

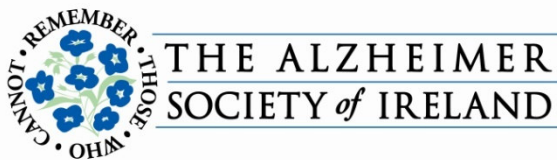


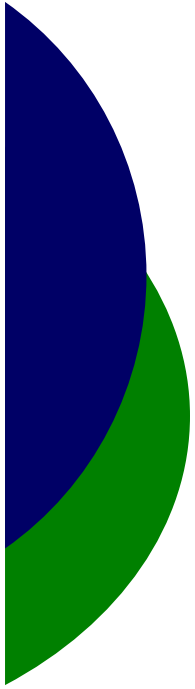
Dementia Rights
Advocacy Project
North Dublin



**SHARING AN EXPERIENCE OF
REPRESENTATIVE ADVOCACY**

Patricia Hallahan





Presentation Outline

- HISTORY AND PHILOSOPHY
- STRUCTURE AND AIMS
- ACTIVITIES AND ACHIEVEMENTS
- ISSUES AND CHALLENGES
- LOOKING AHEAD

History



- Campaign for rights-based disability legislation
~ Disability Act 2004
- ➔ Obligation on Comhairle to support development of advocacy in the community and voluntary sector
- ➔ ASI helpline experience
- ➔ ASI secures funding for 2-year pilot



Philosophy



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- Achieving a better quality of life in the community for people with dementia through:
 - A person-centered approach
 - Respect for human rights
 - An empowerment model



Structure

- Cost €80K annually ~ 88% CIB.
- One staff member, office Coolock.
- Line managed by ASI.
- Reports to project steering group
- 9 members, meets quarterly.
- ASI, CIB, Age Action, NCAOP, HSE & Simon Mills (both a barrister and GP).



Original Aim



- To provide support to 60 individuals of which it was hoped that 20 would avail of a full representative advocacy service.

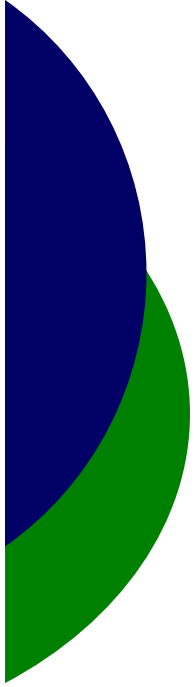


Activities and Achievements



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- Raising awareness of service.
 - Agreeing TOR for steering group and expanding and strengthening it.
 - Developing Policies and Procedures.

 - Provided support to over 65 individuals with 25 availing of a full representative advocacy service. e.g.



Issues and challenges

- What do we mean by advocacy?
- Who is the service for?
- What can the advocate do and not do
- What does the advocate need to do the job?
- What does advocacy have to offer to people with dementia?

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What do we mean by Advocacy?

- 👉 Advocacy is taking action to help people **say what they want**, secure their rights, represent their interests and obtain services they need.
- 👉 Advocacy Schemes work **in partnership** with the people they support and **take their side**.

(a4a 2002)

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Who is the service for?

- The service is open to anyone who
 - has or may have dementia and
 - lives in North Dublin.
-
- Referrals may come from any source

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The person with dementia

is

the client of the service



What can the advocate do?

The advocate can help the client to

- **Access** the information they need
- **Decide** what they want to do
- **Express** their point of view to other people
- **Participate** in decisions that affect them
- **Access** their entitlements and the services they need
- **Complain** if something is not how it should be
- **Appeal** a decision they are unhappy with
- **Protect** their rights
- The advocate's job is to **be on the side of the client.**

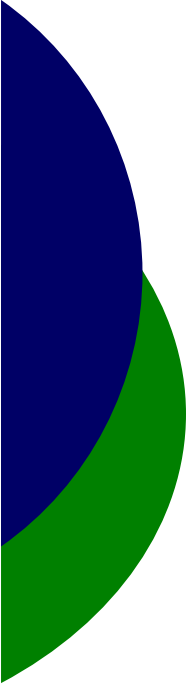


What can the advocate not do?



The advocate will not

- Give advice (legal or otherwise)
- Keep information from a client or pass on information about a client without permission (subject to exceptions)
- Pursue any agenda other than that of the client



What does the advocate need to do the job?



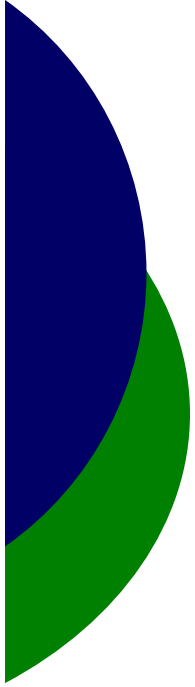
- Skills: conflict handling, negotiation, communication, dementia specific
- Knowledge-where to go, who to ask
- Support
- Guidelines: policies and procedures
- Access- to clients and to decision makers
- Independence



What does dementia advocacy have to offer?



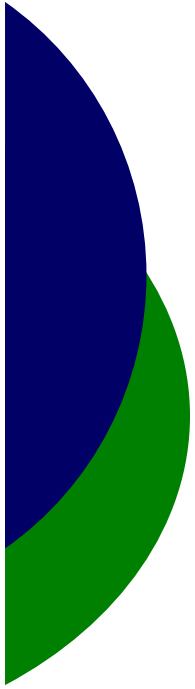
- Some specific challenges: adapting to progressive nature of dementia
- Listening to client always comes first
- Advocate also tries to assemble picture of client from as many sources as possible and decide what client would want
- Time intensive
- Non-instructed advocacy: rights-based approach



Looking Ahead



- Evaluation, CIB funding extended for 3 years
- Continue representative advocacy
- Develop a citizen advocacy model
- Increase links with residential sector
- Explore self advocacy: early stage support group



Summary

- HISTORY AND PHILOSOPHY
- STRUCTURE AND AIMS
- ACTIVITIES AND ACHIEVEMENTS
- ISSUES AND CHALLENGES
- LOOKING AHEAD

- THANKS