

Housing and care

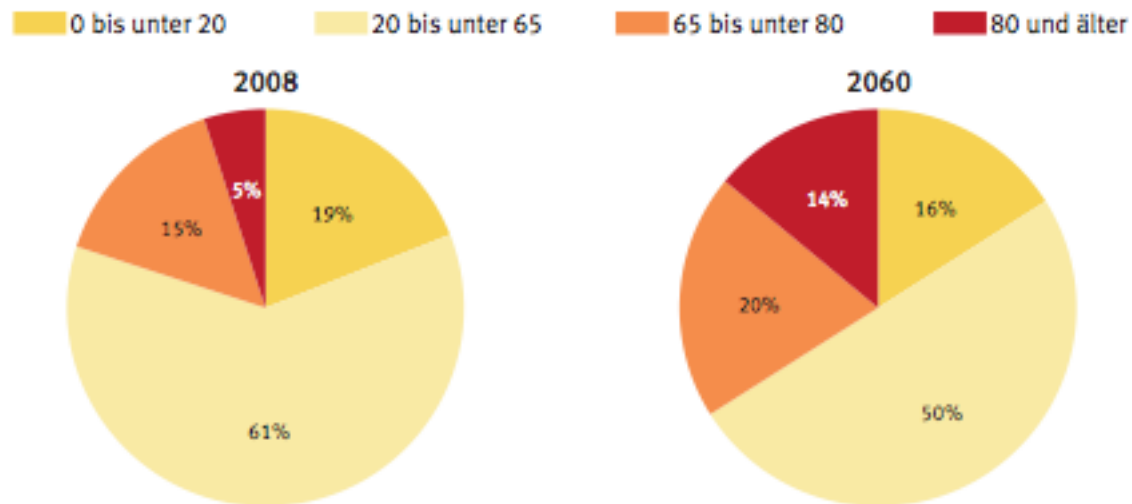
Deutsch- japanisches Pflegeforum,
Berlin, Dr. h.c. Jürgen Gohde,
Kuratorium Deutsche Altershilfe

How do you want to live in 2025 ?

- The new definition of care and the need for its implementation
- Wishes and expectations of a self-determined life in old age
- What can we do for a self-determined life
- How everyone benefits when self-determination and independence are promoted

Population by age groups

Bevölkerung nach Altersgruppen



12. koordinierte Bevölkerungsvorausberechnung,
Untergrenze der "mittleren" Bevölkerung

Statistisches Bundesamt

11. Bevölkerungsvorausberechnung

Potentials and obstacles for independent living and senior living

- insufficient supply of the elderly in the event of assistance and care
- inadequate supply situation in dementia patients
- No day care close to home for the elderly
- No fair enough aging housing stock

Representative survey on age-friendly design of the housing stock (n: 1000) KDA



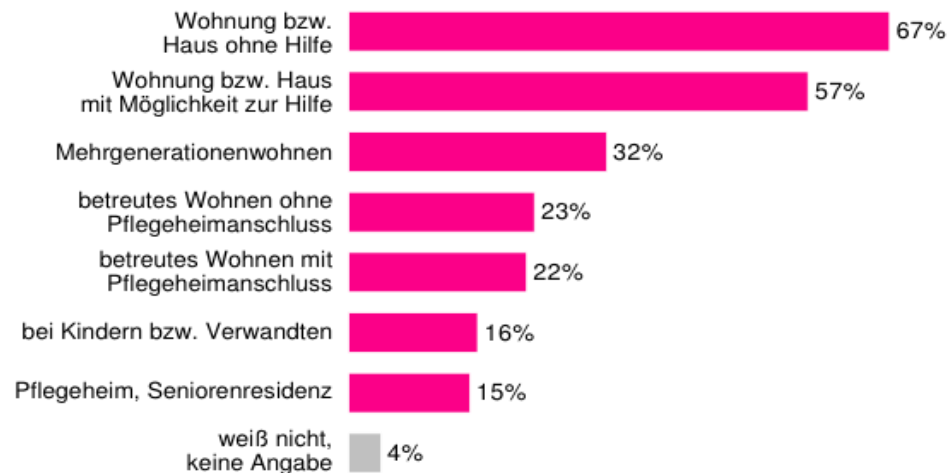
- 3 / 4 of senior households have access steps and thresholds
- 2 / 3 of all senior households have no access to the terrace-free threshold
- 20 - 30% and movement areas in the bathroom or the door wide to a narrow
- Only 15% of all senior households have level access shower

Living arrangements in old age : two thirds want to live at home

Wohnformen im Alter

Zwei Drittel bevorzugen eigenständiges Wohnen im Alter von 70 Jahren

Mehrfachnennungen möglich



Frage: [Je nach Befragtenalter] Wie wollen Sie wohnen, wenn Sie 70 Jahre alt sind? Wie wohnen Sie derzeit?
Wie haben Sie gewohnt, als Sie 70 Jahre alt waren?
Basis: 1.100 Befragte ab 50 Jahren



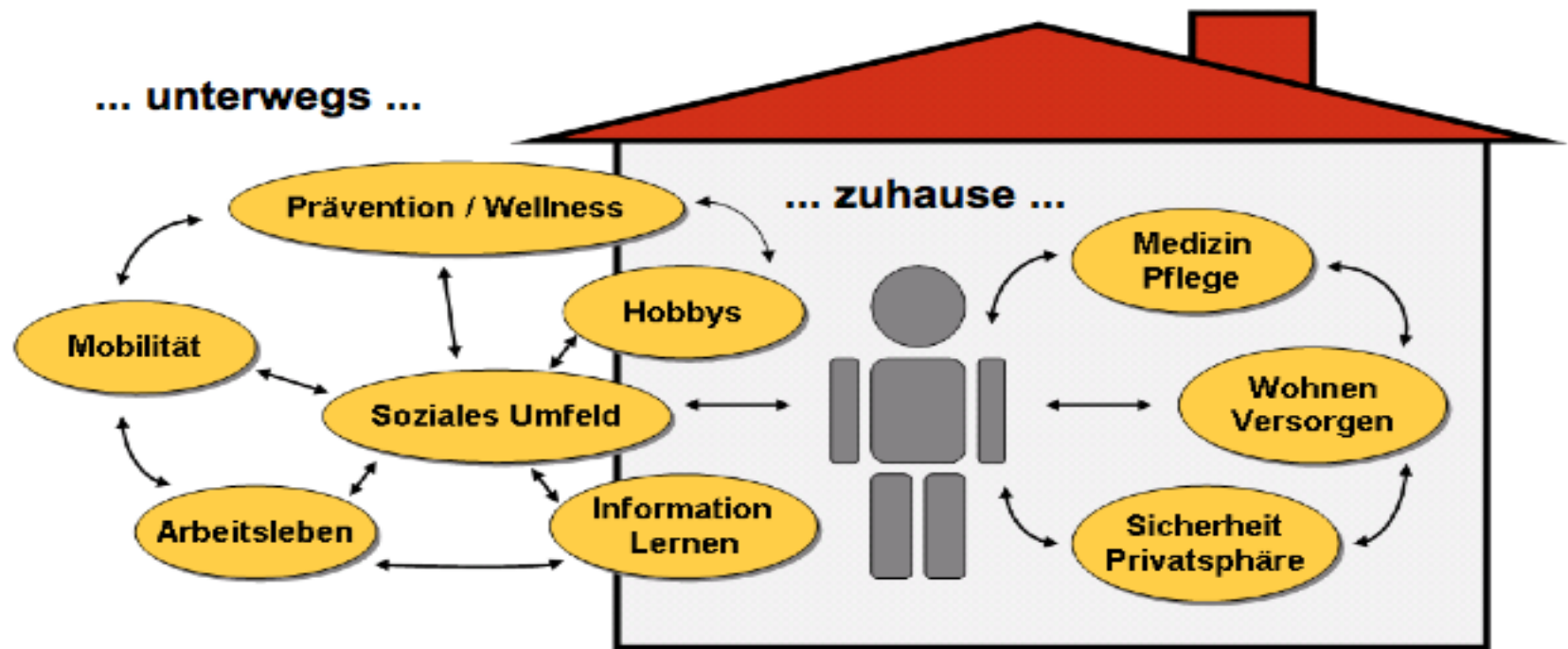
Januar 2011
Wohnwünsche im Alter | 5

Lack of age- appropriate housing

Bundesland	Haushalte mit einem Haupteinkommensbezieher 70 Jahre und älter		Veränderung in v.H.	Bedarf an senioren-gerechten Wohnungen im Jahr 2025
	2008	2025		
Baden-Württemberg	979.382	1.233.276	25,9	246.658
Bayern	1.132.850	1.438.353	27,0	287.674
Berlin	294.477	436.594	48,3	87.319
Brandenburg	245.713	336.841	37,1	67.368
Bremen	69.469	85.481	23,0	17.096
Hamburg	160.584	174.516	8,7	34.903
Hessen	567.117	720.479	27,0	144.095
Mecklenburg-Vorpommern	159.439	207.484	30,1	41.496
Niedersachsen	763.999	957.433	25,3	191.489
Nordrhein-Westfalen	1.752.026	2.129.375	21,5	425.875
Rheinland-Pfalz	394.689	487.159	23,4	97.430
Saarland	109.286	129.250	18,3	25.850
Sachsen	471.776	584.929	24,0	116.986
Sachsen-Anhalt	257.963	306.643	18,9	61.327
Schleswig-Holstein	272.970	352.606	29,2	70.521
Thüringen	230.405	299.468	30,0	59.895
Bundesrepublik	7.862.145	9.879.887	25,7	1.975.982

Technical Support for independent living

Assistenzsysteme im Dienste älterer Menschen ...



3. AAL-Kongress, Plenarvortrag, Carmen Gehring, BMBF, 27.01.2010

Future- oriented forms of housing in old age

- Strengthening of normal living in their own domesticity
- Dissemination and development of alternative forms of living independent and self-determined age
- Small-scale networking and strengthening of individual initiative and mutual aid

Future challenges

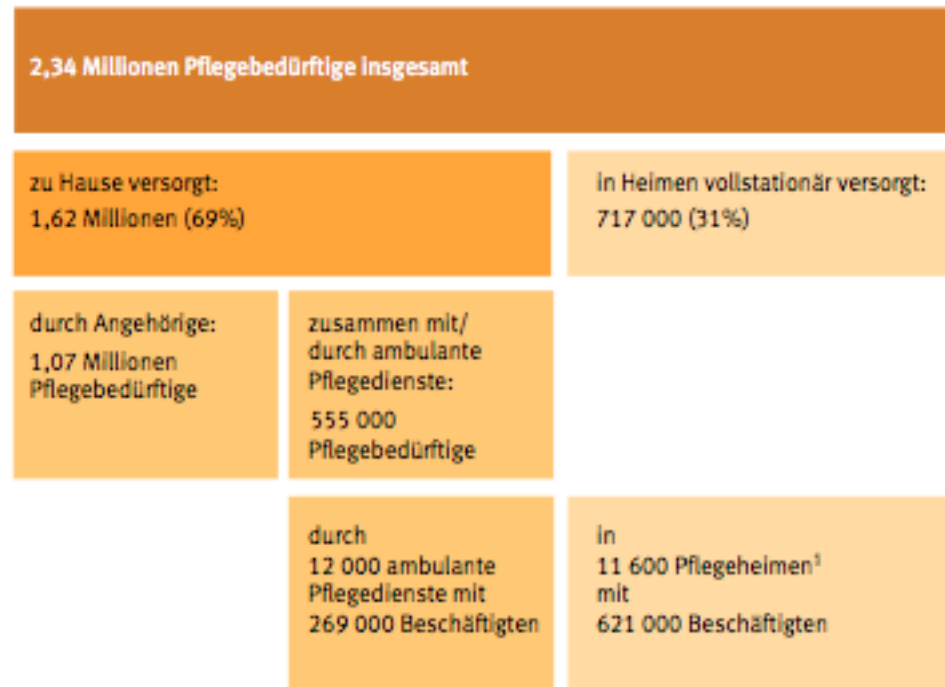
- Improving the framework
- integration of care

„Inclusion-grade supply landscapes“

- The upcoming change processes should be oriented towards an inclusive society, participation and self-determination, social protection and safeguards the dignity of human life-serving structures appropriate term
- The design can only be effective when interacting autonomous action, support from families, friendship and neighborhood networks, parishes (counseling and participation), social enterprises, civic engagement and professional services and reliable public coverage.

Care Statistics 2009: Still dominated by the home care

Pflegebedürftige 2009 nach Versorgungsart



¹ Einschl. teilstationäre Pflegeheime.

2011-08-0161

Legal Definition of the Need for Long-term Care (Proposal)

- **„A person is deemed to be in need of long-term care, when said person is found, according to the specific stipulations of the following articles, to exhibit impairments to independence or disabilities and therefore be dependent upon assistance from others.**
- **This applies to persons with physical and psychological impairments, impairments related to physical, cognitive or psychological functions, and health-related burdens or requirements that cannot be independently compensated or overcome.“ (Report of the Advisory Board)**

Advantages and opportunities of the new assessment process

Promoting Independence

more choice between cash and benefits in kind
more prevention and networking

Reducing dependence

more low-threshold assistance
more rehabilitation

strengthening supportive structures

welfare-mix (mandatory cooperation of professional and volunteer
counseling for families (families, friends and neighbourhood)
gender

Potentials and challenges of a support system for outpatient services to the UN Convention for Persons with Disabilities

- Individualization principle of assistance (person orientation)
- Outcome orientation
- Networking :
Older people with chronic diseases, multi-morbidity and / or nursing care are dependent on an integrated and networked continuous long-term supply and cooperation of all stakeholders, at local level
- sustainability
- Individual participation management
- Freedom of choice (Article 19 of the Convention): Right to outpatient forms of help (no one against his will and fortune in institutional accommodation)
- Capability: civil society as a resource
- Ability to cooperate between institutions in the social space

Personal resources

- Self-organizing potential of the older generation is the biggest renewable resource of the 21st Century.
- Trend: Belonging and significance for others
- Fostering supportive neighbourhood structures
- Civil society engagement does not work instead of welfare assistance, but only with them.

Living at home

- Promotion of accessible new homes
- Structural and individual housing adjustment
- More housing counseling services
- Quarter concepts
- Future Challenges:
 - Expanding barrier-free housing
 - Consultation and Coordination
 - Expansion of low-threshold services



Community living arrangements

- What's typical ?
- Special quality of living together
- Residents play a role in the project development
- Mutual and professional help when needed
- Mixture of different social groups
- Integration into the surrounding residential area
- promoting community building concepts

Assisted Living

- What's typical?
- barrier-free apartment
- basic services: emergency backup, advice, information and Mediation services, community activities in common areas
- optional benefits: home economic and nursing services, small technical services, travel services, etc.

Home groups

- What's typical ?
- Community care co-existence of 6-8, the elderly in a barrier-free layout apartment
- Each resident has a private furnished rooms (some with en-suite shower / WC) with familiar furnishings, uses one common kitchen, bathroom and other common areas
- care providers organize the group life and budget
- more individually necessary assistance be provided by additional nurses

Home communities

Villa Hittorfstraße, Münster



Alt und Jung-Wohngemeinschaft e.V., Bielefeld



**Hof Dellbrügge
Steinhagen-Amshausen**

Future challenges

- Dealing with growing help and care needs of residents
- expansion of service offerings to residential district
- volunteer involvement / civic engagement

- 7 reasons..
- 5. reduce burden of care



KDA: elements

Housing

- structural measures at home
- independent living arrangements
- Living
- arrangements for care

Social

- Counseling and daily living aids
- Social integration and mutual assistance

Care

- Social integration and mutual assistance
- Quarter-based care and assistance
- Integration of day-care and inpatient services

Neighborhoodcentre Bielefeld

Nachbarschaftszentrum Meinolfstraße
Freie Scholle Bielefeld



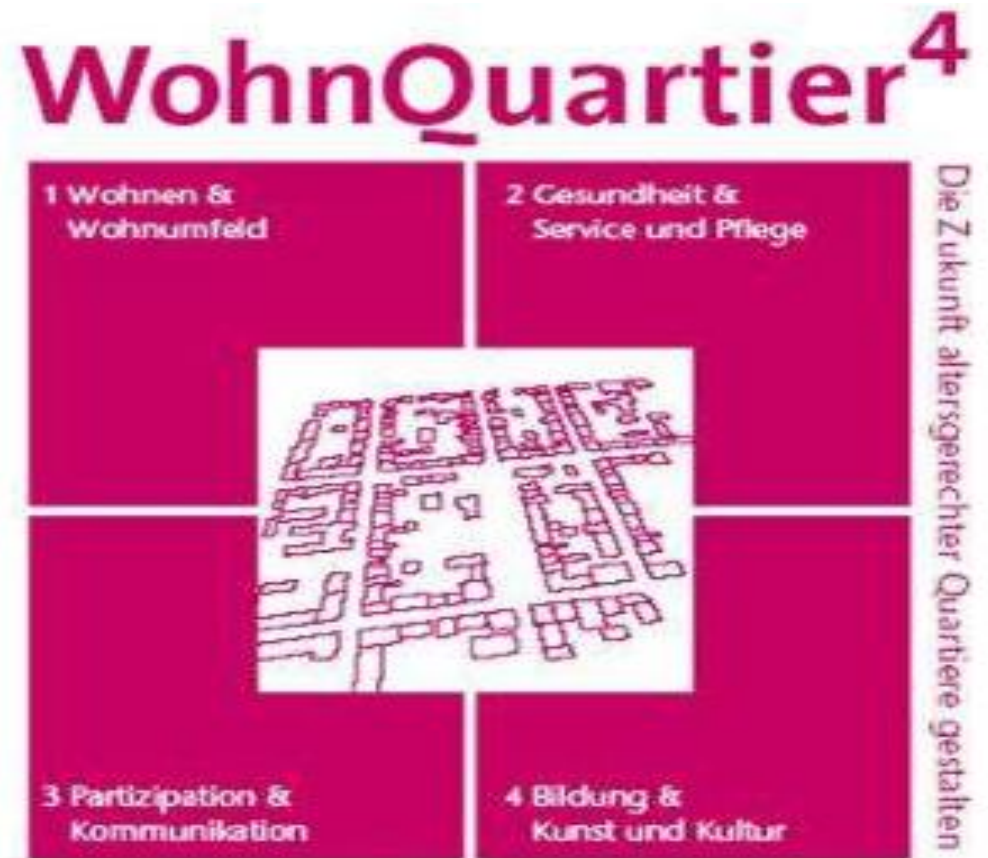


- Elderly and / or disabled people are also in the case of increasing need for help in their familiar neighborhood can continue to live
- Barrierfree living with neighborhood help
- Housing options set to "normalcy"
- By living in the community / district is in the social environment, especially the contact with neighbors and friends, maintain or restore (give it to new interactions between young and old)
- Home and hospital visits can be avoided or postponed

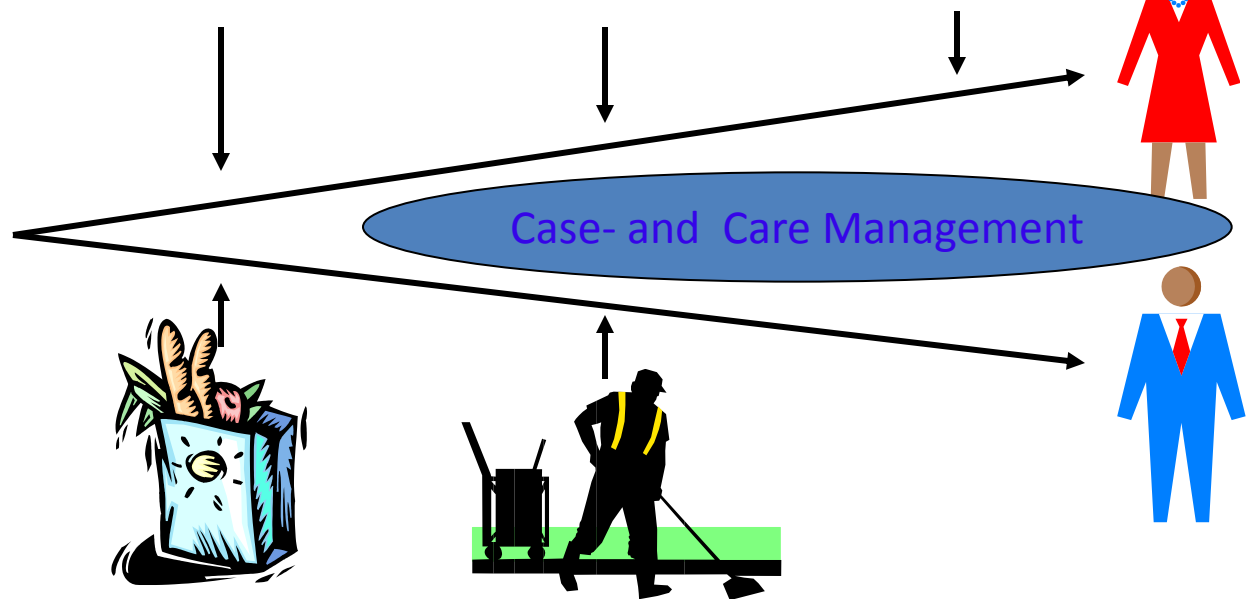
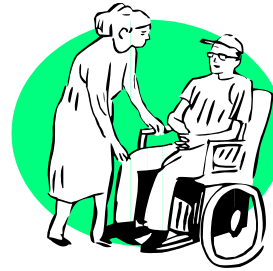
Age-appropriate neighborhood design/ social space

4 Factors

- living environment and living
- health, service and care
- participation and communication
- Education, art and culture



Outpatient care and assistance



Flexible development of social infrastructure

- Cross-sector work
- Knowledge of the situation
- Priority: Living and housing
- Inclusion-grade supply landscapes
- Dementia
- Policy for seniors is community-oriented policies with the generations at local level

Vision

- An inclusive society is to ensure that self-determination and participation, social protection and a decent life for all, requires the interaction of personal responsibility, family support, civic engagement, professional social services and governmental coverage.

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