

# Developing A National Strategy for Positive Ageing in Ireland

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## Policy Context

- Ageism
- Parasite generation – drain on resources
- Homogeneity – group metrics
- Focus on disability not ability
- ‘Fair innings’ resource allocation – partial citizenship
- Absence of life-course exploration and integration



## Discrimination Indicators

- Significant relative poverty risk among older people
- Relatively poor life-expectancy at 65 years compared to EU 25
- More so with respect to healthy life expectancy
- Age-related barriers to health and social care – age as rationing mechanism
- Low participation rates



## Demographic bounty

- Rise from 11% to 15% by 2021
- Consumption effects: new consumers of commodities and services
- Labour markets effects – experience, knowledge transfer
- Inter-generational transfers- time, money and wisdom



# Older Population: Ireland and EU

<b>Year</b>	<b>Ireland % of Population</b>	<b>EU25 % of Population</b>
1950	10.7	8.2
1975	10.7	11.4
2002	11.1	16.4
2021	14.8	19.1
2050	25.9	29.9



# Life Expectancy at 65 and 75

Year	65M	65F	75M	75F
2001/03	15.4	18.7	8.9	11.2
2005/07	16.6	19.8	9.8	12.1



# Disability

- 323,707 people with disabilities (8%)
- 136,696 >65 years – about 1/3 of older population
- Incidence of disability increases with age
- 65 year old 9 times more likely to develop disability than person aged 15-24
- Multiple disabilities
- Of disabled people aged 65 years or over two thirds experience multiple disabilities



# Care and Caring

- 149,000 carers (CSO)
- 97,500 households contain carer of older person either within or without (ESRI/O'Shea)
- 89,000 older people require care in the community (Fahey and Murray)
- 13,000 of these estimated to be in very highest dependency category (O'Shea)
- 31,000 needing high or continuous care (Mercer)
- 20,000 in long-stay care



## Family Care for Older People

- 100,000 carers of person(s) over 65 years in Ireland
- 50,000 of these caring for person exhibiting at least one of 6 specified symptoms of dementia on regular or occasional basis e.g. marked forgetfulness
- 50 per cent of these 50,000 carers were looking after someone with marked forgetfulness on regular or occasional basis
- 30 per cent looking after someone with confusion to point of interfering with everyday life



## Carer Profile

- Carers are mainly women, married, aged between 40 and 54 and engaged in home duties
- Significant number of carers are themselves old - over 25%
- Average care provision per day is 12 hours
- Constant nature of care for people with dementia



## Stress and Caring For People with Dementia

- Caring is source of major strain and psychological distress
- Two thirds of carers find job of caring completely overwhelming at times
- 70% find caring a financial strain
- Majority of carers experience confinement
- Majority score poorly on General Health Questionnaire (73%)



## Social Spending on Age

- Ireland overall ranked lowest of EU15 in terms of social spending per older person
- Ireland spends one third of what Denmark spends per person aged 65+
- 40% of what UK spends
- Much, but not all, of this difference is explained by demography- particularly pensions payments



# Long-Term Care Expenditure

- Total expenditure on long-term care in OECD ranges from 0.2 to around 3% GDP
- Ireland is at 0.62%
- 4.2% of older people in long-stay care account for 60% of overall public budget of about 1 billion
- Age is not overall good predictor of general health expenditure
- Time to death much better predictor of health expenditure than age



# Residential Care Bias

- Demand skewed towards residential option
- Funding bias towards nursing home subventions
- No general model of assessment and rehabilitation
- Poor integration between systems and between sectors
- Regulatory weaknesses



# Fragmented Community Care

- Under-resourced despite home care packages
- Provider/bureaucrat-driven
- Not responsive to needs of older people
- Poor support for carers
- Poor co-ordination
- Care not embedded in local communities



## Policy Context: The Years Ahead –

- Published in 1987
- All about care
- Comprehensive and coordinated service
- Housing
- Care at home and in the community
- The Community hospital

## POLICY IMPLEMENTATION PROBLEMS



## Recent Health Strategy

- Health and social gain
- Quality of life issues
- Wholeness and well-being
- Person-centred
- Consumerism

**BUT SYTEM NOT GEARED TO DELIVER**

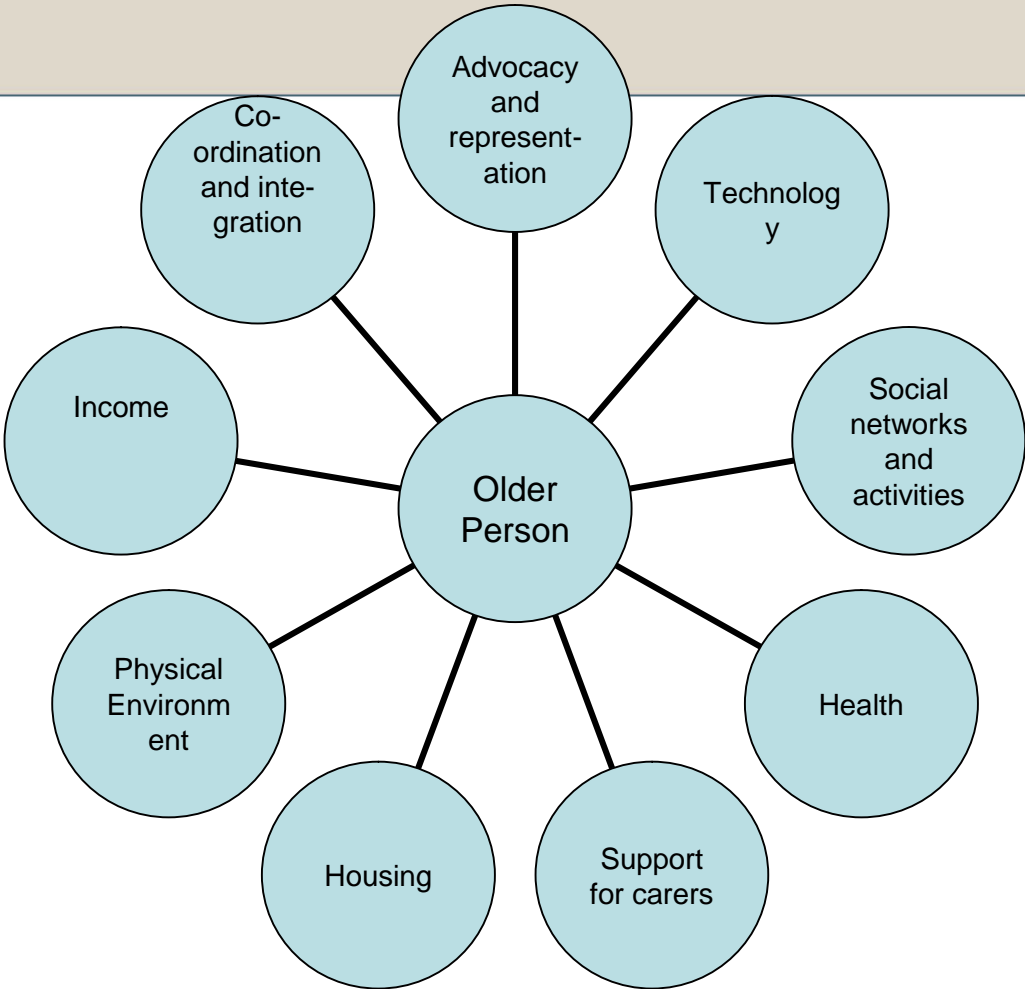


## Philosophy for a New Strategy: UN Principles

- Independence
- Participation
- Care
- Self-Fulfilment (Capabilities)
- Dignity (Personhood)



# Older Person Centred Approach



# Way Forward

- Address ageism
- Significant older people involvement in economic, social, civic and cultural life
- Life-course perspective: promotion of health, equality and participation
- Capabilities framework
- Comprehensive holistic strategy



## Practical Policy for Community Care

- Extend /develop home-based care grants
- Develop care management structures
- Person-centred choice
- Introduce incentives/penalties for integrated care
- Encourage private/voluntary/community innovation in local care provision



# Quality of Life in Long-Stay Care

- Personal Care
- Identity and self
- Autonomy and choice
- Social relationships
- Spirituality
- Physical environment- aesthetics



## Finally

- The new Strategy should highlight the **Richness and Variety** of the ageing experience through an emphasis on the **Capabilities and Diversity** of older people



