



Red Cross Approach:

Caring for older
people in age-friendly
communities

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Our sincere appreciation goes to everyone who contributed to the development of this publication.

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The Red Cross EU Office is a membership office representing the 27 National Red Cross Societies in the EU, the Norwegian Red Cross, the Icelandic Red Cross and the International Federation of Red Cross and Red Crescent Societies (IFRC), towards EU institutions and stakeholders.

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Cover photo:

A Belgian Red Cross volunteer chats with a person living in a nursing home in Brussels, July 2018.

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Foreword

Mette Petersen
Director of the Red
Cross EU Office

The Red Cross believes an ageing population provides countless opportunities. When older people are supported to age in a healthy way and are socially included, they can continue to contribute to the lives of their families, friends and communities.

As auxiliaries to national governments, National Red Cross Societies run programmes and services responding to the risks that older people face and their particular health and social needs. Delivered at the community level, these support older people to remain and be included in their communities. Crucially, National Societies' work also focuses on empowerment and promoting human dignity, with an emphasis on tackling discrimination, stigma and ageism. It is also important to enable the social inclusion of older people, recognising each person's value, strengths and virtues no matter their age, to facilitate interactions that fight loneliness and promote good mental health in older populations.

We cannot talk about ageing or long-term care without also mentioning the devastating impact that the COVID-19 pandemic has had – and continues to have – on older people and their families. Older people have been one of the most affected groups in terms of high mortality, but also poor mental health, isolation and loneliness due to lockdown measures.

There needs to be a paradigm shift in terms of how we care for older people and how we innovate care by understanding better what their needs are and how to ensure their independence, empowerment and inclusion. Since the start of the pandemic, National Red Cross Societies have been stepping up their efforts to support older people at home and in their communities through frequent monitoring and assessment of needs and regular outreach and delivery of integrated services. Furthermore, the Red Cross has sought to provide digital support to older people at risk of loneliness and isolation by providing computers and strengthening digital skills so that they can stay connected with their families and communities.

As the European Commission prepares to develop the European Care Strategy, this publication aims to enrich the debate by describing principles and practices based on our frontline experience. Ensuring that everyone has the right to affordable long-term care services of good quality, in particular home care and community-based services, as outlined in principle 18 of the European Pillar of Social Rights, is central to the well-being and social inclusion of older people.

“
When older people are supported to age in a healthy way and are socially included, they can continue to contribute to the lives of their families, friends and communities.
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Executive summary

The COVID-19 pandemic laid bare the long-standing challenges of ensuring accessible, affordable and quality care, backed up by a sufficient and skilled workforce and adequate financing. It highlighted the critical importance of long-term care systems in ensuring the well-being of people in need and preserving their dignity and access to care services, while also contributing to broader social cohesion and solidarity.

By presenting practices by National Red Cross Societies across Europe, this publication highlights the Red Cross' commitment to ensuring access to high-quality home and community-based care for older people. Through a principled approach centred on meeting the needs of older people, National Red Cross Societies in Europe have accumulated extensive experience in developing community-based interventions and programmes to support access to services and in promoting healthy ageing practices for older people to live with dignity in age-friendly environments.



Bulgarian Red Cross nurses and home carers visit chronically ill people in their homes, April 2016.

© Bulgarian Red Cross

Promoting long-term care at EU level

Through Article 25 of the EU Charter of Fundamental Rights,¹ the European Union recognises and respects the rights of older people who are more likely to come to depend on others for care to be able lead a life of dignity and independence and to participate in social and cultural life. As such, Member States should develop policies that promote these rights in their homes, communities and other care settings.

At EU level, the main challenges that have been identified in health care and social support systems to improve the quality of life of older people are:

- » The demand for high-quality long-term care at the Member State level is set to rise, reinforcing that its provision can contribute to gender equality and social fairness.
- » Access, affordability and the level of services which ensure quality of life are key challenges in relation to long-term care.
- » An adequate workforce is key to meeting the rising demand for high-quality services, but the current labour shortage may intensify further.
- » Informal care has been essential in long-term care provision, but this often comes with neglected costs, especially for women care givers later in life.
- » Investments in the reform of long-term care systems need to be pursued further and should build on the lessons learned from the COVID-19 pandemic.²

In her State of the Union address in September 2021, European Commission President, Ursula Von der Leyen, announced a European Care Strategy to support women and men in finding the best care and to ensure better work-life balance for carers. The proposed initiative will consist of a Commission Communication on a European Care Strategy accompanied by a proposal for a Council recommendation on long-term care. The definition of the strategy counts on the participation and feedback of all relevant stakeholders on the topic, including the Red Cross.³

In the EU, the Red Cross has long been on the frontline of responding to the needs of the most vulnerable populations. This has been most evident when it comes to supporting older people in their homes and communities, with older people being among the groups most affected by the pandemic.⁴ Throughout Europe, National Red Cross Societies have been working together with public authorities to ensure continuity of care and support to older people, their families

1 European Union Agency for Fundamental Rights, 2007. EU Charter of Fundamental Rights, Article 25 – The rights of the elderly. Online: <https://fra.europa.eu/en/eu-charter/article/25-rights-elderly>

2 European Commission, 2021. Long-term care report – Trends, challenges and opportunities in an ageing society. Online: <https://ec.europa.eu/social/main.jsp?catId=738&langId=en&pubId=8396>

3 European Commission, 2022. European Care Strategy – call for evidence. Online: https://ec.europa.eu/info/law/better-regulation/have-your-say/initiatives/13298-European-care-strategy_en

4 Eurofound, 2022. COVID-19 and older people: Impact on their lives, support and care. Online: www.eurofound.europa.eu/publications/report/2022/covid-19-and-older-people-impact-on-their-lives-support-and-care



and informal carers by providing health and social services that are tailored to people's needs and implemented by an extensive network of dedicated volunteers and professionals.

This publication presents three cross-cutting approaches to long-term care which seek to facilitate the realisation of older people's human and social rights, strengthen their social inclusion at community level and assist older people to be supported in their homes. The key elements of the Red Cross' approach are:

» **Volunteerism in long-term care**

We support older people, their families and informal carers by providing high-quality services that meet their needs. At the same time, we include and value the role of older people as an integral part of the Red Cross volunteering network.

» **Age-friendly communities**

We promote age-friendly communities to enhance active and healthy ageing by improving health services and promoting the participation of people of all ages in shaping community-level structures and the services provided. We also work to create inclusive environments for older people with varying needs and capacities, while addressing issues of social isolation and loneliness.

» **Home care**

We work with older people, their families and informal carers to provide health and social services that allow rehabilitation and re-enablement to restore older people's ability to live independently and stay in their familiar environment for as long as possible.

Chapter 1 – Red Cross strategy for long-term care: caring for older people in their community

Chapter 1 describes the principles of the Red Cross' approach, which considers long-term care as a system of integrated services with its own identity that aims to improve the quality of life of people with long-term care needs, ideally in community and home settings. National Red Cross Societies in Europe believe that every person's life counts. They support the well-being of the people and communities they serve, without discrimination. Across Europe, National Societies implement activities to promote healthy lifestyles from the early stages of people's lives (life-course approach). They assist older people and their families with a wide range of health and social services (integrated approach), most of which are provided at home according to people's preferences and needs (person centred and community based). National Societies also create spaces to prevent older people's social exclusion and loneliness through volunteering programmes that enhance intergenerational dialogue and solidarity.

Chapter 2 – Volunteerism in long-term care

Chapter 2 reflects on the demographic trends in Europe, where ageing populations are expected to challenge care systems that rely on family members and informal carers to provide most of the informal care for older people. Volunteering can provide a huge contribution towards meeting the demand for health and social care services in community settings, offering greater capacity with more flexibility to identify and meet evolving needs. Volunteering is also a powerful tool for the social inclusion of older people, for valuing their time and experience and for enriching the Red Cross volunteering network with their expertise and skills.

Chapter 3 – Age-friendly communities

Chapter 3 stresses the need to sensitise and engage local communities on the importance of living healthy lifestyles at all ages to reduce the impacts of disease and individual risk factors. Creating age-friendly communities also enhances active and healthy ageing by improving health services at community level and increasing the participation of people of all ages in shaping community structures and services. It promotes a more inclusive and accessible environment which reduces loneliness and possible abuse and violence against older people. To this end, National Red Cross Societies commit to strengthening solidarity between younger and older people to their mutual benefit and to actively promoting intergenerational dialogue and cooperation.

Chapter 4 – Home care

Chapter 4 showcases National Societies' integrated health and social services to respond to the needs of older people who want to live at home and in a familiar environment. This chapter highlights examples of home care and mobile interventions by Red Cross teams across Europe which re-enable or allow older people to continue independent living. It also shares examples of social services to fight loneliness and exclusio, namely seniors' clubs, visiting services and leisure activities. These activities also aim to be socially innovative in their planning and implementation. They are designed from the bottom up thanks to a participatory approach (users, families, volunteers) that captures people's needs and responds with flexible and comprehensive solutions.

Key recommendations

At EU level

The Red Cross calls on the EU institutions to:

- » Promote and support the establishment of community-based and home care at Member State level. This can be done through the creation and dissemination of guidelines, strategies, frameworks and practices.
- » Ensure the implementation of principle 18 of the European Pillar of Social Rights by guaranteeing the right to quality long-term care which places the needs of older people at its centre. This can be facilitated by creating a set of EU quality standards for the care of older people.
- » Establish an EU platform which is coordinated by the European Commission ensuring the participation of Member States, international organisations and civil society. This platform should act as a hub for the dissemination of good practices and promising national strategies, as well as a forum to exchange ideas on addressing issues that are specific to the care of older people.
- » Recognise the importance of the workforce, volunteers and informal carers in delivering essential services to older people.

At Member State level

The Red Cross calls on EU Member States to:

- » Ensure access to high-quality long-term care services for the most vulnerable and marginalised older people, without discrimination and regardless of legal status. The aim of these services should be to improve quality of life for people with long-term care needs, ideally in community and home settings.

- » Prioritise the implementation of principle 18 of the European Pillar of Social Rights through the creation of a long-term care strategy which is well resourced and anchored to the needs of older people and to ensuring high-quality services. Any such strategy should focus on supporting an integrated services approach which is person centred.
- » Ensure minimum standards of quality in all settings which provide care and support to vulnerable people. Quality care and quality services strictly depend on being aware of what the needs are and providing flexible and tailor-made solutions.
- » Strengthen the role of communities in health and social care by promoting volunteering programmes, neighbourhood groups and community resource centres. This support should strengthen the social inclusion of older people through direct participation at community level.
- » Strengthen the workforce by creating more good quality care jobs, improving working conditions and supporting informal carers.
- » Recognise the role of informal carers and the services they provide to older people at home and in community settings. As a result, carers should have access to employment rights, a salary that recognises their care status and pension credits. Flexible work arrangements to relieve relatives and respite care should also be guaranteed.



In collaboration with partners, the Bulgarian Red Cross provides professional medico-social services at home to older people living in the municipalities of Vratsa, Oryahovo, Byala Stalina and Krivodol.

© Bulgarian Red Cross

Key conclusions

- » Good care and support systems are an opportunity to enable older people's participation, contribution and inclusion in society. Investment in long-term care is an investment in people's quality of life and improves social and intergenerational cohesion.
- » It is essential to promote a life-course approach to care that demonstrates the link between investments in people's health throughout their lives and the long-term care needs of older people.
- » Care systems should promote equality: needing care is inherent to life and should not involve social stigma. Policies and services should aim to put an end to ageist and ableist biases. It is important to strengthen community engagement to create age-friendly communities where people of all ages are included and can live healthily and actively throughout all stages of life.



A nurse and a social worker visit an older person in her home in a rural village in Bar, March 2022.

© Austrian Red Cross

- » Community-based care contributes to responding to the needs of older people by providing medical treatments and screening, offering wellness and healthy ageing programmes, supporting daily needs and promoting intergenerational activities. Volunteering represents a key element of support to older people's daily lives and a tool for the social and active inclusion of older people.
- » Home and community-based services contribute to encouraging older people to live independently at home for as long as possible so that they are less likely to be hospitalised or institutionalised. Also, home care reduces pressure on family members, particularly women.
- » It is important to consider the gender dimension of care to reduce the risk of poverty in old age and enhance women's participation in the labour market.
- » Actions to fight loneliness and isolation should be strengthened, promoting intergenerational solidarity and facilitating the empowerment of older people. If combined with face-to-face professional services, technology and digitalisation can play an important role in tackling social isolation and supporting older people in their daily care.

Introduction

COVID-19 has highlighted the critical importance of long-term care systems in ensuring the well-being of people in need.

The COVID-19 pandemic laid bare the long-standing challenges of ensuring accessible, affordable and quality care, backed up by sufficient financing and a skilled workforce. Its impact has placed more people at risk of social exclusion and poverty, while widening social gaps for the most vulnerable people in society. COVID-19 has highlighted the critical importance of long-term care systems in ensuring the well-being of people in need, preserving their dignity and access to care services, while also contributing to social cohesion and solidarity. By presenting 12 cases of National Red Cross Societies across Europe, this publication highlights the Red Cross' commitment to ensuring access to high-quality home and community-based care for older people. Through adopting a principled approach centred on meeting the needs of older people, the Red Cross has accumulated extensive experience in developing community-based interventions and programmes to support older people access services and achieve good quality of life.

In the EU, the Red Cross has been – and continues to be – on the frontline responding to the needs of the most vulnerable populations. This has been most evident when it comes to supporting older people in their homes and communities, with older people being among the groups most affected by the pandemic.⁵ Throughout Europe, the Red Cross has been working together with public authorities to ensure continuity of care and support to older people through its network of community-based volunteers. A key component of this is National Societies' ability to innovate and improve their services to meet needs, while ensuring quality.

⁵ Ibid.

With the support of Italian Red Cross volunteers, older people at home care facilities and private houses use tablets for recreational purposes, cognitive training and to communicate with their family and friends, October 2020.

© Emiliano Albensi/Italian Red Cross



In practice – Contact Circle for elderly people by the Netherlands Red Cross

The Netherlands Red Cross offers prevention and preparedness activities to ensure that vulnerable groups are equipped to act in the case of an emergency. One of these groups is older people. The help offered prevents possible emergency cases from developing into (more) severe emergencies.

ISSUE/CHALLENGE

The project aims to support older people who live at home and who do not have an extended and/or solid social network. If an emergency were to occur, it may take a while for it to be noticed due to the person's lack of regular contact with other people. This may turn a simple emergency, like a fall, into a more severe emergency.

OBJECTIVE OF THE PRACTICE

The objective covers three areas. Firstly, it has a monitoring function: participants who experience an emergency are discovered within 24 hours, due to their daily contact with Red Cross volunteers. When there is no response, action is taken and the help needed is offered. Secondly, the circle can be used to spread useful and reliable information to help participants prepare for possible risks, like during heat waves. Thirdly, participants can develop a network through participation in the circle, making them more capable of being self-sufficient.

DESCRIPTION OF THE PRACTICE

Throughout the country, various contact circles are coordinated by local volunteers. Each circle has between 3 and 10 participants, each of whom has at least one so-called 'key person' who can access their house with a key. Every morning, circle participants call each other by phone in a set order around the same time. If the participant does not respond (and has not given notice that they are not available that morning), additional steps are taken to contact them. If this fails, the key person is informed and asked to check in on the participant. If this is not possible, the emergency services are called on.

OUTCOMES

Participation fosters a feeling of safety, they know that they can rely on help if something happens within 24 hours. If they pass away, they will be found within 24 hours and undignified situations will be prevented. Participation also offers the opportunity to be in touch with other people, broadening participants' network and helping them to feel less isolated, thanks to the daily contact in the circle. The Netherlands Red Cross also provides information through these circles, which helps participants to be prepared: promoting a sense of autonomy.⁶

In 2021 there were 647 beneficiaries participating in 100 contact circles of the Netherlands Red Cross.

⁶ Netherlands Red Cross, Are you well prepared? . Online The Red Cross offers help with information to be well prepared for emergency situations.

Promoting long-term care at EU level

Through Article 25 of the EU Charter of Fundamental Rights,⁷ the European Union recognises and respects the rights of older people who are more likely to come to depend on others for care, to lead a life of dignity and independence, and to participate in social and cultural life. As such, Member States should develop policies that promote these rights in their homes, communities and other care settings.

At European level, several efforts have been made to identify the challenges of the health care and social support system to improve older people's quality of life. Long-term care is defined by the Social Protection Committee, which consists of representatives of national ministries of social affairs and the European Commission's Directorate-General for Employment, Social Affairs and Inclusion, as a range of services and support for people who are dependent over a long period of time on help with their daily living. This need is usually the result of disability caused by frailty and various health problems and therefore may affect people of all ages. But the great majority of the recipients of long-term care are older people.⁸ Published in 2017, the European Pillar of Social Rights states that "everyone has the right to affordable long-term care services of good quality, in particular home care and community-based services, therefore making long-term care a social right for those who require it" (principle 18).

EU long-term care report

In 2021, the European Commission and the Social Protection Committee launched *Long-term care report – Trends, challenges and opportunities in an ageing society*.⁹ This collected common issues faced by Member States in relation to key elements, such as access to services, the workforce, informal carers, measuring

7 European Union Agency for Fundamental Rights, 2007. EU Charter of Fundamental Rights, Article 25 – The rights of the elderly. Online: <https://fra.europa.eu/en/eu-charter/article/25-rights-elderly>

8 European Union, 2014. Adequate social protection for long-term care needs in an ageing society. Publications Office of the EU. Online: <https://op.europa.eu/en/publication-detail/-/publication/71532344-ddf1-4d34-a7aa-f65c701a22a2>

9 European Commission, 2021. Long-term care report – Trends, challenges and opportunities in an ageing society. Online: <https://ec.europa.eu/social/main.jsp?catId=738&langId=en&pubId=8396>

the quality of services and the financing and sustainability of the health and social care sector for long-term care. It explicitly recognises that long-term care is a matter of shared interest across the EU, in line with principle 18 of the European Pillar of Social Rights. This confirms the European Pillar of Social Rights' significant role in orienting EU action and the EU's level of ambition in the field of care and support.

The report calls attention to key issues, including access to long-term care services, social inequalities and the quality of care, with reference to relevant human rights frameworks and the importance of capturing all dimensions of the lives of older people with care and support needs. Importantly, the report highlights data and analysis which point to key problems that policymakers need to address to ensure effective older age and long-term care policies:

- » **Inadequate access:** only one in three older people facing severe difficulties in everyday activities had access to home care services in 2014. In 2019, 47.2 per cent of people over 65 with severe difficulties in personal care or household activities had an unmet need for care.
- » **Affordable care:** In 11 EU countries, 60 per cent of older people are at risk of poverty due to care-related expenses, even after public support.
- » **Quality issues:** there is no shared European understanding of what quality in care means, coupled with diverse and sometimes inadequate systems of monitoring quality.
- » **Difficult working conditions and over-reliance on informal carers:** the work of informal carers has an economic value of between 2.4 and 2.7 per cent of the EU's gross domestic product (GDP), which is higher than the expenditure on professional care in many EU countries.

Finally, the report highlights that active and healthy ageing policies, including health promotion and disease prevention, can help reduce the need for long-term care in old age. People who are fit when they become old and who remain physically and mentally active not only have a better chance of postponing or avoiding frailties, but are often also better at managing functional decline when it occurs.

In practice – I-CCC Project: Addressing and preventing care needs through innovative community care centres in Montenegro, Serbia and Austria

The Austrian Red Cross is implementing the I-CCC [innovative community care centres] Project – a three-year project (2020–2023) funded by the European Commission and co-funded by the Austrian Development Agency. I-CCC intends to influence national reforms in long-term care through developing, testing and advocating for socially innovative community and voluntary-based services for older people. The project aims to provide integrated services at local level to maintain functional capacities of older people, foster healthy ageing and support informal carers.

ISSUE/CHALLENGE

In Montenegro, Serbia and Austria long-term care provision is characterised by a fragmentation of responsibilities. There is a lack of integration between the health and social aspects of long-term care, and the CCCs will contribute to developing an integrated approach at local level. The main target group are people in need of long-term care and people not yet in need of long-term care but who are pre-frail or frail or older people with cognitive impairments and dementia. Another important target group is informal caregivers, who make up the biggest provider of care in Europe. Further the staff of the CCCs, such as social workers, nurses and home helpers, as well as volunteers, will gain additional skills and improve their economic situation.

OBJECTIVE OF THE PRACTICE

The overall objective is to contribute to national policy reforms in long-term care by strengthening community-based services. To reach this objective two sub-objectives are defined:

- 1) Develop and test a) innovative CCCs for people in need of care and informal carers, and b) voluntary-based services for people with dementia and cognitive impairment – with the aim of addressing the long-term care challenges of access, affordability, quality and sustainability.
- 2) Use the concept of CCCs and volunteer-based services for people with dementia and cognitive impairment in long-term care policy planning and monitoring in Austria, Montenegro and Serbia.

DESCRIPTION OF THE PRACTICE

The I-CCCs in Austria (Hartberg and Vienna), Montenegro (Bar and Bijelo Polje) and Serbia (Pirót and Sombor) provide integrated services at the local level that maintain the functional capacities of older people, foster healthy ageing and support informal carers while creating links between health and social care. Services include advice on long-term care-related health, social, organisational and financial matters for older people in need of care and informal carers, support and training for informal carers, conducting preventive home visits in Montenegro and Austria, home help services in Montenegro and respite services in Serbia as well as health promotion and healthy ageing activities. Further, volunteers will provide support to people with cognitive impairments and dementia, including tablet-based training which will be piloted in all six project communities with the aim of motivating older people with dementia and cognitive impairments to be mentally and motorically active in playful ways.

OUTCOMES

Since October 2020, through the project, the Red Cross has been piloting six CCCs in Austria, Serbia and Montenegro and has set up a new volunteer-based service to support people with dementia.¹⁰

10 Austrian Red Cross, Addressing and Preventing Care Needs Through Innovative Community Care Centres. Online: ICCC-Project – Addressing and preventing care needs through innovative community care centres (communitycarecenter.eu)

1.

Red Cross strategy for long-term care: caring for older people in their community



The French Red Cross organises different types of activities in their 'Residential establishment for dependent elderly people', April 2022.

© Alex Bonnemaison/EHPAD Florence Nightingale in Argenteuil French Red Cross.

1.1. Principled approach to long-term care

The Red Cross considers long-term care as a system of integrated services aiming to improve the quality of life for people with long-term care needs, ideally in community and home settings. National Red Cross Societies in Europe believe that every person's life counts, and they work to ensure the well-being of the people and communities they serve, without discrimination. Across Europe, National Societies provide services which are tailored to local contexts and driven by common principles that make the work of Red Cross volunteers and staff unique.

» **Life-course approach:** the life-course approach in healthy ageing focuses on promoting empowerment and human dignity, with an emphasis on tackling discrimination, stigma and ageism. A life-course approach starts early to optimise the functional ability of the individual. It focuses on disease prevention and providing access to

early diagnosis, screening, treatment and care, at both the community and home level. It focuses on the need to implement activities appropriate to earlier stages of life, knowing that acting early in the life course, and promoting and implementing educational, psychosocial and health care programmes, will give children and younger adults better prospects of remaining active and healthy later in life.

» **Community driven:** involving community members and organisations in programme design from the beginning, including older people to lead discussions and identifying key community and contextual needs. Strengthening community engagement and reinforcing the Red Cross' accountability. Establishing solid partnerships with project participants and giving them opportunities to identify needs and evaluate programme performance, as a source of empowerment that reinforces people's sense of belonging.

A German Red Cross nurse looks after an older person in his apartment and measures his blood pressure, March 2017.

© Sibylle Kölmel/German Red Cross



- » **Inclusion and diversity:** when programming interventions, National Societies and other actors must consider unequal ageing between individuals and how to include social characteristics such as socio-economic background, gender, age and ethnicity. Because people have multiple characteristics and identities, an intersectional approach can be useful when defining strategies from the initial stage in programme design.
- » **Evidence based:** ability to tailor the programmes and priorities according to local and national contexts, as well as the experiences of older populations in a particular territory. Working through an evidence-based approach that focuses on assessing and responding to people's needs, helping to deliver successful programmes, ensuring quality of care, improving transparency and accountability, encouraging greater workforce productivity, and ensuring better allocation of resources and more efficient use of funds.
- » **Integrated services approach:** the Red Cross has long-standing experience in providing different kinds of support to

people in need, often filling the gaps caused by insufficient or inadequate support structures. Thanks to National Societies' presence and connections in their territories, they work for the continuous improvement of services by guaranteeing the respect of people's needs, choices and preferences, and by creating partnerships with institutions, local authorities, service providers and private actors. This approach has a direct impact on the quality of services that National Societies provide and therefore on the quality of life of the people who they support.

- » **Quality of life and quality of care:** quality of life is defined by the World Health Organization (WHO) as individuals' perceptions of their position in life in the context of the culture and value systems in which they live and in relation to their goals, expectations, standards and concerns. This includes the person's health, psychological state, social relationships and access to age-friendly environments that allow people to live empowered, dignified and independent lives.

2.

Volunteerism in long-term care



The Italian Red Cross aims to improve the technological skills of older people and professional and family care givers to address loneliness, October 2020.

© Emiliano Albensi/Italian Red Cross

Red Cross volunteers work for a more humane and peaceful world. They do this by delivering services directly to vulnerable people and seeking to prevent and reduce vulnerability and exclusion where they can. Volunteering is adapted to the specific context and responsive to new trends that may go beyond the established structures of National Societies, such as informal, online and corporate or other institutional forms of volunteering.¹¹ Although each National Society has its own unique qualities linked to the local context, Red Cross volunteers have much in common:

- » **They are motivated by helping others:** volunteers carry out lots of different activities but are united by the same goal, which is to serve humanity.
- » **They are local:** the Red Cross' biggest strength as a humanitarian network is that volunteers come from the very communities they serve. This means they have first-hand knowledge of and are trusted by their communities.
- » **They are diverse:** volunteers are incredibly diverse and of all ages and backgrounds.
- » **They volunteer part-time:** Red Cross volunteers are teachers, parents, students, nurses, bankers, artists and much more... they each find time in their personal lives to commit to volunteering, with National Societies offering a variety of roles to suit all skills and schedules.
- » **They receive training and support:** all volunteers receive introductory training to help them understand the Red Cross network and their role in it. Throughout their membership, they have access to lots of additional training and

resources, including exchanges between National Societies.¹²

2.1. Volunteers supporting long-term care activities and informal carers

Ageing populations are expected to challenge care systems in European countries, where family members and informal carers provide most of the informal care for older people. Indeed, the acceleration of the ageing of the population over the next 30 years – and the consequent increase in the number of frail and non-self-sufficient older people – represents one of the most urgent challenges to be resolved. At the same time, there is growing uncertainty about the resources available, the number of people who can be cared for and the quality of the services that can be provided to meet a growing and already partly unsatisfied demand.

Volunteering can provide a huge contribution to meet the demand for health and social care services, with greater capacity to take on the overall needs of the people being cared for and more flexibility to intercept and satisfy evolving and fragmented needs. Volunteering plays a fundamental role within communities since it reinforces civil society's capacity to contribute to citizen engagement, active participation and social inclusion. To this end, volunteering programmes that focus on providing older people with health and social care are designed taking into consideration the local context, assessed needs and preferences of the people being supported.

The concrete prospect of increasing discrimination against frail and non-self-sufficient older people and the resulting accentuation of social isolation and physical and psychological decline, place institutions and volunteering actors in

11 IFRC, 2022. Volunteering policy. Online: www.ifrc.org/document/volunteering-policy The policy acknowledges that people themselves are the most important resource for their own progress, which can only be sustained through their own leadership and ownership of the process.

12 IFRC website, 2022. Our volunteers. Online: www.ifrc.org/our-volunteers "14 million volunteers worldwide are the beating heart of the International Federation of Red Cross and Red Crescent Societies (IFRC)."

front of new emergencies and challenges. Consequently, community and home-based care are promising alternatives to the need for residential care. They also bring a change in the treatment of older people, providing assistance and support in a familiar environment and helping people to live independent lives for as long as they can. Through its intergenerational nature and daily practices and projects for active ageing, Red Cross volunteering constitutes a significant way of involving older people, making them protagonist of their own time, enhancing individual well-being, and promoting community engagement and awareness of ageing phases and processes.

This is possible since Red Cross volunteers are embedded in the communities they serve; they are trained to provide integrated services that include preventive health care, diagnostic and follow-up services, rehabilitation and end-of-life services. Other social services include support for personal care and household chores, strength and fitness, driving and transportation, social integration and social support. In addition, volunteers provide social support for carers, as well as training in providing care and identifying elder abuse.¹³

In practice – Lay Home Care by the Slovenian Red Cross

The Slovenian Red Cross' Lay Home Care programme has been running for the past two decades. It supports healthy ageing by offering a training programme for adults who care for older people and others in need of care, by providing new knowledge and skills in caring for people with specific needs.

ISSUE/CHALLENGE

Workforce shortages in the health sector and difficulties in accessing health services have put more pressure on the role of informal carers who support older people in their daily routines. Recognising the role of informal carers is fundamental and helping them to be better prepared to assist older people can mean they are able to provide higher quality support.

OBJECTIVE OF THE PRACTICE

The project aims to strengthen individual and community knowledge about healthy ageing and to provide informal carers with new tools to better address symptoms of disability or disease and to provide support to people in need more generally.

DESCRIPTION OF THE PRACTICE

The training programme is diverse and offers courses related to physical, behavioural and nutritional aspects of healthy ageing. It teaches the basics of a healthy diet, with the specific needs of older people in mind, and provides booklets and brochures with recipes and advice on nutrition. Courses also cover physical activity in older age, psychosocial support to people with care needs, and caring for mobile or immobile older people and people who are ill.

OUTCOMES

700 adults have attended lay home care courses, following a Red Cross curricula created for informal carers. A manual has been developed on lay home care for older people and people who are ill, as well as a booklet and brochure with recipes and advice on proper nutrition.¹⁴

13 The definition of each service is provided by WHO, 2019. Country assessment framework for the integrated delivery of long-term care. WHO European Framework for Action on Integrated Health Services Delivery. Online: <https://apps.who.int/iris/handle/10665/345961>

14 Slovenian Red Cross, social activities. Online: Social activity - Red Cross of Slovenia (rks.si)

2.2. Valuing volunteering as a tool for the social inclusion of older people

On an individual level, voluntary service can help people overcome feelings of personal isolation and low self-esteem. Volunteers meet other people, either face to face or online, in circumstances that can help them improve their feelings of contributing and belonging to the community. Volunteering reduces life stresses and combats loneliness. Often, excluded people experience a sense of shame and failure and can lose hope in their ability to take control of their lives. Through volunteering, people can address some of the underlying causes of social exclusion, such as lack of employment or education, or ill health.

The Red Cross invests to expand the diversity of its volunteer base and the opportunities available to volunteers. National Red Cross Societies work to reduce barriers to volunteering, facilitate greater volunteer engagement for older people, promote intergenerational collaboration and enable participation from people experiencing marginalisation. Volunteering and civic mobilisation are key to ensuring more inclusive societies where everyone can enjoy

the benefits and opportunities available. Indeed, recognising the value of volunteering means investing in people and providing a friendly environment where they can use their skills and put their knowledge at the disposal of other volunteers and communities, be trained and discover new interests and personal abilities, become agents of change in local and global contexts, and feel part of a network mobilised to build a better world.

More and more often, older people are involved in the design of programmes, particularly those that serve them. Volunteering programmes reflect the diversity of needs, economic resources, social statuses, educational levels, ages and health of the older generation. Also, programmes enhance the social inclusion of older people since they are both beneficiaries of services and volunteers who provide services to others. The Red Cross commits to developing sustainable services and activities at the grassroots level to promote the physical, social and mental well-being of older people who are encouraged to participate in volunteering and decision-making and are recognised for their work and active participation.¹⁵

15 IFRC, 2013. Years that count: Report on active ageing and intergenerational solidarity.



A Bulgarian Red Cross volunteer reads a book aloud to an older person, January 2018.

© Bulgarian Red Cross

In practice – SeniorON by the Polish Red Cross

Working with older people has been a core part of Polish Red Cross activities for years. Through its senior centres, people can come to meet, be supported and participate in stimulating intellectual and physical activities. The project SeniorON takes place at these centres, and is designed to increase people's quality of life through interactions between young and older generations.

ISSUE/CHALLENGE

In Poland, changes in the demographic structure have been observed for several years, with a growing share of older people in the total population. As a result of improving living conditions, the average life expectancy of Poles is increasing, which for men born in 2015 was 72.7 years, and for women 81.0 years.

OBJECTIVE OF THE PRACTICE

The aim of the project is to improve the quality of life and standard of living of older people and prepare them for dignified ageing through social activity. The project activates and strengthens intergenerational ties, fostering an image of older people as worthy partners in the implementation of joint activities among children and young people.

DESCRIPTION OF THE PRACTICE

The 1st phase, conducted from September 2017 to March 2018, was attended by 2,100 people aged 60 and older, who met with Polish Red Cross volunteers during 87 workshops. The main topic was first aid. The programme was implemented by eight branches of the Polish Red Cross. In the 2nd phase, the main theme was electronic banking, 741 people took part and 36 workshops were conducted, 12 of which concerned banking basics, security in finance and mobile banking. In the 3rd phase lasting from May to December 2019, 735 older people took part in SeniorON. The main topic was electronic banking. In this phase, the Polish Red Cross conducted 30 workshops, 10 of which concerned banking basics, security in finance and mobile banking. During the workshops, volunteers (specialists in finance and banking) answered questions and demonstrated how to use banking services safely.

OUTCOMES

More than 2,500 people have so far come together for events organised by Polish Red Cross branches across the country, from Pomerania to Silesia, Lubuskie Province to Podlasie Province. The workshops were very popular among older people and a perfect example of employee volunteering.¹⁶

Age-friendly communities

3.



An older woman in a wheelchair meets children in a German Red Cross nursing home, June 2016.

© Andre Zelck/German Red Cross

More needs to be done to raise awareness and combat the causes and consequences of the loneliness suffered by many older people. Feelings of loneliness and social isolation – which have been exacerbated during the COVID-19 pandemic – can have dangerous consequences for people’s health and well-being. Creating age-friendly communities means encouraging active and healthy ageing by optimising health, stimulating inclusion and enabling well-being in older age.

3.1. Combating the social isolation and loneliness of older people

Social isolation and loneliness can occur at almost any age. Yet, while they are growing problems among younger people, they still predominantly affect older people. Furthermore, social isolation and loneliness among older people are linked to reduced quality of life, cognitive function, well-being and independence. They therefore contribute to increased use of health and social care services. Social Isolation and loneliness are distinct things. In this context, loneliness

can be described as the difference between desired social contact and actual social connections. On the other hand, social isolation is the result of having a small network of family or non-family members, leading to few and potentially infrequent social interactions with others. Although there are currently no global or EU-wide estimates of the number of older people in the community who are experiencing loneliness and social isolation, some indications are available. For instance, 20–34 per cent of older people in 25 European countries are thought to be affected.

National Red Cross Societies provide several interventions when it comes to fighting loneliness and promoting social inclusion among older people. Mainly through volunteers, the Red Cross offers services in different settings – in the community, the home and nursing homes – that are designed and planned to create moments of leisure, share knowledge among generations, recognise and value skills and experiences, and improve digital skills and the use of technology to create online and in-person connections among people.



Two residents chatting in a nursing home.

© FiftyFifty/Belgian Red Cross

In practice – Belgian Red Cross (FR) – individual and collective approach to battling loneliness

In Belgium, the Red Cross is working to improve the living conditions of vulnerable people. Throughout Wallonia, teams of volunteers fight loneliness through home visits and organising enjoyable activities open to all. Through collaborations with nursing homes and home care professionals, special attention is paid to older people.

ISSUE/CHALLENGE

Because being isolated comes not only through a lack of company but also a lack of support, allowing people to stay connected is a resilience issue in society. Red Cross attention is focused on anyone isolated by their social or family situation, state of health or age. With age vulnerability tends to increase, social circles decrease and health issues grow.

OBJECTIVE OF THE PRACTICE

To enable people to stay connected and fully exercise their role as active and autonomous citizens through their healthy life choices, restore their self-confidence and make it possible to live more fulfilling lives at home.

DESCRIPTION OF THE PRACTICE

Through collaborations with nursing homes, home care professionals and local authorities, people who need company are identified. They can be visited by local volunteers, if they so wish, and have the opportunity to chat, share a cup of coffee and go for a walk together. In addition, volunteers take the time to listen, recognise the person's history and uniqueness and help them to recognise it. When a person has more self-confidence they are also more inclined to reach out to others and strengthen their social circle and therefore their support network.

OUTCOMES

The combination of individual and collective approaches helps people to create new connections with other people in similar situations. The local anchoring of the volunteer network strengthens the sense of community and promotes better intergenerational understanding.¹⁷

3.2. Promoting healthy lifestyles

According to the life-course approach, healthy and active ageing strategies encourage the maintenance of good health throughout life, based not only on reducing the burden of disease, but also on prevention and promotion and decreasing individual risk factors (smoking, alcohol misuse, sedentariness and obesity). The Red Cross implements the life-course approach through several programmes, guidelines and awareness campaigns which engage people from different ages and diversifies its interventions depending on people's work, social and economic contexts.

When it comes to activities aimed at children and young people, specific guidelines have been developed to promote and teach the skills necessary for their health and well-being. Red Cross services focus on physical and relational support to realise the person's potential in the best possible way and to live a healthy life, in harmony with others and with their social and cultural context. Therefore, it is important to ensure training and educational opportunities for children and young people as a crucial step to supporting their empowerment. It is equally important to create inclusive and enabling environments which promote health and active ageing throughout the lifecycle.

¹⁷ Belgian Red Cross (FR), Online, Accompagnement à domicile de personnes âgées (croix-rouge.be)

Only well-equipped and knowledgeable children and young people who are enabled to act can become agents of behavioural change for healthy and active ageing. As agents of change in local communities, children and young people have a valued role and unique position in informing and influencing their peers to lead healthy lifestyles. In addition, older people's involvement in the education process, for example in sharing their experiences of ageing, can play a key role in supporting a paradigm shift in perspectives on ageing from an early stage and help fight age discrimination. This action emphasises the power of acting together as well as empowering older people in communities that are more interconnected and age friendly.

3.3. Enabling age-friendly communities

Age-friendly communities enhance active and healthy ageing by improving health services at community level. They ensure the participation of people of all ages in shaping the structures and services provided at community level and create a more inclusive environment that is accessible to older people with varying needs and capacities. It is possible to identify some key elements that define age-friendly communities: outdoor spaces and buildings, transportation, housing, opportunities for social participation, respect and social inclusion, civic participation and employment, communication and information, community support and health services.¹⁸

In the EU, National Red Cross Societies intervene on some of these elements that enable greater positive health, social participation and health equity. Being close to the challenges that older people face, National Societies have assessed several issues such as reduced personal autonomy, mild-to-moderate impairment of cognitive functions, loneliness and social exclusion,

alteration of physical well-being, and abuse, neglect or maltreatment. The activities that National Societies implement aim to tackle these issues by providing solutions which include creating social spaces (senior clubs, golden clubs, fitness activities and volunteering programmes) where older people keep or create new social networks, are valued as part of society, improve their knowledge and daily routines for healthy lifestyles and are more empowered to recognise discriminatory or abusive behaviour.

With their activities, European National Red Cross Societies tackle another important aspect related to the care of older people by recognising that the way they are treated by others can negatively affect their quality of life. Therefore, creating age-friendly communities also means providing informal carers with knowledge and competencies to better support older people, for example by providing training on different aspects of health and care, such as disease-specific knowledge, building skills to maintain the health status of patients, managing symptoms, support for daily life activities and managing emergency situations. National Societies also implement activities to incorporate principles and values necessary to identify and address discrimination and abuse in society.

The Red Cross also commits to facilitating access to services for older people and their families through a wide range of options – home and community-based care, mobile teams and institutional and residential care. Although in some cases institutional and residential care represents the best option, particularly when the person's intrinsic capacity has severely deteriorated or there is no availability of carers, most Red Cross services enable older people to remain in their familiar environment. Community-based health programmes take many forms, ranging from health promotion activities, awareness-raising campaigns and screening

¹⁸ See also French Red Cross, *la méthodologie du tiers-lieux à la Croix-Rouge française*. Online: [Les tiers-lieux ou la Croix-Rouge réinventée - Croix-Rouge française](#)

to early diagnosis, management of certain illnesses and ensuring patients follow their treatment plans. Social care is also a growing area of need given the increasing importance of addressing social isolation and loneliness, with rising numbers of people in need of care and support. The Red Cross plays a significant

role in providing social services that promote community-based activities which reinforce bonds at local level. These services include an intergenerational aspect that creates opportunities for different generations to meet, share and cooperate through peer-to-peer exchanges.

In practice – Buen Trato by the Spanish Red Cross

The Buen Trato project started in 2016 and has been continuously adapted to take into account lessons learned and external factors such as the COVID-19 pandemic. It aims to support women and men over 65 who have survived or are suffering from abuse and violence. The project uses a participatory methodology which includes processes that respond to the needs of older people by involving them in the design of the interventions.

ISSUE/CHALLENGE

The project addresses the issue of age discrimination and abuse. Spain has one of the highest proportions of the population aged over 65 globally, with specific risk factors linked to older age such as isolation, disability and/or dependency. These risks are more pronounced among women.

OBJECTIVE OF THE PRACTICE

The project aims to prevent older people who are in situations of heightened vulnerability from becoming victims of mistreatment. It also aims to help older people who have been or are currently victims of mistreatment in any of its forms to create or restore their psychosocial and relational well-being, either through the cessation of the situation or through overcoming the after-effects produced by it.

DESCRIPTION OF THE PRACTICE

The process focuses on two areas: 1. Interventions for older people who are suffering from or have survived episodes of abuse; 2. Analysing the reasons why older people suffer abuse, which are mainly linked to a lack of information about their rights and limited personal support or skills to face abuse and violence. Both areas are tackled through two types of action: 1. Transmission of information and technical knowledge to face episodes of violence and abuse; 2. Psychological support, personal accompaniment and training in personal skills.

OUTCOMES

In 2021, the project supported more than 3,900 older people to recognise and respond to abuse throughout 46 districts in Spain.¹⁹

3.4. Intergenerational solidarity and dialogue

Intergenerational solidarity and dialogue add value to the work of National Red Cross Societies in developing comprehensive social support for older people. All generations have a stake in developing their communities. Despite this, families and communities face obstacles in keeping good relations with older people. This can lead to dissatisfaction

and the marginalisation of older people, as well as a loss for younger generations of the resources that older people can provide, such as wisdom, talent and time.

The Red Cross works to strengthen solidarity between younger and older people for shared benefit and to actively promote intergenerational dialogue and cooperation. Intergenerational exchange is a two-way process that depends on mutual respect and the exchange of knowledge. Recognising

19 Spanish Red Cross, *sercuidadora – buen trato*. Online: *SerCuidadoraA Buen trato - Cruz Roja*

the growing diversity of older people, National Societies can adapt their services and communication tools accordingly. They also promote the inclusion of and bridging between all age groups in all activities and

decision-making bodies. In line with this commitment, National Societies can foster projects that are based on the common interests of younger and older people.

In practice – Older adults and COVID-19: protecting the most vulnerable people in home care settings by establishing self-protection and safeguarding measures

In the framework of the “Older adults and COVID-19: protecting the most vulnerable people in home care settings by establishing self-protection and safeguarding measures” project, volunteers have conducted activities in home care facilities and private houses since October 2021.

ISSUE/CHALLENGE

In Italy, older adults have been among those most impacted by the COVID-19 pandemic. From increased mortality and morbidity to the mistreatment of older adults in care homes, the pandemic has exposed the failure of communities and practitioners in adequately protecting this group. As consequence of the public health measures executed, many people remained at home with minimal outside contact. Additionally, for several months care homes and assisted living facilities across the country stopped accepting visitors to protect their residents. However, regardless of the pandemic, social isolation among older adults is a serious concern because of increased risk to their well-being and living conditions. As systemically reported in research, social isolation and loneliness can increase the risk of cognitive decline and mood disorders, as well exacerbate seclusion and mistrust.

OBJECTIVE OF THE PRACTICE

This pilot project aims to improve the skills and knowledge of professional care givers, older people, family care givers and Italian Red Cross volunteers in the use of new technology and home-care methods to address loneliness and mistrust and enhance self-protection measures.

DESCRIPTION OF THE PRACTICE

Since October 2021, 10 local branches have conducted visits once or twice a week in different home-care settings and in private houses, in synergy with services already provided to older adults in situations of extreme vulnerability and with no family support. Italian Red Cross volunteers have carried out recreational activities, workshops and initiatives aimed at introducing older people to the use of tablets and other digital tools. Youth volunteers have also shared their digital skills with older people creating opportunities to bring different generations together through activities that strengthen intergenerational solidarity. Guests have been supported in connecting with their families and friends by learning how to set up and run video calls and send text messages to reduce the feelings of isolation that have been exacerbated by the pandemic. Guests have also used tablets for recreational purposes and to maintain cognitive skills by reading newspapers, listening to music, watching videos and using apps to play games, train memory or draw. All activities have been carried out ensuring everyone’s safety by using personal safety devices and maintaining social distance.

OUTCOMES

The activities have involved more than 348 older adults living in 14 home care facilities or private houses and 240 people, including other guests of home care facilities, family members, personnel and volunteers.

Home care

4.



A Lithuanian Red Cross volunteer visits an older person in her home and they look at photo albums together, July 2021.

© Lithuanian Red Cross

Community-based home care services are increasingly in demand. The services of National Society home care programmes target older people, people living with chronic conditions and persons with disabilities. Many of the people in the last two target groups may also be older people. In societies where the trend towards an ageing population continues to grow, the need for support increases. Even though the public health systems of most European countries now enable people to live longer and healthier lives than ever before, some people will always continue to need assistance in the

form of professional health support or visiting services so that they can remain in their own homes and continue to contribute to their communities.

Many older people and persons with chronic conditions or disabilities find themselves socially isolated and have difficulties accessing the services provided by national health systems. The assistance of Red Cross home helpers or home care volunteers can be crucial. Adequate training and support must be given to people who offer care services in people's homes.

Graphic 1:
Scope of support services provided by National Red Cross Societies across the EU

	Home care	Community-based care	Mobile care
Austria			
Belgium (FR)			
Belgium (FL)			
Bulgaria			
Czechia			
Estonia			
France			
Germany			
Hungary			
Italy			
Lithuania			
Malta			
Poland			
Romania			
Slovenia			
Spain			

Based on 2021 Red Cross EU Office mapping of member National Red Cross Societies' work on ageing and long-term care.

4.1. Prevention

A major demographic transition is taking place in the world as the percentage of older people increases. This is particularly the case in Europe, where the population is ageing rapidly. WHO notes that the median age in the Europe Zone is already the highest in the world, and the proportion of people aged 65 and older is forecast to increase from

14 per cent in 2010 to 25 per cent by 2050. In most of the region, people are living longer, but variations within and between countries mean that not everyone will spend their later years in good health and well-being.

Home care must respect the human dignity of older people, people with chronic illness and persons with disabilities. It should be provided without discrimination based

on age, race, colour, national or social origin, financial means, belief, gender, sexual orientation or identity. The degree of care and assistance required will vary according to needs, and the home care service should be sufficiently adaptable to select an appropriate type of service for each individual person in need of care. This will depend on their situation, such as the place and conditions in which they live and the type of illness or disability they experience. Home care has several objectives:

- » to allow the person in need of care/nursing to stay at home, if possible, with good quality of life
- » to support and alleviate the tasks of relatives and other informal caregivers
- » to maintain and foster social contacts and prevent social isolation
- » to avoid or postpone moving to a hospital or nursing home
- » to facilitate an earlier release from hospital.

In practice – The Czech Red Cross’s professional home care service – Home Care Agency Alice

The Czech Red Cross has 14 Home Care Agencies Alice across the whole country – in Blansko, České Budějovice, Chrudim, Děčín, Kutná Hora, Litoměřice, Mělník, Písek, Praha 9, Strakonice, Tachov, Teplice, Trutnov and Zlín.

ISSUE/CHALLENGE

The home care service focuses on maintaining and promoting health, restoring health and developing self-sufficiency, providing palliative care and ensuring a peaceful death. Home Care Agencies Alice staff not only have the education and training to perform professional tasks, but they also possess the mental resilience to handle the stressful situations associated with their patients’ dying.

OBJECTIVE OF THE PRACTICE

Home health care means providing special health care to a patient in their home environment, and it is provided to anyone who is unable to attend a health care facility due to poor mobility or other health reasons. For hospitalised patients, it can significantly reduce the length of hospital stay. Any citizen who has health insurance in the Czech Republic and whose doctor, after assessing the patient’s overall health and social environment, decides to provide home care, is entitled to the home care service.

DESCRIPTION OF THE PRACTICE

Home Care Agencies Alice professional medical staff visit patients in their home environment, where they most often perform the following tasks: glycaemic checks (blood sugar levels), blood pressure and other vital signs checks, temperature checks, administration of oral and injectable medications (including insulins), ostomy and port care, stroke care, swabs, rehabilitation in the home environment, parenteral (intravenous) nutrition care, care of patients with permanent urinary catheter, wound healing and chronic wound care, prevention and treatment of decubitus, insulin injection training, assistance and care of patients with chronic conditions, treatment of tibial ulcers, dressings and bandaging, collection of material for biochemical examination (urine, blood), self-sufficiency training, palliative care and other services as requested by the participants’ doctors.

OUTCOMES

In 2021 this professional home care service had 136 medical staff and took care of 7,150 patients. During their visits the medical staff performed 783,375 medical procedures.

4.2. Outreach

The Red Cross' work supporting older people is characterised by a holistic approach that seeks to treat vulnerabilities by acknowledging that integrated activities lead to better results for the overall well-being of the person. When it comes to care of older people, as already mentioned, the Red Cross responds to people's needs and preferences to be helped, assisted and treated at home by focusing on psychological support, social activities and integration in the community, as well as identifying the needs of family members providing care.

This outreach includes:

Psychological support: this requires volunteers and staff to listen and respond to the needs of the person and family members. The role of the home helper and home care volunteer in community-based home care is completely different from that of caregivers, family members and professionals. When trained and matched well, the home helper can build a relationship of confidence with the person. It is possible to treat him/her as a private person, but with 'professional distance'. The person assisted has the chance to present themselves without the weight of an emotional history and corresponding frustrations, stereotypes and so on. If wanted, they have more freedom to communicate openly, in the sense of less taboos and fewer fixed expectations.

In practice – Hotline by the Italian Red Cross

To respond to the needs of people who find themselves isolated from their community, the Italian Red Cross has established 'CRI Per le Persone' (Italian Red Cross for People). An integral part of the activity's set-up is a strong network of local actors in the social sector who offer a broad spectrum of assistance and support. Access to all CRI Per le Persone services is organised through a national telephone hotline.

ISSUE/CHALLENGE

Thousands of people in Italy are struggling with loneliness. Social isolation can seriously affect a person's mental health and cause problems in their daily lives. In the long term, loneliness and social isolation can be associated with feelings of vulnerability, threat and anxiety. The hotline service address psychological and relational needs of older adults experiencing social isolation and involuntary loneliness.

OBJECTIVE OF THE PRACTICE

The Italian Red Cross has a hotline providing support to the population, including older adults facing social isolation and involuntary loneliness. The objective is to alleviate the loneliness and social isolation of older adults.

DESCRIPTION OF THE PRACTICE

Since 2019, the Italian Red Cross has run a hotline through which it provides remote company and emotional and psychological support to older adults who are alone. In addition, the psychologist desk can facilitate the relationship between the older adults and local Red Cross branches, social services and other organisations in the field to fight loneliness and improve quality of life.

OUTCOMES

From November 2020 to May 2022, the hotline has provided psychological support to 513 older adults aged between 65 and 93.²⁰

20 Italian Red Cross, CRI per le persone. Online: CRI per le Persone - Croce Rossa Italiana

Social activities and integration in the community: examples of social activities include household chores, help with administrative tasks and cultural activities. Outdoor activities are also important. These might include helping to run errands, going to the market, pharmacy or cemetery, recreation in public places like parks or nature reserves, cultural visits and attending special events like theatre, the cinema or

concerts. In all cases, the focus is on the well-being, empowerment and independence of the person. Promoting lifelong learning is also important. As long as the person is willing, social participation and learning are important factors for healthy ageing, for example, learning about new technologies to keep up with the modern world. Help is also offered with writing letters, telephoning, filling in forms and so on.

In practice – Warm Visits by the Lithuania Red Cross

The Lithuania Red Cross offers activities to combat loneliness among older people by encouraging and supporting them to feel full members of society, take care of themselves and be integrated in the life of the community.

ISSUE/CHALLENGE

In Lithuania, one in three people over the age of 65 lives alone. Some of these people do not leave the house all year round and have very few social relations. According to psychologists, people who experience loneliness are much more likely to develop depression and to feel worthless, uninteresting and forgotten.

OBJECTIVE OF THE PRACTICE

The Warm Visits programme is aimed at people who live alone, mainly older people, who rarely leave their homes due to health and other obstacles and do not have a close circle of people around them. Visits of Red Cross volunteers to older people improve their emotional well-being. Communication, warm words and listening are very important for older people, so volunteers become their new friends.

DESCRIPTION OF THE PRACTICE

During the visits, older people share their accumulated life experience, knowledge and stories, while discovering new leisure activities. The volunteers and older people go for walks together, go shopping, visit a doctor or a long-time friend. Depending on the hobbies of the older people, volunteers plant plants together, read books aloud, look at photo albums, make handicrafts and engage in other favourite activities.

OUTCOMES

The Lithuanian Red Cross reduces older people's feelings of loneliness and tries to improve their well-being with the help of motivated and prepared volunteers who regularly visit people in their homes and provide quality psychosocial support. The Lithuania Red Cross helps older people to engage in activities that they can no longer do alone and encourages them to leave the house. Red Cross volunteers also share valuable information about ways to overcome loneliness and enhance processes of self-help and means of living healthy lifestyles.

Identification of needs: as part of their role, Red Cross volunteers and staff listen to people's needs to understand if something is 'not right' and inform people about available services and supportive measures that could be useful. These include technical aids, information on additional services and contacts for information and support concerning different issues (such as violence). In most cases, domestic violence cannot be observed directly, but there are many signs that abuse may be happening. Preventing accidents in the home is also an important identification task. It involves volunteers and staff informing the person about risks and measures to minimise them, possibly by using a brochure or other written material.²¹ Volunteers and staff are also trained to be sensitive and observant about typical risks for injuries (such as tripping hazards) and inform the person about measures and devices to mitigate the risks, always respecting the person's will to decide what should be removed or installed in their own home.

Relationship with family: home helpers and home care volunteers are often highly appreciated contact people for caregivers or family members, but they can sometimes be seen as rivals. In the case of conflict between family members, they must take care to remain impartial. Family, friend and neighbour caregivers are indirect beneficiaries for community-based home care and day-care centres. Many caregivers suffer from a lack of time for themselves or family members and friends. They are under pressure to spend most of their time with the person and may neglect other areas and interests of their lives. An opportunity to talk to a home helper or home care volunteer who understands their situation or simply have some time to themselves to relax and decompress is important.²²

4.3. Health care at home

National Societies operate their community-based home care service using a pool of well-trained salaried home helpers and their network of community volunteers for home visits. A combination of both kinds of home carer is highly likely to suit many countries and situations. At the management level there is a programme coordinator, plus a dedicated volunteer coordinator who oversees and supervises the work of the home care volunteers. Home helpers are supervised at the management level by a nurse supervisor.

The home care service encompasses three main elements:²³

Home nursing is provided by nurses and assistant nurses. In some countries it is requested by a medical professional. The main tasks of the service are to develop a nursing plan based on the nursing process, carry out typical nursing activities like supporting personal hygiene and mobility, offer advice on living a healthy lifestyle and disease prevention, and execute medical activities such as changing bandages or giving injections. Psychosocial support to the person and the informal caregiver(s) is also an important duty.

Home help is mainly provided by a home helper and/or social carers. It may include assistance with bodily and domestic tasks in the home, such as cleaning, shopping, getting dressed, preparing and eating meals, psychosocial support and help to participate in social activities. Home helpers in this category are highly trained semi-professionals, receiving a salary for their work.

Visiting services are mainly provided by home care volunteers. They offer

21 Examples of methodologies and processes for identifying needs are available from the French Red Cross: La philosophie d'accompagnement à la Croix-Rouge française and the Spanish Red Cross: Estrategia de Cruz Roja española con las personas mayores.

22 IFRC, 2015. Basic skills and knowledge in community-based home care. Volume 2 of the Community-based home care toolkit.

23 IFRC, 2015. Organization and provision of community-based home care: Minimum standards for Red Cross Red Crescent National Societies.

psychosocial support and help with social activities to improve the social environment and living conditions. Examples include chatting, listening, playing cards or accompanying the person on walks, as well as

working with family members when needed. Visiting services can also be carried out in nursing homes and day-care centres. Some activities of the visiting service overlap with the activities of the home helper.

In practice – In practice: Innovative community care models for persons with chronic diseases and disabilities (2019–2023) by the Bulgarian Red Cross

The project is implemented by the Bulgarian Red Cross in partnership with the Ministry of Labour and Social Policy, the Ministry of Health and the Norwegian Association of Local and Regional Authorities. It is supported by the Financial Mechanism of the European Economic Area 2014–2021.

ISSUE/CHALLENGE

The project has identified possible risks that older people can face when living alone and other factors such as poor health and lack of adequate medical care and social services in some areas of the country.

OBJECTIVE OF THE PRACTICE

Coordinated at community level, the aim of the project is to create an innovative model for remote monitoring and care (tele-assistance/tele-care) for people aged over 50 with chronic diseases and permanent disabilities. The project is implemented in three regions in north-western Bulgaria.

DESCRIPTION OF THE PRACTICE

Tele-assistance/tele-care based on the use of modern information and communication technologies; specialised software and personal devices provided specifically for the needs of older people; providing 24/7 continuous, automatic and remote monitoring of real-time emergencies and lifestyle changes; home care centres have a major role to play in connecting the end-user, the response centre and other health and social services providers.

OUTCOMES

Starting in May 2019, the project provides home care for over 700 chronically ill people, with 500 of them included in the permanent tele-monitoring system. For this to be possible, 75 nurses and home helpers were hired and trained, including staff in the response centre.²⁴

24 Bulgarian Red Cross, Innovative community care models for persons with chronic diseases and disabilities. Online: Home care – Иновативни модели за грижи в общността за хора с хронични заболявания и трайни увреждания (e-homecarebg.com)

Spanish Red Cross volunteers visit older people in their homes during the COVID-19 outbreak, bringing food, medicine and company, 2020.

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4.4. Social innovation in long-term care

Social innovation in long-term care refers to the development and implementation of new and innovative ideas to meet social needs and create new social relationships and collaborations.²⁵

On the frontline of crisis response and emerging social vulnerabilities, the Red Cross has always been at the leading edge of social innovation. For the Red Cross, social innovation is about advancing and challenging current practices to continue improving how support and services are provided to the most vulnerable populations. Through the global network of National Societies, social innovations are promoted and shared. Initiated by the French Red Cross and the Spanish Red Cross, Red Social Innovation is an international network that promotes social innovations developed within and beyond the International Red Cross Red Crescent Movement with the objective of fostering the exchange of good practices between different countries and National Societies.

National Red Cross Societies in Europe believe that there are several ways to create positive social impact, but they must all be person centred and improve boarder inclusion in society. They work towards achieving greater social cohesion and inclusion through supporting vulnerable populations. They do this by providing essential social services to millions of people, as auxiliaries to national authorities. They help older people, people with disabilities, children and young people at risk, people at risk of poverty, people experiencing homelessness, migrants, survivors of domestic and gender-based violence, and many others to live healthier, longer and more active lives. In doing so, their work produces positive social impact through meeting the challenges of pressing social issues and providing support to those who need it most, resulting in more inclusive communities. Through this approach, National Societies work towards the implementation of important social rights frameworks, such as the European Pillar of Social Rights.

25 European Commission, 2013. Guide to social innovation. Online: https://ec.europa.eu/regional_policy/en/information/publications/guides/2013/guide-to-social-innovation

In practice – Arbitryum by the French Red Cross

Arbitryum offers a digital platform, 'Free until the end of life', for the collection and analysis of quantitative and qualitative data with the aim of supporting nursing homes to respect residents' freedoms by offering them a monitoring service and personalised recommendations to better guide ethical approaches to care and positive actions to be taken.

ISSUE/CHALLENGE

Presumptions of incompetence in older people tend to lead others to believe that they are entitled to think for them: how to dress, when to go to sleep, what to eat and so on. This misconception harms the good functioning of nursing homes. Often, older people experience a lack of freedom which diminishes their perceived autonomy and increases the risk of self-harming behaviours and depression. At the same time, families and caregivers take on the responsibilities they refuse to give to the older people and may experience an emotional overload of guilt and worry as a result.

OBJECTIVE OF THE PRACTICE

The 'Free until the end of life' platform targets the roots of the problem by identifying and quantifying the needs. It measures the respect of individual freedom in nursing homes by questioning the residents, their families and the professional care teams in order to improve everyone's well-being.

DESCRIPTION OF THE PRACTICE

'Free until the end of life' has been co-constructed by all the concerned parties through several years of research and development. When the data collection and analysis are done, Arbitryum delivers a precise diagnosis and a list of recommendations for the patient, their carers and care homes directors. Following three years of research, 500 older people living in cities, suburbs and rural areas have been interviewed on the subject of freedom. The results show seven significant topics that older people relate to their freedom: combining freedom and security, choosing and taking ownership of their living space, deciding how they want to be helped, having control over their body until the end of life, being informed to make better decisions and remain useful, having access to leisure and cultural activities and respecting their intimacy. In 2020, the French Red Cross won the competition '21, incubateur d'innovation sociale' [social innovation incubator] for the Arbitryum project which was recognised for its agility, reactivity and adaptability to different contexts.

OUTCOMES

The platform 'Free until the end of life' has been deployed in 100% of French Red Cross nursing homes for 3 years, reaching 20,000 older people in 100 structures in France and its overseas departments and territories.²⁶

26 French Red Cross, In practice: Arbitryum, un outil pour agir pour le respect des libertés des personnes âgées. Online: Qui sommes nous ? | Arbitryum

Conclusions

The Red Cross provides services that consider people's preferences and promote the dignity of people in need.

Across the EU, health systems have proved to have several weaknesses when it comes to responding to the increase in people in need of care and COVID-19 has given a new lens to spot EU Member States' fragilities. The EU has recognised this and has sought to address the issue through the European Pillar of Social Rights (in particular principle 18) and its Action Plan. Importantly, the commitment to launch a European Care Strategy aims to respond to calls for a strategic and comprehensive approach to care, to ensure that people who need care have access to good quality affordable care at all life stages, to support decent working conditions for care workers and to recognise the role of informal carers.

This publication showcases examples of National Red Cross Societies' integrated services supporting older people and their families in finding the best way to live healthy lives at all ages. Their work adapts according to the changing needs of vulnerable people. Thanks to its network of trained volunteers, the Red Cross provides services that consider people's preferences and promote the dignity of people in need. From community engagement, including intergenerational solidarity, to solutions that enhance independent living for older people, this publication has exhibited successful examples of Red Cross teams meeting the needs of older people across Europe.

The Fundamental Principles of the International Red Cross and Red Crescent Movement

Humanity

The International Red Cross and Red Crescent Movement, born of a desire to bring assistance without discrimination to the wounded on the battlefield, endeavours, in its international and national capacity, to prevent and alleviate human suffering wherever it may be found. Its purpose is to protect life and health and to ensure respect for the human being. It promotes mutual understanding, friendship, cooperation and lasting peace amongst all peoples.

Impartiality

It makes no discrimination as to nationality, race, religious beliefs, class or political opinions. It endeavours to relieve the suffering of individuals, being guided solely by their needs, and to give priority to the most urgent cases of distress.

Neutrality

In order to continue to enjoy the confidence of all, the Movement may not take sides in hostilities or engage at any time in controversies of a political, racial, religious or ideological nature.

Independence

The Movement is independent. The National Societies, while auxiliaries in the humanitarian services of their governments and subject to the laws of their respective countries, must always maintain their autonomy so that they may be able at all times to act in accordance with the principles of the Movement.

Voluntary service

It is a voluntary relief movement not prompted in any manner by desire for gain.

Unity

There can be only one Red Cross or one Red Crescent Society in any one country. It must be open to all. It must carry on its humanitarian work throughout its territory.

Universality

The International Red Cross and Red Crescent Movement, in which all Societies have equal status and share equal responsibilities and duties in helping each other, is worldwide.