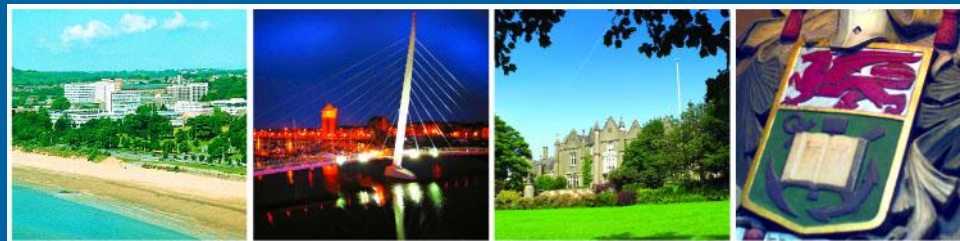


ADVOCATING FOR THE HUMAN RIGHTS OF OLDER PEOPLE - The development of advocacy research, policy and practice

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OUTLINE OF PRESENTATION

- Why advocacy with older people?
- What is advocacy? Definitions, principles and roles
- The development of advocacy with older people
 - Legal and policy framework in the UK
 - Provision and practice
 - Research and evaluation
- Challenges to advocacy with older people
- Future directions



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WHY ADVOCACY WITH OLDER PEOPLE?

- Discrimination
- De-personalisation
- Decision making
- Transition
- Protection
- Participation
- Recognition



WHAT IS ADVOCACY? DEFINITION

“A one to one partnership between a trained, independent advocate and an older person who needs support in order to secure or exercise their rights, choices and interests.”

(Older Peoples Advocacy Alliance OPAAL UK)



WHAT IS ADVOCACY? KEY PRINCIPLES

- **Independence** - loyal to the person and free from conflicts of interest
- **Empowerment** - redressing the balance of power and taking control
- **Inclusion** - personal and civic engagement
- **Equality** – supporting equality of opportunity & diversity
- **Citizenship** – securing and exercising substantive and procedural rights



WHAT IS ADVOCACY? ROLES

Instrumental roles –

formal, practical, “doing”

eg spokesperson, representative, negotiator, appointee, guardian

Expressive roles –

informal, emotional, “being”

Eg confidante, enabler, supporter, witness



INSTRUMENTAL ROLES

“The woman had Alzheimer’s. The social workers seemed in denial or lacked knowledge that the financial abuse was happening. They seemed to have no idea of how to respond to it or if they or anybody else should get involved with the family. So we did it. We engaged the lady, assessed the situation and made the alert. We got everybody around there who needed to be there. We also made sure that she was represented through the process.” (Advocacy Scheme A)



EXPRESSIVE ROLES

“There can be an ambivalence. On the one hand wanting something done about the situation and on the other not wanting to change the situation or allow the advocate to see it through. The client herself – despite her ambivalence – she is accommodating and is happy to listen to all options – though she is not finding it too easy to make a final decision. She gives her emotional feelings as well as how things affect her materially. It is an achievement of the project that she is able to express herself and is listened to – a really positive and beneficial “interim outcome” for advocacy. She does not have that relationship with the care staff. Nobody else has got this from her – but it is there.” (Advocacy Scheme C)



LEGAL AND POLICY FRAMEWORK IN THE UK

- UN Principles
- Human Rights Act 1998
- Commonality and distinctiveness of the four nations of the UK – legal systems and devolved government
- Commission for Equalities and Human Rights – including age
- Older People's Commissioners in Wales and Northern Ireland
- Statutory forms of advocacy eg Independent Mental Capacity Advocacy, Independent Mental Health Advocacy
- Independent Advocacy Safeguarding Agency in Scotland
- Further health and social care initiatives eg adult protection policy, personalisation agenda



PROVISION AND PRACTICE

- The ***number of advocacy schemes*** working with older people has grown over the past two decades - from a dozen schemes across the UK in the early 1990's (Wertheimer 1993), to a more recent mapping exercise identifying 136 in England alone (Kitchen 2006).
- A ***range of organisational models*** of advocacy provision have developed eg statutory services, independent specialist services, independent generic services and schemes run by organisations providing a range of care and support services for older people.
- The ***development of national advocacy organisations*** to promote and support the development of advocacy generally (eg Action for Advocacy) and older people specifically (eg OPAAL UK)



RESEARCH AND EVALUATION

- Steadily **growing research interest** and academic literature in this subject, supplemented by a number of small scale evaluative studies, codes of practice and reports within the “grey” literature (Dunning 1995, 1998, 2000, 2005, 2010)
- The **need for more study** into advocacy as an area of investigation and analysis is starting to be recognised (Scourfield 2007, Townsley et al for the Office for Disability Issues 2009, CEHR forthcoming)
- Some relevant if not advocacy specific **international work** is starting to emerge (eg Doron and Mewhinney 2008)



CHALLENGES – LEGISLATION AND POLICY

- **Legal status** – limited right to independent advocacy eg IMCA, IMHA and ICAS criteria
- **Strategy** – absence of “joined up” advocacy policy
- **Top down approaches** – whose agenda prevails in developing policy, commissioning and decision making?



CHALLENGES – PROVISION AND PRACTICE

- **Availability** – patchy, fragmented and fragile
- **Awareness** – lack of knowledge amongst older people
- **Principles** – adherence, opposition and pragmatism
- **Standards** – defining, professionalising and delivering quality



CHALLENGES – RESEARCH & EVALUATION

- **Theorising advocacy** - relative dearth of conceptual analysis
- **Mapping advocacy** - lack of clarity of definition and nature of development
- **Evaluating advocacy**- why, by whom, for whom and how?



FUTURE DIRECTIONS

- **Legislating for advocacy** - more widely available as a right
- **Policy making** - co-ordinated, comprehensive and formulated through citizen engagement
- **Commissioning advocacy** - readily available, principled and effective
- **Providing advocacy** - accessible, appropriate and high quality



FUTURE DIRECTIONS

- **Conceptualising advocacy** - including analysis of power and human rights paradigms
- **Evaluating advocacy** - involving older people and advocates in shaping the questions on process and outcomes
- **Networking advocacy** - sharing information and learning nationally and internationally
- **Advocating for advocacy** - as means of operationalising the human rights of older people



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THANK YOU



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