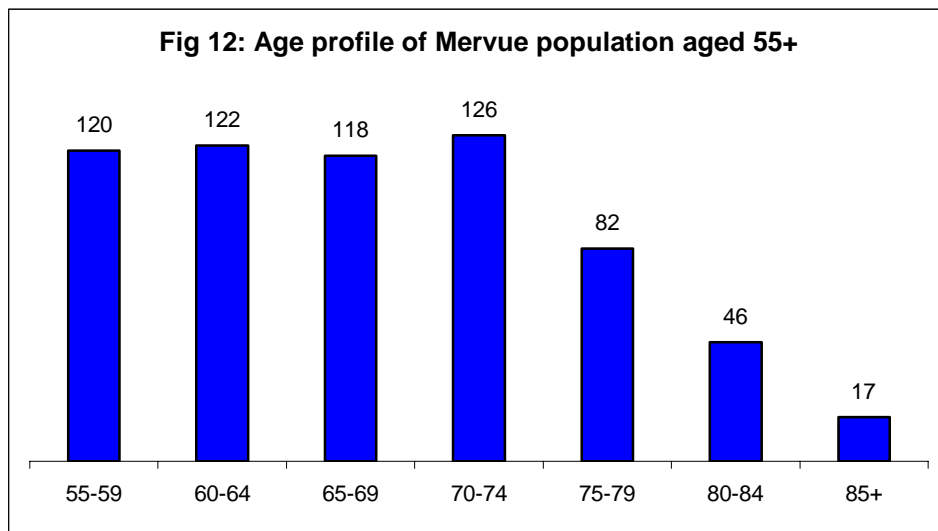
Menlough has seen an approximate 18.2% increase in population between 2002 and 2006. This area has a population of 5,752, of whom 2,811 are male and 2,941 are female, representing 7.9% of the city's population. There are 734 children between 0 and 14 years of age (397 male and 337 female), and 4,418 persons between the ages of 15 and 54 (2,153 male and 2,265 female). Figure 11 below indicates the age profile of people over the age of 55.



A total of 600 people over 55 years of age reside in the Menlough area, of whom 261 are male and 339 are female. There are 265 people over the age of 65 years. Therefore, **those over the age of 55 represent approximately 10.4% of the Menlough population.** Of the population over the age of 55 years, 104 people are single (32 male and 72 female), 361 are married (196 male and 165 female), 23 are separated (10 male and 13 female), 10 are divorced (4 male and 6 female) and 102 are widowed (19 male and 83 female).

### Mervue

This area has a population of 2,130, of whom 1,065 are male and 1,065 are female, representing 2.9% of the city's population. There are 225 children between 0 and 14 years of age (121 male and 104 female), and 1,274 people between the ages of 15 and 54 (673 male and 601 female). Figure 12 below indicates the age profile of people over the age of 55.



A total of 631 people over 55 years of age reside in the Mervue area, of whom 271 are male and 360 are female. There are 389 people over the age of 65 years. Therefore, **those over the age of 55 represent approximately 29.6% of the Mervue population.** Of the population over the age of 55 years, 39 people are single (17 male and 22 female), 427 are married (219 male and 208 female), 21 are separated (7 male and 14 female), 11 are divorced (3 male and 8 female) and 133 are widowed (25 male and 108 female).

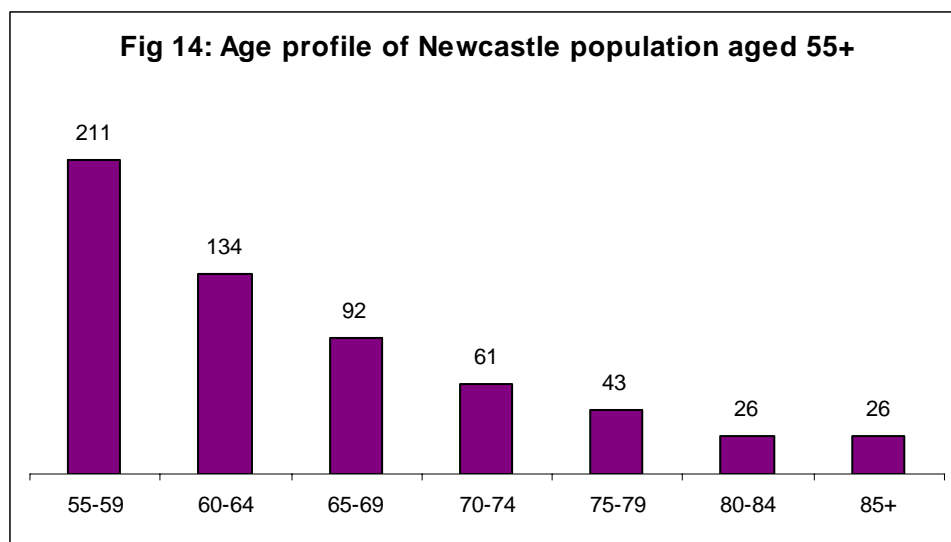
### Murrough

Murrough has seen an approximate 6.2% increase in population between 2002 and 2006. This area has a population of 2,382, of whom 1,179 are male and 1,203 are female representing 3.2% of the city's population. There are 315 children between 0 and 14 years of age (145 male and 170 female) and 1,787 people between the ages of 15 and 54 (886 male and 901 female). Figure 13 below indicates the age profile of people over the age of 55.

A total of 280 people over 55 years of age reside in the Murrough area, of whom 148 are male and 132 are female. There are 99 people over the age of 65 years. Therefore, **those over the age of 55 represent approximately 11.7% of the Murrough population.** Of the population over the age of 55 years, 54 people are single (29 male and 25 female), 183 are married (105 male and 78 female), 6 are separated (3 male and 3 female), 3 are divorced (3 female) and 32 are widowed (9 male and 23 female).

### Newcastle

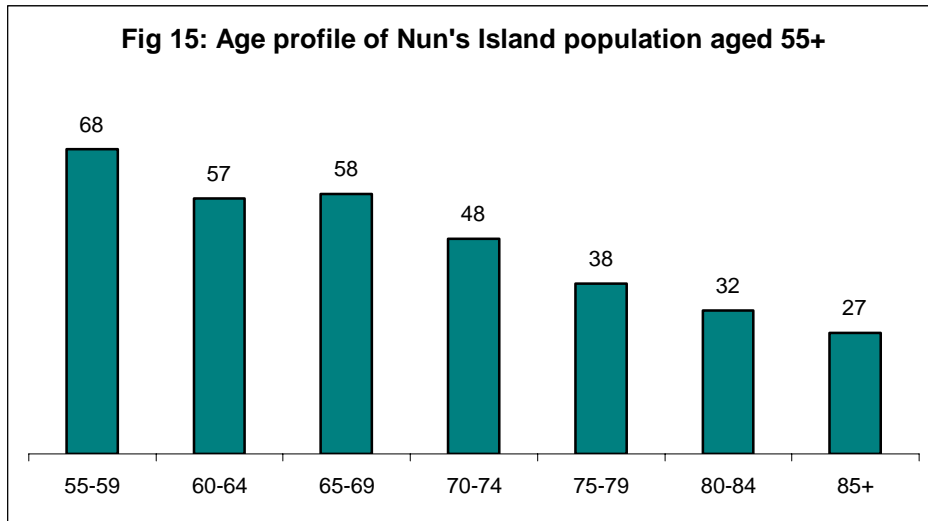
Newcastle has seen an approximate 18.3% decrease in population between 2002 and 2006. This area has a population of 1,999, of whom 934 are male and 1,065 are female, representing 2.7% of the city's population. There are 213 children between 0 and 14 years of age (113 male and 100 female), and 1,193 people between the ages of 15 and 54 (546 male and 647 female). Figure 14 below indicates the age profile of people over the age of 55.



A total of 593 people over 55 years of age reside in the Newcastle area, of whom 275 are male and 318 are female. There are 246 people over the age of 65 years. Therefore, **those over the age of 55 represent approximately 29.6% of the Newcastle population.** Of the population over the age of 55 years, 57 people are single (32 male and 25 female), 389 are married (206 male and 183 female), 25 are separated (2 male and 23 female), 18 are divorced (4 male and 14 female) and 103 are widowed (30 male and 73 female).

### Nuns Island

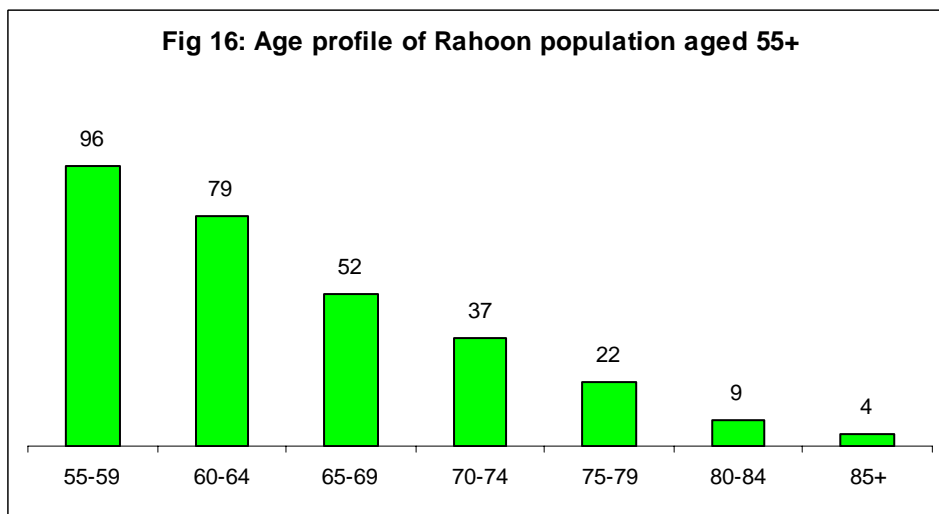
This area has a population of 1,336, of whom 598 are male and 738 are female, representing 1.8% of the city's population. There are 61 children between 0 and 14 years of age (34 male and 27 female), and 947 people between the ages of 15 and 54 (439 male and 508 female). Figure 15 below indicates the age profile of people over the age of 55.



A total of 328 people over 55 years of age reside in the Nun's Island area, of whom 125 are male and 203 are female. There are 203 people over the age of 65 years. Therefore, **those over the age of 55 represent approximately 24.5% of the Nun's Island population.** Of the population over the age of 55 years, 101 people are single (28 male and 73 female), 143 are married (74 male and 69 female), 8 are separated (5 male and 3 female), 12 are divorced (9 male and 3 female) and 64 are widowed (9 male and 55 female).

### Rahoon

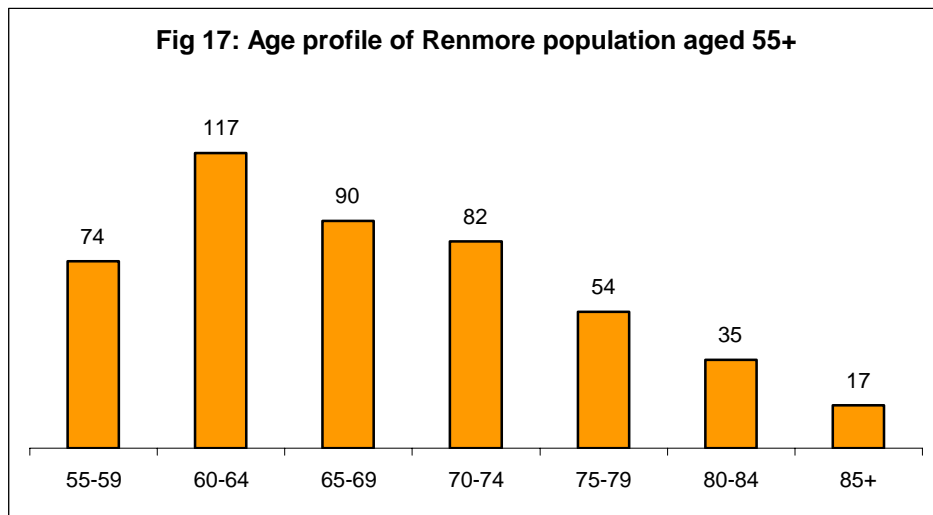
Rahoon has seen an approximate 25.3% increase in population between 2002 and 2006. This area has a population of 2,920, of whom 1,396 are male and 1,524 are female, representing 4% of the city's population. There are 645 children between 0 and 14 years of age (341 male and 304 female), and 1,976 people between the ages of 15 and 54 (906 male and 1,070 female). Figure 16 below indicates the age profile of people over the age of 55.



A total of 299 people over 55 years of age reside in the Rahoon area, of whom 149 are male and 150 are female. There are 124 people over the age of 65 years. Therefore, **those over the age of 55 represent approximately 15.1% of the Rahoon population.** Of the population over the age of 55 years, 37 people are single (18 male and 19 female), 194 are married (109 male and 85 female), 17 are separated (8 male and 9 female), 10 are divorced (3 male and 7 female) and 41 are widowed (11 male and 30 female).

### Renmore

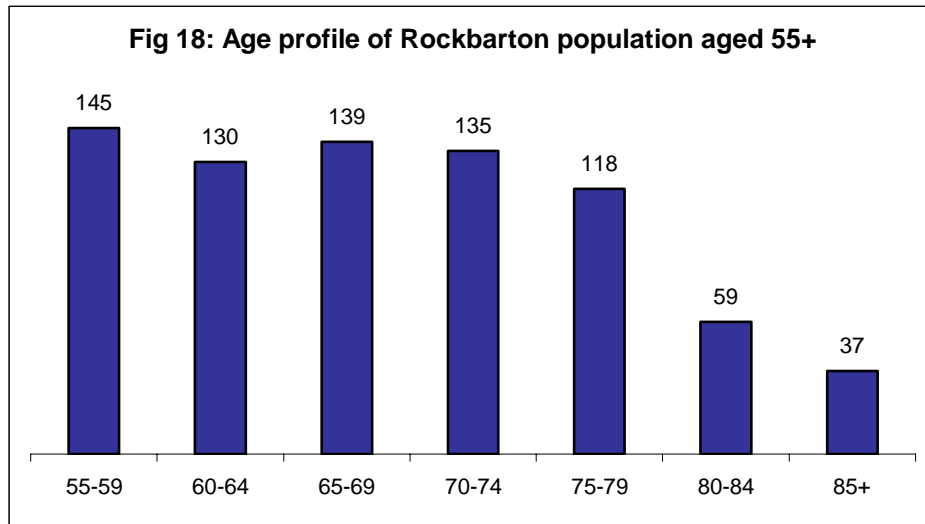
Renmore has seen an approximate 16.9% decrease in population between 2002 and 2006. This area has a population of 1,426, of whom 721 are male and 705 are female, representing 1.9% of the city's population. There are 176 children between 0 and 14 years of age (106 male and 70 female), and 781 people between the ages of 15 and 54 (405 male and 376 female). Figure 17 below indicates the age profile of people over the age of 55.



A total of 469 people over 55 years of age reside in the Renmore area, of whom 210 are male and 259 are female. There are 278 people over 65 years. Therefore, **those over the age of 55 represent approximately 38.8% of the Renmore population.** Of the population over the age of 55 years, 69 people are single (26 male and 43 female), 323 are married (168 male and 155 female), 12 are separated (6 male and 6 female), 6 are divorced (1 male and 5 female) and 59 are widowed (9 male and 50 female).

### Rockbarton

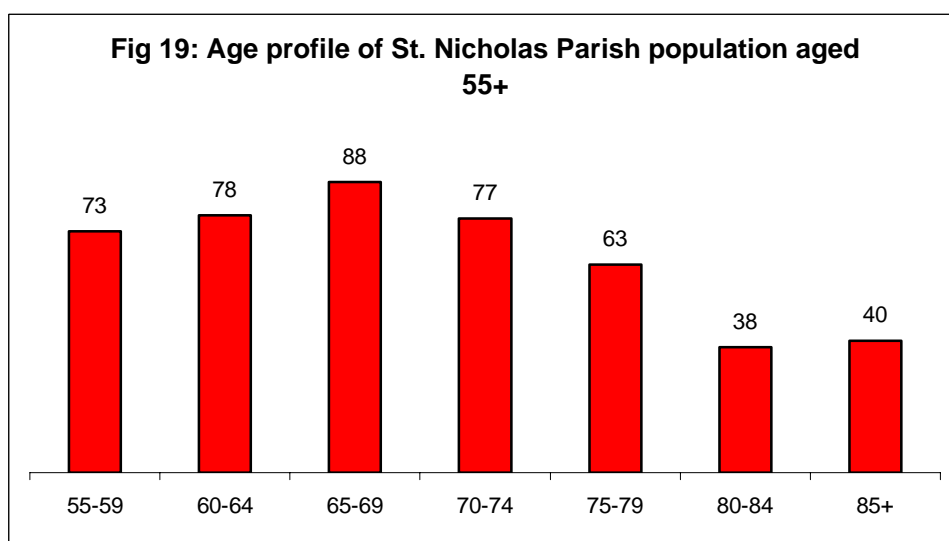
Rockbarton has a population of 1,813, of whom 808 are male and 1,005 are female, representing 2.5% of the city's population. There are 212 children between 0 and 14 years of age (101 male and 111 female), and 838 people between the ages of 15 and 54 (399 male and 439 female). Figure 18 below indicates the age profile of people over the age of 55.



A total of 763 people over 55 years of age reside in the Rockbarton area, of whom 308 are male and 455 are female. There are 488 people over the age of 65 years. Therefore, **those over the age of 55 represent approximately 42% of the Rockbarton population.** Of the population over the age of 55 years, 65 people are single (20 male and 45 female), 526 are married (260 male and 266 female), 18 are separated (8 male and 10 female), 11 are divorced (4 male and 7 female) and 143 are widowed (16 male and 127 female).

### St. Nicholas Parish

The St. Nicholas Parish area has a population of 2,677, of whom 1,281 are male and 1,396 are female, representing 3.6% of the city's population. There are 122 children between 0 and 14 years of age (58 male and 64 female), and 2,098 people between the ages of 15 and 54 (1,016 male and 1,082 female). Figure 19 below indicates the age profile of people over 55.



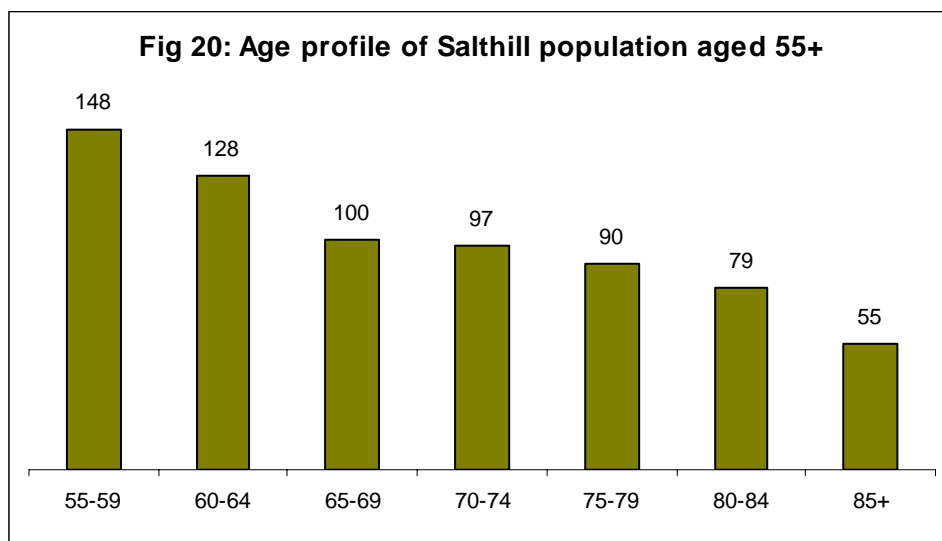
A total of 457 people over 55 years of age reside in the St. Nicholas Parish area, of whom 207 are male and 250 are female. There are 306 people over the age of 65 years. Therefore, **those**

**over the age of 55 represent approximately 17% of the St. Nicholas Parish population.**

Of the population over the age of 55 years, 150 people are single (80 male and 70 female), 176 are married (89 male and 87 female), 20 are separated (10 male and 10 female), 16 are divorced (9 male and 7 female) and 95 are widowed (19 male and 76 female).

### **Salthill**

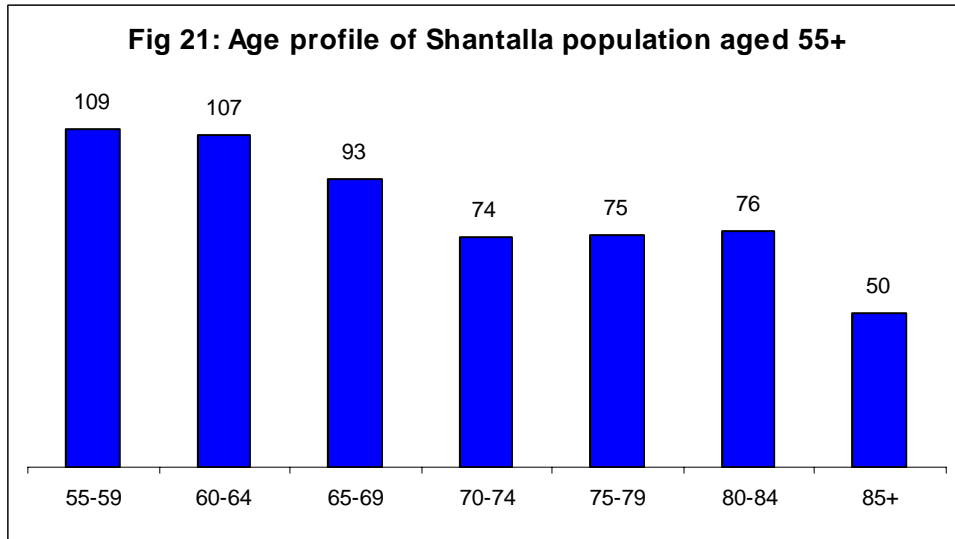
The Salthill area has a population of 3,376, of whom 1,555 are male and 1,821 are female, representing 4.4% of the city's population. There are 468 children between 0 and 14 years of age (253 male and 215 female), and 2,241 people between the ages of 15 and 54 (1,044 male and 1,197 female). Figure 20 below indicates the age profile of people over the age of 55.



A total of 697 people over 55 years of age reside in the Salthill area, of whom 288 are male and 409 are female. There are 421 people over the age of 65 years. Therefore, **those over the age of 55 represent approximately 21.2% of the Salthill population.** Of the population over the age of 55 years, 148 people are single (50 male and 98 female), 358 are married (192 male and 166 female), 25 are separated (12 male and 13 female), 18 are divorced (10 male and 8 female) and 148 are widowed (23 male and 125 female).

### **Shantalla**

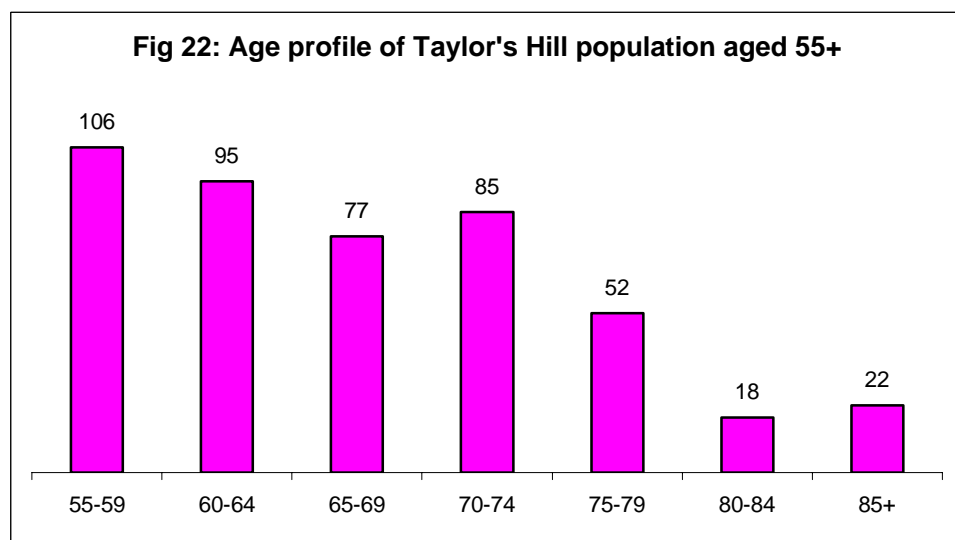
The Shantalla area has a population of 1,874, of whom 918 are male and 956 are female, representing 2.5% of the city's population. There are 187 children between 0 and 14 years of age (96 male and 91 female), and 1,103 people between the ages of 15 and 54 (524 male and 579 female). Figure 21 below indicates the age profile of people over the age of 55.



A total of 584 people over 55 years of age reside in the Shantalla area, of whom 298 are male and 286 are female. There are 368 people over the age of 65 years. Therefore, **those over the age of 55 represent approximately 31.1% of the Shantalla population.** Of the population over the age of 55 years, 139 people are single (90 male and 49 female), 267 are married (156 male and 111 female), 19 are separated (12 male and 7 female), 9 are divorced (5 male and 4 female) and 150 are widowed (35 male and 115 female).

### Taylor's Hill

The Taylor's Hill area has a population of 2,763, of whom 1,393 are male and 1,370 are female, representing 3.8% of the city's population. There are 531 children between 0 and 14 years of age (298 male and 233 female), and 1,777 people between the ages of 15 and 54 (890 male and 887 female). Figure 22 below indicates the age profile of people over the age of 55.

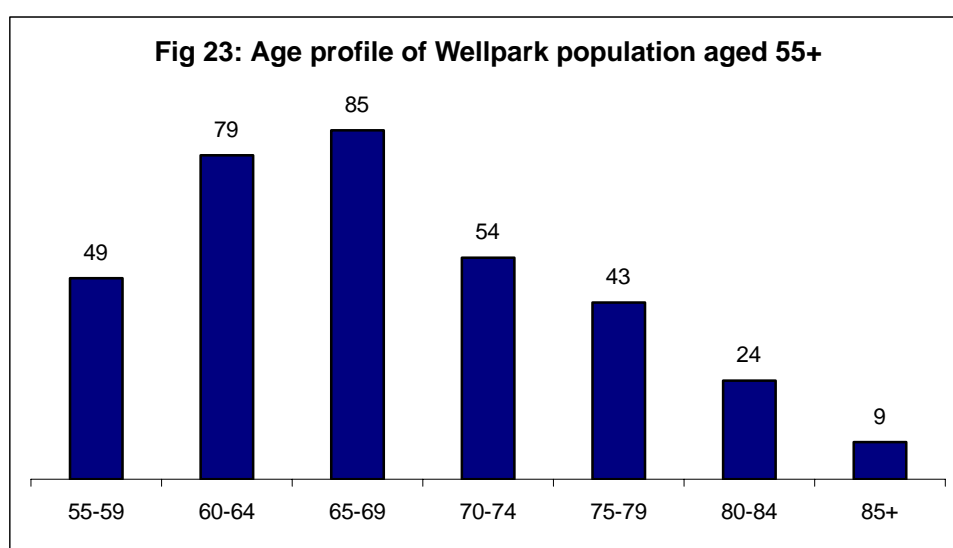


A total of 455 people over 55 years of age reside in the Taylor's Hill area, of whom 205 are male and 250 are female. There are 254 people over the age of 65 years. Therefore, **those**

**over the age of 55 represent approximately 16.4% of the Taylor’s Hill population.** Of the population over the age of 55 years, 60 people are single (24 male and 36 female), 307 are married (160 male and 147 female), 16 are separated (6 male and 10 female), 10 are divorced (3 male and 7 female) and 62 are widowed (12 male and 50 female).

### Wellpark

The Wellpark area has a population of 1,561, of whom 785 are male and 776 are female, representing 2.1% of the city’s population. There are 123 children between 0 and 14 years of age (618 male and 62 female), and 1,095 people between the ages of 15 and 54 (578 male and 517 female). Figure 23 below indicates the age profile of people over the age of 55.



A total of 343 people over 55 years of age reside in the Wellpark area, of whom 146 are male and 197 are female. There are 215 people over the age of 65 years. Therefore, **those over the age of 55 represent approximately 21.9% of the Wellpark population.** Of the population over the age of 55 years, 55 people are single (20 male and 35 female), 198 are married (98 male and 100 female), 23 are separated (10 male and 13 female), 7 are divorced (4 male and 3 female) and 60 are widowed (14 male and 46 female).

### 2.5 Summary

In *A Social Portrait of Older People In Ireland*, Fahey *et al.*<sup>13</sup> observed that “One of the most remarkable features of the older population in Ireland is how small it is and how the number of older people as a share of the total population has almost remained unchanged at around 11%.” Fahey further identifies the reasons for the small older population:

<sup>13</sup> Fahey *et al.* (2007) *A Social Portrait of Older People in Ireland*. Government Publications, Dublin: Office of Social Inclusion.

*“including the rather high birth rate particularly in the 1980s. This has resulted in a significantly young population. Another reason is of course our high emigration in the 1950s, which meant that the numbers of people reaching 65 in the 1990s and the early part of this decade were smaller than they otherwise would have been. In addition our life expectancy has grown somewhat slower (especially men) than other countries. It is only since the second half of the 1990s that this saw an improvement.”*

The 2006 Census of population indicates that the proportion of older people (over 65) remains at around 11%. It appears that Ireland in international terms is unique in this respect. However, while the proportion of older people in the Irish population is one of the lowest in the European Union, it is set to change.

There are 11,600 people aged over 55 in Galway City, which represents 16% of the overall population. There are 6,140 persons over the age of 65 years. As was identified in the demographic report above, at a national level women are living longer than men and they make up the clear majority of older people. This trend is reflected in Galway City, where the age profile by gender reveals that there are 6,386 females over the age of 55, compared to 5,214 males. In addition, the proportion of women increases with age: from 75 years onwards, females in Galway City outnumber males by almost 60%. This is in line with the national picture that females are more likely to outlive their male counterparts.

Older people live in a variety of household types, including alone, as a couple, or with other people. There is a clear propensity for older people to live apart from their children or other relatives, as is demonstrated by the numbers living alone both nationwide and in Galway City. In relation to Galway City, 23.4% of those living in private households over the age of 65 years are living alone.<sup>14</sup> The gender breakdown<sup>15</sup> indicates that 946 females and 411 males live alone in Galway City.

There are 6,879 married people over the age of 55 years living in Galway City. Males are more likely to be married, whereas females are far more likely to be widowed (79.7% of the 2,047 people widowed). Females outnumber males in each older age category (55 and over). This reflects the established likelihood of male partners/husbands dying before their female partners/wives because they have shorter life expectancies. A total of 1,939 older people in Galway City are single. There are 854 single males and 1,087 single females aged 55+.

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<sup>14</sup> Census 2006 CSO

<sup>15</sup> *Ibid.*

Again, the data reveal that in all age categories, single females outnumber single males. There is a greater concentration of women either living alone, widowed or single in Galway City. Just 4% of those over 55 are separated, while just 2.3% are divorced. The majority of separated and divorced people are aged between 55 and 69 years. The relatively recent introduction of divorce legislation may have had an impact here, with older people – at least anecdotally – tending to stay in relationships for religious, legal and cultural reasons, even if those relationships have broken down.

Galway has consistently been the county with the lowest age dependency ratio: 38.1% in 1991 and 31.4% in 2006. An even greater decline applies to Galway City (32.5% to 23.9%). Within Galway City, there nevertheless exist some differences in the demographic profiles of specific areas, with age dependency rates being highest in Rockbarton, Renmore and Lough Atalia. In relation to economic status, the total number of retired people living in Galway City is 5,349 (2,740 male and 2,609 female), of whom the majority are over the age of 65. The remainder have retired 'early'. Due to the large number of retired people over the age of 65, it can also be assumed that they rely on state pensions, though occupational pensions contribute to some incomes. With regard to ethnic minority groups, it is clear from the national picture that both the Traveller community and other minority groups currently have a small older population. With regard to other minority groups, however, this will change quickly over the next ten years. A total of 17,412 people between the ages of 40 and 54 are from other ethnic minority groups. This has implications for services and supports, as the needs and experiences of this population may in many cases be different from those of the mainstream population.

Finally, while the demographic profile reflects the numbers and main trends for people in Galway City aged 55 and over, it is important to remember that they are not a single, homogenous group. They have significant differences in their needs and experiences, which are highlighted in Section Four.

## **2.6 In brief**

- Nationally, 11% of the population are over the age of 65.
- The older population of Galway City is 16% of the overall population.
- There are 11,600 people aged over 55 years in Galway City.
- There are 6,140 persons aged over 65 years in Galway City.
- There are 6,386 females over the age of 55 years, compared to 5,214 males.

- Twenty-three per cent of those living in private households over the age of 65 years are living alone.<sup>16</sup>
- The gender breakdown<sup>17</sup> indicates that 946 females and 411 males are living alone in Galway City.
- Males in Galway City are more likely to be married, whereas females are far more likely to be widowed.
- In Galway City 29.2% of those with a disability are over the age of 65.
- The older population among ethnic minority groups is small.
- The Rockbarton, Renmore and Lough Atalia communities have the highest percentage of older people.
- Here is a breakdown of the older population in each of the 20 EDs in Galway City:

| <b>Galway City (West)</b>                                                                                                                                                                                                                                                                                                                               | <b>Galway City (Centre)</b>                                                                                                                                                                                                                   | <b>Galway City (East)</b>                                                                                                                                                                                                                                                                                             |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <p>The older population of</p> <ul style="list-style-type: none"> <li>○ Dangan is 12.3%</li> <li>○ Barna is 10.2%</li> <li>○ Newcastle is 29.6%</li> <li>○ Knocknacarra is 26.1%</li> <li>○ <b>Rockbarton is 42%</b></li> <li>○ Ragoon is 15.1%</li> <li>○ Salthill is 21.2%</li> <li>○ Shantalla is 31.1%</li> <li>○ Taylor’s Hill is 14.4%</li> </ul> | <p>The older population of</p> <ul style="list-style-type: none"> <li>○ Claddagh is 25.7%</li> <li>○ Eyre Square is 12.6%</li> <li>○ <b>Lough Atalia is 30.4%</b></li> <li>○ Nuns Island is 24.5%</li> <li>○ St. Nicholas is 21.9%</li> </ul> | <p>The older population of</p> <ul style="list-style-type: none"> <li>○ Ballybane is 10.7%</li> <li>○ Ballybrit is 6.7%</li> <li>○ Castlegar is 10.4%</li> <li>○ <b>Renmore is 38.8%</b></li> <li>○ Menlough is 10.4%</li> <li>○ Mervue is 29.6%</li> <li>○ Murrough is 11.7%</li> <li>○ Wellpark is 21.9%</li> </ul> |

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<sup>16</sup> Census 2006 CSO

<sup>17</sup> *Ibid.*

## Section 3: Profile of existing services and supports

### 3.1 Introduction

This section of the report provides an overview of fifty-six organisations and the services and supports they make available to older people in Galway City or at a national level. Services are described in terms of the type of work the organisations undertake, and how they interface with older people. Organisations are classified as local or national and are placed in alphabetical order. Contact details are provided in Appendix II. Services are presented in relation to (1) those directed specifically towards older people; and (2) those with some remit around older people.

One of the key tasks of the interviews was to map the services available to older people in Galway City. In total, forty-three interviews were carried out with services providers who are working for and with older people in Galway City. The remaining thirteen organisations' details were ascertained through documents or website details.<sup>18</sup>

### 3.2 Galway City services and supports

#### Active Retirement Ireland (1)

Formerly known as The Federation of Active Retirement Groups, Active Retirement Ireland was founded in 1978. It is a national organisation with over 24,500 members in 457 affiliated associations across Ireland. The Active Retirement movement aims: *“To promote the status of older people and challenge the negative stereotyping by promoting older people as active agents of their own lives rather than the passive recipients of services and activities undertaken on our behalf.”*

*Our philosophy is based on self-help*

- *We do things by ourselves for ourselves*
- *We draw on the skills and experience of our members*
- *We pay membership fees and cover other expenses*
- *We promote sustaining activity and independence*
- *We encourage continued involvement of our members in the community.*

*Active Retirement annual report 2007.*

According to its Annual Report 2007, there are seven regional councils including the western region.

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<sup>18</sup> An asterisk placed beside their name identifies those organisations that did not participate in the interview process.

Each council provides training seminars for leaders, seminars on older peoples' needs and care, bowling competitions, social events, and arts and crafts exhibitions. They organise volunteers for the Senior Help Line and for a number of surveys and studies about older people. Active Retirement Ireland works in partnership with other organisations, such as Senior Times (a lifestyle magazine for older people) to deliver tea dances, and with a consortium made up of Age and Opportunity, Irish Hospice Foundation, Age Action, Irish Senior Citizens Parliament and the Senior Help Line to launch the Older and Bolder campaign funded by Atlantic Philanthropies.

Galway City has thirteen affiliated associations<sup>19</sup> and approximately five hundred members. Each local group pursues a broad range of activities, usually on a weekly basis, as well as co-operating with each other in organising social outings and conferences. Some groups are concerned with providing a social outlet, while others also organise a wide range of activities such as music, art, drama, creative writing, sporting opportunities, education and training. Members use word of mouth to recruit new members, as well as referrals from a wide range of professionals, family members or friends.

### **Addiction Counselling Service Western Region (2)**

The Addiction Counselling Service at Merlin Park Regional Hospital is an outpatient centre specialising in the professional treatment of alcoholism. It operates from 9.00am to 5.00pm Monday to Friday.

*The aim of the service is to:*

- Provide an intensive outpatient programme for people with alcohol problems.
- Provide long-term support for those who participate in the programme.
- Offer a service that is family oriented.
- Provide support and awareness for families where there is an alcohol problem.
- Establish an information, education and advice service.

*Source: Addiction Counselling Service Information Leaflet. Health Service Executive (Western Region)*

One counsellor covers a geographical area from Galway City as far as Leitir Móir in Connemara. The service is strictly by appointment only, and patients are referred by hospital consultants, general practitioners, social workers, community psychiatric nurses, and the probation service. Treatment includes an initial interview, which assesses the extent of the

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<sup>19</sup> Active Retirement Ireland, Annual Report 2007

alcohol problem. The service caters for men and women who are “*motivated, ambulant and alcohol-free for a period of one week prior to commencement of treatment programme.*”<sup>20</sup>

The service provides antabuse clinic supervision, aftercare sessions, individual counselling and a Community Alcohol Service. Lectures and information days are provided to organisations, schools, voluntary organisations and the general public on the various aspects of addiction. The service has seen an increase in the number of older people accessing the service in the last five years. The service is available to adults of all ages, and the treatment programme itself is intergenerational.

### **Age Action West (National) (1)**

Age Action is a national independent organisation on ageing and older people. It acts as a network of organisations and individuals, including older people and carers of older people. It is a development agency promoting better policies and services for older people in an ageing society. Age Action’s main aim is to improve the quality of life for older people, especially those who are most disadvantaged and vulnerable, by enabling them to live full, independent and satisfying lives, for as long as they wish to live in their own homes.

*To improve communication and co-operation among the organisations and individuals concerned with ageing and older people.*

*To enhance the exchange of information and views about the needs of older people and the development of appropriate policies and services.*

*To promote greater interest and involvement in research.*

*To assist and undertake innovative projects and services for older people and their carers.*

*To assist statutory and voluntary agencies in developing more effective policies and services.*

*Age Action objectives*

Age Action West covers a geographical region of counties Galway, Mayo and Roscommon. Its activities in Galway City include a drop-in information service on older people’s rights and entitlements, a reference library, database and directory of services, education and training such as computer and language classes, advocacy and campaigning on behalf of older people, seminars, conferences, research and evaluation. It also operates a shop and actively carries out support and innovative projects in nursing homes in Galway City. Age Action West can be accessed through the local office and resource centre, which is operated by both volunteers and paid staff.

In partnership with Irish Life, Age Action Ireland is developing Care and Repair Services for older people in Ireland. The programme is currently available in Dublin (in postal districts

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<sup>20</sup> Health Service Executive (Western Region), Addiction Counselling Service information leaflet.

Dublin 1, 2, 3, 4, 6, 7, 8, 9, 10, 12 and 14) and Galway City, and is to extend to other locations over the next three years. Age Action Ireland “*sees the Care and Repair Programme as an opportunity to create new services of value to older people in Ireland and to help Age Action fulfil its core goal of making Ireland the best country in the world in which to grow older.*”

The Care and Repair programme consists of five services:

**1. The Repair Service** uses a pool of volunteers and handypersons to carry out small repairs and to complete minor home tasks for older people. The most common services required by older people are:

|                                          |                                                     |
|------------------------------------------|-----------------------------------------------------|
| ○ Minor gardening<br>(e.g. mowing lawns) | ○ Minor home decorating<br>(e.g. interior painting) |
| ○ Installing handrails                   | ○ Tacking down carpets                              |
| ○ Changing plugs, fuses and light bulbs  | ○ Installing security locks and chains              |
| ○ Hanging curtains                       | ○ Installing domestic smoke alarms.                 |

**2. The Care Service** is a home visiting or befriending service whose volunteers provide social contact to older people at risk of isolation in their own homes.

**3. The Trades Referral Service** involves a register of reliable and honest tradespersons. Informed recommendations can be made to older people who may have job requirements which are beyond the scope of the Care and Repair Programme. In this way, clients can have confidence that the prices charged for these larger jobs by professional tradespersons will be reasonable, and that the service provided will be of a good standard.

**4. The Quote Check Service** is a service whereby an experienced volunteer visits an older person’s home, assesses a large job and gives an informed opinion about quotations received by the client from professional tradespersons. Quote Check gives the older person peace of mind and the assurance that the prices being quoted do not constitute a “rip off”.

**5. The Daily Contact Service** is a daily phone call made to the client at a pre-arranged time by a volunteer. Its purpose is to make sure the client is in good spirits and not in need of urgent support (especially medical attention).

**Alzheimer Society of Ireland (National) (2)**

The Alzheimer Society of Ireland is the leading dementia-specific service provider in Ireland. It was founded in 1982 by a small group of people who were caring for a family member with Alzheimer's disease or a related dementia. Today it is a national voluntary organisation with an extensive network comprising 26

***The Alzheimer Society of Ireland want a world:***

- ***Where dementia can be prevented and cured***
- ***Where stigma of the person with dementia is challenged and overcome***
- ***Where those who live with dementia have all they need to live happy and fulfilling lives.***

branches, 31 day care centres, 20 home care/support services, 28 carer support groups, 5 social clubs and an overnight respite centre. In Galway City the Alzheimer Society provides home care and organises a support group, which meets once a month and allows carers to opt in or out as they wish. The support group provides carers with opportunities "to share how to deal" with the illness. (There are also day care centres in Carna and Castlebar.) In addition, the organisation provides an information pack that is available to families.

The Society also operates the Alzheimer National Helpline (1800 341 341), offering information and support to anyone affected by Alzheimer's disease or dementia. The phone line operates from 10.00am to 4.00pm Monday to Friday. The Society also campaigns for better services, and commissions and collaborates on social and therapeutic research projects.

### **Ballybane/Mervue Community Development Project (2)**

This project was established in 1997 to "work from an anti-poverty focus within the community to support and empower those experiencing social exclusion."<sup>21</sup> Ballybane/Mervue CDP focuses on combating disadvantage, poverty and social exclusion in a wide variety of target groups, depending on the particular needs of a community and the people it serves. Its overarching objective has been to improve the social and economic position of those living in disadvantaged and marginalized circumstances, by promoting anti-poverty and anti-exclusion strategies that involve and empower local community members. The project provides information and administrative support to older people in the local community.

### **Caring for Carers Support Group (2)**

Many older people in Galway City are completely independent in their daily activities and do not require care support. However, those who are dependent rely on family, neighbours and others in the community for care and support. According to the Census 2006 there are 2,409 carers in Galway City. Caring for Carers Support Group meets once a month. It aims are to

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<sup>21</sup> CDP Work plan 2005–2007. Ballybane/Mervue Community Development Project.

share information, to keep in touch with one another, and to form a caring group to gain a voice for carers. There are currently 22 members registered. The group operates a strict confidentiality policy ensuring that information exchanged stays within the group.

A clear outcome of participation in the group is the opportunity it provides for socialisation, as many carers are quite isolated from others in their communities. In addition to the “*real support*”, the “*very important cup of tea*”, and the practical and emotional support, the group has also participated in group development training. In September 2008 the group members will participate in a community education programme (communications and assertiveness). The group is funded by the Health Services Executive West and has received considerable localised support from the Carers Department.

### **Citizens Information Centre (2)**

The Citizens Information Centre (CIC) is one of a network of CICs throughout the country. It is run by volunteers, paid staff and community employment workers. It has a board of management made up of representatives drawn from various voluntary and statutory groups in Galway. The service provides free confidential and impartial information on any subject, such as employment, education, social welfare, HSE services, taxation and consumer rights. In addition it helps people who are appealing decisions. The service has a full range of information leaflets and application forms on public services. Its workers also assist with filling forms and, if necessary, contacting Government departments or other agencies on behalf of the service user. Other services that can be accessed through the CIC include:

- Outreach CIC to Ballybane and Ballinfoyle
- Free legal advice
- Free accounting advice
- Office of the Ombudsman.

Because of confidentiality, the service does not provide information on the specific issues that older people (or any other groups) present with. However, the general issues that are most commonly presented by older people include queries about pensions and HSE entitlements.

## **Clúid Housing Association\* (2)**

Clúid is a dedicated housing organisation, which through provision of housing aims to facilitate the creation of homes and communities where people want to settle and live. It is managed by full-time staff that report to a voluntary board. There are four offices located in Cork, Dublin, Sligo and Waterford. Clúid works in partnership with local authorities to implement their housing strategies. While the focus is on a broad range of target groups (families, single people, people with disabilities, etc), considerable

*Clúid's objectives in relation to housing for older people are:*

- *To enable older people to live independently with privacy, dignity and fulfilment, for as long as they wish and are able to;*
- *To tailor services to the actual needs of tenants and to avoid stereotypes of old age;*
- *To foster links with the wider community;*
- *To provide a non-discriminatory service and to respect diversity;*
- *To actively encourage residents to get involved in running the sheltered housing schemes; and*
- *To support the successful return of elderly immigrants.*

*Source: [www.cluid.ie](http://www.cluid.ie)*

emphasis is placed on providing sheltered housing for older people. Clúid currently has 250 older tenants living in sheltered accommodation. Depending on the location, the housing can consist of own-door bungalows or apartments. Communal facilities such as laundries, lounges, activity rooms and IT suites are also provided. Each of these complexes has an on-site or visiting scheme manager or warden whose role is to maximise the comfort and security of residents. Clúid also facilitates a range of social activities and support services to enhance the independence of residents.

Clúid also offers sheltered housing as an option for older owner-occupiers who need to move to more suitable accommodation. The Association allows owner-occupiers to provide a financial gift (20% of sale of own home, or 20% of calculation of home if it is not to be sold) to Clúid to obtain rental accommodation (weekly rent calculated on income, e.g. pension) in a sheltered housing scheme for older people.

Currently there is no sheltered housing scheme in Galway City, despite community groups (such as Renmore Active Retirement) and volunteers working on the issue for a number of years. Clúid Housing Association have been very active in working with local community representatives in Galway City. However, according to volunteers lobbying for the development of a sheltered housing scheme, the key obstacle remains the City Council's failure to provide a site.

## **Community Garda and Garda Crime Prevention Unit (2)**

There is one sergeant and twelve Gardaí in the Community Garda service in Galway City. The Community Garda service stated that it is part of the service to call to older people, and that they would “*see pensioners over 65*”. In addition the community Gardaí take older people from the city to Knock throughout the summer. This is “*almost a permanent service during the summer*”.

The Crime Prevention Officer carries risk assessments and gives advice on security and crime prevention. He covers the whole of the county, except Tuam and Ballinasloe, which will come under his remit by the end of 2008. He gives talks to groups such as Active Retirement, and in some cases – where family members are concerned about older relatives – the officer will provide individual advice to that person on crime prevention and security. In addition, the Community Relation Section of the Garda Síochána published a crime-prevention leaflet entitled “Advice for the Older People”.

## **COPE (2)**

COPE has provided social support services in Galway since the 1970s. Originally called Galway Social Service Council, the organisation was established by the Galway Diocese and in 2000 was relaunched and renamed COPE. The organisation provides three key supports to older people in Galway City.

## **Community Catering**

The Community Catering service currently operates from a leased building which was funded from dormant accounts for the fit-out of new kitchens. The service was previously known as “Meals on wheels”. The service provides a six-day service in Galway City, five days in Claregalway/Carnmore, and three days in a Respond! housing estate. The charge is €4 per meal, which the service feels “*gives ownership to people if they have to pay*”. Core funding comes from the Health Services Executive West. Community Catering operates 10 routes with 60 core volunteers and 20 back-up volunteers. It provides 125 meals on average per day. It has the capacity to provide twice as many, but needs volunteers to do the deliveries. There is a lot of flexibility with the service: a client can cancel a meal up to 11.00am on the day. Meals are just one main course at lunchtime. The chef varies the menu for the summer, e.g. by introducing salads for the main course. The service caters for diabetics, coeliacs and some specific preferences.

The service has a client base of 145 “*on the books*”; 63% are female and 37% are male. The majority (81%) live alone while the remaining 19% live with family members. The

geographical breakdown suggests that the Bohermore, Claddagh, Renmore, Mervue, Shantalla and Newcastle areas have the majority of clients.

Participation requires that the client is over 60 (primary client base), but there are some variations with clients from Independent Living, Rehab and people with head injuries. There is no means test and no delay in processing. Referrals come from PHNs, social workers and family members, and occasionally from self-referrals and neighbours. One driver covers one route one day a week, which means that the client and driver get to know one another. The service says that the drivers are very aware of a change in person's condition if "*someone is going downhill*". If a person stops taking meals, Community Catering informs the referral person.

Volunteers get induction training. Meals are delivered by a panel of 11 volunteers daily, which equates to 66 volunteers per week for a minimum of 1.5 hours per day, amounting to 100 hours per week. If there are concerns, the service always contacts the Public Health Nurse. Volunteers come from contact with other volunteers or from notices in church newsletters. References are required. The service is currently establishing a full volunteer policy. Most volunteers are themselves retired.

### **Imperial Dining Club (1)**

The Imperial Dining Club was formed in July 2006, and secured funding to facilitate a group of older people who previously met for daily lunch at COPE's own premises in Francis Street, Galway. As the service moved to a

*"Coming to the Club gets me out of the house, I enjoy meeting people and having a chat."*

*Dining Club service user, COPE: Senior Support Services April 2007*

new location outside the city centre, it needed a new dining location. After some research and consultation with the services users, they were facilitated in the Imperial Hotel in Eyre Square. COPE felt that it was very important to retain a city location, as most of the diners rely on public transport to get to town. They also use the opportunity to do errands, and often attend daily mass. The group consists of 8–10 people and the service operates six days a week, which allows its clients to use it as best suits them. There is a nominal charge of €5 per meal with the balance payable to the hotel subsidised by Community Catering.

### **Sonas Day Centre, Walter Macken Place, Mervue\* (1)**

This centre was established in 1982 in two flats donated by Galway City Council. It operates a drop-in centre with support services for older people living in the flats complex. Sonas is a day centre for older people, offering help to access services, activities to bring pleasure,

comfort to ease anxieties, and security to give peace of mind.<sup>22</sup> The centre provides information, support, advocacy, and services such as groceries and prescription collection, laundry and meal deliveries, organisation of activities, entertainment such as art, pottery, baking, cooking lessons and music, and education such as computer classes and horticulture. Staff also carry out home visits to older people residing in the Walter Macken Flats complex.

The centre is open Monday to Friday from 9.30am to 5.00pm, and half day Saturdays. There are approximately 29 service users of the centre but this number changes from time to time. All service users are over 50 years of age, with the majority between 60 and 80 years. The vast majority are female and most are living alone. COPE also support emergency hostels for homeless men and women, and operate resettlement programmes.

### **DeafHear.ie (Services to Deaf and Hard of Hearing People) (2)**

Established in 1963, DeafHear.ie has campaigned for full equality in all aspects of life for deaf and hard-of-hearing people. The service in Galway has a lot of contact with older people due the high incidence of hearing loss (1 in 70 over the age of 60). It also provides a range of services, including:

- Family support services;
- Technical and non technical information on all aspects of deafness-related issues and equipment;
- Citizens information services;
- Deaf and hearing awareness training for organisations;
- Speed text (computer-aided note-taking);
- Mental health supports; and
- Aural Rehabilitation and Hearing Help.

### **Galway Contact**

Established in 1981, Galway Contact is a voluntary organisation that aims to “*help older people who may feel lonely and isolated, through weekly visits*”. Contact cover all areas of Galway City and the volunteers visit older people who are living alone, in nursing homes and in Units 5 and 6 of Merlin Park Hospital. The volunteers visit

***Objective of Galway Contact:***

***“To hold out a hand of friendship, a friendly face ad supportive voice for our older people in Galway. Every visit is completely unique and organised on a one-to-one basis. We are very aware of the need for confidentiality and sensitivity. Our visits are carried out in a very discreet and unintrusive way.”***

***“What you want to know about Galway Contact” information leaflet***

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<sup>22</sup> Sonas Day Centre. Centre Profile. COPE.

older people for two hours a week, and some volunteers do errands for them, bring them to hospital appointments, shopping etc. They also organise a morning club every second Friday morning in Áras de Brún in NUI, Galway. Volunteers transport older people to and from the club. Various activities, refreshments and opportunities to chat are provided. Referrals to the service come from Public Health Nurses, social workers and GPs. Galway Contact also make applications and allocate and install security systems (e.g. Social Monitoring pendants, Sensor lights, locks and smoke alarms) for those living alone, to help them feel safe in their homes.

Galway Contact operates a bus to provide service users with transport for morning clubs and annual outings. (They also provide the bus to bring services users to the Knocknacarra Day Care Centre two days a week.) They operate a telephone service to check in with older people, to ensure that they are safe and well. The service currently has 79 volunteers who in turn support 79 service users in the 70s–90s age group. The service is supported by one paid worker who co-ordinates the service and its volunteers, including their recruitment, vetting and training.

### **RAPID Programme, Tenant Liaison Officers\* and Social Workers\* (1)**

RAPID<sup>23</sup> is a national programme aimed at revitalising disadvantaged communities throughout Ireland. Of the five RAPID areas in Galway City, Bohermore has the highest percentage of older people. Although it does not provide direct funding, the programme endorses projects for development through the RAPID area. Such projects have an impact on all target groups, though some projects have a particular impact on older people. Age Inclusion in Westside helps to counteract social isolation among older people and to assist in home maintenance. The development of an intergenerational organic garden in Scoil Bride in Shantalla has seen the involvement of grandparents in the project, while redevelopment of the Walter Macken Flats in New Mervue has significantly affected the health and well-being of older residents there. These innovative projects diminish social isolation and improve the quality of life for older people in the communities involved. The RAPID team in the city ensures that bottom-up and community-led projects emerge “*from the ground*”.

This year will see the delivery of the Health Leverage Fund of €100,000 for Galway City RAPID Area. This is a capital scheme for older people’s groups to buy items or to build. Groups will require matched funding and evidence of co-ordination between groups and

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<sup>23</sup> Established in 2001, RAPID’s main priority is to ensure that disadvantaged areas receive investment and development through central and local government departments, in order to improve the quality of life and access opportunities.

agencies. Funding comes from the Health Services Executive West and from RAPID. Other possible future developments include playgrounds for older people in the city.

### **Tenant Liaison Officers (2)**

The City Council has responsibility for local authority estates in the city. To support the social and community development of these estates, Tenant Liaison Officers are employed to work with and support the local communities. There are three officers with responsibility for Bohermore, Ballybane/Mervue/Doughiska, Ballinboyle and Westside. Support is provided to older people living in local authority housing and in social housing schemes such as Suan, a housing complex of 20 houses/apartments with a community house in Sandyvale. Contact with older people is on a going basis with various schemes being developed such as establishing a community garden in Bohermore.

### **Social Workers (2)**

There are two social workers attached to Galway City Council. They support target groups living in local authority housing, including older people.

### **Galway City Partnership (2)**

The aim of Galway City Partnership is to tackle disadvantage and combat social exclusion by working with individuals, groups and communities through a community development approach. Its decision-making structure is made up of representatives from statutory groups, community groups, social partners and locally elected representatives. Galway City Partnership has supported a numbers of groups working with older people in Galway City over the past number of years. The Partnership named older people as a new Target Group in 2000, and conducted local research into the needs of older people in Galway City in 2001.

It has supported:

- The development of new Active Retirement Associations in Ballybane, Mervue, Ballinboyle, Claddagh and Westside from 2002–2004.
- Westside Age Inclusion to paint houses in 2002.
- The Older Women’s Network to explore the establishment of a local branch in Galway.
- Baseline research by COPE into its services for older people in Galway City.
- Galway Contact (volunteer befriending service for older people) in 2006 and 2007 for clients’ annual outing.
- Shantalla Residents Association for older people’s social events in 2006–2008.

### **Galway Refugee Support Group\* (GRSG) (2)**

Galway Refugee Support Group (GRSG) was established in 1998. It is a voluntary community-based organisation that works from community development principles. GRSG believes in *“a just and equal society where people seeking asylum have access to a fair and transparent procedure, appropriate services, support and resources, and where those granted asylum can fully participate in all aspects of Irish society.”*<sup>24</sup>

In 2001 GRSG secured funding from Galway City Partnership to prepare a strategic plan, and at the same time made an application to the newly established European Refugee Fund. The organisation secured funding from both sources. The organisation works with those in the asylum process and those with refugee status on a range of projects and initiatives. While the number of older people in the asylum process or with refugee status is small, the organisation anticipates that this will change as the current population ages and hopefully increases family reunification.

### **Galway Simon Community (2)**

This service works with people who experience homeless and housing exclusion by:

- Assisting people at risk of homelessness.
- Providing high-quality care, accommodation and services which support people and enable them to acquire and sustain an appropriate home of their own.
- Campaigning for legislative and policy changes and resources that will deliver on housing and responsive services for homeless people.

The service includes supported housing, residential settlement service and a day centre, which provides a housing access programme, homeless referral service, family support service and facilities for people who are homeless or at risk of homelessness. The service user profile in the day centre is predominately under 55 years of age, while the housing services and residential projects support an increasing older population. The day centre management feel that the low number of older people in the centre is due to most being in residential care or simply not surviving to old age.

### **Galway Traveller Movement (GTM) (2)**

Established in 1994, the Galway Traveller Movement (GTM) is a partnership organisation of Travellers and settled people working together to achieve equality and self-determination for

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<sup>24</sup> Galway Refugee Support Group Vision Statement (1999).

the Traveller community in Galway City. The vision of the GTM is to achieve full equality for Travellers and to accomplish full participation of Travellers in social, economic, political and cultural life, as well as the broader enhancement of social justice. Older Travellers participate in a range of projects delivered by GTM. They are an integral part of the planning, development and delivery of projects, including the primary health care project.

### **Galway Volunteer Centre (2)**

Galway Volunteer Centre was opened in July 2006. The Department of Community, Rural and Gaeltacht Affairs funds it on three-year contract. It was originally based in the Westside Resource Centre and moved to Mill Street in April 2008. The Centre is one of 17 national volunteer centres established to develop new initiatives and to ensure that all centres provide an effective service that supports local non-profit organisations in finding suitable volunteers. People have to register. Most people self-refer, and once they are registered they get a bulletin every two weeks. The staff reviews areas that need volunteers and try to match volunteers with that particular organisation. Volunteers contact the organisation themselves once they are matched. The Centre indicated, *“One of the main challenges is volunteers contacting organisations and the organisations not getting back to them.”*

Garda clearance is also the individual’s responsibility (for which there is an eight-week waiting time). The Centre currently has 900 volunteers on its books; 100 joined in May 2008. Seventy-two per cent of all those registered are female. The Centre trains organisations on their volunteer policy and on supporting volunteers.

During registration, age, nationality and gender are requested, but “age is not always filled in”. The largest number of volunteers comes from the 16–25 and 26–35 age groups. Staff feel that this may be because they are computer literate and get the information online. Thirty-one volunteers are from the 50–59 age group. Three people registered are over 70 (including a couple), which represents 5% of the total, though *“some people don’t give their age”*. In 2007 the Centre focused on older people as volunteers (in 2008 the focus is on ethnic minorities). The Centre undertook activities such as presentations to the Active Retirement groups to try to encourage older people to become volunteers. Galway Volunteer Centre provides volunteers to organisations supporting older people, including the Sonas Day Centre in Walter Macken Flats (COPE), the Age Action shop and the Care & Repair scheme.

### **Health Services Executive West (1, 2)**

#### **Carers Service (2)**

The Carers service supports informal carers in Galway City County and the Islands. There are 2,400 such carers in the city. According to the service, those who care for older people are “often older people themselves”. The service provides in-home respite service for carers, information and advice, carer’s clinic, training, support groups, information sessions, respite breaks and grants, and carries out research and evaluation. Referral to the service comes from the health professionals. The carer’s clinic sees 10 carers per month (where it ‘goes through’ the carers’ needs).

**A carer is defined by the HSE as:**  
*“A person who provides assistance on an unpaid basis to one or more family members, relatives, friends or neighbours, who have difficulties in looking after themselves or in undertaking daily activities because of disability, age or long standing illness. Care can be provided either part-time or full time.”*

**Equality Authority**

### **Community Development (2)**

The Community Development service supports voluntary and community groups, especially those supporting the needs of older people in the community, through grant aid under Section 39 and lottery funding. The service administers the fund from application to final reporting. While considerable funds are allocated to such organisations as the Brothers of Charity and COPE, much funding also goes to a range of local community and voluntary groups in the city and county. Funding is crucial to groups supporting older people at a local level who undertake a range of activities with the funding they receive (anything from the delivery of specific care projects to social events). The Community Development service has also convened an Older Persons Information Group, comprising representatives from different disciplines including consumers of the services. The group meets four times a year.

### **Community Occupational Therapy\* (2)**

This service provides care to people of all ages with physical and sensory disability. It aims to promote and maintain independence in daily living skills, and to improve and maintain quality of life for clients in the community.<sup>25</sup>

### **Community Social Work Service for Older People (and Senior Case Worker – Elder Abuse) (1)**

This service was established in mid-2007 as “part of a local response to social worker need”. It comprises three social workers who cover both Galway city and county. One social worker has responsibility for the west of the county and city, the others for the east. The service

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<sup>25</sup> HSE (2007) Some Services for Older People Galway City and County – Draft Document.

provides support to people over the age of 65 living in the community, and works with them and their families to ensure that services are provided to enhance their quality of life and maintain their independence.

The social worker team deal with a wide range of issues, from handling basic queries to supporting those in need of care and supporting people in their own homes in cases of extreme neglect. They work very closely with their HSE colleagues and with community and voluntary groups in the city and county. The team plan to outreach in local areas in the future.

The senior and generic social workers also have responsibility for managing and co-ordinating a response to allegations of elder abuse, and act as a resource for older people and for voluntary groups and professionals providing services to older people. Elder abuse can occur at home or in institutions, and victims are not necessarily ill, frail or dependent. There are several forms of abuse that may be perpetrated as a result of deliberate intent, negligence or ignorance. Categories include physical, sexual, psychological and emotional abuse, financial or material abuse, neglect and acts of omission, discriminatory abuse, self-neglect and institutional abuse. There are 23 elder abuse caseworkers nationally. In the last 12 months there have been 150 referrals in Galway (not all have been substantiated), including cases of neglect and financial, physical and emotional abuse.

*“A single or repeated act or lack of appropriate action occurring within any relationship where there is an expectation of trust which causes harm or distress to an older person or violates their human and civil rights”*  
*Protecting Our Futures”, The Working Group Report on Elder Abuse, 2002*

### **Community Nutrition and Dietetic Service\* (2)**

This service provides information and support to individuals and groups on healthy eating and weight management.<sup>26</sup>

### **Chiropody\* (2)**

This service is available to medical cardholders over 65 years, to all people with diabetes and other at-risk categories, and to people with a physical or sensory disability.<sup>27</sup>

### **Health Promotion (2)**

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<sup>26</sup> HSE (2007) Some Services for Older People Galway City and County – Draft Document.

<sup>27</sup> *Ibid.*

This service provides information and courses on topics such as healthy living and stress management. It works in partnership with other agencies to create supportive environments for health. This service has much contact with local communities and groups, and provides a range of resources at a local level including community courses, the “Go for Life” programme, support for positive ageing week, and information on becoming and staying active. The Healthy Cities project is led by Health Promotion Services, and Healthy ageing is one of its themes.

### **Home Help Service (2)**

This is a discretionary service which provides personal care (most sought-after); essential practical care (e.g. putting on a fire, ensuring there is sufficient food in the house); social care to older people, people with physical and sensory disability, and families in crisis; carers support; and family support for Hepatitis C. There are approximately 500 clients across the county. Referral comes from other health professions and there is also some self-referral. The team itself assesses the care needs of the applicant. In addition there is a home help cash grant, which allows families to recruit their own home help personnel (it can't be a family member), and the family becomes that carer's employer.

### **Home Management Service (2)**

The Home Management service works mainly with families who have children under 18 years of age. Referrals come through social workers, Public Health Nurses and Community Welfare Officers. Its focus is mainly on budgeting, nutrition and healthy eating, and its priority is families. The service has some older people on its books; these referrals come through community groups, for example local women's groups or Age Action. Families rarely refer and there are very few self-referrals. Older people might have difficulties with their pension or they may not be good at cooking for one person. The service runs a home management group for 8 weeks (2 hours per week). There is no charge for this course. Although open to older people, a current group has only one person who is 65 years. Referral forms are available on [www.hse.ie](http://www.hse.ie).

### **Knocknacarra Day Care Centre (1)**

This day care centre is run by HSE staff from St. Francis Community Nursing Unit and operates Monday and Tuesday from 10.00am to 4.00pm. Approximately 20 older people attend the centre each day it opens; calls for emergency respite may add to the numbers on any one day. Galway Contact provides the transport for some participants; others are assisted by their families. Most of the participants live alone. They start the day with tea and toast

and some concentration work, followed by a review of newspapers, exercise and some spiritual time.

Lunch is provided by Joyce's supermarket (three-course lunch for € per meal and a subsidy by the HSE), followed by music, art, bingo or information sessions. Referral to the centre comes from social workers, Public Health Nurses, GPs and family members. The co-ordinator feels that the demand for places in the centre is so great, the service could operate seven days a week.

### **Saint Francis Day Care Centre\* (1)**

This HSE service provides a day care centre for up to ten people, Monday to Friday. Participants receive meals and engage in various activities.

### **Medical Social Work (2)**

University College Hospital Galway provides a comprehensive range of services to emergency and elective patients on an inpatient, outpatient and day-care basis across two sites, University Hospital Galway and Merlin Park University Hospital, employing approximately 3,000 staff in total. The Medical Social Workers provide a service to patients and their families where

**The Society is involved in a diverse range of activities characterised by:**

**Support & Friendship:** *Through person-to-person contact, provision of material and other support, they assure confidentiality at all times and endeavour to establish relationships based on trust and friendship.*

**Promoting Self-Sufficiency:** *Assist people to achieve self-sufficiency in the long term and the sense of self-worth this provides.*

**Working for Social Justice:** *They are committed to identifying the root causes of poverty and social injustice in Ireland, and in solidarity with the poor and disadvantaged, to advocate and work for the changes required to create a more just and caring society.*

**Source:** [www.svp.ie](http://www.svp.ie)

illness, medical care and treatment are complicated by social and emotional problems. These may have contributed to the cause of the patient's condition or they may have arisen from it. Social work intervention may be needed to enable patients to regain their emotional equilibrium and function more adequately, or to help them adjust their situation. This involves a full assessment of the social, psychological and environmental factors that contributed to hospital admission. Services provided by medical social workers include:

- Comprehensive assessment of the person's needs and social supports.
- Liaison and networking with other agencies and professionals with a view to drawing up a care package.
- Psychosocial support and counselling with individual clients and carer to assist healthy adjustment to loss, lack of independence and long-term care issues.
- Carer support.

- Assessment of area's needs and creative use of existing services.
- Legal issues.
- Elder abuse.
- Discharge planning.
- Planning private nursing home and long-term care in HSE nursing homes in partnership with the patient and their family.
- Assisting and advising patients and family members on financial entitlements.
- Family mediation and conflict resolution.

### **Physiotherapy\* (2)**

This service maintains and promotes independence, mobility and general well-being by advising on exercise and safety, and by providing aids and appliances where appropriate. Group therapy is also provided in the area of falls prevention and osteoporosis.<sup>28</sup>

### **Public Health Nurse Service (PHN) (2)**

This service provides a home nursing service to all older clients. The service provides advice and information on all aspects of home nursing care. There are two centres where public health nurses are based: Mervue Health Centre for those in the east of the city, and Shantalla Health Centre for those in the west. Referrals to the service come from:

- Hospital – hospital ward discharging sends a referral form to the liaison office. The service has two nurses who take all referrals, or the nurses go round the wards picking up referral forms or they come in by fax. Every patient who goes through the liaison office is referred to the PHN service and is seen within 24 hours of discharge.
- General Practitioners.
- Carers.
- Family members.
- Community Catering (if they notice someone is not eating, they phone in and say “*That dinner wasn't picked up, will you have a look in at her*”).

***“The Golden Rule is that if the PHN get a referral the patient HAS to be seen within 24 hours of discharge. This is the Golden Rule and is never broken!”  
Galway City PHN Service***

Every part of city is broken into PHN areas. (The West is: Area 40, which is The Claddagh and Nuns Island; Area 41 is Salthill; 42 is Ragoon; 43 is Newcastle; 44 is Dangan; 45, 64, 72 and 73 are all Knocknacarra; 74 is Taylor's Hill). Therefore the liaison office knows which PHN is responsible for which area, so they can ring and ask: ‘*Did you get that referral form? And will you see the patient in 24 hours?*’ The geographical area is wide – City West, for

<sup>28</sup> HSE (2007) Some Services for Older People Galway City and County – Draft Document.

example, stretches from Eyre Square to Knocknacarra – and contains 10 PHN areas. PHNs (including PHNs and midwives) support “*all babies, older people, people with learning disabilities, anyone at all that needs help*”.

### **Services for Older People\* (1)**

This service provides information on short-term or long-term residential care.

### **Special Housing Aid for the Elderly (1)** *(Please note: This service transfers to the local authority in 2008.)*

This service aims to improve the living conditions of older people living alone in unfit or substandard accommodation. People eligible for the scheme are normally over 65 years of age, must be living alone or with other people over 65. The applicants must be unable – either from their own financial resources or from other available housing grants – to carry out the necessary repairs or improvements. A range of works is available, including replacement or repair of windows and doors, heating systems, toilet facilities, dry lining or any other reasonable works necessary. The service arranges an inspection of the applicant’s residence, then a priority list of works is drawn up, the service seeks quotations, and engages a building contractor to undertake the works.

### **Home Instead Senior Care\* (2)**

Home Instead is a private organisation which helps older adults with everyday tasks that allow them to live independently. Services include personal care, home care, respite and convalescence care, early dementia and Alzheimer care, and care management. The services are offered through an independently owned and operated franchise. Staff are “*thoroughly screened, trained, insured, matched to your preferences, professional, reliable and dependable.*”<sup>29</sup>

### **Irish Centre for Social Gerontology (1)**

The Irish Centre for Social Gerontology (ICSG) is a multidisciplinary research centre on ageing, based at NUI, Galway. It was established by the University and through donation from Atlantic Philanthropies. Social gerontology examines the social, psychological, economic and cultural conditions that affect older adults and influence the range and quality of the ageing experience. The ICSG focuses on research, education and training in the field

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<sup>29</sup> Home Instead information leaflet

of social gerontology in Ireland and internationally. There is a specific focus on rural gerontology, the economics of ageing, and technology and ageing.

### **Irish Wheelchair Association**

The Irish Wheelchair Association (IWA) was founded by a small group of wheelchair users committed to improving the lives of people with physical disabilities in Ireland. It now provides a number of services to people with limited mobility throughout Ireland. It has 20,000 members and 2,000 staff, as well as dedicated volunteers. The aim of the organisation is to promote greater independence, freedom and choice for people living with a disability. It received funding from the Department of Finance (via the Health Services Executive), FÁS, the VEC and from its own fundraising efforts.

The IWA is open to people of all ages, though there is no specific funding for service users over the age of 65 – they are supported through ‘mainstream’ IWA resources. It has a broad range of services including:

- Resource and outreach centres (Merlin Park in Galway City)
- Assisted Living Services
- Sport
- Peer counselling
- Motoring assessment and tuition
- Transport
- Parking permits
- Advocacy
- Wheelchair service
- Respite and holiday centres
- Housing
- Information.

**IWA aims to:**

- *Identify the needs of people with limited mobility*
- *Empower people with the skills and backup to help them address their identified needs and to participate in society*
- *Create awareness of the rights and needs of members amongst policy makers, service provider and the public*
- *Advocate with and on behalf of people with limited mobility for improved services and benefits, and*
- *Provide and promote appropriate services.*

**IWA Submission**

The resource and outreach centre in Unit 10A, Merlin Park (with a catchment area of 20 miles’ radius of the city) supports people with disabilities in their day-to-day lives by offering locally based recreational and educational programmes. All programmes are designed to facilitate personal development and interaction with the local community. A range of person-centred programmes is offered at the centre, including socialisation, arts and crafts, cookery, music and drama, sports, day trips (and holidays), physiotherapy, educational programmes and supported employment programmes. Transport is provided by IWA.

There are 28 services users over 65 years of age attending the Merlin Park centre regularly each week, and there are 12 irregular service users. (Older people benefit from the HSE funding, although the resource and outreach centres receive no funding for the older people services. Over-65s receive personal assistant hours from the HSE in the form of home care package.) Referrals come from Public Health Nurses, occupational therapists, physiotherapists, social workers, GPs, family members, HSE caseworkers and self-referrals. Reasons for referral include socialisation, personal development, skills development, and respite for carers and access to clinical therapies.

### **NCBI (National Council for the Blind of Ireland) (2)**

NCBI is a not-for-profit charitable organisation which offers support and services nationwide to people experiencing difficulties with their eyesight. NCBI supports over 500 people in Galway City and County, the majority of whom are over the age of 55 years and have deteriorating eye conditions. NCBI Galway City provides a range of services and supports, including practical advice and information, assessments, demonstrations and training for technical aids and appliances, daily living equipment, mobility training, independent living skills training, resource materials and counselling. The service is primarily delivered to individuals in their own homes, and is provided through consultation with each individual. There is a resource centre in Galway City where a full range of adaptive equipment and technology is available. Based in the Galway Centre are the regional manager, two community resource workers and an IT trainer and support worker.

### **Order Of Malta Galway\* (2)**

Order of Malta Ambulance Corps is a major provider of first aid training, ambulance transport and community care services in most of the major cities and towns throughout Ireland. Through its youth section, Order of Malta Cadets (a National Youth Organisation), it provides a full programme of youth development and sporting activities for young people. The Order of Malta Ireland also coordinates and manages a range of community services, including day care centres and lunch clubs.

In Galway City the organisation organises supper clubs in Galway, pilgrimages to Knock and annual Christmas dinners. The service collects older people from their homes for its supper club and activities in its centre at St Helen's Street between 7 and 9.3pm Monday, Wednesday and Friday. The service is well thought of, especially by carers, who feel that the service workers "*know how to mind older people*".

### **Rape Crisis Centre (2)**

The Rape Crisis Centre was established in 1979 to provide support to women and men who have experienced rape, sexual assault, sexual harassment or childhood sexual abuse. Over the past 25 years it has developed and expanded services to include a telephone helpline staffed by trained counsellors, which operates 24 hours a day, 365 days a year. Although the call centre is based in Dublin, counsellors take calls from all over the country. It takes calls from women and men of all ages who have experienced or want to talk about the effects of any kind of sexual violence. The service also accompanies people to the Gardaí and courts. National figures suggest that 5% of clients are aged 50 years and over. The Galway branch indicate that older people use the service though the number is small – reflecting the national picture – and most present with experiences of childhood sexual abuse.

### **Respond! (2)**

Formed in 1982, Respond! is one of Ireland's largest housing associations. It seeks to create a positive future for people by alleviating poverty and creating vibrant, socially integrated communities. It provides a range of services, from design and planning to management and care. Respond! designs and constructs dwellings for older people as well as traditional families, independent parents, homeless and other special needs groups. The organisation supports older people in their accommodation and community needs in Galway City: in Lus Leanna (28 units), Ard Alainn (30 units), Baile na gCoiste (25 units) and Ard na Mara, Oranmore (28 units).

### **Saint Vincent de Paul Society (2)**

The society of Saint Vincent de Paul is a Christian lay voluntary organisation, working with the poor and disadvantaged in society. The Society provides support to older people in the city through visitation, material support and accommodation.

It plans to open a day care centre in Mill which will cater for the needs of older people. The centre will include a communal room, which will facilitate light meals, access to computers, library services and activities such as art and music.

Other services will be able to access the centre, such as health care professionals and organisations like the Citizens Information Service. The centre's development is in response to the needs and numbers of older people who are living in the city centre where few resources and supports are available. The centre is due to open in November 2008.

### **Senior Help Line (1850 440 444) (1)**

The Senior Helpline will be officially launched in Galway in October 2008. The service aims to provide a friendly, helpful and confidential service for older people all over Ireland. It operates from 10.00am to 3.00pm and from 7.00pm to 10.00pm. The service is operated by trained volunteers in nine different locations nationally. It operates from Galway City on Sunday evenings. The co-ordinator said, "*Some times are particularly busy . . . Sunday evenings is a lonely time especially in winter.*"

### **Shantalla Residents Association (2)**

This service has provided social outings and events for 110 older people residing in the Shantalla area over the last seven years. The social outings and events are provided free of charge to all participants. Funding comes from Galway City Partnership, the Health Services Executive and the organisation's own fundraising.

### **The West of Ireland Alzheimer Foundation (2)**

Formed in 1994, the West of Ireland Alzheimer Foundation provides a range of person-centred services based on a 'home-to-home' philosophy. All services are designed with the carer of an Alzheimer sufferer in mind. This support can range from providing a listening ear to providing "*a break from round-the-clock cares*".

Approximately 70% of referrals to the Alzheimer Foundation are from the HSE, through the Public Health Nurse service and social workers. Day-to-day enquiries into the services and supports the organisation offers often come from family members. According to the organisation, on making the initial contact most people "*just want to talk*". The service visits the family and tries to match a care assistant with the family. If there is someone available to take on the case, the assistance starts immediately. The service provides a minimum of four hours per week (mainly during the day) in two sessions if possible. There is no means test to access this service. However, there are currently 14 families in the Galway region waiting for care assistance

The Alzheimer Foundation currently provides 61 families in Galway (including 10 in the city) with home support services. The organisation anticipates that "*this number will go up*" due to increased prevalence and greater awareness of the disease. The Foundation has been instrumental in providing education and awareness of Alzheimer's disease to the wider community in recent years.

The Foundation provides three respite beds in its Maryfield Centre in Athenry, and twelve in its Ballindine Centre in County Mayo, which people from Galway attend. Between five and six patients are also catered for in the Foundation's Day Care Centre in Maryfield, but this care cannot extend to weekends because of a lack of funding for staff. Maryfield also provides long-term residential care for 12 patients. The Foundation hopes to begin developing an Alzheimer Care Centre adjunct to Merlin Park Regional Hospital in 2009, which will cater for 22 to 24 patients.

### **Threshold (2)**

Threshold gives free information and advice on housing issues. They assist in solving housing problems and may act on a service user's behalf. The service has an office in Galway that can be contacted by telephone, email or personal visit. The Galway office has an advisor for older people (funded under the Dormant Accounts Fund) who is available three days per week to provide information, assistance with grant applications, support in filling forms, advice and advocacy to those over the age of 55 years. The service is free and confidential.

### **Vocational Education Committee (VEC) (2)**

The VECs provide a range of services and supports to a wide range of target groups in Galway City, including older people. It provides these services through a number of sections within the VEC, including:

#### **Adult Basic Education Service (2)**

This service provides intensive basic education in group format. *"People use the service because they want to upgrade their literacy skills."* The service also offers basic computer courses, workplace education, English for speakers of other languages, and family learning. All courses are free of charge. The service currently has 72 people (27 men and 45 women) over 55 years undertaking intensive basic education. Referrals come *"from all over . . . people come in off the street"*. Referrals also come from CE schemes, FÁS and the HSE.

#### **Adult Learners Guidance Service\* (2)**

This service provides one-to-one confidential guidance sessions, ongoing support for adult learners in Galway City VEC adult education programmes, and workshops on education

opportunities to community-based learners. The service is available to anyone who is unemployed, over 21 and in need of advice and guidance.

### **Back to Education Initiative (BTEI) (2)**

This service targets specific disadvantaged groups. It offers FETAC-accredited courses in subjects such as computers, Internet training, care provision and practice. Anyone who has left full-time education can take part. Priority is given to people who have not completed the Leaving Certificate. Courses are free to medical cardholders, people receiving social welfare payments and people with less than upper-second-level education. Of the 318 participants who took part in 2007, 34 were between the ages of 35 and 65, and 26 were over the age of 65. However, the service indicated that they are “*constantly approached by older people wanting to return to education*”, but are unable to take them as they do not meet the criteria.

### **Community Education (2)**

Community education provides an opportunity for people to take part in education courses in their own areas. The courses are funded and supported by the VEC but are usually organised and run by local community groups. Community education provides grants once a year to promote and develop community education initiatives in local community settings. The aim of the grants is to involve in community education courses those who are most excluded, in order to build their confidence, empower them as individuals, and help develop their community. A key target group is older people. In 2007 1,159 individuals took part in community education programmes in Galway City alone, 341 of whom were over the age of 65. Eight groups were Active Retirement groups, one was a nursing home group and another was an Age Action West group.

### **Vocational Training Opportunities Scheme (VTOS) (2)**

This service provides a range of courses targeted at people with less than upper-second-level education, including courses in computers, media studies, foundation maths, English, Leaving Cert subjects, business and retail studies. It is free to people over the age of 21 years and in receipt of social welfare payment for six months or more. There are currently 166 students in the scheme, 11 of whom (6 male and 5 female) are over the age of 55.

### **Waterside House (COPE) (2)**

Waterside House provides refuge for women and children who are experiencing domestic violence. The majority of women using the refuge are between the ages of 20 and 35 years.

Statistics from the service indicate that a small minority of their service users are over the age of 55 years (seven in 2006/2007). The alleged perpetrator in the majority of these cases was the husband or partner, and one was a son.

### **Westside Age Inclusion (1)**

Established in 2001, Westside Age Inclusion co-ordinates a range of services in the local (Westside) area to people over the age of 55 years. Services include home help to those living alone (e.g. practical work such as changing light bulbs, painting and decorating), adult education (including literacy and numeracy programmes for those who wish to return to education), and gardening services. It also provides a laundry service. Seven workers are employed.

## **3.3 Some national organisations**

### **Age and Opportunity (1)**

This is a national organisation working to promote greater participation by older people in society. It supports a broad range of projects “from the arts to physical activities, from challenging ageism to promoting greater empowerment by older people”. Main projects include Go For Life, the national programme for sport and physical activity for older people, and Bealtaine, the arts festival celebrating creativity in older people.

### **GLEN (Gay and Lesbian Equality Network) (2)**

GLEN works to achieve full equality, inclusion and protection from all forms of discrimination for lesbian, gay and bisexual (LGB) people in Ireland. It is a non-governmental organisation which seeks to influence policy and to work in partnership with other organisations in order to achieve change. It is funded by Atlantic Philanthropies, the Department of Justice, Equality and Law Reform, and the Department of Health and Children.

*“Glen is working to make Ireland a place where all LGB people can feel safe and confident about being open about their sexual orientation at home, in work and within the wider community; where LGB people are not discriminated against in laws and in service provision; where relationships and love between LGB people are seen as no different to relationships and love between heterosexual people.”*  
Source: [www.glen.ie](http://www.glen.ie)

### **National Council on Ageing and Older People (NCAOP) (1)**

The Council was established in 1997 and is the advisory agency to the Minister for Health and Children and others on all aspects of ageing and the welfare of older people in Ireland.

The Minister appoints thirty members to the Council, a minimum of whom must be aged 65 years or over. The functions of the Council are:

- To advise the Minister for Health and Children on all aspects of ageing and the welfare of older people, either at its own initiative or at the request of the Minister.
- To assist the development of national and regional policies and strategies designed to produce health gain and social gain for older people.
- The Council may also advise other Ministers, at their request, on aspects of ageing and the welfare of older people which are within the functions of the Council.

Source: [www.ncaop.ie](http://www.ncaop.ie)

### **The Irish Senior Citizens Parliament (1)**

The Parliament is a national organisation of older people. Its aims are:

- To give a voice to senior citizens in the issues that affect the quality of their lives.
- To work for improvement in the living standards of older people.
- To represent older people's issues to Government.
- To be an effective voice for senior citizens, with the help of its affiliated organisations.

Source: [www.seniors.ie](http://www.seniors.ie)

The Parliament has 380 affiliated organisations with a total membership of 95,000. Organisations that represent senior citizens at national and local levels are invited to affiliate to the Parliament and participate in its work to improve the quality of life for senior citizens. The Parliament is non-party-political, non-sectarian and non-profit-making. It is an autonomous organisation concerned with promoting the interests of retired and older people. The Parliament identifies areas of concern to older people, and lobbies at national level for progress in these areas. Membership is open to organisations who wish to work with the Parliament on relevant issues and who are fully supportive of the Parliament and its ethos. All affiliated organisations have an equal status, with the right to nominate three delegates to the Parliament, regardless of the size of the organisation.

### **3.4 Summary**

- The researchers saw no documentary evidence of outcomes for older people.
- The range of organisations outlined reflects the diversity of older peoples' needs and interests in Galway City.
- Nineteen services are working directly to support older people in Galway City.

- At least thirty-seven organisations provide services to older people as part of their overall service.
- Most referrals to organisations come through the professional health services, in particular the Public Health Nurse service.
- The interface of older people with some services is small but significant in terms of the unique supports these organisations offer, e.g. Rape Crisis Centre, Ballybane / Mervue Community Development Project.
- The administration of existing funding sources to local community and voluntary organisations is effective, but its effectiveness has not been evaluated.
- Key difficulties experienced by organisations include accessing those older people who are most distant from services, and getting the “*message across*” about what the organisations do.
- Collaboration amongst some community and voluntary organisations in Galway City is limited.

### **3.5 Conclusion**

Our interviews highlighted a number of issues that services are grappling with, including collaboration, funding, promoting awareness of services among service users, and the involvement of the most vulnerable.

Most organisations interviewed realise the significance and benefits of collaborative working, including sharing resources, funding, project development and networking. However, one of the most striking aspects of the community and voluntary sector is that the services tend to concentrate on their own delivery of services, and to participate only in limited collaborative work. Certainly some organisations do collaborate and demonstrate practical and effective collaborative approaches, such as Age Action (e.g. nursing homes, day care centres, care and repair), NCBI and Deafhear.ie (e.g. they share the same premises) and Galway Contact (e.g. transport for day centre). There are clear reasons for limited collaboration, including:

- Voluntary organisations may be “*so busy that they have not got the time*” or energy to co-operate or plan joint actions with other organisations.
- Some organisations have a very local approach, for example in a housing estate or a particular community, and see no relevance to working with other organisations whose remit may be city-wide or even national.
- Resources are limited both in human and budgetary terms, thereby limiting the networking time available to service providers.
- Limited opportunities to meet and exchange information with other service providers.

However, this lack of networking and collaboration risks duplication and wasted resources. For those older people who are active, involved and in some cases driving the work of the organisations, their awareness of what other organisations do in the city appear to be strong. However, service providers are also aware that for older people at their most vulnerable, the question is constantly raised: “*what do they do?*” The Health Services Executive in particular was criticised by many service providers (and service users) as being particularly difficult to negotiate with, because of “*so many services*” and “*so many (phone) numbers . . . I just want to know what I’m entitled to.*” This is not just an issue for the HSE but for all organisations supporting older people. There are so many services available that older people clearly find it difficult to access the appropriate and relevant service provider, and are unable to seek anyone to access it for them or advocate on their behalf, as such an approach is very resource-intensive for organisations.

Organisations are very aware of older people who are not active in groups or activities, and many feel (especially those supporting the most vulnerable) that “*It is the middle classes who are participating*” – perhaps because they are perceived to be more confident, to be better educated, and to have “*have more of a voice*”. While we do not do believe this to be so clear-cut, it certainly has a strong element of truth. However, the same can be said for any group of people in society who have experienced some form of disadvantage or exclusion. How organisations engage those older people who are most distant from services and supports is something that requires innovative responses.

While no evaluation of the impact of funding has been undertaken, groups who participated in this study indicated that local funding plays an enormous role in ensuring that older people are supported in their communities. The HSE and Galway City Partnership were regularly cited by local organisations as being very supportive of them and their work in relation to funding. Sections such as Carers, the community development and health promotion departments of the HSE, and community development within Galway City Partnership were praised by organisations as much for their understanding of local organisational needs as for the funding itself (which in some cases was quite minimal). Administration of funding at a local level seems to be working well and to be dealt with sensitively and positively (“*one-to-one approach*”) by staff in both organisations, though as voluntary organisations indicated, “*there is always a need for more funding*”. Our concern is that while anecdotally the funding is being used well, there is always a question whether this funding is achieving the best outcomes for older people. The lack of review or evaluation of the funding dispersed needs to be addressed, to ensure the most effective use of funding in the future.

Most referrals to organisations come through the health professionals, especially the Public Health Nurses service. Also, the provision of drop-in facilities in some organisations helps to engage older people. In relation to social or activity-based organisations, word of mouth is still a powerful tool.

There are many organisations working to support older people in Galway City. It is clear that the range of organisations outlined reflects the diversity of older peoples' needs and interests in the city. But it is also the case that some organisations – particularly in the community and voluntary sector – could improve their collaborative approach to make better use of limited resources and improve the effectiveness of services for the benefit of older people.

## Section 4: Needs of older people in Galway City

### 4.1 Introduction

This section of the report will address needs and gaps in services that were identified by older people and service providers in the interviews and focus groups undertaken. As previously stated, the interviews and focus group sessions were semi-structured and the questions centred on ascertaining the most important needs of older people and the gaps in services.

*“Ireland has an aging population. Aging is a natural process. However the onset of old age is often fraught with difficulties as people experience the twin problems of increased dependence on health and social services, at the same time as they experience a reduction in the amount of influence they have over the delivery of those services.”*  
(Irwin, 2002)

This section outlines the findings of the research, principally the issues and needs of older people (with particular reference to those experiencing marginalisation, poverty and social exclusion), and the gaps in services and supports as identified by older people themselves and by service providers. The section is a distillation of interview and focus group participants’ views on and responses to the questions posed. Focus group and service providers’ findings are presented separately.

### 4.2 Focus groups

#### Focus Group 1: Traveller community

This focus group identified the needs of older Traveller males.

Transport – particularly if Travellers have a hospital appointment, they “*need someone to take them and collect them*”. In addition, participants felt that they needed someone to remind them of appointments.

Literacy difficulties were considered to be “*a big issue*” for older Travellers, but there is also the factor that “*older Travellers are not interested in learning to read and write. They figure they’ve gone through life without literacy skills so why bother now?*”

However, because families and kinship is still very strong among the Traveller community, the group felt that most Travellers (regardless of age) turn to families for help, advice and support. For example, Travellers “*wouldn’t go to CIC (Citizens Information Centre)*” as they

*“wouldn’t want other people involved in (their) business”*. The group acknowledged that Traveller men are slower than women to get involved with services.

### **Focus group two: Traveller community**

This focus group identified the needs of older Traveller females.

*“Who is going to employ a Traveller woman over 55 without education?”*

**Focus group participant**

No education: Lack of education is a real problem for older women in the Traveller community and has led to a sense that they *“never got a chance in life”*. They feel that it limits their opportunities for work and further education, and undermines their confidence and self-esteem.

Literacy: This was a clear need, and there was a sense of despair that whatever chance they had when they were young and illiterate, they had even fewer opportunities now.

Personal time: *“Need own space”; “need for peace”; “Have always been housebound”* – this issue gives some insight into the demands on older women in the Travelling community. They felt that they spent so much time caring for others, there was a real need to have time to themselves away from domestic and caring duties. Considering that caring responsibilities last well into their own older years (because of care of parents and other older family members), respite and time for themselves is clearly needed.

Defining ‘older’: Interestingly the group felt that 55 years was too old as a cut-off for ‘older Travellers’, which should be based on “stage in life” rather than “age” because Travellers appear to age earlier than the wider population.

### **Focus group three: day centre participants**

This group considered social interaction and meeting other people to be of great importance. Some participants also needed *“people to visit them in their own homes”*.

Access to services was a stated need, and it was important for *“services to come to them”* (*“like here in the centre”*).

*“I didn’t see anyone since last Thursday night until I came here today (Tuesday).”*

**Focus Group participant  
(Day Centre)**

The group identified the need for a purpose-built day centre with daily access, as the limited service was not enough.

Practical help in the home (e.g. vacuuming, cleaning, taking the bins in and out) was clearly a need as most participants lived alone.

The need for information on rights and entitlements to pensions and bereavement support was raised. While the group had been presented with this information collectively, there was a need for a more individually tailored approach.

The lack of bus shelters (“*none on the Clybaun Road*”), poor-quality footpaths, the lack of footbridges over busy roads or junctions, and the failure of buses to come on time or to come at all, were all issues cited by the group from a safety point of view.

#### **Focus group four: social support participants**

Some participants in this group were residents of nursing homes and they spoke about the need for more chapel pastoral care in these homes. The participants felt very strongly that because the state’s nursing homes were often located far from families, visits and support were therefore limited (e.g. families from Galway have to visit partners or parents in Loughrea state nursing homes). The distance, the lack of transport and the need to use public transport were often deterrents to visiting, which contributed to both families’ and residents’ loneliness and isolation.

Participants indicated a need for more day care centres with activities and services such as hairdressers and chiropody. The centre should operate all year round, unlike some of the existing day services in the city, which close if staff are not available and for the whole of August. Some who were living in their own homes would use mobile services (such as hairdressers) if they were available. Participants also identified the need for a register of ‘handymen’ so that they could access trusted and reliable people to carry out small jobs in the house.

The HSE came in for some criticism in that participants felt that the range of services were intimidating and they did not “*know where to start*” in accessing the relevant service, and even if they did they felt that the HSE itself was insensitive to their needs and unhelpful to them – “*it’s almost like they don’t want us to use the service*”. Delays with decisions on grants or just with information on seeking grants were raised as problems. The participants felt strongly that there was a need for a central information point in the HSE to allocate callers to the appropriate service. They also felt that overnight home help care was required, as well as a home help service more tailored to their needs – i.e. more practical rather than personal

care. Participants felt that they and their peers had the right to stay in their own homes as long as possible, and that sheltered housing in the city might assist with that.

Finally the participants felt that the lack of advocacy was a key gap in services. They felt that a service which would advocate on behalf of older people is required in the city. They also felt that there needed to be a one-stop-shop service comprising information and support services, and social, cultural, economic and educational activities. The service – essentially a resource centre for older people – should be central and accessible by public and private transport in the city.

#### **Focus group five: housing scheme participants**

The HSE received some criticism, with participants feeling that the onus was on them as individuals to “*get through the system*”, as opposed to their being assisted through it. They felt that one of the key gaps in services was the lack of a HSE call centre (“*where you could ask questions*”), and that this service should be person-centred. Another gap identified was advocacy for older people.

Issues raised by this group included a fear of walking around Galway City, a fear of passing people who congregated outside pubs or on walls drinking alcohol, and “*teenagers allowed to gather*”, all of which they found intimidating.

This group spoke about ageism, the “*feeling of been treated like a child*”, and being referred to as “*pet*” or “*dear*” by service staff.

### **4.3 Service providers**

Service providers identified a broad range of needs and gaps in services. They are arranged here thematically and not in order of importance.

#### **Loneliness, isolation and abandonment**

Time and time again, service providers highlighted loneliness and isolation of older people as a key issue. Contributory factors include:

- Abandonment: little or no time with family, due in some cases to a ‘*falling out*’, or because family members lack the time or moved away for work or personal reasons.
- Loss of a partner and a lack of counselling service for this.

- The main carer is unable to access social networks, respite or personal time due to lack of support.
- Living alone.
- Fear generated by a perceived rise in crime or by a lack of community/neighbour support.
- No support network: *“no one to call on when in trouble”*.

One service provider described how their service visited an older person in the city and provided material support to her, but upon her death the money was found collected in a tin box and returned to the service, clearly indicating that the person just wanted someone to visit her every week. Service providers also spoke about the abandonment of older people, possibly due to family conflict (*“maybe not getting on with the daughter-in-law”*), or simply to families not living nearer by (*“Families are moving abroad, moving away...”*), or *“making little or no effort to ensure their parents are okay”*, or to the family system having changed (*“more women working outside the home so they are not as involved as other generations of women with their parents”*).

This is why service providers feel that being able to get out and about is so important, and why good public transport is such a basic need: *“If they are able to get out, they go to Mass which is such a social as well as a religious thing for them”*. Service providers also felt that men living alone find it harder than women to go out: *“they are less able to manage and they fear loneliness more. This can lead to depression, paranoia and confusion”*. Some service providers think that older people could look at ways to become more involved in their community, more self-reliant and able to do more physical things. They felt that older people could be more active, that there is room for more activities in their lives, and that this would reduce the loneliness and isolation. Families think it’s better *“to get someone in”* to look after the older person. What stops people from getting involved in things? A lot of service providers felt that it was the *“for the elderly”* label.

In addition, some service providers felt that the social involvement activities were leading to further isolation for some people. They felt that some social groups and activities had *“a class distinction”* and that some activities cost a lot of money: *“cost of the fee, cost of going away, cost of materials”*. The financial implications, they felt, were too great – especially for those with limited financial resources – and it resulted in older people being further isolated.

## **Addiction**

One of the most surprising findings from this study was service providers' increasing experience of older people who are grappling with addictions and associated conditions such as depression and other mental health problems. Some service providers have noticed an increase in older people presenting with addiction over the last five years. Addiction can range from secretly drinking alcohol at home alone, to addiction to prescription drugs such as anti-depressants combined with alcohol. Service providers felt that factors contributing to the rise in addiction among older people include:

- Retirement and finding it difficult to adjust to a possibly less social and less structured lifestyle.
- '*Empty nest*' stage of life. Dealing with the consequences of family moving away, especially for older women who may have worked in the home and concentrated less on their own needs.
- Loneliness and vulnerability and the loss of support networks of family, friends and neighbours.
- Coping with life crises such as the loss of a lifelong partner and the resulting (sometimes unacknowledged) bereavement that many older people suffer.
- Physical or verbal abuse or bullying by a family member (sometimes in arguments over property).
- Abandonment of older people.
- Domestic violence and women's need to escape the suffering that it brings.

Service providers found that women are better at accessing support services, and that men find it harder. Service providers are also concerned about the limited number of detox beds available in the west and the lack of awareness of this issue.

## **Community indifference to older people**

The lack of social connections and responsibility towards older people in the community was a recurring theme during this study. There was agreement that societal support structures are breaking down, and that those we have are less resourceful in creating supportive caring communities. More service providers are becoming aware of people not linking with support services, leading to isolation and loneliness. Service providers constantly referred to this issue, though one service provider felt that it was due to factors such as the length of establishment of an area and its class structure. For example, people living in 2-, 3- or 4-bedroom detached houses in Knocknacarra "*are not getting to see anyone*". On the other hand:

*“There’s a good old network, especially down around the Claddagh, neighbours are very good or you’d go into Mervue and a woman in 33 would say ‘Did you go into yer man in 28, how’s he getting on...?’ Compared to, say, Knocknacarra – there’s only about 500 old people living there and they are kind of middle class...working... there isn’t the same old network at all. Less interaction/contact in the “middle class” estates. People in Mervue and Claddagh don’t have the same isolation for example – great sense of community there. Middle-class estates – less contact socially.”*

- Service provider

### **Safety and security**

Household security for older people, especially those living alone, was seen by many service providers as a key issue, though for others it “*would be number four or five on the agenda, below issues such as grants, transport and insulation*”. Overall most service providers – especially the ‘experts’ in crime prevention and those building awareness of safety and security – felt that “*certain areas would see it as more of an issue than others. People living in the city would be more concerned about crime than people in the country*”. Some service providers see the biggest security concern is older people holding money in their homes. Others recognised that there was an associated issue of securing a household: “*the cost of security (Eircom phone watch etc) is an issue for old people*”.

Most service providers believe that the government “social alarm” scheme (where the older person wears a pendant) is a good scheme, but normally the individual has to go through a system and pass certain criteria to get it (e.g. you have to be living on your own) and “*there is a stigma attached to getting it. People see it as the next step in[to] the grave – or a nursing home. . . . There is also the question of cost, €70–€90 monitoring fee every year and that can put people off.*”

Some service providers spoke about older people being security-conscious but that they are not at the stage of being ‘frightened’. However, some are aware that older people are still very trustful of strangers calling to their door:

*“Yet, it came out in the last census, the number of older people living on their own who let the census people in without identification etc., no questions asked, and revealed they were living on their own etc. The census people were horrified, they were so free with the information.”*

- Service provider

Service providers also identified Garda presence as important, because “*people want to see community guards in their area – it’s more the reassurance they need*”.

## Day care centres

Service providers unanimously identified the need for day centres in the city, and that “community supports have to have basic facilities”. One service provider summed up the social, physical, intellectual and emotional support Day Centres can provide and the implications if they are not available:

*“Those who don’t have access to day centres are sitting at home all day with no social contact . . . they never see anybody. . . . The days in the day centre would be their lifeline. They get a meal, they would be seen, and they would have social contact. Often all they would get is an hour’s Home Help or Meals-on-Wheels. With the Day Centre, the bus would come along and pick them up and they would meet their neighbours. If they don’t have that, they are locked up in the house all day.”*

The limited number of services in the city is a key gap. Service providers pointed to the two-year waiting list for St. Francis’s Day Centre. They also pointed out that there are no shower facilities in Knocknacarra, so it is suitable only for people who are continent and mobile: “it only caters for those people who are fairly ok”. Self-neglect by older people was also consistently raised by service providers (since older people’s capacity to look after themselves is a big factor), and many saw the provision of day centres as helping to address this.

## Inadequate respite and emergency respite response

Service providers recognised the lack of respite for carers as crucial, principally because of the lack of respite beds in Galway City. Service users highlighted The Alzheimers Foundation facility in Athenry as being very good and flexible, but they added that “you have to book respite a year in advance (people do this from year to year)”.

Compounding this problem is the lack of an emergency respite response, especially where an older person is caring for another older people. One service provider described the following scenario to illustrate the issue:

*“Two older people are living together and one is caring for the other. If the main carer (husband) takes ill and has to go into hospital, the person being cared for may be left at home, perhaps even bed-bound. The following day a health professional calls, to find the other person alone, incontinent, bedridden. She’s seen nobody since the ambulance took her husband. Where do you put her? No emergency response in situations like this. No respite beds.”*

**Service Provider**

Service providers felt that older people and their families do not have the means to get people into private respite care. Overnight emergency care is €40 per night, and “*for under-the-counter [care] it’s €100 – that’s if you can get them and then you don’t have a garda check or anything*”. Some service providers felt that it was cheaper “*to go into a nursing home*”, but regardless of cost some older people have to use nursing home accommodation if respite is needed.

### **Nursing home care**

Service providers agreed that the exposure of nursing home standards in the past as being under par has resulted in improved standards. But there was also a sense amongst service providers that most older people who are resident for short periods of time in nursing homes, and who are well, want to go home because they say they have no privacy in the nursing home: “*they can’t go to the shop, they can’t make a cup of tea or have a cigarette when they feel like it, it’s totally institutional*”.

University College Galway has a ‘winter initiative’ system when a person is medically fit for discharge but is not fit to go home. The hospital gives a person two weeks in a nursing home, after which they have to decide whether they are going home or going to pay in order to stay. A shared room in one nursing home in Galway City costs €80 a week. Most service providers feel that for older people dependent at home it would be out of their reach to afford 24-hour home care.

### **Housing**

For some service providers, providing practical housing supports at an appropriate time is important. They feel that information is required so that older people know what they are entitled to *before* they or the system have to react to a crisis. For instance, if a person is coming out of hospital and their housing requires change – the house may be hard to heat, or the person may be unable to go upstairs to their toilet, and:

*“You end up giving them a commode for their sitting room . . . whereas if we got in when they were 65 we could say: “Now you’re getting on in years. There’s a grant you can get and you could get the toilet adapted for downstairs” . . . instead of people going into hospital and they have to stay in for an extra two weeks in order to get the toilet adapted downstairs.”*

### **Out-of-hours nursing service**

Service providers point to a key gap in the health care system, where the current Public Health Nurse Service is from 9.00am—5.00pm. Services supporting older people feel that

there is a need for a twilight nursing service, e.g. 9.00am—11.00pm, because so many complex cases arise all the time, with people who need help to eat, drink, use the toilet, etc. coming home from hospital. The system currently allows for a service up to 5.00pm, but after 5.00pm *“you don’t need to be washed or changed, and you won’t get a drink until 9 o’clock the next morning”*. So there is a need for a twilight nursing service or the use of health care assistants. With the planned primary care development there is a suggestion that all nurses will work 8.00am—8.00pm in the community, but this has to be negotiated with the unions.

### **Chiropody**

Many service providers, especially those providing health care supports, indicated that chiropody is crucial in the care of older people. However, they indicated that there are not enough chiropodists. Older people over 65 years are entitled to free chiropody three times per year (from designated chiropodists who are paid a fee from the HSE), but service providers feel that they need more of this service. In addition, the service has been streamlined because of cutbacks and there are now waiting lists for home visits.

### **Sheltered housing**

There is government support for older people staying in their own homes, and older people want to stay in their own homes. However, service providers feel strongly that sheltered housing needs to be developed in Galway City in order to respond to this, *“but it [sheltered housing] needs to be aimed at older people. They want to be independent and they want to be in their own communities. They are not in the nursing home category, they want their own privacy”*. However, the lack of a suitable site or sites from the City Council is a barrier to this development. Service providers also point out that if the option was available, older people really would want to stay in their own communities, which would require considerable negotiation and flexibility on behalf of the City Council.

### **Home help services**

Many service providers felt that home help is the biggest service gap where older people are concerned. The waiting time for home help is 4–6 weeks. Issues raised include:

- The narrow definition of role. For instance, home help providers cannot provide cleaning services.
- The lack of night-time home-care services.
- The need to recruit appropriate personnel who can care for and empathise with the older person. It was felt that carers should be able to speak English well, be adequately trained, and match the client.

Service providers also feel that “*there is not enough of them [carers] and not enough hours allocated*”. They feel that while some older people certainly require “personal care”, a great many older people do not:

***“They don’t want personal care . . . they want someone who will do light housework when they come home after surgery, someone that will tidy up a bit, clean the windows, dust. This is what they want from a home help, this is what they think a home help should do. We tell them that things like that must be paid for by themselves. They say their daughter does the shopping and they have family or someone close to tend to their personal care.”***

This certainly corresponds with what older people themselves indicated in the focus group. Time allocated for home help was considered to be very short, and it includes travel time – which means that for someone living in a very isolated area, “*home help has just enough time to get there, ask ‘are you alright?’, make a cup of tea and go*”.

Most service providers agreed that there was a need for someone “*to do odd jobs for older people – someone to do the garden, etc. but always afraid of being ripped off, they don’t trust people, they read stories in the paper*”. Service providers suggest that private agencies are now picking up this gap but that people are anxious – afraid of strangers coming into the house and “*afraid of being robbed, etc. – wouldn’t have the confidence or trust in others*”.

Service providers feel that “*anyone employed by the HSE older people don’t see as strangers, [they] see them as safe and are happier with a service from the HSE . . . they are so vulnerable . . . would love home help to actually take them to shops.*” The service providers were in no way blaming home help services, but insisted that the policy makers are not giving the patient “*what the patient wants*”. This is a nationwide issue, not just a Galway City one. It was felt that the system may improve once the primary health care system was rolled out.

## **Transport**

Service providers spoke about rural transport schemes which operate in rural communities, but said that there is nothing like this in Galway City. They felt it would assist in “*taking away older people’s isolation*”. Service providers felt that older people often experience difficulties with transport to hospital appointments, and that hospital-only transport for patients already exists – the hospital provides transport in certain cases (e.g. for cancer patients) and this service should be extended to vulnerable older people.

## Waiting lists

Service providers spoke of a sense of frustration over waiting lists. For example, they claim that there is a two-year waiting list for occupational therapy, and ten months for physiotherapy and speech and language therapy. However, the health care professionals who make an assessment then make a referral to different agencies, and the person goes on a waiting list. Families then feel that the health care professional *“is doing nothing and feel let down because by the time the person is seen they are in a chronic state”*. Health and social care workers trying to provide a preventative service feel that it is *“impossible”*:

*“When we have referred and two months down the line we get a phone call from the family ‘Did you do this?’ etc. and we have to follow up on the follow-up! Even if there was an acknowledgment that the referral was received and the family got a letter stating this, the family would know that the worker had done his or her job.”*

## Risk of poverty

Service providers were divided over whether older people were more at risk of poverty than other groups in Galway City. Some felt that they did not see any evidence of poverty among older people, while others described what they felt was *“fuel poverty”*.<sup>30</sup> They described their experience of visiting older people in their homes and *“seeing a very small fire down and it would be bitterly cold”*. Others outlined how some of their service users worry about heating and the cost of heating big houses. Others spoke about how some older people were saving for their funeral and would *“go without essentials”* because they were so worried about having enough for a grave. Some services are seeing financial hardship due to the increasing cost of fuel and food, and a key concern for older people is funding for private nursing homes.

## Access and supports to information

Access and supports to information arose as a constant theme in the interviews. Service providers highlighted the need for older people to receive assistance with form filling and the bureaucracy around it *“for everything”*, and they felt that *“it puts older people off”*. Service providers agree that there is considerable bureaucracy in applying for various services and entitlements, *“for example, home care packages, housing aid for older people, home help and home care cash grant . . . there are separate forms for everything – home care package and home help etc. could be one form only”*.

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Another issue was the myriad information sources: when older people need information they may not know how to access it, especially if they are ‘in a panic’. Service providers felt that there was a need for a central number to access health board services and that it should “*be printed in BIG NUMBERS on leaflets everywhere and displayed everywhere*”. This would be a number where people could get information on everything from home help to chair lifts. This was also raised in relation to education and social supports, and in terms of the VEC having a similar system.

***“People who know how to access information get things. People who don’t know where to go for help may need that help more than anyone.”***

**- Service Provider**

Service providers also raised the need for the local media to be more proactive in getting information out there to older people. They felt that papers should carry a free ad as a service to the community, with this central number and other useful numbers, and that local radio should ensure regular information and discussion slots for older people.

### **Advocacy**

This was another common theme amongst service providers, who felt that an advocate for older people would: help them find out information so they could make informed decisions and life choices, support older people in making those decisions, and help them to tell other people what they want (family members, organisations, social workers, health workers or relatives). One service provider highlighted the need for self-advocacy among older people, while another felt it was important to have someone accompany older people to hospital or GP and advocate on their behalf. As one service provider pointed out, “*changes in the way GP services are provided (e.g. the Westdoc situation can be confusing for older people, don’t know the doctor who attends them. Also, very little home visiting being done now)*” would benefit from advocacy services.

### **Elder abuse**

Service providers, especially those supporting very vulnerable older people, were very aware of the disturbing incidence of elder abuse that “*is kept hidden*”. They saw as very positive the appointment of a social worker specifically to address the issue. Firstly they felt that at last it was being named as an issue. But they also felt that more local research was required, as well as an awareness-raising programme not unlike that carried out in relation to violence against women

## **Representation and lobbying**

This theme was raised by a small number of organisations that participated in the study. There was agreement among them that the issues and needs being raised were “*very middle class*”, and that those older people’s needs, for example in local authority housing, were “*not coming through as social inclusion issues*”. They felt that the most vulnerable were not representing themselves due to a lack of capacity building, and that services were operating without any or enough older people represented in their structures.

Another concern by organisations was the lack of awareness of the lobbying power older people had. Older people vote more than young people, yet the power of their vote has been largely ignored – indeed, older people themselves appear unaware of their potential lobbying and voting power. The lobbying power of the older people in other countries (e.g. the USA) is well known, yet there is limited awareness of how lobbying and the vote can play a part in bringing about change for older people and their local communities.

## **Dementia and Alzheimer’s Disease**

Dementia is a relatively new policy and service focus, but there is an increasing number of people in Ireland affected by different dementia disorders. (There are currently 38,000 sufferers in Ireland and this is set to double by 2020; care will cost more than cancer support.<sup>31</sup>) One such disorder is Alzheimer’s Disease, which affects 1 in 10 over the age of 65 years and 1 in 4 over the age of 80.

The needs outlined by organisations working to support sufferers or their families are ever-increasing. Organisations felt that a key need, at least initially, is that people want the opportunity to speak with the organisation about the implications for the family member and themselves. But there are also the very vulnerable who have no children or no immediate family, and therefore no intervention or network of support and organisations addressing this need. In addition, the services felt that there is a need for information about the disorder and about what services and supports exist. Other needs and issues include:

- Difficulties with nursing homes are common, with the possible refusal to take Alzheimer’s patients if the nursing home does not have a specific Alzheimer unit.
- Funding is always an issue for self-financing organisations.
- At a local level there is a need for a dementia-specific Galway City day care unit with a staff ratio of one worker to four clients.

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<sup>31</sup> Alzheimer Society of Ireland

- Long-term care does not need to be full-time, but a concept has to develop in Galway of assisted living within a social housing context, with day care and where residents can still keep basic living skills (there are models in Sligo and Dublin).
- Social clubs for carers and individuals affected by the disorder coming together for day care and support groups is also a need.
- Promoting things like a healthy diet to prevent build-up of plaque on the brain.
- There are concerns among service providers that patients' experience of care could be that of being "locked up and drugged".
- More services are required for those coping with diagnosis, such as counselling, mediation and advocacy, and to diminish the stigma in seeking out help.

## Carers

Carers who participated in this study outlined how being a carer affects the social aspects of their lives. Compounding this is what they perceive to be a lack of community spirit, with less "dropping in" by neighbours. The specific needs they cited include:

- The need to access social and support networks in order to counteract the isolation, stress and loneliness experienced by many carers.
- Respite and coming together with other carers is important, as stress can be difficult to handle. They are "*on the edge all the time*" and this has mental health implications.
- The need for day care centres in Galway City with a social club for carers. Carers felt that they just needed 10–15% of care. Day centres could be established privately if necessary (similar to the National Childcare Programme for building crèches).
- Lack of interface with public health nurses, community welfare officers and social workers.

## Sexual Minorities – lesbian, gay and bisexual (LGB) people

Representative organisations indicate that older LGB people are more likely to have grown up in a society where their relationships had to remain invisible, where forming and maintaining loving relationships was difficult and at risk of being treated as a criminal offence. Even when a gay/lesbian couple has been established for thirty or forty years they are not recognised, supported or protected by the law, and can face particular difficulties associated with older age and the potential

*"My partner and I had been together for 25 years when he was diagnosed with Alzheimer's. When he went to hospital I kept on telling them that I was his partner, but they moved him into residential care without asking me. I phoned up to see how he was and he wasn't there."*  
**Age Concern: The Whole Me, quoted in GLEN submission**

for increased vulnerability. Representative organisations highlight that older lesbians, gay men and bisexual people are “*five times less likely to access services for older people than is the case in the general population, because they fear discrimination, homophobia and ignorance and that they will have to hide their sexuality*”. Older LGB people who have partners may face difficulties in establishing the validity of their relationships with health and care providers. Older LGB people lack traditional support networks, thereby lessening the people they can call upon in times of crisis.

### **Liaison between services**

There was much concern among service providers over the lack of networking opportunities in Galway City, and the fact that “*liaison between groups is not as good as it might be . . . there is room for improvement*”. There was certainly a sense that “*professionals are going to seminars and talking about issues and nothing is getting done*”. Some service providers felt that some services were not liaising with one another: “*one not knowing what the other is doing – e.g. administration of medication*”. They feel that older people could more easily stay in the home if all the services worked together.

### **Disability**

Disability organisations feel that older people are disadvantaged simply through growing older and becoming less mobile. They may also receive less income, leading to poor dietary intake and poorer quality of life, and they may indeed experience poverty. These organisations feel that there is also an increased likelihood that the older person may experience abuse, whether through neglect or becoming subject to a dominant carer. Disability support organisations have grappled with all of these issues in the past in Galway City. Organisations feel that there is a need for more day care services in the city. There is a waiting list of eleven people in one disability support organisation in Galway City, and all are over the age of 65 years. In addition, disability organisations are limited in the service they can provide to older people due to limited funding. Organisation representatives also spoke about the need for advocacy and empowerment of service users who have a disability, and about the need to raise awareness of the services disability organisations can provide.

### **Literacy**

According to service providers, the most vulnerable age group of people with literacy difficulties are older people – they are often early school leavers who went to England to work in manual labour, as builders, etc. They may be out of education for a very long time. They may have turned down promotions in work over the years for fear they would be “found

out'. Over-55s have more traditional fears about spelling, e.g. they would be ashamed if they spelled things wrong in application forms. They have had a lifetime of worrying about their lack of literacy skills. Service providers feel that raising awareness of this issue is always a need, though publicising their services is difficult as the target group is unable to read, but they feel that TV and radio programmes and advertising help.

#### **4.4 Summary**

The interview with older people and service users highlighted a number of pertinent issues, needs and gaps in services. This research sought the views and opinions of a wide variety of people. The primary focus was on older people and what they felt were their needs. Older Travellers cited the lack of education and literacy, and the lack of trust or tradition in accessing support services. Focus group participants cited the need for practical supports in the home, more access to day care centres, information services that will come to them, and road safety issues. The fourth focus group participants spoke about the need for pastoral care in nursing homes and the difficulty in accessing nursing homes where they were distant from their homes, partners or friends. The need for day centres was raised in this group, as well as the practical supports required in the upkeep of a house, and how to access 'handymen' who can be trusted. Easier access to services such as the HSE, advocacy, a one-stop-shop for day care, and social and information support in the form of a resource centre for older people were identified. Those participants in the study living in supported accommodation indicated that safety in Galway City was a key issue for them and, like the previous focus group, desired an easier path through the health and social support system. This group highlighted ageism as an issue and how services referred to them.

Service providers mirrored many of the issues and needs of older people themselves. Loneliness, isolation and for some older people fear are clear issues. The gaps in services are obvious: day care centres, resource and information centres, counselling and support, addiction support, out-of-hours services, sheltered housing and advocacy. What is most obvious from this overview of needs is perhaps the lack of co-ordination of services and the level of service provision which is resource-led rather than needs-led. Certainly the lack of primary care teams in the community is an issue, and it is seen by many service providers as the great hope for co-ordination of services and gaps being filled.

But behind these issues and needs are individual older people with sets of individual circumstances that are difficult for some of them to cope with. While this study has a particular focus on the most marginalised, it is hard to see how older people right across

society are not touched by some of the issues and needs raised above, regardless of their class status. Because some of the services appear to be based on systems that are inaccessible and bureaucratic, they provide very little benefit to the clients.

For a minority of services, the protection of the rights and promotion of the interests of older people is so far removed from the delivery of the service (resource-led ethos) that there is a question of “*how do they get away with it?*” Part of the answer may lie in the counterbalance that there are organisations that do promote the independence, empowerment and rights of older service users. These “*green shoots*”, as one organisation phrased it, are driven by people who genuinely believe in the rights of older people and who respond to their needs and listen to their voices. These organisations consistently try to find ways to make sure older people get the services they deserve. They are essentially filling the gaps. But the lack of co-ordination and liaison between services appears to be hindering a mass critical effect for older people. There is no plan at a city level for older people’s services. There is a wide range of services active in Galway City, yet the inter-agency approach is “*patchy*” and in many cases crisis-driven. The risk of this is that services will drift and crisis-manage and not “*get to those most in need*”.

#### **4.5 In Brief**

- Literacy and attitudes to literacy amongst older Traveller men is an issue.
- Voter participation among the older members of the Traveller community and the wider older population is poor.
- Kinship and care of older people within the Traveller community remains strong.
- Accessing information beyond the Traveller community is limited due to a lack of trust in the system.
- Different parts of the city are presenting different needs for older people.
- Loneliness, isolation and fear are considered to be very prevalent amongst older people in the city.
- Abandonment by families is something service providers are seeing more of, due to families moving or family tension or simply neglect.
- Addiction is increasing among older people, especially women.
- Women are better than men at accessing support services.
- Community indifference to older people is considered to be a key feature of Irish society and is as prevalent in Galway City as anywhere else.
- Lack of day care centres in the city is a key need outlined by service providers and older people.

- The cost of nursing home care is high, and difficult for older people to sustain – the service is financially strained.
- Some houses in which older people are living require adaptation in order for them to continue to live independently, but this is not always planned for.
- Out-of-hours nursing service is increasingly necessary to ensure care of patients in the community.
- Access to chiropody services is increasingly difficult for older people.
- Security and fear of crime is becoming more of a worry for older people.
- The cost of a pendant alarm is prohibitive.
- Plans for sheltered housing are urgently needed in Galway City.
- Neither older people nor service providers feel that the home help service meets the practical needs of older people.
- Waiting lists for health services are frustrating to service providers.
- Preventative care of older people is very difficult to carry out.
- There is some evidence of a risk of fuel and food poverty amongst older people in the city, compounded by inadequate housing.
- Access to supports in dealing with bureaucracy and form filling, and the provision of central phones lines, were seen as needs.
- Older people and service providers identified an advocacy programme as a need.
- Elder abuse is coming to the fore and is being named as an issue for older people.
- Older people's representative and lobbying power has not been fully realised.
- Support for dementia disorder patients and their carers was identified as a need.
- Carers require support and social interaction.
- Older LGB people have particular social network needs, and their relationships need to be recognised by service providers.
- Liaison is required between older people's services in the city.
- Older people are at risk of disability, and require supports to ensure independent living and day care services.
- Literacy amongst older people is particularly hidden and must be sensitively addressed.

## Section 5: Conclusion and recommendations

This section of the report provides a conclusion and recommends actions to address the unmet needs of older people and organisations supporting them in Galway City.

### **Conclusion**

The purpose of this study was to profile the services and supports for older people in Galway City, especially those experiencing disadvantage. It sought the views and opinions of older people and service providers through qualitative research. From this process a number of themes arose, which were outlined in the previous section and with which we will conclude here.

As we have seen from the demographic profile, the older population of Galway City is 16% of the overall population. There are 6,140 people aged over 65 years in Galway City. In general terms there are more older women than older men – especially among the very old, as women live longer. There are 6,386 females over the age of 55 years, compared to 5,214 males. Twenty-three per cent of those living in private households over the age of 65 years are living alone.<sup>32</sup> The Rockbarton, Renmore and Lough Atalia communities have the highest percentage of older people. The demographics are important because they present a rationale for the location and type of service that may need to be developed.

What is striking about the needs identified in this report is their similarity with the needs identified in the HSE Conference Report on Healthy Ageing in Galway City, where issues such as sheltered housing, representation, day care centres, loneliness and isolation were all identified. In the two years since the conference and action plan, however, we did not see evidence of concrete progress on any of these issues.

Behind each of the needs and issues mentioned are real people experiencing real problems. Service providers and older people whom we interviewed acknowledge that of the 11,600 older people in Galway City, the majority are coping very well with this stage of life, enjoying and living a full and active life. However, there are those in the city who experience disadvantage as a result of, among other things, their class, gender, ethnic group, location, educational status and inability to have their voices heard and listened to.

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<sup>32</sup> Census 2006 CSO

Older people who participated in the study feel that society and services expect older people simply to adjust to the circumstances they are in, rather than supporting them to make their own choices. They feel they are labelled as one homogenous group, which is depersonalising to them – they think it is essential to focus on the individual.

Many service providers believe that social class has a major impact on the lives of older people in Galway City. It was linked to how older people are able to afford food, good housing, heating, mobility, leisure and recreational services and supports. Social class, as some service providers stated, also determines the level of independence an older person may enjoy, their autonomy, their choices, their social networks and their participation in the community. Certainly purchasing services is easier for those who have the resources to pay for services privately, though it has to be said that the evidence points to this being a small number of older people. It is obvious from service providers and older people that poverty is not just about having insufficient money.

It is also clear from the study that society will have to prepare for additional sets of older people's needs in the future. Older people's empowerment to make decisions and to contribute to decisions in the services and supports they receive is limited. They feel that they are almost seen as a separate and distinct group who should be set apart because of age. They are seen as a problem, potentially placing the older person in a dependent role, and if that happens "*they become a burden on state services and society*". The lingering feeling from listening to older people and service providers is that the stretched and under-resourced services – particularly some of the health and social care services – are not focused on supporting old age in a positive, empowering manner, or on promoting independence and well being, but more on how much will it cost. The unfortunate result of this, as service providers have stated, is "*that it will cost more in the long run*". Older people and service providers feel there needs to be a focus on planning and providing services that meet the needs of older people based on participation, involvement, empowerment and ensuring that the individual is informed to make the choice that suits them.

We all hope that our later life will be as positive and fulfilling as possible. As we grow older we want to stay healthy and independent, we want to be treated equally and fairly, and we want services that meet our needs and that are not tied up in bureaucratic systems and processes. We want to be seen as individuals who have a whole range of experiences and can have a continuing contribution to society. We want to feel that we belong and are engaged in meaningful familial and societal activities. Unfortunately, this appears to be a very distant hope for the most vulnerable older people in Galway City.

In light of the findings and discussion we would like to make the following recommendations, to be taken on by a working group established by Galway City Partnership:

## **Recommendation 1: Support Infrastructure**

### **(A) Day Care Centres**

Day care centres with a full suite of services (showers, food etc.) and supports (counselling, advice services etc.), including transport, should be strategically developed in areas throughout the city. The centres should be person-centred and outcome-focused. The feasibility of developing these centres should be assessed as soon as possible, and demand in different areas needs to be qualified in consultation with older people, carers, voluntary organisations and the HSE.

### **(B) Lunch Clubs**

The feasibility of establishing Lunch Clubs similar to those established by COPE in the Imperial Hotel should be examined in other parts of the city, where demand or population numbers do not allow for the establishment of Day Care centres.

### **(C) Sheltered Housing**

The City Council should meet with community and voluntary groups in the city to begin establishing sheltered housing schemes throughout the city.

### **(D) Resource Centre - One Stop Shop**

An Older People's Resource Centre should be developed in conjunction with older people, carers, state agencies and community and voluntary organisations in Galway City. It should specifically address the information, social, cultural and care needs of older people.

### **(E): Dementia-specific Respite Centre**

A dementia-specific respite centre should be developed for Galway City.

### **(F) HSE Call Centre and Help Line**

The HSE should develop a call centre for older people where they can have their queries dealt with effectively and sensitively and be directed to the most appropriate service within the

HSE. In addition, a helpline which answers older people's queries on rights and entitlement to grant aid and assistance should be developed.

## **Recommendation 2: Raising Awareness**

### **(A) Addiction**

An awareness-raising campaign on the dangers of addiction and on sources of support should be aimed at older people.

### **(B) Care and Repair, Westside Age Inclusion**

The work of Care and Repair and Westside Age Inclusion should be highlighted in the local media to inform service users and providers.

### **(C) Safety and Crime Prevention Campaign of Older People**

A safety and crime prevention campaign should be developed to raise awareness among older people in the city on how to stay safe in their homes and communities.

### **(D) Local Media**

Local media, both radio and newspapers, should develop an older people's advice and information slot every four to six weeks, to ensure that older people hear about rights, entitlement, social and community events, etc.

## **Recommendation 3: Building Supports**

### **(A) Visitation Programmes**

Visitation programmes such as Galway Contact and Care Service (Care and Repair) should be expanded and structured accordingly with adequate staff, resources and volunteers. This recommendation is made in the context of the high level of loneliness and isolation experienced by older people in the city.

### **(B) Phone Link Service**

A phone link service should be established in the city to check in on older people living alone and to remind them of appointments.

### **(C) Advocacy Service**

An Advocacy Service for older people should be developed to help them find information, make informed decisions, support those decisions and tell families and services what they want.

**(D) Loneliness, isolation and lack of social contact**

A local study should be carried out with older people and organisations supporting visitation programmes, to ascertain the levels and causes of and solutions to loneliness, isolation and lack of social contact in Galway City.

**(E): Home Help Service**

The HSE should review their home help service and evaluate its effectiveness and the level of customer satisfaction.

**Recommendation 4: Representation**

**(A) Inter-agency Approach between Service Providers**

All service providers should meet annually to exchange information on activities and issues, and to seek joint projects for collaboration.

**(B) Policy and Lobbying**

Galway City Partnership, in conjunction with community and voluntary groups, should build capacity, train in policy making, and lobby communities of older people around the city before the local council elections in 2009, with the specific aim of achieving sheltered housing schemes in Galway City. Accessing funding through initiatives such as the Equality for Women Programme should ensure long-term outcomes and more lobbying and real representative power for older people in their communities.

**(C) Local Action Plan for Older People**

A local action plan should be developed by older people's service providers and communities, to help address some of the issues raised in this report. The action plan should contain commitments from services providers and agencies to the actions drawn up.

Appendix 1: Galway City: separated/divorced population aged  
55+ (2006)

**Galway City: Separated Population 55+ years (2006)**

| Population<br>55- 59 |     | Population<br>60-64 |    | Population<br>65-69 |    | Population<br>70-74 |    | Population<br>75-79 |    | Population<br>80-84 |   | Population<br>85+ |   | Total |
|----------------------|-----|---------------------|----|---------------------|----|---------------------|----|---------------------|----|---------------------|---|-------------------|---|-------|
| M                    | F   | M                   | F  | M                   | F  | M                   | F  | M                   | F  | M                   | F | M                 | F |       |
| 73                   | 117 | 57                  | 70 | 33                  | 39 | 23                  | 27 | 7                   | 10 | 2                   | 2 | 2                 | 2 | 464   |

**Galway City: Divorced Population 55+ years (2006)**

| Population<br>55- 59 |    | Population<br>60-64 |    | Population<br>65-69 |    | Population<br>70-74 |    | Population<br>75-79 |   | Population<br>80-84 |   | Population<br>85+ |   | Total |
|----------------------|----|---------------------|----|---------------------|----|---------------------|----|---------------------|---|---------------------|---|-------------------|---|-------|
| M                    | F  | M                   | F  | M                   | F  | M                   | F  | M                   | F | M                   | F | M                 | F |       |
| 50                   | 72 | 29                  | 46 | 14                  | 21 | 11                  | 13 | 5                   | 8 | 2                   | 1 | 0                 | 0 | 272   |

## Appendix 2: Directory of services to older people

### **Active Retirement Ireland**

Tel: 01 6792142

Email: [fara@eircom.net](mailto:fara@eircom.net)

Website: [www.fara.ie](http://www.fara.ie)

Tel: 091 255681

### **Galway City Centre**

Bridge Club, St. Mary's Road

Chair: Christine Langan

Tel: 091 565843

### **Active Retirement Associations in Galway City**

#### **Abbey Friendship ARA**

Franciscan Hall, Newtownsmith

Chair: Fr. Hilary Steblecki

Tel: 091 562518

#### **Knocknacarra ARA**

Joyce Community Centre

Chair: Micheal McKeever

Tel: 091 516868

#### **Ballybane ARA**

Community Centre, Ballybane

Chair: Mary Creaven

Tel: 091 770925

#### **Mervue ARA**

GAA Hall, Mervue

Chair: Mary Delargy

Tel: 091 751616

#### **Barna/Furbo ARA**

Cillin (room off Parish Church)

Chair: Gabriel Colleran

Tel: 091 592248

#### **Newcastle ARA**

Westside Library

Chair: Eileen Farrell

Tel: 091 524086

#### **Castlegar ARA**

Church Hall, Castlegar

#### **Renmore ARA**

Liam Mellows GAA Club

Chair: Grainne Clune

Tel: 091 753868

#### **Claddagh ARA**

Domican Hall, Claddagh

Chair: Eileen O'Sullivan

Te: 091 583950

#### **Salthill ARA**

Captain's Deck, Leisureland

Chair: Eithne Conway McGee

Tel: 091 522015

#### **Galway Westside ARA**

Community Centre, Westside

Chair: Ann Hunt

**Tirellan ARA**

Upper Room, Church of Resurrection

Ballinfoyle

Chair: Pat Conroy

Tel: 091 767602

**Addiction Counselling Service**

Merlin Park Regional Hospital

Contact: Joe Tracy

Tel: 091 755883

Email: [alcoholc@hse.ie](mailto:alcoholc@hse.ie)

**Age Action West**

2-3 Small Crane, Sea Road

Contact: Carmel Sheridan

Tel: 091 527831

Fax: 091 527828

**Care and Repair**

Tel: Lo Call 1890 369 369

Email: [aaw@eircom.net](mailto:aaw@eircom.net)

Website: [www.ageaction.ie](http://www.ageaction.ie)

**Alzheimer Society of Ireland**

43 Northumberland Avenue

Dun Laoghaire, Co. Dublin

Contact: Dermot Mulligan

Tel: (Galway) 091 561556

(Dublin) 01 284 6616

Email: [dmulligan@alzhemier.ie](mailto:dmulligan@alzhemier.ie)

**Ballybane/Mervue Community****Development Project**

Ballybane Resource Centre

Contact: Imelda Gormley

Tel: 091 768300

**Caring for Carers – Galway City**

Contact: Christina Faherty

Tel: 091 521841

**Caring for Carers – West**

Curragh Park

Tuam, Co. Galway

Contact: Brid Lynch

Tel: 093 25362

**Citizens Information Centre (CIC)**

Augustine Street, Galway

Contact: Mary Mulkerrins

Tel: 091 563344

Email: [galway@citinfo.ie](mailto:galway@citinfo.ie)

Website: [www.galwaycic.ie](http://www.galwaycic.ie)

**West of Ireland Alzheimer Foundation**

Colonial Building

Eglinton Street, Galway

Contact: John Grant/Eileen Kelly

Tel: 091 565193

Email: [westgalway@eircom.net](mailto:westgalway@eircom.net)

Website: [www.westernalzheimer.ie](http://www.westernalzheimer.ie)

**Cluid Housing Association**

St. Joseph's Court

Unit 10B, Cleveragh Bus. Park

Cleveragh Road, Sligo

Tel: 071 9147047

Email: [northwest@cluid.ie](mailto:northwest@cluid.ie)

Website: [www.cluid.ie](http://www.cluid.ie)

**Community Garda - Garda Siochana**

Liosban Industrial Estate, Galway

Contact: Kevin Duffy  
Tel: 091 538000

**Crime Prevention Unit**  
Liosban Industrial Estate  
Contact: Gerry Mangan  
Tel: 091 768001  
Website: [www.garda.ie](http://www.garda.ie)

**COPE**  
**Community Catering**  
Unit 5, Ballybane Ind. Estate  
Galway  
Contact: Mary Stout  
Tel: 091 778750

**Sonas Day Centre**  
Walter Macken Flats  
Mervue, Galway  
Tel: 091 753402

**DeafHear.ie**  
9A St Francis Street  
Galway  
Tel: 091 564871  
Text: 086 8648659  
Email: [galway@deafhear.ie](mailto:galway@deafhear.ie)  
Website: [www.deafhear.ie](http://www.deafhear.ie)

**Galway Contact**  
189 Corrib Park, Newcastle  
Contact: Mary O'Connor  
Tel: 091 527581  
Email: [galwaycontact@eircom.net](mailto:galwaycontact@eircom.net)

**Morning Club**  
Arus De Brun, Newtownsmith

Contact: Mary Walsh  
Tel: 091 796229

**Galway City Council**  
City Hall, College Road  
Tel: 091 536400  
Email: [enquiries@galwaycity.ie](mailto:enquiries@galwaycity.ie)  
Website: [www.galwaycity.ie](http://www.galwaycity.ie)

**Galway City Partnership**  
The Plaza, Headford Road  
Contact: Declan Brasil/Maeve Murray  
Tel: 091 773466

**Galway Refugee Support Group**  
The Plaza, Headford Road  
Contact: Triona Nic Choille Ghoille  
Tel: 091 779083

**Galway Simon Community**  
10 Montpellier Terrace  
The Crescent, Galway  
Contact: Marlene O'Connor  
Tel: 091 589415  
Email: [assist@galwaysimon.ie](mailto:assist@galwaysimon.ie)  
Website: [www.galwaysimon.ie](http://www.galwaysimon.ie)

**Galway Volunteer Centre**  
17-18 Mill Street, Galway  
Contact: Donncha Foley  
Tel: 091 539930  
Website: [www.volunteergalway.ie](http://www.volunteergalway.ie)

**Health Services Executive West  
Services to Older People**  
West City Centre  
Seamus Quirke Road, Galway

**Carer Services**

Contact: Michelle Harrison

Tel: 091 548333

**Community Development**

Contact: Dan McQuid

Tel: 091 548331

**Community Occupational Therapy**

Tel: 091 775323

**Community Social Work Service with Older People**

Contact: Susan Rodden

Tel: 091 741766

**Community Nutrition and Dietetic Services**

Tel: 091 548335

**Chiropody**

Tel: 091 546040

**Health Promotion**

Contact: Evelyn Fanning

Tel: 091 548321

**Home Help Service**

Contact: Mary Coyne

Tel: 091 546365

**Home Management**

Contact Eileen de Flores

Tel: 091 548402

**Medical Social Work**

Contact: Kay O'Neill

Tel: 091 544089

**Physiotherapy**

Tel: 091 546021

**Public Health Nurse Service**

Contact: Helen Brown

Tel: 091 546344

**Senior Case Worker – Elder Abuse**

Contact: Susan Rodden

Tel: 091 741757

**Services for Older People (residential care information)**

Tel: 091548427

**Special Housing Aid for the Elderly**

Tel: 091 548412

**Speech and Language Therapy**

Contact: Catherine Flynn

Tel: 091 546010

**Irish Centre for Social Gerontology**

NUI, Galway

Contact: Aine Ni Leime

Tel: 091 495458

**Knocknacarra Day Care Centre**

(Over Joyce's Supermarket)

Contact: Martina Flaherty

Tel: 087 7624464

**NCBI**

9a St Francis Street, Galway

Contact: Deirdre Towey

Tel: 091 564926

Website: [www.ncbi.ie](http://www.ncbi.ie)

**Order Of Malta**

20 St Helen's St., Galway

Tel: 091 525879

**Rape Crisis Centre (Galway)**

St. Martin's, Claddagh Quay

Tel: 091 583149

Email: [galwayrcc@eircom.net](mailto:galwayrcc@eircom.net)

Website: [www.galwayrcc.ie](http://www.galwayrcc.ie)

CGVEC as above

**Saint Vincent de Paul**

Ozanam House,  
Augustine Street, Galway.  
Contact: Colum Noonan  
Tel: 091 563233

**Senior Help Line**

Tel: 1850 440 444

**Shantalla Residents Association –**

Shantalla Community Development  
Company Ltd.  
C/O 2, Flaherty Road  
Shantalla, Galway  
Contact: John McDonagh  
Tel: 087 7456732

**Threshold**

Western Region Advice Centre  
3, Victoria Place  
Merchants Road, Galway  
Contact: Sinead Roche  
Tel: 091 563080  
Email: [thresholdgalway@eircom.net](mailto:thresholdgalway@eircom.net)

**Vocational Educational Committee  
(VEC)**

Website: [www.cgvec.ie](http://www.cgvec.ie)

**Community Education**

CGVEC, Island House  
Cathedral Square, Galway  
Tel: 091 549400

**Back to Education Initiative**

**Vocational Training Opportunities**

**Scheme (VTOS)**

Calbro House,  
Tuam Road, Galway  
Contact: Anne Corrigan  
Tel: 091 771343

**Adult Basic Education Service**

Seville House, 2<sup>nd</sup> Floor  
Merchants Road, Galway  
Contact: Alison Jones  
Tel: 091 567660  
Website: [www.gabes.ie](http://www.gabes.ie)

**Adult Learner Guidance Service**

Sandy Road Training Centre  
Sandy Road, Galway  
Tel: 091 768596  
Email: [careerguidance@cgvec.ie](mailto:careerguidance@cgvec.ie)

**Waterside House**

Court House Square  
Newtownsmith, Galway  
Contact: Wendy Houston  
Tel:

**Westside Age Inclusion**

189 Corrib Park  
Galway  
Contact: Martin Mannion  
Tel: 091 583287

## National Organisations

### **Age and Opportunity**

Marino Institute of Education

Griffith Avenue, Dublin 9

Tel: 01 8057709

Email: [info@olderinireland.ie](mailto:info@olderinireland.ie)

Website: [www.olderinireland.ie](http://www.olderinireland.ie)

### **GLEN Gay and Lesbian Equality**

#### **Network**

Fumbally Court

Fumbally Lane, Dublin 8

Contact: Ciaran McKinney

Tel: 01 4730563

Email: [admin@glen.ie](mailto:admin@glen.ie)

Website: [www.glen.ie](http://www.glen.ie)

### **National Council on Aging and Older people (NCAOP)**

22 Clanwilliam Square

Grand Canal Quay, Dublin 2

Tel: 01 6766484

Email: [info@ncaop.ie](mailto:info@ncaop.ie)

Website: [www.ncaop.ie](http://www.ncaop.ie)

### **Irish Senior Citizens Parliament**

90 Fairview Strand, Dublin 3

Tel: 01 856 1243

**E-mail:** [seniors@iol.ie](mailto:seniors@iol.ie)

**Web:** [www.seniors.ie](http://www.seniors.ie)

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