

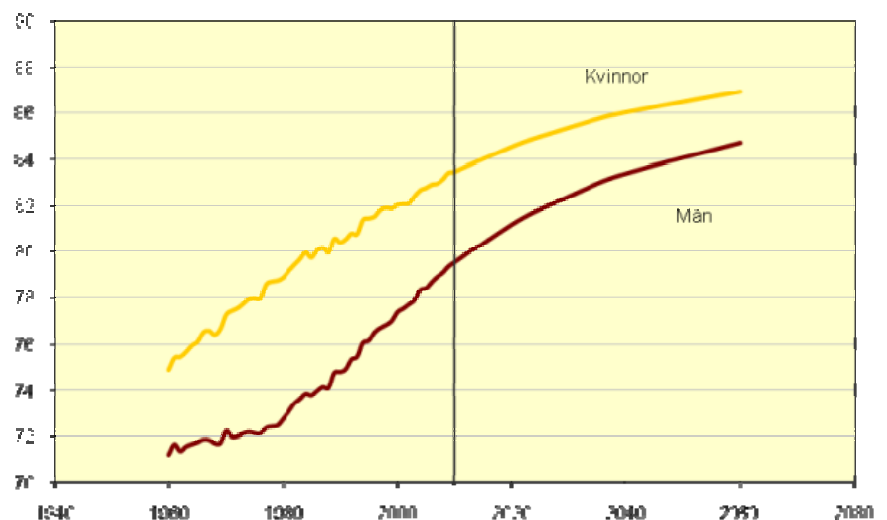
Public buildings for the elderly

Henrik Ivarsson, 2011-01-10

Needs of care for elderly.

Most of the elderly people manage to take care of themselves in their own ordinary homes. When you start to reach the end of your life there are usually some functions in your body that tell you that you are in need of care from someone else. Luckily extensive research shows that elderly at a given age are healthier today than before. Thanks to technological developments, progress in medicine and our general higher living standards, we have become older and older. The latest figures show an average life expectancy for women in Sweden is 83.3 years and for men it is 78.6 years. The corresponding figures for Germany are 81.5 years respectively 75.7 years.

Life expectancy from 1960-2009 and forecast 2010-2060



Source: SCB

The occurrence of diseases among the population in general will paradoxically increase as a result of better medical skills. Many people that today survive for example a heart attack will most likely later in life get a few other diseases, for example heart failure or some kind of cancer. Some physical and cognitive disabilities are considered today as also belonging to "natural aging". Many older people are affected by the deterioration of eyesight and hearing, impaired fine motor ability, and short-term

memory loss. The majority of the elderly however, only have minor disabilities up to the age of 80 years.

The future disease panorama is expected to be dominated by natural health problems for elderly. This means a greater proportion of chronic and long-lived illness.

In 2004 there were 132,000 people in Sweden, older than 65, who were in need of Home service in their own homes. 106,000 lived in Special housing and over 300,000 were justified to use transportation service. A lot of adjustments in ordinary living were made in 63,000 people's homes. As we can see there is quite a huge organisation to making it work due to a lot of cut backs.

Every year the average health costs for elderly have increased. This is not the same as higher costs solely as a result of deterioration in health of the population of elderly.

Paradoxically, the major increase in health care consumption among the elderly is as a result of technological progress in health care, resulting in greater opportunities to treat various diseases. It is expected that this trend will continue and will result in an increased circulation of the medical services.

History of elderly accommodation:

1900-1959

After the Second World War there were 1,386 homes for the elderly in Sweden. In these homes lived 30,000 service users. Additional 4,000 lived in wards for the mentally deranged and chronics invalids. This type of care had to be done, because of the lack of other types of care facilities. During this time period enforced seclusion also occurred in the homes for elderly. The reasons for being committed were either an inability to care for themselves, or that people were "unwieldy and disruptive to the surroundings".

By introducing the State pensions in 1948, the government could ensure that the elderly no longer needed to move into special housing as a result of poverty. The health services would be responsible for those who had long-term diseases or were mentally deranged. The target groups for the modern homes of elderly were those who were in need of supervision and care. The geriatric care politics went from being a poorhouse to become a real home for elderly. 1957 the Government made a decision that the geriatric care would help the elderly to live an independent life in their own homes for as long as possible. To face those facts it required decent housing conditions. No one

should be forced to move to a home for elderly because of poor housing.

The social services law was set in 1956. It clarified the importance of respect for the integrity of the elderly, their interests and individual wishes. Old people should be seen as individual people with individual needs.

1960-1979

In the mid-1960s the Homecare services (Hemtjänsten) was developed and it became a cornerstone for the elderly. Although old people in homes for the elderly kept increasing during the 1960s and 1970s in order to be reduced by the 1980s.

Besides Homecare services, there were four different options for elderly care. Service flats and homes for elderly were run by the municipality. Especially the homes for elderly were supposed to be characterized by an environment as close to an ordinary home as possible. This kind of living was no longer only for the poor people and pretty soon they also became attractive for people from the upper strata of society.

Nursing homes and wards for long-term patients were run by the County Councils. These kinds of homes were not for permanent living. Many people stayed here as a result of different kind of rehabilitation or as a respite for relatives. During the 70:s the nursing homes (Servicehus) expanded with different kind of activities, like care of feet, serving of food, hobby activities and other types of ordinary services. The municipalities discovered that this saved both time and money which became an argument for continuing to strengthen this type of accommodation. The nursing homes were developed for elderly with limited need of service and care. As the time came, when more help was needed, there were already people there to take care of you.

1980s

In 1980 the Social Service Act was introduced. The objective of the Act was to ensure all security, equality and an active social life. The emphasis was on the individuals' autonomy and integrity. A chapter of the Act was specifically regulated for the rights of the elderly. The needs should, according to the Act, meet those needs *which cannot be fulfilled otherwise* and help the elderly to achieve a *reasonable standard of living*.

The Government of Sweden made a new decision in 1985 concerning housing policy for the elderly, handicapped and people with long-term diseases. The objective was to increase the possibility of remaining living in their own homes and reduce the need for accommodation at an institution. This meant

that there should be apartments with an appropriate standard for both the inside and external environment. They should also be characterized by creating a meaningful social life that provides opportunities for contact between people of different ages and living situations. However, it was not unusual that people were moved to a home for elderly instead of moving to a better, more appropriate, apartment.

1990s

The 90s was a tough decade for the financial market. The number of people, aged over 80 increased from 263,000 in 1980 to 427,000 people in 1997. Aid efforts were focused increasingly on those who were living alone with great need of care 24 hours per day. The social assistance in Sweden changed from general achievement for older people to focus on those who had the greatest need.

Due to "The New Public Management" many municipalities were inspired by the purchaser and performer models and performance-based funding system.

"Ädelreformen" was realized in 1992. The purpose of the reform was to develop the society's resources better and allow older patients to remain in their homes in spite of their need of more comprehensive medical care. Some of the elderly should have the option to be offered a new special living where they would have their needs of security, services and medical needs fulfilled. The overall responsibility moved back to the municipalities, but this time, increased by the responsibility of caring for patients with chronic illness. The generic name for homes of elderly became "Special housing".

Another change in elderly care during the 1990s was the introduction of financial incentives offered to the municipalities for the reconstruction or even new production of elderly housing. When the need of care for those who moved into special housing increased, the elderly housing was sufficiently equipped to provide good care and at the same time, offer a good environment for those who were working there. New production of special housing was then concentrated to, a new category for the time being, group homes for persons with dementia.

This period reduced the number of physical sites of special housing, because many rooms with several beds were converted into single rooms. The number of dwellings with their own shower and cooking possibilities increased.

The idea was once again that these kinds of homes should as much as possible be similar to ordinary housing rather than institutions. In addition, to improve living standards and to create normal housing, the holder of the dwelling can have a

separate rental contract and then also be embraced by the Housing act. From that day the elderly in special housing had the same rights and obligations as the other tenants in the ordinary society. That means they have the right to apply for housing allowance.

From 1998 there is a change in the Social Services Act (Socialtjänstlagen). Relatives should be offered respite and support when they take care of their spouse or some other close relative. The Government supported this change of law by offering 300 million Swedish crowns during a time period between the years 1999 to 2001.

The first decade of the 21 st century

Since “Ädelreformen” was introduced, the standard of accommodation has increased significantly. In 2004, nine out of ten elderly people had access to their own shower and toilet. Development could be seen as positive when more and more elderly remained at home. However, there is also an opposite side which means that more and more people are forced to remain living at home. It was also noted that the adverse economic situation of the municipalities began to change and the big problem is no longer funding activities. After years of savings and deterioration in quality for the elderly there were changes with a view to improving the quality of care for the elderly. The Social Service Act from 2002 was extended with an extension that older people should be able to live an active and meaningful life in community with others.

The Swedish “Boverket” and The Board of Social services were ordered by the Government in 2003 to investigate the sharp decrease in special accommodation in the municipalities. There was also a negative trend in the demand to move to special housing, there was more focus on remaining in their ordinary homes. Today, there is a major problem if municipalities want to build new special accommodation, they will face far too expensive costs which they do not have the possibility to change by increasing the rent. It is also very expensive to operate this type of activity.

Just because today there is a minor interest in this kind of accommodation, does not mean that there will not be a greater need in the future. To get around this problem the municipality and the County Council must compensate by developing home services, home care and support to families. Access to round the clock support became possible because of evening and night patrols and new technical solutions such as security alarms.

Contribution of adaptation in the apartment through contributions (bostadsanpassningsbidrag) made a further step to avoid moving people to special housing in the early stages of old

age. At the same time the special accommodation such as group accommodation for the demented or departments with comprehensive treatment and care needs were reduced in preference of institutions. In some municipalities, the service apartments still remained, while in others the accommodation was rebuilt to ordinary dwellings or senior apartments.

What is the situation today?

Remain staying in your ordinary home (kvarboendeprincipen).

The possibility to still remain in your familiar environment has been the guiding principal since the 50s for the elderly of Sweden. Normally it means that you adjust your home gradually to suit your specific needs. You get most of your needs of care through home services or relatives. It could also mean that you are moved to a better and more accessible apartment in your neighborhood where you feel secure, are familiar with the environment and are well-known by the local residents. However, there is reason to be cautious, that remaining at your old home is perceived as coercion.

Special housing (Särskilt boende)

The most common reason for moving to special housing is dementia. Studies show that 3 out of 4 who live in special housing today are there because of dementia or some other cognitive impairment. Another reason is often that they recently lost their life companion, or they are affected by hip fractures, stroke or a similar disease. It is unusual to move to this type of accommodation before the age of 80. The typical “tenant” is a woman between 85 and 90 years old.

Special housing is regulated in the law of social service and it is a description of accommodation with service and care for elderly in need of special assistance.

Common requirements of special housing are as follows:

- The accommodation must have access to personnel 24 hours a day.
- To stay in special housing it requires an approval by the municipal assistance officer.
- To qualify for special housing the individual has to have need of support, supervision, security and safety that no longer can be fulfilled by home services in the persons own residence.

- The municipality is responsible for the quality of special housing. On individual housing, which is operated by private participant, the County Council has the responsibility for the quality.
- The municipality has the responsibility for health and medical care up to a competence level of a trained nurse. This means that all medical activities at a doctor's level are offered by the County Council.
- Living in special housing requires paying rent for the dwelling according to the Swedish "Jordabalken". A fee is also charged based on Social Service legislation.

Senior housing (Seniorbostäder)

Senior housing is a common type of housing intended for persons over a certain age. You are not obliged to have an approval from the Social Services to move in to this kind of living accommodation. During the past 20 years, senior housing has become increasingly common, particularly in bigger cities. During 2010 and 2011, over 125 municipalities are planning to build 4,300 senior housing apartments. Of these, 3,350 will be new production and 550 referral rebuilt homes. About 400 homes are expected to be transformed from service housing to senior housing. A third of the senior housing project is planned in municipalities with less than 25,000 inhabitants. There is also a major senior housing project expected to be built in Stockholm. However, senior housing is still a very little part of the dwellings lived in by elderly people.

Security housing (Trygghetsbostäder)

Security housing is specialized housing for those over a certain age who wants a home with access to personnel every day and opportunities for joint activities or common meals. It should also provide the possibility of making contact with the inhabitants and offer cultural activities. Security housing is an option that creates a greater sense of security.

Security housing should be planned in a way that makes it possible to still remain in your apartment if you get a disability that requires accessibility for movement. It is important that the dwelling by its design makes it easy for individuals to use modern and good accessibility and also helps the staff to fulfill their daily work by effective methods and modern facilities.

Security housing can be built as a tenancy right, a cooperative or as a tenancy association. A further requirement is that the housing is held by individuals who have reached the age of 70 years. When it comes to spouses, unmarried couples or siblings, it is sufficient that one of the people is aged 70 years.

The planning of the Municipality should act for creating conditions for everyone in its area to live in good housing and they should also promote appropriate measures to secure future exploration of housing for elderly. The Social Services Department sees obvious advantages in a diversity of the forms of ownership, leasing, inter-operability, operational and business. They also consider that security housing should be established and supplied by several stakeholders such as municipalities, housing corporations, associations and or cooperatives.

Of late, at least 90 municipalities are planning to build 3,900 security housing dwellings. Half of them are expected to be transformed from service housing. Only one third of the projected security housing falls under new production. The planned additions of security housing are most likely the senior housing, greatest in Stockholm and in municipalities with less than 25,000 inhabitants.

Residential home (Servicehus):

A residential home means that you live in an apartment with access to certain common service and common premises. In a residential home there is always the possibility of eating a common lunch with others.

A residential home is an accommodation for those of the elderly population who have care needs that are difficult to meet in their own accommodation. The help they need is carefully investigated and aid efforts are carried out by staff from home services. There are always security alarms in the apartments.

Tomorrow's elderly

The majority of tomorrow's elderly are people born in the forties, they live in houses with a lot of space and interior stairways. In the past, it was the poor standard of dwellings that was the reason for moving. Today the well-equipped accommodation could instead be one of the major reasons for moving. Many people express that it is important that the accommodation costs will be lower in the future than they are today. However, the most important thing is the proximity to communication, service and countryside. It is also important that the dwelling has a balcony or terrace. The future elderly also wants to live in areas with mixed-age groups. It is most likely that the future elderly will remain living in their home, despite the fact that it is not adapted for people with disabilities.

Akelius role in the subject:

Akelius are involved in housing for elderly in many different ways. We accept, in most cases, the Housing adaptation applications in our apartments. When we make a bigger refurbishment of buildings we always consider the legal requirements imposed by forced mobility and making them as suitable as possible for disabled individuals.

A couple of years ago, Akelius in cooperation with NCC and White architects began to build a number of public buildings for elderly around the country. In brief you could say that White makes the architectural drawings, NCC builds the buildings, and Akelius owns and manages the properties. The process begins with the municipality presenting specifications under the legislation concerning public procurement. The specifications are comprehensive and detailed and usually contain six main areas such as rent inquiry, business description, technical description, room function program, list of local and limited warranty and maintenance agreements. Akelius is interested in proceeding in the project if the municipality's purpose is to rent the building on a long contract.

In 2006 Akelius bought a number of existing public buildings for the elderly from the municipality of Halmstad. Even here the purpose was to sign long contracts but most of the lease agreements terminate in 2016. If the municipality wants to make a major refurbishment or renovation Akelius is willing to finance the investment and then sign up a new longer contract. This allows us to increase the value of the property and at the same time, the value of the company.

Sources:

Kvarboendepincipen i äldreomsorgen, Magisteruppsats - Linda Arvidson
Website of Boverket and Halmstad.se
Public buildings for elderly – Daniel Arefalk
Äldreomsorg – Linda Lill
Åldrandet och äldreomsorgen- Thorslund, Wånell

*Before 65 you have a hobby
After 65 it is called - therapy
Before 65 you go to the barber
After 65 it is called - care of hair
Before 65 you take a walk in the park
After 65 it is called - exercise for the elderly
Before 65 you go to the theatre or the cinema
After 65 it is called - activation*