



DÍOSPÓIREACHTAÍ PARLAIMINTE  
PARLIAMENTARY DEBATES

**SEANAD ÉIREANN**

TUAIRISC OIFIGIÚIL—*Neamhcheartaithe*  
(OFFICIAL REPORT—*Unrevised*)

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## SEANAD ÉIREANN

*Dé hAoine, 12 Feabhra 2021*

*Friday, 12 February 2021*

Chuaigh an Cathaoirleach i gceannas ar 10.30 a.m.

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*Machnamh agus Paidir.*  
***Reflection and Prayer.***

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### **Gnó an tSeanaid - Business of Seanad**

**An Cathaoirleach:** I have received notice from Senator Pat Casey that, on the motion for the Commencement of the House today, he proposes to raise the following matter:

The need for the Minister for Health to ensure dialysis patients are given the same priority in the allocation of the Covid-19 vaccines as nursing home residents and staff.

I have also received notice from Senator Rónán Mullen of the following matter:

The need for the Minister for Health to make a statement on the Covid-19 vaccination arrangements for elderly retired members of a religious order in the care of a nursing home maintained by that order.

I have also received notice from Senator Jerry Buttimer of the following matter:

The need for the Minister for Health to review the role of public health doctors.

I have also received notice from Senator Fintan Warfield of the following matter:

The need for the Minister for Media, Tourism, Arts, Culture, Sport and the Gaeltacht to introduce a policy on the repatriation of cultural objects.

I have also received notice from Senator Garret Ahearn of the following matter:

The need for the Minister for Social Protection to make a statement on the proposed transition funding of the ability programme over the next 18 months.

I have also received notice from Senator Fiona O'Loughlin of the following matter:

The need for the Minister for Housing, Local Government and Heritage to designate the Curragh, County Kildare, as a national heritage site.

I have also received notice from Senators Malcolm Byrne and Barry Ward of the following matter:

The need for the Minister for Foreign Affairs to make a statement on the detention of pro-democracy and human rights activists in Hong Kong and on the operation of the national security laws by the Chinese Government in Hong Kong.

I have also received notice from Senator Victor Boyhan of the following matter:

The need for the Minister for Housing, Local Government and Heritage to provide an update on the roll-out of An Bord Pleanála's e-planning system.

I have also received notice from Senator Tim Lombard of the following matter:

The need for the Minister for Education to provide an update on the delivery of a permanent extension for the Sacred Heart Secondary School, Clonakilty, County Cork.

I have also received notice from Senator Marie Sherlock of the following matter:

The need for the Minister of State with responsibility for planning and local government to provide an update on the implementation of the recommendation of the Sara Moorhead report on the role and remuneration of local authority elected members.

I have also received notice from Senator Micheál Carrigy of the following matter:

The need for the Minister for Environment, Climate and Communications to consider the location of the proposed peatlands knowledge centre of excellence and visitor centre in County Longford.

Of the matters raised by the Senators that are suitable for discussion, I have selected those raised by Senators Casey, Mullen, Buttimer, Warfield, Ahearn and O'Loughlin and they will be taken now. I regret that I had to rule out of order Senator Carrigy's Commencement matter on the grounds that the Minister has no official responsibility in the matter. The other Senators may give notice on another day of the matters that they wish to raise.

## **Nithe i dtosach suíonna - Commencement Matters**

### **Covid-19 Pandemic**

**An Cathaoirleach:** I thank the Minister of State at the Department of Health, Deputy Mary Butler, for coming to the House. Half of the matters relate to health, as they would in the middle of a global pandemic.

**Senator Pat Casey:** I also welcome the Minister of State back to the House and thank her for her commitment to it. She has always made herself available to answer our queries and I know of her personal commitment to the role she has taken on as Minister of State.

My question is for the Minister for Health, Deputy Stephen Donnelly, and it is to ensure dialysis patients are given the same priority in the allocation of Covid-19 vaccine as nursing home residents and staff, given their similar mortality levels. Everyone in this House is conflicted because different cohorts are making representations to us that they should be ahead of others. Even in my small village of Laragh, we have different cohorts of people. I am reminded of an email I received from a very close friend last week putting the case for her brother, who has a neurological condition and is living in a residential care unit with three other clients and who has not seen his 82-year-old mother for nearly a year.

In addition, two very good friends in the same village are now on dialysis, one for three years and the other for two years. I had the pleasure of playing football with Thomas and Michael for nearly 15 years. We have mixed emotions when trying to make these decisions. The decision has to be based on facts and evidence. That is the priority when the decisions have to be made. I am aware the issue of people who are going through dialysis or have been recipients of a kidney transplant was raised on a number of occasions yesterday in the Dáil. There is international evidence that backs up their case that they should be moved up to the same level as nursing homes. There is evidence that there is a 25% mortality rate among renal patients who become infected with Covid-19. I am not just saying this; it is backed up by science.

In the Dáil debate yesterday, the Minister for Health, Deputy Donnelly, referred to a review of all people with disabilities and how we will administer the vaccine, and not just the cohort I am talking about but other cohorts. However, I am focusing on this today and there is evidence to prove the mortality rates. The second issue is the inconsistencies within the age groups. One is at seven if over 65 and 15 if under 65.

I ask the Minister of State for a reply on the review process. Does she know how the Minister for Health, Deputy Donnelly, intends carrying it out? When will the review process be finished and published? Can the Minister of State see any way of getting this cohort of people up to the same level as nursing home residents?

**Minister of State at the Department of Health (Deputy Mary Butler):** I thank the Cathaoirleach for the warm welcome and Senator Casey for the very important issue he has raised.

He is quite right; it was raised several times yesterday in the Dáil when Minister for Health, Deputy Donnelly, and I were answering questions on the Covid-19 vaccine. The only limit to the vaccine is supply. That is where our main issue is. For example, we got 21,600 doses of the AstraZeneca vaccine this week. Those are being distributed to front-line workers because a decision was taken that it was not suitable for those over 65. The issue we currently have is supply. We would love to have a huge supply of the vaccine. There are no vaccine supplies sitting in storage not being administered. I want to put it on the record.

The Covid-19 vaccine allocation strategy sets out a provisional list of groups for vaccination. The strategy was developed by the national immunisation advisory committee, NIAC, and the Department of Health, endorsed by the National Public Health Emergency Team, NPHE, and approved by the Government on 8 December 2020. Vaccine allocation is a matter for the Department of Health. The roll out of the Covid-19 vaccination programme is the responsibility of the HSE. The aim of the Covid-19 vaccination programme is to ensure, over time, the vaccine becomes available to all individuals for whom it is indicated.

Given there are currently limited vaccines available, it will take some time for everyone to receive the vaccine, necessitating an allocation strategy. This will ensure that the most at risk of death and serious illness receive the vaccine first. The priority is to first vaccinate and protect the most vulnerable among us, that is, the most likely to have a poor outcome if they contract the virus. The priority is to use vaccines to save lives and reduce serious illness. Hence, the focus on the over 65 year cohort in long-term residential care facilities and health care workers in front-line services often caring for the most vulnerable.

As we have seen, the roll out has been to nursing homes. I am delighted to say the uptake from residents is close to 99%, which is absolutely phenomenal. Vaccine 2 is being rolled out to the nursing home settings. During the week commencing 8 February, the vaccination programme is continuing. It is entering its conclusion phase with a continued prioritisation of staff within disability and mental health settings who are managing the care of those over 65 in residential settings.

Residents over 65 in non-registered long-term residential care, LTRC, settings, such as religious orders, are also being prioritised for vaccination. I will be dealing with that issue in the next Commencement matter. In line with vaccine supply, each community healthcare organisation, CHO, commenced vaccination within these settings on 8 February, which was Monday of this week. The next group to be vaccinated is group 3, which will start next Monday. It includes those aged 70 and older in the following order: 85 and older; 80 to 84; 75 to 79; and 70 to 74. Vaccination of this group will commence on Monday, 15 February. People with chronic kidney disease are included in group 5 or group 7, which include people aged 65 to 69, with priority for certain medical conditions, and people aged 18 to 64 with certain medical conditions. Of course people with chronic kidney disease are not an homogenous group and may be included in other priority groups, such as groups 1 and 2.

In response to the Senator's direct question, the Minister for Health stated yesterday that he asked the HSE to examine the issue raised in relation to the various groups. I expect this review to conclude quickly.

**Senator Pat Casey:** I thank the Minister of State for her reply. I acknowledge that the limited amount of vaccine received is being rolled out and administered, and that the issue is about supply. That is why I put down the Commencement matter today. There is clear evidence in relation to the cohort I am referring to that there is a 25% mortality rate, and it should be at the same level as nursing home residents.

I know it is not within the remit of the Minister of State to tell me how quickly a review can be done. We would all love to know what "quickly" means. All I ask the Minister of State to do is to raise our concerns about this cohort with the Minister. It is not that they should receive preferential treatment but that they should receive a fair treatment based on science and fact, which the Department is aware of. We should try to get them up to whatever level we can. We should see if the distinction between age groups within that cohort can be removed.

**Deputy Mary Butler:** I thank Senator Casey for advocating on behalf of kidney and dialysis patients, and highlighting the challenges they face. As he said quite rightly, this will be determined from a scientific, medical, and clinical point of view. That is the only way we can look at this issue. On the decision by the Government, the national immunisation advisory committee, NIAC, and the National Public Health Emergency Team, NPHET, to immunise those in nursing home settings first, we must be conscious of the fact that in the first wave, 56%

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of all deaths were in nursing homes. As of early this week, unfortunately 1,739 of our beloved residents lost their lives in nursing homes, either with Covid or because of Covid, and I suppose that is something we will probably never know for sure. That is why the priority has been determined in this way. Those next in priority are patient-facing front-line workers who are doing an exceptional job on a daily basis. The next in priority are our most vulnerable cohort, those over 70 years.

I certainly take on board the point made by Senator Casey. It has been made to me several times. The priority is for those who are at most risk of death or serious illness to receive the vaccine first. As the Senator quite rightly pointed out, the Minister said yesterday this issue would be looked at. Different cohorts were mentioned. For example, the situation of many very ill people who are waiting for serious operations and who need to be vaccinated in advance was mentioned yesterday. The only thing preventing vaccination is supply. In quarter 2, starting in April, I hope we will receive 250,000 vaccines per week, whereas this week we only received 21,600 vaccines. Gabhaim buíochas leis an Seanadóir and I will communicate his thoughts to the Minister.

**An Cathaoirleach:** I thank the Minister of State for her response and Senator Casey for raising this issue which is a concern of every public representative. The Irish Kidney Association has done much work advocating for its members, many of whom have no choice but to go into hospital every week. As they cannot delay their dialysis they need to be protected as much as they can be when going into hospital. I thank the Minister of State for coming in.

I know the Minister of State will welcome the Member who will take over as Acting Chairperson from me, Senator Hoey, who has chaired many meetings as president of the Union of Students in Ireland. That organisation represents hundreds of thousands of students and I have no doubt that Senator Hoey will do an excellent job in chairing the Seanad for the first time. I welcome Senator Hoey in taking over the Chair and I thank the Minister of State.

## **Covid-19 Pandemic**

**Senator Rónán Mullen:** Cuirim fáilte roimh an Aire Stáit. I want to raise the issue of vaccinations for residents of care homes owned and operated by religious congregations and for those elderly members of religious orders who are living in congregated settings generally.

I wish to preface my remarks by saying how much I and others appreciate the hard work that is being done by the HSE and by people generally on the front line in the healthcare sector. I feel self-conscious raising issues but part of our role as politicians is to ask hard questions when we feel they need to be asked. It is not done in any way to minimise the stresses, strains and difficulties of the tasks that people face. My engagement with the HSE has been satisfactory and yet there are hard questions that I and others will feel the need to put.

I raised the issue of vaccinations for elderly members of religious orders living in congregated settings on the Order of Business on 19 January and during the statements on vaccinations on 26 January. I have had some private correspondence with the Minister and the task force in the intervening weeks. I have great concern that, despite reassurances I have received, the HSE has been behind the curve on this and that there is a risk of lives being lost as a result. The net issue here is that the care homes owned and operated by religious congregations were voluntary and private homes and were not monitored by HIQA. For a good while, there has been a



great fear among residents, their families and staff that these care homes would fall through the cracks, as residents of other HIQA-regulated care homes were vaccinated. People who have been in touch with me have always been at pains to say they are not trying to jump any queue but that they want to make sure they do not fall through the cracks.

I have received helpful replies from Mr. David Walsh and Dr. Colm Henry on 2 February. The intention was expressed that vaccinations would begin in such facilities on or around 12 February and I believe that is happening. It was back in June 2020 that the issue of support to non-HIQA regulated settings where members of religious orders might reside was raised by Deputy Ó Cuív in the Dáil. It was clear at the time that Covid response teams were supporting all residential settings with issues such as specialist advice, personal protective equipment, PPE, oxygen and extra staff, including settings not obliged to register with HIQA, such as some religious congregated settings. I know there is great gratitude for the support that was received from the HSE in matters such as PPE and other such supports.

Yet, having learned the lessons of April and May of last year when the HSE was engaged directly with these non-HIQA regulated care homes, it was concerning to read on 5 February, last Friday, in *The Irish Times*, that the HSE stated it did not know how many retired clergy were living in congregated settings. The chief operations officer said they had no line of sight outside what was registered with HIQA. She said the HSE was trying to capture them through different channels but there were channels it did not know about and it was making a list of them at that time. I have to ask why, 11 months into the pandemic, nine months after the scale of the loss of life in nursing homes had become clear and eight months after the HSE was putting procedures in place for such settings to be liaised with directly, that line of sight was not there right from the get-go? We are all deeply conscious that every day more lives are lost. That is why the question must be put.

I stressed at the outset that it is not a question of those in religious orders wanting to jump the queue but there is an issue of psychological reassurance. Even last night I was talking to the prior of a small elderly community who told me it would be helpful if they just knew when it would be. The prior also asked me who they should liaise with. There is no clarity or no sense that there is a go-to person who can give an answer and point out where they are on the list and when they will get the vaccine. That kind of thing is crucial and it brings tremendous psychological reassurance. There is also the concern about the associated staff who are supporting these people, even if they are not elderly themselves. However, if they have continuous contact then the question of cross-infection arises and the wisdom of vaccinating them as well comes into play.

**Deputy Mary Butler:** I welcome the Acting Chairperson, Senator Hoey, to the Cathaoirleach's chair and congratulate her.

I thank Senator Mullen for his question. The Senator raised many valid points. It is an issue I have been working closely on for the past couple of weeks and it is great to get the opportunity to speak to it and provide an update.

We are now almost 50 days into the roll-out of the largest vaccination programme in the history of the State. Ireland is progressing well with our programme and our vaccination figures compare favourably with other EU member states. Our strategy is to distribute vaccines as we receive them while ensuring availability of the second dose. It is important that we accept that in terms of the Pfizer BioNTech vaccine, we have given a commitment to administer the

second dose between 22 and 28 days after the first dose. The intention is that the vaccination programme will only be limited by supply.

As of 8 February, a total of 243,000 vaccines have been administered. As of the same date, 91,500 vaccines were administered in long-term residential care facilities, of which 69,038 comprised the first dose of the vaccine and 22,510, the second dose. From Monday next, 15 February, an additional 42,500 vaccines will be delivered in long-term residential care facilities.

This week the vaccination programme is continuing with the prioritisation of staff within disability and mental health settings who are managing the care of those over 65 years. A total of 9,000 vaccines will be administered in residential care facilities this week, including to staff.

We are also focusing our efforts on residents over the age of 65 in non-registered long-term residential settings, such as religious orders and, as the Senator might be familiar with, the Sue Ryder homes or the Matthew Shea homes whose residents would have their own front doors but live in congregated settings. They are being prioritised for vaccination this week and in line with vaccine supply, each community healthcare organisation commenced these vaccinations. In order to answer the Senator's question, for local knowledge it is best to contact HSE within their community healthcare organisations, CHOs.

Anyone over 70 who may not have a GP needs to contact the HSE as a priority. There is a telephone number: 1850 24 1850. There is a small cohort of people who may not be registered with a GP for some reason and a GP close to them will be found.

In relation to the other questions the Senator raised, the Senator quite rightly stated that initially the 580 nursing homes, public, private and voluntary, which are known to and registered with HIQA, were the first to be put on the list. Then it became known quickly that there were many carer-led homes, which were mostly religious orders, and some community-led homes which were also carer-led not nurse-led, that were not known specifically to HIQA. I intend to change that because I have received the list of these homes this week.

Local knowledge was very important. I was contacted by so many Deputies and Senators throughout the country to ask when such-and-such a facility would get its vaccinations. It has started this week. Carers in these homes have also been vaccinated. A niece of mine was one of them and I know for a fact that the carers and the workers were vaccinated also.

When we have the roll-out of the vaccine complete to all of these orders, I intend to write to them. I met with the Department last week to discuss this because I believe we must have oversight going forward of all people who are living in residential settings. Whether care-led or nurse-led, or whether religious, it makes no difference. They are our people and they need to be cared for. Even from a safeguarding point of view, it is important that we know where our older people are living and who is caring for them.

**Senator Rónán Mullen:** I agree that it is a complex situation. I think of my own parents at home. There are many people living as individuals or couples who are elderly, for most of whom vaccination will happen through their GPs.

In addition to the carer-led setting the Minister of State referred to, there are quite a few religious houses in the country where everybody is elderly. There might be one 65-year-old living with three or four others who are well into their 70s. The point could be made that where three or more are gathered and there is a carer in their midst, the vaccine should be there as



quickly as possible. I presume it is something we will have to do as we get queries from people to intervene and to contact the HSE on their behalf.

We hope it is understood that the intention is not to jump any queue, but there appears to have been a lack of joined-up thinking. That is the regret in this situation. This is a difficult time and such things happen in systems, but there is a concern that the HSE was  
*11 o'clock* on hand last summer and gave great support yet, in hindsight, information was not collated for the vaccines quickly enough in the way that it should have been. Is that not why we are playing catch-up?

**Deputy Mary Butler:** It is not so much about playing catch-up. I looked into this situation to see why some religious orders were registered with HIQA and others were not. They took that decision themselves. My understanding is that this situation dates to 1992 when nursing homes were first regulated. I am open to correction on that but there was an opportunity then. Some religious orders that operate nursing homes are registered with HIQA and others chose not to be.

Regarding the supply of PPE supports, 23 Covid teams are on the ground to support anyone in nursing homes. The HSE has been to the fore. Regardless of whether a home is public, private or voluntary, the supports are there for whoever needs them.

The roll-out of the vaccination programme to religious orders and those living in communal settings has started this week and we hope to have it finished by the end of February. I must temper that statement by saying it is dependent on supply, but that is our aim. Twenty-eight days later, people will receive their second doses. They are not being forgotten about. Now that we have the list of all of these settings, we have complete oversight of them.

**Acting Chairperson (Senator Annie Hoey):** I thank the Minister of State for her reply and engagement on this issue, which I thank Senator Mullen for raising.

### **Health Services Staff**

**Senator Jerry Buttimer:** I welcome the Minister of State. The issue of public health doctors is an important one in our community, notwithstanding Senator Mullen's remarks. There have been numerous reports recommending a restructuring of the public health medicine scheme and specialists are awaiting consultant status. The Crowe Horwath report was the most recently commissioned and was published in January 2020. It was viewed as the roadmap by which progress could be made by the Department of Health towards parity of esteem and position for public health medicine specialists.

We all agree that a highly functioning health service must be underpinned by a strong investment in and commitment to public health. Our public health doctors are a pillar of that construction. They specialise in public health and, in many cases, have large swathes of the population as their patients. They investigate the health status of their patients using a bespoke health information system, evaluate the evidence for addressing poor health status, design the requisite improved services and evaluate the efficiency and effectiveness of those health services that are targeted at particular diseases in population groups. They are an important pillar of our public health model. A strong public health function has been identified as a key component of Sláintecare as an important enabler of the reorientation of the health service.

My Commencement matter is based on the talks that are taking place between public health doctors and the Department of Health. As a former Chairman of the then Joint Committee on Health and Children, I am aware of the work and role of our public health doctors. We all agree that we need a public health medical structure that is fit for purpose, especially in post-pandemic Ireland. Given that we are committed to the implementation and funding of Sláintecare, the tackling of health inequalities must begin with our public health doctors. The progress of the talks has been slow and I am concerned about what is happening there. We all recognise that if there is to be reform of our public health system, the new consultant position for public health doctors must be given parity with their colleagues. Many reports have been commissioned, all of which have recommended a restructuring of our public health system and the awarding of consultant status to public health medicine specialists. As I have said, the Crowe Horwath report and, now, the talks are the next stepping stones.

I ask for an update on the talks and I ask that the Government commits to the parity that public health doctors deserve. I thank the Minister of State for being here. I would like to add something to Senator Mullen's contribution. What he has said is quite correct. There is a need for all of us to be very vigilant and very supportive of what he has raised as part of his report. We saw in the summer and in the first wave the fatalities and illnesses. The vaccination programme should take cognisance of what Senator Mullen has said.

**Deputy Mary Butler:** I will respond to this on behalf of the Minister for Health, Deputy Donnelly. I welcome the opportunity to address the House on this issue and I thank Senator Buttimer for raising it. I express my sincere gratitude to our public health doctors, who have been at the forefront of our response to the pandemic and have made an enormous contribution to the protection of everyone living in Ireland. The Government has already shown it is committed to investment in our public health workforce. The Minister has already committed to significant investment in public health, with the announcement of plans to double the current workforce by recruiting an additional 255 permanent staff at an annual cost of more than €17 million. This includes public health doctors, nurses, scientists and support staff. This is not only a response to the current pandemic but is an investment in the future development of our public health function. Recruitment for these posts is a priority for the HSE.

A significant body of work was already under way but the pandemic has certainly highlighted to us all that public health medicine must be reformed and strengthened such that the skills and expertise unique to public health physicians can be leveraged to ensure maximum return for the Irish health service and ultimately benefit and improve the health of the population as a whole.

The Minister has been very clear and consistent on his commitment to delivering on the recommendations that were made for public health in the Crowe Horwath report, to which the Senator referred. The report recognised the very important role that public health medicine plays in the health of our population and in how our health service is managed and delivered.

Officials from the Department, in conjunction with the HSE, have completed a substantial amount of work on a detailed framework for the future public health model, which includes consultant level roles. A process of engagement has begun between health service management and the Irish Medical Organisation. The Department of Health and the HSE met the Irish Medical Organisation on Wednesday, 27 January and on 3 February. The Department hopes this engagement will continue over the coming weeks. Engagement with the Irish Medical Organisation is ongoing and the Minister has stated it would not be appropriate for him to discuss the

specific details at this time. Just so the Senator knows, they have met twice and the appropriate levels of communication are ongoing.

**Senator Jerry Buttimer:** My information is that the talks are at an impasse and the IMO has walked out. The Crowe Horwath report stipulated that the training of a cohort of specialists in public health medicine should be at a standard recognised internationally and equivalent to other medical specialties.

I appreciate the commitment of the Minister of State. Specialists in public health medicine and medical officers of health are responsible for the health of the population and we, as a Government and a Parliament, must afford them the same contracts as those of their colleagues in hospital consultant posts, who have the same level of qualification as they do, which enables them to have the requisite authority to do their job properly. We must empower and recognise them and give them status. We must also deliver the appropriate number of staff with a range of skills and competencies in multidisciplinary teams.

Yesterday, the Minister for Public Expenditure and Reform, Deputy Michael McGrath, spoke about increasing the public sector pay bill. I hope the Minister of State will join, and I will work with her, to ensure we look after this group of people who are now so pivotal in a post-pandemic Ireland. This is about specialists in public health medicine in our communities.

**Deputy Mary Butler:** I thank the Senator again for raising this issue. As I have said already, engagement with the IMO is ongoing. I am not privy to the details but I am sure he will join me in saying that when one gets various groups around the table, communication is essential. That is the best way forward for any discussion. The only way that any solution can be found, regardless of whether it is in education, health or business, is to sit down and talk.

I reiterate that the introduction of the consultant-led public health model, as recommended in the Crowe Horwath report, is an immediate priority for the Department. Our public health specialists, as we all know, have been to the forefront of the response to the pandemic. They have given tirelessly in response to this very dangerous virus. We want to make sure we work closely with the public health doctors and put in place the best public health structures going forward. We want this to happen because we want to ensure public health medicine is an attractive career choice for anybody who is considering medicine as a career.

To conclude, it is very important that all sides get together and try to move forward because that is the only way that can happen.

**Acting Chairman (Senator Annie Hoey):** I thank the Minister of State for her reply and for being here this morning through three Commencement matters. I thank Senator Buttimer for raising this very important issue, which we have discussed at the Joint Committee on Health.

## **Cultural Objects**

**Acting Chairman (Senator Annie Hoey):** I welcome the Minister of State at the Department of Housing, Local Government and Heritage, Deputy Noonan, to the House.

**Senator Fintan Warfield:** I congratulate the Acting Chairman on her first sitting in the Chair.

This issue is the subject of a rolling or ongoing conversation in the museum sector and in the cultural space. It has often been discussed in wider society, particularly of late. I have followed these conversations as long as I have had an interest in the issue. I have raised it on a number of occasions in these Houses over the years. The Black Lives Matter movement and anti-racist protests have rightly shone a light on objects and artefacts that have imperialist origins and remain held in European museums.

I am not here to suggest that this is a simple process. It is a very complex area. As I have said before, the Government should offer resources to help institutions, and the National Museum of Ireland is not the only one, that hold artefacts which were acquired in a colonial context. The ethnographic collection held by the National Museum of Ireland consists of approximately 11,000 cultural objects and artefacts that are concrete examples of people's culture ranging from the Pacific to Asia, Africa and the Americas. A great deal of it comes from southern Africa and reflects the British colonial presence there. There is also material from the Zulu and Maori wars. Some of the material in the collection has its origin in the collection of the Royal Dublin Society, which acquired the objects following surveys of the Pacific by the *HMS Herald* in the 1850s.

It is public knowledge that the National Museum of Ireland is working to develop a strategy for dealing with objects that have a colonial past. Will the Government step up to the plate and provide the necessary resources and funding, if necessary, to help to support this work so it can be as effective as possible and so that it can be timely? Would the Government also consider developing a policy that will aid restitution and repatriation work by any institution in Ireland that holds objects with imperialist origins?

I wish to note comments made by President Higgins that I saw reported in *The Guardian* this week. He said: "A feigned amnesia around the uncomfortable aspects of our shared history [that is Britain and Ireland's shared history] will not help us to forge a better future together". He went on to say that ignoring "the shadows cast by our shared past" is part of a wider reluctance to engage with imperial legacy.

That brings me to my second point regarding Irish manuscripts and objects in Britain. Many Irish manuscripts are housed in British libraries. These institutions have looked after them very well, including digitising them for the 21st century. Many of these manuscripts ended up in British institutions due to landowners bequeathing them. The Book of Lismore was taken in a raid of Kilbrittain Castle in the 17th century. The British Library holds the largest collection of manuscripts containing Irish language material outside Ireland, with over 200 items. These manuscripts date from the 12th to the 19th centuries and cover medicine, religion, law, grammar, history and poetry and prose literature. The key question is whether the optimum cultural and educational value is derived from these manuscripts sitting in libraries in Oxford or, rather, located in centres of learning in Ireland close to the key places mentioned in them. The Book of Lismore was recently donated to the library in University College Cork, UCC, and proves the value of transferring the physical manuscript.

We must have a general Government policy on repatriation. That includes objects held in Irish museums that have a colonial past and, indeed, Irish objects abroad.

**Minister of State at the Department of Housing, Local Government and Heritage (Deputy Malcolm Noonan):** I thank Senator Warfield for raising this important issue. I wish to point out at the outset that there is a crossover between the responsibility of my Department

in terms of its oversight role in the Heritage Council, museum standards accreditation and so forth and the cultural heritage, which still falls under the remit of the Department of Media, Tourism, Arts, Culture, Sport and the Gaeltacht.

As with cultural institutions around the world, the national cultural institutions in Ireland hold books, art, archaeological objects and other items which can range from newly-created objects to objects which are thousands of years old. Irish objects naturally hold a central place in the collections but, as is common throughout the world, our national cultural institutions hold items from cultures across the globe. This has allowed Irish people, and schoolchildren in particular, to experience something from other cultures around the world. It can offer valuable insights into the past and provide an appreciation of world cultures.

Nonetheless, the question of how objects are obtained is very complex. Some of our cultural institutions are up to 150 years old. Their founding collections were built on old collections from previously-established institutions, such as the Royal Dublin Society. The objects that are hundreds or thousands of years old may have changed hands many times, and objects from other countries may have passed through many countries on their journey to Ireland. The presence of ethnographic objects in museums and the existence of ethnographic museums are both issues which have involved much soul-searching and reflection in the last several decades. They are complex matters.

Like many museums that were opened in the 19th century, the National Museum of Ireland has a legacy of collections that it would not now seek to collect. As the National Museum of Ireland, it does not seek to collect non-Irish material but instead focuses on augmenting the Irish collections in its care. The museum is open to engagement with cultural institutions globally and with other interested parties on ethnographic objects in its collection, and is working towards a position of having a full understanding of the provenance of each piece. In this regard, the museum has established a collections provenance working group, along the lines outlined by the Senator, that has been set the task of developing this strategy.

The issue of repatriation of cultural objects is increasingly a matter of concern and discussion in the museum world and wider society. I agree that Ireland and those with responsibility for the care of collections of historical value must be aware of their responsibilities as custodians to understand more fully the provenance of such collections in their care. The international museum community has done considerable work at international level to develop policies and guidelines to support nation states and those charged with the care of collections to make decisions on repatriation. Each museum and collecting institution is unique in its history, scope, governance and mission, and establishing professional standards for historical holdings is essential for the sake of accountability and consistency. Developing guidelines to support the custodians of collections requires the input of curators, provenance research experts and those who claim associations with or ownership of such collections.

In Ireland, the museums standards programme is the national accreditation programme for both publicly- and privately-operated museums and custodians of collections. The museums standards programme is run by the Heritage Council. It is a wonderful programme that supports all standards in small and large museums. To ensure continuity, consistency and accountability, the Heritage Council has agreed to establish a working group and co-ordinate with the museum community nationally and internationally, as well as with policymakers and collection owners to develop appropriate repatriation policies and best practice guidelines in line with the established professional practice in provenance research and museum practice.



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The Heritage Council will co-ordinate with officials in the Department of Tourism, Culture, Arts, Gaeltacht, Sport and Media and the Department of Housing, Local Government and Heritage, as well as the Irish Museums Association and the wider sector to lead on developing this much needed policy and best practice guidelines in cultural repatriation.

I welcome this initiative by the Heritage Council in a very sensitive area. It is a timely initiative that can build on the experience of international colleagues. I look forward to further developments in this area. I again thank Senator Warfield for bringing this important issue to the Seanad today.

**Senator Fintan Warfield:** I do not contest anything the Minister of State said. I would be delighted to know that the Government would offer any support needed by the National Museum of Ireland or any other museum to complete the work in this area in a timely manner. I do not suggest for one minute that this is a simple issue; it is a complex area. Our own Irish ethnographic material is situated in a dedicated space in the National Museum of Ireland - Country Life at Turlough Park, County Mayo. The non-European elements were quietly stored away after partition and the establishment of the Free State and therefore were never shared publicly. I would like to see them shared publicly and for it to be ascertained whether they should be returned to their places of origin.

**Deputy Malcolm Noonan:** There are structures in place now through the museums standards accreditation programme to try to oversee what both of us are aware is the very sensitive issue of repatriation. There have been precedents recently. The National Museum of Ireland permanently repatriated two tattooed Maori heads to the Te Papa museum of New Zealand. There is an ongoing programme but what is important in the issue the Senator has raised is that we have a standard and an accreditation process for our museums for the repatriation of what he rightly said are cultural items of significance to other countries and, similarly, cultural items that are of significance to this country also.

**Acting Chairperson (Senator Annie Hoey):** While we have the Minister of State, Deputy Noonan, here I might suggest a slight change to the running order as proposed by the Cathaoirleach and call Senator Fiona O'Loughlin next and then move to the matter to be dealt with by the Minister of State, Deputy Joe O'Brien. I have been in the Chair 20 seconds and the power has gone to my head. I am causing chaos and changing things up and down. Is that agreed? Agreed. Whatever will I do next?

**Senator Fiona O'Loughlin:** I am glad I am sitting in this chair and not running over to-----

**Acting Chairperson (Senator Annie Hoey):** I am causing chaos. As that has been agreed, I call Senator O'Loughlin to raise her Commencement matter.

### Natural Heritage Areas

**Deputy Fiona O'Loughlin:** I thank the Acting Chairperson and I thank the Minister of State, Deputy Noonan, for being here to discuss the Curragh of Kildare, which is a unique and special place, both to those of us from Kildare who live close to the Curragh and people throughout the country. Many people pass it on a daily and a weekly basis and have the opportunity to see our lovely lands.



The Curragh needs very little introduction because it is very much part of our Irish psyche and is featured prominently in our history and culture. There are many aspects to the Curragh, including its distinct ecological habitat with the flora and the fauna. I have been privileged to go on many walks around the Curragh with experts such as Gay Brabazon and Karen Tyrell, who taught me a great deal about what I need to value in my own area. There is a very strong military history. We have a wonderful museum thanks to Mario Corrigan and James Durney. I invite the Minister of State and anybody who is interested to come and see it when the Covid-19 pandemic is over. Of course there is the connection with St. Brigid, which I spoke about in the House last week, and there is a very important equestrian element in the area, with the Curragh racecourse and all the trainers and breeders located close to the Curragh. We should not forget about the sheep or the film “Braveheart”, which was filmed there.

There are two aspects of the Curragh I will mention. One relates to the Department. Currently, we have a proposed natural heritage area for habitat and species. The site code is 000392. It is very important so when will we have the news that this will be announced as a natural heritage area? The Curragh is such an important site that we really should be aiming to having UNESCO protection for it. This is just one step we need to take. At present, the Curragh does not have the adequate or appropriate protection that it needs.

The other question relates to the management of the Curragh. There is quite a large movement of people around the Curragh at any given time with the equestrian, military and the very well-known golf club activities, as well as the movement of sheep. The Curragh has been a boon during Covid-19. It is wonderful to see so many people out enjoying the Curragh and its environs. However, this raises again issues that have always been there. There is no adequate parking, for example. Currently, there are problems arising from where cars are being parked and grass needs to be reseeded. There should be appropriate parking and signage in a discrete way. There is so much to learn about the Curragh.

I introduced a Curragh of Kildare Bill when I was in the Dáil relating to illegal encampment and dumping. The problem is that currently there are two caravans and one tent there. We are going from the military management to Kildare County Council to the Garda and each of them is passing the buck. We absolutely need to have strong management, which is not happening. We cannot have illegal encampments and illegal disposal of waste on the Curragh. I look forward to the Minister of State’s response.

**Deputy Malcolm Noonan:** I thank the Senator for raising this matter. To highlight my Curragh credentials, my mother is a Newbridge woman and she met my dad, who served in the Defence Forces for 37 years, at a dance in Suncroft many moons ago. I have a great affinity for the Curragh.

I will respond to the matter of the natural heritage area first. My Department has no role in the designation of national historic park sites, which are managed by the Office of Public Works, OPW. Any queries in respect to such a designation should be pursued with OPW. However, through its National Parks and Wildlife Service, NPWS, my Department is responsible for natural heritage and designating a range of protected areas relating to conservation of habitats and species. The NPWS manages an extensive conservation and recreational property portfolio of some 87,000 ha, which includes six national parks. Our six existing national parks account for circa 65,000 ha, with another almost 22,000 ha of nature reserves and other heritage sites. The issue of the use of those parks during the Covid-19 pandemic has been mentioned and it is significant.

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The existing national parks are managed from a conservation perspective while also providing a public amenity, and they attract in excess of 4 million visitors annually. Given the resources available for capital investment within our national parks and nature reserves, I am mindful of the need to focus on the core responsibilities relating to the management of the existing parks and reserves lands and have no plans at present to increase the number of national parks in the country. However, as part of my Department's continuing commitment and contribution to protecting our heritage and improving our tourism and recreation product, we have been exploring ways to optimise the sustainable potential of heritage sites under our control in a way that is compatible with conservation objectives.

My Department, in conjunction with Fáilte Ireland, launched a strategic partnership in 2017 with a view to increasing tourism revenues in the rural areas in which the parks are located and increasing Ireland's appeal as a recreation destination. One of the outputs from the partnership was "Experiencing the Wild Heart of Ireland", an interpretative masterplan for the development of our national parks and reserves, which sets out a roadmap for investment at these important nature conservation, public amenity and tourism sites and underpins the objectives of Project 2040.

The ongoing investment in our national parks will create memorable and meaningful experiences of Ireland's natural heritage. This will be done through sensitive design and the development of authentic experiences, providing better access to nature and increased understanding of society's conservation responsibilities, as well as supporting significant investment in recreation facilities, including the upgrade and development of the trails network, increasing visitor facilities and improving signage and branding. These will be designed and delivered with strong emphasis on conservation, and will allow us to protect and preserve our most fragile environments.

The basic designation for wildlife under Irish legislation is the natural heritage area, NHA. These areas are considered important for the habitats present or for species of plants or animals whose habitat needs protection. There are currently 148 sites with NHA status - 75 raised bogs covering 23,000 ha, and a further 73 blanket bogs covering 37,000 ha. In addition, there are over 600 proposed NHAs, which were published on a non-statutory basis in 1995.

The Curragh was one of the original proposed NHAs and has fine examples of heathland and grassland habitats. It contains notable species of plant and fungi which depend on low-nutrient grassland, and are thus becoming increasingly rare. I understand the Geological Survey of Ireland also considers the Curragh as one of the best examples of a landscape produced by the retreating ice sheets at the end of the Ice Age.

I wish to note the points made in respect of the Curragh military camp. I have written to the Minister for Defence and the Chief of Staff of the Defence Forces, Mark Mellett, regarding a conservation plan for the Curragh military camp. I do believe that it is a complex of important built conservation and heritage significance.

**Senator Fiona O'Loughlin:** I am glad to hear that there is a little bit of lily white in the Minister of State. I look forward to bringing him down and giving him a full tour of the Curragh when the Covid pandemic is over. I had thought that the Minister of State with responsibility for the OPW would be here today, but I accept that this matter crosses over between the Minister of State's Department, the OPW and the Department of Defence. It is disappointing that the Curragh is not being considered at this point for NHA designation. Given the fact that

there are over 600 proposed NHAs, surely there should be a graduated process in respect of those that are more significant than others. I ask the Minister of State to look into that. There must be a qualitative vision in place for the future of the Curragh, yet there is not. The Curragh must be given appropriate adequate protection. This is not happening currently.

The current management of the site is of huge concern to me. As I mentioned, it is absolutely falling down. There are many problems. There is an opportunity here to really look at the Curragh and see how we can protect and preserve our natural and built heritage, as the Minister of State said, and also to ensure that it is there for people to use, both as a place of historical interest and also as a leisure and amenity facility. I note what the Minister of State said regarding the county development plan, which has just commenced. An issues paper has been drafted. I will certainly ensure that adequate recognition is given to it during that process.

**Deputy Malcolm Noonan:** I thank the Senator for raising this important matter. I am happy to work with the Senator and Kildare County Council to try and pursue our common set of objectives. The development plan process is a most important one. I have spoken to the heritage officer in Kildare County Council about this matter. While the Curragh has not progressed to legal designation, there is a proposed review of NHA networks. Within that, we could find some common ground, if one excuses the pun, in trying to pursue an objective that takes in the complex needs of the Curragh, given the interrelated elements of the usage of what, in my view, is a nationally important site. I thank the Senator for raising this issue. Our Department will be happy to work with all partners to try and pursue a broad vision statement for the Curragh Camp.

### **Disability Activation Projects**

**Senator Garret Ahearn:** I thank the Minister of State, Deputy Joe O'Brien, for being here. I thank him, his Department and the Minister, Deputy Humphreys, for their engagement on this important issue. I know that the Minister met with groups involved in this programme in January to find a solution to this matter and that one is close to being arrived at. I thank them for the work they have put into this.

The Ability programme provides funding to 27 local regional and national projects that focus on bringing young people with disabilities between the ages of 15 and 29 closer to the labour market. The programme targets young people who are not currently work-ready by using a range of person-centred supports. This type of work assists young people to identify and follow progression routes based on their potential and their needs. As a result, the programme promotes positive pathways into education, training and employment for participants. The need for the programme is borne out by the 1,900 plus young people currently on their individual journey to further education, training and employment. There is a constant flow of young people with disabilities entering the pre-activation stage, a stage which is critical in ensuring access to mainstream services in the longer term. The in-person actions and supports that participants require in value are severely curtailed in light of the ongoing restrictions of Covid-19. Those successfully transitioning along a pathway towards employment before the pandemic will need continued ongoing support to realise their full potential after it.

The Ability programme is due to end on 1 July 2021. The 1,900 plus young people who registered and engaged across the 27 projects require ongoing support to continue their journey through education and training towards employment if they are to realise their full potential.

For this support to continue, an emergency interim solution needs approval to ensure these young people avoid early school leaving and unemployment. To ensure equality for people with disabilities in assessing education, training and employment opportunities, a temporary interim solution on the grounds of reasonable accommodation should be introduced. This would consist of an 18-month ability transition period, similar to the extensions made to other labour market activation programmes such as Tús, community employment and community services programme in light of the current pandemic. The proposed ability transition period would allow Departments to review the quality matters evaluation. It would provide an interim solution that would facilitate participants across to supports between the Ability pilot and the Ability mainstream solution in the future, accordingly, preventing a stop-deactivation-reactivation approach. Equally, it would allow 27 projects to avail of the original 36-month timeframe as per the European Social Fund guidelines and grant agreements.

The programme for Government states that a new social contract will provide greater security for individuals and communities. It will be founded on the principle of equality and ensuring that every citizen can achieve his or her full potential. It will fine-tune and expand targeted employment schemes, such as the wage subsidy scheme and the Ability programme, to help more people with disabilities stay in the workforce. All other support programmes have been extended with reviews postponed except for the Ability programme.

People with disabilities are entitled, as part of their core human rights, to have access to appropriate education, training and employment pathways. Implementing a short-term transition period to facilitate the gap between the pilot programme and the future mainstream programme is the only way to ensure inclusion and equality for people with disabilities as a fundamental basic right. Not much money is involved. A request for €8 million has been made to keep the programme going over the next 18 months. I appreciate that the Department is working on this matter with those involved.

**Minister of State at the Department of Social Protection (Deputy Joe O'Brien):** I thank Senator Ahearn for raising this important issue.

The Ability programme was introduced in June 2018 as pre-activation programme for young people with disabilities. Funding for this programme amounts to €16 million over a three-year period and it is being provided jointly under the European Social Fund employability inclusion and learning operational programme and the Exchequer with funding from the Dormant Accounts Fund, which falls under the remit of the Departments of Social Protection and Rural and Community Development.

The aim of the Ability programme is to bring young people with disabilities who are not work-ready closer to the employment market. The programme supports over 2,600 young people with disabilities aged between 15 to 29 years of age. It is being delivered by 27 community and voluntary groups from all around the country, including three in Tipperary, some in Connemara and Fingal LEADER Partnership in my area.

Pobal has been contracted by my Department to manage the Ability programme. It was a condition of the current three-year funding arrangement that the programme would end at the end of June 2021. An ongoing evaluation of the programme is being undertaken. It will explore the effectiveness of the different approaches and actions applied in bringing young people with disabilities who are not work ready closer to the labour market, in addition to examining impacts on the participants. The evaluation is to be conducted over the duration of the pro-

gramme, and it will conclude in June 2021. An interim evaluation report has been submitted to the Department. This evaluation will feed into future programmes in this area.

The Minister has taken a strong interest in this issue. In mid-January, she met a delegation of Ability providers to hear their concerns. She is very conscious that Ability providers are looking for some certainty with regard to the year ahead and reassurances regarding the Department's wider commitment to advance pre-employment supports for young people with disabilities so they will have the opportunities they need to progress into employment. Following on from the meeting in January, the Minister asked officials in the Department to examine this matter and revert to her with proposals. I am pleased to advise Senator Ahearn that, just this morning, the Minister and the Minister of State, Deputy Rabbitte, had a follow-up meeting with the Ability providers' subgroup. It was a very useful and informative exchange. Everybody on the call this morning was in agreement on the need to maximise a number of supports that will contribute to the development of these young people, their future economic independence, their standard of living and overall well-being.

The positive news is that we have found a way forward so that the good work being carried out by Ability projects across the country can continue. There will be a multi-faceted approach to this that will involve an extension of the current programme together with further short-term funding for Ability projects to allow them to continue. The Minister will be announcing full details in due course. The subgroup we met this morning supports this approach, which provides options for meeting the needs of participants in the Ability programme, and also progressing the various pre-employment supports for young people with disabilities so that they will have the opportunities they need to transition into employment.

I can give the Senator a little more detail. The approach we intend to pursue now includes a combination of an extension of the current programme to the end of August, an application process that is to open in April and that will allow successful applicants to continue uninterrupted from August into September and beyond as part of a new programme.

**Senator Garret Ahearn:** I had a list of points to make to keep pushing for a solution. The Minister of State announcing one this morning is really momentous. On behalf of the many people whom I know are watching online, I thank him and the Minister. As the Minister of State said, there are three organisations in Tipperary, including St. Cronans Association, Nenagh, where Mr. Paul Farrell is running the show, and Youth Work Ireland Tipperary, where Mr. Donal Kelly is working very hard. I know at first hand Knockanrawley Resource Centre, under Ms Emer Leahy, who does phenomenal work in Tipperary town. I have been at the centre numerous times and have noted the immense work done and its impact. It is phenomenal for the groups to get reassurance today that €8 million will be sourced to keep the services going for 18 months until the next EU round of funding. It also reassures 180 service users and their families in Tipperary and the 1,900 others across the country. On behalf of everyone, I thank the Minister of State and the Minister for their commitment and the understanding they have shown. It means an awful lot to different groups.

**Deputy Joe O'Brien:** I thank the Senator again for raising the issue. As Minister of State with responsibility for the Roadmap for Social Inclusion 2020-2025, I am very committed to improving and extending supports to help more people with disabilities to enter employment and stay in the workforce. The work the providers have done in the context of the Ability programme has been innovative and has made a difference in the lives of the young people who have participated. We listened carefully to the Ability representatives last month and this morn-



ing when they described the experiences of the young participants and the positive impact of the programme on their lives. This is particularly relevant to my remit. I have oversight of the social inclusion and community activation programme nationally having regard to what we can do with the Ability programme in the long term but also with regard to the community employment schemes' aim to act as a bridge to the labour market.

Our planned approach entails a combination of measures. There is to be an extension of the current programme until the end of August. An application process opening in April of this year will allow successful applicants to continue uninterrupted from August into September and beyond as part of a new programme.

*Sitting suspended at 11.47 a.m. and resumed at 12 noon.*

### **An tOrd Gnó - Order of Business**

**Senator Regina Doherty:** The Order of Business is No. 1, statements on mental health and Covid-19, to be taken at 1.30 p.m. and to conclude at 4.30 p.m., with the contributions of group spokespersons not to exceed seven minutes, those of all other Senators not to exceed four minutes, and the Minister to be given not less than five minutes to reply to the debate. Business will be interrupted at 3 p.m. for 15 minutes for sanitisation of the Chamber.

**Senator Fiona O'Loughlin:** I thank the Cathaoirleach and the Leader. I have to start today's proceedings by talking about education and some of the statistics that have emerged. When we see that calls to Childline went up by 26% during this lockdown, there are 20% fewer referrals to our social workers, and top paediatricians are saying children are at risk of suffering in terms of physical health and lack of socialisation, we have to have a pathway back to reopening schools. That has to be a priority and we should send a strong message. I think we were all devastated when we heard the news last night that the Association of Secondary Teachers in Ireland, ASTI, walked out of talks with the Minister for Education, Deputy Foley, and her officials. We were all glad when we heard last week there would be a two-track approach to the leaving certificate. It is something that many Senators called for and sought, and it was absolutely the correct decision. It is appalling that the ASTI walked out of talks that aimed to find a solution for young people who are due to sit State exams this year. The union is certainly not thinking about them or their mental health or about supporting them. I urge it to get back in and to continue those conversations.

There was good news in my constituency this week, with the southern distributor road having reached a new milestone after the Minister for Transport, Deputy Eamon Ryan, signed the documentation for the advanced tender. Nevertheless, I make an appeal through the Leader in regard to other vital infrastructure that is needed, namely, a second bridge for Newbridge. Newbridge is a busy, vital town, but there is only one bridge to bring us into or out of it. On that bridge, there are three busy secondary schools and three busy primary schools, and in normal times, it is not unusual for people to be blocked for 30 minutes in traffic. We need a second bridge to support residents and business. An application has been submitted under the urban regeneration and development fund, URDF, and it is vital that funding be delivered. I would appreciate if the Leader could bring that to the attention of the Minister.



My final point relates to eating disorders. Next week is national eating disorders awareness week. According to research carried out, there was a 66% increase in 2020 in the number of hospital admissions relating to eating disorders, compared with the previous year. There are only eight beds in the country that specialise in and deal with eating disorders. We have to do something and to be better at supporting those who need help.

**Senator Victor Boyhan:** I thank the Leader for setting out the Order of Business. I want to talk on behalf of the Irish Nurses and Midwives Organisation, INMO, the nurses' union, and the great work it does. Nurses and midwives are doing an amazing job on the front line in saving the lives of our loved ones in the context of Covid. It is a tragedy. They are physically exhausted. I do not know whether Senators had the opportunity to watch the "RTÉ Investigates" programme earlier this week. We saw nurses say they could not take a break even to go to the toilet because they would have to take off all their protective clothing. Some of them go many hours without food or water to stay on the job, saving the lives of our people. They are our heroes. That is true for doctors but also for front-line health workers such as orderlies, porters, cooks and security people - everyone who makes a hospital community tick.

Justine McCarthy wrote a very moving piece in last week's edition of *The Sunday Times*, in which she stated: "The emotional and psychological toll of caring for very sick patients isolated from their loved ones - sometimes holding a patient's hand until they take their final breath - is immeasurable." That sums it up. It is so sad and so tragic. The INMO has lodged a compensatory request with the Government. In its most recent statement, published on 9 February 2021, the union stated it was still waiting for a response from the Department of Health to that request. Despite great personal risk to themselves and their families - given that they too take personal risks - in going out and caring for our loved ones, healthcare workers do incredible work on the battlefield of holding back, stemming and keeping some control on Covid. We as a nation owe them an enormous debt of gratitude for their work and service.

The article goes on to argue that we cannot offer mere words of thanks and gratitude; we have to demonstrate our commitment. This is an important time for calm heads, and I do not want to be winding up issues in the Chamber or expressing the old political rhetoric. We all share a common concern in this House and the other. How can we in some way recognise the very significant work that these nurses are doing? In Northern Ireland and Britain, including Scotland, there is a sort of bonus scheme, although I am not sure that is what nurses are seeking. They are seeking financial recognition. Remember, a high percentage of people in the nursing profession are women who have childcare commitments. Schools are closed. Who is paying for these childcare services for them? That is another burden and stress they do not need at this time. I would welcome a debate, when it is appropriate. We should work together across these Houses to see if we can, in some practical and measurable way, compensate and support these nurses on the front line who look after and care for our loved ones in our amazing health services.

**Senator Annie Hoey:** I will bounce through a number of issues today as quickly as I can. The first is about students travelling for practical laboratories. A number of students have contacted me because they are concerned about bringing Covid-19 into their homes. On-campus laboratories are still mandatory for students completing courses with a practical element, which has left students throughout the country who are back in their family homes or in counties other than their place of study left in the position of having either to travel on lengthy public transport journeys or take lifts with family and friends. I spoke to a man who drives his daughter from Sligo to Limerick because he does not want her going on public transport.

Many are concerned that while they may take every precaution possible at an individual level, they will be at a higher risk of contracting Covid-19 while on campus and bringing it home to their family or rented accommodation. Many who have contacted me have asked why they cannot have their laboratories grouped together towards the end of the year, in a few months, when it is hoped there will be lower rates of infection. This is causing an awful lot of stress for these students and their families.

Another matter that has been brought my attention by students and their parents is the ongoing issue of having to pay large fees for student accommodation on campus which they cannot then access because they have been instructed to stay at home. Many people have prepaid for this year or this semester. I know that while the private companies that run these accommodation facilities are not to blame for the ongoing lockdown, many are benefiting quite handsomely from students who have prepaid for accommodation they cannot now access. I ask that the Minister would do all he can to compel these companies, through the colleges if needs be, to give students and their families a break on their fees next year for accommodation services. This has been an incredibly tough year for students and the families who help them to cover the costs. They are being asked to pay for services they simply cannot access. This really is not fair.

The last issue I wish to raise is around transgender healthcare and transgender children. I do not know if Senators saw the noteworthy article yesterday in *thejournal.ie*. Transgender children are being referred to transgender healthcare that simply does not exist. The gender identity adolescent service that was situated in Crumlin children's hospital is no longer receiving further referrals, according to the Transgender Equality Network of Ireland, TENI. A long-awaited report came out in December and one of the recommendations was that psychological supports for those under 18 should be provided and delivered by the Irish health service rather than in the UK, as was previously the situation. This has come about because of the failure of the HSE to develop and implement a proper multidisciplinary team to support the provision of care for young transgender people in Ireland. It is concerning now that young transgender people will be referred to a service that simply will not exist for a number of years, which means they will eventually end up transitioning into the adult service. As we know, that adult service is also woefully lacking, with many transgender people having to travel abroad to access the care they need. I ask the Leader to raise this with the Minister.

**Senator Vincent P. Martin:** Many people in the democratic free world were deeply concerned and appalled by the grab for power - the military coup - that took place in Myanmar on 1 February last. That Government was elected last November by a landslide, but even if had been only by one vote, that is the true test of democracy. The voices of everyone in the democratic free world not only must be heard but must be heard in an effective way.

I welcome that the vice president of the European Parliament, Ms Heidi Hautala of the Green League, has called for effective widespread sanctions. The decision by President Biden to freeze €1 billion in assets of the coup leaders in America is also a step in the right direction, as is the Minister, Deputy Coveney's, call for our partners on the Security Council, now that we are on it, to do all in our power to not tolerate this affront to democracy. More should and can be done through a coherent and concerted effort from all right-thinking people in the democratic free world to say "No" to this. A democratically elected government is not displaced and removed overnight.

I welcome yesterday's announcement by the National Transport Authority that it will allo-

cate €240 million to city and county councils throughout Ireland for proper and better cycling and walking facilities. This includes €3.7 million for the Royal Canal greenway in my native Kildare and €460,000 for the Sallins village traffic management and cycle scheme. Overall, nearly €8 million has been announced for County Kildare alone. This is a positive step and a new beginning. Throughout Ireland, it will help to provide safer, better and more routes for school commuters and better choices for leisure and cycling usage on these proposed routes.

Yesterday's announcement of the new outdoor public space scheme grant aid is welcome. This will create public spaces for arts, culture and innovative artistic performance all year round. There is a growing appreciation of the value of communal spaces. In my county of Kildare, one must only look at the huge success of the Market Square in Kildare town. It is a victim of its own success because it has been oversubscribed at times during the pandemic due to its popularity. I also mention the car-free days on the canal bank walkway in Naas. Up to 10,000 pedestrians take to that beautiful walk on such days. This is the future. As a county councillor, in September 2019, I tabled a proposal which was supported by all councillors, for an artistic centre in Naas. As happens elsewhere in Ireland, this injects reality into such moves and this can happen. Bandstands and artistic centres can be provided throughout Ireland with up to €250,000 in funding for each local authority and that is up and running from today. I hope people go for it and seize this opportunity.

**Senator Fintan Warfield:** Today's Order Paper contains a Sinn Féin motion, No. 11 in non-Government motions, that seeks to end the nightmare that is facing renters across the State. Many thought the pandemic would ease the dysfunctional private rental sector but it has not done so. We should all focus on ending that crisis and making life that bit easier for hard-working renters who are finding it difficult at this time.

The number of inspections of rental properties carried out by local authorities needs to be increased and we have legislation ready that will ban the advertising of unfit properties. The previous Seanad debated that legislation. The motion also sets out the data and the facts presented by various housing organisations and charities, from sky-high rents in all our cities and towns, to substandard rental accommodation and the slow pace of building affordable cost-rental accommodation. We need to place a figure on what affordable rent is. We are all going around talking about what affordable rent is but as of yet, that has not been defined. It is remarkable that we do not have a figure on that to give people hope that their salaries would earn them decent and safe housing and a good quality of life. We keep hearing from the Government about various laws around housing. Will they make a material difference to the lives of people struggling to make ends meet? We need legislation that addresses how people leave the market and what situation that leaves renters in. I look forward to that debate. That motion is on the Order Paper and I invite the Government parties to study it and act upon it.

**Senator Jerry Buttimer:** The topic that is on many people's lips this morning is the decision of the ASTI to withdraw from talks on the leaving certificate, which Senator O'Loughlin raised earlier. As a former teacher, I understand where ASTI is coming from regarding calculated grades. We need perspective in this debate but, as Senator O'Loughlin said, to walk out of talks is wrong. I would appeal to the ASTI to come back into talks because the students, teachers and parents of Ireland all deserve certainty and an end to the dialling up of the rhetoric.

Calculated grades are fine in theory. Many commentators who know everything are this morning pontificating about education on the airwaves and in print. Last year we had pre-examinations, Christmas examinations and summer examinations from the year before. This

year all we have are the Christmas examinations just gone. I would appeal to the ASTI to come back into talks. The present situation is unfair to everybody. I would appeal to the Minister for Education to come and address Seanad Éireann. Let us have talks and let us do so in a manner that is respectful of all sides.

I ask that the Leader would invite the Minister of State with responsibility for sport, Deputy Chambers, to come to the House to discuss the rationale and reasoning behind the decision regarding the GAA and its operation at level 5. I have a view, which is probably a minority view, that we should allow young people back playing sport and training in pods of 15. There are young people all over the country today who are frustrated, bored and dying to play a bit of sport. We have playgrounds open under level 5. We have GAA fields, soccer fields and rugby fields, the best in the country, funded in many cases by voluntary donations and by the State. I ask for perspective and that we would allow our younger people to be able to have some bit of optimism and hope by letting them train in pods of 15.

**Senator Rónán Mullen:** Following on from what Senators Buttimer and O'Loughlin have said, it is important that people dial down the rhetoric and get down to negotiation. I wonder whether the common good is being served by the kind of debate that we are having about the leaving certificate, calculated grades and-or a combination of both. What strikes me listening to the media discussion of this issue is that it is doing nothing to help the situation. National unity is what is required right now. We are in a crisis situation and the real focus of the country should be on keeping people safe and well, and getting the vaccine to people as quickly as possible. The panic ridden discussion about the leaving certificate, the controversy generated by people saying they are pulling out of talks and people clamouring to have their particular point of view on this issue heard is not only pointless, but harmful. What is needed now is a recognition that there is no perfect answer to this problem, there is no possibility of absolute certainty and seeking the perfect is the enemy of the good at this time. I would like to see a private discussion and negotiation where the different parties - students, teachers and parents - are all heard. In the end, it has to be a consultation, and decisions have to be made that will not please everybody 100%.

When I hear the student voice, I am glad that we now listen to the student voice in these discussions but we have to acknowledge the paradox as well. We rightly listen to the student voice in a way we did not do a generation ago but at the same time in the background there is the realisation that if we announce that there will be no leaving certificate there is the risk that students will down tools. It is time that we acknowledge that and give leadership to the younger generation.

I would say talking to people on the airwaves about how stressed they must feel by all of this is doing nothing to help them to be resilient at this time. There is a bigger picture and we need to reach for it.

**Senator Shane Cassells:** I wish to raise the issue of the forthcoming legislation regarding the gambling industry and pay tribute to my colleague, the Minister of State, Deputy James Browne, who is preparing to tackle this issue. The speed at which gambling addiction has risen in this country is frightening. Some years ago there was a move to put a casino in Tipperary and they thought the place would be turned into Las Vegas. Now every teenager and, indeed, adult, is walking around with a casino in his or her pocket. Worse, that device is the greatest weapon that gambling firms have for targeting their addicts. Through the work of their social media teams, they have hooked people with targeted ads and fed their addiction.

The specific issue I am raising pertains to the legislation on the advertising of these insidious products in the gambling world. One cannot turn on a sports bulletin on Sky Sports without it being sponsored by a casino. My nine-year-old who wants to watch the sports news sees that, as does every other child. The sports pages in our newspapers have banner ads for casino firms and social media is a free for all.

I welcome the move by the Minister of State, who will next month start the process of appointing a much-needed gambling regulator. What is also needed is for all of our sporting bodies, regardless of the forthcoming legislation, to lead the charge and reject the lure of these firms' cash. I know doing so would be hard, especially in these times, but it is a little like the situation with tobacco companies previously. Yesterday, I spoke to the chief executive of Basketball Ireland, Mr. Bernard O'Byrne, a man who has become well versed over the decades in the sporting bodies of this country. He is calling on his counterparts in all sporting bodies to lead the way on curbing the proliferation of sports betting advertising among those bodies. It is targeting the bodies' membership. It might be enriching some sports bodies, but it is ruining the lives of their members and future generations because the firms know that that is where their target market is.

I welcome the legislation that the Minister of State will be introducing, but we must do more to reject these firms, which are turning our young people into addicts.

**Senator Martin Conway:** During the pandemic, we have seen the important role that local media has played in keeping communities connected and giving them valuable, useful and correct information, and none more so than local newspapers throughout the country. It is appropriate that the Government would provide financial assistance to help local newspapers during this difficult time for them. However, that requires a responsibility of local newspaper to treat their journalists and other staff appropriately. It has come to my attention that Iconic Newspapers, which owns more than 25 local newspapers, has shredded its editorial workforce and reduced the hours and working conditions of many editorial staff, photographers, journalists and so on. If we are giving support to local newspapers, they have a responsibility to retain their staff. That is the core principle of the support that is being given to them. I call on Iconic Newspapers, which owns the *Limerick Leader*, the *Tipperary Star* and so on in my area, to reverse its cuts immediately and engage properly and meaningfully with the National Union of Journalists, NUJ, which is the body by which journalists must be accredited to attend Government press conferences and so on. It is appropriate that Iconic Newspapers do so.

The HSE urgently needs to provide clarity regarding the mopping up process in nursing homes. Sadly, when vaccination was under way in many nursing homes, some patients and residents had Covid and were not in a position to access a vaccine. There is a 28-day period in which a patient must be Covid-free before receiving a vaccine injection, but there is no clarity in this situation. We are dealing with elderly people. They, their families and their nursing homes are worried. I call on the Leader to seek clarity on the mopping up process and protocols.

**Senator Mark Wall:** I plead with the Association of Secondary Teachers in Ireland, ASTI, to return to the table. I can only use my experience, which is that the best place to discuss any issue is at the table. I echo the calls in the Chamber for the ASTI to return to the discussions. I will use my experience as the parent of a leaving certificate student and as a public representative. The mental stress on these young people was increased last night. The announcements are not helping, no matter what anyone says. When a leaving certificate house hears such news, the effect is unbelievable. We are listening to every announcement. This has to stop. The only



place for a discussion on the leaving certificate is around the table. I encourage the ASTI to go back into discussions immediately.

I welcome the €240 million funding announced for sustainable projects yesterday by the Minister, Deputy Eamon Ryan, and the NTA. I also welcome the €7.7 million announced for my county. However, it would be remiss of me not to question the obvious disregard between the electoral areas of Kildare North and Kildare South. It is great to see the money being invested in towns and linking the villages of north Kildare. Unfortunately, almost 80% of the funding allocated to my county is targeted at north Kildare. We have many fine towns and villages in south Kildare but I want to mention one, which is Newbridge. Newbridge is the largest town in Kildare. Recent figures tell us it is the 15th largest town in Ireland. I suggest that any stimulus package to increase sustainable transport, including walking and cycling, must include the biggest town in the county. Without such investment, the residents of Newbridge are being left behind. I have met the NTA to discuss the issues surrounding commuters in the town and rail commuters in particular. We presented the NTA with a petition of 7,000 signatures, whose main concern surrounded the cost of fares, overcrowding and facilities. I ask the Leader to invite the Minister for Transport to come before the House to discuss the future transport needs of our towns. We cannot allow the town of Newbridge to grow as it has without looking at the transport links needed for it and to ensure this town in south Kildare gets the funding to ensure transport is sustainable.

**Senator Mary Fitzpatrick:** I thank the Minister and the Government for the €18 million in funding provided for central Dublin to improve walking and cycling infrastructure. More than ten years ago, when I was first elected as a city councillor, I looked for a greenway on the Royal Canal and I am really glad to see it has progressed. With this funding we will be able to have a high-quality greenway all the way from the docklands through Ballybough, North Strand, Phibsborough, up through Cabra and all the way to Ashtown. It is very welcome. Money has also been included for the Liffey cycle route and other routes and improvements at Broadstone plaza, Glasnevin and Fairview.

There has been a lot of talk today about Covid. I concur with Senator Buttimer's request that when we move to the next stage of the living with Covid plan the Government protects those who are most vulnerable and also prioritises our young people. Young people are really struggling mentally and physically in the pandemic. The issue of them being put back into classrooms, where they will be eight hours a day with a mask on their face, yet they cannot train outdoors in pods of five or 15 has to be looked at. I urge the Leader to urge the Government to do this.

It is hugely stressful for 2021 leaving certificate students to hear the debate being conducted over the airwaves. It sets a very poor example to them when adults have talks about having talks or have talks and withdraw from them. Teachers are working very hard. Parents are working very hard. For anybody to suggest they would down tools because there would be no leaving certificate is deeply insensitive and deeply disconnected from these young people. This is their future. There is nothing more important to them than to be able to progress from secondary school and move on with their lives. They are being frightened out of their lives with thoughts of extra points for the CAO and an extra 2,000 CAO applications. Still today, having lost five months of classroom learning from their senior cycle, they have no certainty. I urge the Leader to urge all of the partners to return to the talks and give these students certainty and choice.

**Senator Joe O'Reilly:** A few weeks ago, I asked the Leader in the Chamber whether she



had a date for the introduction of the gambling control Bill. She honestly said then that she did not. I want to ask now whether there has been progress. I formally request that in the interim, before the Leader brings the Bill to the House, we have statements on gambling as a priority. I want to elaborate on this. A gambling addiction ruins more than one life. People chase losses with more gambling. They suffer mood swings and depression. It leads to dishonest behaviour in people who are otherwise honest, as well as to secretive and evasive behaviour. In a Covid context, online gambling has increased. The Paddy Power organisation has officially said that 77% of its profits come from online gambling. As much as €10,000 per minute is spent in this fashion in this country. I ask the Leader to arrange for a debate. I ask her to please bear in mind the awful statistic that, as we speak, 29,000 people in this country suffer from gambling addiction. That is the minimum figure that has been established by an interparliamentary group.

We should do the following quickly: impose a cap on each bet of €100; display statistics that show the problems like the warnings against smoking cigarettes; if a customer is very high on the list of high spending then he or she should be referred to addiction services; the numbers for addiction services should be displayed; only debit cards should be used; weekly spend should be monitored; and there should be a social fund. These are steps I would commend. I support the views expressed by Senator Cassells who raised the issue of gambling. I have spoken about gambling before and I will raise it again because we cannot give up on this issue. All I would say is that we are talking of tortured people. We all know them in our communities and among our friends. A gambling addiction has had devastating effects on families and children. I support everything that was said about the leaving certificate examination but what is happening to 29,000 people and their families is horrendous. Gambling needs addressing with a most radical plan, including in the advertising area that was identified by Senator Cassells.

**Senator Lynn Boylan:** I would like to raise the distressing news that the delay in the Stardust inquest commencing is due to the Department of Justice and its stonewalling of the legal teams representing the families and the release of funds. We were given repeated commitments by the Minister for Justice and by the Taoiseach, when he announced the budget last year, that there would be sufficient funding put in place for the inquest. This is the largest inquest in the history of the State. This weekend is the 40th anniversary of the horrific fire that took the lives of 48 young people. Every year, the number of relatives at the anniversary decreases because they are dying, unfortunately. The relatives are getting old and deserve answers.

I ask that the Leader writes to the Minister for Justice and requests that she immediately meets with the legal team representing the families to resolve the issue of funding. The Department was warned by the legal team that the legal aid route would not be the appropriate route to go down and that a special arrangement was needed, as was the case with the Hillsborough inquest, in order for the inquest of this scale to proceed. That warning was ignored by the Department of Justice. It has ignored all of the letters and is now refusing to release the funds to allow the inquest to proceed. I beg the Leader to please take this message back to the Department of Justice as these families need answers and for the inquest to start immediately.

**Senator Pat Casey:** Last week I received an email from Ruby Lily Doyle, aged ten, from Avoca. Like many of us, Ruby Lily and her family have taken to walking the beautiful village of Avoca in Wicklow, which is known to people as “Ballykissangel” from the television series. In her email she states that what has horrified her has been the level of dog fouling that has taken place on the walks. In fairness to her, she has now started her own local campaign in Avoca called Clean It Up and she has a lovely little poster that she goes around Avoca with. She has also written to the local authority to ask it to raise awareness about dog fouling. We are all

aware of the issue and I am not too sure which is the greater offence. Is it the dog fouling or the people who make an attempt to pick up the dog fouling, put it into a plastic bag, tie it to a tree or nestle it neatly between the roots of a tree on the ground and leave it there? What is more, and I shall be graphic, people put it into a plastic bag, throw it in a hedge and then a Tidy Towns' worker, private resident or council worker comes along in a few months' time with a strimmer to strim the grass and bursts open the plastic bag.

Ruby Lily has asked that we conduct an awareness campaign. Each local authority has had an awareness campaign, tried to erect signs and provided litter bins. Yesterday, there was an announcement of millions of euro for walking and cycling routes. I believe we must invest in a national public campaign on dog fouling and support this campaign to make these walks more enjoyable and safer for everybody and, indeed, for the volunteers and council workers who are maintaining these routes. Perhaps the Leader would convey to the appropriate Department that we should spend some money on a national campaign of awareness about the impact dog fouling is having on the environment.

**An Cathaoirleach:** I commend Ruby on her act of citizenship in starting the campaign. I call Senator Ahearn.

**Senator Garret Ahearn:** The national development plan review process is due to finish on 19 February. The national development plan currently includes the N24 road from Limerick to Waterford. It is being done in two phases. The first phase is from Cahir to Limerick Junction, which is approximately 35 km in length, and a consultation process with the public representatives has already taken place. The second phase is from Cahir to Waterford city and is 60 km long. There will be a meeting about this on 26 February with all public representatives from all the county councils involved - Tipperary, Kilkenny, Waterford and Limerick. The road is in the national development plan at present, and it is at the design stage and is funded up until the planning stage.

However, due to recent announcements by the Minister for Transport, Deputy Eamon Ryan, there is a level of fear in all the local authorities, but particularly in Tipperary County Council, that this project might not remain in the national development plan. Will the Leader invite the Minister, Deputy Eamon Ryan, to the House to give clarity and reassurance that this road project is a priority for him and the Government? The Minister is on record as saying last year that he saw the sense in having new road infrastructure between Cahir and Limerick. Obviously, given that Rosslare will be used more frequently post Brexit, the main road from Limerick to Waterford and on to Rosslare is seen as a priority. We have been in this situation previously in Tipperary. About ten or 15 years ago we were brought up the mountain with a design stage, only for it to collapse. It is understandable, therefore, that there is fear among the public. Certainly, the public representatives and councillors in all the local authorities, as well as the chief executives of those local authorities, should be given the reassurance that the work that is taking place at present can continue, with the assurance that this road is a priority for the Government in the future.

**Senator Paul Daly:** First, as the chairman of a board of management of a secondary school, I wish to be associated with everything that was said this morning about the current situation with the leaving certificate. I plead with the ASTI to return to the room. Due to what occurred yesterday, the debate is now public. This is not good for the class of 2021. Ultimately, the decision on whatever leaving certificate examination takes place will be made around that table, so I plead with the ASTI to return to the talks and to have them in the tunnel and avoid the public

debate.

The matter I wish to raise is, in a way, closely related to the issue raised by Senator Casey. I ask the Leader to lend the support of this House to a request that the Joint Committee on Agriculture and the Marine has sent to the relevant Ministers to recommence an awareness campaign regarding the savaging of sheep by dogs. We might work in collusion with Senator Casey and include the issue of dog fouling in urban areas under the same campaign. We are very familiar with the role of the councillor in approaching us for assistance, but I plead with all councillors to raise this matter at their local councils. The local authorities have ultimate responsibility for the Control of Dogs Act 1986. It is a startling fact that, according to Garda figures, at this time of the year each year there are approximately 400 attacks on sheep, which result in between 3,000 and 4,000 fatalities. Another startling fact is that it is compulsory and the law that one should have one's dog on a lead when outside. Many people do not realise this. We will be discussing mental health later today and I realise that it is vital during the pandemic that people get outdoors and get their exercise, but I plead with them to keep their dogs on the lead.

There are two points I wish to make to people and I hope they can be highlighted. People in areas where there is commonage land assume the land is public land. Commonage is land that is owned commonly by a group of farmers. It is not public land. Farmers do not mind people going onto their land once their dogs are under control.

With regard to enforcement, local authority dog pounds, etc., there are approximately 800,000 dogs in Ireland. There are 217,000 licensed dogs so this needs to be enforced. It is the law. I ask the Leader to forward that message to the Ministers to get the awareness campaign going first and we may need to address the question of legislation at a later stage.

**Senator Regina Doherty:** I thank my colleagues. I am slightly in shock to hear Senator Daly say that we have 800,000 dogs and that only 217,000 of them are licensed. That should be something that is relatively simple to enforce yet we are not doing it.

Deputy Casey raised the wonderful initiative of Ruby. It is particularly topical in conversation for the past 12 months when all of us have been walking around our villages because there has been nothing else to do. The amount of dog faeces in this country is phenomenal, and we all know the reason for that. There is a row in my house every day when we bring the dog for a walk about who is on bag duty. We all hate carrying the bags but if there were bins in our villages, we would not have to carry the bag the whole way. That would stop people hiding them in hedges or hanging them on bushes. The idiocy of people who do that never ceases to amaze me but it can only be because they do not want to carry them the 5 km around their villages. The real need is not to have an awareness campaign, and it would very valuable, but to put bins on all walks and greenways in our villages. We need to be forward thinking when we are providing new routes for people or planning routes around our villages through Slí na Sláinte initiatives or whatever to make sure that we have the facilities for people to dispose of what obviously comes naturally to a dog when we bring them out of our houses. I am sorry for that rant.

I will bring the recommendations of the agriculture committee to the Minister's attention. It is something that is very important, particularly at this time of the year. Most people in our towns and villages do not realise the impact of their dog running out of the house and what it can turn into in respect of our sheep and lambs. We should be very much aware of it to ensure our dogs do not slip off their leads or get out of the back garden. I will write a letter to the

Minister today.

On Senator Ahearn's issue, for the past number of weeks there has been a standing invitation to the Ministers for Public Expenditure and Reform and Transport, Deputies Michael McGrath and Eamon Ryan, to come to the House to discuss the national development plan with all of us and to hear our concerns, issues and ideas. I had very much hoped that that would happen before the closing date of 19 February because it seems silly to have it after that date when the horse has already bolted. I have not received a date from either Minister yet but my office we will continue to push for that.

In all of our counties, there are certain projects that are at an advanced stage of development. Not all of them are road projects but other infrastructural projects that people are relying upon for the future development of their counties and their areas. We all need reassurances that those at an advanced stage will continue with the support of Government and local authorities but also that information on those that are or may be under review or for reconsideration should also be passed on so that we all know exactly where we stand. I will come back to the Senator as soon as I have the date for that debate.

I commend young Ruby. She is a little doll. When it takes a little lady like her to point out something that all of us moan and groan about, there should be a national awareness campaign. As already stated, however, having the necessary infrastructure would provide a solution to the problem. We would then not have to continually moan about it.

Senator Boylan referred to the Stardust tragedy. This is one of the earliest memories I have of a national disaster. I was only nine. It was shocking then and it is even more shocking now to hear her describe the difficulties the families who lost loved ones are still having 40 years later in trying to get answers to what actually happened on that night. I heard a lady make a comment this morning that if the events of that tragic night had happened in a more salubrious area, we would not be having this conversation now. We would have long ago had memorials and testimonies attributed to the people who lost their lives and all of the families who have suffered ever since. What is going on is an absolute disgrace and I certainly will write to the Minister today, not just on Senator Boylan's behalf but on behalf of everybody.

I sincerely apologise to Senator Joe O'Reilly. I told him that I would find a date for him the last time he raised the matter. I know this issue is particularly important to him, as it is to others. He is absolutely right. Every time I have turned on the television recently, I have seen advertisements for the large types of casinos that I always associated with very late-night viewing on particular television stations. They now seem to just be on our mainstream stations as if they are legitimate, attractive and something that should be part of the normal daily discourse. They absolutely should not.

Senator Cassells is right. I cannot believe he has a nine year old. He is making me feel really old. We know our rates of ownership of phones *per capita* are some of the highest in the world and this starts very young with our children. We all absolutely know that most young people from the ages of approximately ten, 11, 12 and upwards are walking around with a very dangerous weapon in their pocket, not just because of the potential for gambling but for all the other things they can access. I will definitely push for a date for that discussion but I am at the mercy of the Minister and the team. It may be very apt for us to have a debate or statements as a form of pre-legislative scrutiny or to indicate what we would like to see in the upcoming legislation. I will try to arrange that in the next couple of weeks.

Senator Fitzpatrick and others brought up the very welcome announcement of €240 million for transport infrastructure yesterday. We are pushing an open door, particularly as the past 12 months have seen people pounding the pavements and out on their bicycles, which is welcome. It has probably accelerated the spread of the enthusiasm that some of us have for walking and cycling to the rest of the population at a much faster rate than we would have seen otherwise. It is a very welcome announcement and I look forward to us extolling the virtues of all the projects in our constituencies as they are developed over the next couple of months. That €240 million is very welcome.

Senator Paul Daly spoke about the money too and he and Senator O'Loughlin mentioned that there is only one bridge in Newbridge, which flabbergasts me. We absolutely need a debate on transport, not just in our towns but in all our urban and rural communities. We need the national development plan to be outlined as it applies to this infrastructure, including motorways. There is a standing request to the Minister for Transport to come in to have a conversations with us. It is not scheduled for next week but it might be on the cards for the week after. As soon as I have a date again, I will let the Senators know.

The communications committee had a hearing on not only the funding of local media but that of the national media, and particularly our print media. There is an extension of funds to all our local and national media through the wage subsidy schemes, including the Covid restrictions support scheme and new schemes announced this week. It is a tragedy and a pity when we hear of staff being stood down because most of us know the people representing our local newspapers, whether photographers or journalists. They are being stood down because advertising in local newspapers has fallen to a trickle. The number of people purchasing newspapers has dropped significantly in the past 12 months so there is a real need for support. I very much hope that commission on communications advances the required funding not just on a national perspective but on a local perspective.

Senator Cassells spoke poignantly about the concerns we have for children and I will arrange a debate with the relevant Minister as a precursor to the legislation. A number of people raised the question of the leaving certificate and I will speak to that at the end.

Senator Buttimer spoke about this and we will have a new living with Covid plan, although I know we are all bloody sick to the back teeth of living with Covid and just wish it was over. We all recognise that there is a couple of months at least left in this phase of our lives. We must recognise that the past number of months have been incredibly difficult. My husband said to me this morning that Dublin has effectively been in lockdown since 13 September last year, which seems like aeons ago. With the exception of one week over Christmas, the people of Dublin have not been allowed go outside their county or 5 km from where they live. If we have as many months in our future in which we must live with lockdown as seems to be the case, we must recognise the socio-economic and social impact on every section of society. Different people in the House have asked for debates on Covid's effects on the front line, women and children, for example, but there is no section of society that has not been or is continuing to feel an impact from Covid. We may have got through the months before Christmas because we had Christmas to look forward to. I recognise that mistakes were made and that hindsight is wonderful but right now, nobody has anything to look forward to. Last night, we were told through the media, which is a huge pity, that we potentially are facing another seven weeks of level 5 restrictions. To be told that, with no prospect of light at the end of the tunnel, is difficult for people who are in the whole of their health but it must be incredibly difficult for those who are teetering on the brink at the moment. Therefore, we do need a debate on living with Covid



in this House in the next few weeks. I hope it is held before the plan is launched in order that our ideas can be fed into the plan. Sport, and safe sport in particular, is definitely something that needs to be brought in. Perhaps this could be not just for elite athletes but also for those who are teetering on the brink and need an outlet of an evening. I will try to organise that debate in the next few weeks.

Senator Warfield talked about his motion and I very much look forward to the debate when he tables it in the few weeks during Private Members' time.

Senator Martin lauded the allocation of €240 million to councils for walking and cycling infrastructure. While this is something that is close to his heart and that of his party, as we all have encompassed a new-found love of walking and cycling, we will enjoy spending that money.

We may have to start referring to Senator Hoey as the Senator for students because each week, she brings up different issues in relation to the difficulties students are facing. I have issued an invitation to the Minister for Further and Higher Education, Research, Innovation and Science to come to the House to talk about students practically, if not entirely, learning remotely this year, about what are the plans for the coming years and about the issues raised by Senator Hoey this morning. It makes perfect sense to me, as it should to the organisers of practicals in universities, to only bring students to universities on as few occasions as possible. It would make sense for universities to arrange practicals together. Obviously, something must definitely be done next year for those students who have already paid fees but who have been unable to access their rooms or dorms at all this year. I will relay that information back to the Minister.

Senator Boyhan spoke beautifully about the impact the "RTÉ Investigates" programme shown on Monday night had on everybody who watched it. One would have to be the most cold and cruel person not to feel heartbroken at witnessing the way nurses and doctors put so much into their work after such a long period. They are still enthusiastic about the care they provide even after so long. The Senator is right to state that something must be done. It is not just about money and rounds of applause. That was all lovely last year but we have all come so far down the road this year that we now recognise that more needs to be done. I will talk to the Minister about the kind of tribute we can make to those workers. I am not sure that it should just extend to those to whom Senator Boyhan referred, who are immediately looking after Covid patients, because stress levels are also high in other sections of our health service.

Senator O'Loughlin raised the issue of roads in Kildare and the welcome advances for the money but we all recognise that there is a long way to go. When we consider that there are five or six schools close to the only bridge in Newbridge, it is clear that there is a long way to go.

I will finish by noting a number of colleagues raised the issue of the disappointing announcement by the ASTI yesterday evening. It is disappointing because some of us are teachers and many of us are parents of children who are doing their leaving certificate examinations. Mostly, it is disappointing because we want certainty for students and young people. I spoke just now about the impact of the pandemic on those who are in the whole of their health. Young people are at an important stage in the development of their lives. They need certainty and it was promised to them a few weeks ago. The Minister for Education said that there would be certainty last week. The Taoiseach said this week that there will be certainty next week. That was thrown in the air last night.



I am most surprised at the behaviour of the media. Perhaps in some ways, I should not be, because there always has to be a hero and a villain. It was in no way helpful for the media to attack teachers last night. I certainly do not think it was helpful for them to do so this morning. Any teachers that I know - I am sure it is the same for us all - are engaged in teaching our children from 8.40 a.m. or 9 a.m. until 3.30 p.m. or 4 p.m. every single day. They are as exhausted and stressed as our children. I completely believe that the ASTI wants what is best for the children. The accusations made against the organisation last night were most unhelpful and will not have a positive impact. The Senators are correct to state that the only place that negotiations and positive outcomes happen is around the table. The ASTI is meeting the Minister this afternoon. I very much hope that the meeting does bring it back to the table. While I also know that a decision will be reached on the leaving certificate, I wish to God that it was made sooner, rather than extending the pain, suffering, anxiety and stress that young people and their parents have been going through for many months now. I wish the Minister every success this afternoon.

Order of Business agreed to.

*Sitting suspended at 1 p.m. and resumed at 1.35 p.m.*

### **Mental Health and Covid-19: Statements**

**An Cathaoirleach:** I thank the Minister of State, Deputy Butler, for coming to the House again today. We could nearly make her an honorary Member as this stage. We are taking statements on mental health and Covid-19. I have a full list of Senators to speak on this important topic. I am glad the Minister of State is here to outline the issues and for Senators to be able to talk about the challenges they and their constituents are facing with this topic.

**Minister of State at the Department of Health (Deputy Mary Butler):** My understanding was that I would only have seven minutes at the end to wrap up and that I would not be making an opening statement. That was what my office was told.

**An Cathaoirleach:** If the Minister of State wants more time at the end, it can be facilitated.

**Deputy Mary Butler:** That would be great.

**An Cathaoirleach:** I call Senator Clifford-Lee, who is sharing time with Senator Paul Daly.

**Senator Lorraine Clifford-Lee:** I thank the Minister of State for attending. She has been here on a number of occasions. We all know that because of the pandemic, the issue of mental health is of vital importance to people. We are all experiencing shocking levels of mental health issues in our communities. With the stress of prolonged lockdowns, as well as the isolation and the hopelessness that many are feeling, people feel there is no light at the end of the tunnel or they cannot see it at least.

Many supports have been put in place such as the text back and other facilities. There are issues such as the bad housing situation facing some people, along with mothers with young children trying to work at home and home school. The mental health of the nation's children is severely affected by the lack of in-class time. The schools going back is a priority of the

Government. It will be a key to alleviating some of the pressure under which people are finding themselves.

Young people are facing difficulties with the uncertainty around the leaving certificate. The Minister for Education, Deputy Foley, outlined several weeks ago that a two-pronged approach will be taken to the leaving certificate and that students will have a choice. This was the express wish of the students. I appeal to all parties involved with the leaving certificate to get back around the table and keep the mental health of young people in mind when they are discussing and moving forward with their work. It is important they are given certainty at this point. They are facing enormous stress and strain, being isolated from their friends, not having any sporting or cultural activities. Now the uncertainty around their future education and careers is hampering them. Will the Minister of State bring that message, namely, that young people are under strain, back to her colleagues in the Department of Health and around the Cabinet table?

**Senator Paul Daly:** I thank Senator Clifford-Lee for sharing time with me. I welcome the Minister of State and compliment her on the great work she has done since her appointment. Knowing her personally, I would have expected no less. Under such trying and testing times, she has proved herself to be a hands-on Minister of State. The progress she has made in such a short time is admirable.

I welcome all the money provided for schemes such as In This Together, Keep Well and the Community Call campaigns. Coming from a rural area, there are some points I wish to highlight when it comes to isolation, the trials and tribulations so many people and families have gone through over the past year and seems to be on the horizon for the foreseeable future. There are issues with bereavement, isolation and children home-schooling, missing their friends.

The biggest problem we all have had with mental health, along with the lack of treatment for it, is the inability of people to admit that they have an issue. In some conversations I have had with people, they tell me that they were lucky the virus did not cross the threshold or that they did not have a bereavement due to Covid. People are nearly ashamed to say that they are down, not handling this well, missing their friends or missing the night at the bingo, going to mass or trips to shop. While they are not handling it well, they say they are lucky. It is going to be so important, as we come through this, to reach out to those people. In addition to using awareness campaigns and the media, the Minister of State should, through the various Departments, brief volunteers, as in the GAA. When people return to their training sessions, which I hope will be sooner rather than later, maybe a GAA club should be conscious of mental health issues and perhaps should have an officer to identify what is affecting those in whom they have seen a massive change since before the lockdown.

The same applies in education. Teachers, principals and school staff have a role. We often talk about the role of the teacher in identifying problems outside the classroom, but it is often the caretaker, secretary or special needs assistant who sees a change in a pupil's activity in the playground or on the sports pitch. They may even see a change in a pupil's appearance or punctuality. There are little things that the teacher or principal might not see. We need an awareness campaign because we will all need to look out for so much more than we used to. The biggest problem we will have is that people will suppress their feelings. People who are down now do not realise it and actually believe they are lucky because the disease has not come across their threshold.

A lot of debate will be required on the bereaved. There will have to be a collective national

approach to the question of how we commemorate those we have lost and how we can do so in a way that goes some way towards meeting the needs of the bereaved. I do not want to sound flippant but Ireland does grieving better than anywhere in the world. That adds to our strong mental health after a family bereavement. The ability to grieve after a bereavement has been taken away. There are people wallowing in sorrow who cannot express it and who have not grieved properly. It is possible that this will be the biggest mental health issue after the pandemic or in living with the pandemic. It will have to be addressed nationally. The idea of a national commemoration day to commemorate and recognise those whom, sadly, we have lost is brilliant but I do not know whether it will go far enough to help affected families to get over the loss they have experienced and the fact they have not been able to grieve.

I thank the Minister of State. I thank my colleague for letting me in early. I do not like leaving before hearing the Minister of State summing up but unfortunately I cannot be here later.

**Senator Martin Conway:** I am sharing half my time with Senator Seery Kearney.

I welcome the Minister of State back to the House. I wish her well in what is an absolutely daunting challenge, particularly in the area of mental health. It is daunting because successive governments from all sides failed to invest incrementally over the years in mental health services. As such, the Minister of State has taken over an area that has seen significant underinvestment. I welcome the fact there is a significant commitment in the programme for Government to invest in mental health and mental health services. I also welcome the fact that, in last year's budget, which was the first of the current Government, there was a significant increase in the resources made available to mental health services.

We are all aware of the pandemic and the absolute challenges people have faced in respect of their mental health. They may not necessarily have had major issues with their mental health before the pandemic although I believe everybody does have such issues to some extent. People who did not have a significant challenge previously have found it difficult. For those who have had challenges, it has been incredibly difficult.

I very much feel for the 60,000 leaving certificate students who have not got a clue what is happening or what is going to happen and who are in limbo. This poses mental health challenges in the run-up to what will have been one of the most important events in their lives to that point, namely, the sitting of the leaving certificate examinations. I hope this matter is concluded with urgency. The investment in mental health has to be multi-annual and it has to continue to grow because we are fixing a broken system. Too many people have lost their lives as a result of a lack of intervention at the right time. We all know stories of people who presented themselves to hospital seeking help, who reached out looking for help and were told they were okay and not ill enough or bad enough to be admitted to hospital and who then went and took their own life. I know one case in my county that happened in the last number of months. It is unacceptable and disgraceful.

There are many people out there whose hearts are in the right place and who want to do the right thing. When tragedies have happened in communities, people have set up different foundations, fundraising initiatives and so on. I have raised this at the Joint Sub-Committee on Mental Health, which our colleague, Senator Black, chairs, and with the Minister. There are many well-intentioned organisations out there duplicating each other - it could be in the region of nearly 1,000 - that offer various supports for mental health. My worry is that their good intentions are not being channelled in the right direction. We need to review the various

organisations around the country in the area of mental health and see if we can bring them together under a united mental approach. We should look at great work being done by Pieta and others. We need to learn from experience and ensure all resources are being channelled in the right direction to have maximum impact.

**Senator Mary Seery Kearney:** I really appreciate the energy the Minister of State brings to her role and her office is fantastic to deal with. I thank her very much. There are many schemes and they are all to be truly welcomed throughout this. If there is any silver lining to this Covid situation, it is that mental health is being spoken about and there is a destigmatising of it. We see the supports across all Government Departments, especially the Department of Education. I appreciate all of that.

Mental health services in the community have been affected by redeployments. I ask that the Minister of State use her good office to influence that those staff be brought back as quickly as possible and that we get those services back. I understand why we need to redeploy people but if we were to have a list of who gets staff back first, we should ensure mental health services have priority.

This week we got a phone call from my dad's GP asking if he is going to take the vaccine because he is 87. Of course he is. He has his sleeve already rolled up ready to go. As a family, there is a great sense of relief that the worry is coming to an end as to whether he will survive this and whether we will still have him in a few months' time or even a few weeks' time. Over the coming weeks, we will have that sense among a lot of families. We are not unique in that. Many families will experience the sense of relief that their family member will be saved from this.

How we communicate the over-70s roll-out programme is really important. We are clear that it is starting from next Monday. Newspaper reports today are talking about it going on until mid-May. It is important we emphasise that it is the second dose that will be done by mid-May. It is not that people will have it for the first time, but that they will complete their second dose. It is really good news and we need to hear that.

I am chair of the Dublin 12 drugs task force. In the context of mental health, I want to honour the work done by those front-line staff over the last 12 months. They have been extraordinary but they are flagging seriously to us that, under the pressure of the current circumstances and all they are experiencing, people who have been successfully managing their addictions have made a step backwards or are relapsing. I have spoken extensively to the Minister of State, Deputy Feighan, about this but it should also be approached from a mental health point of view. I think the two dovetail. We need to be ready to provide and ramp up support services, because there is a hidden alcohol tsunami coming at us, according to practitioners on the front line. I respect what they are flagging to us. They are seeing it and taking the calls. They have adapted incredibly well and they are amazing people working out there for us, so I thank them. We should listen to what they have said and start preparing for drugs task forces, addiction services and mental health resources all coming together in order that we will have a careful, ready-to-go solution at the end of this.

**Senator Annie Hoey:** I am very glad to be a part of this discussion. I welcome the Minister of State to the House again. We chatted at a different session earlier today.

We are living through the most strange and difficult times. We are living with restrictions

for fear of our health and that of our loved ones, with the sense that no matter how hard we try to do what is asked of us, the goalposts keep moving. It can be a daily struggle for us all. The past few weeks has been particularly tough for many of us, and I am not afraid to say I have struggled over that time and found it exceptionally difficult.

To anyone listening to this debate, reading about it tomorrow or perhaps watching online, I point out they are certainly not alone in feeling strain on their mental health. There is no shame in feeling tired and low during this time. We have been faced with an incredibly difficult task of isolating from loved ones and finding an inner reserve of patience and strength that can be difficult to find. There has never been a time when we have all been told we are in this together and that we are all in the same boat while feeling so isolated and on our own. There is no weakness or shame in reaching out for help, whether to a friend, a family member, a GP, a counsellor, a therapist or a support group such as the Samaritans. If someone needs to make that call, he or she should make it now, or if someone thinks that someone else needs to receive a call, he or she should make it now. It is very easy to stand in the Chamber and tell people to talk to someone but the resources and the supports are just not there.

I refer to Senator Black and the Joint Sub-Committee on Mental Health, which she set up and chaired. Before Christmas, we heard weekly from people working in primary care settings and all sorts of places who outlined the stark reality of the current circumstances and what is potentially coming down the line in terms of a mental health crisis post Covid. As I have stated previously in the House, I recommend everyone watch the footage from those meetings because being a member of the committee was the most illuminating and possibly the most useful experience that I have had since becoming a Senator.

When we speak about mental health in the context of Covid, I am acutely aware that the first perspective most of us speak from concerns the mental health crisis that many are living through and the negative impact that Covid has had on everyone's mental health, which is fair and understandable. I believe, however, and I hope others will agree, that Covid and the social restrictions it has resulted in has also given us an opportunity to examine how we were living our lives beforehand, and more specifically that there is a want for a greater balance between our working and family lives. For many people, the absence of a daily commute and the costs associated with - the literal, physical and mental costs - has been an improvement.

During the week, I read the findings of the Macra na Feirme young farmer and rural youth survey, which I highly recommend doing because it includes very honest and insightful contributions highlighting a variety of experiences of young people living in rural communities. As someone from a farming background, I had to leave that community to achieve what I wanted for my education and career. I found myself connecting with many of the stories that Macra shared and I thank it for conducting the survey. Young people have been tremendously affected by this pandemic. It is fair to say those living in the more sparsely populated parts of rural Ireland are likely to be feeling very keenly the isolation in which we have been living for almost 12 months. In an average year, young people living in rural Ireland, with little in the way of local public transport and an unreliable Internet connection, could find themselves feeling isolated, and the survey showed that has been exacerbated over the past months.

There were some interesting and even positive findings in the survey results. A total of 53% of all the rural young people surveyed stated they would like to work from home or from a remote working hub in the future, 59% identified spending more time with their families as a positive of recent months, while 37% of those surveyed were happy with their current work-



life balance. They are quite significant numbers. Notwithstanding the mental health issues we have talked about, lessons have been learned in recent months, particularly for young people in rural areas. When we go back to normal, whatever that is, we will want to reflect on what learnings we can take from this that will be positive towards people's well-being, growth and mental health. As I said, as we leave this pandemic and open our economy and our lives, we need to consider there are some elements of how we have been forced to live our lives in the past year that people will want to incorporate into their lives because they have been of benefit to them. Working from home allows workers to cut out commuting. It allows some people to fulfil better care obligations. For some, it simply means more time with their family and in their own locality. Workers who want to continue working from home post pandemic, even part-time, should be facilitated. As the survey showed, all this ties into mental health and well-being and how we will look at life post pandemic. I feel like my time is going on forever. The clock is ticking away.

**An Cathaoirleach:** To be of assistance to the Senator, I am afraid I started the clock a bit late. She should not worry. I know she has lots to say but she should not feel she is running out of words.

**Senator Annie Hoey:** I can wrap up pretty quickly; I will not use the whole slot. I want to take a moment to reflect. Senator Seery Kearney spoke about her dad having his sleeve practically rolled up for the vaccine and the hope that is giving to him. On New Year's Day, my dad was having a general new year's telephone call with his friend. They are both ever so slightly hard of hearing so we all heard the call. They were roaring down the telephone at each other about whether each was getting the vaccine and one would say he could not wait to get it. The hope that was giving them filled me with an enormous sense of joy. My dad practically has both sleeves rolled up and is waiting for the telephone call to get in and get the vaccine.

There is a flip side to that. I know of a young mother who had a heart transplant when she was quite young. She had a miracle baby; she is a single mother and she is very far down the list. If she gets Covid-19, it is very serious for her as a heart transplant recipient. She lives with this immense fear of what would happen to her child if she were to catch Covid-19. She has been cocooning since March, which is an extraordinarily long amount of time to not leave a house with a young child, because she is absolutely terrified of what could happen to her.

While the vaccines are giving hope to many people, there are those for whom the roll-out, through a series of issues, is causing distress and strain. I want to flag with the Minister of State that while it is bringing great hope, people are worried about how and when the vaccines will appear. GPs do not yet quite have the answer. I will wrap up with that.

**Senator Vincent P. Martin:** The Minister is very welcome to the Chamber. Last March, we went through a period of uncertainty and upheaval never experienced before. We could no longer plan ahead or look forward with confidence. We lost the spontaneity of life. People's livelihoods were put on hold and financial debts accumulated. All the simple things we took for granted evaporated as anxiety and fear gripped society. Families crammed around a single computer and stress levels increased and were sustained. Children stopped playing together. New school entrants were advised to keep a distance with no high-fives, play, sport or hugging. This is all against a natural path of development for children.

Musicians and performers lost their audiences. Stadia fell silent, weddings were postponed and graduation ceremonies never happened properly or at all. There were no leaving certificate

goodbyes or no debts balls. Third level students remained in apartments gazing at computer monitors, with no exposure or participation in one of the most vital parts of third level life; savouring the university of life.

The world stands still. It is almost as if normal life has been brought to a halt, but at what price in terms of mental health illness? Some experts are predicting a tsunami of mental illness but, perhaps, that tsunami has already happened and has not been documented. Our health system has always been under-resourced and underfunded. Mental health has been the sad Cinderella; the poor relation when it comes to the overall health budget. Although some funding improvements in recent years have happened, it is not enough. What happens now? Are we analysing properly, or at all, the mental health price of Covid-19 and the hit people are taking?

Young people are being deprived of representing their clubs, counties and schools in everything from debating competitions, GAA and tennis to rugby and everything else in between. We must do so much more than focusing our attention, including media attention, on the tragic numbers of daily Covid deaths and cases.

All deaths and illnesses associated with this pandemic are heartbreaking but suicide has a shattering effect on families that never lifts or heals. I mention self-harm, anxiety disorder, obsessive compulsive disorder, post-traumatic stress disorder and depression. People need help now. Some need urgent intervention and more people will need help as this living nightmare throws its dark shadow over generations. Who is the advocate for mental health in NPHET's deliberations? People would like to be assured that such advocacy and such a voice will be heard, prioritised and placed front and centre. Can NPHET assure us of that? I know the Government respects NPHET. It is not a politician's electorate but the people of Ireland. Who is speaking up for mental wellness when NPHET compiles its recommendations?

As recently as this morning, it has been reported that psychiatrists in England are warning of a significant increase in pandemic eating disorders, with Covid-19 isolation blamed as the numbers of children with anorexia and bulimia soars, with fears for similar increases among adults. Eating disorders have thrived in this Covid environment as, for some, the focus on eating becomes a way of coping, coupled with the lack of physical activity, fear and uncertainty, and this fuels anxiety symptoms. Unfortunately, the evidence to date is incomplete and it will take considerable time to measure the true impact of Covid-19. What has been statistically proven among healthcare workers, however, according to the *Irish Medical Journal* and Trinity College's Professor Brendan Kelly, is that the rate of significant psychological stress among healthcare workers is approximately double that among the general population. They want more than a round of applause from people. To ameliorate this and if we want to help in a real way, healthcare staff require careful rostering, the ability to take leave, organisational support from employers, and, where necessary, psychological first aid.

Experts have expressed the opinion that the combined effect of the pandemic and associated restrictions and isolation is that approximately one person in every five in the general population in Ireland and elsewhere has suffered significantly increased psychological distress. Some 623 consultant psychiatrists registered with the College of Psychiatrists of Ireland completed an online questionnaire back in May and June. They are not very recent data but they are worrying. Their findings included proof of a running relapse of mental illness and an increase in the number of emergency referrals. Multiple factors of the lockdown were contributing to emergency presentations in hospitals. These presentations were believed to be primarily down

to increased isolation, reduced access to face-to-face secondary mental health supports, reduced access to local counselling supports, reduced access to GPs, increased reliance on drugs and alcohol and domestic abuse in the home. Child and adolescent psychiatrists specifically highlighted school closures as contributing to stress and emergency presentations. I am not into the blame game but I urge everyone to remember that as we try to get our schools back to work and get everyone around the table as soon as possible.

I emphasise that the usage of mental health services is not a reliable indicator of need because the number of people who presented for self-harm was down 25%. One would think that is good but it is not because the number of people who presented for other causes is down 40%. It is just not documented. Are environmentalists happy there is a reduction in carbon emissions this year in the incredible year we have had? They are not so we cannot rely on that data for presentations or take any succour at all from them. The effects of the pandemic on suicide are not yet clear because of this. Now is the time to act. We should act in anticipation of the worst-case scenario and not wait for statistical confirmation to warrant and vindicate an effective response.

**Senator Paul Gavan:** It is the first time I have met the Minister of State, Deputy Butler, in the Chamber since her appointment. I wish her well and congratulate her. I will be critical of the Government but I do not doubt the Minister of State's personal commitment to this role. I would argue the Minister of State's job is certainly among the toughest of any Minister in the Government.

Where should one begin with this topic? Extensive research shows that there are massive challenges in this area. To cite some of the statistics, the HSE has stated that traffic to its mental health website was up by 490%, with more than 800,000 visits between March and July of last year. Jigsaw, which does such important work, has stated that demand for its services has increased by over 50% during the pandemic. The Samaritans have reported an increase in the frequency of conversations about callers' existing mental health difficulties being exacerbated and the lack of access. That is a point to which I will keep coming back, namely, the lack of access to mental health supports since the pandemic began. I am afraid I must tell the Minister of State that under this Government, we have gone from a mental health crisis to a mental health emergency.

The Mental Health Reform group, which is a national coalition on mental health in Ireland, has outlined two key areas for investment. We need staffing levels across the mental health system to be increased and people must get quick and easy access to mental health services when they need them. Just before the onset of the pandemic, I took part in a couple of meetings in Limerick and Clare with parents, in particular, of children who could not access services. There is no doubt but that we have lost lives due to access. This problem was not created yesterday or in the past six months. It has been ongoing, frankly, for decades. The challenges facing the Government are considerable but we need to see a change in gear in terms of the responses. I acknowledge that the previous speaker made the point well that while more funding has been allocated, much more needs to be done. It is good to hear that recognition from across the Chamber.

We must move towards parity of esteem for mental health provision, which places mental health on parity with physical health. Years of underinvestment have led to waiting lists with over 2,000 children on the waiting list for the child and adolescent mental health services, CAMHS, and more than 10,000 adults and children awaiting psychology appointments. No doubt all the Senators opposite know how bad this is because we all are contacted on a daily

basis by parents and adults desperate to access the system. Unfortunately, the prospects are that in many cases, they will have to wait for years.

One of the major gaps in services commonly experienced by those in distress is the lack of care outside of 9 a.m. to 5 p.m. At present, there is no State-wide provision of 24-7 crisis services at a community level. People should have access to mental health treatment where and when they need it. Mental health issues do not only occur between the hours of 9 a.m. and 5 p.m. and nor do they take the weekend off. Mental health issues do not take a break during a pandemic. We can have no half measures when it comes to mental health.

The onset of the Covid-19 pandemic has only increased pressures on already under-resourced mental health services. GPs are overwhelmed. They have requested referrals to talk therapies and counselling but with people having no access to 24-7 services and accident and emergency departments not working, there is no follow-up with patients and consequently, people are simply falling through the cracks. The long waiting lists for child and adult psychology treatment are completely unacceptable. Early intervention is key to a child's development and children are missing out on lost opportunities because they cannot access the treatment that they need.

I want to speak briefly about Limerick. In the community healthcare organisation, CHO, 3, which covers counties Clare, Limerick, north Tipperary and east Limerick, the number of patients on the psychology waiting list for treatment was 505 up to October 2020. Of those aged between five and 17 years, 243 patients had been waiting more than a year in this area. This is costing us lives. I think we would agree it all comes down to funding. In the 1980s, mental health funding was 16% of the overall health budget but in 2020, it had fallen to 7%, and it is scheduled to be 6% in 2021. Sláintecare recommends 10% and the World Health Organization recommends 16%. Of the additional €4 billion provided in the Government's health budget for this year, mental health received €50 million, which equates to 1% of the overall additional health budget. That is what I mean by not enough.

The Sinn Féin spokesperson on mental health, Deputy Ward, is a man for whom I have great admiration - I say this not because he is a party colleague but because he is so passionate about this topic - and he introduced the Mental Health Parity of Esteem Bill 2020. It aims to compel a change in attitudes towards mental health at the highest level of policy making in the Government. Surely, that is what we need. Sinn Féin also introduced the Health (Amendment) (Dual Diagnosis: No Wrong Door) Bill 2021. This important legislation aims to plug the gaps between mental health and addiction services. Despite considerable evidence of interaction between mental health issues and addiction and the possibility that one is a direct result of the other, they are treated almost exclusively as separate conditions. Ensuring access to appropriate treatment for people with dual diagnosis needs is a major policy concern. Sinn Féin recognises that those who are addicted to drugs and alcohol can have mental health disorders and *vice versa*.

Drug and alcohol misuse is primarily a public health issue. Harm reduction and prevention are guiding principles for Sinn Féin in the development of future drug and alcohol strategies. Treatment and rehabilitation strategies will go hand in hand with recovery initiatives that will help to support people in recovery. Sinn Féin supports an holistic approach to prevention, rehabilitation and recovery.

Unfortunately, a mental health issue is often hidden. It can be subtle in effect but devastat-

ing in results. Individuals and families are suffering as we speak - suffering the loss of a loved one due to mental health issues, experiencing issues themselves or looking on as family or friends suffer. Covid-19 has compounded feelings of isolation, loneliness or hopelessness in people who suffered mental health problems before the pandemic began. It has also created strains on people who never experienced mental health issues before and who, for the first time in their lives, are confronted with feelings they never had previously. In July 2020, Mental Health Reform published research that showed significant public demand for greater action from the Government and its agencies to respond to the mental health impact of the pandemic.

The Government needs to recognise the often unseen problem of mental health issues in society and help to prevent a greater problem coming down the line. The Government needs to realise that it has to invest in mental health so that people can get the help they urgently require. We need much more funding and support and urgent action.

**An Cathaoirleach:** I call Senator Black, who is the Chair of the Joint Sub-Committee on Mental Health.

**Senator Frances Black:** I welcome the Minister of State. I agree with Senator Gavan that she has a tough job ahead of her. She is a compassionate person and I wish her well in her role.

As I am sure the Minister of State is aware, mental health activism is a passion of mine in my work as a therapist and a politician. I set up the RISE Foundation to work with and support family members of a loved one who has an alcohol, drug or gambling problem. Often, family members are significantly impacted by someone they love going down that self-destructive route in the form of depression, anxiety and stress. My passion for mental health has always carried through to my politics. As Senator Hoey mentioned, my ongoing efforts and work saw the cross-party Joint Sub-Committee on Mental Health set up last November. I am grateful and honoured to sit on that committee as its Chair.

Mental health is a topic that needs more attention and voices within the Government now more than ever. Since the committee's commencement, we have worked hard to create a schedule of items that it is paramount are accounted for and discussed. None is quite as important as the systemic impact of Covid-19 on the mental health of members of society. Now more than ever, people are feeling isolated, disconnected from their communities and frozen. They are struggling to engage with a future that seems unpromising. Financial burdens seem insurmountable and threatening. This is having terrifying impacts on our people. Everyone, including friends, colleagues and people close to my family, is being impacted. It is our duty to create a framework facilitated by open and in-depth discussions so that we can plan a brighter future.

There is a waiting list for primary mental health care of up to 11,000 people, 80% of whom are children, and the wait is up to two years per person. It is vital that we consider providing lower level preventative supports, promote and support voluntary services, and invest in primary care psychologists. It is also vital that we tackle inappropriate referrals at secondary level, given the issue of dual diagnosis, and support implementation of multidisciplinary teams so that people suffering with illnesses like eating disorders do not have to travel outside Ireland for adequate treatment. We need to tackle the staff shortages in third level care. With the demand constantly rising, the limited number of staff is crippled. These issues are to name but a very few that we must tackle head on to correct each level of mental healthcare.

Only the tip of the iceberg is in view when it comes to seeing the effects of Covid-19 on



mental health in Ireland. There are many reasons for this, such as the fear many individuals have of going to hospital during a pandemic, even in a mental health emergency, which forces them to struggle with it alone, and this is so true. Voluntary organisations are struggling to fundraise in these times and so cannot provide the necessary supports they once did.

The nightly announcement of the number of Covid-19 cases and deaths are a very public declaration of how the virus is affecting the population, but privately we know Covid is harming many more, with higher levels of anxiety and mental illness. Medics have reported that the first lockdown caused more people to feel loneliness, depression and anxiety. It sparked an increase in prescriptions for sleeping tablets, anxiety medicines and antidepressants. These figures are only increasing during this lockdown. The reality of the pandemic is that Covid-19 has not affected the population equally. Those with the fewest social and economic resources to alleviate the effects of social restrictions will be impacted the most, for example, those living in deprived areas with insecure and/or low income jobs, insecure housing, single parent households or abusive relationships. It also acutely affects those with existing mental health problems, whose mental health may worsen when access to their healthcare support is restricted. Others who are most at risk at present include those who have lost or are at risk of losing their jobs, those separated from loved ones, healthcare workers, people who face domestic abuse, the elderly, individuals who have pre-existing mental health difficulties, some Covid-19 survivors who are experiencing post-traumatic stress disorder, PTSD, and depression, and those with intellectual disabilities.

The priority for us right now is to plan and anticipate the huge escalation of mental health service requirements and secondary mental health services. It is now emerging that this will peak in the coming months and will last for many months or even years. We have a separate curve to flatten outside of the Covid-19 cases within secondary mental health services. Unless we anticipate, plan and invest in all of our secondary mental health care services as a priority, they will be overwhelmed, with terrible consequences for mental health and the economic recovery of our country. It is paramount that we start to strategise ways to implement greater Government action to respond to the impending mental health crisis and strategise a recovery plan for mental health during, and in the aftermath of, Covid-19.

There is no doubt there has been a huge surge in demand for mental health services which, prior to the pandemic, were already overstretched. The evidence for the impact of Covid-19 on the mental health of the people goes on and on. The reality is we are in a crisis far greater than any of us could ever have anticipated. Covid-19 is no longer our only battle. Our main point of action is to consider how we can provide lower level preventative support and promote and support the voluntary services. We must urgently invest in primary care psychologists and therapists across the board. We must urgently tackle the current issue of inappropriate referrals at secondary level. We need to tackle the staff shortages in third level care, as with the demand constantly rising the limited number of staff are crippled. These points are only a small number of the large tasks we must take on if we are to begin to correct each level of mental healthcare so we can save the lives that are at risk.

**An Cathaoirleach:** I thank Senator Black for her work on the mental health committee in the Oireachtas and for her work outside of Leinster House in the voluntary sector in the area of mental health.

I remind Members we are sticking to the rota and even if people come in out of sequence, unfortunately, we still have to stick to the rota. We are still going through the spokespersons in

the debate. Before Senator Mullen speaks, I ask Senator Seery Kearney to take the Chair for the first time and thank her for taking up a role as an Acting Chairman.

**Senator Rónán Mullen:** Gabh mo leithscéal nach raibh mé ann ag an tús. I welcome the Minister of State.

In five, ten or 20 years' time when we look back at the last 11 months, or the first 11 months of the Covid pandemic experience, three enormous failures will be recalled. The first obviously was that towards elderly people in nursing homes. We will have to continue to reflect on that and the death toll that resulted.

The second failure is the decision to cancel so many oncology consultations during 2020. There are already indications from Dr. Greg Korpanty, in University Hospital, Limerick, and others that people are now presenting with more advanced cancers. Sadly, in the years to come they will pay a price for the decision within the health system to cancel oncology appointments.

The third great failure will be around the general mental and well-being of the population that has taken such a hammering. That was driven by three factors, in particular: unemployment and the destruction of so many businesses; the suspension of normal social life and separation of people who have been separated from their families; and the impact of the virus itself on so many people who have recovered from it.

I want to say a word about media coverage. With the endless stream of doom and gloom on the airwaves, particularly on our national broadcaster, I worry that it is taking a serious toll on even the most firm minded people.

**Senator Jerry Buttimer:** Hear, hear.

**Senator Rónán Mullen:** I give credit for the good programmes and the public service information. I get that RTÉ has a public service obligation and a duty to inform the public. I get that they cannot afford to ignore the gravity of the pandemic. Even so-called light entertainment is engulfed by the issue with large sections of "The Late Late Show" now devoted to discussing Covid each week. There was even an ill-judged attempt to rebrand "Operation Transformation" with a name that referred to Covid. This all pervasive doom and gloom is more than bordering on the irresponsible and we have to wonder indeed if the mental health of ordinary people has suffered as a result. It is no wonder that Lyric FM has seen a 10% increase in its listenership as people seek refuge from the 24-hour Covid news cycle. It sometimes strikes me that those who are most addicted to the news coverage around this issue are those who are most endangered by it.

This morning I listened to Claire Byrne on the radio. She talked to a student about the ongoing leaving certificate imbroglio and she said that this must be terribly stressful on students. If one tells people that things must be terribly stressful for them then it is more than just empathy. It is irresponsibility actually because what one is doing is perpetuating the experience of stress.

**Senator Jerry Buttimer:** Hear, hear.

**Senator Rónán Mullen:** Can we get back to encouraging people to be resilient? To invite people to count their blessings, as we all should, is not to ignore the problems that we face because there are resources and there is support. Yes, there are things that are lacking and, yes, there are problems and we must be ceaselessly energetic about addressing them but there has

to be a national consensus about the need to get positive in the face of the challenge. I would invite RTÉ and other media to get out of the one-track zone of seeing things through the lens of power and conflict, or panic and anxiety. We need something more and we need something better.

Specifically in terms of mental health, we started from a position pre-Covid where mental health spending comprised 6% of our health budget compared with 12% in the UK and across Europe. As I said during a Private Members' motion on direct provision centres, which I proposed in 2019 and which was adopted unanimously, the State still does not take mental health as seriously as it does physical health. Therefore, even after additional billions of euro being spent on health this year we begin dealing with the fallout from Covid from a poor starting position. That has to be said. The challenges faced by mental health services are, potentially, daunting. We urgently need to build capacity for increased services and increased need specifically to deal with the knock-on effects of lockdown such as loneliness, isolation and alcohol abuse. I note what has been said about the coincidence of addiction and mental health issues in the context of both drug and alcohol abuse, and I will come to gambling in a moment.

I will deal with the knock-on effects of the lockdown, the likely effects of a further economic slump that we may face post Covid - and I am probably starting to sound like the national broadcaster now - not helped by Brexit and, most important, the neuro-psychiatric complications of Covid itself. Before Christmas I read about a study conducted on the Continent. It found that of those who had been hospitalised with Covid 12% went on to have symptoms of post traumatic stress disorder, PTSD, 27% had anxiety and more than 50% reported severe or chronic fatigue. We have heard anecdotal reports of the latter phenomenon. If this is indicative, we must plan seriously for the major problems that will be faced by people who have recovered from the virus, not to mention the wider population. Certain people with serious mental issues, such as schizophrenia, will undoubtedly have worst outcomes in the event of contracting Covid-19. We must consider whether these people should be vaccinated earlier in the schedule. Perhaps the Minister of State will tell us if that has been considered or if she will consider it.

We must be careful with regard to suicide. I recently spoke to a senior, eminent professional working in the area of psychiatry and the view is that while there is a great deal of anecdotal evidence that suicide rates have increased in the past year, there is no evidence in the official statistics of any increase in Ireland or the UK. While this may change, we need to be careful and not be alarmist. The best advice from doctors and mental health groups is that the discussion of suicide should never overstate its prevalence because this, in itself, has a triggering effect on vulnerable people.

**Senator Vincent P. Martin:** On a point of information-----

**Senator Rónán Mullen:** Yes.

**Senator Vincent P. Martin:** I thank the Senator for yielding. On that point, some statistics are lagging way behind, such as coroners' reports, so we could be waiting a considerable time for them. I thank the Senator for taking that information.

**Senator Rónán Mullen:** I take that on board.

Finally, gambling is an issue that was raised by Senators Cassells and Joe O'Reilly on the Order of Business today. We must take on board the evidence we are hearing through our work of people who have relapsed into problem gambling due to anxiety, unemployment or sheer

want of something to fill their time. One man spoke bravely on the radio last year about how he had developed an addiction to the national lottery, a problem that is often overlooked and dismissed even though it is a form of gambling, albeit in aid of good causes. The College of Psychiatrists of Ireland recently called the gambling problem over the past year “a hidden epidemic” and a “public health crisis”. We must take heed of the advice it has published on how to tackle it. The pervasive advertising of gambling, particularly at weekends and during sports events, the sports events many of us love and to which we are perhaps potentially addicted, is grotesque. We must tackle the gambling epidemic head-on, as it preys on the well-being of vulnerable people across the country.

**Senator Jerry Buttimer:** I welcome the Minister of State and commend her on her work. The welfare of people is important to us as a collective and also individually. The important point all Members can make today is that there is significant investment, but there is a need, as Senator Mullen correctly said, to teach people resilience. In that regard, I ask the Minister of State for her co-operation on the need for the Government to legislate for mental health training in the workplace. I am struck by the fact that we sometimes do not talk about mental health, so I commend Senator Black on her work and on bringing forward the conversation or comhrá on the need for mental health to be prioritised. There is a need for the Government, and I will work with the Minister of State on this, to bring forward legislation to bring mental health training for employees into the workplace. I believe it is essential for the well-being of the workplace. In the context of Maslow’s hierarchy of needs and reaching self-actualisation, this would be a key component of our new workplace relations post pandemic.

We know anecdotally about the effects Covid-19 has had on people. The pandemic has highlighted more than ever that we must prioritise promoting and nurturing positive mental health in the workplace. We all have heard stories about what has been happening to people’s mental health. I am struck by Glenn Close’s great quote: “What mental health needs is more sunlight, more candor, more unashamed conversation”. We put a value on health and safety in the workplace. I believe we can work to achieve mental health training and bring about better awareness, which will become the norm. We talk about resources. We are putting significant resources into mental health in a variety of ways. However, I ask the Minister of State to speak to the Minister of State, Deputy Chambers, and the sporting organisations across the country. There is a group of young people aged 17 or 18 years and younger that could train in pods of 15, whether it is for soccer, hurling, football, rugby or whatever sport. We all know of sports complexes that have acres of ground where young people could train safely and kick a ball around to one another. There does not have to be organised matches. Young people are frustrated in this lockdown because they have lost that sense of hope. That vision of playing games in the summer has been taken away from them. Allowing that would not add to the Covid-19 statistics. It would bring about a surge in positive mental health. I see it in my own county and city. There are young people out on the greens where we live kicking a ball and training. They can do that safely in their GAA, soccer or rugby clubs and I ask that consideration be given to that.

This State has spent billions of euro on mental health. We must ensure now that the current challenges we face have a positive impact on people. Linda Poindexter stated: “One small crack does not mean that you are broken, it means that you were put to the test and you didn’t fall apart.” As a nation we must learn that we can work together as a collective to help one another. I commend the work of Senator Black and her group. I also commend the work of the Minister of State, Deputy Butler. She has an enormous task ahead of her but her passion and personal sincerity will win through, as will that of the Minister of State, Deputy Feighan. I

thank her for being here today.

**Senator Sharon Keogan:** I welcome the Minister of State to the House again. I am grateful to have the opportunity to address her and my colleagues on a matter of grave importance. There is surely not a family in this country that is not affected by the issues of mental health disorder, dementia or intellectual disability. Mental health is an often overlooked and neglected aspect of healthcare in this country. Our history is not an enviable one in that regard. To our shame, this failure is not merely a feature of our history. It continues right up to the present day.

Mental health continues to be the poor relation in healthcare in terms of investment in services and treatment. The societal stigma associated with these issues, born out of ignorance, must be dispelled and consigned to history. To our shame, we still do not allocate adequate resources to provide much-needed mental health services. It is recommended internationally that approximately 16% or one sixth of health expenditure should be spent on mental health. Ireland spends less than 5% yet many studies show that we have a higher prevalence of mental health problems than other developed nations.

In 2018, the OECD Health at a Glance report showed Ireland having the third highest rates of mental health illness out of 36 countries surveyed. It estimates the cost of our mental health crisis at more than €8.2 billion annually. That is not just an economic abstraction. There is also a human cost. Behind the cost to the economy and the health system, is a story of personal pain, suffering, distress, anxiety, loneliness, addiction, homelessness, suicide, grief, death, tragedy, missed education and employment opportunities, unfulfilled potential and lives not lived. For anyone with any insight or an ounce of compassion it is truly an awful vista. The number of psychiatrists we have *per capita* is at the bottom of the international league table. If any of this is grossly inaccurate, I would be grateful to hear the Minister of State go on record to advise this House otherwise.

On a more personal note I ask her to examine the issue of funerals and bereavements and the effect the restrictions are having on the health of those left behind. Many of us have had people we know pass away from Covid-19. Many of the people who are passing away are in their 70s, 80s and 90s. Religion and faith played a significant role in their daily lives. Many of these older people would have gone to mass daily and that communal worship was taken away from them. Country churches may only have had ten to 15 people congregating each morning for that most important aspect of people's lives.

Currently, ten people are allowed to attend a funeral. Many families of the generation that is passing now may have six or up to ten or 12 children, so how do they choose who goes to the funeral? People are getting left out, including sons-in-law, daughters-in-law, brothers and sisters and grandchildren, etc. This is the effect that the restrictions on funerals have on the people who are left behind, and that is cruel.

Churches are very suitable for social distancing. Taking away faith from older people, including taking away access to priests who can anoint them before death, is wrong. I have heard horror stories. I was very fortunate but many people were not. Sometimes the diseased bodies were not dressed but were put into a body bag with the hospital gowns. I have heard of families who had loved ones brought straight to a grave without having the funeral mass. How uncompassionate is that? Will the Minister of State consider how we are dealing with funerals and bereavement in this country? Ireland is better than anywhere else when somebody dies in the community but the Government has robbed families of support in a time of grief. It is



inhumane to stop people showing solidarity with grieving families. Surely we can find a safer way to conduct funerals and continue to support grieving families.

**Senator Niall Blaney:** I thank the Minister of State for making herself available at such short notice. It was just last Friday morning that I rose here to ask for such a debate. I am glad it is happening so soon. It is only right as it is a relevant topic that should have the attention of most of us.

There has been much good discussion today. I will first discuss our schools. The younger cohort in primary schools do not have the same access to social media etc. and they do not currently have a voice. Before making the rest of my comments, I appeal to the school unions to put their heads down and do their best to get the children back to school and sort out the questions around the leaving certificate.

The pandemic is causing mayhem. A recent medical journal article by Dr. Brendan Kelly of the department of psychiatry in Trinity College Dublin, entitled “Impact of Covid-19 on Mental Health in Ireland”, outlines the widespread concern about the impact of Covid-19 and associated restrictions on mental health. He reports that evidence to date demonstrates that the combined effect of the Covid-19 pandemic and the associated restrictions is that approximately one person in every five in the general population in Ireland has significantly increased psychological distress, including anxiety and depression. Risk factors include being female and living alone. Rates of significant psychological distress among healthcare workers are approximately double those of the general population. To alleviate this, healthcare will require careful rostering, ability to take leave, organisational support from employers and, where necessary, psychological first aid. The Covid-19 infection affects mental health both immediately through depression and anxiety and, most likely, in the longer term, especially among those who are hospitalised, through traumatic stress and post-viral syndromes.

Last year, Maynooth University and Trinity College Dublin studied 1,000 people in March and April, during the initial restrictions, finding that 41% of respondents reported feeling lonely, with 23% reporting clinically meaningful depression, 20% reporting clinically meaningful anxiety and 18% reporting clinically meaningful post-traumatic stress. A peer-reviewed study of 847 members of the public in Ireland between March and June 2020 also found significant increases in incidences of depression, anxiety and stress, compared to before the restrictions. A survey of 195 psychiatrists of the College of Psychiatrists of Ireland, conducted in May and June 2020, found that the majority reported increased referrals for generalised anxiety disorder, where there was a 79% increase; health anxiety, with a 72% increase; depression, with a 57% increase; and panic, with a 54% increase.

All these things culminate in the need for Government action. That is why we are having this debate and it is what we are calling for. While many propositions will be made in this debate today, we are going to have to adopt an approach to this issue that is new and different, and other to what has been done heretofore. I know that waiting lists have been addressed in the past, with the National Treatment Purchase Fund. Other countries are adopting initiatives such as giving vouchers to GPs. We may need to do something like that, and give vouchers to GPs for those who do not have access to or cannot afford to see psychiatrists or psychologists, etc. I know that across the Border people are given vouchers, even just to go to the gym. We must think outside of the box. I welcome the opportunity to address this issue today.

**Senator Emer Currie:** I want to acknowledge the amazing work of our front-line staff in

our mental health services, and all the organisations supporting people at the moment. They are thinking outside of the box and pivoting in how they connect with groups, such as school classes and sports teams. In Dublin 15, we are blessed with a network of community centres. In places like Huntstown and Castleknock, when people could not go to the community, the community came to them and looked after our most vulnerable. I am very proud of the response that our local communities led through the lockdowns.

There is no doubt that there is much work to do when it comes to our mental health. I know that the Minister of State is committed to this work. We talk about how Covid has exacerbated vulnerabilities across sectors. It has also exacerbated problems for people. People are under acute pressure at the moment, but the effects of Covid on our society could last for years. I agree with Senator Black that mental health needs to play a key role in our Covid recovery.

I am concerned for older people who are locked away in their homes for months on end. People are bereaved and have been unable to attend funerals for their children. Parents of children with special needs have had their routines turned upside down. Children and young adults have missed social and developmental milestones. Business owners are under stress. Victims of domestic violence are affected, as are women who are bearing the brunt of pandemic parenting, homeschooling and domestic duties. Expectant and new parents are being left isolated at a vulnerable time. Covid sufferers and front-line workers are affected. The list goes on.

The Psychological Society of Ireland conducted research early in the pandemic which highlighted widespread distress among the general population in several counties, with specific reports of incidences of depression, anxiety, PTSD, reductions in life and personal relationship satisfaction and increased levels of loneliness. Interestingly, internationally and in Ireland, the age group that is impacted most by loneliness is that of those aged 18 to 34. While there are pockets of positivity, where there are acute problems, they are running very deeply.

Access to services in a community setting has never been more important. It is the foundation of mental health access, laddering up through primary, specialist and acute care. I fundamentally believe that we need more public access to talking therapies. The increase in online access to services and the introduction of the national crisis textline have been great, but the Minister of State and I both know that we need more, and we need more staff. The budget for mental health services is over €1 billion and promises an increase in mental health community teams, CAMHS, assistant psychologists and psychologists in primary care and in Jigsaw services. However, targets have been set before, and we are still behind on them. I note, from the Delivering Specialist Mental Health Services report of 2019, that we went from 69% of new development posts being filled in 2017 to 17% in 2018 and 32% in 2019, while funding for specialist community teams dropped too. The Psychological Society of Ireland, PSI, also conducted a survey which showed 92% of health and social care professionals said the current agency panel system does not work well as a method of recruitment. Where is the Minister of State with that and is Covid affecting the roadmap?

I am on the board of the charity Social Anxiety Ireland. It is a fantastic organisation, which needs to be brought into primary care. Social anxiety is the biggest anxiety disorder in the world, yet most people have never really heard of it or understand it. As a charity, Social Anxiety Ireland exists hand to mouth. If the Minister of State could see the impact that its 12-week group therapy programme makes, she would be amazed. I will speak to the Minister of State about that separately as my time is up.

**Senator Ivana Bacik:** I welcome the Minister of State to the House. She is always very welcome. I thank the Leader for setting up this important debate. It is good to have the opportunity to speak on mental health and Covid. The number of speakers lined up this afternoon shows just how important it is and how seriously we all take it.

I join with my Labour colleague, Senator Hoey, in acknowledging the immense impact that Covid has had on everyone, as well as on mental health, feelings of isolation, loneliness, distress and stress. Others have eloquently spoken about the true impact upon mental health.

It is not particularly helpful to blame the media for reporting in a straightforward and a fair way on what is going on. I commend in particular some of the really striking and moving reports we have seen in the past week alone from RTE “Prime Time”. One last week involved going out with an ambulance crew in Cork and another report this week came from Tallaght hospital. These bring home the reality of Covid for front-line workers. That is really important work the media are doing.

I would be critical, however, of the Government’s lack of communication as to a plan for getting us through this. That matter in particular is why all Members are hearing that everyone is finding this lockdown the hardest. There is no light at the end of the tunnel when we are told of another six weeks or another 12 weeks of level 5 lockdown, of living under draconian restrictions without the prospect of a cohesive and clear plan for getting us through it.

This week, my party put forward in the Dáil a clear national aggressive suppression strategy, effectively a zero Covid approach, which would require us to adopt the sort of approach we have seen in New Zealand. We are adopting it anyway in terms of strict lockdown. Such an approach would give people hope. If we coupled it with mandatory hotel quarantining for all arrivals, we would then see a way forward to returning to some sort of normality, pending the full roll-out of the vaccines, and even beyond that, as we know with the new variants coming in that vaccination alone will not resolve the issue. Anyone watching events in New Zealand is struck by how much less stress and how much less impact on mental health the global pandemic is causing citizens and residents there.

It is not possible to debate Covid and mental health without acknowledging that people need to see hope for the future. What is causing the heaviest burden for so many is the lack of hope we are experiencing due to this ongoing feeling of rolling lockdowns and no prospect of getting through it or of what lies beyond. Will the Minister of State pass that on to her colleagues in the Government? We need clear communication of a clear strategy. Then people can live much more easily with the stress, distress and loneliness of lockdown, if they know that we are getting through it with a purpose.

I welcome the fact that front-line mental health staff will be included in the vaccination plan for front-line healthcare workers. That is important. All of us are conscious that those resident in institutions and in mental health centres have been badly hit by the direct effect of Covid. Some 29 persons who were resident in mental healthcare facilities died from Covid. One must think of them, as well as of their families and their friends so sadly bereaved by their loss.

I wish to emphasise the effect of Covid on the mental health of children. Earlier this week, along with Deputy Ó Ríordáin, I launched a proposal for a catch-up scheme for children. A sum of €100 million should be pledged by the Government to enable schools to apply for targeted funding to make up to children for the immense loss they have suffered as a result of prolonged

school closures. This has been recognised in Britain for more than a year. Just last week, the Institute for Fiscal Studies in Britain published a paper stating the crisis in lost learning calls for a massive national policy response. It pointed out the potential devastating effect of the crisis on educational inequalities and the mental health of children. We need to see a similar acknowledgement here of the impact on children. We need to see resources targeted to address the impacts on children and the serious impact Covid and associated school closures have had on their mental health. I rely on the Minister of State to bring these messages back to the Government. I am very interested in hearing what she thinks of a catch-up fund for children. It is an important practical measure we could introduce.

**Senator Fiona O'Loughlin:** The Minister of State is very welcome to the House. I acknowledge her hard work in this area and on older people. I commend her on it.

There is no doubt but that we are bombarded with news about Covid from early morning until we go to bed at night. There is a constant stream of information about death tolls, infection rates and the R number. We need to know what is happening so this is necessary, but in recent months it seems everybody has become an expert on public health. Covid is present in every conversation with others, even here in Leinster House, through our masks, as we keep 2 m apart.

The mental health of every group in society has been impacted. From babies born last year, who have been held only in their parents' arms, to the elderly population in our nursing homes, this virus has truly affected every part of society. We are affected both by the virus itself and the necessary restrictions that have been introduced to try to contain it. Therefore, there is a double whammy. The disease itself has caused significant stress and anxiety. It has increased social isolation. There has been major disruption in our daily lives, particularly in the education sphere. Those in employment face uncertainty and so many have concerns over financial security.

The sandwiched generation, as we call them and about whom I spoke earlier on the Order of Business, are exhausted. They are caring for their elderly parents while trying to work and home-school their children. There is a very real threat of burnout in this case. We have to put in place positive mental health strategies to help this cohort to get through.

Children are missing the structure of school, and children with no siblings, in particular, are very isolated and lonely. Teens have no social outlet whatsoever. Leaving certificate students, in particular, are reporting very high levels of stress and anxiety, particularly since the announcement by the ASTI yesterday. All this is to say nothing of our front-line workers, who have had the most difficult year of their working lives. Many are reporting symptoms of post-traumatic stress.

Grief in the pandemic has been a very lonely place to be, coupled with the absence of our usual rituals of mourning. Jennifer O'Connell had an excellent article last weekend about families mourning in a vacuum. It was heartbreaking to read. Many of us identify with it.

The department of psychiatry in Trinity College Dublin points to evidence that the combined effects of the pandemic and restrictions have caused significant psychological distress in one in five people. The rate is double that among those who work in the healthcare sector. As we move through the Covid landscape and look ahead to when the population will have been vaccinated, we have to consider the possible long-term mental health effects of what we have

experienced in the past year. I refer to everyone from those with a pre-existing mental illness to those who have been particularly impacted by Covid and the restrictions, including those at risk for the first time. These are the children, youths and adults, including older people, whose lives were disrupted by economic and social upheaval.

Interesting research done on the severe acute respiratory syndrome, SARS, epidemic is absolutely worth examining. The final point I will make is on the need for services for our young people. I brought it up before in Commencement matters and I have spoken to the Minister of State about the need for a Jigsaw facility in Newbridge, County Kildare. We have the highest cohort of young people and it is vital. I believe we are high up on the list and I would appreciate it if she would take that from today.

**Senator John Cummins:** I join my colleagues in welcoming the Minister of State to the House. It is always good to have a constituency colleague in the hot seat. She has a challenging role and I wish her the best with it.

There is no question that Covid-19 has had a devastating impact on individuals and families throughout our country. Attention has been paid to our elderly and our young people because they have been so visibly impacted by this disease. In the case of our elderly, obviously they are more vulnerable to Covid-19, though it can affect anyone at any time. In the case of our young people, they have been visibly impacted because of the lack of in-person education, the cancellation of major milestone events and the inability to socialise at a formative time in their lives.

I do not blame the media, the Government or anyone for focusing their attention on our elderly and young people because that is where the visible effects are most apparent. However, when it comes to looking at the impact Covid-19 is having on mental health, the problem is it is often invisible. As Senator O'Loughlin said, it is often the people in the middle who suffer in silence. We have seen that with increased prescriptions for drugs to tackle mental health. We know it anecdotally from talking to constituents, families and friends. If a person has a cast on the leg or a bandage on the arm, everyone will ask that person how he or she is or what happened, whereas very few of us ask people "How are you?" and mean it or expect to get a response back saying "I'm not okay". We have come a long way in recent years in terms of people being willing to say they are not okay and the saying, "It's okay not to be okay", is important in that context. We have opened up more about it but we are not where we need to be for whatever reason, whether it be that there is a perceived stigma or that it is seen as weak to have a mental health problem. The reality is far more different. Mental health can take a toll on anyone. Be it the strongest person or the perceived weakest person, it does not matter. It does not discriminate who it affects.

If Covid-19 has taught us anything, it is that mental health issues can have such an impact and a toll, and even the strongest people who perceive themselves as optimistic and having a positive outlook have started to become insular, to look at the non-light at the end of the tunnel, as it were, and to ask when in the name of God we will get out of the situation we are in. I consider myself lucky that I have a job and am able to travel to Dublin, but many people are stuck within their 5 km. They are in a house or sharing with flatmates in a small area. They have lost their jobs or they are working at home and have to deal with home schooling. So many issues have faced so many people. The effect it has had is huge.

I will finish on the point, which Senator Buttimer raised, about sport and the benefit it can have, not just for our young people but right across society. I say that as a former physical



education teacher. That, above all else, is something we have to grasp and try to find a way to facilitate people to exercise and meet in small groups or pods to engage with others, because that has such a positive impact on our mental health.

*Sitting suspended at 3 p.m. and resumed at 3.18 p.m.*

**Senator Timmy Dooley:** I welcome the Minister of State and I welcome the opportunity to contribute to this debate. Mental health has always been the Cinderella of the health service in this country, or until recently anyway. It has been underfunded and under-provided for. I have great confidence that the Minister of State, with her knowledge and background and the experience she has brought to her role, will do everything in her power to address that. Mental health has never been more to the fore, because of the pandemic in which we find ourselves, with the enormous strain and pressure on vast stretches of society. It is not just about people who have lost their jobs, although that is a major mental burden for them in trying to make ends meet; there are also people who would never have experienced, nor have expected to experience, the kind of personal isolation that is now part of their everyday life. We need to be careful with the restrictions we have put in place and with how we manage them and reach out to people.

I am very conscious that the younger cohort of people have suffered more than any. Whether young adults, students or people who are in or out of college, they are under enormous pressure. I appeal today to the Association of Secondary Teachers Ireland, ASTI, to go back into those talks and engage fully and appropriately. No dispute was ever solved by people walking away from each other. For sure, it will take compromise and people will have to take a leap of faith and move beyond their entrenched positions. Teachers, parents and students all want this process to happen and have a successful outcome. From discussions I have had with them, leaving certificate students want a twin-track approach. They want the predicted grades. I do not for a minute underestimate how difficult that will be on teachers. It will, however, be equally difficult for children to sit an exam when they have not had the appropriate face-to-face education time to do it. I appeal to all sides to make that happen.

I am also concerned about the cohort of students who did their leaving certificate last year and who are now in their first year of college. I am concerned with the anecdotal information coming to me through my constituency office about the level of dropouts. I ask the Minister of State to speak to the Minister with responsibility for higher education, Deputy Harris, and engage with colleges to try to understand if we will have a higher dropout rate this year. She might ask him to engage with the colleges to establish how many first-year students have disengaged from college courses between the first and second terms. That information must be available.

What level of outreach have colleges been doing with first-year students? Perhaps, the Minister of State is best placed to advance this case. I have heard crazy stories of young adults who have left the shelter and protection of home, and the controlled system of post-primary schools, and gone into what we all know to be the open environment of third level colleges. They have not had that experience, however. They do not have anybody to rely on or to support them. In many cases, they are sitting in college accommodation, isolated, with no interaction other than what is happening online.

I have heard of cases where certain lecturers are putting the course online, effectively giving students the book and telling them to go and learn it and do the exams. I am sure they are isolated cases. However, I want the Minister, Deputy Harris, to engage fully with the third level

sector and come forward to us, insofar as he can, with information about the important matter of dropouts and the mental health issues that have been felt by those in first year, and try to understand what that engagement has been, or in many cases, has not been, with first year students.

There are obviously huge implications for this year's CAO. I heard the Minister on the radio today regarding a welcome announcement that there will be 2,000 extra places. Are those 2,000 places on top of the extra places that were provided for last year? Are they in addition to the 8,000 or 9,000 additional places? What impact will that have on addressing the significant burden that is coming on the CAO? The students who drop out this year and do not complete courses will no doubt be back on the CAO again. There is, therefore, a real pressure point. It is adding significantly to the mental pressure and torture on the minds of our youngest in society. I appeal to the Minister of State to engage with the Minister with responsibility for higher education on the basis of the mental health impact on those students.

**Senator Garret Ahearn:** I welcome the Minister of State to the Seanad. I congratulate her on the work she has done since she became Minister of State with responsibility for mental health issues. She has taken a lead on an awful lot of projects. It is an extremely difficult time for people but she has an extremely important role at the moment.

On a personal level, I thank her for the commitment she has shown to County Tipperary. I do not think we have ever had a Minister who has come to Tipperary and Clonmel and has taken such an interest and active role in trying to solve issues related to mental health in the region. She is only over the border and always available for a call. I am grateful for that.

As others have said, Covid-19 has many factors that have impacted on life and people in this country. The biggest scar we will have from Covid-19, when we have people vaccinated and when we have control of the disease, will be the long-term mental impact for people. That impact will be felt by everyone, regardless of what age group they are in. I mention young children who cannot go to school and those doing their leaving certificate, who Senator Dooley mentioned and who are suffering uncertainty and stress with that. College students will have lost almost a year and a half of a four-year course. For anyone who has experienced college life; it is probably the best time of their lives but these students are not having that experience. People who are older and feel isolated are not able to meet up with friends and family and that is extremely difficult. As a Government, we need to be prepared for that and we need to be able to ring-fence funding for the impact that will be felt post-Covid-19.

I was speaking to Councillor Richie Molloy who is very involved with carers. Research shows the impact of Covid-19 on young carers, in particular. I know the Minister of State has a role in that as well and that is important too. Beyond 2021 - everyone is hoping we get back to normal in 2022 - the role we have in helping our communities get over the scars of the last year and a half will be hugely important.

We are quite fortunate in Tipperary in the last year or two with the announcement of Jigsaw. I know the Minister of State has been proactive in getting it up and running. Most people within the county accept that because of Covid, things have been delayed in having a building. It is important to stress Jigsaw has an online service which is available to people in Tipperary and across the country. If the Minister of State has any update on that, I would be grateful if she could send it on because it is important and it has been committed to by the Government and by her. I know a building has been sourced, interviews have been carried out and positions have been filled. Everything is ready to go and it is only being held up - like everything else in

the country - by Covid. If the Minister of State has any update on that, the people of Tipperary and of Clonmel, where there will be a hub with the main centre in Thurles and a second hub in Nenagh, would be interested in it.

I refer to the Minister of State's other brief outside of mental health. I had a meeting last week with a group in Clonmel, headed by Noel Morrissey, about palliative care. There is a new building which the Minister of State will be aware of as she and the HSE are proactive on it, namely, St. Anthony's unit in Clonmel. It is a new top-class facility that is being built. Could the Minister of State send on some information on that? Where is it at and what is the long-term view? We had a constructive meeting. The Mayor of Clonmel, Siobhán Ambrose, was there as were my colleagues, Michael Murphy and John Fitzgerald. It is something that is needed in the town and in the region of Clonmel and Carrick-on-Suir. If the Minister of State has an update on that, I would be grateful to receive it.

**Senator Malcolm Byrne:** I thank the Minister of State for being here and for being a mental health champion. It is clear since the Minister of State has gone into the Department that she has a personal interest in this. I know it is an issue of concern to everybody in this House and right around the country and that the Minister of State is interested in solving the problems. I know her legacy will be to resolve many of the challenges we have been talking about.

I particularly commend the Minister of State on some of the work she has been doing in the area of CAMHS. I know she recognises that it is not a 9 a.m. to 5 p.m. service. She knows about the particular challenges we have had in the south east and she has been active in engaging with Raymond Shannon and others from Talk To Tom and with voluntary groups. If we can move to a position where we have support, particularly for children and adolescents, throughout the week, that would be a noble legacy on the Minister of State's part.

I want to talk about two groups and the mental health impact they have suffered. One sector of society that has been very much affected by the pandemic is that of artists, musicians and those in the creative industry. We know they have been affected economically but for an artist or a musician, what they do is not just a job but it is part of their identities. I know many of those in that sector are suffering because they are not able to perform. We need to look at specific measures. Artists and musicians have helped us through this period. We need to look at specific measures, as we are coming back as a community, to ensure that mental health supports are there for the creative sector.

The other group many have referred to is young people. When I was 18, 19 or 20, the last thing I wanted to do over a weekend was be stuck at home with my parents watching "The Late Late Show", particularly given that the starts of many of those shows are depressing. We have got to look at a new deal for young people coming out of this who have missed their 18th and 21st birthday parties. They have missed all of the opportunities that we had as young people.

I would share the concerns around the pressures that are being faced by those who are in first year in college and by those who are doing their leaving certificate. Whatever the resolution on the leaving certificate issue - I support giving leaving certificate students the choice - what is most important in this debate is those students' mental health and well-being and helping them to fulfil their dreams. I ask that when we come out of this, we look at a deal for young people to ensure they have the opportunity to have as full a life as possible having missed all of those important rites of passage.

It is fair to say that like nearly everybody else, I am fed up. I am tired of the restrictions. I want to go out and meet friends for coffee. At this stage, everyone is just waiting until we get the vaccines so that some level of normality can resume. It means that tempers are frayed. What we, including the Minister of State, have got to do is talk about positive mental health. We have got to start to talk about how folks might realise that everyone is going through a difficult period, be kind and be a little gentler. I wish the Minister of State a happy Valentine's Day. When we are in the series of love, love is an important thing. It is about stressing those important messages as well. We have to have hope. We have to have love. Those are the qualities that will bring us through this pandemic but that will bring us back together again as society.

I encourage the Minister of State to continue to be a champion. There are specific areas to address that we have talked about in looking at trying to provide mental health supports to people but we have also got to stress that there will be hope and that there is positivity.

**An Leas-Chathaoirleach:** That is possibly a first - to be wished that - in the Seanad.

**Senator John McGahon:** To lead off on the final few points that Senator Byrne made, my sister, Ruth, is 20 years of age. She is in her second year in UCD and she has spent her whole second year on Zoom lectures at home. She does not know it, but I feel so sorry for people of her generation who are missing out on what are the best years of their lives. I look back on my three years in UCD as the happiest times of my life. They really were superb. Young people in this country have been scapegoated for some of the bad behaviour that we see sometimes by the curtain twitchers - the people on Twitter. These young people have been literally locked up and cooped up for the past year and a half. They have borne the brunt of this harder than anybody else. I am certainly in a much luckier position going through this than I would have been at the age of 20 or 21. We need to acknowledge the sacrifices that young people - teenagers and those in their early 20s - have made over the past 12 months.

That leads me on to the second point I want to make in relation to students. I would appreciate the Leas-Chathaoirleach giving me a little latitude on this. Speaking of the mental health struggles for students, I have been doing a lot of work with the students at Dundalk Institute of Technology, DkIT, in my town of Dundalk in the past week. They have, unfortunately, got caught in the crossfire of an industrial dispute between the Teachers' Union of Ireland, TUI, and the president of DkIT, and their examination results are being withheld from them. They are now eight days without having their examination results. Hopefully, the matter will be resolved over the weekend but we do not know yet whether that will happen. The president of the Dundalk Institute of Technology Students' Union, Mr. Taidgh Kavanagh, is an impressive young man who is doing quite a lot of work for the students there. We support the principle of the TUI and the work relations committee which they are engaged with. Unfortunately, the other side walked away from the table. The DkIT management side has walked away from negotiations. As a result, students have been caught in the crossfire and their exam results are being withheld. I will take this opportunity to urge the DkIT management to walk back to the negotiating table, come to a compromise and ensure that students' results are released to them. That is the fairest approach to take. In this debate on mental health, imagine the difficult year that those students have had. They need to know their results, especially if they are in their final year and want to know whether they will get a 1.1, 2.1 or 2.2, which affects where they will go to college. That they do not have their results yet is a disgrace, so I hope that the situation is resolved as soon as possible.

I will turn to my final couple of points on mental health. RTÉ's "Claire Byrne Live" and

other television shows are like the fifth horseman of the Apocalypse at times. I have never seen more doom and gloom. I have stopped watching them. The point is always made that they have to present the other view, but just because it is the other view does not necessarily mean it is right. Zero Covid is a fallacy. I say that because I am from a Border region. I live 15 minutes from the Northern Irish Border and know how bloody hard it would be to secure it. This talk is nuts. Besides trying to achieve zero Covid that way, we have three major ports in Ireland - Dublin Port, Rosslare Europort and the Port of Cork. Freight gets into New Zealand via containers, with one massive ship bringing in 1,000 containers. In Ireland, we have what is called ro-ro, which involves approximately 1,000 individual trucks and drivers coming in and out. How would zero Covid work in that light? How would it work if someone from Belfast or Newry travelled down to Dundalk to do some shopping? It is a fallacy. I understand that people are desperate and are trying to cling on to something, but zero Covid is not the way to go about this. It is like throwing a lifeline to a drowning guy who is looking for a bit of hope in the depths of January when we are all sick of restrictions, lockdown and everything else. We will be proven right on that in a couple of months or a year when all of this is ended around the world, the nightmare is over and we can look back at what worked and what did not.

**Senator Aisling Dolan:** I welcome the Minister of State and thank her for presenting to us. I acknowledge and pay tribute to the 29 people who lost their lives in mental health residential units and to their families. I welcome the start of the vaccination programme's roll-out to the over-65s in more than 46 mental health facilities.

We have heard the statistics and everyone has mentioned the increase in mental health issues. According to Trinity College Dublin's studies, one in five people is suffering. There has been a significant impact, especially on children. Special schools are reopening, which is giving parents hope and respite. Other schools will be reopening. College students have lost their college experience, which is a major issue. The 50808 text line is crucial, as it allows students at home to ask for help and talk if they are feeling down. Most shocking is that domestic violence is on the rise. It is significant in regional areas. There have been reports in *The Connacht Tribune* about the increase in domestic violence. That is scary. What is happening behind closed doors as opposed to outside is shocking.

I am a member of the Joint Sub-Committee on Mental Health, which is chaired by Senator Black. We all speak of mental health and wellness, but sometimes we must ask what well-being is and what it feels like. When we speak of mental health, it is as if well-being is up there somewhere, but well-being is about feeling well in oneself. Sometimes, it is not about the individual but a collective experience. It is about the community a person lives in and how he or she contributes. I suppose I am representing the Roscommon-Galway constituency, but the sense of community in small towns and villages in regional areas is strong. Before we had to deal with Covid, we had to deal with young people leaving our areas, but it is that sense of community that keeps many of those towns and villages going. There is an education for us all about what well-being is.

I am conscious of the particular challenges in regional areas - older populations, particularly in Roscommon and east Galway, and more isolated areas, which we saw from the previous census. Many people live on their own, for example, older people who have lost their loved ones and whose children are living abroad or in cities. It is difficult to find hope. Hope is a very simple thing but that is what we have to give. We have to give hope. We have to understand what well-being is and we have to have something to look forward to, in a nutshell.



I want to speak about the importance of certain activities such as walking and cycling. We know this and that they are wonderful and we need to do them but it is so important to put funding into active travel to get footpaths so people can go out and walk in rural areas because, unfortunately, we cannot do it safely. Some of my colleagues have mentioned the importance of arts, culture, music and heritage. We have our amateur theatre groups, community town hall theatres and rural pubs that sometimes double as community centres and put on plays. They are all run by dedicated volunteers. They are highlights of our communities and they are so well supported but we need investment to support these groups. I am speaking about how mental health is connected with so many areas.

Local and national newspapers and regional stations are very important to me. Print and radio media are crucial to our well-being, particularly for those living in a town or village whose only connection to the outside world is listening to their favourite talk show host on Galway Bay FM or Shannonside Northern Sound. They are who get people up in the morning and who they listen to between 9 a.m. and 12 p.m. or whenever. People know what is happening in the world. With regard to newspapers, we have had many representations this week about the huge drop in advertising for print. There has been a 20% drop. We see support for broadcast. We need to look at support for our regional newspapers also.

The journalists have also been on the front line and we should not forget this. The journalists have been out there, getting the news and putting it into the newspapers at regional, local and national level. They are among the front-line workers who are supporting well-being and making sure there are stories that have some levity as well as the seriousness of everything we are dealing with. My job at home is to collect the newspapers to deliver them to some of my family and they really look forward to that. Once a week, the newspaper comes through the door.

We need to integrate across Departments with regard to education, farming and local government where we see mental health coming in. The *Irish Farmers' Journal* is doing a campaign to phone a friend. There is also the European innovation programme on farm safety, which includes mental health and well-being. We see this happening in many Departments and I encourage it.

**Senator Shane Cassells:** I thank the Minister of State for being here and listening to so many contributions and for leading the charge in this area under her portfolio. Over the past three hours, plenty of people have come in here to tell her what to do. I want to thank her for what she and her team have done. I also thank all of the agencies throughout Ireland with which she interacts for what they do on a daily basis. As this debate is going on they are going about their work.

It is not as if people are not aware that we are facing a massive attack on our mental health and mental well-being but the response has been substantial from a range of groups. This morning, on my way here, I do not know how many times I heard the advertisement from the HSE for *yourmentalhealth.ie*, making sure the message is getting out continuously and telling people there is practical advice for them. This is happening on a daily basis and I acknowledge this and the work being done by the Minister of State.

Awareness is the major issue and it should be the key aspect of this debate. I know it is the key aspect of the work of the Minister of State. Many of our community groups have played a leading charge in this respect because they cannot fulfil their normal role, be it as a sport club, a

church group or a school. All of these groups, instead of doing their normal work, are remembering they are made up of members and individuals and they are reaching out to them on a continuous basis. Senator Buttimer was right in what he said earlier, that when people return to the fold of these groups they should be asked whether they are okay and that this becomes part of the norm. I acknowledge this is already being done.

Over recent years, we have become more open about protecting mental health and promoting positive mental health because it is a shared experience. This pandemic is testing us all in a way we have not been tested previously. Even those of us who might feel we are strong and resilient are feeling challenged and we do feel low. We wonder whether we should even be talking about it because other have suffered more because they have suffered a bereavement. People have lost in different ways. They have possibly lost their jobs or interaction through work or school, as Senator Byrne mentioned, sport, going to mass and the simple act of meeting people.

In an earlier debate, Senator Mullen called for resilience and said we needed to encourage people to be more resilient in the face of the onslaught of negative news. I believe we need to be more compassionate. Nothing can be better than showing compassion. I want to finish with some words by a fellow countyman, a man from Ashbourne called Rory O'Connor. He is a decent club footballer for Donaghmore but he is more famously known across Ireland for his videos and social media site called Rory's Stories that has 600,000 followers. Daily he uploads funny videos that have been a source of great fun for thousands of people and gives people a light-hearted moment. Lifting the mood is exactly what this man is about because he has had his own personal battle with mental health. Last Christmas, he launched his book that detailed his battle and journey to the good place that he enjoys now. His book and videos have been a source of hope for so many people who have and do suffer from mental health problems. I pay tribute to him, and wish to put that on record, because he has done more for people than he knows.

I will end by citing a couple of the words that he posted on his site to give people encouragement. He said:

Just remember to look after our own self thoughts. No doubt it's hard to remain positive, considering this has been going on for so long now. But remember you are not alone, so many others are struggling, struggling more than we have before. Let your family and friends know if things are very bad in your head. It might not change the world, but it will help you manage things a bit better by talking. We can all relate to somedays going OK and you're upbeat about things and other days it feels like the weight of the world is on your shoulders and its difficult to see any positives. Enjoy the good days and battle through the bad days. Stay safe and head up, ... [we will] enjoy normal times together when they come back and they will come back.

Never were truer words spoken. I say well done to the Minister of State for all that she is doing.

**An Leas-Chathaoirleach:** In the temporary absence of our good friend, Senator Norris, the father of the House, I call Senator Paddy Burke.

**Senator Paddy Burke:** I welcome the opportunity to say a few words on this very important topic. I welcome the Minister of State to the House and wish her well with her endeavours

in terms of this topic that affects nearly every household in the country at some stage or another. I compliment her on the great work that she is doing in this regard.

A lot has been said about the activities that should take place to help the mental health of people, and I fully agree. There is more that the Government could do to open up areas that are locked down at the moment due to Covid. In the middle of last year or whatever, the Government locked down certain counties or municipal districts. If that were done it would allow people more freedom to walk in their own counties. There are many areas, including in my own county of Mayo where we have magnificent hillside and mountain walks. These places are not being utilised at the moment. I do not think that there would be an overflow of people in those areas, so allowing people to explore these walks would greatly help the mental health of an awful lot of people. At the moment people walk in built-up areas like Castlebar, where we have a magnificent walk around the lake that is availed of by many people. If other areas were opened, it would give people a greater opportunity to go mountaineering and so forth. I believe that golf courses could and should be opened up because there are more people walking around the golf course at the moment than there would be if they played golf. I do not see what the difference is between people walking around a course and holding a stick in their hands to hit a ball. This is an area that the Government should consider in terms of 5 March.

One of the big areas that concerns mental health is drugs. I compliment the Garda on taking the step to perform drug tests at work. The Government should consider introducing drug testing in the workforce. There are countries that have drug testing in the workforce, particularly in the construction sector and in many other areas. It is very prevalent in Australia, for instance, particularly if people are working on high-rise buildings or driving machines. It is only fair for the safety of others that drug testing would take place. I ask the Minister of State to take a serious look at this. We are now approaching a phase in which people will be working from home. People who are on drugs will not be noticed, whereas if they have to go to the workplace somebody might notice they are on drugs. The issue is not to find out that they are on drugs but that the mental health of those people can deteriorate if they do not get help, and they may not get the required help if they are working from home. It is an area we should examine.

I saw a statistic more than two years ago, that 50% of people in the country are taking drugs. That is a massive statistic. I do not know whether it is true, but if it is, it is shocking. We have seen the number of fines from the Garda Síochána. It is doing great work in detecting drugs. Even today, €7 million worth of drugs were found in Kildare. Imagine €7 million worth of drugs. In the little village of Balla in my home area, the Garda found €73,000 worth of drugs. This is a small, rural village. I believe it is an epidemic in the country. It is something that is greatly affecting the mental health of many people, more than anything else in my view. There certainly must be a demand when so many drugs are coming into the country. I hope these are matters the Minister of State will examine.

I congratulate her again and wish her well in the great work she is doing in this area, because it involves a lot of misery for a large number of people. It brings great misery to many families. It is not a stigma, in my view. We all should reach out to people who need help, and I compliment the Minister of State in this regard.

**An Leas-Chathaoirleach:** There is another Member on the list of speakers, but the Member is not present. I call the Minister of State.

**Minister of State at the Department of Health (Deputy Mary Butler):** I thank the

Members for their time today. It was a very good debate. The standard of the contributions was excellent. They were well thought out. Obviously, there were criticisms but they were constructive. I take on board everything that has been said in the debate, and I welcome it.

I will try to respond as far as possible to the questions that were raised. How much time do I have?

**An Leas-Chathaoirleach:** We have some time on hand. If you can hold everybody's attention, you can keep going.

**Deputy Mary Butler:** I will try my best.

I welcome the opportunity to restate my and the Government's commitment to the continued development of mental health services and supports during and beyond Covid-19. The pandemic has been very challenging and, in response, a range of mental health supports has been established. At the outset, we put in place proactive measures to provide for any increase in service need. That is the most important point I can convey today. Supports were retained from last March when we had the initial wave of Covid-19. Some 85% to 90% of acute supports were retained. That message must be conveyed to the public because there is a very negative narrative circulating that nothing is being done with regard to mental health. A massive amount of work is being done. I commend every person involved in the care of people with ill mental health, be it in the acute setting or the community setting. Wherever it occurs, people are working their fingers to the bone each day to help people with ill mental health. They must be acknowledged.

Residential services were quickly identified as the highest risk areas for staff and service users. With this in mind, the Department asked the Mental Health Commission to develop a risk control and monitoring framework for these facilities to identify and address infection risks. As we know, infection prevention and control are the key issues in a mental health or healthcare setting. Facilities were reconfigured to reduce the risk of cross-infection. In addition, staff training, personal protective equipment, PPE, provision and testing were implemented to recommended levels. As a result, HSE residential mental health services have continued throughout the pandemic. To ensure safety there has been reduced capacity in some settings, especially in respect of face-to-face meetings. There had to be a blended approach to that. Much of it had to be done by telephone or Zoom but it did continue. There have been some outbreaks but the procedures in place have reduced the impact of that as much as possible.

At this point I would like to remember the 29 people who died due to Covid-19 while resident in a mental health centre. I believe that without the work on outbreak control the situation could have been much worse. I commend all those involved who worked tirelessly to keep people as safe as possible.

I will pick up on a few points made by Senators. Senators Paul Daly and Keogan raised the issue of bereavement and the many challenges posed in that regard. I want to put on record that I have allocated money this year for more bereavement counsellors to be hired but counselling hours for bereavement and for bereavement crisis have been available during the entire time of this pandemic. There is a lot of support available of which people might not be aware.

There was much talk about bereavements and funerals in the debate. I would say to Senator Keogan that the Government is not stopping people attending funerals. Covid is stopping them attending because we have the evidence to prove that there were significant outbreaks

associated with funerals. My 89-year-old aunt passed away on 1 April last year. She was one of a family of ten and none of her siblings - my own mother included - could go to the funeral. Twenty people were allowed to attend it, so our generation went instead. My mother still cannot believe to this day that her sister died and she could not go to the funeral and grieve. We were lucky to be able to record the service on an iPad and they were able to watch it. I understand at first hand how difficult it is but the challenges around funerals do not arise when one is inside the church. The churches have been fantastic at keeping people socially distanced. The distances are marked out as they are in this Chamber. However, the gatherings before and after the funerals is where the challenges arise. I am a weekly mass-goer and I would love to be able to go back to mass. I know such attendance is a comfort for many people, regardless of their religious ethos. I hope we will be able to go back there as soon as possible, having started the vaccination process.

That leads me nicely to vaccinations, which is also linked to mental health. As Members are aware, we started by vaccinating the most vulnerable who were in the nursing home settings. The figures I have this week indicate that to date, unfortunately, we have lost 1,739 people in the nursing home settings. I commend again the work that has been done by public, private and voluntary nursing homes. They have been at the forefront of this pandemic for the past ten or 11 months. It has been very difficult. Unfortunately, people in nursing homes are very vulnerable. They have underlying conditions and when Covid-19 gets into a facility it spreads like wildfire. That has been very challenging. Obviously, they were prioritised first along with front-line workers but next Monday we will start the roll-out of the vaccination process for those over 70. We will start with those over 85, the majority of whom have been contacted by their GPs to arrange that. It will start with 12,000 doses of the vaccine vials being distributed to GPs next week.

This is a huge logistical challenge and there have been criticisms of the amount of time the vaccinations are taking but there are 490,000 people aged over 70 in this country. Many of them live in rural areas. Many of them might not be able to travel from their homes so the logistics around all of that are being put in place. The roll-out of the vaccine has to be safe and effective. We have also committed to giving two vaccines within 28 days. That makes it a challenge logistically but it is starting. The only limit to people getting the vaccine is supply and to date, the supply has been difficult. I was doing an interview earlier and before it I looked for the figures. We have received 273,000 doses of the vaccine and 250,000 doses have been put in people's arms. We have to keep a buffer for anyone who got their first dose of the Pfizer-BioNTech vaccine because there is a guarantee that they will get the second dose within 28 days.

There has been much criticism that the vaccine is not being rolled out fast enough. Nobody is sitting on a vaccine and no vaccines are in cold storage. I would love to say there is one for everybody in the audience; there will be but it will take time. I hope the number of vaccines coming into the country will ramp up significantly in April. This has affected older people's mental health but nobody will be left behind with this vaccination process. If somebody cannot leave his or her house, plans will be made to ensure the vaccine gets to them.

There are some older people not registered with a GP in this country for some reason. They may have come into the country or perhaps they chose not to have a GP. They need to contact the HSE as a matter of priority on 1850 241850. They will be facilitated through their nearest GP and I would appreciate it if everybody could get that message out there.



I compliment Senator Black, who is a passionate advocate for mental health. She spoke about setting up the RISE Foundation and she is the Chairman of the Oireachtas Sub-Committee on Mental Health. I would like to work closely with her and look forward to a meeting we will arrange in the next couple of weeks. It has been said by many today that this is not just about the Department of Health, and that is why the new Sharing the Vision policy is cross-departmental. It goes across the Departments dealing with social protection, housing and business. People's mental health can be affected for myriad reasons and having everybody working together is very important.

Community mental health teams continue to provide services, with adaptations in place to protect service users and staff. Online psychosocial supports are now embedded in service provision. As Senator Black mentioned, there are many people with acute mental health conditions and I am thankful they are being looked after. A position has arisen in the past 12 months where people's well-being is being affected, leading to changes in mood, anxiety and depression. There are challenges with work and having enough money to pay the mortgage. They are trying to homeschool or there may be college students who cannot go to college. These people may be trying to care for others. There are many challenges but there are supports, and I will touch on that.

There are telehealth services, some of which operate seven days per week, including *YourMentalHealth.ie*, the information line 1800 111 888 and the crisis text line 50808. Non-governmental partner online supports include MyMind, Turn2Me, SilverCloud and Jigsaw. MyMind alone delivered nearly 10,000 free online appointments in 2020 and provides counselling in 15 different languages. We are now a country of many different races and languages, and we do not all just speak English and Irish. I was questioned in the Dáil last week about what we are doing for people in direct provision, for example, with ill mental health and those supports are there in up to 15 different languages. We are trying to ensure they are accessible to everybody. There is still some unused capacity in this area and the Department and HSE continue to plan for any surge in demand as it arises.

We do not yet fully understand the impact of Covid-19 on mental health but it is acknowledged that there have been increased presentations in certain areas. I am especially concerned about the rise in eating disorders among girls and young women. The 2021 budget allocation will enable continued development of the national model of care in eating disorders through the establishment of three new specialist eating disorder teams. I am fully committed to ensuring that the total funding of €3.94 million allocated to this important programme will be spent in full this year.

Currently, data indicate no evidence of a significant increase in self-harm presentations to accident and emergency departments, as was mentioned a lot today.

The significant increase in those presenting to accident and emergency departments with self-harm has been much referred to today. It is too early to speculate on the reasons for this increase. Many of the causes might be hidden at home and may not be brought out into the open. It is also too early to speculate on suicide figures, which the Central Statistics Office reports each June, following the coroners' verdicts. However, early international evidence has indicated no increase in suicide, and a decrease in self-harm suicide attempts, early in the pandemic. These findings should be interpreted very cautiously as we await more up-to-date analysis.

Of course, a negative mental health outcome for our population following this pandemic is

not inevitable, if we set about responding to the challenge in a cohesive manner. In line with the WHO guidance, the HSE has published a psychosocial framework. It builds on a range of supports that were introduced early last year in response to Covid, including self-harm and psychological first aid supports for staff. The framework acknowledges the impact of the pandemic on mental health in all areas of society, and identifies priority groups, including healthcare workers and people bereaved due to Covid. The framework provides a cohesive, co-ordinated, consistent and collaborative approach to the provision of mental health services and supports across five key levels, from mental health promotion to specialist supports.

It was stated earlier that good mental health programmes have been in place before. Senators have asked if such programmes will be implemented and how it can be ensured that the money in the budget will be spent. I am trying to think which Senator raised that issue. The implementation of the Sharing the Vision policy is proceeding. The difference between this programme and others is that the independent national implementation and monitoring committee is in place. It was established last year and meets monthly. In fact, it held its third meeting this morning. It will hold me, the Department of Health, the HSE and the Minister for Health to account. I have no doubt that it will be quick to come forward if it feels that we are not doing what we should be doing. I am positive that Sharing the Vision is proceeding and is proceeding well.

Many Senators have raised the issue of budgets. I know that Mental Health Reform will have written to all Deputies and Senators in the past few weeks regarding the budget. It is fair to say that we have the largest budget in the history of the State for mental health. It totals €1.76 billion, which is a huge amount of money. The most important thing is that the money is spent well, and there is oversight of where it is being spent.

Of the additional €50 million which was secured, €23 million is allocated to commencing the implementation of the short-term recommendations of the Sharing the Vision policy. This includes funding to recruit 153 new mental health workers. There was much talk about CAMHS here today. To be honest, I was appalled to learn that the waiting list for CAMHS has got to the level that it has. Some 29 new staff will be recruited for CAMHS, which is hugely important. It will have a significant impact. I met with the HSE last week to discuss the recruitment of these members of staff. Obviously, Covid will be with us for a long time to come, and we need to have that recruitment process up and running in parallel with what we are doing on Covid. With panels and other aspects, it takes three to four months to recruit people. With recruitment for CAMHS in particular, staff will need specific training on dealing with children. For example, a staff member could be a psychiatric nurse who has only done adult psychiatry. Sometimes staff need to upskill and complete training. It is important from that perspective. We are focusing on this recruitment. I will be meeting the HSE every two months regarding how the recruitment process is going and where we are with it. There is no point in asking the HSE for an update on the process in October or November 2021. It is most important that those members of staff are recruited.

Many Senators have raised the issue of primary care psychology for children. I believe it was raised by Senator Gavan. It is a worrying issue. When one comes into this job, it is necessary to pick and choose what can be done in a very short space of time. Psychological care for children was an area that I was particularly bothered about. I am currently working with the HSE on a proposal to fully develop, at a cost of €5.5 million, a means of targeting the waiting list. There are 4,800 clients under 18 years of age, many with quite complex needs, who have not been seen by a psychologist and are waiting over 12 months. An initiative is being planned

which will supplement the enhanced community care programme to recruit staff on a one-year basis. It will be a targeted approach to get these almost 5,000 children seen this year. That will be a job well done if we can target the CAMHS and psychology waiting lists.

There are many people in posts who will be able to look after their routine lists. However, when a waiting list builds up to that extent, it is hard to target it. I want to put in a targeted one-off approach for one year only to get down the 5,000 children with complex needs who need to be seen quickly. I am hoping to have news on that soon. We are at an advanced stage on this. I have spoken to the Minister, Deputy Stephen Donnelly, and he is supportive of providing the money for it. We are just trying to finalise the details.

When issues come up with the provision of psychologists and psychiatrists, the problem is not money but getting the consultants and dedicated qualified staff to carry out this work because very few of them are unemployed. It is a question of trying to get that over the line but we are working hard on it.

Up to €15 million will provide additional capacity in private sector approved centres, more step-down beds and extra resources for community mental health teams, as well as reconfiguration of facilities.

With regard to other developments, the National Forensic Mental Health Service will be relocated this year from Dundrum to a purpose-built facility in Portrane. I thank Members of both the Upper and Lower Houses for supporting the legislation in December to facilitate this move. I am hopeful the relocation will happen in the second quarter of this year.

The review of the Mental Health Act 2001 is concluding and the heads of the new Bill will be published soon. A significant amount of work is involved in it but we want to get it right. Connecting for Life, the suicide reduction strategy, has been extended to 2024. When I came into office, it had expired, running from 2015 to 2019. I compliment the work of the National Office of Suicide Prevention, which is doing a huge amount of work in this area.

I thank all those working across the mental health sector who continue to provide services and supports during these difficult times. I am fully committed to continuing to develop and enhance our mental health system for all individuals during and beyond this pandemic. Senator Cummins referred to the stigma around mental health and its challenges. We have come a long way since last March. People are now standing up and they are not afraid to talk. It has been difficult for children, parents, students, those working from home and those who have lost their jobs. It has been the most challenging time but people are resilient and upbeat as well. The vaccines have given people much hope. It is slow at the moment as we are limited to supply. However, as soon as we have it, we will get it into the arms of every single person. I thank the vaccination teams which are doing phenomenal work in parallel to their normal work. It is absolutely fantastic that this work is being done.

Senator Cassells made an upbeat contribution. The response has been substantial from all those working in mental health supports. We need to move away from the negative narrative. A significant amount of work is being done, for example through the In This Together campaign. Up to €7 million was allocated to the Keep Well campaign. We must encourage people to keep well, to stay connected, to get out for that walk if they can and to do the very best they can to support each other. It is difficult but, by everybody pulling together, we can get through this. The light is at the end of the tunnel with the vaccine. Many people will be affected for a long

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time but I will not be found wanting as Minister of State to get the supports into the community that are needed.

**An Leas-Chathaoirleach:** I thank the Minister of State and colleagues for the sensitive and serious approach to this real issue. When is it proposed to sit again?

**Senator Aisling Dolan:** Next Monday, 15 February at 10.30 a.m. in the Dáil Chamber.

The Seanad adjourned at 4.15 p.m. until 10.30 a.m. on Monday, 15 February 2021.