

Consultation on the *Active Ageing Strategy* 2016-2022

A response from the Commissioner for Older People for Northern Ireland

November 2021



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Active Ageing Strategy Team Level 4 9 Lanyon Place Lanyon Quay Belfast BT1 3LP

By email: age.friendly@communities-ni.gov.uk

Dear Sir/Madam.

RE: Consultation on the Active Ageing Strategy 2016-2022

I am writing following your public request for views 'on how successful the [Active Ageing] Strategy has been'.

I wish to offer my views regarding the effectiveness of the Strategy in its ambition 'to transform attitudes to, and services for, older people [and its] aims to increase the understanding of the issues affecting older people and promote an emphasis on rights, value and contribution'. Having engaged in discussions on the development of the current Strategy, only to be disappointed by the finalised document, I read the Strategy Report with concern at its predictable failings, and hope that the lessons learned will provide the basis for a new, effective Strategy.

As I have emphasised previously, an effective Active Ageing Strategy requires:
1) A top level governmental commitment to older people (i.e., a Programme for Government Outcome); 2) The allocation of specific responsibilities to government departments; and 3) Specified funding allocation tethered to each Strategic Outcome.

Older People are treated, by government, as a "sector" or stakeholder group, as if they are homogenous, with common goals and universal concerns. This is not the case, people aged 60 and over currently comprise an estimated 20% of NI's population.¹ The aims, ambitions, goals and concerns of a cohort of citizens ranging from 60-100 years of age are as diverse and complex as any other 40-year age range in the younger population. This proportion of the population will be the fastest growing demographic of the 21st Century and should be centrally and explicitly catered for in the highest-level outcomes of the ambitions and priorities of government now and in the future. I simply do not accept the weak and incoherent argument of officials who talk about "no sectoral approach" at the high-level outcomes. Any approach to strategy development for an Active Ageing Strategy must begin with recognition and

¹ 2020 Mid-year Population Estimates for Northern Ireland, NISRA, 2021, p.3, available at: https://www.nisra.gov.uk/sites/nisra.gov.uk/files/publications/MYE20-Bulletin.pdf



commitment to the issues and challenges of the rapidly ageing demographic of our society.

The following reflections are intended to provide a constructive base for the development of a future Strategy and are made with an awareness of the commitment of the Strategy Team and, the challenges of working through a pandemic.

1. Methodology

Identifying specific and disaggregated successes for a particular grouping in society can be difficult, especially when plotting achievements against a Strategy 'that relies on contributions from a number of [government] departments'. Government policies are most often intended to benefit a cross-section of society, including young and older, either directly or indirectly. These policies serve several groups and so it is a challenge to attribute successes to a particular action (or policy cause). In this context, monitoring and assessing a set of policies (a.k.a. a strategy) requires a rigorous methodology so that stakeholders can assess how effective a given policy has proven.

1.1 Not All Good News Is Solely Attributable to The Strategy

The Active Ageing Strategy, on occasion, adopts a problematic approach of highlighting 'good news' without reference to policy actions. Page Six of the Strategy states:

There has been progress against many of the actions included in the Strategy as originally published, including: a statistically significant improvement in the confidence of people over 60 years old as measured by self-efficacy (draft Programme for Government Indicator 49);...[And] an improving trend in respect of the internet use of people over 50 and over 65 years old.

Of course, it is good news that according to one metric there is a significant improvement in the confidence of older people, and that digital literacy is increasing. However, this good news cannot indisputably be attributed solely to Government policy, let alone the Active Ageing Strategy. Therefore, it may be inappropriate to harness such figures to suggest that an objective of the Strategy has been met through Government policy. Crucially such an approach — identifying achievements without referencing the policies that contributed to such successes — does not allow for evidence-based analysis of policymaking.

1.2 Older People's Lives Are Improved by Specific Measures



An analysis of age-friendly measures should assess the effectiveness of specific measures rather than focus on whether a Council area is or is not 'ticking the older people' box. The Active Ageing Strategy cites outputs in places where one would expect to discover outcomes. For example, the Strategy states that the 'progress...in the Strategy' includes 'action to promote and support the adoption of age friendly measures across our 11 council districts, including the launch of an Age Friendly Network' (p.6).

As we progress well into the twenty-first century, describing unspecified 'action' to address the issues facing older people as one of the seven 'highlights of progress to date' suggests an absence of specific, practical, and successful measures for older residents in these council areas. Assessing progress towards creating age-friendly communities should focus primarily on establishing data on the impact of local government measures rather than on council structures for such initiatives.

1.3 Not All Policy Developments Are Central to Active Ageing

The Strategy describes as a highlight the introduction of 'protection for older people's decision-making through the Mental Capacity Act' (p.6). The (not fully implemented) Mental Capacity Act 2016, is a welcome piece of legislation driven by the admirable ambition of protecting personal autonomy. However, the legislation is not exclusively aimed at older people; it addresses cases involving issues of mental capacity regardless of age (except children under 16). Moreover, a review of comparable legislation suggests that older people are not always the age group most commonly engaged by such provisions.²

Characterising the Mental Capacity Act as a key success of an Active Ageing Strategy seems to reflect both an imperfect understanding of what an Active Ageing Strategy should contain, and a worrying implication that any policy that affects older people in any way, may be consider part of such a strategy. A further implication of the legislation's prominent inclusion in the Strategy, is that safeguards which protect the rights of all citizens, are instances of the largesse of the state, rather than fundamentals of a modern European democracy.

1.4 Identify The Scale of The Challenge

While it is attractive to focus on positive news, policymakers and stakeholders require evidence in order to create, implement and adapt policies. In several

²Statistics regarding the use of the Mental Health Act in England during 2019-20 suggest that the use of interventions such as detention are more prevalent in the 18 to 34 age group than older groups, available at: https://digital.nhs.uk/data-and-information/publications/statistical/mental-health-act-statistics-annual-figures/2019-20-annual-figures#key-facts



instances, the Active Ageing Strategy does not give sufficient emphasis to troubling statistics. For example, it notes that:

From 1 October 2019 to 31 March 2020, the Affordable Warmth Scheme provided 2,808 energy efficiency measures to 1,620 homes. 59% of these homes were occupied by a person aged over 65. (p.14)

This suggests that 956 homes with an older resident benefitted in some way from the Affordable Warmth Scheme. Out of a population of approximately 1.9 million people such a figure is at least worthy of concern. Similarly, the progress of the NI Strategy for Apprenticeships is described as follows:

Of the 299 people who were aged 50 years and over when they commenced Apprenticeships NI and left the programme between 2012/13 and end of 2018/19, 222 (74%) participants have achieved their targeted qualification (Level 2 or Level 3 Full Framework). (p.33)

In effect, approximately 42 people (over 50) per year benefitted from this programme in a population of just under two million people. The critical point to be gleaned from this example of progress, is not simply the low levels of engagement or even the presentation of statistics. Rather the macro point is that if as a society we do not fully recognise: 1) the marginalisation of older people, 2) the poor service provision offered to this grouping, and 3) the low levels of engagement by this group, policymakers cannot act effectively to ameliorate the situation.

Conclusion

The existence of an Active Ageing Strategy is to be welcomed, as is a willingness to review its effectiveness. Indeed, it is only through effective scrutiny and constructive dialogue on the current Strategy that we can in the words of the consultation preamble 'prepare for a new Strategy'. Nevertheless, an effective, transformative Active Ageing Strategy in the post-pandemic era will only gain momentum if it contains a strong relationship between 1) the Active Ageing Strategy Outcomes, 2) Specific governmental/departmental actions, and 3) Quantifiable achievements.

It is difficult to assess the progress of the current Strategy against outcomes because by its own admission it places departmental actions that happened outside the Strategy retrospectively within its framework. The Strategy states that:

It is encouraging that departments, including those who had no specific actions in the original Active Ageing Strategy, have now highlighted initiatives that contribute to the Strategy's outcomes. (p.7)



This approach indicates that the Strategy is more a reporting of positive initiatives impacting older people since 2016, than what it should be: a rigorous framework, linked to the highest level of the PfG, which requires each department to carry out certain actions to ensure progress towards the Active Ageing Strategy Outcomes. Further it should explicitly drive and measure the extent to which the actions and expenditure of several government departments, working in concert, deliver specific outcomes for older people. A new Active Ageing Strategy must, at commencement, unequivocally link agreed governmental action and the achievement of these strategic outcomes.

My office and I would welcome the opportunity to engage further on these matters as we start to forge a new Active Ageing Strategy and progress towards a society where older people's needs, contributions and challenges are respected and delivered.

Yours sincerely,

Eddie Lynch

Commissioner for Older People for Northern Ireland