

## HOUSING AND SERVICES FOR OLDER PEOPLE IN THE NETHERLANDS

### State of the art anno 2003

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#### Expansion of homehelp services

Older people stay longer in their own house than before. Individual homehelp services are quickly expanding: since 1998 budget restrictions have been lifted and all citizens with a medical indication will get homehelp, as long as homehelpers can be found. There have even been experiments with the training and employment of homehelp-nurses from eastern Europe, South Africa and Indonesia.

#### Adaptation of existing housing: limited success

The physical adaptation of houses lags behind. Roughly one in six of the existing houses is more or less accessible to people with mobility impairments. A subsidized campaign which aims at rollator-accessibility (called **opplussen**) has resulted in valuable practical experience, but small production numbers. A new campaign will be launched with more differentiated accessibility levels and a step-by-step approach. Newbuilt housing is generally accessible, but adds only a yearly 1% to the housing stock.

#### More attention for welfare aspects: quality of life

Recently, the welfare aspect has got more attention. Many older people are experiencing a poor quality of life, though their house may be accessible and some professional homehelp may be provided. Loneliness and depression might be the most prevalent old age diseases. The awareness of this problem results on the one hand in projects with integrated neighbourhood facilities (**woonzorgzones**), on the other hand in the building of large full-service lifetime housing estates (**woonzorgcomplexen**).

#### Integrated neighbourhood concepts

**Woonzorgzones** are now being planned in about 30 neighbourhoods and villages all over the country. Some of these are already in the early phase of realisation, like IJburg in Amsterdam, Moerwijk in Den Haag, Ypelaaar in Breda and Trynwalden in Friesland. In some medium-sized towns a decentralised zoning concept for the whole town is under development: Leeuwarden, Spijkenisse. The **woonzorgzones** include circular areas with round-the-clock care and a certain percentage of adapted housing within 200 m walking distance of integrated service centres. Outside these circular areas, general standards for housing adaptation, homehelp-services, alarm-systems, practical services and investments in the safety and accessibility of public areas will also be above the general standard. The problem is that many different actors with different budgets have to take coordinated action. In most cases, non-profit housing associations and local old age homes are the initiators.

#### Full-service housing with optional care

**Woonzorgcomplexen** have originated as a new substitute for the old age home, which traditionally had a market share of about 7% of the 65+ population. It combines two- or three-room flats with a broad range of services and care options, including 24 hour care. The condition is that people are still able to manage their own household.

In 2000 there were about 600 of these buildings, numbering about 40.000 independent flats; a new national survey is expected in 2003. The average age of the tenants is about 80 years and about half of them needs some kind of homehelp or care.

In recent projects, more and more apartments in the private financed sector are being mixed in. **Woonzorgcomplexen** tend to become bigger and to offer more service and leisure activities; they try to shift their image from care to service and leisure.

Good examples of this new development are: Palisium in Eerbeek, Korte Akkeren in Gouda and Akropolis in Rotterdam.

### **Bottlenecks**

Still there is an overall underproduction of **woonzorgcomplexen**.

The minimal production target of 6000 units pro year has not been achieved in recent years, although the demand is high and increasing. There are problems with the availability of well-situated building sites and with the financing of service areas and overhead functions. Also, the dismantling of existing oldage-homes is still a tricky financial problem.

Moreover, many real estate development companies are still more interested in the building and selling of family homes, which gives an easier and quicker return on capital. And many local authorities still do not use their physical planning and land-policy instruments to stimulate these new developments for older people.

### **Group homes for people with dementia**

Recently, public opinion has been alarmed by a scientific report with prognoses for the numbers of people suffering from Alzheimers disease and comparable mental disorders.

Already, the waiting lists for nursing homes are expanding. Since more and more people have doubts whether more large nursing homes based on the medical model are the right solution, the present capacity stagnates at about 35.000 beds for older people with mental disorders. A privacy law which will eliminate the last 13.000 beds in 3-4 bed rooms has resulted in a renovation programme, but it further reduces the capacity of nursing homes. As a temporary solution, nursing units are being created in oldage homes.

Many nursing homes and oldage homes have now plans for small group homes (**kleinschalig groepswonen**) with self-contained communities of 6-8 people. Only about 20 projects housing about 500 people have been realised or will be opened soon. A national survey of these projects has started at the beginning of 2003. In October 2003 a national campaign will be launched to stimulate the development of small group homes for demented people.

The main types of projects are: (1) decentralized projects in regular neighbourhoods, mostly combining four groups of 6-8 people with a joint nightcare support unit; (2) small group-homes inserted in a larger **woonzorgcomplex**; or (3) a larger hotel-like building with social activity-rooms for different **lifestyle-groups**. Also this last concept tries to avoid the hospital model ("dementia cannot be cured")

### **Registration of projects for older people**

The **Aedes-Arcares Kenniscentrum Wonen-Zorg** has a register of **Woonzorgcomplexen, Woonzorgzones** and **Kleinschalig groepswonen voor dementerende ouderen** in the Netherlands ([www.kenniscentrumwonzorg.nl](http://www.kenniscentrumwonzorg.nl)).

Arcares, the national union of old age homes and nursing homes, is creating a register of all existing homes, including outdoor-projects supplying neighbourhood services. In the coming years, the registers of regular and innovative projects will be joined into a database which can be consulted by older people and their relatives as well as by professionals and policy makers ([www.seniorzorg.nl](http://www.seniorzorg.nl)).