Appendices

1. List of organisations, community groups and community activists that participated in the research.
2. Survey for completion by people over 65 living in County Wicklow.
3. Survey for completion by community activists, community groups and other relevant community and statutory organisation personnel.
4. Open ended questions for focus group participants.
5. Information leaflet distributed to survey participants and focus group participants.
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Executive Summary

Introduction
This research explores the information and advocacy needs of older people and, more specifically, isolated or less connected older people in County Wicklow. It has been commissioned by the County Wicklow Citizens Information Service (CIS) with funding from the Citizens Information Board’s (CIB) social policy grant scheme. The research is supported by the County Wicklow Partnership and Bray Area Partnership. The research has a number of aims which include establishing the information and advocacy needs of marginalised or hard to reach older people in County Wicklow; examining the information age and related digitalisation of information; examining the efforts of County Wicklow CIS in meeting the needs of older people; exploring general ways of providing information and advocacy for this cohort and producing practical recommendations to increase the usage of CIS by isolated or hard to reach older people.

Field Research
A combination of surveys (n=107), interviews (n=8) and focus groups (n=3) was conducted with both older people and their trusted intermediaries in the community. Participants for the surveys and the focus groups were selected using systematic sampling of people over 65 in urban and rural parts of County Wicklow. The areas for the focus groups included Bray, Dunlavin and Tinahely. The trusted intermediaries included healthcare professionals, parish teams, community members, community workers, national organisations like the IFA, voluntary groups and other community groups. All areas surveyed had circa 11% to 14% of the overall population in the 65+ age group. Research participants were all over 65, living in urban and rural areas, with more women than men surveyed.

Literature and Policy Review
The research identified the National Positive Ageing Strategy (NPAS) and the Healthy Ireland Strategy as two key Government documents offering a strategic framework for the provision of information and advocacy to older people. The literature reviewed covered issues such as general information needs and analysis of information needs of older people; access to information; acting on information and advocacy; barriers to information provision and the information age and digitalisation of information. A review was also conducted of literature that presented models of best practice with regard to reaching those more ‘hard to reach’ older people who are more isolated or less connected to the community infrastructure. The best practice approaches were analysed, themed and presented according to partnership, people/places and presentation approaches to meeting the information and advocacy needs of older people.

1 Trusted intermediaries are defined as individuals, community groups and other community and statutory organisations working with older people in the community.
Executive Summary

Findings and Discussion

Information needs

The research found that the most sought-after information topics included social welfare, health, consumer issues, housing, bereavement and caring issues. Other issues that presented in the survey included voluntary work, legal questions and recreation queries, issues with the local authority, security, home heating and maintenance.

Accessing information

Once an information need arises for an older person, the question of accessing that information also presents. This refers to whom older people turn for information and how that information is communicated. A high reliance for information was reported on friends and family and social networks. The CIC also featured strongly in responses. Trusted intermediaries, particularly for more isolated older people, also play a significant role in accessing information for older people. Older people show a preference for face-to-face information provision. Barriers to accessing information include the delivery of information especially automated telephone systems and online information, lack of awareness of entitlements, lack of support to access information, lack of transport and a lack of IT knowledge.

Acting on information

Knowing what you need and then accessing and receiving information is only one part of the picture for older people as some may need further support to act on the information received. The research found a high need for support to act on information reported by older people themselves and their trusted intermediaries. One of the barriers to advocacy can be a lack of awareness that it is available.

Awareness of Wicklow CIS

There was a high level of awareness among the older people of the CIS in County Wicklow. Access was related to location and awareness. The face-to-face aspect of CICs was popular as was the provision of additional support to act on information.

Information age and digitalisation

In contrast to the trusted intermediaries who accessed information for older people mainly through the internet (67%), the majority of survey respondents, that is older people themselves, had never used the internet for information. This research found that support to access online information is paramount to older people accessing information.
Executive Summary (continued)

Recommendations

The recommendations are linked to the literature review of best practice models and grouped according to a partnership approach, a people and places approach and a presentation approach. Partnership approaches include a focus on existing agencies and community structures and infrastructure that can support information and advocacy provision. Including older people at a planning and delivery level is critical to the success of information provision as is the need to build on best practice already in place in the county.

People and Places approaches include a focus on the trusted intermediaries, social networks and friends and family of older people who support older people to access and act upon information. Independent information and advocacy is also important as is the direct provision of information and advocacy to older people themselves.

Presentation approaches focus on the ways in which information and advocacy is presented to older people. The need for a combination of formats and mediums was clear. There was also a high demand for face-to-face contact and a need to support access to online material.
1. Introduction
This chapter provides a background to the research as well as an overview of the research methodology and structure of the report.

1.1 Background to the research

The research explores the information and advocacy needs of older people in County Wicklow. It has been commissioned by the County Wicklow Citizens Information Service (CWCIS) with funding from the Citizens Information Board’s (CIB) social policy grant scheme. The research is supported by the County Wicklow Partnership and Bray Area Partnership.

The Board of Co. Wicklow CIS set up a ‘Hard to Reach’ sub group in response to CIB’s Strategic Plan 2012 – 2015 which seeks to ‘ensure that our services are available to all citizens, including marginalised and vulnerable groups’. The use of the Citizens Information Service (CIS) by older people is less than what is expected for this group with only 11% of all callers aged 66 and over accessing the service nationally. Building on this finding, along with the aims of the Co. Wicklow CIS ‘Hard to Reach’ sub group (in terms of determining the nature, ways and extent that Co. Wicklow CIS currently engages with hard to reach and under-represented groups) older people were identified as the focus of this research for County Wicklow.

According to the Caught in the Web report (McDaid 2012), the aging population is now a ‘key policy concern’ and knowing how to access relevant services during times of transition to ensure that older people can live independently is a ‘challenge’. This challenge needs to be acknowledged and analysed and this research will play a key role in addressing such issues and providing recommendations for remedial action in the context of the County Wicklow Citizens Information Service (CIS).

The focus of the research is how County Wicklow CIS can reach older people, particularly those who are socially isolated and marginalised. Therefore, in addition to the general population of older people in County Wicklow, a key issue for the research relates to reaching older people who are socially isolated due to diminished social networks, geographical location and/or state of health. Research to date defines these more marginalised subgroups in terms of gender, age and mobility. It was also noted that the geography of County Wicklow, with the mountains dividing the County, could add to further isolation for rural older people within these more marginalised categories.

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2 The 2011 Census showed that 11.6% of the population is 65 years old and over.
The research, therefore, had a number of core aims:

- Establish the information and advocacy needs of older people in County Wicklow particularly those who are marginalised and hard to reach, and how these can be addressed in an ‘age-friendly’ manner;
- Examine if Co. Wicklow CIS is providing quality, appropriate and timely information and advocacy services for older people in ways that are appropriate for this cohort;
- Investigate if the Information Age is a barrier to accessing information for older people and look at other methods of information communication in this context;
- Explore other general ways of providing information and advocacy to this cohort; and
- Produce practical recommendations, inter alia, in a report which will lead to an increase in the levels of usage of Citizens Information Services by this cohort.

1.2 Methodology

Data collection

A combination of qualitative and quantitative research methods was used to collect data for this research. A survey was designed for face-to-face completion with people aged over 65 years living in County Wicklow. This survey was then edited and shortened to be used for random sampling outside post offices, doctors' surgeries and older people’s social housing clusters. A number of the face-to-face surveys conducted could be more accurately described as research ‘conversations’ as they lacked the structure of an interview and yet incorporated a general discussion with older people on a one-to-one basis about their information and advocacy needs.

A second survey was designed for individuals active in the community with older people, community groups and other community and statutory organisations working with older people in the County. These individuals have been referred to as trusted intermediaries in other research (County Wicklow Network for Older People, 2012). This survey was also utilised in an interview format with the trusted intermediaries identified in this research, as the interview allowed for more in depth analysis of issues raised by service providers when responding to the survey. A set of open-ended questions was designed for use with focus groups made up of older people.

Participants

Participants in the survey for older people included a systematic sample approach of people over 65 living in County Wicklow (n=107). This took place within both urban and rural areas; Bray, Rathdrum, and a cluster of smaller towns and villages to the West of the County. The selection of the focus groups was based on identifying existing older persons’ groups in both a rural and urban setting and attending one of their regular events. Focus groups were conducted in Dunlavin, Tinahely and Bray.
There was a specific focus on harder to reach older people, which include those older people less networked with older persons’ or community groups. As outlined earlier in the introduction, this group of older people includes those who are isolated and may not know how to access information/entitlements. Research has identified this group as being composed of the oldest older person, older people with disabilities and older men 3.

Given the access issues for a researcher to directly survey these more isolated and/or more vulnerable older people, interviews and surveys were completed with key organisations, groups and individuals in contact with this subgroup of older people at a community level. As stated above, these are referred to as trusted intermediaries throughout this report.

The additional service provider survey (n=25) and interviews (n=8) were conducted with formal and informal service providers within the community that serve as a contact point for older people. These trusted intermediaries were an important reference point for the research regarding the information needs of harder to reach older people. A number of community services were also consulted informally during the field research for a general conversation regarding their experience of information needs and older people. Some of the groups engaged in the research included:

**HSE: Primary Care Development Officer**

**HSE: Services for Older Persons in Wicklow**

**HSE healthcare professionals and HSE projects (including Public Health Nurses; Registered General Nurses; Occupational Therapists; Physiotherapists; Primary Care Social Workers; Speech and a Language Therapist; Nursing Home Support Office; Traveller Primary Health Care Project)**

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3 For instance, there are approximately 200,000 men aged over 65 in the country, of which as many as one third are living alone (http://www.gaa.ie/social initiative). This issue has been recognised by the GAA’s Social Initiative which will use the GAA Club network as a vehicle to engage older men who are not currently participating in local community life (ibid).
Parish Teams (church)
St. Vincent de Paul
Alzheimer Society of Ireland (Wicklow Services Manager)
GPs and Medical Practice Manager
Pharmacists
Active citizens in specific community areas
Elected representative (TDs and Councillors)
Wicklow Community and Family Services
County Wicklow Network for Older People
Carers Association

Data analysis
The survey data was collected using survey monkey. It was analysed using the survey monkey tools. The focus groups were recorded, transcribed and then analysed for themes. The interviews were also analysed for themes.

Literature review
A review of policy documents and literature was conducted on the issue of information and advocacy needs and related good practice.

1.3 Conclusion and structure of the report
The report is divided into three sections. The first section gives a detailed overview of the policy context for providing information and advocacy services for older people. The last two sections present findings from the field research and practical recommendations for County Wicklow CIS arising from the field research results.
2. Policy context and literature review

This chapter examines the Irish policy context for the provision of information and advocacy to older people. It also explores approaches in the UK and Northern Ireland to providing information and advocacy and models of best practice in this regard.

2.1 Information and advocacy needs of older people

Information provision is a fundamental part of Government policy to ensure that older people make informed decisions in relation to their health, social care and welfare service needs (National Positive Ageing Strategy, 2013). Information and advocacy are also services in their own right. They play a critical role in enabling older people to receive the services they require and research has found a correlation between access to information and access to services (Quinn et al., 2003; Sykes, Hedges, Groom & Coleman, 2008). Information and advocacy are particularly important in the current economic climate when there is much uncertainty and potential policy change.

The National Positive Ageing Strategy (NPAS) and the Healthy Ireland Strategy are two key Government documents offering a strategic framework for the provision of information and advocacy to older people. Both documents place a core focus on the need to provide both information and support to older people. It is through the Healthy Ireland Strategy structures, that the Goals and Objectives of the National Positive Ageing Strategy will be translated into key deliverables with associated timelines and performance indicators.

The NPAS places a specific focus on information provision as a critical objective for all policy development and service delivery for older people across all policy areas (2013, p. 22). This focus on provision of information underpinning the strategy is a direct result of the strategy consultation process whereby difficulties accessing information about services and supports were consistently raised as having a negative impact on the social inclusion and quality of life of older people. Specific objectives related to information provision outlined in the NPAS include (1) ensuring that older people can exercise choice and control over their own lives by being able to access user-friendly, up-to-date, comprehensive and coordinated information and advice in relation to entitlements, services, support and activities and (2) promoting the development of advocacy services to assist older people to access the services, supports and activities that they may require.

A number of studies in the UK reveal a lack of appropriate information and advice services across a range of different social groups, services and settings. These include older people in rural areas (Department of Health, Social Services Inspectorate, 1999), older people from disadvantaged areas as well as older people with dementia and mental health problems. Some of the literature looking at harder to reach older people
discusses the idea of empowerment as an important part of building people’s awareness of entitlements and opportunities (Ritters and Davis, 2008). A lack of access to transport and underdeveloped IT skills also constitute a significant barrier to accessing information for specific groups of people as they age (NPAS, 2013, p. 46).

**Analysing information needs**

The National Council for Ageing and Older People (NCAOP) published a report in 2003, which highlighted the central role of consulting older people when determining what information they really want, by what means this information should be provided to them and where this information may be accessed most usefully by them.

The literature reviewed also shows that the need for information and advocacy services is not confined to concerns about health and social care or pensions and welfare benefits. It is also concerned with wider aspects of citizenship, including lifelong learning and leisure (Dunning 2005; McDaid, 2012).

Research to date has also proposed a strategic approach to analysing information needs with a tendency to categorise information needs within a life transitions framework (McDaid, 2012). The greatest demand for both information and advocacy is often linked to times of personal, medical or financial change/crisis, which is often when people are least able to seek the support they need (Age UK, 2012). Notably, some of the literature that analysed information needs according to life events, maintains that the very need for a specific focus on older people in policy and practice arises from these specific life events that affect their information, advice and advocacy requirements (Tinker et al., 1993; Dunning, 1998a, 2005).

**Access to and acting on information: key people and places**

In addition to the actual needs of older people, research has looked at the ways in which that information is received and who provides that information. Although written information can be sufficient for many older people, those with the greatest needs may require information and advice delivered personally (face to face or by telephone), often with practical support to resolve their problems (Age UK, 2012). Ruddle et al (2002) found that the means of presentation most used by the older people (by at least 70 per cent) to access information were the printed media (including newspapers, newsletters, booklets and leaflets), informal communication with personal contacts and radio and television programmes. The absence of ‘the personal touch’ via the telephone with automated options was rated poor by older people (Ruddle at al., 2002).

Good local knowledge, formal links with community groups and active people in the community are also essential for successfully meeting the information needs of more isolated older people (Age UK, 2012). The research to date claims that, although information and advice for older people should be targeted at older people, information and advice aimed at professionals, carers and relatives can also be an effective way of
meeting the needs of older people. Di Rosa et al (2011) found that lack of information was the most quoted need by caregivers for older people. In addition, the literature shows that a stand-alone information service is generally less effective than one that also provides advocacy, because many people will need support to fully understand and act on the information provided (Age UK, 2012).

**The ‘information age’ and digitalisation**

There is a mixed response to the increase in the digitalisation of information with the vast amount of research maintaining this move has a negative consequence for older people (Age UK, 2012; CARDI, 2013). The Centre for Ageing Research and Development in Ireland (CARDI), in a recent report has found that as governments move more services online there is a danger of a digital disconnect with many older people compared to wider society. The CARDI report entitled “E-government and older people in Ireland, North and South” finds that while the numbers of older people with access to and using the internet are increasing these numbers remain low in comparison to other age groups. McDaid (2012) maintains that the increasing numbers of organisations in the public and private sector reverting to automated telephone services and the growing dependency on websites as the main means of dispersing information results in more older people struggling to access data about vital entitlements and services. Heuston (2004), in a write-up of conference proceedings from the National Council on Ageing and Older People conference 4 in terms of computer training must be emphasised to support older people in the face of continued digitalisation of information. Research carried out in Leeds (Whyles, 2007, p.6) found that the vast majority of respondents in the Leeds survey did not use the internet to find information and did not indicate that they might wish to use it in the future.

**Advocacy**

The Citizens Information Act 2007 sets out the development of the advocacy service for people with a disability. The HSE advocacy programme for older people in nursing homes, initiated in 2007, was officially transferred in 2011 to Third Age, a voluntary community organisation working with older persons. However, the legislative and policy framework for independent advocacy in Ireland is just beginning to develop. Advocacy with older people is relatively under-researched and little recognised. A cursory review of research in the field of older people has revealed that information for older people is conceptualised and analysed in a variety of ways compared to a less developed understanding of advocacy. Advocacy has a hidden history of grass-roots struggles and successes that are largely recorded in ‘grey’ publications, such as pamphlets, newsletters and documents with limited readerships. However, advocacy more generally, is becoming increasingly recognised within the formal body of literature, including academic texts, guidance documents and evaluation reports (Tufail and Lyon, 2007; Lundstrom, 2008). The literature also suggests that whereas information can be undertaken through remote or impersonal formats, advocacy very much depends on a ‘face-to-face’ relationship.

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4 Meeting the Health, Social Care and Welfare Services Information Needs of Older People in Ireland
2.2 Innovative approaches to providing information and advocacy

Literature covering the information and advocacy needs of older people presents a large number of models of best practice with regard to reaching those older people who are more isolated or less connected to the community. The wide-ranging number of approaches can be summarised under a specific number of headings, which include:

• A partnership approach where the focus is on utilising multi-agency involvement;
• A people and places approach where the focus is on whom and where information is delivered; and
• A presentation approach where there is a concentration on how information is delivered.

Older people may face a number of barriers when seeking information and advice. Previous bad experiences, an inability and/or unwillingness to seek information, a low perception of needs, the complexity of the system and professional withholding or ignorance of information can all obstruct older people from gaining useful and timely information and advice. Transforming Lives, an Age Concern England report on the impact of information and advice, finds that older people may be unsure of their eligibility, daunted by the complexity of benefits and how to take them up, and/or discouraged by past failures in trying to claim. They may have difficulties reading and filling in forms, may suffer language barriers and may not wish to trouble others by asking for help.

Partnership

The ‘Joining the Dots’ initiative in Newcastle in the UK deals directly with problems of access to services and a reluctance of some older people to access formal information provision. The initiative was developed by the Quality of Life Partnership to bring together services and support for older people in the community. ‘Joining the Dots’ involves providing better information by building links between GP practices, intermediate care and community-based activity with ‘link-people’ and volunteers (Horton et al., 2009).

The Quality of Life Partnership in Newcastle, in addition to the initiative outlined above, also focused heavily on frontline staff within services. The project acknowledged that frontline staff are sometimes the only contact an older person has with wider services in a community. They can be, without knowing it, an essential source of information and advocacy. They play a major sign-posting role. Therefore, the Quality of Life Partnership focused on supporting continuous professional development for frontline workers. One tangible piece of work in this area was the development of a multi-agency signposting scheme (Horton, 2009).

The multi-agency sign posting scheme is likened to ‘First Contact’ in Nottinghamshire, which enables older people to access much needed services through a single point of contact. The agencies involved share a single assessment tool so when a staff member from any of the partner agencies visits someone at home, they complete a checklist to find out if the older person has any particular needs for services such as a
fire safety check, advice on money entitlements, signposting to local groups or support to prevent falls. Responses to the checklist are fed back to one central point of contact, which coordinates referrals to partner organisations. A representative from those organisations then contacts the older person directly.

Interestingly, the Quality for Life Partnership project has identified a limit to frontline information and advocacy. This occurs where conflicts of interest arise or more specialist support is required. In such circumstances, it is imperative that the professionals concerned are aware and ensure that the person is referred on to an independent agency whose primary role is to provide an information, advice or advocacy service (Ivers, 1994, 1998).

The Camden life course approach in the London Borough of Camden has developed a quality of life strategy for older citizens (2002). The strategy aims to make older people aware of a range of opportunities that facilitate health and well-being and to ensure that they have equal access to a range of services and resources. It also aims ‘to prepare generations for the opportunities and challenges of later years’. The varied ways in which Camden has sought to undertake its information and advice work include briefings for employees of all sectors and the development of a later-life pack. It has also further developed ground-breaking staff guidance on communication with older people (initiated by the Camden and Islington Health Improvement Programme, 2001).

A range of innovative methods was used in inter-agency work alongside older people. This included secondment of staff from the Pensions Service (formerly the Benefits Agency) to the local authority; sharing of information between agencies; targeting households where there had been no take-up; simplification of benefits forms; production of a comprehensive handbook of services; use of ‘one-stop people’. The project has had positive practical results but has also brought about improvements at strategic level for the partner agencies and older people. They have all had to work together to develop the policies and protocols to make it happen. The local welfare benefits work is now being rolled out nationally while, in Rhondda Cynon Taff itself, the strategy and information network continues to develop.
In Ireland in 2007, the Citizens Information Board developed a national information initiative for older people. This multi-agency approach to information provision involved guidelines for providing information to older people being circulated to all national agencies including the HSE. In addition, the Citizens Information Board and the Department of Social and Family Affairs jointly published a series of publications aimed at outlining rights and entitlements and public services and supports available to older people.

A best practice example of a partnership approach in County Wicklow is the effective working relationship between the Carlton Clinic Medical Practice and the CIC in Bray. **The Carlton Clinic is a community GP and medical practice that serves a population of approximately 2,300 patients aged 65 or over, just over 50% of whom hold medical cards.** The Clinic finds that older people are more likely to have more complex health needs and sometimes have difficulty in accessing the care they need. Research conducted by the National Adult Literacy Agency (NALA) shows that a quarter of Irish people experience literacy difficulties to the extent that they may not be able to follow instructions on an everyday health medicine and older people are especially likely to experience difficulty understanding everyday written materials. At Carlton Clinic, they have adapted the surgery to be more health-literacy friendly. They use NALA’s Literacy Audit for Healthcare settings and Writing and Design Tips to produce new patient brochures and directional signage. They have also improved the forms used in the surgery (e.g. new patient registration forms, consent forms for minor surgery, etc). The Clinic is also aware of the difficulties patients can experience in dealing with outside service providers, e.g. finding out about local or national support services, filling in forms for the HSE or other government bodies etc. The reception staff are trained to assist patients where possible, and also to encourage patients to get further advice from the local Citizens Information Centre located in the town. The co-operation between the Citizens Information Centre in Bray and Carlton Clinic, shows just how effective a multi-agency approach to information provision can be for older people. This is a model of good practice not only because the information was provided but because older people were supported to act on the information. Both services liaised closely when a specific issue around waiting times for medical card applications arose for older people. By identifying common cases and working together, both services managed to successfully support the older people, who had been in contact with their services, in relation to both information and advocacy.

**People and places**

Having independent information and advocacy appear to be critical throughout the literature to ensure that older people have impartial access to information. In this regard, Rhondda Cynon Taff developed a network of ‘one-stop people’. They included home care assistants and other staff, volunteers and older people who...
were trained to signpost and support older people in their work to seek out the information and services they needed.

Having specific people to sign-post is contained within a number of best practice models reported in the literature. Age UK Kensington & Chelsea has established a ‘primary care navigator role’ to sign post older people who have a variety of long-term and complex needs. It is a collaborative project involving three organisations – NHS Kensington and Chelsea, the Royal Borough of Kensington and Chelsea, and Age UK Kensington & Chelsea.

In addition to identifying key people, some of the literature highlights places of significance for older people to access information. Age UK Hackney has run an information service in various GP practices around the London Borough of Hackney for several years. It is in high demand and is a much-needed service. Altogether the scheme is available in 26 GP practices run by a partnership of seven different advice agencies. Age UK Hackney provides information and advice in five GP surgeries around the borough. The service consists of a weekly advice surgery held at the practice covering all areas, including welfare benefits, housing, family, and community care.

Age UK Milton Keynes started delivering information and advice in Age UK shops in its region in 2007. Their strategy was to take their information service out into the community and generate more casual enquiries from people who may not ordinarily visit the advice centre. They started out delivering information in one shop and this model has expanded into four shops. Volunteers, who are comprehensively trained in information, advice and advocacy, deliver some of the service in shops so that staff are freed up to carry out other activities such as home visits. They have also successfully delivered information in other settings and have a well-established information service in their café which is entirely run by volunteers.

A best practice example of this approach in County Wicklow is the County Wicklow Network for Older People Ambassador Programme. The County Wicklow Network for Older People Ambassador Programme offers an innovative and participative approach to listening to the needs of older people. The Ambassadors, all of whom are voluntary, work with older people’s groups and individuals throughout County Wicklow. This two-way information process acknowledges that social networks for older people are an effective way of sharing information. The two-way process allows for gathering information on issues and raising awareness of what resources are available. The Ambassadors collate the needs that they hear about and submit reports and feedback to the County Wicklow Network for Older People, which is ideally placed to liaise with the relevant services needed. For example, in 2013, Ambassadors held focus groups and listened to older people speak about their experiences of the household charge. The Ambassadors then reported their findings to the Network for advocacy and lobbying. Ambassadors are also ideally placed to sign post older people to the Citizen Information Service in County Wicklow.
Another best practice example of the people and places approach is the Wicklow Rural Transport Initiative. Although outreach services can be an effective way of bringing information to older people in rural areas, there is also a significant gain for older people in terms of being able to access service centres. The National Positive Ageing Strategy (2013, p. 46) highlights a lack of access to transport as a significant barrier to accessing information for some people as they age. The Wicklow Rural Transport Initiative was developed in response to the unmet rural transport needs of people in County Wicklow. The majority of customers use Wicklow Rural Transport for doctor and hospital appointments, work, post offices, chemists, schools, banks and social purposes. It provides vital links for many people living in rural areas, particularly in the west and south of the county. Some of the elderly customers claim that it is the one chance they get to meet other people during the week thereby offering a social as well as a practical source of support to older people in rural areas.

Presentation
As much as partnership and designated people and places approaches feature throughout the literature, there is as much a focus on how information is delivered. The Kensington and Chelsea Readers’ Group was established by the local authority as part of its Better Government for Older People project to produce more accessible written information. The Group was made up of a diversity of older people who reviewed and commented on information materials for publication.

A best practice example in County Wicklow is the HOMELink initiative, which is funded by the Community Services Programme (Bray Area Partnership) and is run by Easi-Access Transport Ltd. HOMELink is a friendly home support service for older and more vulnerable people living in the community that helps them to stay in their own homes. Although the main focus of HOMELink is telephone support and a basic repairs/maintenance service for older people, they also hold coffee mornings and other social events to ensure that there is a face-to-face element in making older people aware of their service. This combination of mediums to deliver information about services to older people in Bray is an excellent example of combining presentation types to effectively reach older people.

Conclusion
The National Positive Ageing Strategy places a specific focus on information provision as a critical objective for all policy development and service delivery for older people across all policy areas (2013, p. 22). By ensuring that older people can access information and advocacy, the CIS is playing a significant role in terms of supporting older people to positively age. Best practice around information and advocacy for older people points to a combination of approaches that focus on multi-agency partnerships, identifying places that older people frequent and people that they rely on for information as well as ensuring that the presentation of information is in an accessible format and delivered through appropriate mediums.
3. Findings and discussion

This chapter presents the key findings from the survey results \((n=107\) and \(n=25\) [service providers]), the focus group discussions \((n=3)\) and the interviews \((n=8)\). It details the findings under a number of themes:

- demographics;
- information needs;
- accessing information;
- acting on information;
- role of the County Wicklow CIS; and
- the Information Age.

A discussion of the findings will be integrated throughout the chapter as well as commentary on how the research findings compare with other research.

3.1 Demographics

Geographic area demographics

Demographic data on the areas included in this research have been taken from the CSO 2011 Small Areas Population Statistics. Figure 2 summarises the population over 65.

Participant demographics

The survey was completed with 107 older people. This was done randomly at post offices and on-street settings (one of which included a bus stop). The age category captured in figure three reflects the difficulty in accessing the oldest older people. Figure two gives some indication of the main areas surveyed. Nearly 70% of respondents were female and there was a near fifty-fifty split of those living in estates and those living outside estates.

Over 60% of those surveyed owned their own home with a further 25% renting. One in twenty surveyed lived alone with the majority living with one other person (36%) and the remaining living with two or more people. Less than half of those surveyed had health problems and for those that reported health problems, the main ones mentioned included arthritis, sight issues, hearing problems, leg and hip problems and general mobility issues. Three people mentioned mental health issues and three people mentioned dementia.
Focus group participants had a similar demographic to those surveyed in terms of age, gender and urban and rural divide. However, the older people in the focus groups are connected with a community group. In this regard, they are not considered hard to reach or isolated older people. However, participants in the Dunlavin and the Tinahely focus groups did express a need for greater access to information services compared to participants in the urban-based focus group.

3.2 Information needs

Over 50% of the older people surveyed reported having information needs in the last year. The research found that the most sought-after information topics included social welfare, health, consumer issues, housing, bereavement and care issues. However, other topics that presented in the survey included voluntary work, legal questions, recreation queries, security, home heating and maintenance. Interestingly, property tax was mentioned by a large number of respondents but this could be expected given that the Local Property Tax (LPT) only came into effect in 2013. Transport to and from hospitals was also raised, particularly by older people living in the rural areas. The information topics identified by older people themselves correlated with those outlined by the trusted intermediaries dealing with older people in the community.

Health, social welfare, security and heating were the top four identified information needs by older people themselves and the trusted intermediaries. However, other issues, such as transport, for example, featured regularly in the focus groups and one-to-one interviews. The Baltinglass Parish Team, for example, highlighted the difficulties around transport for doctor and hospital visits for the older people they call to, although they felt that the older people do not articulate this outright to them:

*While they don’t articulate it, we sense they have difficulty arranging transport for doctor’s/hospital appointments.*
This comment about transport to hospitals by this trusted intermediary was also noted by older people themselves. Some of the older people who participated in this research referred to concerns about no longer being eligible for mobility payments. This finding is in line with the CIB Getting There report (2009), which found that many people are unaware of what provisions there are and the sometimes related difficulty in getting clear information about entitlements.

The trusted intermediaries had a number of important observations on the information and support needs of older people. Some of the broad categories highlighted included health, social welfare, caring, security and heating; whilst they also mentioned more specific needs such as entitlements, equipment and housing grants; house transfers; loneliness; transport; recreation; medical cards; hospital and insurance cover; nursing homes; social events; road safety issues; legal issues; private rented accommodation and rent issues.

Although most research participants tended to speak broadly about their information needs, some of the focus group participants in Dunlavin had very specific questions around the travel pass and other social welfare related queries. This particular group had much less knowledge about the Citizen Information Service and very few reported using a Citizen Information Centre:

We have no one round here that can answer questions like that [referring to social welfare questions]. I need to know about my bus pass and how long it lasts? Does that run out? Who would tell me that?

Ruddle et al (2002) maintain that older people need access to information at specific times in their lives such as reaching retirement/pension age; becoming functionally disabled (spouse/self); developing an illness; needing long-term care; bereavement; becoming a carer; returning to work/education; experiencing a security breach or other traumatic event; and returning to Ireland from abroad. This research affirms this finding as one participant in the Tinahely focus group outlined:

I don’t need to know what she [points to another woman in the group] has just asked about but I know I might in the future so I’d like to think there was someone I could go to and ask them. I don’t need home care now. I may in two months, who knows?

When older people were questioned more in the focus groups on specific information needs, they highlighted some of the life transition periods mentioned above. The following comment was made by an older woman who had no personal income source other than that of her husband until he passed away:

Well when my husband passed away, I had to ask the doctor if I could get any support. I didn’t know who to ask about money and I know other women here would feel the same if suddenly the main breadwinner passed away.
More specific information that came up when particular life events were mentioned included advice on accessing the pension as a person with a carer payment; money matters related to retirement; access to medical treatment and home care when an illness arises; procedures and people to contact when health is an issue; health insurance; advice on nursing home scheme; how to apply for medical cards and what help is available for funerals; bereavement support and legal issues such as wills.

Other research on the information needs of older people has highlighted the need for information on elder abuse and where to access support or help. This was not a topic reported by older people in this research. However, given the very private and sensitive issue that abuse tends to be, it is unlikely that the type of research methodology used in this research would draw out such a topic. Research by O’Brien at al (2011) draws attention to research with older people experiencing elder abuse and maintains that there are great challenges in providing information at the appropriate levels for this specific group.

3.3 Accessing information

Once an information need arises for an older person, the question of accessing that information also presents. This refers to whom older people turn for information and how that information is communicated. It also inevitably means examining the barriers to accessing information, particularly for more isolated or less connected older people. Notably, a large majority of older people felt that information, in general, was difficult to access.

![Figure 6: Is it hard to get information?](image)

![Figure 7: Where did you get the information you needed in the last year?](image)

**Family and friends**

In keeping with the findings of other studies from Ireland and elsewhere (McGee et al., 2005), by far the most common source of information for older people was the informal social network of family, friends and neighbours. Ruddle et al (2002) also found that informal communication with personal contacts was rated highly. This finding concurs with other research which has found that when older people need help they often turn to informal networks such as family and trusted friends. Some of the older people’s comments were:

*I don’t need anyone else once I have my daughter. She lives next door and she uses the internet.*

**What more could I need [laughs].**
The findings from this research affirm the importance of treating family members and community members as significant seekers of information in addressing the needs of older people. However, this reliance on family and friends and informal contact points for information more generally, particularly for the oldest older people, should present a concern for information providers with the changing demographics in rural areas. One community member maintained that the lack of nuns in the area meant older people were lacking an additional trusted support or contact person in the community that they once had:

_We have no nuns here anymore, which is a pity for the older people with no young family around them._

However, figure 7 also shows a high percentage of older people noting the CIC as the service they contacted for information. It is important to note here that only 64 of respondents answered this question so this is not representative of the whole sample surveyed. In addition, older people felt that they should be targeted directly with information rather than leaflets being given to GP surgeries. A participant in the Tinahely focus group made this point:

_There’s no point giving a batch of leaflets to a doctor’s surgery. You need to give them directly to older people so that they know there are services that can help them too and not just give them a leaflet._

Trust and knowing a person (including staff in formal services) seemed to play a major role in determining to whom an older person turned for information:

_I used that service once [names local service] but I didn’t go back. You see, I don’t want my business being told to everyone and when I went back it was a different woman so I just made my excuse and walked back out._

**Trusted intermediaries**

When older people do access information outside of their friends and family, present findings are in agreement with those of other studies that have shown the importance of personal communication with older people (Ruddle et al., 2003; Margiotta et al., 2003). The personal touch was seen as more caring and supportive and likely to engender trust. Face-to-face delivery of information was rated highest by older people themselves in terms of preferences for how information is received. Personal communication is, however, more time-consuming and costly in resources but in the long term is more likely to be effective. For example, some older people referred to contacting councillors or other elected representatives such as TDs whom they felt they knew. Indeed, the elected representatives that completed the survey affirmed what the older people had stated themselves. The TDs also outlined how once they discussed the issue face-to-face with an older person, they still received follow-up calls. One elected representative claimed:

_The older people that ring me don’t have anyone else. For some of them [referring to older people] their whole family has moved somewhere else with house and land prices being a_
barrier for living closer to parents. I find these older people need more than just a call back. To be honest, in most cases, I end up calling personally to their door.

This research also found that the only way to ascertain information about more isolated older people in rural settings was access to local groups, healthcare professionals and specific individuals in contact with older people. These trusted intermediaries were the next choice for older people to family and friends for accessing information. In this research, this category tended to include local church personnel, public health nurses, GPs, the local pharmacist and individuals active in the St. Vincent de Paul and other community-based groups. These trusted intermediaries used a variety of mediums to access information with 67% reporting using the internet. Other sources of information given included local services, the CIC, co-workers and Government agencies.

Not knowing where to access information was one of the main barriers highlighted in a Joseph Rowntree Foundation project that explored the information, advocacy and advice needs of older people in Slough (Horton et al., 2009). Those who are housebound and/or those with mobility difficulties or sensory impairment may also have problems gaining access to relevant information and advice (N. Raynes et al., 2003). People living in rural areas can also be particularly burdened, as a lack of access to services threatens older people’s social inclusion and increases vulnerability to poverty (Age Concern England, 2008).

Awareness and knowledge of formal information providers such as the Citizen Information Centre played a significant role in ensuring access to information for older people in this research. The trusted intermediaries displayed a high level of knowledge about the CIS in Co. Wicklow. Nearly seventy five per cent of the older people surveyed knew about the CIC. The Dunlavin focus group, on the other hand, reported a very low level of knowledge of the Citizen Information Centres in Baltinglass or Blessington. This group had a more confined number of trusted intermediaries for accessing information:

The travel puts me off…I'd need something more local and we don’t have a councillor to go to so, no, I don’t know what you mean by that. This club is the best group and the parish but I don’t see myself travelling that distance [to the CIC for information].

Awareness of formal health and community services is also critical in accessing not only information but actual services, particularly when it comes to community health services. The Manager of Services for Older Persons within the HSE highlighted the central role of the public health nurse and the GP when it comes to older people accessing a range of health related services. In addition, given the fact that both GPs and public health nurses are part of the primary care team in HSE areas, she identified these primary care teams as important points of contact for information providers such as the CIC.
**Automated information**

The responses from research participants generally highlight the problems of over-reliance on a single format or type of information giving. As expected, the automated telephone service was a serious barrier to accessing information for older people (74%) as was any cost involved in telephone services.

In 2012, Age UK commissioned research looking at older people’s experiences of using call centres for advice. The findings revealed that most people wanted to speak to a ‘real’ person, for that person to speak clearly, be pleasant and well informed. Speaking to a real person made the overall process of calling less stressful, which is particularly pertinent for an older person who may be seeking advice during a financial, social or emotional crisis. Automation in general was unpopular because the number of menus and options could be confusing, and it is easy to mishear, be distracted or miss an option. One survey participant in this research was very clear about her dislike of the automated service:

*I don’t mind ringing on the phone for information once it’s not them machines, I can’t stand them machines, I just hang up and once I don’t have to pay an arm and a leg for it.*

Other comments more specific to telephone helplines in general included people talking too fast, getting different people each time, being left on hold for too long, paying for the call and difficulties hearing or understanding the person.
Media

The Wicklow Times and other local papers were popular with survey respondents. The radio also featured as a popular medium for older people in accessing information:

In addition, the local paper appeared to be utilised regularly by older people with 34% stating the Wicklow Times as their main source of reading and another 54% reporting the Bray and Wicklow People. However, written material, more generally as an information source, was reported by the survey respondents as difficult to access:

Although written information may be sufficient for many older people, those with the greatest needs may require information and advice delivered personally (face to face or by telephone), often with practical support to resolve their problems (Age UK, 2012). The Age UK (2012) report also found that good local knowledge is essential for successfully targeting harder-to-reach groups, for example people living in isolated rural areas.

Unarticulated needs

One of the parish teams that participated in the research made a very important point about assumptions about older people articulating needs. The team, who frequently visit the homes of the sick and housebound, highlighted the fact that older people may not be that forthcoming in articulating their needs. They also made a very valid point related to the unarticulated need for companionship:

_Perhaps it’s taken for granted that older people make their requests known to us or other people who call to them but we think that they don’t articulate their needs. A lot of loneliness, so we perceive they need more visits/companionship._

Literature has also claimed that unarticulated needs may not necessarily mean that needs do not exist. People may lack the capacity to express their needs or may lack the awareness of entitlements in the first place (Ritters and Davis, 2008). In addition, this research has shown that people may lack confidence socially to look for information in designated information centres. Interestingly, some of the survey respondents in Rathdrum suggested a number of information needs but followed by stating that they would not use a
local information service. This occurred in a number of survey responses and is of particular interest in light of the above literature that links the lack of demand for an information service with wider unmet community needs.

**Transport services**

Transport was highlighted above as one of the needs expressed by older people in the focus groups and in the survey, particularly in the rural areas of Co. Wicklow. Although the survey participants were mainly referring to transport for appointments, socialising and visiting town centres, the literature highlights a lack of transport as a serious barrier to accessing information for older people. A lack of access to transport was specifically mentioned in the National Positive Ageing Strategy as a significant barrier to accessing information for some people as they age (NPAS, 2013, p. 46). The Tinahely and Dunlavin focus groups spoke about the importance of having transport to and from services:

*Sure, how could I get out of here without the bus, I’d be lost and I can tell you that so would many other elderly people that live around here. It is only when you live all your life in a rural part of Ireland that you can appreciate, I mean really appreciate, how important public transport is to us.*

### 3.4 Awareness and usage of County Wicklow CIS

There was a high level of awareness among the older people of the CIS in County Wicklow. The Citizens Information Centre featured in responses from older people surveyed with respect to bridging the information gap for them in an age of increasing reliance on digital communication.

However, awareness of the CIS did not necessarily translate into usage of the CIS. One participant made the point that the ‘CIC office is too busy for older people’ and suggested that a specific time could be allocated or a specific contact person who is an expert in issues that concerns older people. This idea of a ‘go-to’ person was also highlighted in the focus group discussions:

*There needs to be someone that you contact, like a person in the CIS that knows and understands how to support the older person coming in for information.*
Focus group participants in Bray reported a high level of awareness of the CIC office and the ease of access close to the post office in the town centre made it more accessible to them:

*I have popped around [referring to the CIC office] after I collect my pension or do my few bits in the town. At least you know there is somewhere to go when you need to. Now I wouldn’t go often, more like once every few years or when I need to but I say it to other people too. You know when you meet some poor old devil and you just know they don’t know what they are entitled to and they are being done and I say ‘go there’.*

The trusted intermediaries also reported a high level of usage (64%) of the CIS in County Wicklow. When asked what they contact the CIC for in relation to older people, trusted intermediaries mentioned entitlements, grants, carer rights, updates on social welfare issues, queries regarding local services and general advice and information.

Unlike the Bray participants, the Tinahely focus group participants were less likely to report using their local CIC (based in Arklow), yet they did have a general awareness of the service and its availability to them:

*Well I know I could call there but if I go on the bus, by the time I get off and get a few things, the return bus is arriving so there is limited time to do that. I’d use it..yeah…of course….if it was more local.*

Carter and Beresford (2000, p.26) summarise approaches to meeting the information needs of older people, concluding that effective information provision happens when information:

1.) Is of immediate relevance, clear, attractive and brief;
2.) Is appropriate to people’s abilities, experience, knowledge, language and culture;
3.) Takes account of the particular needs of: members of minority ethnic communities; people with limited mobility; people with sensory impairments and people with limited literacy skills;
4.) Links verbal and written information; and
5.) Is available from clear contact points.

The conditions laid out by Carter and Beresford (2000) are of relevance to the type of approach taken by the County Wicklow CIS in reaching older people. Regardless of whether or not they used the local CIC or general CIS in County Wicklow, in the main, older people and their trusted intermediaries have a general awareness and see a purpose for the CIS in County Wicklow.
3.5 Acting on information

Knowing what you need and then accessing and receiving information is only one part of the picture for older people as some may need further support to act on the information received. According to the Citizens Information Board:

*Advocacy is a means of empowering people by supporting them to assert their views and claim their entitlements and where necessary representing and negotiating on their behalf (CIB Advocacy Guidelines, 2007).*

Research has found that gaining access to information was strongly linked to receiving practical assistance to act on the information and achieve a solution (Quinn et al., 2003). The research carried out in County Wicklow also found this intricate link between information and advocacy. One focus group participant captures this perfectly:

*I’m not stupid, far from it, but some of this stuff, I mean I don’t know what they think we are, all top doctors or something, some of the stuff doesn’t even make sense when you read it. I mean you need help to read it and know what they are saying. Sometimes I have read something and thought I knew all about it and then when I went to the CIC the woman there explains it and I have got it all wrong!*

With respect to more isolated or harder to reach older people, trusted intermediaries reported that older people need more than just information. The trusted intermediaries went on to outline a range of supports and active help that they give to older people in addition to information. These include attending meetings with them, writing letters for them, filling out online application forms, printing off booklets and reading booklet information to them, ringing a Government department on their behalf.

**Figure 13:** Do you think older people need more support to act on information they receive about a specific need?

- yes, 90.5%
- no, 9.5%
It is clear from Figures 13 and 14 that older people need more than just access to information. This was also reinforced by older people themselves who outlined a number of additional supports to purely information provision.

As with information provision, one of the barriers to advocacy can be a lack of awareness that it is available. In order for advocacy services to be accessible, older people obviously need to be aware of their existence. Awareness of the presence and purpose of advocacy is generally acknowledged as being poor (Atkinson, 1999; Rai-Atkins, 2002; Quinn et al., 2003). Notably, over twenty per cent of survey respondents selected advice as the service provided by their local Citizen Information Centre compared with fifty per cent who selected information provision.

At particular stages in life a person may be more vulnerable or have less capacity to understand information presented to him/her. Trusted intermediaries in the community maintained that whilst leaflets and booklets were a valuable source of information for older people, there were difficulties associated with them. In a time of crisis, a leaflet/booklet by itself would not be useful, as the older person would be distressed and unable to interpret the information (Payne, S. et al., 2000).

The focus group discussion in Tinahely had a number of comments related to support in accessing and acting on information received:
People need more than that. Like the appeal system for the Living Alone Allowance, I didn’t know how to go about that or how to use the information that I had been given so I had to get someone to help.

When asked to explain more about what ‘help’ in that particular case looked like, the focus group participant expanded:

I had put in an application because [points to another woman] had got it so I thought I would be entitled to it too but then it turned out that I wasn’t so I was advised that I could appeal it. But I needed a letter, I needed to know what to say and how to put that down on paper, if you get that, I also needed someone that understood why I had been refused as I could not work it out.

3.6 The ‘information age’ and information technology

The growing tendency in policy to orientate towards the delivery of information via the internet is of particular concern when looking at the barriers to addressing the information needs of older people. Instead of being a solution, information technology may actually be a barrier for older people in accessing their needs. In contrast to the trusted intermediaries who accessed information for older people mainly through the internet (67%), the majority of survey respondents, that is older people themselves, had never used the internet for information.

In addition, the majority of respondents to this research maintained that they did not want computer training to access information: However, when asked if they would utilise a service that offered support with completing on-line forms, there was a resounding yes. Focus group participants were also positive about support to access on-line material as they felt that not only Government but also a lot of businesses were moving this way.

I mean everything now is nearly on the internet. All bills and this direct debit things is everywhere now so I think in a few years, unless someone can help us with that and I don’t mean being reliant on your neighbour, I mean a proper service provided by the Government. It’s only a short term gap you see, the older people of your generation [referring to researcher] won’t need that type of service but then again with illness and you don’t know what else there is always someone to use it.
The majority of respondents articulated a belief that the move to technology made it harder for them to access their entitlements. One focus group participant articulated this very clearly by raising the fact that older people only need to access information at certain times in life:

_That’s the plan I think, to make it impossible to know what you can get. I mean I only need information sometimes so even if I learnt how to use the computer to get something, I’d have forgotten by the time I go to use it again. You need to be using computers everyday to be good enough on them to get what you need when you need it._

A focus group participant in Bray made a point about how the digitalising of information took away her independence:

_I’m a very capable and together 86 year old but this move to ‘oh check the computer’ makes me feel incapable and less assertive… I am more dependent on family that I should be for information and forms and other things like that now._

There was a very high level of awareness among the research participants about the importance of access to information. Participants commented on the fact that without knowing what they are entitled to, they could go without vital entitlements:

_I didn’t know that I could get the pension when getting a payment for carers too so that has made a huge difference for us. Now I didn’t know that and who would have told me?_

In a report compiled in Northern Ireland, primarily concerned with information about older people, an important point was made with regard to online information sources. The research reported fairly limited engagement amongst older people with the Internet (Evason et al., 2005). This raises significant issues for policy development regarding information provision. In the search for more cost effective and efficient ways of delivering information, there is a move to information technology. For this reason, the Northern Ireland research urges caution in the deployment of such strategies when it comes to older people (Evason et al., 2005).

Research commissioned by Older and Bolder entitled Caught in the Web (McDaid 2012) indicates that where older people required public services, they were not aware of their entitlements to such services at ‘their time of need’ and that this was ‘particularly true of welfare services’. In fact older people often became aware of their entitlements ‘by chance’ (Ibid). Such difficulties, the research claims, are compounded by most public bodies opting for ICT as their means of communication.

The Older and Bolder report (2012) has concerns that, while such technology has its uses, it can be an ‘instrument of social exclusion for older people’. Examples here would be online form filling, being obliged to check websites for information, being compelled to avail of automated telephone systems etc. In terms of digital literacy and computer use by people aged 65 years and over the figures are extremely low, 1 in
5 people use the internet and/or computers generally (CSO, 2007).
The earlier references in this report to the need for face-to-face contact and the need for support to act on
information also present a case for less reliance on the internet when trying to ensure that older people’s
information needs are addressed.

Conclusion
This chapter has highlighted findings from the research. The research found that the most sought-after
information topics included social welfare, health, consumer issues, housing, bereavement and caring
issues. A high reliance on friends and family and social networks for information was reported. The CIC also
featured strongly in responses. Trusted intermediaries, particularly for more isolated older people, also play
a significant role in accessing information for older people. The research found a need for support to act on
information reported by older people themselves and their trusted intermediaries. The research found that
face to face contact was the most preferred option by older people in accessing information. It also found
that support to access online information is paramount to older people seeking information.

4. Recommendations
This chapter presents a number of practical and, in the main, financially-neutral recommendations. The
recommendations are underpinned by a need to balance maintenance of the current level of general
information provision for older people with an increase in older person specific information. The
recommendations are also informed by the literature review, which illustrate best practice in the UK and
Northern Ireland. Prior to undertaking some of these recommendations it is suggested that County Wicklow
CIS research what other CISs around the country have done by way of meeting the information needs of
older people. These locally-based, targeted initiatives may offer some practical and relevant responses.
Based on the literature review around best practice, the field research and subsequent data analysis,
recommendations will be grouped according to a partnership approach, people and places approach, and
a presentation approach. Although differing in specific focus, all of these approaches are underpinned by
a common concern to ensure that older people have access to and support to act upon their information
and advocacy needs.

Before looking at these more generally themed recommendations, it is important to record the specific
actions suggested by trusted intermediaries for improving access to information for older people:

• **Ensuring frontline health service staff are kept up to date on services available to Older**
  Persons directly affects the accessibility of information available to older patients
• **Maintaining good internal communication lines is key**
• **House calls**
• **Information list or one stop contact point for people**
• **Provide information in shops and private businesses**
• Information sheet with useful contacts, addresses, services available for distribution from GP surgery/pharmacy
• The information is all there. We need people to take time to explain changes and general information to them
• Make forms simpler and available in paper form as well as online
• Through community groups, having targeted meetings as required
• Maybe a regular talk show on local radio
• Advertise in Hospitals and Doctors’ Surgeries
• National and local advertising

Partnership:

1. Local structures for supporting information provision throughout County Wicklow for older people need to be identified and supported through multi-agency partnership approaches. For example-
   a. The CIS should explore collaborative work with the Ambassador Programme developed by the County Wicklow Older People Network. The Ambassador Programme offers potential to provide ongoing dialogue with older people in County Wicklow as well as providing a sign-posting service to the CIS throughout the County.
   b. The CIS in County Wicklow should continue to work closely with the Partnership Companies to ensure that older people living in more disadvantaged areas are supported in identifying, accessing and acting upon their information needs. Partnership Companies already play a role in the promotion of information provision for harder to reach groups and have skills and expertise around capacity building and empowerment, which is a precursor to some harder to reach groups accessing information.
   c. The County Wicklow CIS should establish formal contact with the Farm Family section of the IFA in Wicklow. A presentation could be made at an IFA meeting with Farm Family representatives present as a first step in making formal links around information provision.

2. Access to health care, social welfare and more general information needs are interconnected for older people and, therefore, formal links should be established between the HSE and the CIS in County Wicklow.
   a. Formal links should be established between the County Wicklow CIS and the Manager for Services for Older Persons in Wicklow. This formal link could ensure that Services for Older Persons are kept informed of social welfare entitlements of older people and the CIS could be kept informed of changes or developments in health care services specifically for older people.
   b. Formal links could also be established between the Primary Care Management Team in County Wicklow, via the local Primary Care Development Officer, ensuring that all frontline Primary Care staff are kept informed of the social welfare entitlements of older people and that CICs could be
kept informed of changes or developments in Primary Health Care Services. Further, County Wicklow CIS could explore, with a GP practice and/or Primary Care Centre, a pilot CIC outreach clinic in one of their surgeries on a monthly basis.

c County Wicklow CIS could provide training to frontline HSE workers to assist with a pilot signposting scheme. Other relevant agencies such as the National Advocacy Service, MABS and the Third Age Advocacy Service could also be engaged and this could result in the development of a multi-agency signposting scheme.

3. County Wicklow CIS should explore closer links with the local authority in Wicklow and capitalise on the opportunities presented by the Age Friendly Counties Programme as information provision must underpin age friendly initiatives.

People and Places:

1. Awareness of and access to Co Wicklow CIS should be highlighted by targeting specific geographic areas and estates such as Rathdrum, Dunlavin and Tinahely which need more access to the CIS. For example, County Wicklow CIS could pilot a monthly ‘information coffee morning/afternoon’ to coincide with the Dunlavin Friendship Club meeting (Fridays 3pm) and/or the Donard Friendship Club meetings (Thursday 3pm). Equally, the St. Vincent de Paul shop in Tinahely, which is utilised by many older people in the village, is another potential venue. However, given the resource implications, areas may need to be prioritised. In addition to trusted intermediaries, CICs in County Wicklow must also recognise the importance of family, friends and carers as sources of information and advice for older people. Homecare workers in both the public and private sector could be supported to signpost to information and advocacy services. However, the Citizens Information Board (CIB) could ensure that a module focused on information provision and sign-posting to services is included in the required FETAC training for homecare and healthcare workers at national level. This type of module could then be explored for expansion into continuous professional development courses for healthcare professionals. At local level Co. Wicklow CIS could develop a specific training programme for Wicklow Community Services to equip them to signpost to CIC and other relevant agencies. In addition, County Wicklow CIS should ensure that up-to-date information about CIS services in County Wicklow is available to trainers on the ‘Living with Dementia - Learning Together’ Carers Training provided by the Alzheimer Society of Ireland. This training is delivered locally in Wicklow at various locations throughout the year.

2. CICs in County Wicklow should also continue to ensure that independent information and advocacy is available to provide for the changing demographic in parts of Co. Wicklow (in particular for those older people living alone, without many friends or family); conflicts of interest with family members that may present barriers for older people accessing information; and respecting the right of older people to independence.
3. In addition to independent information providers, this research has also identified a clear need for advocacy in addition to information for older people. Advocates or information providers with a remit around advocacy are necessary to meet this need. The National Advocacy Service based in County Wicklow CIS should continue to build on the already established links with the Third Age Advocacy Programme with the aim of exploring the role of advocacy provision in meeting the needs of older people.

4. The County Wicklow CIS should develop a specialist service for older people whereby a specific time would be allocated to deal with older people’s information and advocacy needs. Designated CIS personnel should be specifically trained in supporting older clients.

5. For the majority of older people, being connected with a community group can play a significant role in combating exclusion and thereby ensuring greater access to information. County Wicklow Partnership and Bray Area Partnership could explore ways to build/support the capacity of more disadvantaged older people to engage in community networks. Further, community and public service spaces (such as community halls, libraries etc.) could be audited by the local Partnership companies for the level of engagement of older people with a view to increasing their involvement. The CIS could begin a process of placing notice boards (locked ones) into community halls etc. and updating regularly or at key times over the year.

6. The Wicklow Rural Transport Initiative is an excellent example of an enabling and empowering service for older people whereby they are connected to service centres throughout the County of Wicklow. County Wicklow Partnership could examine how this service could be expanded to Dunlavin.

Presentation:

1. County Wicklow CIS needs to respond to the issues highlighted in relation to harder to reach older people’s ability to access information online. Innovative responses to this need could include:

   a. The CIS developing a service which provides online form filling (including where payments are required) for more marginalised older people who cannot, for different reasons, access online information. The Citizens Information Board would be required to draw up policies and procedures for CISs assisting clients with online applications.  

2. Information should be targeted to specific groups of older people such as older people with disabilities. The content and form should be appropriate to the group for which that information is produced and older people must be involved in the production of material. CIB should continue to develop mechanisms to consult specific groups of older people to ensure that information provided by the CIB for them is accessible.

3. There is a strong onus on County Wicklow CIS to continue to provide a face to face service for older people as this appears to be the most preferred form of information provision amongst this cohort.

4. A combination of print and one-to-one contact can be utilised in presenting information. Clearly-worded information is supplemented by signposting to sources offering information. Likewise, a combination of
personal and impersonal formats, including telephone helplines, web sites, written materials and face-to-face support appears to be more effective in reaching older people than an over reliance on one particular medium for information provision (Dunning 2005).

5. County Wicklow CIS should audit and utilise the range of local parish and community newsletters in circulation to advertise the CIS in County Wicklow. This should also be expanded to include advertising in national organisations’ newsletters and websites such as the GAA Social Initiative and the Farm Family section of the website on the IFA site.

6. Local radio was also favoured by the older people who were surveyed for the study and it is recommended that this medium be used to advertise the service of the local CIC and/or to highlight specific entitlements/changes to entitlement. County Wicklow CIS should explore the possibility of a monthly slot on local radio.

7. County Wicklow CIS should look at developing an information and advocacy needs checklist (to include social welfare entitlements, assistive technology etc). This could be developed in partnership with a number of relevant trusted intermediaries. This type of development could complement the single assessment tool being developed at a national level, which is specified in the National Positive Ageing Strategy.

Conclusion

This research has clearly demonstrated that there is a wide knowledge of CISs in Co. Wicklow both among older people themselves (75%) and among those with whom they interact (64%). The research showed that, in the main, older people and their trusted intermediaries see a purpose for the CISs in Co. Wicklow.

However, there are obstacles to surmount by marginalised older people who need assistance with their information needs. Barriers include, inter alia, a reluctance to seek assistance from formal information provision agencies, an unwillingness to fully articulate their information needs and an inability to effectively engage with the digitalisation of information.

As the aim of the research was to examine ways in which Co. Wicklow CIS could access hard to reach older people, the concomitant recommendations focus on strategies which will assist this service to deliver targeted, impartial and confidential information, advice and advocacy to this cohort. As there are many recommendations in this report, Co. Wicklow CIS should include them in its annual work plan over a phased basis.
5. References


Di Rosa, Mirko; Kohali, Christopher; McKee, Kevin; Bie, Barbara; Lamura, Giovanni; Prouskas, Costis; Döhner, Hanneli; Mnich, Eva (2011) A typology of caregiving situations and service use in family carers of older people in six European countries: The EUROFAMCARE study. GeroPsych: The Journal of Gerontopsychology and Geriatric Psychiatry, Vol 24(1), 5-18.


CIS Oyster Multi Activity Report 2012 (not available to the public).


Appendices

List of organisations, community groups and individual members of the community that participated in the research:

Baltinglass ARA
Baltinglass Health Centre
Baltinglass Parish Team (interview)
Carers Association
Donard Friendship Club
Dunlavin Friendship Club (focus group participants)
Dunlavin Parish Office
Elected TDs and elected local authority councillors
GAA: Social Initiative
GP surgery, Bray (interview)
Homelink
HSE: Primary Care (interview)
HSE: Services for Older Persons in Wicklow (interview)
HSE healthcare professionals (including OTs; Physios; Primary Care Social Workers; Speech and Language Therapist; Nursing Home Support Office; Traveller Primary Health Care Project)
IFA: Farm Family and Social Affairs (interview)
Meals on Wheels, Bray
Pharmacy in Baltinglass
Pharmacy in Hacketstown
Rathdangan Community Council
Rathdrum & Aughrim Medical Practice
St. Peters Parish, Bray (focus group)
The Alzheimer Society of Ireland, Lily of the Valley Centre, Rathdrum (interview)
Tinahely Older Person Lunch (focus group participants)
Vevay Active Retirement Group
St. Vincent de Paul, Tinahely
St. Vincent de Paul, Rathdrum
Wicklow Community and Family Services (interview)
Wicklow Network of Older People
Wicklow Rural Transport Initiative
Survey for completion by people over 65 living in County Wicklow.

What are the information and advocacy needs of older people in County Wicklow

1. **Which category below includes your age?**

   - 65-69
   - 70-74
   - 75-79
   - 80-84
   - 85+

2. **Can you name where you live?**

   - Bray
   - Rathdrum
   - Donard
   - Baltinglass
   - Rathdangan
   - Dunlavin
   - other__________

3. **Are you male or female?**

   - Male
   - Female

4. **Do you live in a housing estate or a house on its own?**

   - Housing estate
   - House on its own

5. **Do you rent or own the place you live?**

   - Rent
   - Own
   - Stay with family

6. **Are you working or retired?**

   - Working
   - Retired

7. **Did you attend second level school or any higher education colleges?**

8. **How many people live with you in your household?**

9. **Do you have any health problems?**

   - physical
   - sight
   - hearing
   - emotional
   - cognitive

10. **Did you need information on anything in particular in the last year or so?**

    - yes
    - no

11. **if yes, what did you need information about?**

12. **Where did you get the information?**

    - CIC
    - friend
    - family member
    - PHN
    - Doctor
    - Other Health Professional
    - Helpline
    - Community group
    - councillor/ TD
    - other
13. Do you use any information helplines?

14. If you need information do you look for it yourself or get a family member or friend to help?
   - myself
   - family
   - friend
   - other

15. Do you prefer face to face or telephone advice?
   - face to face
   - telephone

16. Have you ever done a computer course?
   - yes
   - no

17. Would you do a course to learn how to get information off the internet?
   - yes
   - no

18. Can you name the best ways to get information to older people?

19. Can you name some of the things that you might need information about?
   - health
   - social welfare
   - pensions
   - bereavement
   - care
   - home care
   - security
   - heating
   - changes from budget

20. Is it hard to get information?
   - yes
   - no

10. If yes, what makes it hard to get information?
   - not knowing where to ask
   - not knowing where to go
   - automated telephone answer machines
   - not able to travel
   - no telephone
   - no internet
   - no family or friends to help
   - lack of availability of information
   - other

22. Have you heard about Citizen Information Centres?
   - yes
   - no

23. Do you know what a CIC does?
   - provides information
   - helps with form filling
   - advice
   - support to get information from other agencies
   - listening ear
   - don’t know
   - other

24. Do you know where your nearest CIC centre is?
   - Wicklow
   - Bray
   - Baltinglass
   - Arklow
   - Blessington
   - Glendalough
   - Carnew
   - no
   - other
25. Have you ever used the CIC to get information?
   - yes
   - no

26. Would you use a drop-in information service in your local area?
   - yes
   - no

27. Is information enough or do you need any other type of support to act on the information?
   - form filling online
   - downloading material
   - printing material
   - writing a letter
   - contacting an office
   - contacting government building
   - contacting local service

28. Did you ever use the local community welfare officer?

29. Will you miss the Community Welfare Officer service?
   - yes
   - no

30. If you need information on something that comes out of the upcoming Budget, where or whom would you contact for that information

31. Do you read the paper?
   - Wicklow Times
   - Bray People
   - Wicklow People
   - other national paper

32. Do you require support to get information that you feel you need?
   - yes
   - no

33. Do you listen to the local radio?
   - yes
   - no

34. Have you ever used the internet to fill in or download medical or social welfare forms?
   - yes
   - no

35. Would you use a service that offered support with online forms such as the medical card application?
   - yes
   - no

36. Do you find information booklets and other materials like that easy to read or do you need help working out what it actually means?
   - easy to read
   - need help as I find it complicated

37. Are you part of any community or social groups?
   - sport
   - community
   - hobby
   - history
   - retirement
   - women group
   - men group
   - health group

38. Do you have contact with any of the following on a regular basis?
   - Public Health Nurse
   - GP
   - family member
   - friend
   - community group
   - elected councillor/ TD
   - home care worker
   - hospital
   - local business
Survey for completion by community activists, community groups and other relevant community and statutory organisation personnel.

1. What is your role in the community?
   - public health nurse
   - community member
   - church
   - community project
   - community group
   - GP
   - elected representative (councillor/ TD)
   - pharmacist

2. Can you list some of the things that older people ask you for information about?
   - social welfare
   - health
   - care
   - pensions
   - loss
   - security
   - Other (please specify )

3. Can you list some of the things older people ask you to do for them in addition to providing information. For example, do they ever need you to ring anyone, fill out a form etc.
   - make a phone call
   - fill out an online form
   - fill out a paper form
   - contact a local service provider
   - contact the social welfare
   - contact the local authority
   - Other (please specify )

4. Where do you access information for older people?

5. Do you ever use the Citizens Information Centre?
   - yes
   - no

6. What have you used the Citizens Information Centre for?

7. Do you think older people need more support to act on information they receive about a specific need?
   - yes
   - no
   - Other (please specify )

8. Could you suggest any ways to make information provision more accessible for older people?

Open ended questions for focus group participants.

What have you information on?
How/ where did you get it?
Information leaflet distributed to survey participants and focus group participants.
Is information hard to get?
Why?
Would you need more than just information?
What is the best way to meet the information needs of older people?
What is this research survey about?
This research explores the information needs of older people in County Wicklow. The research survey is particularly concerned with the information and advocacy needs of older people in County Wicklow who are not networked with specific older person or general community organisations and services.

Who is conducting this research?
Mags Crean and Cathal MacOireachtaigh, researchers with Fruition - Research Education & Development, have been commissioned to carry out this research survey.

Who is commissioning this research?
Citizens Information Services (CIS) provide independent, free and confidential information, advice and advocacy services. In 2013 County Wicklow Citizens Information Service (CWCIS) was successful in applying for funding to undertake research into the information needs and channels of older people in County Wicklow. Co. Wicklow CIS was supported in its application by Bray Area Partnership and County Wicklow Partnership.

Why am I being asked to complete this survey?
You are being asked to complete this survey because you are an older person living in Wicklow.

Do I need to give my name or any other personal details?
No. This survey is anonymous so your personal details will not be asked for.

Can I refuse to answer a question?
Yes. Just say ‘skip’ and the researcher will move onto the next question.

Can I find out about the research findings?
Yes. A report will be generated by this research and can be obtained from mid-November 2013 from the County Wicklow Citizens Information Service (CWCIS). Here are the contact details of the Centres in Wicklow:

Bray: 3/4 The Boulevard, Quinsboro Road, Bray., Tel: 0761 076780
Arklow: 73 Main Street, Arklow Tel: 0761 07 6750
Wicklow Town: 9/10 Lower Mall, Wicklow Town. Tel: 0761 07 6840