

Briefing:
**Human rights of older persons and
their comprehensive care**
July 2017

The Council of Europe's report, [Human rights of older persons and their comprehensive care](#), was produced by the Committee on Social Affairs, Health and Sustainable Development, aiming to promote human rights of older persons.

It highlights that older people continue to suffer from negative stereotypes that lead to discrimination, isolation and exclusion. It also notes abuse remains a major problem and should be efficiently tackled, starting by raising public awareness of the issue, data collection and monitoring of long-term care institutions by an independent body.

It also calls on the Committee of Ministers to consider a legally binding instrument.

The report was adopted by the Parliamentary Assembly of the Council of Europe on 30 May 2017 and the resolution called on member states to:

- ensure a minimum living income and appropriate housing for older persons with a view to enabling them to live in dignity;
- prohibit, in law, age discrimination in the provision of goods and services;
- provide support for continued employment and training for those who want it;
- promote a positive attitude to ageing through awareness-raising campaigns targeting the media, service providers and the general public;
- ensure the availability, accessibility and affordability of health care and long-term care for older persons;
- integrate health- and social-care services for older persons;
- ensure adequate training of health-care professionals in geriatrics and establish geriatric centres throughout the territory where possible;
- foster a person-centred approach in the provision of care, by organising it around the needs and preferences of older persons, and involving them in its planning;
- adopt a charter of rights for older persons in care settings, to be used, *inter alia*, to empower older persons and to monitor long-term care institutions by an independent body;
- ensure appropriate assistance and support for older persons living in their homes, including medical and nursing care, meals on wheels and domestic assistance;
- ensure financial and practical support for informal caregivers, including training, counselling and advice, and take measures to offer them respite;
- raise awareness of physical, psychological and financial abuse of older persons, and collect relevant data, including on associated risk factors, with a view to drawing up an action plan to eliminate such abuse;
- promote active ageing by developing age-friendly environments, including spaces for joint activities between older persons and younger generations with a view to fostering intergenerational ties;
- encourage volunteering by older persons, both in their own country and abroad, as well as volunteering to support older persons

Age UK is supportive of further international agreements which will improve protection of the rights of older people.

Age International has also published a [report](#) on the UN convention on the rights of older people.

A new international convention on the rights of older people would transform debates about how to respond to global ageing. It would clearly articulate the rights which every older person holds that would enable them to continue contributing to society across their lifetimes. It would provide older people with an important tool for holding their governments to account when they experience the harmful effects of age discrimination. The process of consulting on, drafting, ratifying and implementing a convention would drive the rights of older people and their needs up the agendas of governments worldwide.

Human rights and older people

Many people experience infringements of their human rights in later life.

Sadly abuse, neglect and undignified treatment are all too frequent occurrences and human rights standards provide vital protection for older people by helping to change practice and procedure, culture and attitudes, and offering redress when breaches of human rights have taken place.

Equality and human rights legislation, in the shape of the Equality Act 2010 and the Human Rights Act 1998, provides a comprehensive range of tools with which to address breaches of older people's fundamental rights to freedom, respect, equality, dignity and autonomy.

There are also five main articles of the European Convention on Human Rights that are significant for older people:

- Article 2 - Right to life
- Article 3 - Prohibition of torture, inhuman and degrading treatment
- Article 5 - Right to liberty
- Article 8 - Right to respect for private and family life
- Article 14 - Prohibition of discrimination

Age UK works with government and other organisations to ensure the law is implemented effectively and not diminished, and to encourage service providers to take a proactive approach to the promotion and protection of older people's rights.

Our work focuses on:

- Promoting positive messages on human rights in the UK and engaging with policy proposals
- Through Age International, engaging with UN work towards a Convention on the Rights of Older People
- Monitoring UK's compliance with existing human rights treaties and conventions
- Ensuring that the prohibition on age discrimination works in practice

It is a well-established fact that the population of older people is large and growing. What is less well recognised is that the older population is also more diverse than ever before and will become more so. We seek to raise awareness of diversity among the older population and develop policy responses which tackle the inequalities faced by specific groups of older people.

The Centre for Policy on Ageing has conducted detailed reviews of some of these groups:

- [Disability \(PDF 1.15MB\)](#)
- [Ethnic minorities - Gypsies and travellers \(PDF 486KB\)](#)
- [LGBT \(PDF 786KB\)](#)
- [Older offenders \(PDF 614KB\)](#)
- [Refugees and asylum seekers \(PDF 422KB\)](#)
- [Religious minorities \(PDF 1.27MB\)](#)

Age discrimination and ageism

Age discrimination is rife and ageism continues to blight our society, with the result that older people frequently experience discriminatory treatment.

The effects are damaging both to individuals and to society at large. We meet discrimination in healthcare, social care, and in the provision of many goods and services.

Ageism means society is failing to benefit fully from the valuable resources that older people offer – as potential employees, volunteers, elected representatives and in many other roles. The Equality Act 2010 outlaws age discrimination both within the realm of employment and in the provision of goods and services.

The inclusion of age as a protected characteristic in the Equality Act is a huge step forward. Age UK is working to challenge attitudes and practice, pressing the public and private sectors to work towards making fair access for our ageing population to employment and services a reality.

The cornerstone of the Equality Act is the public-sector equality duty, which requires all public bodies and those performing public functions to eliminate unlawful discrimination, advance equality of opportunity and foster good relations between groups. By requiring public bodies to systematically examine the impact of their policies and practices on older people, the equality duty can help them to meet the challenges posed by our ageing and increasingly diverse society.

Social care

For those older people who do receive on-going health and care support, their experience of services is too often poor, with insufficient regard to dignity, respect, autonomy and fairness. A report by the London School of Economics found that a million older people reported 'poor or inconsistent standards of dignity and respect' when in hospital, and 640,000 reported not getting enough help to eat.

Compassion, dignity and respect have long been highlighted as lacking for older people using health and care services. This can result in part from financial pressures, stretching services and staff too thinly, particularly in the care and nursing home sector.

But there is also the impact of professional practice and attitudes and the priorities of care settings which can treat older people as a bed that needs to be emptied rather than a person to be cared for. **The new government must acknowledge and address that the outcomes of poor care are not only clinical but can create fundamental challenges to an older person's intrinsic dignity and wellbeing.**

The CQC [report](#) published on 6 July reveals more concerns on the quality of care.

Within the context of safety, the report found that levels of inadequate care have risen, with 25% of services not being considered good enough. Safety concerns can leave older people vulnerable to not receiving their prescribed medicine or their home visits being missed.

Caroline Abrahams, Charity Director of Age UK, described this apparent inequality as a 'Russian roulette' with older people risking their own safety when finding a care provider.

Safeguarding – further information

Stories of abuse and neglect within both residential and nursing homes are far too common. The increased use of covert monitoring systems has provided shocking evidence of deliberate cruelty, incompetence and criminal activity. Like all cases of abuse and neglect every incident of abuse and neglect causes real harm not just to victims, but also to our wider society, affecting families, friends and overall trust in the care sector.

The issue of substandard care and abuse in residential adult services has been well documented for many years, although a lack of research means that the real reasons for it are not fully understood. However recent research points to common issues which require particular focus from commissioners, regulators and providers.

- The wider culture.
- The specific care environment.
- The relationship between carer and the person being cared for.

Effective leadership is key to enabling good outcomes in all of these areas, creating ethical practice principles and a positive working ethos. Care services, particularly those for older adults living with dementia, also need to have effective training and supervision in place for all staff. Supervision should support the development of reflective practice and strategies to cope with what can be a demanding and emotionally heightened working environment. Service users should also have an opportunity to feed into training and recruitment wherever possible.

Care Quality Commission Regulation 18 (Staffing) states that staff should receive appropriate on-going or periodic supervision in their role to make sure competence is maintained. This should go further, by specifying minimum periods between supervision and guidance on content. Safeguarding discussions should be a regular element of supervision with the opportunity to reflect upon the care and support that they deliver to prevent the development of poor practice and encourage positive ways of working.

The introduction in 2015 of the Care Certificate for health and adult social care staff is welcome. The competencies it sets out are valuable, and compliance will be assessed by the CQC (although the Care Certificate is not mandatory). It remains a concern that it does not provide a full solution for ensuring workforce suitability and competence. The risk of low quality and inconsistent e-learning and classroom based training remains. A range of training providers are operating in this field, with some misleadingly claiming to

be 'licensed' or 'accredited' to provide the Care Certificate. It is down to each individual health and social care provider to validate the quality of the training and assessment that they organise, with no external validation or quality assurance system. This may lead to issues around certificate portability and variations in quality.

Although there may be some elements where a specialist assessor may be used to assess a standard, in general assessors for the Care Certificate are not required to hold any assessor qualification. The employer has only to characterise them as 'occupationally competent' in the standard they are assessing staff against.

It would be beneficial for the CQC to cross reference care homes rated below 'Good' with lists of training providers. If clear trends emerge indicating that poor training may be a factor then action against that provider should be considered. Currently there is a lack of remedial action that can be taken against inadequate training providers but, given the potential risk and harm that they can cause, potential actions should be explored and shared by the CQC, in association with the National Trading Standards Board.

Age UK is calling for:

- a) A national accreditation scheme should be considered for training providers who wish to offer Care Certificate training.
- b) Minimum standards for supervision should be set out in regulations.
- c) The quality of training provision should be mapped against regulated service ratings.
- d) Providers should invest in supporting the leadership development of management staff.

Domestic abuse

Last year the APPG for Ageing and Older People held a meeting on safeguarding in which a number of concerns were highlighted around the characteristics of abuse of older people

- New research has found that domestic abuse is an issue that lasts throughout the life course, and one that can have a profound impact on older people
- Official police statistics consistently report low levels of abuse and domestic violence against older people whilst prevalence surveys suggest that around 340,000 (about 1 in 25) older people living in the community are affected by abuse every year
- Health and Social Care Information Centre figures show that the majority of all safeguarding concerns relate to those over 65
- Age UK recently found that, at a very conservative estimate, 130,000 people living in the community aged 65 and over have suffered financial abuse, and we are also beginning to see the previously hidden issue of domestic abuse in later life becoming more widely recognised
- As with younger age groups, the majority of victims of domestic violence are women. However, the percentage of male victims increases with age

- Coercive behaviour and control is the dominant aspect of abuse – this can make victims even less likely to disclose and professionals don't always identify indicative patterns
- Older people can experience domestic abuse over a long period but on average receive support for a shorter period of time than those in younger age groups.

Data on domestic abuse and older people

Age UK is concerned that domestic abuse towards older people is a hidden problem.

Statistics on domestic abuse are often based on the Crime Survey for England and Wales (CSEW). However, the self-completion module of this survey has only been completed by respondents aged 16 to 59.

The ONS is considering removing this upper age limit and between October 2016 and December 2016 the age limit has been removed for a quarter of the sample to include all ages. They have said their aim is to extend this to the whole sample from April 2017 if this testing proves successful and that a decision will be made shortly.

Age UK would welcome plans to remove this upper age limit.

Additional challenges

Older victims often have extra challenges when it comes to prevention and support:

- Older people are more likely to be trusting, believing and less likely to challenge people
- Older people are less likely to go to the police and less likely to use domestic abuse services
- They see services as being for younger people and can be reluctant to engage
- Different generational attitudes to marriage and family life
- Being in a relationship for longer
- Having less of a support network
- Older people can be particularly vulnerable to financial abuse involving technology—due to a combination of knowledge of technology and a willingness to be trusting and to help
- Communication and advice around prevention may not be accessible to older people
- Older people may not want to trouble the police, or may think their problem is only a small one

Loneliness and isolation

Age UK research has highlighted the negative impact of loneliness and isolation in later life. There are indications that these factors can also play a part in increasing risks of abuse and neglect in later life. Those living alone, with no regular contact with friends or family, have reported a notably higher level of neglect. In addition 5.9% of those who reported being lonely in the past week had experienced some form of mistreatment, compared with 2.1% who had not felt lonely.

Care Act guidance states that it is 'critical' that the care and support system works to "actively promote wellbeing and independence, and does not just wait to respond

when people reach a crisis point". Supporting the reduction of loneliness and isolation within their local communities should therefore be seen as a key component in achieving this.

Residential care services that encourage visitors, involve families and the community are less likely to develop closed, institutional practices that will increase the risk of abuse and neglect.

Age UK recently released [research](#) on loneliness among older people, which found that half a million people over the age of 60 usually spend every day alone, with nearly half a million more usually going at least five or six days a week without seeing or speaking to anyone at all.

With 1.2 million older people in England now chronically lonely, having experienced loneliness for many years, the report warns that this is leading to an increased demand on health services, partly because people are more likely to develop health conditions such as heart problems, depression and dementia.

We also recently launched an [Index of Wellbeing in Later Life](#), which found that creative, cultural and social participation were all strong indicators of wellbeing.

Housing

Currently 9.3 million households are headed by a person over retirement age. By 2033, this is expected to increase to 13 million; an increase of 40 per cent on figures for 2008.

The Department of Communities and Local Government (DCLG) has projected that older households over 65 will represent almost half (48 per cent) of all household growth up to 2026.

Older people want comfortable and attractive housing alternatives that promote healthy and active lifestyles – but too often they find themselves in poor or inaccessible housing, in the wrong places.

Getting housing right for older people could have immense benefits for society and the economy and Age UK has published a comprehensive [report on Housing in Later Life](#) that outlines some of the challenges and opportunities for older people's housing with recommendations for action.

As this report makes clear, there isn't one simple solution that will suit everyone. Older people want a range of choices and the vast majority will continue to look towards mainstream housing solutions. Tackling some of the barriers discussed in this report would dramatically increase the quality and diversity of provision.

We are also not building enough sheltered and retirement housing to meet projected demand. Retirement housing could have a more prominent role in helping older people free up family housing, with benefits for local housing markets. More retirement flats and communities are needed, but this should not exclude a range of different types of housing suitable for older people. If we build more retirement housing, we need to address issues around poor design, unfair contracts and excessive service charges that are likely to discourage older people.

Age UK wants to see:

- A much broader range of affordable housing options available for older people
- Much quicker access to home adaptations to promote independence

- Tackling poor conditions and delivering decent homes
- Integrating housing with health and social care

Employment

Age discrimination in employment is still widespread, despite the introduction of Employment Equality (Age) Regulations in 2006.

Older people who because want to work should have the opportunities to do so and older workers would benefit from more opportunities to train and learn new skills, and improved back-to-work support. One important area of this will be improving unemployment support for those who do lose their jobs in later life.

Supporting older workers can bring a number of benefits to the wider economy, with the skills and expertise that older people can add to the workplace. **The government should therefore lead the charge against ageism in the workplace and to make the case for employing these older workers more effectively.**

Opportunities to learn, too, should be available to people regardless of their age, but these opportunities to re-skill in later life are actually being reduced at present – surely the reverse of what we would all agree we need to see as part of a broader strategy of supporting older people to remain economically active and to ensure that they can attain an adequate income for their later life.

This is particularly important in the context of any future rises in the state pension age.