Israel

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Types of housing and their suitability

In Israel, the majority of persons aged 65+ years (96%) reside in the community, that is, in "general housing." Approximately 68.4 per cent of all older person households (men aged 65+, women aged 60+) are occupied by either a single person (32.9%) or a couple (35.5%). A wide range of community services is available to meet older community dwellers' needs, such as Friendly Communities and Meals on Wheels, as well as home visits by professionals and volunteers. Nonetheless, a population survey has shown that loneliness is a major and unmet need of this population segment: approximately 19 per cent interviewed reported "often" feeling lonely.

To what extent living in general housing is a positive experience for older occupants depends on the availability and accessibility of community services (medical, social and instrumental), as well as the availability of children and family members to assume the role of primary caregivers. With the foregoing support, "ageing in place" can be a good solution for independent or partly dependent older people. If such services and resources are lacking, however, high quality "specialist housing" may be a better solution.

Nursing homes for frail and/or handicapped elderly persons provide all services required by residents. Some sheltered housing complexes have nursing ward buildings to which residents can move when they are no longer fully or partially independent. Nursing hospitals are available for handicapped and demented older persons who require ongoing medical care.

Policy on housing and the provision of specialist housing

The dominant policy for older people in Israel is "ageing in place." Accordingly, Israel's Long-Term Care Law enables dependent and partly dependent people to receive a variety of services in their home. In addition, day-care centres, social clubs, supportive communities, meals-on-wheels programmes, and numerous voluntary services provide assistance to older persons at home or in the community. A trend towards adding services and adapting dwellings to meet older people's needs (home modification, the installation of alarm systems, direct contact to emergency health agencies, etc.) is growing, through personal initiatives, as well as those of municipalities, welfare agencies and the Israel National Insurance Institute.

Specialist housing is provided in both the public and private sectors. Older people who need to relocate to more appropriate housing and who can afford to do so, tend to move closer to where their children live, and to a smaller and more convenient dwelling – for example, an apartment without stairs in a building that has an elevator, and is located close to shopping areas and services. Older persons who lack sufficient means and who need to relocate to more suitable housing depend on their family or welfare agencies to help them do so. Based on their income level, the children of older persons are obligated by law to contribute to meeting the expenses of their parents' relocation, should this become necessary.

Nursing homes and nursing wards fall under the supervision of the Ministry of Health. In each facility, whether public or private, some beds are allocated for residents who are unable to pay for the services; the Ministry of Health sponsors these residents and family members sometimes assist partially. In this way, low-income older people are able to receive the same level of service as others.

When asked, the majority of older people indicate a preference to remain living in their present home. A recent study showed that the majority who live in sheltered housing (both public and private) expresses high satisfaction with their housing. Residents of sheltered housing moreover were found to report higher levels of subjective well-being than their counterparts who continue to live in general housing.

In 2013 a new law will be enacted to regulate services that are provided to older people, as well as to protect the personal and financial rights of sheltered housing residents.

In recent decades, the levels of services and the skills of formal caregivers have improved significantly in all Israeli institutions – particularly in sheltered housing, mainly as a result of changes in potential residents' expectations and a rapid increase in the availability of such institutions.

Innovative housing models

I am unable to identify innovative housing models for older people in Israel as such. Considerable variation exists in services provided in sheltered housing: some facilities provide all-inclusive services (medical, social and instrumental) and all meals except breakfast, while others provide only social and security services. In some sheltered housing facilities, residents are permitted to have a paid caregiver reside with them; in others, residents must be functionally independent to be admitted to the facility and younger than 80.