

HOUSING TRANSITIONS: OLDER PEOPLE'S CHANGING HOUSING NEEDS

SUMMARY

The home environment becomes of greater importance to older people in later life, especially if their health or mobility deteriorates. This paper draws on research with older people aged 65-84 conducted over a two-year period. It looks at changes in people's home circumstances including moving home and what helps or hinders the transition, as well as changes experienced when people stay put, including making adaptations or alterations to the home, and changes in warden services.

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Key Findings

Moving or making adaptations to meet changing needs could make a real difference to people's everyday lives and independence. Having sufficient finances, knowledge about what was available and how to get it, and practical and emotional support from family or friends were valuable in the process. Older people without such resources, especially if in poor health, need more support with housing decisions.

The decision-making and process of moving could take a long time. People often found the prospect daunting and saw it as a last resort. Older people require information and advice about the type and availability of accommodation appropriate to their needs, advice on funding and the time required to plan a move, as well as practical support to help them move.

There were practical obstacles to obtaining adaptations, including their availability and affordability as well as personal concerns and resistance to accepting the need for help. People were often unaware of the housing improvement schemes and grants available. This highlights the need for timely information and support that would make a property more manageable and help older people continue living safely in their own home.

The reduction of site-based warden cover was most keenly felt by participants who lived alone and had experienced declining health who missed the daily face-to-face contact. Some older people also thought that decisions to reduce warden cover did not take into account their needs which highlights the need for more meaningful consultation when considering or implementing change.



INTRODUCTION AND BACKGROUND

This paper draws on research conducted for the Joseph Rowntree Foundation (JRF) by the Centre for Research in Social Policy (CRSP). The project, 'Planning and Deploying Resources in Later Life' (RILL), involved in-depth interviews with people (aged 65-84 at the first interview) two years apart to explore their changing needs and resources as they move through later life. The research took a holistic approach to demonstrate the range of different structural, social and individual resources that people drew on to help manage their changing needs. As such, the findings cut across many policy areas (Hill et al., 2009). The purpose of this paper is to focus on the findings that relate to older people remaining in, or moving from, their home in later life. This summary will highlight the implications for housing information and options, home adaptations and the appropriateness of housing in relation to older people's well-being and independence. The contents of this paper will therefore be relevant to various audiences who are interested in the field of older people's housing issues including central/local government, housing providers and third sector/support organisations. The paper examines changes in older people's home circumstances including:

- the experience and impact of moving;
- the factors that help or hinder moving;
- staying put
 - adaptations, alterations, and refurbishments;
 - changes in warden service.

The Home Environment in Later Life

The home becomes of greater importance to older people as they spend more time in it, especially if health or mobility deteriorates (Gilroy, 2008). Furthermore, a suitable home environment can be crucial to independence, health and well-being in later life. This has been increasingly recognised in policy with the inclusion of improving housing in the Public Service Agreement on the well-being of older people (HM Treasury, 2007a). The introduction of a National Strategy for Housing in an Ageing Society (DCLG, 2008a) aimed to improve housing choices and provision for today's older people, as well as 'future proofing' homes so that they will meet the

lifetime needs of future generations of older people. Designing more accessible and easily adaptable 'lifetime housing' has been promoted as a long term cost-effective way of improving older (and disabled) people's independence and quality of life (Sopp and Wood, 2001; Lifetime Homes Foundation, 2010). Furthermore, (although not covered in this research) there has been a growing trend towards, and funding of, Extra Care Housing which provides support services alongside independent living (Housing LIN, 2010).

The Labour government had expanded their target to bring all social housing into decent condition by 2010 to include at least 70 per cent of private dwellings occupied by vulnerable households¹ (House of Commons, 2009). The fulfilment of their longer term aim to adopt a Lifetime Homes standard ensuring that new houses are more accessible and easier to adapt (DCLG, 2008a) is now uncertain with the new Administration expected to review all national planning frameworks (HM Government, 2010). Many older people still live in unsuitable homes that are in need of repair, heating and insulation, which can contribute to illness and social exclusion (Oldman, 2006; Age Concern, 2008). Older households (60 plus) are more likely than average to live in non-decent and energy inefficient homes with those aged 75 plus, receiving means-tested or disability-related benefits, living in private sector housing, or being resident in their current home for a long time, most at risk of poor living conditions (DCLG, 2009). For the increasing number of older low-income homeowners this is due to declining income and capacity to deal with the repairs and improvements required to maintain a property to a decent standard (DCLG, 2009).

Older people can often face changes in later life which impact on the suitability of their home for their needs. Living in a decent and suitable home can therefore mean moving to more appropriate accommodation or adapting their current environment to meet their changing needs and circumstances. Moving may be considered in response to bereavement, worsening health, the need to be closer to key services or nearer to family members, or to free up capital. Moving in later life can therefore be associated with times of distress and uncertainty for people. Engagement and support for older people at such key transition points in their life can be crucial and

¹ In receipt of principal means-tested or disability-related benefit.

was acknowledged in the delivery aims of the National Strategy for Housing in an Ageing Society (DCLG, 2008b).

However, many older people want to remain for as long as possible in their own home. Policy recognises the importance of, and the need for, more preventative and proactive services to enable older people to remain living independently in their own homes. This is reflected in government policy in the area giving older people flexibility and choice over the way they live their life and the personalisation of service delivery. To maintain independent lives and well-being it is recognised that older people can require practical and financial support (HM Treasury, 2007b). The National Strategy for Housing in an Ageing Society (DCLG, 2008a) included the expansion of the Handyperson schemes, new rapid repairs and adaptations services for older people, development of the home improvement agency sector, and improved access to the Disabled Facilities Grant².

It remains to be seen how budget cuts announced by the new coalition government (for example, £780million from DCLG/£405 million from Local government in 2010-11 (HM Treasury, 2010)) will impact on these existing commitments and sources of funding. There are fears that funding changes to the Supporting People programme and removal of the DFG ring fence have left older people's housing-related support and wider services vulnerable to cuts (National Housing Federation, 2010). However, it is also suggested that 'smarter spending' including preventative early intervention provision and more integration between health, care and housing could deliver better value and effectiveness from existing resources (Counsel and Care, 2010; Audit Commission, 2010).

Underpinning all of these policies is that people must be (made) aware of the range of schemes and support in order to receive the help they need (whether moving or staying put). Older people's lack of knowledge about what is available and how to access it is an ongoing concern. A key development, therefore, has been the introduction of 'FirstStop', an independent national web/telephone-based service

² The DFG provides (means-tested) adaptations to give people better freedom of movement into and around their home.

which provides information and advice to support older people, their families and carers on the related issues of housing, care and finances (DCLG, 2008b).

THE RESEARCH FINDINGS AND IMPLICATIONS

The RILL research included interviews with 78 households in central England during 2005 and 2007. The majority (51) were owner-occupiers³, and of the 27 who were renting most were social housing tenants (including both local authority and Housing Association), only two being in private rented accommodation. Seventeen lived in warden controlled accommodation (see below regarding resident/non-resident warden). None of the participants interviewed were living in residential care homes.

Moving Home in Later Life

The longitudinal nature of the RILL research demonstrates how moving house is an incremental decision-making process, often involving a combination of factors which contribute to decisions being made about the practicalities of moving to other accommodation. Health, in particular where this entailed limited mobility, was a key factor, for example, when thinking about moving in with a relative or to ground floor accommodation. Where declining health had affected driving and access to shops and services, there was a desire to move to a less isolated location.

A few participants had moved between waves of research, all of whom had been considering a move at the time of the first interview. Participants had moved to a more manageable property, convenient location, and/or to release capital, and in one case because of a marital split. This was mostly from owner-occupier to rented, warden-controlled properties, reflecting that the proportion of older people living in social rented accommodation increases with age (ONS, 2009). All of these participants were happy that they had moved and were positive about:

- being closer to amenities and less reliant on a car or bus;
- the security of being in a warden controlled property;
- less responsibility for the upkeep and maintenance of property;

³ Around two-thirds of participant households were owner-occupiers which is a little lower than the national picture of 73 per cent of household aged 65-84 (ONS, 2005).

- availability of social activities (where there was a community centre); and
- enhancing lives from money raised from a house sale (although difficulties were noted when waiting for the money to come through).

This reflects findings by Croucher et al., (2009) that people living in housing with care valued the independence, security, privacy, social interaction and companionship it provided.

What Helped Older People Move House

The process of moving was seen by both those who had moved, and those who had considered moving, as extremely daunting. Those who had moved discussed the issues they encountered and what had helped them through the process:

- having a friend or family to help was extremely important – from help with sorting and packing through to moving furniture;
- physical health – although these participants had a range of health conditions, all were still mobile and better able to manage the practical aspects of moving;
- clearing out a lifetime of possessions was emotionally as well as physically exhausting. Seeing a move as a fresh start, buying new things and decorating helped them cope with the upheaval and sense of loss of continuity, familiarity and place;
- being able to leave furniture behind for the incoming purchaser was useful when downsizing; and
- staggering a move eased the process – having the new property available before moving out of the old one enabled a more gradual move, although financially this meant paying additional rent.

Barriers to Moving

Several participants had not moved, but wanted to, or had considered doing so. Reasons included deteriorating health and mobility, wanting to downsize, and problems in the neighbourhood. Some felt closer to moving (they were looking more seriously, had been offered a rented property, or were about to move in with family), however, others felt it unlikely in the near future. The RILL findings identified a range

of practical, emotional and strategic obstacles which drew out the process and could contribute to people feeling either unable, or unwilling to move:

- Availability of a suitable property was a key issue. This included long waiting lists for rented warden-controlled properties. Homeowners mentioned the lack of affordability of bungalows and limited supply of owner-occupier property suitable for older people – some just did not like the idea of renting (see also Croucher, 2008; Maxwell and Sodha, 2006).
- Moving was seen as too daunting. Even where people recognised that living in a more manageable property made sense, they were put off by the upheaval of moving, having to sort everything out and physically packing, emotional ties to their home, not knowing where to move to or how to get the process started.
- There was a resistance to living in properties specifically designed for older people. Occasionally participants mentioned psychological barriers associated with living among ‘old people’, fearing it would make them feel older themselves and this was seen as a ‘last resort’.

These barriers impacted on participants in several ways. Those waiting for rented warden-controlled properties were frustrated by the lack of progress (over years) and their inability to do anything about it. This was particularly traumatic for those in rented accommodation with low incomes, no savings and where neighbourhood disturbance was affecting their quality of life – they felt overlooked and ‘stuck’. For others, who were not so desperate to move, the range of actual and perceived barriers meant that it was simply ‘easier to do nothing’ and stay put, and think about moving only ‘if it came to it’ – again seeing it as a last resort.

Implications

These findings raise several important implications for policy.

Information and support

There is a need for information and support with housing choices and decisions, as well as practical issues. Especially for those living alone or in poor health, moving to a more suitable property was felt to be achievable with assistance, indicating a need for a service to provide information, support and advice about what suitable housing

is available. This reflects other research findings that insufficient information makes it difficult for older people to tell if particular kinds of housing are suitable for them (Housing Corporation, 2008), and calls for better support to help older people identify specialist housing nationally (All Party Parliamentary Local Government Group, 2008). Although some concerns were expressed about the idea of living in older people's housing, participants who had moved into such accommodation were positive about it, indicating the need to overcome a potential mismatch between older people's perceptions and experience. Greater information and support would help to address this disparity. The RILL findings also show that older people's need for assistance extends to practical support, including dealing with estate agents for older people, transport to view properties, and packing. These tasks were deemed particularly daunting to deal with alone, especially if the older person was in poor health, had lived in a property for a long time, had no family support or was reluctant to ask for help. While having money to pay for services (taxis or removal firms) could be helpful, it was often the thought of 'where to start' which was hard to face.

The time required to move

The lengthy amount of time that finding and moving to a suitable property can take can impact on older people in a number of ways. As older people can find it hard to think ahead because of uncertainty around their health needs and the anxiety this may entail, there is a danger that they can make the decision to move in response to an immediate need only when this actually arises. If this is followed by a delay, managing in a current property becomes increasingly difficult. There is a tension then between making decisions while well enough to cope with the upheaval and older people's reluctance to prepare for changes in their housing needs (see Croucher, 2008). This is even more salient in times of economic downturn when selling houses becomes more difficult, compounding delays and adding to stress. While staggering a move could help with the process, paying rent in advance/being responsible for two properties can impact on older people's finances. There are also implications for the payment of Housing Benefit during any period of overlap, and this is an area of welfare that may be affected by government cuts. Although this research did not include the transition to residential care, the findings highlight how *not* making a well-timed decision to move could leave older people vulnerable to

having to move into a care home in the event of a crisis with little option or control over the decision (see Bowers et al., 2009).

Staying Put

Many participants were content that their homes met their current and foreseeable needs. However, others had experienced changes either in their own circumstances, or to the property which had implications for how suitable it might continue to be. Adapting a home so that it continues to meet changing needs is an important part of enabling older people to remain within their own homes in comfort. This includes adaptations for health or mobility as well as improvements to the living environment.

Adaptations for Health or Mobility Needs

Over the two year period several older people whose mobility had become increasingly worse had made adaptations to their property. These included large items such as getting or replacing a stair lift, installing walk in showers and obtaining a bath lift, as well as bath/toilet seats and handrails. These adaptations made a real difference to people as, not only it was it now easier to get around their property, but they provided more confidence and security, and also meant that people could manage better in their home lessening the need to move.

However, others who would have benefitted from these adaptations were simply not getting them. Sometimes participants recognised the need, but met practical obstacles including:

- the design of a property which could not accommodate a stair lift;
- difficulties (long wait or refused request) obtaining a shower or stair lift from Housing or Social Services⁴; and
- affordability.

Others were reluctant to make such changes because they were:

- frightened of getting stuck in a stair lift;

⁴ Although a participant stated that they had been dealing with Social Services, it is recognised that it could have been administered through Housing Services (which could benefit from partnership with Social Services).

- concerned that the noise of a stair lift would disturb neighbours; or
- resistant to the idea of having adaptations due to a determination to manage without help or 'giving in'.

People were sometimes managing by crawling up stairs, strip washing or showering at a daughters house.

Helping Older People Access Adaptations

The RILL findings demonstrate the various steps required to obtain adaptations, including identifying a need, accepting that help would be useful, and knowing what might be available and how to access or fund it. Participants living in social rented accommodation had accessed adaptations through a Housing Association or Social Services. However, owner occupiers had contacted Social Services only occasionally (often initiated by their families) and were more likely to have experienced problems with, or were resistant to, adaptations indicating that information about what is available and how to apply is of particular importance for this group. Participants concerns about admitting need were sometimes associated with a negative image of dependence which can influence older people's views about making adaptations. The RILL findings raise the issue of discussing with older people their future needs **before** deteriorating health and mobility makes it difficult to manage their daily activities at home, and help older people to consider the ways in which such aids and adaptations, as well as other services could be useful. Whether this is in an informal context, for example, in conversations with family, or through contact with service providers (a key point of contact is likely to be primary or secondary health care, in response to a health deterioration or crisis), Local Authority staff or support organisations, these findings suggest that this could involve a need to overcome resistance to accepting help. Timely support is important as delays in the processing or delivery of adaptations can result in long waits for help (Adams and Ellison, 2009). Furthermore, timely access to information and support can provide alternatives which could help older people stay in their homes, when the only option that they or their families are aware of is residential care (Department of Health, 2009).

Improving Older People's Homes

Grants, repair and security services for home owners

The RILL research also highlights the changes that people had made to their property to make it more comfortable and modern. Several home owners on means-tested benefits had received grants or assistance to upgrade their property. This included:

- free cavity wall, loft insulation and grants for central heating/boilers;
- structural work such as roofing, rewiring and new windows arranged through a Housing Improvement Agency; and
- door and window locks and an alarm provided through the Handyperson service and the police.

These changes to people's homes had not only improved the warmth, heating efficacy and security of properties, but made participants feel more comfortable, and relaxed in their homes, enhancing their well-being and peace of mind.

Finding out about the help available

However, the RILL research identified that there is a lack of information about such home improvement schemes, grants and services. Only occasionally was advertising mentioned (for loft insulation), and although one couple in long-term contact with Social Services were aware of grants, most participants had found out about them 'by chance' through friends, family or neighbours. Without this source of information people would have remained oblivious and would have been unable to get the work done. While word of mouth was valued, participants identified a need for better publicity, but stressed the importance of an independent, trustworthy source of information (easily distinguishable from private companies). Grants were not discussed by the two households living in private rented accommodation; however, both properties had maintenance and heating efficacy issues, although these participants balanced the situation against the belief that they were paying a low rent. This highlights the need for a central information and advice service on housing and property improvements, especially for home owners and private sector tenants. The FirstStop information service (established after this research took place) fulfils this criteria, as long as people are aware and able to access it. Initial

evaluation findings suggest higher than anticipated take up⁵ and positive feedback (CCHPR, 2010). The Labour government invested in the Handyperson schemes to broaden coverage and pilot enhanced services (DCLG, 2008a) however, older people still need to know that such services are available and how to contact them. This is particularly important as services providing ‘that bit of help’ can be extremely valuable in enabling older people to continue living in their own home (JRF, 2005).

Upgrades to social rented accommodation

Some participants in council or Housing Association rented properties had received upgrades over the course of the research, for example, new kitchens, doors, windows and rewiring. Most were very happy with the work and how it had been carried out, especially where they had had some say about the work being done. However, the research findings raised a number of issues associated with older people’s experience of receiving renovations. First was the problem of living in the property while building work was carried out. Those with poor health and mobility, who were unable to escape the mess and upheaval, found it particularly traumatic and also more difficult to clean up afterwards. For a few, the issue was whether their wishes or needs were taken into account, for example, whether the work was really necessary or the positioning of switches and cupboards. In a few cases, work had been left unfinished. Older people in such cases often felt that they had little say or control over what was being done to their home. While improving the condition of homes is valuable to older people’s well-being (HM Treasury, 2007a), it is important that they feel consulted and an active part of the process.

Changes in Warden Cover

Several participants living in warden-controlled accommodation had experienced changes which affected how they felt about their home environment.

⁵ Many of those contacting the service were doing so on behalf of an older person which is an important element of the service, however, the evaluation report did not separate out take-up from older people themselves.

The impact of the reduction of resident wardens

Cuts in some warden services since Wave One of the research had replaced resident wardens with 'travelling wardens' resulting in fewer visits – generally weekly rather than daily. The impact was felt in a number of ways:

- Feeling more vulnerable and isolated. The difference was most keenly felt by a few lone participants who had experienced a decline in health. They missed the security of knowing that someone would be visiting daily, as well as the human contact.
- Taking on additional roles. In the absence of a warden, younger residents had occasionally become involved in organising activities or providing support for older neighbours, which could perhaps emphasise differences between the 'fit' and 'frail' (see Croucher et al., 2009).
- Resentment over financial cutbacks. Some saw the changes as more focussed on saving money than meeting older people's needs, most strongly felt by those who paid full rent (which included charges for the warden service).
- Feeling overlooked and their views ignored. This was thought to be symbolic of a lack of consultation and understanding of the needs of older people – *'they don't care as much as they should because they're not our age'*.

The reduction in warden cover could mean greater reliance on emergency 'pull cords'. While some participants were reassured by the knowledge that they had this facility and were happy with less warden contact, others were hesitant about using the cord and confused about when it was appropriate to do so (see also Croucher et al., 2008). Although pull cords, telecare and other types of assistive technology can make a very positive difference to the lives of older people and their carers (Bowes and McColgan, 2006), a point made by some participants in this study was that having an emergency pull cord was not the same as experiencing the social contact of another person every day. This reflects findings from Help the Aged (2006) that residents in sheltered accommodation were generally unhappy with changes to their warden service, particularly as many moved into this type of accommodation because of the support and security it gave them (King et al., 2009). While the shift

towards, 'floating', rather than fixed warden support⁶ allows better use of limited resources (King et al., 2009), the RILL findings highlight that these changes have implications for some older people's sense of security and well-being. The (perhaps) unintended consequence of resident warden reduction leading to older people taking on additional roles could be seen as complimentary to the new Government's 'Big Society' approach. While for some older people this could be a positive experience (for example, getting involved in community activities), it would be of concern if people felt pushed into roles they were uncomfortable with (being asked by others for help with financial affairs).

Implementing changes in warden cover

Furthermore, older people felt powerless to prevent these changes (see also King et al., 2009). While such changes are made at local level, their implementation seems somewhat at odds with central government emphasis on engaging and involving older people to ensure their needs are heard and met (HM Treasury, 2007a; DWP, 2009). Indeed in December 2009 a Judicial review found serious failings in how decisions to replace resident with floating wardens had been taken. In response to concerns about lack of consultation a Working Group has issued best practice guidelines for housing providers and local authorities on how better to communicate with residents when considering and implementing changes (Swan, 2010).

⁶ The proportion of sheltered housing units receiving warden services is predicted to be reduced to 61 per cent over the next three years, with 38 per cent receiving floating support (King et al., 2009).

OVERALL MESSAGES

The RILL findings highlight the importance of a suitable home environment to older people's well being – people who had moved or had received adaptations to meet their changing needs were positive about the difference this had made to their day-to-day lives and their independence.

Having resources to draw on such as family help, finances, and knowledge about how to move or access adaptations was important. The value of practical and moral support from family or friends was repeatedly mentioned and highlights how older people who live alone, without family around and in poor health in particular need support with housing decisions.

Older people require accurate, trustworthy information and advice about what type of accommodation would most suit their needs, what is available for them in their area and further afield, and how they would fund it, as well as practical help and support to move house.

The RILL findings highlight that the decision-making and process of moving can take a long time. A key issue therefore, for policymakers, housing providers and local services is how to support older people in thinking ahead before their current home environment no longer meets their needs. Guidance over the time required to plan a move could be beneficial. Information and support that emphasises the positive aspects, including personal experiences could help allay emotional fears about the transition that could inhibit people thinking about moving. This could also include ways of dispelling the negative perceptions that some older people may have about living in sheltered housing or among other older people. Providing desirable housing options could help encourage older people to plan ahead and to *want* to move, rather than it being seen as a last resort (HAPPI, 2009). This would promote timely moving behaviour, rather than that based on crisis.

Older people were often unaware of the different housing improvement schemes and grants that would help them to continue living safely and securely in their own home.

Those with poor health and mobility need the right information and guidance about adaptations that could make their property more manageable and comfortable, and how to access or finance them. This is particularly the case for home owners who are not known to local authorities. Adaptations services and advice needs to consider how to portray the provision of such support to overcome some older people's resistance to adaptations.

The RILL findings support the development of 'lifetime homes'⁷ (DCLG, 2008a; DCLG 2008b), as there is a need for it to be less onerous or expensive to make adaptations. This research also highlights that the concept could be a positive step towards addressing negative feelings towards making adaptations if it helps embed the idea that adapting homes in later life is a norm, rather than viewed as a problem to be overcome.

Some older people felt a lack of control or involvement in decision-making that affected their home environment. This included the reduction of site-based warden cover, and occasionally lack of consultation about alterations to social housing. In line with the personalisation agenda of providing people with greater choice and control, more meaningful consultation is required when considering or implementing change in order for older people to feel that they are being listened to and their needs are genuinely being taken into account.

In this study it was the most vulnerable and insecure older people who most keenly missed daily warden contact and would benefit from the continued use of resident wardens. While the need for changes to warden service provision are multi-faceted, this does not necessarily imply an either/or resident/floating warden model, for example, a 'hub and spoke' model could provide support to people living independently in the community but from a residential base (Swan, 2010).

⁷ The Lifetimes Homes Standard is in the process of being reviewed.

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For further information

The full report, **Managing Resources in Later Life: Older people's experience of change and continuity** by Katherine Hill, Liz Sutton and Lynne Cox, is published by the Joseph Rowntree Foundation. It is available as a free download from www.jrf.org.uk.

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