Home is where your heart is, whatever your age

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Our homes have a significant impact on our wellbeing and our ability to live our lives the way we want to. For those aged 65 and over, 80% would like to stay where they are and 85% plan to remain in their neighbourhoods for a number of years (Lloyd, 2015). In our major report with Ipsos MORI – Later Life in 2015¹ – we found that, regardless of age, the majority of people do not want to move from their current home.

However, many of us live in unsuitable housing that does not meet our needs as we age. Evidence from our report with Ipsos Mori found that 30% of people aged 50 and over have some problems in their accommodation. Whilst an expansion in the supply of home is to be welcomed – recently three of London’s biggest housing associations announced plans² to build 100,000 new homes in London over the next decade – there is no indication of whether or not these properties will be suitably adapted to meet the current and future needs of our ageing population.

Appropriate housing and the wider neighbourhood play a vital role in later life. Poor quality environments can cause poor physical and mental health, and prove costly to society. The impact of poor housing on health is similar to that of smoking or alcohol, and the first-year cost to the NHS of treating conditions caused by poor housing is estimated at £1.4bn (BRE, 2015). Suitable and appropriate housing is key in supporting people to maintain good health, independence and improve their quality of life, and should promote a broader sense of wellbeing.

Home adaptations can improve the accessibility and usability of a person’s home environment, which can help people feel more confident and in control of their daily activities. Evidence from Foundations, the national body for home improvement agencies, found that adapting your home can delay a move into residential care by up to four years (2015).

In our survey with Ipsos MORI, two of the most frequently mentioned adaptations were grab rails and equipment for washing or using the toilet. However, the majority of participants had no home adaptations fitted at all. Relatively low cost home modifications can lead to a 26% reduction in falls and savings of £500 million each year to the NHS and social care services (Keall et al, 2015).

The last comprehensive review of the evidence for the outcomes and costs associated with home adaptations was published in 2007 (Heywood & Turner, 2007). Since then, we have seen an increase in policy attention on the cost benefits of home adaptations. The latest budget provided an increase in the Disabled Facilities Grant to allow more people to access home adaptations. Now seems like the ideal time to consider how we provide better homes to live in as we age.

At our expert roundtable on homes, and in responses to our consultation on our priorities, there has been strong support for the Centre for Ageing Better to commission a new, updated systematic review of the evidence for the impact that home adaptations can have for people in later life. Current policy and practice is focused on ‘ageing in place’ rather than achieving ‘ageing well in place’. This is a critical issue given that the home environment can be central to achieving a healthy and fulfilling later life. It is time for us to find better ways to enable our older population to remain independently in their own homes. Through focusing on adaptations to the home environment we can shift from crisis interventions into preventative measures, helping to achieve ‘ageing well in place’.

Centre for Ageing Better recently invited feedback on a draft plan for a research review on how adaptations to people’s homes can help improve later life. The organisation is now in the process of incorporating responses into its Invitation to Tender.

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