If the mountain won't come to Muhammad, then Muhammad must go to the mountain. "Hooking" the elderly to support their ageing in place

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The context of my research

- The research presented here is part of the project 'InAge, Inclusive ageing in place" financed by the Cariplo Foundation and conducted by researchers based in Milan (Politecnico di Milano), Reggio Calabria (Mediterranea University of Reggio Calabria) and Ancona (INRCA) on the increasingly fragile condition of the elderly who age alone in their own homes and who are at risk of social isolation.

- The project is focused on the risks of ageing in place defined, in terms od living arrangement, as living in the same home without relocation to long-term new housing solutions (a narrowed down scope)

- One part of the project was focused on the identification of effective policies and practices implemented, in Italy and in Europe, to explicitly limit the risks of social isolation of fragile and lone older people and to promote their quality of life at home

- the project ended in May 2021 by carrying out an awareness campaign on the issue of loneliness of the frail elderly aimed at the general population and at policy makers

SIAMO TANTI SIAMO SOLI

2,5 milioni di persone over 74 vivono da sole: per tutti vivere nella propria casa è la soluzione preferibile. Per alcuni, però, può diventare una trappola. E si resta soli.

One of the claims of the campaign

inAGE ABITARE L'ETÀ FRAGILE

«2,5 milion people over 74 live alone: for all of them ageing at home is the prefered option. But for some it can be transformed into a trap».

The research questions

- What are the conditions that permit lonely people to age well at home?

- What ca be learnt from existing successful programs and policies that try to contrast loneliness and isolation in old age?

- What can be learn from their failures?

A step back to the Italian care regime I

- In general terms, Italy is considered in the literature as a paradigmatic example of a "familialism by default" model (Saraceno, Keck, 2010) where a broad attribution (also legally defined) of care responsibilities for families is not adequately supported by public policies, due also to a residual implementation of in-kind services limited only to the most serious cases.

- Even if most elderly do have social support, 24% who live alone refer that they have no help at all (Istat, 2018)

- Families are crucial providers of LTC support to frail older people and informal care remains the first caring choice when compared with home and residential care services (Drożdżak et al., 2013).

- Italian long-term care policies are articulated into two main sectors of intervention, cash allowances and services in kind.

- cash benefit schemes represent the main pillar of the long-term care system (Ilinca et al., 2015) but they are officially ensured to those who are totally disabled.

A step back to the Italian care regime II

- Services in-kind include mainly residential and home services, provided either by regional governments or local authorities, two policy arenas that in most regions are not integrated; home-based health services are organized by regional health agencies, whereas social services are provided by the municipalities (Costa, 2013). They are characterised by marked geographical inequalities (Ascoli, Pavolini, 2015) due to the lack of central regulation and inadequate financial support for the local development of extensive in-kind services.

- Even if most elderly do have social support, 24% who live alone refer that they have no help at all (Istat, 2018)

- among the elderly 75+ living alone, the use of private personal assistants is quite widespread: 58% relied on them every day, 18% a few times a week (Melchiorre, 2019).

IN TERMS OF HOUSING

- Elderly people have a ery high homeownership rate
- Elderlies show extremely low housing mobility
- Rare downsizing in old age so high costs and work for housing maintainance

FIELDWORK (DONE IN 2020)

- 30 case studies carried out using a common outline organized into three parts.

- The first part contains the main information on the project/program/policy analyzed and the aspects that characterize them, such as the network of actors involved, the actions of which they are composed, their target and their development.

- The second part reconstructs their genesis, their implementation and the results achieved.

- The last part of the track focuses on the most critical aspects by identifying strengths and success factors, weaknesses and risk factors, innovation factors, conditions of potential replicability and scaling up.

Here the focus is on 4 different projects that

- are adressed to elderly people living at home

- Provide new services in kind as care and companionship, but also fosters civil engament

- Try to intercept exisiting needs even if they are latent and haven't being tranformed into demands of services

- Try to increase the take up rate of services

- Have been developed by multiple actors

- Enriched the local services ecosystem

And more importantly, they HOOK the elderly that are alone and risk to be isolated

The projects

- Veniamo a trovarvi (Italia, Piemonte, Provincia di Cuneo, Comune di Bernezzo): 1)Target over70, 2)home services are provided by a big residential structure, 3)the elderly are «visited» by a social worker to identify needs, 4) volunteers (pharmacists, shop-keepers, etc.) are appointed and trained as «sentinells» to support the elderly

- La vecchiaia che vorrei (Italia, Comune di Trento): 1)target: «invisible elderly» that are still independent but have no informal networks and are at risk of social isolation, 2) better coordination of existing services 3) the elderly are «visited» by a social worker to identify needs who invite them to get out home and use community incubators, participate to collective services (such as gym) and turn themselves useful for the community

- Invecchiando si impara (a vivere) (Italia, Bergamo, Seriate and Grumello del Monte:1) target: elderly people who age at home, 2) re-organization of home services to increase its' coverage, 3) social workers are in charge of a territory, a small community

- La cura è di casa (Piemonte, Provincia Verbano-Cusio-Ossola e Alto Novarese: 1) target: 65+ elderly who are not in charge of social services, 2) increasing available supports at home and include informal carevivers in the caring network, 3) care community building

PROVISION OF SERVICES, especially to those that do no use them

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PHISICAL PLACES
Community incubators
Cafès, libraries, community spaces

"Hooking" the elderly to support their ageing in place

SENTINELLS
People who can identify elderly people at risk of social isolation

Actions to identify elderly who are alone and don't ask for help
Professional VISITORS and volunteers

TO AGE ALONE AT HOME
NEED TO BE ENRICHED BY THE POSSIBILITY
TO BE CARED, BY THE INSERTION IN AN INFORMAL NETWORK AND BY THE USE OF «OTHER PLACES»