Apartments for Life in Australia
Lessons for Australia from Humanitas in the Netherlands

The Benevolent Society 2009
The Benevolent Society is Australia’s oldest charity. Since 1813, we have identified major social challenges and worked to meet them head on. We aim to tackle social inequality by building caring and inclusive communities. We deliver leading edge programs and services, find innovative solutions to complex social challenges and advocate for a more just society. Our strength lies in our expertise across the lifespan, delivering services for children and families, older people and in women's health, community based and respite care, community development and social leadership programs.

The Benevolent Society assists older people and their carers with community-based care services, residential aged care services and independent living retirement units in the Sydney metropolitan area, with the support of funding from federal and state governments, private donors and the efforts of volunteers. Through our residential and community care services our aim is help older people live as independently as possible with dignity and respect.

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Introduction

The Humanitas Foundation in Rotterdam, The Netherlands, has attracted international renown because of its achievements in developing the innovative Apartments for Life model of housing and care for older people. Under the leadership of Dr Hans Becker, Chair of the Humanitas Foundation, the first Apartments for Life complex opened in the mid 1990s. Today there are more than fifteen Apartments for Life complexes in Rotterdam with several thousand older people as residents.

As its name suggests, a key feature of the Apartments for Life model is that it offers older people a chance to remain in their own home – in this case an apartment – throughout older age and to avoid having to move home when their health declines and they require increasing levels of care and support. Apartments for Life challenges the oft-held assumption of the inevitability of a move to a nursing home in later old age.

However Humanitas’ Apartments for Life is about more than just enabling older people to live in the one place until the end of life. It is about supporting older people’s control over their own lives and their continued activity and participation in community life.

This report describes the Humanitas philosophy, experience and achievements with Apartments for Life.

Following an extensive review of trends in aged care and housing and consultation with experts, The Benevolent Society decided that the Apartments for Life model could provide a major new option in the housing, support and care of older people in Australia.

In 2008 The Benevolent Society hosted a short visit to Australia by Dr Hans Becker, and colleagues Dr Topsy Ros and Dr Andre Jager. The purpose of the visit was to gain a deeper understanding of the operation of the Apartments for Life model and to give an opportunity for discussion about its relevance to Australia and the issues likely to arise in the application of this approach in Australia.

During the visit Dr Becker spoke at a public seminar in Sydney at the Council on the Ageing NSW about ‘new ways of living in older age’, and at a series of roundtables and meetings in Sydney and Canberra with key stakeholders with an interest in aged care and housing. Media stories about Humanitas’ Apartments for Life have provided an opportunity for discussion about its potential for Australia among a wider audience.

The Society has developed a detailed proposal for an Apartments for Life project in Australia to be located at Bondi in Sydney’s east. Our proposal is described in this report.

Dr Becker and Humanitas’ Apartments for Life model have inspired our proposal and we believe it has much to offer Australia. As a community, we know we need new ways of supporting people in older age – that fit with what older people themselves prefer, that give them more choice and which will help us meet the challenges of an ageing population. We hope this report will promote interest and discussion in the Apartments for Life model and the lessons it may offer for Australia. I commend it to you.

Richard Spencer
Chief Executive Officer
Humanitas before Apartments for Life

Humanitas is a long established non-government organisation in The Netherlands. An economist by training, Dr Hans Becker was appointed Chairman of the Managing Board of the Humanitas Foundation in 1992. Dr Becker describes the situation he confronted at that time and how he was challenged by his own father as to why he was going to work for an organisation that ran ‘islands of misery’.

By the 1990s Humanitas was running a number of large aged care institutions across Rotterdam. Those built in the 60s tended to be on the fringes of the city and the elderly residents, known then as ‘patients’, had very small rooms. Those that dated from the 1970s and 80s were built on similar lines but were located more centrally.

The care and accommodation provided was characterised by the typical features of institutional living - cramped living space, lack of privacy, separation from the mainstream of society, separation of partners if only one needed care, and segregation by age and level of dependency. As residents’ care needs changed they typically had to relocate to where the required additional care was provided. The focus of Humanitas was on meeting the health and care needs of their ‘patients’.

In the 1990s Humanitas started to experiment with building complexes of small apartments for older people. Their occupants were regarded as residents, not patients.

In the mid 1990s Humanitas started to develop the Apartments for Life concept and philosophy and to put it into practice. The first of these complexes, Humanitas Bergweg, offered small apartments on a rental basis, each with three rooms, plus a kitchen and bathroom. Residents were mixed, that is, they included older people in good health who did not need any care services, as well as those who needed support and care. Residents in good health could receive care services when their health declined without the need to move home again. In parallel, the Humanitas organisation underwent a significant cultural change to support the new philosophy and services.
Humanitas recognised that Dutch older people wanted to:

- remain independent
- manage their own lives
- participate in society

and they wanted to avoid:

- being forced to move house
- frequently changing care services, access points and assessment procedures
- having different carers all the time.

By 2008, Humanitas had built 15 Apartments for Life complexes with some 1700 apartments housing some 2500 people. It had 2,500 employees, over 1,000 volunteers and an annual turn-over of 100 million euro ($164 million AUD).

Humanitas has not built a nursing home for many years and has demolished some that were sitting empty as Rotterdam’s older people have instead chosen to move into ‘age proof’ Apartments for Life.
Humanitas’ Apartments for Life

Philosophy

A brilliant story teller, Dr Becker says that the goal of Humanitas is human happiness.

‘Human happiness - that is the business we are in, not ‘cure and care’. There is not much opportunity to cure when someone has Parkinson’s or Alzheimer’s, or even arthritis in the knees. The care elements have to be there, but they should be in the background.

To be a person amongst people, you need to meet people, mingle, share something – dine in the café, eat apple pie, have a drink in the bar, go to the hairdresser, the pedicure or the beauty parlour, visit the animal garden with the grandchildren, the sculpture garden, play bridge together, participate in volunteer work and so on.

The attention needs to be taken away from people’s handicaps and instead focus on what people can do and what they enjoy. Constant focus on medical problems causes what is left of a positive image of life to disappear, and institutions for the elderly degenerate into what my father calls “misery islands.”

Four basic values

Dr Becker said the Apartments for Life philosophy has four basic values which underpin the Apartments for Life model:

- Be boss of your own life
- Use it or lose it
- An extended family approach
- A ‘yes’ culture.

Being ‘boss of your own life’

‘You should be boss of your own life with your own front door. Then you are truly a resident, not just ‘staying’ in a room that belongs to an institution. You should decide what is important to you, even if it means being drunk at the bar everyday or only eating brown beans.’

All but those who no longer have the mental capacity are entitled to be self-determining, or as Humanitas puts it, to be ‘boss of your own life’. This means the minimum of rules, no one telling you what you should and should not do and how you should live your life, unless you have asked for their advice.

Use it or lose it

‘People need to use it or lose it, to stay active. That’s why we use the slogan “too much care is worse than too little.”

Skills are quickly lost if not used and this includes social skills and confidence as well as physical abilities. Regaining lost abilities can be particularly difficult for frail older people.

Residents, their families and the staff are instead encouraged to focus on and build on people’s strengths, what they can do rather than what they cannot do. Residents are also encouraged and given opportunities to do new things, learn new skills, take up new hobbies and so on.

This approach does not preclude assisting people with tasks that are clearly beyond them, nor watching out to ensure that people are not getting into difficulties, but it is...
important that staff not be over-protective. Staff are expected to help residents care for themselves as much as possible, and not do things for residents simply because it is quicker, easier, out of compassion or habit. ‘Too much care’ creates unnecessary dependency and is counter productive. The ‘use it or lose it’ approach has economic benefits for Humanitas and for Dutch health and welfare authorities, as well as quality of life benefits for residents.

Dr Becker talked about residents who had lived in a four person nursing home ward for years, who began to make their own cups of tea when they moved into their own apartments. ‘Some even started cooking for themselves again’.

**An extended family approach**

‘The extended family approach means the absence of an ‘us and them’ approach, dividing the white coated professionals who think they know best from the residents who have lived with their handicaps for perhaps 40 years. You can’t get creativity from a top down approach.’

The Apartments for Life philosophy recognises that everyone has something to offer of benefit to others, whether it is professional skills, years of experience living with a particular condition, local history, lost skills or knowledge and so on. Divisions between staff and clients are minimised.

An advantage of this approach is that:

‘It enables the organisation to tap into the experience and expertise of both clients and family which in turn contributes to a feeling of happiness through self esteem.’

**A ‘yes’ culture**

‘The yes culture means that everyone will have a positive attitude towards residents’ wishes, questions or demands. Of course, not everything is possible. I can’t give everyone gold taps, for example. But when we talked to the man who wanted them, it turned out that he missed the look of the ones he’d had at home. It was easy to replace his taps with gold looking ones.’

A positive attitude or ‘yes’ culture is a core value. It means that nothing is automatically dismissed as being out of the question or too difficult. Staff are expected to ‘start with yes’ and then explore the situation further to work out a solution.

Dr Becker is fond of telling the story of the lady who wanted to bring her five cats with her when she moved in. The Humanitas nurse knew she could not simply say ‘no’, so she explored further. She discovered that one cat was already 21 years old and the lady’s daughter was happy to keep and look after it. Another lady in an apartment close by missed her own cats who had been put down when she moved in (‘before my time’, Dr Becker hastened to add). Both ladies were happy to have two cats each. Problem solved and a new friendship made between the two cat lovers.

**Key elements**

The four basic values of the Humanitas vision underpin every aspect of the Apartments for Life model. The key elements are:

- A clearly articulated philosophy
- A carefully designed apartment that is ‘a place of your own’
- A ‘village square’ with services and
facilities open to the neighbourhood as well as to residents

- Events and activities
- A mix of people, mixed in terms of health, social and cultural background and tenure
- Separate arrangements for housing and care
- The management and staff culture.

A clearly articulated philosophy and vision

Humanitas recognises that the vision and basic values must be clearly articulated and continually communicated to all stakeholders. The management of Humanitas attempt to ensure this by developing a ‘corporate story’ which is dynamic and involves the participation of all stakeholders, referred to as ‘management by story telling’.

The ‘story’ is kept as simple as possible and is continually repeated using various communication strategies including liberal use of one-liners, slogans and stories, involvement of celebrities (including Queen Beatrix) and frequent presentations at conferences.

This helps maintain the clarity of purpose as well as helping to convey the essence of the Apartments for Life model to external supporters and potential funders.

It is also important that family members understand how Apartments for Life differs from orthodox residential aged care. For example, ‘the use of lose it’ philosophy means that it is not a place where everything will be done for their older relative, there will be more risks and things may not always go exactly as planned.

‘A place of your own’

The design of individual apartments promotes residents’ abilities to do as much as possible for themselves and to continue living there as normally as possible even when their health deteriorates and they need intensive assistance.

They are designed to be attractive to people in good health who live completely independently and for those who need intensive assistance.

Residents have their own apartments, each with its own lockable front door. They have their own private space into which others can come only by invitation, not just a room with an ensuite or a shared room. Careworkers cannot enter an apartment uninvited to, for example, help the resident have a shower.

The apartments are accessible for people who use wheelchairs and also have enough space to move a person on a stretcher. This calls for careful and accurate specification of the relationship between rooms. Wide doors and the absence of thresholds are standard as are lever taps, smoke detectors, adjustable sink units, easy to use door and window fastenings, computerised door keys, lockable letterboxes, a large bathroom, easy access to the balcony and meters that can be read at wheelchair height.

The minimum floor space is 70 sq m. Newer complexes have apartments ranging in sizes up to 300 sq m, with residents paying more for larger apartments. Future developments will feature new technological developments in communication, with a view to maximizing the independence of residents.

The apartments and the complexes as a whole are designed to be ‘age-proof’, that is, to be liveable for people of any age.
Where possible, apartments are configured or adapted to the needs and preferences of individual residents.

There are around 200 apartments in each complex and they are all high rise – because of the pressure on space in densely populated Holland.

A ‘village square’

Each Apartments for Life complex has a ‘village square’ at ground level with a range of services and facilities. These are critical to creating an ambience in which apartment residents are, and are seen by others as, part of the world around them.

The aim is to counter the sense of older people being excluded from the mainstream of community life because they no longer work nor look after children or because they are in poor health.

Humanitas works hard to create a warm, stimulating and inviting atmosphere where apartment residents, their friends and family and residents of the local neighbourhood are attracted to come to use the spaces, facilities and services and to interact with each other. The facilities are chosen and designed with family members and neighbours in mind, as well as apartment residents, being careful to ensure that all areas are accessible by people who use wheelchairs.

Typically the village squares include a covered atrium – this is northern Europe where the weather is frequently wet and cold – with comfortable seating, restaurant, bar and cafe, internet cafe and open space with art, sculpture and large colourful murals.

‘If you have to wait for the lift you should have something to look at.’

Apartments for Life complexes may also include:

- an ATM
- a fitness centre, hairdresser, beauty salon
- a physiotherapist
- gardens, fish pond, aviaries, animal park
- a supermarket or store
- a reminiscence museum with everyday objects, pictures, sounds and scents from the last century to provide fun for young and old and especially for people with dementia
- art and craft studios
- a multi-faith prayer/meditation centre with, for example, Roman Catholic stained glass window, Islamic prayer mat and statue of Buddha.

These facilities create a neighbourhood atmosphere by offering services that local residents will want to come and use as well as creating opportunities for social interaction and adding a level of interest and excitement to residents’ lives. The latter is especially important for those in poor health or with depression so that they ‘have something to talk and dwell upon about other than their own personal afflictions’.

Humanitas believes that people are more able to cope with negative things happening such as illness or death of partners and friends if there are positives happening around them as well.

The restaurants are intended to create a pleasant atmosphere and facilitate social interaction. They are designed to be nice looking and with enough space for people in wheelchairs to move around easily. Good food is offered at prices that those on the lowest incomes can afford, as well as more expensive
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options for those who can and want to pay more. Importantly, the waiters are trained to understand that they may need to give their older clientele more time and not to worry about them lingering or taking 15 minutes to get their money out to pay for their meal. The restaurants are operated by Humanitas on a not-for-profit basis – not by sub-contractors who need to make a commercial profit. Humanitas’ experience is that they can take three years to become financially viable.

‘Restaurants are very important for people’s feeling of wellbeing. And it’s not a matter of carbohydrates, vitamins and minerals, but of tasty food in a pleasant atmosphere. Something to talk about afterwards, like your first kangaroo steak.’

A critical indicator of success is family members having lunch at the restaurant with their older relative who lives at Apartments for Life. Residents and employees receive a 15% discount. Dr Becker reports that family members often borrow grandma’s card to get the discount and that this is not regarded as cheating but rather a positive sign that families are visiting and eating with their older relatives.

‘By attracting the family, the residents are happy. Family members also end up helping out with their relative’s care and their relative’s neighbours.’

Residents’ use of the restaurants and other facilities is also regarded as an indicator of success – as it means that they are spending time out and in the company of others. Health and care services needed by residents are also located in offices and clinics in the village square, being careful not to dominate or present an institutional front. Thus, there are no white coats, jungle of signs, or abundance of rules and regulations evident in the village square.

On entering an establishment of the Humanitas care organisation, one should as it were be taken by surprise by the exhilarating, warm, happy, activating company culture. Actually, the totality of colours, smells, sounds, artefacts, and people “going about their business”, should in no way remind us of “care”.

Activity, art and learning

The village square is also a centre for a range of neighbourhood events and activities which are provided not only to encourage the active involvement of apartment residents but also for the benefit of the wider neighbourhood – both the immediate geographical neighbourhood and residents’ families and friends.

Examples of events and activities include musical performances, bridge competitions, billiards, food festivals, artists in residence and ‘outrageous’ parties with fire eaters, circus performers and animals.

There is an emphasis on lifelong learning and community involvement (‘use it or lose it’). Examples include computer classes at the internet café, social activities with a purpose (e.g. knitting clothing for charities), music therapy, involvement of residents in the construction of the museum, and resident-led conducted tours for visiting overseas aged care professionals.

Walls are painted with colourful murals and/or used as art galleries.

Residents are encouraged to be ‘active’ in whatever way is meaningful to them. By encouraging and creating opportunities for residents to develop shared interests with others, feel a sense of belonging and ‘have something to talk about’ Humanitas aims to counter loneliness and depression.
Apartments for Life complexes are pet friendly as pets are recognised as being important in many older people’s lives. Dogs, for example, are a responsibility and so can give a person a sense of purpose. They are also great socialisers. Dog owners are obliged to take them for walks, to clear up after them and get into conversation with other dog-owners while their dogs are doing the same. Dr Becker gives the example of an older man whose partner and sister had both died and the importance to him of being able to have his dog in his apartment.

The rules about pets are generally no different from those typical in other apartment blocks in Rotterdam and residents have been known to keep dogs, cats, chickens and tarantulas. In some of the complexes there is a resident dog who can be borrowed by the hour.

A mix of people

There is a deliberate mixing of residents, in terms of health status and socio-economic status. In each complex Humanitas aims that at least a third of residents should be people in good health without significant disabilities who are able to live independently. Their inclusion is seen as an important element in avoiding an ‘institutional’ feel, a tendency common in places where people who are dependant are all clustered together.

Residents in good health are encouraged to act as volunteers, become involved in organising activities and in the management of the complex.

Residents can buy in or rent under a variety of arrangements, from low rent social housing, through to renting or buying (through the
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equivalent of strata or leasehold in Australia) apartments of varying sizes at market prices. This also ensures a socio-economic mix.

Rules governing who can purchase or rent apartments are kept to a minimum. Lower age limits rarely need to be enforced, and if one member of a couple dies, his or her partner remains entitled to stay regardless of their age or state of health.

Dr Becker reports that in practice the apartments are mostly purchased or rented by people in their middle years or in older age who are attracted by the concept and the future availability of care services. The apartments tend to be a bit more expensive than equivalent apartments elsewhere in Rotterdam and so are less attractive to much younger people.

Dr Becker reports on a ‘problem’ in Rotterdam of much younger women marrying very elderly men, which occasionally requires intake policies to be invoked. For example, a couple comprising a very elderly man who is likely to die within a year, and a woman in her 40s.

Residents also reflect the cultural mix of Rotterdam, Humanitas tries to accommodate different cultural groups’ needs and preferences, for example, in relation to the food served in the restaurants, food handling (e.g. halal), the size and design of bathrooms and provision of rooms for religious use.

Humanitas has experimented with locating people from migrant groups throughout the complexes and, conversely, clustering them together. In one of the apartment complexes (Bergweg) a floor has been allocated to Hindi-speaking residents, in another there are day care facilities for Turkish and for Moroccan residents. Dr Becker reports that in future Humanitas aims also to offer apartments more suited to a range of different household types and living styles, for example, for communal households, migrants, gays and lesbians.

Separation of housing and care

Humanitas has separated the health and care elements from the housing elements. Each are provided and paid for separately whether by the resident or through a government or insurance scheme.

Residents rent or purchase their housing as they would in any other apartment complex. When they need health and care services, residents can obtain them from Humanitas or are free to organise care services from other organisations if they wish.

Humanitas typically retains ownership of at least 51% of the apartments in each complex. Dr Becker reports that, over the long term, Humanitas generates profits from the sale and rent of the apartments, and ploughs the profits back into the organisation.

The building of apartments that are ‘age proof’ but otherwise no different from other apartments, minimises the risk that the complexes will become out of date in 20 years time and need replacing. Another risk mitigation strategy is that, in the unlikely event that demand from older people drops, the apartments could be sold or rented to younger people.

Some complexes have been created by buying an existing apartment block, converting the ground floor to a ‘village square’ with community facilities, adapting the apartments so they are ‘age-proof’, then leasing or selling 49% of the apartments on the open market to families and younger singles people. Dr Becker supports a ‘free market’ approach, offering apartments in varied locations, with a variety of types of tenure, size and value.
Residents have access to personal care, nursing care, psychologist, social worker, dietician, speech therapist, GP and other health and care services. Typically these are based among the ground floor facilities.

Humanitas has future plans for residents to have greater access in their apartments to mobile (visiting) specialist doctors, dentists and other specialised health services, and for greater utilisation of telemedicine and e-health systems.

As its name indicates, a key aim of Apartments for Life is that residents should not need to move again irrespective of health or other changes in their circumstances. Residents who develop advanced dementia and/or challenging behaviour can be an exception. Most people who develop dementia are supported in their apartment, but a small number have such disturbed behaviour or cause such distress to their partners that moving them to a secure area is the only option. In some of Humanitas’ newer complexes, there are small clusters of sheltered apartments ('dementia clusters') into which people can move, in these circumstances. So while the aim of keeping people in their own apartment is not achieved, they can remain within the same familiar complex and may be able to continue visiting the restaurant etc. This option works well for their partners, who may no longer be able to cope living full time with a person with advanced dementia but who want to be close by.

The management and staff culture

Dr Becker reports that his early description of traditional aged care facilities as ‘islands of misery’ was not popular and that change within Humanitas was gradual. Initially, small but very visible changes were introduced, such as upgrading and changing the entrances and foyers.

Today, the management and staff culture places great emphasis on awareness of and adherence to the four core values – especially the ‘yes culture’ – as well as on the encouragement of bottom-up creativity, continuous innovation and improvement. The organisation is non-hierarchical and service-oriented.

Openness of spirit and competencies are given more weight in staff selection than qualifications. However, if a member of staff wants to study for a higher qualification, they will be given a lot of support to do so.

Dr Becker reports that the ‘yes culture’ and focus on happiness has resulted in Humanitas becoming a preferred employer, lower staff turnover and sick leave rates. Humanitas also has a ‘magnetic appeal’ for volunteer workers. Many residents also help each other out rather than call on professionals.
Apartments for Life in Australia

The Benevolent Society’s aged care services

The Benevolent Society was founded in Sydney in 1813, and is Australia’s oldest charity. From its beginning, it has responded to changing social needs.

During the nineteenth century, The Benevolent Society of New South Wales (as it was then known) gave food or cash to the most needy or at various times housed them in ‘asylums’. In the first half of the twentieth century, the Society’s work focused mainly on children and women, and included the founding of the Royal Women’s Hospital in Paddington.

By the 1950s a new need had been recognised. Surveys told of ‘inappropriate accommodation for the elderly... of aged people living in single rooms in appalling conditions, exploited by greedy landlords and cut off almost entirely from the outside world’.

The Commonwealth Aged Persons Homes Act of 1954 introduced subsidies for organisations prepared to provide low cost rental accommodation for the aged. This was the beginning of the next stage of the Society’s provision for older people: retirement villages for low income older people in the 1960s and 70s, followed by aged care hostels and nursing homes in the 1970s and 80s and the rapid expansion of community-based aged care in the 1990s. Such a pattern was common to many church, charitable and community-based organisations.

Need for change

However, by the late 1990s the Society’s villages and aged care buildings were becoming outdated and plans needed to be made to fit them for the twenty first century. At the same time the first reports reached Australia about the unusual things the Humanitas organisation was doing in Rotterdam, prompting a visit by General Manager Ageing, Barbara Squires.

I was looking for innovative models that might help us plan for the future of our residential facilities and villages for older people. What I saw in the UK were lovely places my elderly mother could have happily lived in, but when I saw Humanitas Bergweg, I knew I could have moved in there immediately. It challenged every one of my preconceptions about what was possible in older age.

Humanitas Bergweg was the first of the purpose-built ‘apartments for life’ buildings to have all the features that have become the hallmarks of Humanitas and which are described in this report: a high rise apartment building in a densely populated area with a vast indoor atrium as the ‘village square’ humming with every day life; office workers coming in to have lunch in the cafeteria; a mix of older people of different ages, some very active and running clubs in a range of meeting rooms, others with walking frames or wheelchairs enjoying meeting with friends; daughters and grandchildren coming in after school to meet a resident for coffee, and even one woman with her tiny dog in the basket of her electric wheelchair.

But probably the most striking features of Humanitas’ Apartments for Life (apart from the built form) were the maximising of residents’ independence, autonomy and choice, the strong connections with family, friends and the local community, and the culture of managing risk, rather than trying to eliminate it.

The values that underpinned Humanitas’ approach were closely aligned to those of the Society. Although The Benevolent Society did not express its philosophy and approach in the exactly the same way Humanitas did, there was a strong resonance.

**Research and development of the concept**

The Benevolent Society was also very aware of the implications of the ageing of the Australian population and the challenges this poses for the aged care system. The Society saw the possibility of using the Apartments for Life model to combine purpose-built housing and community care in a way that was new and which would take into account the changing demographic and social environment.

In late 2003, the Society held a series of workshops to explore and refine the Apartments for Life concept for Australia. Invited participants included a number of senior personnel from major aged care developers and providers, architects, officers from relevant state, federal and local government departments, academics, specialist consultants, and officers from peak bodies representing the aged and community care sector.

The background paper provided to participants set out the following principles the Society wished to follow:
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- treat each older person as an individual, with respect and dignity
- focus on the older person's quality of life
- promote autonomy and independence
- promote contact with friends, family, and community
- accommodate each older person's changing needs
- target older people with medium to low incomes.

The report of the workshops concluded:

There is wide support for the principle of Apartments for Life and for its key feature – extending the reach of community care. While many recent projects in Australia have sought to promote ageing in place by facilitating delivery of care packages into adaptable apartments, the Apartments for Life concept takes this idea further than appears to have been attempted elsewhere and is as such “cutting edge”.

The report also noted the need for further development and testing of the concept.

Work continued during 2004–2006, with a review of the literature on ageing in Australia and overseas and extensive consultation with a wide range of experts and stakeholders. (A list of key references and sources of further reading is included in the Appendix.)

Other innovative Australian models

As part of the evidence gathering process, a number of retirement villages and aged care facilities were examined. Three stood out at the time as being innovative and closely aligned with the principles the Society had identified as fundamental to what it wanted to achieve.

Peakhurst Village

Run by IRT³, a community based organisation, Peakhurst Village looks like a conventional retirement village, with single story villas and duplexes across a suburban site in southern Sydney.

However, about half of the residents at any one time receive low level residential care in their villa or duplex. The Village has a number of residential aged care ‘places’ (often referred to as ‘beds’), but instead of these being concentrated in one building to which residents have to move if their care needs increased, the aged care ‘place’ goes to the resident.

The Village was set up in the 1980s, well before Community Aged Care Packages became available.

Dougherty Apartments

Like Peakhurst Village, the Dougherty Apartments⁴ date from the 1980s. Its location and the built form are unusual: it is very close to the commercial and shopping centre of Chatswood in northern Sydney, and it is a 9 storey building.

It was built in partnership with Housing NSW, Willoughby City Council and Uniting Care Ageing. Half the retirement apartments were for older people eligible for social housing. The other half were priced at the prevailing prices for the area. (More recently some have been converted into low care residential units).

Its other outstanding feature is that it is co-located with the Council-run Dougherty Community Centre, which offers a wide range of activities for people of all ages. The Centre is well used by apartment residents.
Colton Court

Colton Court is run by ACH, a community based organisation in McLaren Vale, South Australia. It is in a regional area and provides nursing home level care in 1 bedroom apartments. From the street, it looks like a row of small cottages. Care staff enter the apartments from a service corridor at their rear.

There is a lot of work put into maximising the autonomy of the residents, and into maintaining or even rebuilding connections and support from family and friends. Although it is on a very small scale, it probably comes the closest to embodying the Humanitas philosophy of the residents being the ‘boss of their own life’.

Apartments for Life at Ocean Street, Bondi

Having thoroughly tested the ‘Apartments for Life’ concept to ensure it was aligned with The Benevolent Society’s purpose, a team of consultants was commissioned and began work in earnest at the end of 2006.

The Society has adapted Humanitas’ Apartments for Life concept for Australia and for the particular location of the proposed project in Bondi in Sydney’s east. The Society is currently seeking development approval.

The proposed site is 11,000m² and has been owned by The Benevolent Society for many years. It includes a heritage listed Victorian mansion and surrounds. The site is located in a high density area of Waverley Local Government Area and is adjacent to a park. The immediate area contains a mixture of medium rise apartment blocks up to 9 storeys, smaller apartment blocks and older 1 and 2 storey dwellings. The site is located within 200 metres of a shopping strip and public transport. It is 2 kms from the major shopping, transport and services centre at Bondi Junction. There are a number of religious centres close by.

During the development of the proposal for this site, the Society consulted with local residents, service providers, older people’s organisations, Council, government officers and other stakeholders. It undertook a statistical analysis of the demographics of ageing in Waverley and the immediate area around the site, and of the potential demand for lower income older person’s housing in Waverley.

The situation in the Waverley area reflects national demographic trends. Waverley Council has identified the ageing of the population and housing affordability as two of its most significant community issues in its current Social Plan. As in many other parts of Australia, there is a shortage of housing that is suitable for older people’s changing circumstances. This can create major difficulties for long term older residents of Waverley when health problems make their housing unsuitable, especially for those on low incomes who have modest or no assets.

For low income home owners, their home represents a significant potential asset but one that can may only be able to be realised if they are prepared to move out of the area. Gentrification of the area over the last 20-30
years has resulted in major increases in prices and older people who own a house certainly have more options than do those who own apartments. Almost half of Waverley's lower income older homeowner households live in apartments, many in older style blocks without lifts.

Low income older renters are under very intense pressure and are rapidly being forced out of the area altogether.

**Aims**

The Benevolent Society's Apartments for Life at Ocean Street project aims to be a new concept in retirement living and aged care – a place where older people can live in their own homes throughout the changes and challenges of later life, with a sense of autonomy and purpose and fully connected to their local community.

The key aims are that:

- Residents are able to stay in the same apartment for the rest of their lives. The Society's goal is that 95 percent will not need to move again to a residential aged care facility.

- A vibrant new ‘social hub’ is created; connections between residents and the local community are built and strengthened; contacts with family and friends are promoted; and social isolation is reduced.

- The apartments are affordable by local older people in a range of financial circumstances so that local residents are able to stay in the area and so that the resident mix reflects the diversity of the local community.

- Lessons from the project are disseminated to the aged care sector, researchers and
government policy makers, for others to replicate or adapt.

These aims will be achieved through a combination of:

• the design of the apartments, buildings and external open space
• inclusion of affordable housing
• assisted access to support services and care
• on-site services, facilities, social activities and community engagement
• a philosophy of respect for residents’ individuality and autonomy
• evaluation and research.

**Design for living and for safety**

The design is intended to maximise residents’ autonomy and quality of life, be adaptable to their changing circumstances and to foster social interaction.

Features include:

• 140 self-contained apartments all with separate living area, guest/study area, kitchen, bathroom and balcony or courtyard.

• Internal apartment design that takes into account reduced mobility and common health problems, including level entries, wider doors and hallways, bathrooms designed to be useable and safe, kitchens with switches, plugs and cupboards within easy reach etc.

• Space in each apartment (in a guest/study area) so that a family member or careworker can stay for a short period while helping look after a resident in poor health.

• Safety features, such as lifts which can be used in the event of a fire and personal alarm systems in each apartment.

• Space for visiting careworkers, including storage space for equipment.

• Built-in cabling to minimise the cost of installing ‘smart’ technology systems.

• Balconies on each floor overlooking the site, with sitting and socialising areas and space for electric scooters and other mobility aids.

**Affordable housing**

The inclusion of affordable housing is important to The Benevolent Society’s mission and purpose. More specifically it is intended to contribute to the social sustainability of the Waverley area by enabling local older people to stay in the area and maintain their social networks and sources of informal support.

• Ten per cent of apartments will be social housing, that is, rental housing for low income age pensioners without assets; rent will be set at a fixed proportion of their income.

• Thirty percent of apartments will be priced at a discount so that they are affordable by local older people who cannot afford to pay the full price because of the modest value of their current home (e.g. an older style home unit with no lift).

• Sixty percent of apartments will offered at market prices.

The apartments in the last two categories will be offered on a loan-licence basis. The Society will retain freehold ownership, thus ensuring that the site remains in community ownership for future generations and ensuring that the affordable apartments will be kept affordable for future residents.

The complex will be classed as a ‘retirement village’ under NSW legislation and will be
covered by the relevant fair trading laws, primarily the Retirement Villages Act.

**Community facilities**

In order to promote residents’ quality of life, encourage them to be as active as possible and to foster connections with the local community, the complex will include a range of community facilities. The aim is to create an inviting ‘social hub’ and neighbourhood atmosphere that:

- has useful services and facilities for residents of the site and people nearby
- is a pleasant place for people to get together
- has ongoing activities, events and spaces for older people and the general community.

Some of the services will be particularly useful for older people who live on the site or nearby. Others will be of value to people of all ages.

Key features include:

- A café offering meals, a child-friendly area and basic supplies on sale for people with limited mobility.
- Rooms of various sizes for flexible use; for example, for local club meetings, self help groups, craft groups, fitness and dance classes, adult learning, social activities and so on.
- A dementia day centre.
- A men’s shed or workshop.
- Consulting rooms for visiting health professionals, for example, doctor, physiotherapist, podiatrist, diabetes nurse or arthritis self-management programs.

A community development coordinator will be employed to facilitate and coordinate a program of activities involving residents and the nearby community. Their role will be to help strengthen community networks, reach out to socially isolated older people, promote activities important to older people from varying cultural backgrounds, foster volunteer activity and build intergenerational projects (for example, involving children at local schools).

By providing easy access to a range of social and recreational opportunities and a community development worker, the Society aims to help residents stay ‘active’ whether they are relatively young, fit and in good health or whether they are much older, frailer and in poor health. Enabling residents to develop shared interests and feel a sense of belonging and purpose is also a strategy for countering loneliness and depression in older age.

**Assisted access to care and support**

Some residents will live wholly independently; others will need care services and support from time to time or on an ongoing basis. It is envisaged that when the project is mature, around a third of residents will live wholly independently, a third will need low level care and a third will receive high level care.

A care advisor will be employed to enable residents to access the particular care services they need from one or more of the network of service providers in the area – whether from another non-government organisation, The Benevolent Society’s own Community Care Eastern Sydney service, a government service or a private agency.

The care advisor will

- assist residents to connect with the particular type of care and support that they need (up to levels of care equivalent to hostel or a nursing home level)
• negotiate with health and care services on residents’ behalf, if needed
• discuss with residents’ families about how they might help, if appropriate
• link residents to volunteers, if appropriate.

Benevolent Society staff members and visiting careworkers will always be on site during the day and at least one person always on site during the night to respond to emergencies.

The Society will work with local service providers and government departments to coordinate and maximise the efficient provision of care services to residents.

What about dementia?

The Ocean Street project will be as ‘dementia friendly’ as possible, using good design and technology, as well as the creative use of services including the on site dementia day care centre. However, the site is not big enough to support an aged care facility as well as a viable number of apartments. The care advisor will be available to assist families to find and move their relative to a suitable aged care facility if all options for safely supporting the person have been exhausted.

The lessons so far

Something that is new does not fit easily into existing categories. For example, in NSW planning applications, developments for older people are categorised as self care, hostel or nursing home. There is no box to tick that says ‘a bit of both – apartments for independent living but with care up to nursing home level if needed’.

It has also been a constant challenge to convey what it is that the Society is trying to achieve through its Apartments for Life project. Most people have little or no concept of the network of community services and care available for older people in their own homes. You can drive past or visit a nursing home, but no one can see the invisible network of community care workers criss-crossing suburbs on a daily basis.

Many residential aged care providers are very risk averse. They believe that legislation controls every aspect of their operation, although innovative providers such as IRT and ACH have shown it is entirely possible to challenge such assumptions and offer a better quality of life to their residents.

It is very difficult to make sure that a residential facility is truly the home of the older person, with all that means in terms of control and choice, but it can be done. The easy position is that the facility may believe it is ‘homelike’, but it is really the workplace of the staff.

Many retirement village operators have built their financial model on the expectation that residents will move on to an aged care facility as they get older. The lower turnover of residents in an Apartments for Life setting challenges those assumptions.

On the positive side, many policy makers can see the advantages of Apartments for Life. They know the evidence points to a better quality of life, and lower use of formal care services and expensive hospital admissions if older people’s social networks are maintained, and if good design and accessibility improves their capacity for self care and independence. Leading retirement village operators know that there is falling demand for so called ‘lifestyle developments’ with resort type facilities targeted to active people aged 55 plus. They know that there is increasing demand from older people in their late 70s or early 80s who want to know that some support and care will be available when the time comes without their having to move again.
The most encouraging response has been from older people. Those who have heard Hans Becker speak, in person or on TV or video, really understand what he is saying... and they want it! This should not be a surprise: being ‘boss of your life’ is what we all want at any age.

**Challenges to be met**

The Humanitas developments in Rotterdam and the Ocean Street project are in medium-to-high density population areas, which make a multi storey ‘vertical village’ style of building possible. The scale of such buildings and their location near well-populated areas make it easier to provide community facilities to promote interaction, as well as to draw on existing resources such as shops, libraries, churches etc.

The Benevolent Society believe the evidence points to the benefits of this style of housing and care being replicable on a smaller scale and/or in other types of locations. The Society is committed to sharing the lessons it learns from this project with others. It envisages developing partnerships with researchers in order to evaluate the impact and outcomes of the project.

One of the challenges will be to quantify the benefits – in improved quality of life, reduced service and hospital use, and reduced environmental impacts, and to make it possible for some of those benefits to be reinvested in the project.
Conclusion

The greatest lesson The Society has taken from Dr Becker and Humanitas is the importance of a philosophy or culture that is deeply and genuinely committed to the goal of ‘happiness’, not efficiency or safety, and that seeks to maximise the independence, choice and control of each resident.

Such a philosophy is far more important than the most sophisticated building and elaborate community facilities. Without a deep mutual respect between the organisation, the staff and residents, all we will have is a fancy institution – modern, perhaps even glamorous, but still an institution.

*In 1898, the Society mustered all those over sixty-five years of age who received assistance and asked them if their comfort and necessities would not be best met if they entered the government institutions instead of living in comparative wretchedness by such limited aid as the Society was able to provide. Those questioned replied in unequivocal terms that they regarded institutional life as totally repugnant and they would stay in their own homes, no matter how humble or wretched, and would enter an institution only if they were in the last stages of desperation.*

*The Benevolent Society of NSW Annual Report 1898*.

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Further reading


Aged and Community Services Australia. Affordable Housing for Older People - A Literature Review An Issues Paper and Resource Guide. www.agedcare.org.au


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