Community-based solutions for ageing well (I) International perspectives on housing and empowerment

Concept and international network

Integrated Service Areas (ISA)

German and Dutch perspective

Holger Stolarz housing and care concepts in residential areas Bonn, Germany

22nd Nordic Congress of Gerontology 25-28 May 2014 in Gothenburg

Future challenges

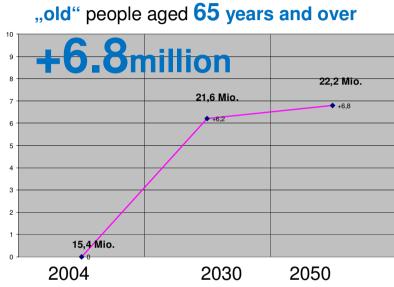
Future challenges in the support of the elderly

- > Population is ageing
- Higher demand for care services due to increasing life expectancy.
- ➤ Increasing number of people living alone and decreasing number of relatives who can give support
- Changes in housing preferences

Demographic Change 2004-2050 in Germany

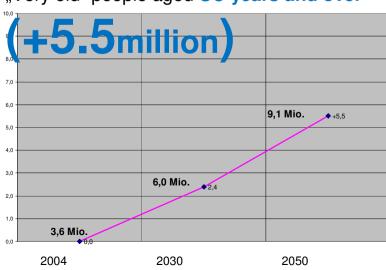
plus 7 million "old" versus minus over 14 million "middle/young"

million people



"Very old" people aged 80 years and over

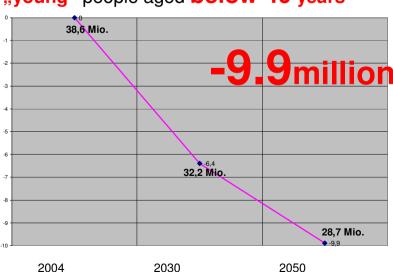
million people



"middle" aged people 40 - 65 years



"young" people aged below 40 years



Typical Features of the Housing and Care-System in Germany

Housing: owner occupied 40 % (low)

(number of flats) **private tenants** 35 % (high)

housing company 25 %

Type of care	Number of persons
Home care with professional services	470,000 (23 %)
Care in nursing homes	650,000 (32 %)
Home care without professional services	930,000 (45 %)
Total	2,050,000

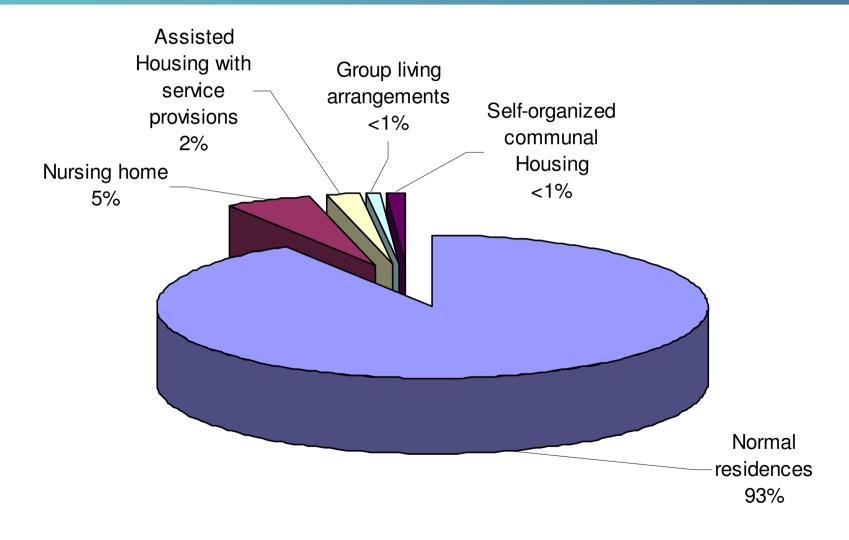
Care providers Home care (2007) In-patient care (2005)

Welfare organisations 53% 55%

Private care providers: 45% 38%

Public care providers: 2% 7%

Forms of Housing for the Elderly in Germany Percental distribution



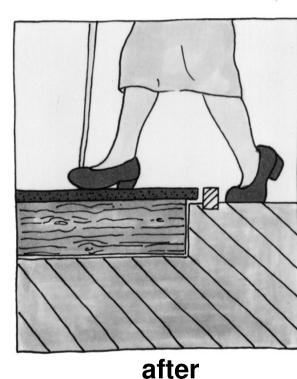
Source: Bundesverband Freier Immobilien- und Wohnungsunternehmen (BFW) 2008: BFW – Research, Berlin

Normal Housing

Housing Adaption

Example for Simple Building Measures



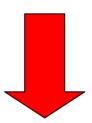


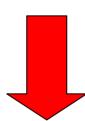
- Structural Remodelling of the Existing Housing Stock
- Individual Housing Adaptation
- Percental Distribution
 Counselling Services
 for Housing Adaptation

Steps and Thresholds

Basic idea of Integrated Service Areas

Structural changes in the care of older people





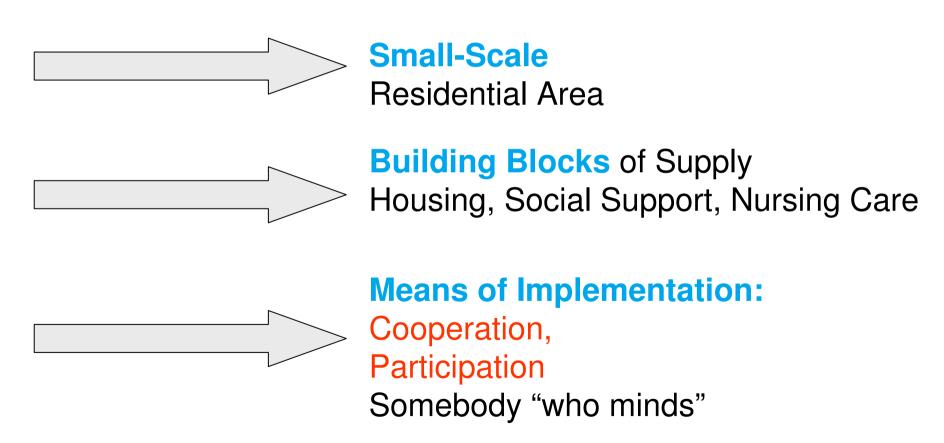
Change from a provision oriented to a participation oriented care

Small scale and interlinked structure of care within residential areas



- □ Economically necessary
- □ Serves the needs and wishes of older people

Structural Features of "Integrated Service Areas" (Quartierskonzept)



The Building Blocks of Integrated Service Areas

Fields of Supply



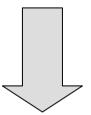
- ➤ Housing Adaptation
- Barrier-Free Housing and Surroundings
 and Infrastructure
- Forms of Housing for Self-reliant Living

(e.g. Communal Housing)



- Counselling,Coordination,Home Help
- Social Integration and Mutual Help

(e.g. Meeting Places)



Nursing Care

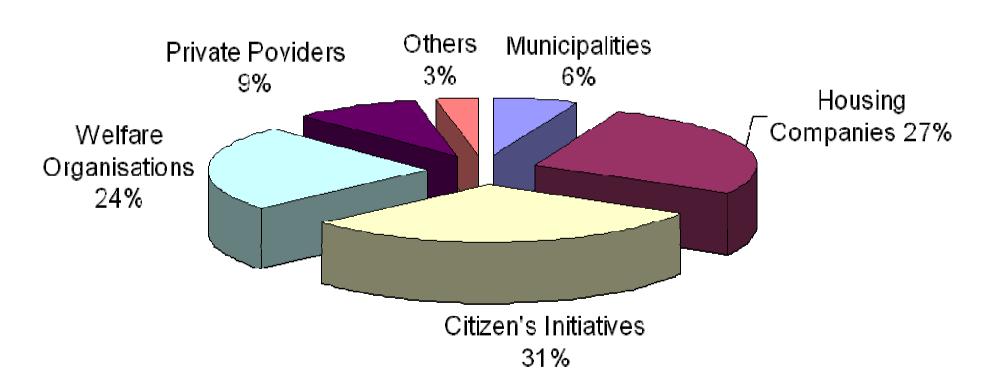
- Domestic Care Linked to the Area
- Forms of Housing with Care Provision (e.g. group living)
- ➤ Integration of Nursing Homes, Short-term -and Day-Care

Implementation: Cooperation and changing roles of players

- Municipality: sometimes director as well as provider of finance, mostly supporting and moderating partner
- Welfare Organisations: important partner but also competitors, taking responsibility for the local area, cooperation with citizens
- Housing Enterprises: Both housing (investment, organisation) and (increasingly) social service provision, cooperation with care services

Means of Implementation: Cooperation Main Actors in "Integrated Service Areas"

Main Actors



Implementation: Participation of Citizens

- Delivering care within families
- Counselling, support services,
 neighbourhood help (payed/ unpayed)
- Citizen's associations, organising activities
- financing/sponsoring (as for housing coop.)
- Taking the role of initiator or director (as for example in Eching, D)

Example (D) Eching Service Centre for Older People (ASZ)



Centre of the Municipality with Service Centre

Example Eching (D) Features of the project

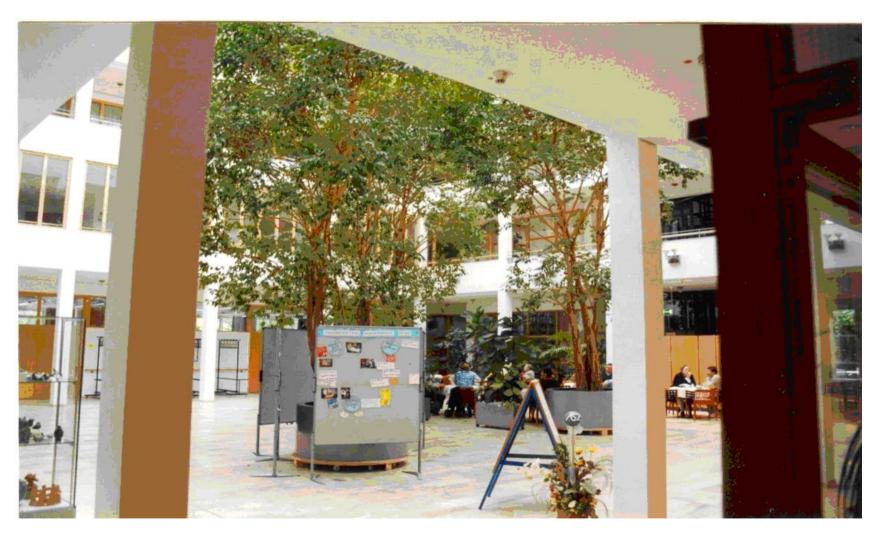
- 13,600 people (1 integrated service area)
- Start of service centre: 1995 (planning mid 1980)
- Old peoples- and community centre with assisted housing (60 units) and services
- Local care chain without nursing home (only one residential care group)
- Provider: citizen's association (founded 25 years ago)
- Cooperation with municipality (financing) and all local players

Example Eching (D), First Building



ASZ Eching Building

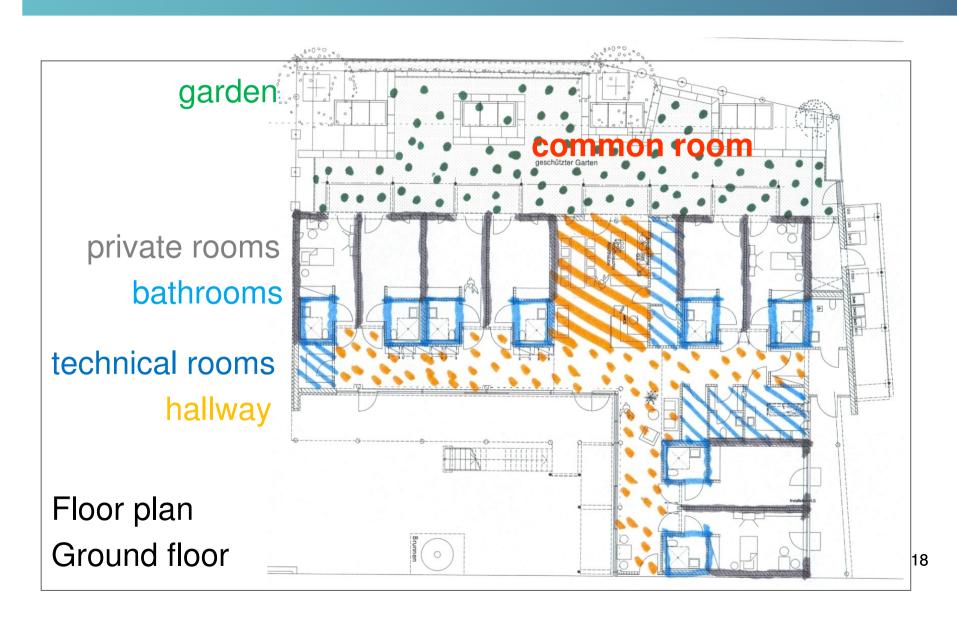
Example Eching (D)



Courtyard ASZ Eching Building



Example Eching (D): Second Building Residential Care Group for Dementia Sufferers



Example Eching (D): Second Building Residential Care Group and Assisted Housing



Top floors:

Assisted housing

Ground floor:

Residential
Care group
for dementia
sufferers

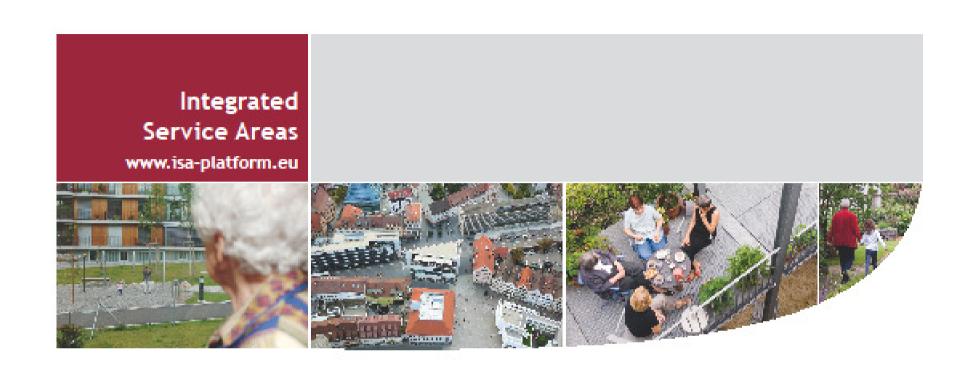
Eching Service Centre for Older People Discussion of the Concept

Advantageous conditions

- Residential area makes up a whole municipality (decisionmaking power)
- Municipality supported the concept politically and was able to finance social support
- •High level of cooperation and citizen's participation
- Provisions for all generationsDisadvantageous conditions
- Small scale provision of nursing care was undermined by external authorities (finance)

Conclusions:

- Overall care and financing systems must enhance local solutions (decision-power) as well as:
- Cooperation of providers
- Participation of old and young citizens
- Financing of social support (residential management)
- Variety of housing and care solutions
- Integration of services into a small scale area



Integration of Housing Care and Social Support in Residential Areas

www.isa-platform.eu

platform for integrated service areas

ISA Website: International Platform for Integrated Service Areas

- Content of the platform: for each country
 national context and project examples (town + country)
- Original members: Netherlands, Switzerland, Germany, Denmark
- New member of the network: Sweden
- Overseas cooperation: Japan, United States (Association with "SYSTED")
- Perspective: more examples, more countries, systematic comparison between countries, networking between projects, international congresses

Some specific features of Integrated Service Areas in different countries

- D: Citizen's participation, special 24 hour home care arrangements (Bielefeld)
- NL: barrier free new buildings through social housing associations, town planning model (STAGG) versus cooperation network
- DK: communal integrated teams (social and care provisions) for the area, activity centres, decentralised nursing care
- CH: decentralised solutions in smaller municipalities, small but also large care providers



Analysis of 10 Pilot ISA in the Netherlands

- 1500 interviews with older inhabitants
- Comparison: 10 Pilot ISA quarters und areas wothout ISA

Some results:

- Within pilot ISA: older people live longer idependantly
- Within pilot ISA: Feeling more confident that services and care as well as adapted housing will be available if needed.
- Within pilot ISA: More older people are satisfied with their existing housing
- Within pilot ISA: informal social activities are valued higher than programmes organised by social workers

Effects of Integrated Service Areas in Germany

"Social Return on Investment" [SROI] (n=222):

Impact-analysis of german ISA-projects (SONG-Soziales neu gestalten)

Older inhabitants of <u>ISA quarters</u> compared with people living outside ISA quarters...

- •...have a **better health status** and lower care needs which reduces the costs of care,
- •...are more engaged in looking after their neighbours mainly in terms of help with every day activities,
- ...are more active and better socially integrated,
- ...are more satisfied with their housing condition and life situation.

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Perspectives

- Needs and wishes of senior citizens are similar in different European countries
- They want to remain self-reliant as long as possible
- The service provision, however, is quite different from country to country
- Financing und legal regulations are important
- Centralised or decentralised operation of service providers is also influential
- EU convergence: The best of each system