

Report into the conditions of the elderly, disabled and housebound living in the borough of Hammersmith and Fulham – July 2005

Background

The main aim of the research was to investigate the quality of existing health, social and welfare services for elderly people of East-European origin living in the Borough of Hammersmith and Fulham (LBH&F), as well as the problems which they encounter in using them. The findings enabled the EEAC to gain a greater understanding of the unmet needs and gaps in provision of services.

Methodology

The research was conducted chiefly through the following two methods:

- Conducting interviews with a sample of 25 elderly people living in LBH&F, and
- Visiting organisations within LBH&F which provide care for the elderly, as well as wards for the elderly in major hospitals within the borough.

Summary of findings

Healthcare and Disability provision

Just under 50% of respondents had a disability impairing their capacity to care for themselves independently. Most had admitted to changing the organisation or individual providing home help for the following reasons (in order from the highest frequency of answers to the lowest):

- Difficulty to communicate with the home help due to lack of knowledge of the English language.
- The home help worked during fixed hours which did not suit the individual. One elderly lady stated: 'I would often have a difficult night, as I found difficulty getting to sleep until the early hours of the morning. My carer would arrive at 8.30, when I would be exhausted and frustrated.'
- Lack of trust for the carer – including fear that they would steal their belongings.
- Inability to form trusting relationships due to the very high turnover of carers, many of whom showed no respect or understanding of the elderly person's needs.

Over 80 % of respondents claimed that they had been forced to visit a hospital due to their health problems more than twice during the last year. Of the four hospitals in the Borough: Queen Charlotte's and Chelsea Hospital, Ravenscourt Hospital, Hammersmith Hospital and Charing Cross Hospital, the latter had the largest proportion of patients of East-European origin in their Elderly Wards. Head Nurse Errolyn McKenzie of Peter Helps Ward for the Elderly in Charing Cross Hospital stated that the language barrier proved to be a common difficulty with such patients.

Dementia posed an added problem causing several of those who could speak English to lose this ability and return to their mother tongue. The difficulties were combated partly through the employment of trained nurses from East European background, and partly through the aid of the patients' next of kin, who would phonetically spell some basic words, which would enable the staff to communicate with the patient. Due to being very costly to employ, interpreters were used only in extreme cases.

Over 90% respondents listed isolation from friends and community as the most important issue they would like addressed. Depression and emotional / mental health problems were linked to isolation as a root cause. Physical fragility and fear of falls exacerbated the problems as elderly people lost confidence in being able to venture out on their own.

Over 70% of respondents did not claim the full range of benefits, including winter fuel supplements. This led to hardship and ill health.

Existing Organisations for the Elderly

Just over 20% of respondents stated that they occasionally used the services provided by charitable organisations, but were not going to continue because:

- The service was run on an ad-hoc basis and workers often failed to arrive at the agreed time or at all
- Workers become frustrated when the elderly find it difficult to communicate with them, due to language problems
- Lack of personalisation of provision
- No tangible benefits (e.g. helping build up social networks, develop support networks, provision of information)

A further 18% stated that they were not interested in socialising, whilst the remainder admitted that they would enjoy joining such organisations but either had inadequate information of what was available in the area (14%), had difficulties with transport (22%) or felt they would be unable to participate due to the language barrier (12%).

Age Concern - This organisation cares for 80 elderly people on a regular basis. 15% are of East European origin: of which 9% are Polish and the rest Lithuanian or Hungarian.

There is regular financial and legal advice given to all members as well as an anti-abuse programme. The organisation runs a social club and 'Pop In' Café for over-55s. A day-care service is available for all elderly people and home help is also provided, including a bathing service. Age Concern is a voluntary organisation and is in constant need of extra volunteers, preferably those able to speak foreign languages. Currently, a number of volunteers are of Polish origin, which solves the problem of communication difficulties with clients who speak only Polish.

West London Dial-a-Ride – Roughly 30% of registered clients are of East European origin, most of whom speak English well. However, the organisation director admitted to cases of losing other clients due to unresolved quarrels about e.g. arrival time, caused as a result of the language barrier.

'Central Registry for the Blind and Disabled' and 'Action on Disability' – Both organisations admit to only helping clients, who either speak English at a conversational level or already have carers or assistants who could translate for them. There is a desperate need for volunteers.

Both the Polish Parish in Ealing Broadway and the Hammersmith Parish of St. Andrew Bobola run regular social meetings and services for the elderly: the former operates a Luncheon Club for the Aged (midday – 2.30pm daily) and organises annual trips to places of interest, whilst the latter has 'after-mass tea' for the elderly. However, these services are only available to parishioners of Polish Origin. Other Church organisations for East Europeans are lacking in the borough.

Age Concern in Hammersmith & Fulham, Acton and Ealing, runs Arts and Crafts activities for the elderly as well as a Film Club, but admits to giving their clubs little publicity, meaning that knowledge of them is obtained through word of mouth only.

There are 3 major Bingo Halls in the borough, a Bowles Club and 2 dance clubs holding sessions for the elderly. None of the respondents used or considered to use these. The main reasons given were fear of not being able to communicate and not knowing anyone.

Recommendations

- Information Provision: EEAC should produce leaflets for elderly clients in their language of origin about local organisations and services
- Recruitment of Multilingual volunteers: EEAC should recruit a dedicated officer to work for short periods in elderly organisations in the Borough
- Cooperation with local hospitals: system of co-working with local hospitals to support both the elderly and medical staff through interpreting/ translation services
- Set up Elderly Outreach Project to help combat isolation, improve uptake of benefits and support elderly in maintaining independent living.

Research carried out and report written by the EEAC ex-service user.