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ILC UK

Dylan Kneale

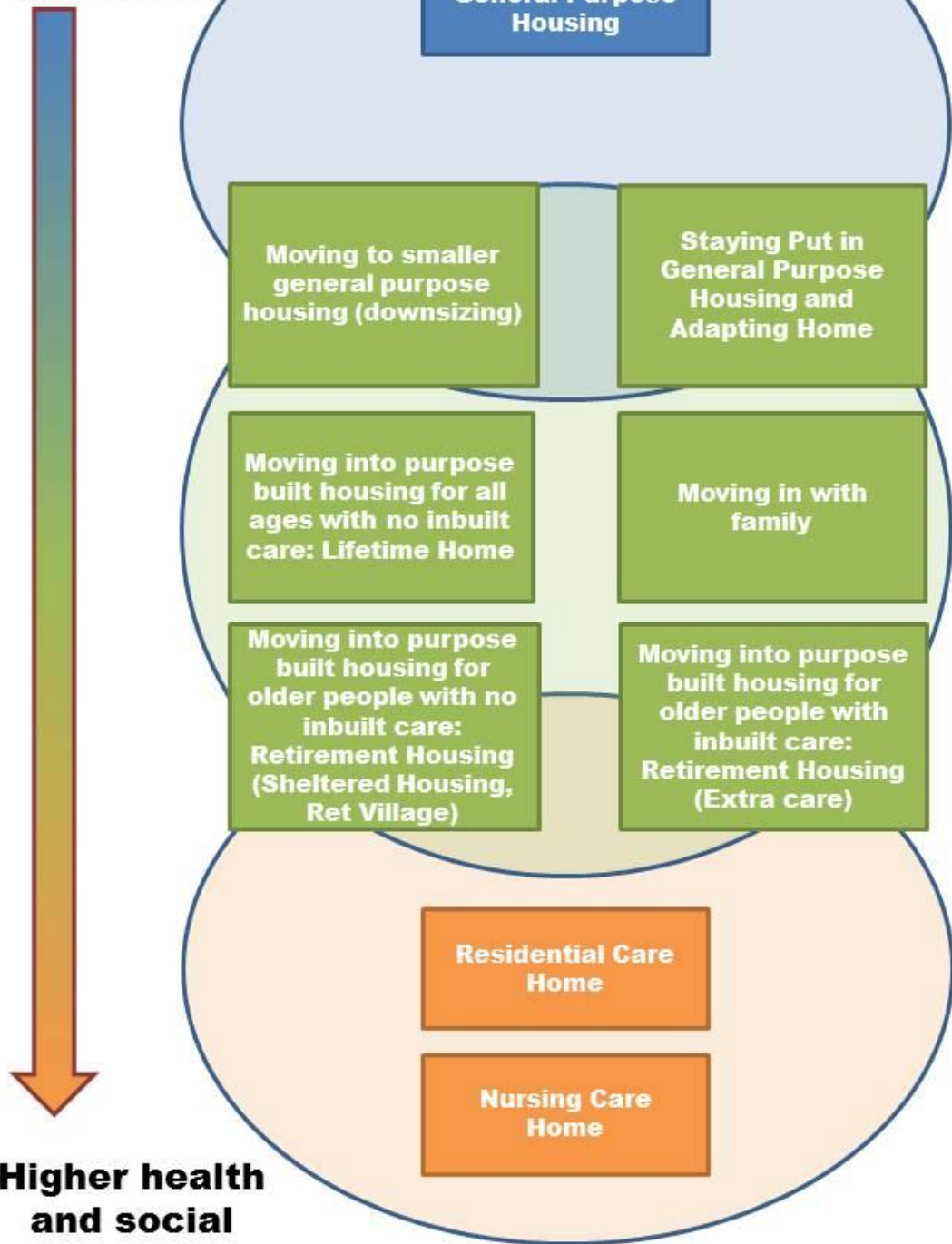
dylankneale@ilcuk.org.uk

Types of housing and their suitability

In the UK, as people grow older they are faced with myriad choices as to where to live (see figure). They may choose to stay in different forms of general purpose housing, or to move into specialist, age segregated housing for older people. Most of these choices can be placed on a continuum of care, and indeed housing moves at older ages in the UK are often prompted by a change in the care needs of an older person or his/her partner. Yet, the provision of domiciliary care (help with activities of daily living, but not nursing care) helps many older people to remain in general purpose housing. Data suggests that of the six million households headed by an older person (65+) in England, 11 per cent were in some form of specialist housing for older people¹. Sheltered housing – age segregated housing traditionally offered on a rental basis with an onsite scheme manager – is the most common form of specialist housing for older people, accounting for 65 per cent of specialist older people's housing and 8 per cent of older people's households overall. Residential care homes provide assistance to older people with some activities of daily living, and account for almost 2 per cent of pensioner households, while nursing homes account for one per cent. Extra care housing – constituting independent housing with the provision of 24-hour social care available, if needed – accounts for less than one per cent of pensioner households. Despite an estimated 800,000 people living with dementia, there are thought to be fewer than 10,000 specialised dementia care units. Among older people not resident in a communal establishment (residential care and nursing homes and certain forms of sheltered housing), 74 per cent own their home, 19 per cent rent their home from the state or a not-for-profit organisation, 4 per cent rent it from a private (profit-making) landlord, and a further 2 per cent live rent free (mostly with family)².

This housing landscape may be changing rapidly, however. Residential care homes in particular are dwindling in popularity among older people and their families, who prefer housing models that offer a greater level of independence, and a less institutional approach to housing and care. Consequently, many residential care homes are being remodelled into other forms of housing, including extra care housing. As the full results of the 2011 Census are released, we may witness residential care and nursing home units accounting for a smaller proportion of older people's households, and a rise in the number of specialist housing options that provide greater independence for older people.

**Lower health
and social
care needs**



**Higher health
and social
care needs**

Expansion in the supply of specialist housing for older people has been slow over recent years. For example, overall construction rates of retirement housing (here defined as forms of purpose built housing for older people that include sheltered housing and extra care housing, but exclude more institutional forms such as residential care and nursing care units) have declined since a heyday in the 1980s, when over 30,000 retirement housing units were constructed annually³. Construction

rates of purpose built retirement housing in recent years have typically reached around 8,000 units a year, despite the ageing population. The lower rates of construction have been attributed to government withdrawal from providing (social) housing for older people, with older people's housing now mainly provided by profit-making companies or non-profit charitable bodies, albeit with places subsidised by government for those eligible for support. Certain wide gaps are therefore left in provision across geographic and tenure lines; for example, seven London boroughs have no retirement housing for sale of any kind, despite having substantial populations of older people who own their (general purpose) home⁴.

Policy on housing and provision of specialist housing

The UN Madrid International Plan of Action on Ageing, adopted in 2002, encourages policy-makers globally to promote "ageing in place" in the community, with due regard given to individual preferences and affordable housing options for older persons⁵. The recommendation includes encouraging age-friendly and accessible housing design, and ensuring that housing provided for older persons takes appropriate account of their care and cultural needs. The British interpretation of "ageing in place" was directed towards the adaptation of existing housing and the development of theoretical "age neutral" housing. Purpose built housing for older people has not always been interpreted as being one's "own home," despite many models of specialist housing having independence as a key tenet. Up and down the country, local government offers services to help older people "stay in their own homes." These services transcend the delivery of direct social care to include the provision of physical adaptations, such as handrails or grab rails, to help older residents navigate their way around their home. Such services indeed help older people to "age in place." People's own homes are increasingly viewed as a site for the delivery of health and social care, as the burden of care shifts from the state to the family and individuals.

Many studies have demonstrated the real cost saving benefits from the adaptation of general purpose housing to better meet the needs of older people with frailty or mobility problems⁶, through lower reliance on formal social care services. This probably constitutes one of the strongest incentives for developing policies around "staying put." The emphasis on "staying put" has also been supported and promoted through a burgeoning literature on the preferences and priorities of older people themselves, and many older people share a belief that it is important for older people to stay in their own home for as long as possible. The implications of ageing in place policies are becoming apparent as older people appear to be remaining in place for longer. Among households headed by an older person (65+), the proportion that occupied the same dwelling for 40 years or more rose from 17 per cent to 24 per cent between 1993/4 and 2007/8⁷. However, the tide towards staying in one's "own home" may be about to turn.

In recent years, particularly since the onset of the financial crisis and the lingering recession from 2007 onwards, concerns around the availability of housing for young people have been raised by politicians and the popular media. Older people have been increasingly characterised as "hoarders of housing," under-occupying large homes, while many younger people face difficulties establishing themselves on the housing ladder and are said to be progressively more likely to live in over-occupied housing. Basing these arguments on age oversimplifies a complex situation, but under-occupation of housing is nevertheless undesirable, and the tendency for under-occupation to rise with age may be connected to the lack of suitable housing

available to older people, both smaller general purpose and specialist housing for older people. As discussed earlier, the provision of specialist housing available to older people that reflects the full range of socio-economic and care needs is woefully inadequate. A consensus is emerging that older people should be encouraged to downsize and move to smaller housing – thus, to age in place in terms of community but not necessarily in the same physical home – although in the absence of a diversity of choice in the range of smaller housing available, this is unlikely to happen. In addition, many older people in the UK simply do not want to move from their home for a variety of reasons – a lack of choice in destination housing being one reason, emotional attachment to the home being another, while others may view housing movements in later life as a form of surrender to the ageing process itself (and therefore something to be avoided). Specialist housing in particular is viewed as a destination exclusively for the oldest old. This perception has, in part, led to a culture of older people in the UK tending to move only in times of crisis, thereby limiting their options when considering housing movements in later life, with many moving needlessly to more institutional forms of housing because of poor planning.

Such debates are likely to continue for some time, but have sharpened recently since the introduction of punitive financial measures for those of working age who under-occupy publicly subsidised housing. There have been calls for such measures to be extended to older people in under-occupied housing living in both private (owner occupied) and publically subsidised homes⁸. While it is unlikely that punitive measures will be introduced against older people, such debates have raised the profile of the housing needs of older people and this is beginning to be reflected in policy. For example, the government has recently committed a substantial amount of funding to improve the provision of information, advice and guidance to older people around housing needs and options in later life. Better information may be a vital step in reducing the frequency of crisis movement and improving public awareness of housing options, especially around specialist housing.

Innovative housing models

One of the fastest growing models of housing for older people in the UK is extra care housing. Extra care housing may be summarised as ergonomically designed independent housing units that usually feature common spaces, facilities and care services. Defining extra care housing according to its constituent features is something of an inexact science, and the model is perhaps best summarised through three key tenets defined as: i) flexible care, ii) self-contained dwellings, and iii) homeliness. A distinctive feature, and indeed a key tenet itself, of extra care housing is the availability of 24-hour care, something that is generally unavailable in general purpose housing through domiciliary care. Studies have associated residence in extra care housing as being associated with a deceleration of diminution in functional ability; lower levels of hospitalisation, experiencing a fall, and movement into more institutional accommodation compared to receiving domiciliary care at home; better social wellbeing; and lower costs in some cases^{9,10,11}.

Through offering independent housing with the provision of flexible care, which can be round-the-clock where needed, the extra care housing model successfully straddles the divide between general purpose housing and residential care. Extra care housing represents a choice for people whose needs may previously only have been met through residential care alone, mainly because of the availability of round-the-clock care, and has proved popular with older people, with the model flourishing across the UK.

Other models of housing for older people being examined in the UK include cohousing for older people and minority groups within the older population, and home share, both of which models were originally developed on the continent. Many of the innovative approaches applied to housing are discussed in the “Housing our Ageing Population: Panel for Innovation” report^{12,13}.

References

- ¹ HAPPI. (2009) Housing our Ageing Population: Panel for Innovation. London: Homes and for older people: an evaluation of extra care housing. Personal Social Services Research Unit, University of Kent, Canterbury. Communities Agency.
- ² ONS (2013) Tenure - Household Reference Person Aged 65 and Over (QS404EW). <http://www.neighbourhood.statistics.gov.uk/>
- ³ EAC (Elderly Accommodation Counsel). (2008) Statistics on Housing with Care. London: Elderly Accommodation Counsel.
- ⁴ Bligh, J., Kerslake, A. (2011) Strategic Housing for Older People. London: Housing LIN http://www.housinglin.org.uk/_library/Resources/Housing/SHOP/SHOPResourcePack.pdf
- ⁵ United Nations. (2002) Madrid International Plan of Action on Ageing: Second World Assembly on Ageing, Madrid, Spain 8-12th April 2002. New York: United Nations
- ⁶ For example: Lansley, P., McCreadie, C., Tinker, A., Flanagan, S., Goodacre, K., Turner-Smith, A. (2004) Adapting the homes of older people: a case study of costs and savings. Building Research & Information 32(6):468-483
- ⁷ Kneale, D. (2011) Establishing the Extra in Extra Care Housing. London: International Longevity Centre.
- ⁸ Griffith, M. (2011) Hoarding of Housing: The intergenerational crisis in the housing market. Intergenerational Foundation http://www.if.org.uk/wp-content/uploads/2011/10/IF_Housing_Defin_Report_19oct.pdf
- ⁹ Netten, A., Darton, R., Baumker, T. & Callaghan, L. (2011). Improving housing with care choices
- ¹⁰ Garwood, S. (2008) Reeve Court Retirement Village: An Evaluation. Sue Garwood Evaluation Consultant <http://www.suegarwood.co.uk/Reeve%20Court%20evaluation%20external%20final.pdf>
- ¹¹ Kneale (2011) Ibid.
- ¹² HAPPI (2009) Housing our Ageing Population: Panel for Innovation. London: Homes and Communities Agency.
- ¹³ APPG on Housing and Care (2013) Housing our Ageing Population: Plan for Implementation. http://www.housinglin.org.uk/_library/Resources/Housing/Support_materials/Other_reports_and_guidance/Housing_our_Ageing_Population_Plan_for_Implementation.pdf