

## Appendix 2.10

Social Inclusion Advisory Segment Groups (meeting reports on community development, health.

### *South Tipperary County Development Plan*

Community Development Segment priorities for the Social Inclusion Advisory Meeting on 5<sup>th</sup> April 2001.

<b>Issues</b>	<b>Outcomes</b>
1. Education and Youth Services	Holistic approach to the development of our young people. Delivery of a comprehensive range of services (including psychological interventions) that will quickly identify and treat in a comprehensive manner problems and issues faced. Easy and equal access to such a service throughout the county. The service needs to be delivered by a multi agency, community and voluntary approach.
2. Volunteerism	New models and new ways to encourage and support volunteerism. Need to encourage the young and tap the potential of older people. Matching potentials, strengths, time and talents. Forums, opportunities and facilities for volunteers. The expectations and demands of Professionals and voluntary workers must be mutually understanding and based on realistic expectations of each other.
3. Health	Ensured delivery of adequate accessible services and facilities, particularly for people with disabilities and the elderly. Services need to be more user friendly, client focused, and Community based and led.
4. Community inclusion	Pro-active initiatives are needed to tackle prejudices and discrimination in our society. While recent legislation has helped in this area there is a need to enforce these laws and actively encourage a more inclusive and tolerant society.

**Minutes of the Health Segment Meeting on Tuesday 12<sup>th</sup> December, 00 held in the Hotel Minella, Clonmel.**

### **Present:-**

Seamus Moore (Chair)  
Carol Moore  
Mary Fennell  
Rosa Gardiner  
Ann Galvin (for Greg Price)  
Ellen Davern  
Cllr Denis Landy  
Declan Rice (for Darragh Murphy)  
Michael Hanly (for Brendan Morrissey)

Mick Cummins  
Mary Fitzgerald  
Eddie Daly  
Breda Kavanagh  
Michael Boland  
John Quinn  
Breda O'Connor  
Niall Cotter  
Mary Walsh

### **Apologies Received:-**

Oliver Clancy  
John Devane

### **Summary:-**

There was consensus in relation the following:

- ✓ The health element of the Co Social Strategy should focus on trying to achieve a few specific results in agreed priority areas. Of the four target groups identified by the County Development Board, the disabled and the elderly have significant needs.
- ✓ In relation to the elderly, the vision is to enable the elderly, who choose to do so, to remain independent in their own homes for as long as possible. Once that objective is no longer possible, the priority is on independence in social houses in their home-area towns and villages. Once independent living is not possible, the priority focus is on delivering nursing home care services that allow stimulation and are not conducive to institutionalization. The last resort is hospital and hospice care.
- ✓ Integration into the community is a key issue for minority groups such as the disabled, travelers, refugees, ex-prisoners, etc.
- ✓ General practitioners have a great knowledge of people and need to be consulted in the process of developing a County Social Strategy

## Issues raised

The following issues were raised in relation to **disability**:

- The 'local consultative committee for disabilities' model is working well. There is also a need to focus on sub-county areas. If the 'Enhanced Area Committees' are established, there may be an opportunity for achieving consensus on resolving 'disability health issues' among the local relevant actors.
- A person can end up poor because of disability. Even with insurance, there is a decline in the standard of living.
- The acquired disability sector has two needs. Treatment and therapeutic services can be provided via the Health Services directly. But the second need relates to social and community inclusion. The disabled do want to be included in the community and this requires financial investment in terms of disabled access and transport as well as time investment in ensuring that the needs of the disabled for inclusion are addressed in local community agendas.
- Access to services for those who have children with learning disability but do not qualify for medical cards is an issue that needs to be targeted.
- There are also specific day care services required by the disability sector. These need to be planned in the development of community day care centers. Provision also needs to be made in the larger disabled population centers for specific disabled day care centres.
- Very few crèches can deal with children with disability. These children need specific facilities and the County Childcare Strategy needs to incorporate their needs.
- A service is required for the small group of people that have both an intellectual disability and psychiatric problems.

The following issues were raised in relation to the **elderly**:

- The population profile of the country is ageing and the County Social Strategy needs to accommodate principles and a vision for the care of the elderly. The principle of elderly choice is paramount. From a public perspective, an important principle is to facilitate the elderly remaining independent for as long as possible. This requires services in terms of security, general practitioner and district nurse cover, and access to day care services and religious, retail, social and cultural facilities.
- There are houses in South Tipperary where refurbishment and upgrading is needed to enable elderly people have a decent quality of life in their own homes. The housing repair support schemes need to be reviewed to ensure that sufficient resources are available. Structures such as the Rural Community Care Network in West Limerick may provide a model for the Local Authority to address this issue. The numbers involved need to be quantified although there is sufficient anecdotal evidence of the difficulty of releasing certain elderly people from hospital because the conditions in their own houses are simply too bad.

- As well as deprivation, isolation is becoming a major issue in rural areas. The decline in agriculture is causing more rural people to travel to the bigger towns for work. The elderly are often the only people at home in a rural townland during the day. Security is major concern. There are some good schemes but again old people may be afraid to let the installation companies into their homes.
- There is a need for public intervention to assess the levels of deprivation and isolation of elderly people living alone in rural areas. There is a challenge to develop mechanisms that can facilitate elderly people making choices that will enhance their quality of life. The recent initiative to provide all people aged 70+ with medical cards may enable the District Nurse to quantify the issues. The nurses are best placed to address wider health issues such as nutrition, social networks, etc.
- Social housing in the adjacent village is an option that can address short term security needs (the local authority is encouraging new house start ups in villages/towns). South Tipperary compares unfavourably with other counties in the South East in relation to the provision of social housing. The urban areas are relatively good but there is a need for social housing to be located in the communities where elderly are located. There is a challenge for the South Tipperary Voluntary Community Group Platform to work with the local authorities in addressing the social housing needs throughout the county.
- The social housing strategy needs to be linked with a day care facility development strategy. Isolation can also happen in urban settings and given the change in family sizes and the decline of the extended family networks, new social networks are very important for the elderly.
- The principle of stimulation and avoidance of institutionalization needs to be incorporated in relation to strategies applicable once people can no longer remain independent in individual homes (their own houses or social houses). Concern was expressed at the level of care being provided in nursing homes. The private sector is delivering more of the nursing home service in the county. There is a challenge for the Health Board to ensure that stimulation activities are incorporated in the provision of resources for the care of medical card holders in nursing homes.
- Carers of the elderly (and also the disabled) also have needs – needs in relation to respite care while the ‘cared-for person’ is alive and needs in relation to re-integration into work when the cared-for person recovers, becomes institutionalized or dies.
- Abuse of the elderly is an important issue. Mechanisms that can identify abuse (eg. neglect, maltreatment, financial abuse, etc) and deal with it need to be agreed.

**Other issues** raised during the meeting included:

- The assessment of needs priorities of the local authorities may need to be reviewed in the light of changes in Irish society. There are increasing numbers of families where the parents have separated and where both the mother and father need accommodation that can also cater for their children. The courts are reluctant

to grant access (of children) to a parent who does not have suitable accommodation. The numbers of 'fathers' requiring accommodation are growing.

- Men do not have a tradition of establishing 'men's groups'. Their needs were traditionally met by sport. But in a changing society, where more and more adult men live on their own, the need for social networks is increasing. There are resources available from the Department of Social Community and Family Affairs but the experience has been that it is difficult to set up 'men's groups' and even more difficult to sustain them. A support agency exists – The South East Mens Network (contact Alan O'Neill at 051-844260/844201). Alcoholics Anonymous has an excellent track record in supporting men. Given the difficulties associated with setting up mens groups, another approach may be needed to address the issue.
- The numbers of homeless women need to be quantified. Many of them are running away from abuse and are prone to developing addiction problems, which often leads to prostitution. There is a service available in Waterford City but there may be a need for a service in South Tipperary. A forum is to be established in South Tipperary on homelessness and resources in relation to building refuge units are provided by the Department of the Environment and Local Government to local authorities. Once refuges are constructed, the Health Board will be responsible for their ongoing operation.
- South Tipperary is below the national average (relative to population) in accommodating asylum seekers/refugees. The approach used by the Directorate has focused on locating many refugees in disadvantaged areas which have little services in which to handle refugees. Being judgemental of communities who refused to accept a directive of having refugees dumped on them without services does not help. Many people are afraid to address the issue.
- The challenge that needs to be addressed in the County Social Strategy is how to get communities to volunteer to take refugees. The approach needs to be one of encouragement and capacity building. This can best be met by ensuring that the services required by those refugees placed in Cashel and Clogheen are fully delivered. It is not enough to provide a person's keep (via £15 per day). There is a need for language education and an assessment of the needs of specific cultures adapting to an Irish culture (eg. men coming from a muslim background tend not to have cooking skills, etc.). Local community groups need to be encouraged to integrate the refugees in sports and cultural activities. Language is a barrier that is less of a handicap in playing football or playing a musical instrument. Local people need to be made aware of what they can personally do to help.

Ex-prisoners are another target group that have specific difficulties re-integrating in the community. There is a challenge for the Probation Service and the South Tipperary Voluntary Group Platform to develop mechanisms whereby ex-prisoners can be integrated.