



DRAFT REPORT

EASTERN HEALTH BOARD / AGE AND OPPORTUNITY

SOCIAL GAIN PILOT RESEARCH PROJECT

**REGIONAL LIBRARY AND  
INFORMATION SERVICE**

Received  
29 OCT 1998  
Regional Library  
E.H.B.

**EASTERN HEALTH BOARD  
LIBRARIES**

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**QUESTIONNAIRE**

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## **SECTION ONE**

### **PREFACE**

#### **INTRODUCTION**

This project was set up as a pilot with the Eastern Health Board and Age and Opportunity working as partners. The project is consistent with goals of both partners to enhance the health and quality of life of older people.

This report sets out the relevant findings of the research under the four different sectors included, namely Active Retirement Groups, Senior Citizens' and Parish Groups, Day Centres, and Residential Homes. Comments, summaries of some of the findings, some comparisons between the different sectors, and observations of the researcher are included in the third section of this report. The appendices include details of the groups in the research and a list of particular areas of interest of each group, which the Eastern Health Board and Age and Opportunity may wish to follow up.

The time scale of the project was short and the sample small. The research is descriptive rather than empirical and serves to test whether this type of study is useful to the aims of both organisations.

#### **OBJECTIVES**

##### **Overall Objectives**

- To gather information which will enhance planning, structuring and targeting of services and opportunities to meet the needs of older people.
- To use the project as a model for gathering such information.

##### **Specific Objectives**

- To identify the number and nature of organisations, groups and settings in a defined area which older people utilise (Who? Where? What? Why?) including:
  - Autonomous (eg FARA groups, special interest groups)
  - Social services based
  - Voluntary organisations
  - Day Centres / day hospitals
  - Residential
  - Parish centres
- To gather data (address, tel, fax, leader, membership, interests, etc) on each group / setting.
- To identify examples of good practice and innovative projects from which others might learn.
- To ascertain the views of older people in the identified groups / settings on current availability of services and opportunities which support and promote good health and quality of life.
- To determine interest of groups/settings in :-
  - Networking and exchanges (and with whom)
  - Media Involvement (availability for TV/Radio interviews)
  - Volunteering (and in what areas)
  - Receiving newsletter and other materials from EHB and/or Age and Opportunity
  - Further research projects
  - Leadership skills workshops
  - Arts activities
- To record the information gathered in a form useful to the Eastern Health Board and Age and Opportunity.
- To promote the range of projects and initiatives on offer from Age and Opportunity and from the Eastern Health Board to older people.

## METHODOLOGY

- Pilot Area Eastern Health Board, Community Care Area 7.
- Geographical Area East Wall, North Inner City, Drumcondra, Fairview, Marino, Clontarf, Ballymun, Santry, Beaumont, Whitehall
- Population of older people represented in survey Community - 1730 Residential - 438
- Age Profile of Survey 55 years plus.
- Method Face to face interview to complete standard questionnaire, meeting older people's groups in the community, staff and residents of residential homes, and staff and users of day care centres.
- Duration of Project January to March 1998.

## GROUPS AND THEIR SETTINGS

Setting	No. Identified	No. Contacted	No. Interviewed*
Community			
Active Retirement Groups	6	6	6
Other Active Age Groups including Senior Citizens and Parish Groups	10	10	10
Day Centres including Social Services Centres/ Old Folks Centres/Senior Citizens Centres	17	17	16
Older Women's Groups	5	5	0
Residential			
Public	1	1	1
Private Nursing Homes	9	9	7
<b>TOTAL</b>	<b>48</b>	<b>48</b>	<b>40</b>

\*Note - all groups who responded to the initial invitation letter were interviewed.

## SECTION TWO ANALYSIS OF FINDINGS

The analysis of the questionnaires has been grouped according to settings, being Active Retirement Groups, Senior Citizens' and Parish Groups, Day Centres, and Residential Homes. The data is presented according to the questionnaire.

### **GROUP A - ACTIVE RETIREMENT GROUPS**

No. identified for survey - 6 No. participating in survey - 6

#### **Information About the Groups**

	<u>1-5 years</u>	<u>5-10 years</u>	
• Length of time in existence	1	5	
• Group Funding	<u>Subscriptions</u>	<u>Grants from other sources inc statutory</u>	
	6	0	
• Average Age	<u>55-65</u>	<u>65-75</u>	<u>75+</u>
	1	4	1
• Groups catering for disabilities - 2			
• How people hear of groups - Word of mouth, church notice boards and local shop notice board.			
• Main aim of the groups - The aims were identified as helping people to remain independent; keep active; self-help; enjoy yourself in retirement; social outlet; to socially suit the taste of the older person.			
• Main interests and activities - (Not all groups would be involved all these activities) bowls, pitch & putt, keep fit, exercise to music, sequence dancing, swimming, walking, guest speakers, record evenings, theatre outings, quizzes, bridge, scrabble, bingo, group holidays and outings.			

Decisions on groups' activities were in all cases made by committee, however, suggestions from members were welcomed and encouraged.

#### **Opinions**

- Availability of opportunities to pursue interests and participate in activities - In general groups felt that there were opportunities to pursue interests and participate in activities.
- Barriers to participation - lack of motivation by the individual, lack of premises, cost of pursuing education, funding for overheads.
- Services lacking - Premises for activities; Library; Office equipment; Instructors for classes; Transport subsidies for outings.
- Entitlements - are older people well informed?
 

<u>Yes</u>	<u>No</u>
1	5
- What is the best way for the Health Board or Age & Opportunity to give information? - Talks and presentations to groups; Leaflets to households; Post Offices; Public Meetings.
- Group method of distributing information - Via notice boards; Committee meetings; Group gatherings.
- Knowledge of Age and Opportunity - All but 1 of the groups visited had heard of Age & Opportunity but most were unclear of the agency's role.

**GROUP B - ACTIVE AGE AND PARISH GROUPS**

No. of groups identified - 10      No. of groups participating in the survey - 10

**Information About the Groups**

• Length of time groups in existence	<u>1-5 years</u> 1	<u>5-10 year</u> 1	<u>10 years +</u> 8	
• Funding	Subscriptions	Fund raising	Statutory	Other
	4	4	-	2
• Average Age	<u>55-65</u>	<u>65-75</u>	<u>75+</u>	
	2	6	2	

• No. of groups catering for disabilities - 8

• How people hear of groups - Word of mouth, church announcements, notice boards in church, parish newsletter, mail shot to homes.

• Main aims of the groups - The aims were identified as socialising and gettogethers for older people; friendship; activities for the aged; social, educational and recreational; to spend the rest of the time that God has allotted to us helping each other; visits to members who are unable to attend.

• Main interests and activities - Bingo, quizzes, cards, rings, flower arranging, 'after mass' cup of tea and chat, special occasion parties e.g. birthday or feast day. Day trips and evening shows.

Decisions on group activities were made by the group in 6 cases, by the committee in 3 and by a combination in 1.

**Opinions**

• Availability of opportunities to pursue interests and participate in activities - half the respondents thought there were enough opportunities for older people and half thought there were not.

• Barriers to participation - the difficulty of not having premises, the lack of skill based courses, transport to centre for some attenders

• Services lacking - Companion service similar to home help service without the restrictions which the home helps have on their duties. e.g. shopping; transport for hospital appointments; insufficient long-stay beds for older people who can no longer live in the community; premises

Groups mentioned training needs in first aid course for volunteers and training to motivate group to go out. Three groups did not feel that any training resources or support would be relevant to them.

• Entitlements - are older people well informed? Most respondents thought that older people were not well informed about entitlements.

• What is the best way for the Health Board and Age and Opportunity to give information? - Talks to groups; information in libraries; personal visit to older person.

Some respondents felt that the older person did not always find reading attractive perhaps due to poor eyesight or reading ability.

• Group method of distributing information - Via meetings, notice boards, information table and at gatherings.



- Knowledge of Age and Opportunity - Six of the groups visited had not heard of Age & Opportunity. Of the four who had heard of Age & Opportunity they were unclear of the role of this agency.

Eight of the groups felt that Age and Opportunity and Eastern Health Board could help promote their groups e.g. use Health Centres to advertise for new member and Age and Opportunity could refer people to their groups.

### GROUP C - DAY CENTRES

No. of groups identified - 17      No. participating in survey - 16

#### Information about the Groups

• Length of time in existence	<u>1-5 years</u>	<u>5-10 years</u>	<u>10 years +</u>
	3	1	12

• Funding	<u>Statutory</u>	<u>Voluntary</u>	<u>Religious</u>
	11	4	3

Some groups are funded both by statutory agencies and voluntary contributions.

• Average age	<u>55-65</u>	<u>65-75</u>	<u>75+</u>
	2	11	3

• No. of groups catering for disabilities -	<u>Yes</u>	<u>No</u>	<u>Limited accessibility</u>
	12	2	2

- How do people hear of groups? - Word of mouth; Referral from health services; Parish Newsletter; Mail shot to homes.

- Main aims of the groups - To improve quality of life for the older person; Social caring; Bring people together

- Main interests and activities - Meals rather than activities were seen as the attraction for older people to attend the centres. However, the following activities are available to attenders. (Not all centres would have the full range of activities listed.) Bingo (most groups); Darts; Dominoes; Cards; Quizzes; Raffles; Special occasion parties; Outings; Reminiscence; One group invites students from 2 local schools to monthly mass followed by cup of tea.

Decisions on group activities were made by the group (4), the committee (5) or a combination of both (5). Two groups unable to give answer to this question as their group is not fully established.

#### Opinions

- Availability of opportunities to pursue interests and participate in activities - In general respondents felt that there were opportunities to pursue interests and participate in activities.

- Barriers to participation - lack of motivation of the individual; lack of transport; the individual would not participate if they were not already active.

- Services lacking - Lack of supervision of Home Help service; people to help with group activities; discharge from hospital without the services in place to meet the needs of the patient; transport to the centres; more care attendants and part-time staff; resources to fund outings on a planned basis.

Day Centres were interested in training courses for volunteers and training in reflexology, arts & crafts, and aromatherapy.

- Entitlements - are older people well informed? 

<u>Yes</u>	<u>No</u>
10	6

- What is the best way for the Health Board and Age and Opportunity to give information? - Talks to groups; T.V. advertisements.

- Group method of distributing information - Information was passed to the group by announcements at meal times, placing information on notice board or displaying information on table.

- Knowledge of Age and Opportunity - Thirteen of the groups had heard of Age and Opportunity but only four groups had a knowledge of its role.

**GROUP D - RESIDENTIAL**

No. of groups identified - 10    No. participated in survey - 8

- Average age 

<u>70-75</u>	<u>75-80</u>	<u>80+</u>
2	2	4

- Main aim of the groups - The management of the residential homes considered the activities programme an important component in the health and welfare of their residents. One Home has employed an Activities Director while another has a vacancy in this post.

- Interests and Activities - Meal times for social interaction; reminiscent therapy; music therapy; Sonas exercise programme; keep fit classes; art & crafts; bridge/bingo/cards/board games; current affairs; visiting entertainers; special occasion parties; outings.

Not all residential homes had the full range of activities as listed above. A general comment from the staff of the homes was that while some residents were very limited in their ability to participate every effort was made to stimulate them to the maximum of their ability. Decisions about activities was by staff in consultation with the residents.

- Availability of opportunities to pursue interests and participate in activities - 

<u>Yes</u>	<u>No</u>
6	3

The lack of interaction with the community for activities such as gardening and bridge and the lack of opportunity to use day centres were highlighted as restricting older peoples' opportunities to participate.

- Services lacking - Home Help service; Community Nurse numbers should be increased; Independent special interest clubs should be set up; Day Hospital; transport; volunteers; access to physiotherapist should be made easier; simple activities - e.g. afternoon dances.

Lack of volunteers to help with activities was considered to be a problem area. Part-time paid staff perhaps through a Fas scheme might help solve part of the problem.

- Entitlements - are older people well informed? 

<u>Yes</u>	<u>No</u>
4	4

- What is the best way for the Health Board and Age and Opportunity to give information? - One to one discussion; talks to groups; better information on discharge from hospital; leaflets.

- In the homes, information was passed on by word of mouth, notice board or the information table in visitors room.

- Knowledge of Age and Opportunity - While most Homes had heard of Age & Opportunity, they were unclear of what role this agency played.

**CONFIDENTIAL QUESTIONNAIRE**  
**SOCIAL GAIN PILOT RESEARCH PROJECT**

Group Name \_\_\_\_\_ Address \_\_\_\_\_  
\_\_\_\_\_ Tel. no. \_\_\_\_\_ Fax no. \_\_\_\_\_

Contact Person/Person in Charge \_\_\_\_\_ Title \_\_\_\_\_

**GROUP DETAILS AND MEMBERSHIP PROFILE**

Year Group Founded \_\_\_\_\_ Formal Committee - Yes/No

Type of Group - ARG/Day Centre/ Residential/Special interest/Other \_\_\_\_\_

Source of funding - Voluntary/Statutory/Other \_\_\_\_\_ Concessions? \_\_\_\_\_

No. of Members - 5 years ago \_\_\_\_\_ Current \_\_\_\_\_  
Average group age - when founded \_\_\_\_\_ Current \_\_\_\_\_ Age of youngest member \_\_\_\_\_ Oldest Member \_\_\_\_\_

Venue for Meetings \_\_\_\_\_ Meeting times /frequency \_\_\_\_\_ Opening Times \_\_\_\_\_

Do you cater for people with disabilities? \_\_\_\_\_

How do people hear about your group? Do you promote/advertise your group? \_\_\_\_\_

**INTERESTS AND ACTIVITIES**

Purpose/Aims of Group \_\_\_\_\_

Main activities \_\_\_\_\_

Who decides what the group does \_\_\_\_\_

Does the Group participate in activities other than meetings? \_\_\_\_\_ Detail \_\_\_\_\_

Does the group have any ongoing physical activity programme? \_\_\_\_\_

If not, would the group see a need for such programmes? \_\_\_\_\_

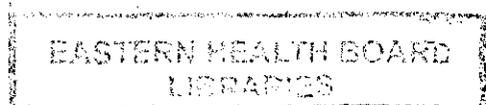
Are there any special health or other projects with which your group has been associated? If so, what? \_\_\_\_\_

**AVAILABILITY OF SERVICES AND OPPORTUNITIES**

Do you think that there are enough opportunities for older people to pursue interests, participate in activities etc \_\_\_\_\_ If not, what do you think should be available? \_\_\_\_\_

Do you think there are enough services which enhance independence and good health in older age? \_\_\_\_\_ If not, what is needed? \_\_\_\_\_

What service(s) do you consider lacking in your area? \_\_\_\_\_



Are there things your group would do if you had the resources/training/support? \_\_\_\_\_

**HEALTH SERVICES AND AGE AND OPPORTUNITY INFORMATION**

Do you think older people are well informed about entitlements, health promotion, health services etc? \_\_\_\_\_  
If not, how do you think is the best way of getting this information to them? \_\_\_\_\_

Have you heard of A&O? If so, what do you know about it? \_\_\_\_\_

Has your group received any information from A&O? If so, was it useful? \_\_\_\_\_

Would you like to receive information from A&O &/or the EHB? \_\_\_\_\_ Specify \_\_\_\_\_

How do you pass on the information within the group? \_\_\_\_\_

Could A&O &/or the EHB help you to promote your group? \_\_\_\_\_

**GENERAL**

From what organisations does your group receive information from now? \_\_\_\_\_

How do you pass on information or publications received? \_\_\_\_\_

Are any members of your group interested in the following? (Tick)

Networking and exchanges \_\_\_\_\_ With Whom \_\_\_\_\_ Contact Name+ Tel No. \_\_\_\_\_

Media Involvement \_\_\_\_\_ (Availability for TV/Radio interviews) Contact Name + Tel No. \_\_\_\_\_

Volunteering \_\_\_\_\_ What areas? \_\_\_\_\_ Contact Name+ Tel No. \_\_\_\_\_

Arts \_\_\_\_\_ Contact Name+ Tel No. \_\_\_\_\_

Leadership skills training \_\_\_\_\_ Contact Name+ Tel No. \_\_\_\_\_

Further research projects \_\_\_\_\_ Contact Name+ Tel No. \_\_\_\_\_

Older people in education \_\_\_\_\_ Contact Name+ Tel No. \_\_\_\_\_

Representation on a Consumer Panel for Health Services \_\_\_\_\_ Contact Name+ Tel No. \_\_\_\_\_

**USING THIS INFORMATION**

• I agree to the information in this questionnaire being published (eg in a directory of services or for the use of other older people) with the exception of the following \_\_\_\_\_

Signed \_\_\_\_\_ Date \_\_\_\_\_ Name \_\_\_\_\_



- The distribution of information to older people is an ongoing challenge and might well form the basis for a workshop or study day between interested agencies and older people.
- Some respondents pointed out that older people may have difficulty in reading due to poor eyesight and even literacy problems therefore printed material may not always be the most effective means of conveying information.
- Notice of forthcoming events should be given well in advance.
- A monthly circular from the EHB which would list forthcoming events of interest to Day Centres would be greatly welcomed.

### **Opportunities**

- The vast majority of respondents thought there were adequate opportunities for older people to participate actively in their areas of interests.

### **Barriers and Gaps in Services**

- The lack of transport to enable members to attend or the group to pursue activities was cited by all sectors as a problem.
- Another lacking commonly identified was the lack of suitable premises for groups to meet and for organisation and administration activities.
- All groups except the ARAs commented on failings in the Home Help Service.
- The poor information and organisation of services for people on discharge from hospital was a common complaint.

### **Interests and Activities**

- The lists of activities in each sector reflected what might be seen as 'traditional' pursuits for older people's groups eg bingo featured as did board games and outings.
- There was an interest in training in all sectors which would extend the range of services and activities the group was able to do.
- ARAs had a wide range of physically active pursuits.
- Groups were very keen for trainers to come in from the outside but few had the resources to pay for this. Respondents reported that motivation of older people to participate in new activities was low if the activity was initiated by a member from the group or centre.
- A strong interest in the arts was shown by the residential settings and the groups.
- Leadership skills training was not seen as a priority by most respondents.
- Education was not something that group leaders naturally thought of but it was acknowledged as an important area when raised by the researcher. The cost of courses was an issue which was sighted as a disincentive.

### **EHB and Age and Opportunity**

- Most respondents knew of but were not able to describe Age and Opportunity. The agency may not see this as a problem if the groups are well informed about its different activities eg Bealtaine, Go for Life. This was not clear from the research.
- Day centres would like to meet on a regular basis with EHB and each other. This would allow them to keep up to date on services and activities.

### **Volunteers**

- Many respondents felt the lack of volunteers to organise and provide transport for outings.
- Many identified the wish for volunteers to come in and teach classes.

### **Networking**

- The staff of Day Centres visited felt they would benefit from regular meetings with other centres.
- The residential settings surveyed were very open to maintaining community links for the residents which would allow the residents to participate and contribute. It was suggested that residents should be able to attend day centres outside the home and should be welcome in older peoples groups in the community.
- It is worth noting that the rights and needs of people living in homes as citizens and residents of a community or neighbourhood are easily forgotten.
- Generally community based groups were interested in networking and exchanging but only with similar to themselves (i.e. not residential groups).

### **Other**

- Some of groups welcomed participation in the survey as the first time they had felt recognised by the EHB or Age and Opportunity or any other external agency since they were founded.

### **Good Practice and Innovative Projects**

- Residential - Nazareth House have employed a full time Activities Director. The continuity of the planned activities and group consultation along with the facilities available to the residents allow for good practice. This Nursing Home has plans, at drawing board stage, to build a new purpose built activities room
- Little Sisters of the Poor, Sybil Hill Residential Homes - Killester Active Retirement Group uses facilities at Sybil Hill for meetings/bowling/talks etc. They are involved as volunteers within the Home.
- Swords Senior Citizens Day Centre ,while not strictly within the geographical area, have a wide and varied range of activities.
- Dominican Day Care Centre encourages its members to volunteer their service to the group. The administration of day to day business is done by one of the attenders.
- St. Anthony's Social Club, Clontarf, hosts a cup of tea after 10 o'clock mass where current affairs from the daily newspapers form part of discussion.

## APPENDIX 1

Names and addresses of groups who participated in the project. Where possible a contact name has been given along with postal address and centre address if different from the postal address.

### ACTIVE RETIREMENT GROUPS

Donnycarney ARA, 20 Collins Park, D 9. (centre address - Social Service Centre, Donnycarney)	May Lynch	8319536
Fairview ARA, 46 St. Aidan's Park Road, Fairview, D 3. (centre address - Our Lady's Hall, Fairview)	F. Hennessy	8336700
Marino AR, C/o. 71 Declan Rd., Marino, D 3. (centre address - Carton Hall, Shelmartin Ave., Marino)	M. Lawless	8333160
Greenfield Park Active Retirement Section, 4 Shanowen Grove, Dn 9. (centre address - Greenfield Res. Assoc.Community Hall)	E. Ormond	8423912
Kincora/Clontarf ARG, The Resource Centre, St. John's Church, Clontarf, Dublin 3.	B. Corcoran	8332835
Lorcan & District ARA, 1 Coolatree Pk., Beaumont, D 9. (centre address - Lorcan Community Hall, Lorcan Green, Beaumont)	I. McDonnell	8371288

### PARISH ACTIVE AGE GROUPS AND SOCIAL CLUBS

Beaumont Over 50 Club, 4 Dronlee Cres., Beaumont, D 9. (centre address - Pascal Centre, Church of the Nativity, Montrose Ct., Beaumont)	A. Bonny	8373564
Catholic Housing Aid Society, 12 Fr. Scully House, Grenville St., D1.	V. Power	8741020
Glasnevin Village Senior Citizens, Sacristry, Glasnevin Community Centre, Our Lady of Dolours, Botanic Ave., D 11.	D. O'Malley	-
Greenfield Park Senior Citizens, 8 Shanliss Park, D 9. (centre address - Rere of 112 Shanliss Rd., Beaumont)	J. Bradshaw	8424887
Marino Parish Seniors Club, 2 Sandon Lane, Castledrive, Marino. (centre address - Carlton Hall, Shelmartin Rd., Marino)	E. Gaffikin	-
Thorndale Court Senior Citizens Club, 335 Collins Ave.	L. Sherlock	8378330
Poppintree Swingers, 70 Druid Court, Poppintree, D 11. (centre address - C/o. Ivy Jenner, 41 Burren Ct., D 11.)	A. Byrne	8429710
Swords Senior Citizens Centre, Rere 23/25 off Main St. Swords, Co. D	M. Hartford	8407589
St. Anthony's Social Club, 73 Kincora Drive, Clontarf, D 3. (centre address - St. Anthony's House, St. Laurence's Rd., Clontarf)	R. Corrigan	8338627
St. Agata's Senior Citizens, 14 Distillery Rd., off Clonliffe Rd., D 3.	U. McArdle	8360567

### DAY CENTRES

Ballybough Community Centre, Ballybough Court, Dublin 3.	M. Gorman	8786087
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Ballymun Old Folks Group, 46 Craig Ct., Poppintree, D 11. (centre address - Burren Court)	F. Thomas	8427754
Brendan Behan Court, C/o. Sr. Eileen, CCA 7, EHB, Jones Rd., D 3. (centre address - Brendan Behan Court, Russell St., D 1)	Sr. Eileen	8552000 ext. 259
Coultry Gdns. Senior Citizens, 187 Coultry Rd, D 9. (centre address - Coultry Gdns.)	A. MacGiolla Rua	-
Dominican Day Care Centre, 31 Upper Dominick St., D 7.	Fr. Andy Allen	8305340
Donnycarney Beaumont Social Service Council, 67 Coultree Rd., Beeamount, D 9. (centre address - St. John,s, Malahide Rd., D 5.)	C. Spencer	8375566
Drumcondra Active Age Assoc., 117 Walsh Rd., Drumcondra, D 9 (centre address - Parochial Hall, Homefarm Rd., Drumcondra)	M. Mills	8378256
East Wall Day Care Centre, St. Mary's Rd., East Wall, D 3.	M. Brady	8743603
Francis Xaviour Parish, 28 Sherrard St., D 1.	Sr. Clare	8740439
Linx Project, 5 Thomas Clarke Tower, Ballymun, D 9.	B. Bent	8422426
Lourdes Day Care Centre, Lr. Sean MacDermott St., D 1.	B. Pierce	8554381
St. Anthony's Social Centre, North William St., D 1	Sr. Louise	8554304
St. Clare's Day Centre, Griffith Ave. Ext , D 9.	M. Cannon	8373619
St. Laurence's Court Day Care Centre, No. 5 First Ave., Seveille Place, D 1. (centre address - Oriel St., D 1.)	E. Donnellan	8725975
Welcome Inn, Senior Citizens Club, 20L Sandyhill Gdns, D 11. (centre address - 29/30 Sandyhill Gdns., Ballymun)	K. Weldon	8425590
Whitehall Council and Social Service, Social Service Centre, Collins Ave, D 9.	R. Scully	8374755

#### RESIDENTIAL

Beechlawn House, Highpark , Grace Park Rd., D 9.	Sr. T. Coughlan	8369622
Highfield Hospital Group. Swords Rd., Whitehall, D 9.	A. White	8374444
La. Verna N. H., 30 Haddon Rd., Clontarf, D 3.	A. Tevlin	8339879
Little Sisters of the Poor, Sybil Hill, Sybil Hill Rd., D 5.	Sr. C. Brown	8332308
Nazareth House N.H., Malahide Rd., D 3.	Sr. Gerome	8338205
Our Lady Of Charity Hostel, 69 Lower Sean Mc Dermot St., D 1.	Sr. L. Bruton	8746490
Shrewsbury House N.H., 164 Clonliffe Rd., D 3.	M. Gaughran	8370680
St. Clare's Home, Griffith Ave., Ext. Dublin 3.	M. Cannon	8373619

## APPENDIX II

Groups were asked if they were interested in the following topics

TOPIC	ABBREVIATION
• Networking and exchanging	NE
• Media Involvement	MI
• Volunteering	V
• Arts	A
• Leadership skills training	LST
• Further research projects	FRP
• Older people in education	OPE
• Representations on a Consumer Panel for Health Services	CP

### ACTIVE RETIREMENT GROUPS

Donnycarney ARA, 20 Collins Park, D 9 (centre address - Social Service Centre, Donnycarney)	NE V FRP CP
Fairview ARA, 46 St. Aidan's Park Road, Fairview, D 3. (centre address - Our Lady's Hall, Fairview)	MI A LST FRP
Marino AR, C/o. 71 Declan Rd., Marino, D 3. (centre address - Carton Hall, Shelmartin Ave., Marino)	NE MI V A LST FRP CP
Greenfield Park Active Retirement Section, 4 Shanowen Grove, Dn 9. (centre address - Greenfield Res. Assoc.Community Hall)	NE MI V A LST FRP OPE CP
Kincora/Clontarf ARG, The Resource Centre, St. John's Church, Clontarf, Dublin 3.	NE MI A LST FRP CP
Lorcan & District ARA, 1 Coolatree Pk., Beaumont, D 9. (centre address - Lorcan Community Hall, Lorcan Green, Beaumont.	NE V A LST CP

**Groups were interested in networking and exchanging only with other Active Retirement Groups and volunteering within their own groups.**

### PARISH ACTIVE AGE GROUPS AND SOCIAL CLUBS

Beaumont Over 50 Club, 4 Dronlee Cres., Beaumont, D 9. (centre address - Pascal Centre, Church of the Nativity, Beaumont)	NE MI V A LST FRP OPE
Glasnevin Village Senior Citizens, Sacristry Community Centre, Our Lady of Dolours, Botanic Ave., D 11.	NE MI V A FRP CP
Greenfield Park Senior Citizens, 8 Shanliss Park, D 9. (centre address - Rere of 112 Shanliss Rd., Beaumont)	NE FRP OPE

Marino Parish Seniors Club, 2 Sandon Lane, Castledrive, V FRP  
Marino. (centre address - Carlton Hall, Shelmartin Rd., Marino)

Poppintree Swingers, 70 Druid Court, Poppintree, NE V LST FRP CP  
D 11. (centre address - C/o. Ivy Jenner, 41 Burren Court.)

Thorndale Court Senior Citizens Club, 335 Collins Ave., NE Y FRP CP  
D 9. (centre address - Thorndale Court)

Swords Senior Citizens Centre, Rere 23/25 off Main St., NE MI A LST OPE CP  
Swords

St. Anthony's Social Club, 73 Kincora Drive, Clontarf, A FRP OPE  
D 3 (centre address - St. Anthony's House, St. Laurence's Rd., Clontarf)

St. Agata's Senior Citizens, 14 Distillery Rd., FRP CP  
off Clonliffe Rd., D 3. (centre address - St. Anthony's, North William St., D1)

**Mainly interested in networking and exchanging with other senior citizen's groups,  
day centres or Active Retirement Groups. Volunteering within own groups.**

#### DAY CENTRES

Ballybough Community Centre, Ballybough Court, D3 NE MI A FRP CP

Ballymun Old Folks Group, 46 Craig Ct., Poppintree, D11 NE A FRP

Dominican Day Care Centre, 31 Upper Dominick St, D7 MI V A FRP

Donnycarney Beaumont Social Service Council, NE MI V A LST FRP CP  
67 Coulatree Rd., Beaumont, D 9. (centre address - St. John's, Malahide Rd., D 5.)

Drumcondra Active Age Assoc., 117 Walsh Rd., NE MI A LST FRP CP  
Drumcondra, D 9. (centre address - Parochial Hall, Homefarm Rd., Drumcondra)

East Wall Day Care Centre, St. Mary's Rd., East Wall, D 3. NE MI

Francis Xaviour Parish, 28 Sherrard St., D 1. NE MI FRP CP

Linx Project, 5 Thomas Clarke Tower, Ballymun, D 9. NE MI A LST FRP OPE CP

Lourdes Day Care Centre, Lr. Sean MacDermott St., D 1. MI CP

St. Anthony's Social Centre, North William St., D 1. MI CP

St. Clare's Day Centre, Griffith Ave. Ext , D 9. NE MI A FRP CP

St. Laurence's Court Day Care Centre, No. 5 First Ave., NE MI A FRP  
Seville Pl., D 1. (centre address - Oriel St., D 1.)

Welcome Inn, Senior Citizens Club, 20L Sandyhill Gdns, NE MI V A LST OPE CP  
D 11. (centre address - 29/30 Sandyhill Gdns., Ballymun)

Whitehall Council and Social Service, Collins Ave , D9. NE MI V FRP CP

**Interested in networking and exchanging with similar groups and volunteering  
within their own groups.**

**RESIDENTIAL**

Beechlawn House, Highpark , Grace Park Rd., D 9.      **V A FRP CP**

Highfield Hospital Group. Swords Rd., Whitehall, D 9.      **NE MI A FRP OPE CP**

La. Verna N. H., 30 Haddon Rd., Clontarf, D 3.      **NE MI A FRP CP**

Little Sisters of the Poor, Sybil Hill, Sybil Hill Rd., D 5.      **NE V A FRP**

Nazareth House N.H., Malahide Rd., D 3.      **NE MI V A LST FRP OPE CP**

Our Lady Of Charity Hostel, 69 Lower Sean Mc Dermot St      **V A FRP OPE**

Shrewsbury House N.H., 164 Clonliffe Rd., D 3.      **NE**

St. Clare's Home, Griffith Ave., D 9.      **NE MI A FRP**

**Networking and exchanging with other homes and community groups and  
volunteering within own area only.**