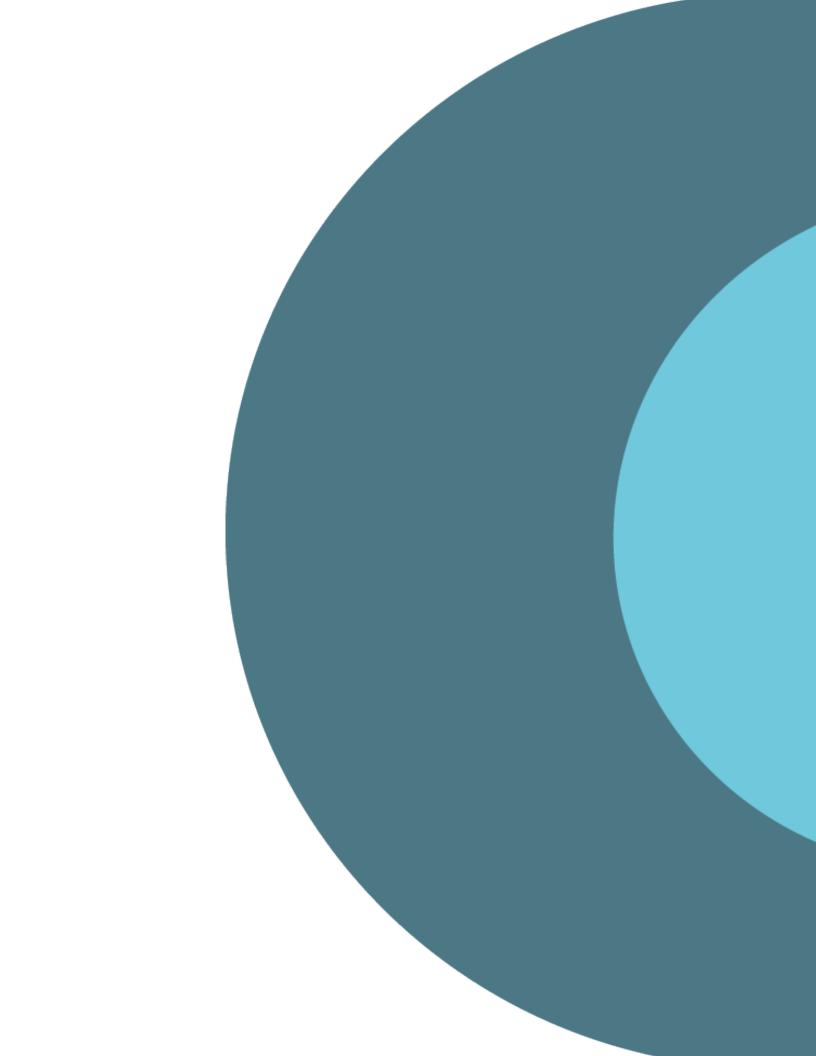


MY HUMAN RIGHTS, MY WELLBEING









MY HUMAN RIGHTS MY WELLBEING

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PREFACE

This booklet is a collection of stories from older people with a shared common theme: infringements of older people's human rights as protected under the European Convention on Human Rights (ECHR) and the United Nations Convention on the Rights of People with Disabilities (CRPD). The stories, three from each country, Finland, Ireland, Italy and Romania, cover a range of situations, older people universally encounter in their day to day life. The names and any identifying features of individual contributors have been changed.

My Human Rights, My Well-Being Booklet is one of four resources being developed by Two Moons - a two years Erasmus Plus funded project. The main objective of Two Moons is to design accessible education resources to support older people's learning in the field of human rights. Knowing about human rights can empower older people to speak up and challenge poor treatment and demand better services.

Six organisations have come together to develop this project, Co-Creation Support CLG (Ireland), Anziani e non solo (Italy); Asociatia HABILITAS Centru de ResursesiFormareProfesionala (Romania), VoiVa- Empowering Old age Coop (Finland), Gaiety School of Acting (Ireland) and Associazione di Promozione Social Teatrid'Imbarco (Italy).

The other education resources being developed include:

- A documentary drama script: Our Stories: Human Rights and Older People in Europe,
- A guide to hosting the 'Two Moons Documentary Theatre and Talkback'
- An audio of the stories: Listen to my Story Human Rights and Older People which can be used in workshops.

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1. INTRODUCTION TO MY HUMAN RIGHTS MY WELLBEING BOOKLET

Human rights belong to everyone. They are the minimum standards required for all individuals to live with dignity and be treated with respect. However, many older people are unaware of their human rights and their relevance to their day to day life. They may put up with being mistreated because they do not realise it is wrong and there is something they can do about it.

This booklet provides information about how human rights, as protected under the European Convention on Human Rights (ECHR) and the United Nations Convention on the Rights of People with Disabilities (CRPD), should work in practice for older people. By knowing about your human rights, you can recognise poor treatment or practices and challenge them or have someone on your behalf speak up, so that you can live with dignity and respect.

Please note that this booklet focuses on human rights, not necessarily rights legislated for in every country. The booklet does not provide legal advice. If you think, your human rights are being restricted or you are experiencing abuse, you should speak with someone expert in this area. The contact details of organisations, which may be able to advise you are listed in Section 9, 'I Live In' section of this booklet.



2. WHAT ARE HUMAN RIGHTS AND HOW ARE THEY RELEVANT TO OLDER PEOPLE?

Human rights are not just about the bare necessities of life; they are about living with dignity. They are universally agreed basic standards that apply to everyone regardless of their age or dependency. They are an important means of protection from abuse, neglect and isolation.

They are relevant to a whole range of everyday situations such as making decisions about living in our home or in a nursing home; consenting to medical treatment; being able to participate in society, work and access public services on an equal basis as others. Human rights give us power to speak out if public bodies responsible for the services we use are treating us unfairly or badly. All older people deserve to be treated with respect and dignity, unfortunately this is not the



experience of many older people in Europe. For example:

- In Finland, older women in particular are more likely to experience work place age discrimination¹ and income poverty²;
- In Italy, a report by IPASVI (the Italian Board of Nurses) found that 68.7 per cent of older persons in residential care are subjected to restraint³;
- In Romania, 33.2 per cent of people aged 65 years and older were at risk of poverty or social exclusion, in 2017 4;
- In Ireland as in other countries, the number of reported cases of elder abuse continues to rise. There was a 70 percent increase in the number of alleged incidents of financial abuse in 2017 compared to 2016, with the highest levels being reported in those over 80 years⁵.

¹ https://www.stat.fi/til/tyoolot/2013/02/tyoolot 2013 02 2014-05-15 kat 001 en.html

² OECD Income Distribution Database; www.oecd.org/social/income-distribution-database.htm; 2013 for Chile, Finland, Hungary, Israel, the Netherlands and the United States. Korea 2009 and Turkey 2011

³ https://www.lapresse.it/cronaca/l_allarme_dei_geriatri_in_europa_40_milioni_di_anziani_maltrattati-295453/news/2016-06-15/

⁴ https://ec.europa.eu/eurostat/statisticsexplained/index.php/People_at_risk_of_poverty_or_social_exclusion#Number_of_people_at_risk_of_poverty_or_social_exclusion

⁵ https://www.hse.ie/eng/services/publications/the-national-safeguarding-office-report-2017.pdf

3. HOW ARE MY HUMAN RIGHTS PROTECTED?

The human rights of individuals living in Europe are protected through a number of binding human rights treaties and other instruments including the European Convention on Human Rights (ECHR) and the United Nations human rights treaties. They cover the full spectrum of human rights – civil, political, economic, social and cultural.

Some rights are non-absolute in that they can be limited or restricted under certain circumstances, for example to protect the enjoyment of rights of others. When it comes to decisions concerning the allocation of scarce resources, States have discretion but they must be able to show that their decision is proportionate and strikes a fair balance between the interests of the general public and the individual's rights.

Absolute rights include the right not to be treated in an inhuman or degrading way, and the right to freedom from slavery or servitude. These rights can never be limited or restricted under any circumstance.



THE CONCEPT OF A LIFE WORTH
LIVING AND THE REAL
OPPORTUNITIES FOR ACTION,
DIRECTLY AFFECTOUR PERCEPTION
OF A JUST SOCIETY.

IN ORDER TO CREATE AN
UNDERSTANDING OF A FAIR AND
GOOD LIFE, WE NEED TO DISCUSS
WITH OLDER PEOPLE: LIFE,
INCLUSION, WHAT THEY SEE AS
THEIR MOST IMPORTANT ABILITIES
AND THE OBSTACLES TO
ACTIVATING THESE ABILITIES

When a State adopts a human rights instrument, it makes three commitments:

- 1. To respect and refrain from interfering with the enjoyment of human rights;
- 2. To protect against human rights abuses;
- 3. To take positive steps to facilitate the enjoyment of rights.

In ratifying a convention, a State agrees to be legally bound by its terms and undertakes to ensure that its laws and policies will secure the rights set out in that convention. However, to be legally enforceable through a State's domestic courts, the rights included in conventions must generally be incorporated into domestic law of a State.

Finland, Italy, Ireland and Romania have ratified the following conventions

- European Convention on Human Rights (ECHR)
- Council of Europe Convention on preventing and combating violence against women and domestic violence (Istanbul Convention)
- International Covenant on Civil and Political Rights (ICCPR)
- ✓ International Covenant on Economic, Social and Cultural Rights (ICESCR)
- Convention on the Elimination of All Forms of Racial Discrimination (CERD)
- Convention on the Elimination of All Forms of Discrimination against Women (CEDAW)
- Convention against Torture and Other Cruel, Inhuman or Degrading Treatment or Punishment (CAT)
- Convention on the Rights of the Child (CRC)
- Convention on the Rights of Persons with Disabilities (CRPD)

While none of these conventions set out to protect the rights of older people as a particular group, human rights are universal, they apply to all human beings and so implicitly include older people. These conventions, even if not enforceable by a domestic court, govern how states should act towards individuals. They offer varying forms of protection for older people. They also provide the standards and values on which national polices and laws should be based, so have the potential to influence issues of concern to older people.

Of particular relevance for older people in Europe are the European Convention on Human Rights (ECHR) and the United Nations Convention on the Rights of People with Disabilities (CRPD) which was ratified by the European Union, as a regional integration organisation and so all new European legislation, policies and programmes will comply with the rights contained in the CRPD.

4. THE EUROPEAN CONVENTION ON HUMAN RIGHTS (ECHR)

The European Convention on Human Rights was adopted by the Council of Europe in 1950 to protect human rights and fundamental freedoms in Europe. It was ratified by Ireland in 1953, by Italy in 1955, by Finland in 1990 and by Romania in 1994.

Once ratified, the way in which international human rights law is applied in domestic law depends on whether the State follows a monist or dualist legal tradition. Italy and Romania have a monist legal system where the Convention formed part of domestic law immediately on ratification. Ireland and Finland have a dualist legal system, which required the Convention to be incorporated into domestic law after ratification. The ECHR has force of law in all four countries now.

Public authorities and human right duties

Public bodies or authorities have a duty to respect the rights outlined in the ECHR in everything that they do including being fair in their policy making and service delivery. Hence, they are obliged to treat you with fairness, equality, dignity, respect and autonomy and can be held to account if they do not.

This duty is set out:

- In Ireland, under Section 3 of the European Convention on Human Rights Act 2003 and Section 42 of the Irish Human Rights and Equality Commission Act 2014. This places a statutory obligation on public bodies to eliminate discrimination, promote equality of opportunity and treatment and protect the human rights of its members, staff and persons to whom it provides services.
- In Finland, under Section 22 of the Finnish Constitution Protection of basic rights and liberties requires that public authorities shall guarantee the observance of basic rights and liberties and human rights.
- In Italy Art 97 of Constitution includes the principle of impartiality and Art 1 of Public Employment law
 requires that in public employment the absence of any kind of discrimination must be guaranteed.
- In Romania, Article 16 of the Romanian Constitution Equality of Rights demand that Citizens are equal before the law and public authorities, without any privilege or discrimination.

Public bodies include any organisation, authority or institution that operates in the public sector. This will usually include national and local government bodies (e.g. revenue, social welfare, local authorities) health and social care services, hospitals, the police, education bodies, a company part or wholly funded by or on behalf of the State such as home and residential care providers, and a company where the majority of shares are held by or on behalf of a Government such as some banks.

What rights are included in the European Convention on Human Rights (ECHR)?

If we are to use the ECHR to protect our rights and remind public bodies of their positive obligations to protect our human rights in the way they interact and deliver services to us, we need to know about the rights we are entitled to.

These are your rights under the European Convention on Human Rights

Article 2 Right to life

Article 3 Prohibition of torture to inhuman or degrading treatment or punishment

Article 4 Prohibition of slavery or forced labour

Article 5 Right to liberty and security

Article 6 Right to a fair trial

Article 7 No punishment without law

Article 8 Right to respect for private and family life

Article 9 Freedom of thought, conscience and religion

Article 10 Freedom of expression

Article 11 Freedom of assembly and association

Article 12 Right to marry

Article 13 Right to an effective remedy

Article 14 Prohibition of discrimination in the enjoyment of Convention rights

Protocol 1, Article 1 Protection of private property

Protocol 1, Article 2 Right to education

Protocol 1, Article 3 Right to free elections

5. THE CONVENTION ON THE RIGHTS OF PEOPLE WITH DISABILITIES (CRPD)

The Convention on the Rights of People with Disabilities is an international legal agreement. It exists to protect and promote the human rights of people with disabilities. It was adopted by the United Nations General Assembly in 2006. It was ratified by Italy in 2009, by Romania in 2011, by Finland in 2016 and by Ireland in 2018. The Optional Protocol to the CRPD is a way for people with disabilities to make individual complaints to the United Nations Committee on the Rights of Persons with Disabilities (CRPD Committee). However this Protocol has only been ratified by Italy and Finland, so far.

While each of the four countries have set up the Independent Mechanism¹²³, an independent body to monitor how the CRPD is being put into practice in their country, domestic laws have not been fully enacted to meet all of the measures contained in the Convention.

The Independent Mechanism writes a report for the CRPD Committee every four years (initial reporting is two years). Civil society organisations and individuals with disabilities can submit 'shadow' reports; sharing their experience of how the CRPD is being implemented on the ground from their perspective. The CRPD Committee examines State Party reports and Shadow Reports. They rely heavily on these in order to get a comprehensive picture of how the rights of people with disabilities are being protected in practice in a country. Having assessed whether governments are meeting their obligations under the Convention, the CRPD Committee issue their 'Concluding Observations'. These set out specific recommendations for government action.

Of course, not all older persons have disabilities, but the adoption of a rights-based approach and defining disability in relation to barriers to participation in the CRPD means many of the articles could be used by older people seeking human rights protection.



¹ In Italy, Law no 8/2016 established the Independent Mechanisms body National Observatory on the condition of Persons with Disabilities

² In Romania http://www.irdo.ro/irdo/pdf/167 ro.pdf

³ In Ireland, the Irish Human Rights and Equality Commission has taken on this role

What rights are included in the Convention on the Rights of People with Disabilities (CRPD)?

The CRPD contains 50 Articles. It is laid out in four parts:

Articles 1-4 lay down the Convention's objectives, guiding principles and general obligation. Persons with disabilities include those who have long-term physical, mental, intellectual or sensory impairments which in interaction with various barriers may hinder their full and effective participation in society on an equal basis with others (Article 1).

Guiding principles include respect for dignity, autonomy and the freedom to make one's own choices, non-discrimination; full participation and inclusion in society; equality of opportunity; and accessibility (Article 3)

Articles 5 - 30 set out the rights contained in the Convention:

Article 5 Equality and non-discrimination

Article 6 Women with disabilities

Article 7 Children with disabilities

Article 8 Awareness-raising

Article 9 Accessibility

Article 10 Right to life

Article 11 Situations of risk and humanitarian emergencies

Article 12 Equal recognition before the law

Article 13 Access to justice

Article 14 Liberty and security of person

Article 15 Freedom from torture or cruel, inhuman or degrading treatment or punishment

Article 16 Freedom from exploitation, violence and abuse

Article 17 Protecting the integrity of the person

Article 18 Liberty of movement and nationality

Article 19 Living independently and being included in the community

Article 20 Personal mobility

Article 21 Freedom of expression and opinion, and access to information

Article 22 Respect for privacy

Article 23 Respect for home and the family

Article 24 Education

Article 25 Health

Article 26 Habilitation and rehabilitation

Article 27 Work and employment

Article 28 Adequate standard of living and social protection

Article 29 Participation in political and public life

Article 30 Participation in cultural life, recreation, leisure and sport

Articles 31 - 40 directs implementation and monitoring aspects, including reporting obligations

Articles 41 - 50 refers to legal and administrative provisions

6. HUMAN RIGHTS AND DAY TO DAY LIFE

While all human rights are potentially relevant to older people's day to day life, some appear to hold more significance.



A. Protection for Life and Liberty

ECHR Article 2 Right to life

CRPD Article 10 Right to life

ECHR Article 5 Right to liberty and security

CRPD Article 14 Liberty and security of person

These Articles oblige States to protect the lives of older people and people with disabilities. These Articles protect older persons and persons with disabilities from being deprived of their liberty unlawfully, apart from in certain strict circumstances.

- I SHOULD NOT BE REFUSED
 LIFESAVING MEDICAL
 TREATMENT BECAUSE OF MY
 AGE;
- MY LIFE SHOULD NOT BE
 PLACED AT RISK DUE TO POOR
 QUALITY CARE PROVISIONS
 AND PRACTICES;
- I SHOULD NOT BE LOCKED IN
 A ROOM OR KEPT IN A CARE
 FACILITY AGAINST MY
 WILL UNLESS DUE PROCESS
 HAS BEEN OBSERVED

B. Protection from abuse and violence

ECHR Article 3 the right not to be tortured or treated in an inhuman or degrading way

ECHR Protocol 1 (Article 1) Property Right to the peaceful enjoyment of possessions

CRPD Article 15 Freedom from torture, cruel, inhuman, degrading treatment, punishment

CRPD Article 16 Freedom from exploitation, violence and abuse



- I SHOULD NOT BE MISTREATED,
 ABUSED OR
 EXPLOITED BY ANYONE;
- I CAN DO WHAT I LIKE WITH MY MONEY, AND POSSESSIONS IN-CLUDING MY HOUSE;
- I SHOULD NOT BE PLACED AT RISK OF ABUSE BECAUSE OF MY CARE NEEDS;
- I SHOULD KNOW HOW TO AVOID,
 RECOGNISE AND REPORT EXPLOITA TION, VIOLENCE AND ABUSE

These Articles oblige governments to have safeguards in place to protect older people and people with disabilities from abuse including physical, psychological, financial, sexual abuse and neglect; such as being left in soiled clothing; unsupported in hospital to eat or drink; use of excessive force to restrain.

Public bodies have a duty to make sure you are not treated in this way by public and private care providers or members of your family. Prevention and education measures should also be in place including appropriate forms of age sensitive assistance and support for persons with disabilities and caregivers.

C. Protection of Privacy and Family Life

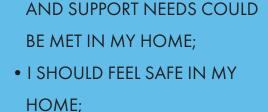
ECHR Article 8 Right to respect for private and family life, home and correspondence

CRPD Article 22 Respect for privacy

CRPD Article 23 Respect for home and the family

The right to respect for private and family life, home and correspondence is far reaching. It includes right to personal autonomy (to take decisions about your own live); being able to establish relationships with others as you wish; to live with your family; enjoy your existing home peacefully; participate in the community; protection of physical and mental well-being; have access to information about your own private life and information about your private life kept confidential.





• I SHOULD NOT BE FORCED

TO LIVE APART FROM MY LIFE

PARTNER WHERE MY CARE

 I SHOULD BE PROVIDED WITH INFORMATION OF SPECIFIC IMPORTANCE TO MY PRIVATE LIFE

CRPD Article 28 Adequate standard of living and social protection,

- I SHOULD HAVE SUFFICIENT
 INCOME TO LIVE A DIGNIFIED LIFE;
- I SHOULD BE ABLE TO HAVE MY HOME ADAPTED TO MEET MY NEEDS;
- MY LOCAL AUTHORITY SHOULD MAKE PROVISION OF HOUSING TO MEET THE NEEDS OF PEOPLE WITH DISABILITIES, INCLUDING FOR THOSE WITH DEMENTIA

This Article provides for the right of older people with disabilities to have access to social protection and poverty reduction programmes. This includes getting help to meet extra costs associated with having a disability; having access to social housing programmes.



E. Be supported to live independently and be included in the community

CRPD Article 9 Accessibility

CRPD Article 19 Living independently and being included in the community.

CRPD Article 20 Personal mobility

These Articles seek to enable persons with disabilities to live independently and participate fully in all aspects of life. A person with a disability should not be obliged to live in a particular living arrangement, but have an equal choice to decide where and with whom they live; have access to a range of in-home, residential and other community support services necessary to live and be included in the community. They should be able to access, on an equal basis with others, the physical environment, transportation, information and communications including technologies. Effective measures should be in place to ensure personal mobility to support the greatest possible independence.



- MY CARE ASSESSMENT SHOULD NOT JUST FOCUS ON MY BASIC NEEDS,
 BUT LOOK AT THE SUPPORT I NEED
 TO PARTICIPATE IN THE COMMUNITY;
- I SHOULD BE ABLE TO ACCESS
 GOOD QUALITY AND AFFORDABLE
 MOBILITY AIDS;
- PUBLIC TRANSPORT SHOULD CON-SIDER THE REQUIREMENTS OF OLDER PEOPLE AND PERSONS WITH DISABILITIES

F. Enjoy highest attainable physical and mental health



CRPD Article 25 Health
CRPD Article 26 Habilitation and Rehabilitation

- IF I HAVE A DISABILITY OR ACQUIRE
 A DISABILITY E.G. DUE TO STROKE OR
 DEMENTIA, I SHOULD RECEIVE TIMELY
 INTERVENTION TO MINIMISE THE EFFECT;
- I SHOULD HAVE ACCESS TO
 REHABILITATION TO ENSURE I REACH MY
 POTENTIAL;
- I SHOULD BE TOLD ABOUT MY DISABILITY
 AND THE AIDS AND TECHNOLOGY THAT
 CAN SUPPORT MY INDEPENDENCE

These Articles require governments to recognise persons with disabilities right to enjoy the best possible health. The right to health includes providing those health services needed by a person, specifically because of their disabilities, and designed to minimise and prevent further disabilities. A multidisciplinary assessment of individual needs and strengths should be taken with the focus on services that help people regain and maximise independence, enabling participation in all areas of life. These services need to be close to where people live - including in rural areas. Information on the use of assistive devices and technologies, designed for persons with disabilities, to support independence should be provided.

G. Participation in all aspects of society

ECHR Protocol 1 Article 2 Right to education
CRPD Article 24 Education

CRPD Article 30 Participation in cultural life, recreation, leisure and sports



- I SHOULD HAVE LIFELONG LEARNING
 OPPORTUNITIES TO DEVELOP MY TALENTS
 AND CREATIVITY
- I SHOULD BE ACCOMMODATED TO

 PARTICIPATE IN THE SOCIAL, CULTURAL

 AND ECONOMIC LIFE OF MY COMMUNITY

 ON AN EQUAL BASIS TO OTHERS THROUGH

 INITIATIVES LIKE DEMENTIA INCLUSIVE

 COMMUNITIES

Participation in all areas of society underpins both the ECHR and the CRPD. However, as people age and/or acquire disabilities, it becomes more difficult to participate in society equal to others. Everyone has a right to participate in education and the cultural, social and economic life of communities. Access to inclusive education including lifelong learning is viewed within the CRPD as essential to realising the development by persons with disabilities of their personality, talents and creativity, as well as their mental and physical abilities, to their fullest potential.

H. Equality and non-discrimination



- I SHOULD NOT BE TREATED

 DIFFERENTLY OR INFERIOR, JUST

 BECAUSE I AM OLD OR HAVE A

 DISABILITY;
- I SHOULD BE ABLE TO ACCESS PUBLIC AMENITIES EQUAL TO OTHERS;
- I SHOULD NOT BE DISMISSED FROM MY JOB JUST BECAUSE OF A DISABILITY SUCH AS DEMENTIA

ECHR Article 14 Prohibition of discrimination in the enjoyment of Convention rights

CRPD Article 5 Equality and

non-discrimination

CRPD Article 12 Equal recognition before the law

CRPD Article 27 Work and

Employment

These Articles protect older people and people with disabilities from discrimination because of age, disability, race, religion, gender, or sexual orientation. Many older people are treated unfairly because of their age such as being refused a job, travel insurance, a service. Governments are required to recognise that all persons are equal before and under the law and are entitled without any discrimination to the equal protection and equal benefit of the law. To promote equality and eliminate discrimination, governments should ensure that reasonable accommodation is provided.

People with disabilities should not be denied their legal capacity, but instead enabled to exercise their legal capacity by being provided with the necessary support to make decisions about their welfare, property and affairs. This article can be useful for older persons seeking protection from having others make decisions on their behalf.

CRPD Article 27 obliges governments to safeguard and promote the realisation of the right to work, including for those who acquire a disability during the course of employment.

7. OUR STORIES: OLDER PEOPLE AND HUMAN RIGHTS IN FINLAND, IRELAND, ITALY AND ROMANIA

In this section we explore real-life situations where the human rights of older people in Finland, Ireland, Italy and Romania were not respected. Their stories illustrate the challenges older people face in having their rights met. Each story is linked to the specific Articles in the ECHR and the CRPD where relevant.

At 64, I'm eligible, at 65 I'm not – What a difference a year makes

Joan had a stroke at aged 63 leading to acquired brain injury. After initially receiving great care in the stroke unit and two weeks of rehabilitation in a local community hospital, Joan "went home with a bag of medicine", and, was able to walk " not wonderfully" but enough to manage. Joan describes how she "was on her own", with no arrangements for call-back [to see physiotherapist] or follow-up and no information as to what to expect. Unable to access physiotherapy under the public health system, Joan paid for twice-weekly private sessions. Hereafter Joan's back yard became her unsupervised physio gym.

Months after the stroke, Joan's left leg still troubled her, it tended to "stick to the floor and get caught." She began to experience further symptoms of depression and fatigue, "that kind of upset me because I wouldn't be depressive normally and then I had this awful fatigue which is standard after a stroke but I wasn't made aware of it." Joan received an appointment to attend an outpatient clinic and informed the consultant there of her symptoms and asked about the possibility of seeing a physiotherapist in regards to her leg. Joan's concerns were not addressed leaving her with a feeling of being dismissed, "he never looked at me face to face, he focused on a place there on my breast bone with his eyes down," while he informed Joan "Well, we don't know why some people get depressed after a stroke... your leg is fine - go back to work." Three days later Joan fell over her leg and broke her wrist.

Joan's long-term symptoms became more evident a year and a half after the stroke. She discovered which part of her brain had been affected and as a consequence she believes the clot (in her right frontal cortex) had previously given her a false understanding of her disability, "I could think I was better than I was." Joan wishes someone could have informed and reassured her that "these are the possibilities of what might happen....you will probably escape but don't panic if they do happen and this is who you go to if they do happen".

Joan didn't escape and she feels that with input and advice from a neurologist or physiologist at the time of her stroke, things would be different today. Joan now finds it hard to focus and experiences lapses in memory. After seeking psychological support from a brain injury charity, she has been told that their cut-off point is 65 (for eligibility) and she had just turned 65 at that stage. As Joan says, "they moved me into the elderly care section, and I'm great compared to others, so obviously I'm not a priority there, so effectively for my age group there is no funding"

A year and a half ago at the time of her stroke she would have been eligible, but no one saw fit to tell Joan.

Joan's story highlights infringement of these rights:

ECHR Article 8 Respect for Privacy and family life: right to access to information concerning health;

ECHR Article 14 The right not to be discriminated against in the enjoyment of rights;

CRPD Article 25 Health: right to enjoy the best possible health includes early identification and intervention to minimize and prevent further disability;

CRPD Article 26 Habilitation and Rehabilitation: appropriate measures to enable persons with disabilities to attain and maintain maximum independence, full physical, mental, social and vocational ability, and full inclusion and participation in all aspects of life.

Too old to matter

Anna is 85 years old and despite some cognitive impairment and mobility issues she still lives alone. Her daughter Eliza lives nearby and assists Anna in her day-to-day life. Anna is very proud of her independence but lately it is getting more difficult to do things like visit her friends, go to Bingo, or Sunday lunch with her daughter and nieces. Her knee is giving her a lot of pain and nothing seems to work to relieve it, confining Anna to her home. This worsening mobility prompted Eliza to take Anna to visit the orthopaedist.

After a superficial medical exam, the doctor brusquely asked her, "lady, why are you here? At your age, what do you want? What am I supposed to do?" Anna was taken back by her disrespectful manner but in spite of the intimidation she felt, she mustered up the courage to declare that she would "like to feel less pain, to move more easily and at least walk a little." The doctor did not listen and repeated her dismissal.

Anna feels disempowered by her doctor's visit and vows never to visit a doctor's surgery again. All her motivation and hope of finding a reasonable outcome are gone. Her experience has crushed her strong, independent spirit and she now feels unworthy of asking for her care needs to be met. As she explains, "after you hear the word "No" enough times you stop asking. If you are victimised once you're victimised forever".

Anna's daughter Eliza sees this treatment as a violation of her mother's human rights and as an assault on her dignity. Anna is being discriminated against because of her age and as a consequence does not receive an equal standard of health and care.

Anna's story highlights infringements of these rights:

ECHR Article 14: Prohibition of discrimination in the enjoyment of Convention rights;

CRPD 17 Protecting the integrity of the person: be seen as a person with feelings and thoughts and be treated with respect;

CRPD Article 20 Personal Mobility: information and access to aids;

CRPD Article 25 Health: access the healthcare on equal basis;

"I was afraid to tell anyone because I knew the stigma around it"

At 61 after being diagnosed with early onset Alzheimer's, Ruby immediately retired from her job. Now at 68, Ruby regrets this admitting that she "was afraid to tell anyone because of the stigma surrounding her diagnosis".

At the time she felt depressed and isolated due to the lack of support and information in her area, nearly a year after her diagnosis, Ruby visited an Alzheimer's care centre 30km from her home, the only service available to her in her area. Witnessing older people with more advanced dementia confirmed her worst nightmare, "I came out and I cried and cried and cried, this is my life now this is what it has come to.... eventually I got the courage to drive home".

Ruby worries that she will have to leave her home especially with the lack of homecare available. "Why should I be forced to go into a nursing home because this government has decided that all the money should go into nursing homes? We want to live in the homes we paid and worked so hard for. Why should I be forced into a nursing home? That is a complete violation of my human rights".

Ruby regrets her lack of self-assertiveness when retiring from her job so early, and puts this down to a lack of advice, support and information saying, "I completely forgot I had rights for myself." She also feels that she shouldn't have given up and that she should have informed her employer that "I have rights under employment law that protect me" stressing that if she had cancer, she would have talked to her employer and said, "look I have cancer" and they would have said "'Ok' and would have helped me or supported me. But if I said I have Alzheimer's they would have found a way of getting rid of me".

After eventually discovering Cognitive Rehabilitation Therapy (CRT), Ruby recommends that everyone diagnosed in the early stages of dementia should be told about and be able to get CRT, saying that it " is an easy and simple way to keep you well" affirming that it was " really where my journey into life began, that is what actually saved my life, without a doubt".

Ruby's story highlights infringements of these rights:

ECHR Article 8 Right to respect for private and family life;

ECHR Article 14 Prohibition of discrimination in the enjoyment of Convention rights;

CRPD Article 5 Equality and non-discrimination: reasonable accommodation is provided;

CRPD Article 8 Awareness raising: combat stereotypes and prejudices relating to persons with disabilities, including dementia;

CRPD Article 19 Living independently and being included in the community: access to community support service to prevent isolation and segregation;

CRPD Article 27 Work and Employment: safeguard and promote the realisation of the right to work, including for those who acquire a disability during the course of employment;

CRPD Article 26 Habilitation and Rehabilitation: enabled to develop new skills, and have help to regain lost skills.

A new face, a few minutes, home become a prison with constantly changing guards

Elsa is a 64-year-old practicing nurse nearing retirement. She has worked for many years as a community nurse, providing support to older people and family carers in their own homes. She feels relieved to be able to retire soon, but can't stop worrying about the future health and well-being of both her clients and her colleagues; explaining that "there is no explanation nor excuse for the mental strain the work causes; it feels inhuman". Elsa explains how she has visited one particular 85-year-old lady a few times and that the client's daughter counted that her mother had been visited by 40 different home care employees in a month. This worries Elsa greatly, "how can you adequately keep track of someone's health and well-being in these circumstances?" Furthermore, Elsa informs us that, "this lady has dementia and has no idea where she is....and lies on her bed all day and seems anxious when anyone enters the door or touches her. My heart breaks for her".

Resources for home care have not increased while state support for nursing home care has been reduced. The outcome Elsa believes "is a lot of older people do not get to live as they choose", it requires, "money and nerve from family members to fight the system and demand good care for their elderly relatives". In terms of privacy, respect and feeling safe everyone would choose to stay in their own home over a nursing home but as she states in an ideal situation "an older person requiring constant care deserves, and should see the same familiar and trusted carer visiting their home, having time to chat." Elsa draws comparisons to the past, and how 'this was how it used to be. But living at home and needing care nowadays means that you will be visited by dozens of care workers a month and for only a few minutes at a time. The meaning of home is lost when home becomes a prison with constantly changing guards. The current system cannot protect older people's rights".

Elsa is exasperated by the system that she works tirelessly in, and is convinced that the current situation comes down to the lack of respect that the policy makers and younger generations have for older people. "Is this really how we want to treat our elders? Nobody would wish such treatment for themselves." She concludes with these thoughts, "I don't think politicians have any understanding of the reality of home care nowadays, neither the older person, their families or us employees are listened to as experts in the situation that we have to live with every day".

Elsa's story highlights infringement of these rights:

ECHR Article 3 Prohibition of torture and ill-treatment includes not being subjected to inhuman or degrading treatment;

ECHR Article 8 Right to respect for private and family life: to be treated with dignity and feel safe in own home;

CRPD Article 15 Freedom from torture or cruel inhuman or degrading treatment or punishment;

CRPD Article 17 Protecting the integrity of the person;

CRPD Article 19 Living independently and being included in the community: access to community support service to prevent isolation and segregation

CRPD Article 25 Health: the enjoyment of the best possible health.

Nobody took action, I was left defenceless

Ingrid, a 70-year-old mother and retired nurse has lived with abuse for many years. Her son, Igor, has mental health and substance abuse issues. He is always looking for money and can become abusive and threatening if refused. Ingrid even had to return to work after retirement to pay off her son's debts.

She recounts how "years ago I used to call the police every time...I was very scared and wanted someone to talk sense to him". Outside of filing a restraining order, which Ingrid felt she didn't have "the, energy and skills" to do, the police could do nothing, "they said I needed to set boundaries and they couldn't do anything until my son commits a crime". Ingrid stopped calling for help because she felt ashamed. She was certain that they thought "what kind of a mother can't control her son?"

That day came; refusing her son's demand for money, he violently pushed her over breaking her hip. Ingrid's past experience with law enforcers stopped her from involving the police. However, after a hospital social worker contacted the authorities, she was informed that a criminal offence (battery) had been committed, hence the decision to prosecute rested with the authorities.

The trial was held in a district court and Ingrid and her son were both summoned to attend. Ingrid explains how "I felt really scared going into trial because it meant facing my son for the first time after the incident". She was also doubtful about whether she "would be taken seriously this time" She was right, revealing "It turned out my suspicions about the usefulness of the stressful process were right".

Ingrid describes how she was shocked when the public prosecutor suggested that they settle the case out of court as allowed by their legal system if the victim and suspected perpetrator were in agreement. Ingrid explains how the public prosecutor "seemed annoyed", asking "why such a fuss?" and insisted that they were "two reasonable adults, surely you can deal with this in private." This discussion took place with her son in the room. Ingrid feels betrayed, wondering "why would they drag me through the stressful investigation and prosecution process just to send us home again with no consequences and changes to the situation?" While the judge did question Ingrid further, asking her if she was OK with settling the case out of court, Ingrid was too scared of her son's reaction and the prosecutor's response to say no.

Ingrid is left frustrated with all of the authorities and with their failure to provide her with help over the years. She wonders if those with authority would have acted differently if instead of an older woman, she had been a child, pointing out how "I am also defenceless in front of my adult son", but this does not mean "I'm just a silly old lady with too much imagination or problems with my memory to be taken seriously".

Her hope is that no other older people would ever have to go through what she endured, She advises that "authorities should definitely be better trained to identify and take more seriously violence and abuse against old adults" and that "receiving justice and having one's rights respected cannot be a question of luck in terms of how knowledgeable and empathetic the individual assigned to help you is".

Ingrid's story highlights infringements of these rights:

ECHR Article 3 Prohibition of torture and ill-treatment;

ECHR Article 8 Right to respect for private and family life;

ECHR Article 13 Right to effective remedy;

ECHR Article 14 Prohibition of discrimination in the enjoyment of Convention rights;

ECHR Protocol 1 Article 1 Protection of private property.

Exploitation of my vulnerability, left me feeling stupid and without dignity

Adamo is a 77-year-old retired postman who lives alone. His wife Angela has advanced dementia and lives in a residential care facility. He visits her as often as possible. Adamo finds his retirement difficult and misses being part of the community and sometimes feels very lonely and isolated. Adamo remembers a time when the whole community would depend on his wisdom and knowledge and turn to him for advice. He was a much-respected member of his neighbourhood and Adamo misses these connections to everyday community life.

Hence Adamo has been spending more and more time alone in his apartment. His telephone is his link to the outside world. One day he received a phone call from a young man conducting a survey regarding a new gas supply company. Little did Adamo know that he was to become the victim of a deliberate and targeted attempt of miss-selling by the representative of the energy company.

Adamo was asked a series of leading questions, "Are you happy with your current gas company?" to which he replied, "It is a little expensive because my only income is my pension." He was then asked if he "would be interested in paying less." Thinking nothing of it, he replied "Yes".

Adamo "thought nothing of the call" but a month later he received an invoice from that gas company for an even more expensive tariff than his existing gas supplier.

Adamo feels that his privacy was violated and that he was manipulated into buying and agreeing to a service that he didn't want. He feels that the young man "cheated" him and he is left feeling more vulnerable than ever, incapable of minding himself and making proper decisions. The whole experience has left him feeling "miserable and stupid, incompetent and without dignity".

Adamo's story highlights infringements of these rights:

ECHR Article 8 Right to respect for private and family life;

ECHR Article 14 Prohibition of discrimination in the enjoyment of Convention rights;

ECHR Protocol 1 Article 1 Protection of private property;

Grandfather's life turned upside-down by granddaughter's actions

Antonio is an 81-year-old man and a former employee of the local bank where he worked for more than 40 years. Antonio is a widow now but cherishes the memories of his late wife Margherita and the lovely terraced home they bought together after his retirement. Here Margherita tended her beautiful rose garden and together they enjoyed many Sunday lunches with family and friends.

Four years ago, Antonio's granddaughter Stella got pregnant. Stella was living with her husband in a very small city centre apartment, located on the 4th floor without an elevator. She realised this would be difficult to manage with a small child. Stella proposed to Antonio that they should swap houses. She explained to him that his terrace house was now too big for him and the house and garden required a lot of work to maintain. Antonio was not happy with the idea as he knew he would be devastated to leave his and Margherita's beloved house with all it's memories, but he felt sorry for Stella and she persuaded him to agree to the arrangement. He recalls thinking, "You know, who could have said no for the good of a newly born great-grandchild?

In the beginning Antonio adapted to the new situation and settled in recognising the advantages of a smaller flat for a man living alone. However, very soon after moving into the new building, Antonio began suffering from arthritis and needed to use a cane. Having to use the stairs to and from the 4th floor very day became more and more painful and was aggravating his condition. Antonio felt he had no choice but to ask Stella to re-swap the house and flat, especially now that the baby had grown up a little. Stella refused to comply and she remains in the terraced house.

Antonio then sought permission and support from the authorities for the installation of a lift, but a year later he is still waiting for a response. He says, "reaching my apartment has become increasingly more difficult and I have ended up not going out any more unless it is strictly necessary".

Antonio feels his life has been turned upside-down. He has limited accessibility between the flat and the outside world and he can't enjoy living in his own property, "If you think about it, having a right and not being able to enjoy it, is the same as not having it at all".

Antonio's story highlights infringements of these rights:

ECHR Article 8 Right to respect for private and family life: the enjoyment of his home and to create and maintain social relationships;

ECHR Protocol 1 Article 1 Protection of private property: not to be deprived of your house;

CRPD Article 16 Freedom from exploitation, violence and abuse: protection from being coerced in the transfer of property;

CRPD Article 19 Living independently and being included in the community: adaptation of home to meet needs;

CRPD Article 20 Personal Mobility;

Food and medicine impossible on my state pension

Bianca is 66 years old and has high-cost medical bills. She is being treated for cardiovascular disease and high cholesterol. Some of the bills are covered by the health system but increasing amounts are not. She struggles to maintain her physical and mental well-being on her limited state pension. Bianca has had to fight hard for this meagre income.

All through her professional life she has paid full contributions into her state pension fund. On retiring, Bianca had calculated that she would be due a pension of 189 euro per month. However, after a department assessment she was only given a 140-euro pension. Shocked, she tried without success to find out why she hadn't received the amount she believed she was entitled to. After being warned that her pension could be reduced even further, if she appealed the decision, Bianca still went ahead with the appeal. Her worst nightmare was realised when the amount was reduced by almost 3 euros more.

Contrary to Bianca's gentle and non-confrontational manner, she decided to fight for her pension rights in a court of law and was awarded a pension of €205 per month. However, Bianca finds that this still "does not provide me with an adequate standard of living" as without her son's financial support, it would be impossible to cover the costs of her basic expenses and medicines every month. In her retirement, she had plans to travel, learn a foreign language, go to the swimming pool; do all the things she never had time to do when working. Now she cannot even buy clothes, if she is to have enough to live on.

Bianca believes that older adults are treated unfairly and disrespectfully and wishes there would be "a review of the income of retired people so as to give them a more adequate and equitable income so that they can live a decent life and pay the bills." But she concedes that she does not believe that this will happen, "I do not think my generation will ever get to live and enjoy this kind of life compared to the retirees from other European countries." Bianca admits that older adults are quite apathetic but "what should you expect? We come from a time and place where you did not stand up to authority. Older people feel this injustice very deeply. We are treated so badly".

Bianca's story highlights infringements of these rights:

ECHR Article 8 Right to respect for private and family life: the protection of physical and mental well-being;

ECHR Protocol 1 Article 1 Protection of private property: pensions constitute a procession ECHR Article 14 Prohibition of discrimination in the enjoyment of Convention rights

Forced to work in the black economy to survive

Elena is 65 years old and has been married 40 years. She does not have children although it is something she would have loved. Elena is well educated and graduated as an industrial chemist. She remembers a time when she first began working saying people behaved "exceptionally", treating others fairly, but "they cannot be compared to those people nowadays". For a period of time she was also the only woman employed in a male dominated workplace. Elena ran her own business for a while but unfortunately the business failed and as a result she now receives a very low pension.

After her retirement, Elena found it necessary to search for work to supplement her low pension. She eventually found part-time employment in an after-school facility and while she enjoyed working with the children, she soon began to feel the pressure of her new role. Elena's work hours increased under demanding conditions and she soon began to feel exhausted. However, Elena felt trapped in a situation she could not leave. She was dependant on the extra income and she knew that if she complained or refused to work the extra hours, she would lose her job. She was also fearful that as an older person she would find it difficult to find another job. Elena says "a younger person could have afforded to say NO to her employer and searched for another job." She believes that employers exploit the older person's need for extra income, taking advantage of their willingness to work in the black economy with little protection. Although from the outside Elena appears a brave and powerful woman, she does not feel capable of standing up for herself finding it "easier to fight for others than for myself". Elena recalls how she endured "so much humiliation, I had a hectic schedule" but she stresses "I had a bank loan, I needed money".

Elena's health began to suffer and the stress caused her to develop psoriasis, as she describes "my nails were falling off, my blood was spilling". But this was only the beginning of her health issues; after 3 years, the stress and demands on Elena in her workplace finally took their toll and culminated in a heart attack. Describing the experience, Elena says that in the workplace, "I was hatched, matched and dispatched" and today life remains hard for her living on a small pension.

Elena's story highlights infringements of these rights:

ECHR Article 8 Right to respect for private and family life;

ECHR Article 14 Prohibition of discrimination in the enjoyment of Convention rights;

CRPD Article 28 Adequate standard of living and social protection.

"My life is a dead limb: I'm not doing or producing anything."

Tom is 63 years old and once worked as an electrician, earning good money especially when he worked in Iraq during the war. He has a large family of children and grandchildren but lives alone in a tiny and crammed one-room apartment. Tom values his family, social activities and exercise as means to keep healthy and active but due to his financial status, he feels his opportunities are very limited.

In 2006, Tom had a stroke and he was told by the doctor at the time that he would not be able to work again. Tom was devastated by the diagnosis and his enforced retirement. At the age of 50, Tom felt wronged "I did not want to go into retirement"; he recounts how after 10 days in hospital, he recovered "instantly". He survives on a meagre illness benefit of 193 euros per month. Tom believes his illness pension was calculated unfairly because of a previously biased job ranking system. On his current pension, Tom is struggling to survive and does not eat healthily. He relies on social service canteen meals or any food he can find himself and he accepts and wears clothes belonging to his partner's deceased husband. Luxuries are a thing of the past.

As the years went by, Tom became more determined to work again, so six years ago he retrained as a security guard. He was prepared to work both day and night shifts. He looked forward to having money, being less idle and bored and contributing to his family and society. After receiving his certificate in public security however he discovered that as he had been certified by a doctor previously as unfit to work, he was not permitted to re-join the workforce.

Tom would love to be able to help his family more and be able to contribute to family events and occasions. He cannot afford Christmas presents for his grandchildren and at gatherings he tries to avoid drawing attention to himself and his circumstances as they are a source of great shame and frustration for him.

Tom just wants the basics- somewhere comfortable to sleep and eat. Right now, however, Tom looks at his life as if it were a dead limb- he is not doing anything or producing anything. He tries to be optimistic, hoping that one day he could work again after such a long period of inactivity, but those spirits are hard to keep up.

Tom's story highlights infringements of these rights:

ECHR Article 8 Right to respect for private and family life;

ECHR Article 14 Prohibition of discrimination in the enjoyment of Convention rights;

CRPD Article 5 Equality and non-discrimination: ensure reasonable accommodation

CRPD Article 26 Habilitation and rehabilitation;

CRPD Article 27 Work and employment: safeguard and promote the realisation to work including for those who acquire a disability during the course of employment;

CRPD Article 28 Adequate standard of living and social protection: having sufficient income for food, clothes and housing;

CRPD Article 30 Participation in cultural life, recreation, leisure and sport

Digitalisation has left me feeling excluded from society in general but also in my own family

Anneli is 75 years old, has some mobility problems but manages well at home. In the past few years she has become increasingly worried and isolated in regards to the digitalisation of services such as health and banking, stressing how "it is expected that we all have the tools and skills to access them. As a service user I don't feel equal with those younger than me." Anneli understands the benefits but feels it has gone too far. "I never felt too bothered by these changes of the past decades because they were presented to us more as small adjustments to accommodate the needs of the younger generations, not to deny the needs of the older generations. I never thought that the agenda was to force everyone to learn these complicated gadgets and online services".

Recently she visited her bank to make a money transfer to her grandchild as a surprise gift for his graduation. She had not needed to use bank services for a while as she explains how "luckily I have my children to make sure all bills and expenses are paid". She was surprised to see only two clerks to serve the large number of people queuing. Anneli had to wait nearly one and a half hours in line before being served. Anneli was hurt and embarrassed when the young female clerk told her that she "could have just made the deposit online in under 5 seconds and saved everyone's time." Anneli felt badly treated adding, "It was extremely rude. If anything, I wanted to feel useful, responsible and able to take care of things myself at my age by coming to the bank personally. Hesitantly the clerk told me she could help me for an extra cost presenting me with the service fees: 3 euros for checking my account balance and an extra 7 euros for the deposit. That's more than what I pay for some of my medicines every month! What if I had only my statutory pension to live on and no children to take care of my everyday costs?"

Anneli feels offended and disrespected. She cannot understand how society can expect everyone learns to use digital services. She proposes that "society should make sure that some services still offer a face-to-face transaction for older people who can't or don't want to learn".

On the other hand, Anneli noted, younger people seem to believe the old saying about an old dog can't learn new tricks, "I feel excluded not just in society in general but also in my own family. Everyone else is sharing photos and videos they receive on their phones. I would like to see the pictures of my grandchildren too but my children say 'Our mom won't learn anything new anymore, it is best to not buy her a smartphone.' I think I would learn to use it if someone would just patiently teach me but they always say 'you should know how to do this, I already showed you once!".

Anneli is baffled as to whether or not her family and society in general actually have confidence in her abilities and want her to learn how to use digital services. On one hand she is expected to use them as fluently as everyone else but on the other hand nobody even bothers to teach her how due to the ageist belief that she won't understand the information.

Anneli's story highlights infringements of these rights:

ECHR Article 8 Right to respect for private and family life: access to information;

ECHR Article 14 Prohibition of discrimination in the enjoyment of Convention rights: requires public access to public services on an equal basis;

ECHR Protocol 1 Article 2 Right to education;

CRPD Article 5 Equality and non-discrimination;

Stuck inside these four walls

Vera is 70, a widow and suffers from major health issues for many years. She lives in a local authority housing estate on a hill overlooking the town. It is a 2km walk to the main street. Public transport no longer serves the estate; there were issues linked to children's safety on the road and anti-social behaviour. "I have to walk to the supermarket; I have to walk to the Credit Union and I have health problems." says Vera. It's ironic; Vera has a bus pass but there are no buses to bring her anywhere. She explains, "We don't have buses going to our hospitals ... you have to depend on friends and neighbours".

The exhausting climb to the top of the hill causes Vera to keep stopping, "I can't walk far, my breathing... It takes me 2 hours to go up to town, I'm just sitting here now and I'm barely breathing". Vera's lack of transport and ill health makes her feel very isolated, "I'm on my own and it is very lonely... I used to be out all the time... I love going out".

Vera's situation is compounded by her sense of not being safe in her home. Due to anti-social behaviour in the area including intimidation, and drug-dealing, she recounts how some youths "actually spit at you" and there are strangers ringing on my door at night".

Vera visits her neighbour every Tuesday night. She fears the short journey home because local youths all gather outside the sports centre. Vera has a resilient nature and proclaims that she "won't let them best me, they can kill me if they want." Vera has to muster all her bravery and courage to visit her friend stating that she's "not going to give up". She observes there is "no respect for older people".

Vera's story highlights infringement of these rights:

ECHR Article 8 Right to respect for private and family life;

ECHR Protocol 1 Article 1 Property Right; the peaceful enjoyment of her home;

CRPD Article 9 Accessibility: the physical environment and transportation is accessible;

CRPD Article 20 Personal mobility;

CRPD Article 30 Participation in cultural life, recreation, leisure and sports.

8. HOW CAN HUMAN RIGHTS BE USED TO EFFECT CHANGE?

Human rights are relevant to many of the challenges older people face in living a good life. Under the European Convention on Human Rights, the protection of human rights is integral to state policies and service delivery in all European countries. Hence human rights concerns can very often be resolved by speaking or writing to the authority or person responsible using this approach:

Step 1: Make the link to human rights conventions

Using what you have learnt from this booklet;

- Think about the experience of concern; or if it is the experience of another older person, listen to their story;
- Using your knowledge of human rights, think about the issue or situation in relation to the rights contained in the Conventions outlined in this booklet;
- Make the link to the relevant Article(s). In many instances, the rights relating to an issue are contained in both the ECHR and the CRPD. Where this is the case, primary consideration should be given to the ECHR, as the rights contained in it are enforceable in domestic law meaning there can be consequences for public authorities if they fail to respond;
- Work out what needs to change so that your rights and those of other older people will be protected.

Step 2: Make a complaint

- ✓ Take a human rights' focus to frame the issue or problem;
- ✓ Illustrate the human rights issue using the lived experiences of an older person;
- If it involves a public authority outline how you believe they have failed in their duty to protect service users' human rights; offer a possible solution or way of resolving the issue;
- Raise the human rights issue informally by speaking to the persons involved or writing to them;
- An advocacy organization or local advice centre can help you with this (see section 9, 'I live in' for contact details of such organisations);
- If this does not produce a satisfactory outcome, make a formal complaint. If the human rights issue relates to public service providers, use their complaints process;
- Having gone through the public service complaints process and the issue remains unresolved to your satisfaction, you can take your complaint to an independent organisation such as the Ombudsman, your national human rights monitoring body or your public representative (for contact details see Section 9, 'I live in');
- If the issue relates to rights contained in the CRPD, join with other people with disabilities and/or a disability organisation in writing a shadow report, an account of the situation from your perspective as person(s) with disabilities, highlighting the rights infringed;
- If all else fails, you might have to consider legal action, take advice from an expert before proceeding (see Section 9 'I live in' for organisations which may be able to help you).

Other actions you can take to influence the decisions of public bodies such as transport providers is to start a campaign using human rights framework to highlight impact on service users' rights⁴.

⁴ AgeUK (2015) Our Rights, Our Voices Human Rights Toolkit www.ageuk.org.uk/globalassets/age-uk/blocks/promo/ourrightsourvoices_toolkit.pdf

9. I LIVE IN IRELAND, WHAT CAN I DO?

A. I am encountering barriers to accessing health and social care services

If like Anna, Elsa, Ruby and Joan you believe you have been subject to discrimination, direct or indirect, in accessing health and social care services because of your age and/or disability, or a service provider has failed to protect your human rights, you can take action. Direct discrimination occurs, for example where your health and social care needs assessment for support/care focuses on physical needs and does not include making provision for social needs which is included in assessments for younger people. Indirect discrimination is where a criterion or practice is applied that puts you at a disadvantage because of your age and/or disability compared with other people, for example setting an arbitrary cut off age for a service such as being under 65 to access psychological services specific to people with acquired brain injury. In any of these situations these are the actions you can take:



- 1. Write to the service provider asking for a copy of their Equality and Human Rights Statement in relation to policy on the provision of services. Arbitrary age limits in accessing health and social care services must be justified. The provider must state clearly what the policy or practice is aiming to achieve; how the use of age will help achieve this; the criterion/position adopted should be the least discriminatory way of achieving this. Funding streams are not in themselves justification.
- 2. Contact the Complaints Officer or service manager in the hospital if the complaint is about a doctor working in a public hospital, Their contact details can be got through the hospital's main phone number.
- 3. Share your experience with the Health Service Executive, (HSE) 'Your Service Your Say' service (contact details below).
- 4. Make a complaint to the Complaints Officer in your local Health Office in relation to home care, where it is directly provided by the HSE or arranged through a private company/agency by the HSE.
- 5. Ask for a review by writing to the HSE Director of Advocacy if you are unhappy with the response by the HSE to your complaint.
- 6. Contact the Office of the Ombudsman to make a complaint if you feel you have been unfairly treated by a public service provider, such as a local authority, the HSE or a nursing homes.
- 7. In cases where you feel that there has been professional misconduct, contact the Medical Council, the regulator for all doctors working in Ireland.
- 8. Contact the Irish Human Rights and Equality Commission (IHREC) Your Rights service, for information on your rights and remedies available under equality and human rights law.

B. I am encountering difficulties in protecting my well-being

If like Ingrid, Antonio, Elena, Adamo or Elsa's clients you are being exploited or being taken advantage of because you are older, have a disability or vulnerability; experiencing financial, psychological, physical, or sexual abuse or neglect, these are actions you can take:



- 1. Conntact your local Garda station if you are concerned about or experiencing violence in your home. Members of the Gardaí are specially trained to deal with these situations and can offer advice, information and assistance.
- 2. Report incidents to the Garda if you think that you have been a victim of fraud such as scams.
- 3. Contact the HSE Safeguarding and Protection Team in your area if you are experiencing abuse.
- 4. Contact the Health Information and Quality Authority (HIQA) if you believe health and social care services such as residential care facilities are failing to protect the human rights of service users.
- 5. Get independent legal advice before making major decisions like signing property over to family member, neighbour or friend. Free Legal Aid Centres (FLAC) runs a telephone information and referral line offering basic legal information to the public.
- 6. Make a complaint to the Commission for the Regulation of Utilities (CRU) if you believe an energy company has mis-sold you a utility like gas or electricity. Energy providers' codes of practices require their employees not to exploit a person's inexperience or vulnerability or apply undue pressure when marketing.
- 7. Contact the Competition and Consumer Protection Commission for information on consumer rights, and/or to report a business you believe has broken consumer law.
- 8. Make a complaint to the Workplace Relations Commission (WRC) if you believe your employment rights have been contravened and you are being exploited by an employer.

C. I am encountering financial barriers to meeting my basic needs

If like Bianca, Elena and Tom, your income is insufficient to meet your basic needs; structural barriers prevent you because of your age and/or disability from seeking employment, these are actions you can take:



- 1. Contact the Department of Employment Affairs and Social Protection (DEASP) representative in your area if your income is insufficient to provide for your basic needs or you are faced with an unexpected once-off or emergency financial need which you can not meet from income.
- 2. Contact your local social welfare office or your local Citizen Information Service for information on volunteering or work opportunities for people on Invalidity Pension or Illness Benefit.
- 3. Apply for a medical card from the Health Service Executive (HSE) The HSE can apply discretion where your income is above the threshold for a medical card if you are experiencing undue hardship arising from the costs of a medical condition.
- 4. Make a complaint to the Office of the Ombudsman, if you are unhappy with decisions on granting a medical card.
- 5. Make a complaint to the Workplace Relations Commission (WRC), if you believe you have been discriminated in employment because of a disability. An acquired disability, for example post stroke or dementia, should not be reason for dismissal if you can still do the essential duties of the job, with reasonable accommodation or re-deployment is an option.
- 6. Contact Irish Human Rights and Equality Commission Your Rights service, for information on your rights and the remedies available to you under equality and human rights law in Ireland.

D. I am encountering barriers to remaining socially included

If like Anneli, Vera and Ruby you believe you are being socially excluded from participating in social, cultural and economic life of your community due to the failure of public bodies and essential service providers to take account of your needs as an older person or a person with disability, these are actions you can take:



- Write to the bank or any other service provider citing the Public Sector Equality
 Duty which obliges public bodies and private providers of essential services to
 make services available in ways that are accessible to everyone so customers
 do not need to rely on others. Moving services online should not disadvantage
 those who are digitally excluded.
- 2. Contact the Financial Services and Pensions Ombudsman, an independent body who can investigate unresolved complaints of customers about financial service providers.
- 3. Contact Irish Human Rights and Equality Commission Your Rights service, for information on your rights and the remedies available to you under equality and human rights law in Ireland.
- 4. Contact the housing department in your local authority if you are a local authority tenant who is affected by someone's anti-social behaviour. Every local authority has a statutory duty to have in place a strategy for addressing anti-social behaviour in its housing stock. Local Authorities are obliged under the public sector duty to protect your human rights so are required to treat the problem seriously and take action.
- 5. Ask your public representative to submit a motion at your local authority requesting how the local authority is carrying out its public sector duty in relation to their anti-social behaviour policy and their transport policy.
- 6. Write to your local authority and public transport provider to request a copy of the human rights impact assessment they carried out before implementing cut in services on bus routes. They are obliged to undertake this assessment and not just take decisions based simply on cost and the number of people using the service. Is there evidence that older people and those with disability are impacted by the changes implemented disproportionately more?
- 7. Write to the local authorities where public transport system are not fully serving the needs of older people in your area, and ask them to look at alternative solutions such as community transport schemes.

CONTACT DETAILS FOR ORGANISATIONS IN IRELAND

Citizen Information Service Tel: 0761 07 4000

Homepage: www.citizensinformation.ie

Commission for Regulation of Utilities (CRU)

P.O. Box 11934, Dublin 24

Tel: 1890 404 404. Email: customercare@cru.ie

Homepage: www.cru.ie

• Competition and Consumer Protection Commission,

Bloom House, Railway Street, Dublin 1

Tel: 01 402 5555 or lo-call 1890 432 432

Homepage: www.ccpc.ie

Department of Employment Affairs and Social Protection (DEASP) representative in your area

Tel: 071 919 3313 or locall 1890 66 22 44

Homepage:www.welfare.ie/en/Pages/otheroffice/community-welfare-office-contact. aspx

Financial Services and Pensions Ombudsman,

Lincoln House, Lincoln Place, Dublin 2

Tel: 01 567 7000. Email: info@fspo.ie.

Homepage: http://www.fspo.ie/

Free Legal Aid Centres (FLAC),

85/86 Dorset Street Upper, Dublin 1

Tel: 01 874 5690 or lo-call 1890 350 250.

Homepage: www.flac.ie

Health Service Executive (HSE)
 Elder Abuse Information Tel: 1850 24 1850.
 Local HSE Adult Safeguarding and Protection Team: www.hse.ie/safeguarding

• HSE 'Service Your Say'

Tel: 045 880 400 or lo-call 1890 424 555. Email: yoursay@hse.ie.

Homepage:www2.hse.ie/services/hse-complaints-and-feedback/

your-service-your-say.html

If unhappy with response to complaint request review from HSE Director of Advocacy, Oak House, Millennium Park, Naas, Co. Kildare.

HSE Medical Card

Tel: lo-call 1890 252 919

Homepage: www.hse.ie/eng/cards-schemes,

To appeal decisions to the National Appeals Office, An Clochar, Ballyshannon Health Campus, College Street, Ballyshannon, Co. Donegal

• Health Information and Quality Authority (HIQA),

Concerns About Services, Health Information and Quality Authority, George's Court, George's Lane, Smithfield, Dublin 7

Tel: 021 240 9646. Email: concerns@hiqa.ie

Homepage: www.higa.ie

• Irish Human Rights and Equality Commission (IHREC)

Your Rights, Irish human Rights and Equality Commission, 16-22 Green St., Dublin 7

Tel: 01 858 3000 or lo-call 1890 245 545. Email: YouRights@ihrec.ie

Homepage: www.ihrec.ie

• Medical Council,

Professional Standards, Kingram House, Kingram Place, Dublin 2 Email complaints@mcirl.ie,

Homepage: www.medicalcouncil.ie

Office of the Ombudsman,

18 Lower Leeson Street, Dublin 2.

Tel: 01 639 5600 or lo-call: 1890 223 030. Email: ombudsman@ombudsman.gov.ie

Homepage: www.ombudsman.ie

• Workplace Relations Commission (WRC)

Information and Customer Service, Workplace Relations Commission, O'Brien Road, Carlow

Tel: 059 9178990; or lo-call: 1890 808 090

Homepage: www.workplacerelations.ie

Women's Aid Tel: 1800 341 900

Advocacy Support organisations that may be able to help you make a complaint in relation to issues raised in the stories

Age Action

Tel: 01 475 6989.

Email info@ageaction.ie.

Homepage: www.ageaction.ie

• Alzheimer Society of Ireland,. Tel: 1800 341 341 Email: helpline@alzheimer.ie.

Homepage: www.alzheimer.ie

• Citizen Information Service

Tel: 0761 07 4000

Homepage: www.citizensinformation.ie

Irish Heart Foundation

Tel: 01 668 5001.

Email: info@irishheart.ie

Homepage: www.irishheart.ie.

National Advocacy Service for people with disabilities

Tel: 0761 073 000.

Email: info@advocacy.ie

Homepage:www.citizensinformationboard.ie/services/advocacy_services

Sage Advocacy

Tel: 01 536 7330;

Helpline: 1850 719 400

Email: info@sageadvocacy.ie

Homepage: www.sageadvocacy.ie

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