Submission to the BusConnects Dublin Area Bus Network
Redesign Public Consultation

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1. Introduction

Age Action is the leading advocacy organisation on ageing and older people in Ireland. Our mission is to achieve fundamental change in the lives of all older people by eliminating age discrimination, promoting positive ageing and securing their right to comprehensive and high-quality services.

We want to make Ireland the best country in the world in which to grow old and we work with older people to build a society free of ageism where their rights are secured. A central feature of our work is raising awareness about the lived experience of growing old in Ireland.

We are grateful for the opportunity to make a submission to the BusConnects Dublin Area Bus Network Redesign Public Consultation. Access to suitable public transport remains a critical and priority issue for our members.

Goal 1 of the National Positive Ageing Strategy outlines a commitment to encourage the participation of older people in society, to get ‘out an about’, including through the availability of ‘accessible, affordable and flexible transport systems’.

Being able to access suitable public transport is synonymous with independence. For many older people it is an absolute necessity to reach appointments (particularly medical) and may mean the difference between living in the community or being forced into residential care.

Any suitable redesign of the Dublin public transport system will need to take into account the particular needs of an older cohort: stops close by, uses accessible vehicles and provides suitable routes.

Age Action’s Helpline frequently receives calls from members concerned about the acceptance of the Free Travel Scheme bus pass on new routes. A public campaign confirming this would go far to help allay the concerns of older people concerned about their future travel options.

Also of great concern to callers to our Helpline is that all buses will continue to disembark directly at the kerb, and thus remove any concerns for older people to have to step down onto the road or in a cycle lane.

2. Context

   i) An Ageing Population

People in Ireland are living longer, healthier and more active lives. According to the most recent Census figures, the number of people aged over 65 saw the largest increase of population since 2011. This age group has increased since 2011 by 19.1 per cent (to 637,567) and represents 13 per cent of the total population. The number of people aged over 85 increased by 15.6 per cent (to 67,555).

The number of people aged over 65 is projected to increase very significantly to close to 1.4 million by 2041, representing 20-25 per cent of the population. The number of

people over 80 is set to rise even more dramatically, increasing by over 250 per cent to between 470,000 and 484,000 in 2046.\(^2\) Regional projections for 2016-2031 show the number of older persons (over 65) will almost double in every region over that time period.\(^3\)

Projections for population increase in Dublin by 2031 are between 96,000 and 286,000, with that of the Greater Dublin area varying from 286,000 to just over 400,000.

**ii) Current Public Transport Use**

The 2018 HaPPI report from the Department of Health ‘Positive ageing in age friendly cities and counties: local indicators report’ saw up to 13 per cent of older people in urban areas experience difficulty in accessing public transport.\(^4\) This figure increases to 65 per cent for older people who have longstanding illnesses. Overall, 37 per cent of those aged 55-69 and 27 per cent of those aged over 70 years experienced difficulties in accessing public transport.

Of those living in Dublin, older people reporting some or great difficulty in accessing public transport varied across county council areas:

- Dublin City – 6 per cent
- Fingal – 8.3 per cent
- Dun Laoghaire-Rathdown – 20 per cent
- South Dublin – 6.6 per cent

Older people in each area did report a high overall satisfaction with good or excellent local transport services:

- Dublin City – 81.3 per cent
- Fingal – 60.7 per cent
- Dun Laoghaire-Rathdown – 59.2 per cent
- South Dublin – 59.6 per cent

**3. Recommendations**

**i) Retention of high frequency direct routes on hospital routes**

Age Action welcomes a commitment in the draft BusConnects Plan to address poor orbital service, decrease the complexity of the bus service in Dublin, and to increase the frequency of buses. However, callers to Age Action’s Helpline frequently express concerns about proposed changes to current direct (and often high frequency) routes


to hospitals. Hospital and other medical appointments may often be scheduled early in the morning thus requiring older people to travel on early bus services.

Many callers to our service have cited worries over proposed changes in the draft Plan where their direct routes to Beaumont Hospital and St. James Hospital will be changed.

The retention of direct routes serving the main hospitals is needed.

ii)  *Suitability of interchanges for older people*

We welcome the outlining of NTA assumptions in the draft Plan that adequate shelters and information will be provided at each interchange stop.

Covered shelters, in a convenient location and with adequate seating, is required for older people and those with limited mobility. In addition, while any proposed walk between interchange stops is to be ‘safe, efficient and short’, we recommend that any transfer walk time is age proofed with due regard given to the particular needs of older people.

iii)  *Introduce changes on a phased basis*

It is not yet clear how any changes to an orbital system will impact upon commuters, particularly older people and those with limited mobility.

Age Action therefore suggests that any new system is introduced on a phased basis. This will allow for the proper review of evidence and proof that the new system is meeting passenger needs.

4. Conclusion

Public transport in Dublin continues to serve a great need in allowing older people to access crucial appointments, to keep active and to socialise.

Any proposed changes that do not reflect the particular needs of older people will simply see them unable to travel or use the service.

This will result in older people who are unable to drive to miss medical appointments, face increased social isolation and to have to rely on friends or family for transport.

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