



Age Action is Ireland’s leading advocacy organisation on ageing and older people. We advocate for a society that enables all older people to participate and to live full, independent lives, based on the realisation of their rights and equality, recognising the diversity of their experience and situation. We welcome the opportunity to contribute to the work of the Thirteenth Session of the Open Ended Working Group on the subject of the Right to Health and Access to Health Services.

National legal and policy framework

There is no constitutional right to health nor is there a system of universal healthcare in Ireland.

The Health Acts provide for publicly-funded health services, many of which also involve the payment of charges towards the cost (although these are subsidised and waived for those on low incomes who qualify for a Medical Card)¹.

The health budget in 2023 is €23.6 billion (out of total expenditure of €89.9 billion) and includes elements of social care as well as health services with €1.1 billion allocated to long-term residential care and a further €1.3 billion on services for older people.²

Inequality of health outcomes by income is significant³. Excess winter mortality is high in Ireland compared to other north European countries, with older persons most affected.⁴

Generally, there tends to be data and analysis available for people aged 65+, but without further disaggregation into different older age cohorts⁵. There is no overall monitoring of the realisation of the right to health of older persons.

Progressive realization and the use of maximum available resources

¹ The Medical Card is an important policy to ensure access to health services for people on lower incomes, and older persons from age 70 have an easier means test to pass to qualify for a Medical Card. Those aged 70 or older who do not qualify for a Medical Card receive a GP Visit Card. Prescription charges are capped on a monthly basis, with refunds issued to those who spend over the cap on certain prescription medicines.

² [See page 210, <https://assets.gov.ie/244538/26edc78f-49db-454f-817f-b27a40d030bc.pdf>].

³ 76.9% of people aged 65+ with incomes in the top 20% reported their health to be good or very good compared to 62.9% of those with incomes in the bottom 20%.

⁴ The island of Ireland currently has the highest levels of excess winter mortality in Europe, with an estimated 2,800 excess deaths during each winter [1000 in NI, 1,800 in ROI]
<https://ehjournal.biomedcentral.com/articles/10.1186/1476-069X-13-104>

⁵ Some data quality has recently worsened, with HSE officials reporting data protection concerns as a reason to cease publication of waiting list data disaggregated for people aged 65+.

Ireland's budget for social policy, including health care, expands and contracts with the cycle of expansion and recession in the economy. There is no mechanism to ensure that the allocation to health services is adequate for the realisation of the right to health, and there is no calculation made to identify maximum available resources.⁶ Nonetheless, the health budget is planned based on projections for population growth and life expectancy.

Equality and non-discrimination

Ireland has a multi-tier health service, with publicly-funded services existing in parallel to private services. Many people purchase private health insurance, which can give them faster access to diagnostic tests and better health outcomes as a result. While the public health services can provide some of the highest quality care, waiting times are a barrier to those who cannot afford private services. There is no universal primary care service and much public funding goes to private entities.

There are ongoing concerns about gender inequality in relation to women's healthcare including upper age limits to cancer screening services⁷. Women are disproportionately impacted by barriers to accessing healthcare⁸. Legacy issues including access to reproductive and maternal healthcare highlights the need to address impact of cumulative disadvantage on older women by adopting a life-course approach to policy making.⁹

Digital exclusion is a growing barrier with the development of telehealth services as more than half of those aged 75 or older are not using the internet.

The Assisted Decision Making (Capacity) Acts have been enacted but not yet commenced. The new Decision Support Service will be an important step, which will involve assuming and supporting people's capacity to make decisions for themselves as a replacement for the Ward of Court system.

The National Positive Ageing Strategy 2013-2019 identified ageism as an issue but has not been fully implemented.

Accountability

Individual hospitals and the HSE has complaints mechanisms, but many older persons find these processes hard to access and onerous. People can take civil cases against health service providers for poor quality of care. Advocacy organisations are calling for a human rights based inquiry¹⁰ into the

⁶ As of March 2021 25,831 people over the age of 65 was were on a hospital waiting list with 26.7% of them waiting 12 months or longer.

⁷ <https://www.hse.ie/eng/services/list/5/cancer/profinfo/screening/>

⁸ 73% of women over the age of 84 have a disability, or 32,615 women, which is more than double the number of men of the same age with a disability (CSO (2016). Census of Population 2016 – Profile 9 Health, Disability and Carers. Available at: <https://www.cso.ie/en/releasesandpublications/ep/p-cp9hdc/p8hdc/p9d/>)

Two thirds of people living with dementia in Ireland are women (<https://www.hse.ie/eng/services/list/4/olderpeople/dementia/about-dementia/dementia-stats/>) Two thirds of nursing home residents are women.

⁹ Symphysiotomies were famously performed up until the 1980's, which left many women with long term health problems including trouble walking, fistula, and incontinence. *Symphysiotomy Ireland. Symphysiotomy in Ireland: The Story*. Available at: <https://symphysiotomyireland.com/the-story>

¹⁰

https://www.ageaction.ie/sites/default/files/_080920_age_action_oireachtas_special_committee_submission_08_sept_submitted.pdf

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COVID-19 response measures in nursing homes where, by February 2022, 29% of all COVID-19 deaths took place.¹¹

The HSE has recognised the value of patient co-design and it has published guides about the implementation of these practices. Government departments and agencies conduct public consultations on a regular basis. However, to date, there is no systematic process to ensure the effective and meaningful participation of older persons in all areas on an ongoing basis.

The introduction of an international convention on the rights of older persons would help to strengthen the focus on older persons' rights and Age Action supports the development of such a convention.

¹¹ <https://www.cso.ie/en/releasesandpublications/fp/fp-dc19lag/deathsfromcovid-19bylocationandagegroupsmarch2020-february2022/>