



making informed choices

The importance of housing advocacy
for older people

The importance of independent
advocacy is recognised in government
social policy across the UK.

In Scotland, advocacy services are perceived to be an integral part of community care services and modern mental health services. In England, however, advocacy services for vulnerable older people are poorly funded. As our society ages, advocacy services will play a critical role in enabling older people to make informed, independent choices about their housing. Without secure funds, however, these services cannot be developed to their full potential.

Eight projects from the Older People's Programme promoted advocacy services that would enable older people to make informed decisions about their housing options. It was clear from all of them that older people are often the poor relation when it comes to the provision of advocacy services.



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The Older People's Programme

The Third Sector has always played a critical role in developing ideas and practical solutions, but this ingenuity is often compromised by a lack of the requisite resources needed to develop ideas into sustainable solutions. In 2003, using funding from the Henry Smith Charity and the Housing Corporation, hact launched its Older People's Programme, in order to pioneer housing solutions for older people.

In partnership with the LintelTrust in Scotland, NIHACT in Northern Ireland and Community Housing Cymru in Wales, hact invited voluntary and community groups to apply for grants for projects that would develop and test practical solutions to issues affecting older people. In total, 19 projects from England, Scotland, Wales and Northern Ireland were given funds totalling £1 million.

The criteria for choosing the projects included ideas that could address gaps in services affecting marginalised older people, including those with mental health problems, older people in rural areas and BME and refugee elders.

All of the projects worked with, as well as for, the benefit of older people. Hact encouraged all the projects to consult with older people, to develop partnerships with other organisations and to share their experiences with other projects on the programme. To ensure that insights from the programme were captured, hact employed Moyra Riseborough and Peter Fletcher Associates to evaluate the project. Finally, an Advisory Group was convened, composed of experts in older people's housing and this met regularly over four years.

Most of the projects involved in the Older People's Programme provided information to older people in one form or another. A number provided older people with advice. Advocacy – the subject of this insight – goes further than advice giving, whether it involves practical support to an individual, the training of volunteers to advocate on behalf of service users, specialist training for staff or a combination of all three.

Eight of the projects developed or extended advocacy services to older people. Three worked with BME and refugee elders. Two worked with people who had diagnosed mental health problems, and also received other mental health and community care services. Most, however, were those older people who were not diagnosed as having mental health problems, but clearly had difficulties, or were vulnerable older people who needed more than just information or advice. All the projects demonstrated that, while advocacy services for vulnerable older people usually have a positive impact, they remain severely under-developed and under-resourced.

Project information

Borders Independent Advocacy Service – *citizen advocates*

Borders

AIMS

- To establish an advocacy service for older people in very rural areas, particularly those suffering from dementia, with little formal or informal support.

ACHIEVEMENTS

- Established an advocacy service in its first year in operation;
- Despite a general shortage of volunteers, by January 2006, the project was providing advocacy services in six rural residential care homes.

Care and Repair England – *housing options service*

Eight locations, including Derbyshire Dales and East Riding

www.careandrepair-england.org.uk

AIMS

- To provide better information for older owner occupiers seeking advice on housing problems and options, under the title “Should I Stay or Should I Go?”.

ACHIEVEMENTS

- Contributed to national good practice on housing options advice for older people;
- Established a housing options web site, training material for housing advisors and other resources, all of which were tested on service users.

Sefton Pensioners’ Advocacy Centre – *advocacy for older people with mental health problems*

Sefton (North West)

www.spac-advocacy.org.uk

PROJECT AIM

- To develop a supported tenancy and advocacy project to assist older people with mental health problems to maintain their tenancies in rented accommodation, and improve their quality of life.

ACHIEVEMENTS

- Successfully developed the advocacy service, improving the life chances of over 200 people, far more than the original target;
- Built partnerships with local service providers to improve access to services.

Westminster Advocacy Service for Senior Residents – *advocacy for BME elders with mental health problems*

Westminster (London)

www.wassr.org

PROJECT AIM

- To provide housing advocacy for BME elders with dementia or other mental health problems.

ACHIEVEMENTS

- Raised the profile of BME elders with local agencies, especially those needing one-to-one support;
- Gathered detailed evidence about the need for advocacy services for BME elders with mental health problems, and presented this to LB Westminster’s Review and Scrutiny Committee.

Milan Senior Welfare Council – *outreach advocacy for BME elders*

Edinburgh (Scotland)

PROJECT AIM

- To develop an outreach and advocacy service on housing and support for BME elders, particularly those in the Pakistani, Bangladeshi and Mauritian communities.

ACHIEVEMENTS

- The project struggled and, unfortunately, the initial research conducted by Milan was not published, primarily because of the lack of data about the sample group.

The Lorrimore – *home improvement and advocacy*

Lambeth, Southwark (London)

www.lorrimore.org.uk

PROJECT AIM

- To help BME elders with mental health problems to continue living in the community, using a mix of home improvement and advocacy services.

ACHIEVEMENTS

- Discovered that BME elders with mental health problems are living in some of the worst housing despite being in regular contact with care or health workers;
- Found that poor, unsuitable housing conditions undermines people's self-esteem and leads to health and money problems.

Latin American Women's Rights Service – *increasing housing access for older Latin American women*

London

www.lawrs.org.uk

PROJECT AIM

- To develop stronger links with housing providers, and promote the needs of older Latin American women.

ACHIEVEMENTS

- Assisted over 250 older Latin American women and used information from this casework to influence service delivery and develop a campaign on elder abuse;
- Developed referral rights to six housing associations, enabling older Latin American women to access good housing for the first time.

Cambridge Cyrenians – *providing support to older homeless people being resettled*

Cambridge

www.cambridgecyrenians.org.uk

PROJECT AIM

- To provide support to older homeless people resettled from a Cyrenian homeless hostel

ACHIEVEMENTS

- Provided ongoing support to 13 people, helping them not to become homeless again;
- Developed good working partnerships with the City Council support team, social services and the hospital discharge team.

To move, or not to move?

Contrary to established opinion, older people don't always want to stay in their homes. That was the key finding from Care and Repair England's project, which discovered that older people often remain in their homes not through desire, but because of a lack of information about the housing choices available to them, and a lack of suitable housing types for them to move into.

The project, entitled *Should I Stay or Should I Go?*, consisted of eight research pilots in urban and rural locations, each with very different housing and population profiles. Each pilot was hosted by a local organisation, ranging from Age Concern and Anchor to local authorities and local Care and Repair schemes. The aim was to provide older people living in poor or unstable housing with the information, advice or advocacy they needed to make an informed choice about whether to remain in their homes, or to move.

Each pilot employed a housing options worker, who guided each person through the process of deciding where to live. This included filling in forms, being present at meetings with estate agents and accompanying people to view potential new homes. As well as advocating on behalf of individuals, the project – which was co-ordinated nationally thanks to the grant from hact – developed the capacity of advisors, by developing suitable training materials and providing training to over 370 advisors from the host organisations. It also signposted organisations to sources of national information, including www.housingcare.org, and developed a web site for organisations to share good practice.

There is an assumption within the care community that older people tend to “leave it too late” to move and, as a result, prefer to stay where they are. The evidence from the 550 people helped in the pilots showed that older people are more than prepared to consider moving, provided

they are offered and given sufficient practical help to do this. Whatever the trigger for moving – ill health, bereavement or mobility problems – access to information, advice, advocacy and practical help were critical in enabling older people to make an informed decision about their future home.

The project discovered that, for many older people, housing choice is simply not a reality. Older people value outside sources of information, advice and practical help, with some requiring intensive help and support to make a decision about their housing. As one of the users of the service told Care and Repair England, “the housing options advisor has brought me hope”.

The impact of the project was not confined to individuals. In Bristol, where the housing options service was longer established, the project worker has had a positive impact on local housing strategy. Other pilots were also successful, with, for example, one local council being persuaded to change its policy on housing association developments to include leasehold schemes for older people.

The *Should I Stay or Should I Go?* project should have a lasting legacy. The evidence it collected about the reasons why older people want to move, the difficulties they face and the lack of information provided to them – as well as the practical training-based outputs – are invaluable. The message to funders, policy makers and commissioning agents is clear: housing options services are needed, because of the tangible, positive difference they can make to the lives and well-being of older people.

When advice becomes advocacy

The difference between information, advice and advocacy is widely acknowledged. Some illustrate it by the use of a continuum, with information on the left, moving through advice in the middle and advocacy on the right-hand side. While most of the projects in the Older People's Programme provided information to their service users, most of the projects in this insight document focused on advocacy.

Understanding, and agreeing a definition of advocacy might appear pedantic, but it is essential when designing services. One of the reasons behind Milan's inability to achieve their aims was this lack of clarity about what it called a "person-centred approach" when developing its outreach advocacy service. It wasn't clear how this differed from traditional housing advice. The project's strengths appeared to lie in the realm of information and advice, not in advocacy.

By contrast, the project developed by Borders Independent Advocacy Service (BIAS) was modelled along citizen advocacy lines, with the aim of working in partnership with individuals to allow them a better quality of life. The key to its success was the recruitment and training of suitable volunteers, who had the time, experience and connections within local communities to make a difference.

Operating in the Scottish Borders, with a relatively small rural population, it might come as no surprise that the project took time to recruit suitable volunteers. Yet, by August 2006, it had more referrals than it could deal with, with three volunteer advocates and a part-time paid advocate acting on behalf of older people living in six residential care homes.

The evidence from BIAS demonstrates the invaluable role that citizen advocates can play, whether in attending case meetings and tribunals to support an individual, or in writing letters,

making phone calls and organising meetings on their behalf. Their role is not only invaluable for vulnerable older people, but is also crucial in contributing insights to policy makers to improve service delivery. For policy makers, particularly those in England, the role and value of citizen advocates should be recognised.

Being local

Advocacy is more effective when it's local. This isn't meant to undermine the value of national information networks or advice web sites developed by national organisations. They have their role to play. The evidence from the project run by Sefton Pensioners' Advocacy Centre (SPAC) demonstrated the importance of local knowledge and local credibility in delivering successful advocacy services.

The project was a housing advocacy service for older people with mental health problems. Although only established in 1995, SPAC has ten salaried full and part-time staff, as well as up to 20 volunteers, providing general and specialist advocacy. Its local presence and track record were critical in helping the housing advocacy service receive a warm reception from other local voluntary and statutory agencies when, for example, it wrote to them advertising the new service. SPAC understood the importance of engaging with its local community, and other local organisations.

By the end of its second year, the project had assisted over 115 people, having initially targeted a caseload of 20 per year. It used the evidence from this casework to make a difference at a strategic level, influencing local policy makers, including, for example, the council housing team. It demonstrated the importance of providing a link between older people and policy makers, and has since played a key role in influencing the local authority's older people's housing strategy.

Local connections weren't the only reason for

its success. The project had to be flexible. When it became evident that more people needed the service, it changed the criteria for referrals. It had to be diplomatic when demanding that a local housing provider carried out essential home repairs for vulnerable older people, without damaging the relationship. It had to be insightful in knowing which local services it should target, to ensure that vulnerable older people did not fall through the net.

Advocacy is essential

Older people with mental health problems are not receiving the advocacy services they desperately require. That was the key lesson from the project run by Westminster Advocacy Service for Senior Residents (WASSR), which used funds from hact to employ a part-time advocacy worker to enhance access to services for older people with dementia or mental health problems.

Two factors informed the project's success. First, its part-time worker had experience of working with older people with mental health problems, as well as knowledge of housing issues. Secondly, the multi-disciplinary nature of the team. It included the part-time housing advocacy worker, a BME outreach worker and a mental health worker. All were specialists. All shared information with each other. Consequently, they were able to make links across the issues affecting their clients.

The project found that housing problems faced by older people with mental health problems are often complex and can take time to resolve. While they remain unresolved, they can seriously affect the individual's physical health and wellbeing. Sadly, the project discovered that social care and health services did not appear to be taking housing issues seriously.

In effect, this client group were doubly disadvantaged. They needed advice and information, but were either ignored by mainstream service providers or found it

“Mrs Edwards is 89 years old and has dementia. She was living in isolation and desperately needed an adaptation to her front door. Communication between her and her landlord had, however, broken down. WASSR discovered that an occupational therapist's report recommending the adaptation had been lost. Without it, the door couldn't be adapted. So WASSR wrote a complaint to Mrs Edwards' housing association, and followed it up with a series of phone calls. Simultaneously, phone calls were made to the local surveyor and the local organisation that had carried out the assessment. Finally, after months of pursuing the case, the housing association agreed to adapt the door.”

source: Jones J (2004) Adding Value Through Advocacy

impossible to access their services, further exacerbating their isolation from the community. Compared to the advocacy services provided to younger people with similar health problems, services for older people with mental health problems were inadequate.

The projects run by the Lorrimore, Cambridge Cyrenians and the Latin American Women's Rights Service (LAWRS) weren't formal advocacy projects, but all used advocacy in conjunction with other services. LAWRS used advocacy to develop housing options for older Latin American women, so they could access basic services. The Cambridge Cyrenians used advocacy as part of a complex package of support services to help homeless older people resettle successfully into sheltered accommodation.

Advocacy was an integral part of the Lorrimore's Home and Dry project, which provided essential home repairs to BME elders with mental health problems. This included, for example, helping them complete grant application forms. By engaging with its clients, the Lorrimore was then able to develop a training course for its contractors, to help them deliver appropriately sensitive services. Without this advocacy element, the project would not have succeeded.

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Care and Repair England established housing options in eight pilot projects across the country, providing older people with information so that they could make an informed decision about staying in their homes, or moving. Borders Independent Advocacy Service established a citizen advocacy service for older people, particularly those suffering from dementia, in one of the remotest parts of the UK. Milan Senior Welfare Council established better links with local service providers, but were unsuccessful in developing an appropriate advocacy service.

Sefton Pensioners' Advocacy Centre used its local connections and local knowledge to develop an advocacy service for older people with mental health problems, while Westminster Advocacy Service for Senior Residents established a much-needed independent advocacy service for BME elders with housing problems, particularly those with dementia or other mental health problems. The Lorrimore and Cambridge Cyrenians both used advocacy techniques to provide complex support services, while the Latin American Women's Rights Service provided information, advice and advocacy to refugee elders.



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Recommendations

- While the Government recognises the value of independent advocacy in social policy, it should also ensure that advocacy services for older people, particularly those with mental health problems, are funded on a regular basis by health, social care or Supporting People;
- Commissioners and planners of health, housing and social care services should consider the added value a housing options service brings to the portfolio of local services, to enable older people to live independently;
- Relationships between housing options advice and other services is recognised, planned for and supported appropriately at a local, regional and national level;
- When funding housing options or advocacy services, commissioners and funders recognise the value of local knowledge, local connections and local credibility;
- Areas that are scheduled for housing renewal give serious consideration about how they will assist those older people and vulnerable residents whose homes will be affected;
- Partnerships between home improvement agencies, local housing/generalist advice agencies and local housing providers should ensure that local housing options information is readily accessible;
- Training of health, housing and social care staff should include housing options issues, highlighting the views and experiences of older people.