



## Opinion 2019/3

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On a cross-domain action plan on quality living  
in the home environment, in every phase of life

**14 October 2019**

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## 1. Introduction

Flanders is ageing, and this is also reflected in the area of living and welfare. At the beginning of 2017, Statistics Flanders calculated that the number of people over 80 **living at home** will increase by about 20% in the next 10 years. According to their projections, the number of over-60s living in **rural areas** will grow from 450,000 in 2014 to 615,000 in 2030, an increase of 36.1%. Many of them will sooner or later need care and support, and a home and living environment adapted to their needs and capabilities (De Decker et al., 2018).

Most homes and environments where older people live today are **not yet adapted** to the needs that people may experience as they grow older. However, the place where someone lives can be decisive for active and independent ageing. Not only physically, but also in terms of social contacts, access to essential basic services, and the presence of care and support when needed. A suitable home and living environment are therefore of crucial importance for retaining self-control and quality of life. Together with the growing number of elderly people, the need for possibilities and support to live **in a life-course resistant way** is therefore growing (Bakker, Hu & Wittkämper, 2018; De Witte et al, 2013).

**"...most discussions of ageing forget that people do not age in a spatial vacuum. They age somewhere, and that place has an impact."**

(Krout & Hash, 2015 - Ageing in rural places in De Decker et al.)

Life-long living requires both a life-long home and a life-long neighbourhood. A home **that is adapted to suit the** changing needs of an ageing resident can easily be adapted. From the start, the planning and design take into account both known and possible future needs. Any adjustments can be made quickly, with little extra cost. A **neighbourhood suitable for the life course** pays attention to social inclusion and is accessible, there is a diverse range of facilities that are close by and accessible, and there is a well-organised network of transport options (Knowledge Centre WWZ, 2019).

The preference of many elderly people to remain in their home environment is in line with current welfare and care policies, which want to postpone the move to residential care centres as long as possible. But if we want people to be able to age well in their home environment, this requires an effective policy. With actions from welfare and housing, but also from mobility, culture, care, environment, energy, sport, etc.

In order to meet this need, the Flemish Council of Elderly People argues in this advice - based on the current policy challenges, trends and needs and wishes of the elderly - for a **cross-domain action plan on quality living in the home environment, in every stage of life.**

## 2. Current policy framework: Vision 2050

Vision 2050', the long-term strategy for Flanders, focuses on creating prosperity and well-being in a smart, innovative and sustainable way in a social, open, resilient and international Flanders where everyone counts. The vision forms the basis for a cooperation of the Flemish Government with all stakeholders across domains and policy levels. To make Vision 2050 a success, the Flemish Government is working on seven transition priorities. Transitions are structural changes with a major impact on society. One of the transition priorities is 'Smart living'. The future image here is of a **sustainable neighbourhood** where everyone can and wants to live. This includes a sustainable home and environment, in a smart location. With supply tailored to housing needs and sustainable housing wishes.

In a **sustainable home and environment**, attention is paid - in addition to the minimum quality standards - to basic needs such as sufficient privacy, light, views, safe collective (play) space and a well-maintained living environment. Citizens also have easy access to collective functions, facilities and public transport, opportunities for social interaction and encounters.

Smart living also means that the Flemish people consciously choose a **smart location**. These are either cities or well-equipped and well-located village centres. Life is organised efficiently there due to the proximity of all kinds of facilities, public transport and employment.

Smart living and living also means a housing supply that is adapted to the **housing needs** in each phase of life. According to the vision, Flemish households will look for the housing formula (buying or renting, individual or collective, ...) that best suits them in a particular stage of life. In the vision put forward by Flanders, by 2050 Flemish households will be **prepared to move** if specific needs demand it and they will dare to question their housing situation if something changes in the family, work or physical situation (Wonen Vlaanderen, 2017).

This vision will undoubtedly have an impact on how the elderly live in the future and contains a number of elements that meet the principle of life-long living. At the same time, it is clear that there is still a long way to go with regard to this ideal, including in the area of housing for the elderly.

## 3. Trends and signals

Based on research, including the recent figures from the 2018 Housing Survey, and signals from older people, we have identified various trends in the housing situation of older people.

### 3.1. Housing preferences

What is striking about the 2018 Housing Survey is that the preference for living in a **compact home** (closed single-family home or multi-family home) is higher among older people than among younger generations. Of the 65- to 79-year-olds, 39.4% want to live in a compact home and for the group aged 80 and over this rises to 50%. In the group younger than 65 years, this is only 20.7%.

The preference for living in the **centre of a town or village** also increases with age. 47.3% of those aged 80 and over prefer to live in the core. For the age group between 65 and 79 and those younger than 65, this is 41% and 29.5% respectively. However, it should be noted that despite the increase in age, the majority of older people do not prefer to live in the centre of a town or village.

At the same time, it is noticeable that the **willingness to move** because of physical needs decreases with age. Among the over-80s, about half of them are willing to move when their physical needs change. While for the group younger than 65 years this proportion is still 71.8%.

This low willingness to move has various causes. First of all, the house and its surroundings where the elderly live often hold all kinds of memories; it has an **emotional value**. The house symbolises, as it were, their entire life (De Witte et al., 2013). At the same time, many elderly people are also attached to the neighbourhood they live in, where they have social contacts and know everything. Moving to a home outside their familiar environment can then do more harm than good, and increase the risk of loneliness.

In addition, older people also identify **practical barriers** to moving:

- First of all, moving house and possibly buying and selling the house comes with a lot of **administrative, practical and financial barriers**. For example, there are signs of elderly people who are unable to obtain a bridging loan from their bank when selling their old home and moving to an adapted dwelling.
- Specifically among retired self-employed people, there is also a problem of people who, due to the failure to take over their business, are forced to continue living (inappropriately) in the residential part of their commercial premises.
- Today, there is often a lack of **quality and affordable alternatives in the neighbourhood**. As will be shown below, the number of adapted homes is very limited, both on the private market and on the social rental market. Moreover, in practice, these are often not located in an accessible, adapted residential environment (in a core, close to mobility hubs and facilities).
- In addition, there is a **lack of intermediate forms** between living independently at home and living in a care institution. Such initiatives remain limited in number, especially in the cheaper

segment. For example, there are still only a limited number of social assistance houses, and alternative forms of residential care are far from being commonplace in most municipalities.

- **Finally, adapted regulations**, such as for care homes, are anything but evident in practice. For older people and their families who want to make use of it, there are still many ambiguities and thresholds. These can be attributed, among other things, to conditions that are too strict, conditions that differ between municipalities, professionals who cannot always offer support because they themselves are not sufficiently informed, and regulations from other policy areas that are not harmonised.

## 3.2. The current home

### *Energy efficiency and safety*

Although the 2018 Housing Survey shows that the energy efficiency of Flemish homes has improved, older people are still lagging behind when it comes to **home insulation, the use of energy-efficient central heating and renewable energy**. The largest proportion of elderly people live in an old house. 71.8% live in a home from 1980 or older. Both among older home owners and tenants, a large number of homes in Flanders are in need of renovation to improve the energy situation of the home and the housing quality to current standards.

The low energy efficiency means that the elderly often have very underestimated housing costs. The oldest groups have the highest **additional living expenses**. These include the expenses for heating, electricity, water and, if applicable, the maintenance of common parts, use of the lift and management costs in multifamily houses. Moreover, the elderly are at home more often, which means that the additional living expenses also increase (Heylen & Vanderstraeten, 2019).

Research also indicates that home-related costs of **owners** are often underestimated because the costs of maintenance, repairs or other changes are rarely taken into account. In addition to the cost of living, it is often difficult in practical, psychological and organisational terms for older people to carry out renovation work. Better guidance, support and relief for insulation work is therefore really needed. Just like a simpler and more effective premium system (see also Advice 2017/4 Energy poverty among the elderly).

The Housing Inquiry also shows that **safety**, in terms of the presence of a smoke detector and CO detector, is lowest in the homes of elderly people.

### *Accessibility and adaptation*

**In 2018, only 21.6% of the over-65s live in an adapted home** (Heylen & Vanderstraeten, 2019). Research shows that it is mainly the over-80s, older people who

are divorced, and older people in the lowest income bracket live in the most unsuitable dwellings. They experience most problems with stairs, thresholds, no toilet at sleeping level, no bedroom at ground level and unsuitability of the house for wheelchairs and rollators. The Woonsurvey also shows that the proportion of adapted homes has remained almost unchanged over the past five years: in 2013, 13.1% of the homes met the criteria for an adapted home, in 2018 this was 14.3%. This means that there has been no increase in homes where residents do not have to climb high thresholds or stairs to enter the home and the bedroom, bathroom and toilet are located on the ground floor or the same level in a flat and/or accessible by lift.

Especially on the (social) **rental market**, many dwellings are seriously unadapted. Only 1.8% of the housing units rented by social housing companies are adapted for people with a physical disability. West Flanders has the largest number of housing units adapted for people with a physical disability, i.e. 3.5% of the total number of rented housing units. Antwerp has the least adapted housing stock, i.e. only 1.1% of its dwellings. Within the social rental sector there is therefore a need for a huge catching up exercise with regard to adapted housing (Schryvers, e.a. 2016).

The share of adapted **multi-family dwellings** (flats, stacked dwellings, studios, rooms, assisted living facilities and rooms in a residential care centre) did increase between 2013 and 2018, as a result of which the share of adapted multi-family dwellings (25%) in 2018 is more than twice as large as the share of adapted single-family dwellings (11%) (Heylen & Vanderstraeten, 2019). Nevertheless, even here it remains a minority of the available housing.

The large proportion of homes that are not adapted is due to the fact that the vast majority of homes and living environments are not designed for the elderly. Architects, developers and citizens still pay too little attention to this. People without disabilities cannot imagine that the 'simple' reaching the grocery shop or doctor could become a problem, let alone using the toilet or bath in their own home.

#### *Rental market*

Between 2013 and 2018, the proportion of **private tenants** aged 65 and over increased from 21 to 28%. Within this, the share of private renters aged 80 and over has increased from 8 to 10%. In addition to the general ageing of the population, this may also show a trend whereby an increasing number of people are moving into housing on the private rental market at a later age (Heylen & Vanderstraeten, 2019). This may be the result of a conscious choice to move to an adapted or better located home, but could also be a consequence of the increase in the number of divorces at a later age or of the tightness on the social rental market.



The age of **social tenants** is generally considered to be relatively high. In 2018, about 1 in 3 is at least 65 years old (32.7%), which represents a slight increase compared to 2013 (29.2%). This figure corresponds to the proportion according to the population data of the VMSW. Of the 139,500 social housing units currently occupied, 62,668 are occupied by people aged 60 and over (44.9%); 19.46% of people on the waiting list are over 60 (Schryvers, et al. 2016).

### 3.3. The neighbourhood

As ageing generally goes hand in hand with reduced mobility and a more limited range of action, the proximity of basic services, opportunities for socio-cultural participation, public transport and an accessible environment is becoming increasingly important.

**Basic facilities in the neighbourhood**, such as a bank (ATM), bakery, butcher, greengrocer, grocer or supermarket, are less within walking distance in 2018 than in 2013. Daily amenities are still located within walking distance for about 60% of 65-79 year olds. For the over-80s, this is still only the case for 50% (Vanderstraeten, 2019). These shares are 3 to 4 percentage points lower in 2018 than in 2013. An explanation can be found in a decrease in the number of these facilities in Flanders between 2013 and 2018, which has reduced their accessibility (Heylen & Vanderstraeten, 2019).

The disappearance of traders and services from the village, the centralisation of banks and post offices has made the residential function more dominant. As a result, many villages have lost their relative autonomy. Older and vulnerable residents who have lived in their neighbourhood for a long time often feel increasingly alienated from it. This alienation can lead to a decrease in contacts and social networks. Yet these networks are a crucial buffer against loneliness. The challenge will be to compensate for the loss of local facilities through community initiatives, among other things. The elderly and vulnerable residents are not only 'victims' of their environment, they are also carriers of solutions and active residents who can contribute to the quality of living, care and well-being in their neighbourhood (Agency for Care and Health, 2018).

Opportunities for **socio-cultural participation** in the neighbourhood are also of great importance to the elderly. After all, participation has a positive influence on mental health as well as on building and maintaining a social network. As far as local cultural offerings are concerned, the participation survey shows that older people participate less in cultural and community centre offerings than younger generations (14.5% in the 65-74 age group and 8.6% in the 75-plus age group). They also visit libraries significantly less than younger age groups. Efforts are therefore clearly needed to make local cultural offerings more accessible to older people.

On the other hand, older people today are often active in **associations**. Even among the oldest surveyed group, those aged 75 to 85, some 49.2% are active in an association. Especially

Senior citizens' associations, sports clubs and hobby clubs stand out the most in terms of participation of the elderly (De Baere, Mullens, Siongers & Vandenplas, 2017).

**The accessibility, accessibility and affordability of public transport** are important for older people to be able to (continue to) move around outside their homes and to participate. Compared to other age groups, elderly people also indicate for public transport that they less frequently live within walking distance of a bus or tram stop or a train station. For the under-65s, 93.9% of people live within walking distance of a tram or bus stop. For the over-80s, this is only the case for 80.8%. For living at walking distance from a train station, the share drops from 31% for the group younger than 65 years to 19% for 80 years and older (Vanderstraeten, 2019). However, those over 75 years of age move much more often on foot (69% for those aged 75+ compared to 50% for those aged 50-75) and by public transport (72% for those aged 75+ compared to 39% for those aged 50-75) (VAB, 2019).

The **accessibility of the environment** is also still a major challenge. In general, the current spatial policy is often problematic for the elderly. In its memorandum, the Flemish Housing Council also points out the need for adjustments in spatial policy. They point out that one should not only look at the physical spatial component, but that a coherent and coordinated policy from different policy fields is an important precondition.

Finally, the supply of **care and support options** in the home environment is still insufficiently developed or visible in many municipalities. For instance, not every municipality has a local service centre, a lot of elderly people find respite care, day support, short-stay accommodation or family care in their municipality impossible, there is a lack of accessible and low-threshold meeting places, etc.

#### 4. Recommendation: Draw up a global action plan on quality of life in every phase of life

Quality of life for the elderly requires more than an adapted home. It is also about supporting and strengthening self-reliance; promoting and supporting encounters; creating opportunities for active participation in society; focusing on affordable alternative forms of living; strengthening the proximity, accessibility and affordability of services and facilities; organising an appropriate range of care and support; and ensuring that the ...

The Flemish Council for the Elderly therefore advocates a **cross-domain action plan on quality living in the home environment, in every phase of life**. From a 360° perspective, this action plan must offer an answer to the wishes and needs of the (ageing) resident in the home situation, with specific actions from policy areas such as housing, welfare, mobility, culture, care, environment, energy, sports, ... in consultation with the actors from each sector.

This plan can be used as the basis for the **multi-track policy required** to meet the housing needs and requirements of the ageing population. In doing so, attention must be paid both to facilitating a move to an adapted home and living environment (moving-in-time) and to supporting and guiding the elderly who continue to live in their familiar home and living environment (ageing in place). The concept of an age-friendly environment can also be a guiding principle here.

According to the Flemish Council for the Elderly, this cross-domain action plan should certainly include the following **five action points**:

1. Encourage the principle of life-long living through preventive and supportive measures.
2. Upgrade the rental market for the elderly.
3. Commit to a flexible housing market
4. Encourage social inclusion and participation in the neighbourhood
5. Provide effective prevention, detection and support from the neighbourhood

#### **4.1. Promote the principle of life-long living through preventive and supportive measures**

Today, families receive little or no incentive to take into account the **principle of adaptive living** when building or renovating their homes. The stagnation in the number of adapted homes in Flanders is the clearest proof of this. Both in new buildings and in renovations, more attention must be paid to making the home fit for life.

The Flemish Council for the Elderly argues for a combination of preventive and supportive measures, which take into account the quality of living, sustainability and adaptability.

##### *Preventive measures:*

The homes that are built and renovated today largely determine the housing stock we will have in the future. With the right incentives, families, professionals and local authorities can be encouraged to be proactive in making these new or renovated homes fit for life. In this way, we can also avoid the need for more expensive housing modifications afterwards.

- Provide a **premium for life cycle resistant (re)construction**, which motivates residents to consider life cycle resistance when building and renovating their home. This premium can possibly be integrated in a reformed Flemish adaptation premium.
- Invest in **free advice** on energy efficiency, accessibility and adaptability of the home as part of construction and renovation plans, whether or not linked to minimum building standards to promote life-cycle-friendly building or renovation.

*In Ghent, free advice is given on both the energy efficiency of the home and on the possibilities of making the home accessible. Local authorities are aware of the importance of the [Energy and positioning of housing and housing projects in the context of life-long living](#). Encourage architects and building promoters to pay more attention to the lifespan of the home by, for example, integrating life-cycle-proofing into their training and offering supporting visits similar to the existing 'Build healthy' sheets on how good ventilation, insulation and heating can make a house healthier.*

- Expand the **housing pass** into an incentive tool that takes into account both the life cycle and energy performance of the home.

*In the [Mutation+](#) project, more than 20 partners worked together on the renovation of three demo houses at a time of transition: vacancy, sale, or move. And always based on three pillars: energy, comfort and lifelong living. The project was applied to social housing.*

In addition to prevention, the action plan should also focus on supporting measures so that older people who wish to continue to live at home can do so by improving the accessibility and adaptability of their homes.

- Bring **the disability adjustment premium** and the elderly adjustment premium into one system, tailored to the real needs of people with care and support needs, and with more gradual income limits.
- The importance of **advice, guidance and care** in the planning and implementation of home adaptations should also be taken into account, with attention being paid to both the adaptability and the quality of the home (see advice 2017/4 Energy poverty among the elderly).

*In Brussels, the 'Steunpunt Woningaanpassing Brussel' (Home adaptations support centre) is a cooperation between different organisations to make home adaptations possible in a free and accessible way. The support centre is the central contact point. It gives personal advice, including via information sessions, on home adaptations to the elderly and organisations that work with the elderly.*

#### 4.2. Upgrade the rental market for the elderly

Given the increase in the number of elderly people in the private rental market and their high share in the social rental market, specific measures tailored to this group are needed within the rental market. Within the **social rental housing stock, there is a need for sustainable new-build and renovation projects that also take into account the lifespan of social housing.**

For elderly people with a low income, the **Flemish housing subsidy** is another important instrument. Recently, the income limit for eligibility for rent subsidy was raised. Yet, this still insufficiently meets the needs that low-income elderly people encounter in practice. For instance, the rental limits are too tight, and the fact that the rent subsidy can only be obtained after the move makes it difficult for a low-income elderly tenant to be accepted by the landlord. In addition, there are many conditions linked to the move itself, which causes many people to drop out.

##### *Action points:*

- Work on accelerating the realisation of **adapted housing in the social housing sector**, among other things by exploring possibilities in the area of relaxation of regulations and offering financial support.

- Provide a sufficiently large supply of **social housing** so that vulnerable elderly people do not have to move to social housing outside their familiar neighbourhood or be forced to pay an under-occupancy allowance if they are under-occupied.
- Reform the **rental subsidy** and ensure reasonable rental price limits and a sufficient supply of quality private rental housing so that older people who need an adapted home can also fall back on the rental subsidy more easily.
- Put more effort into awareness and proactively directing people to the rent subsidy.
- Make sure that the Flemish **rent allowance** is granted quickly and automatically.

### 4.3. Commit to a flexible housing market

Adapting and/or renovating one's own home is not always useful or desirable. At that moment, it must be easy, affordable and attractive to move to an adapted house in the neighbourhood. In this context, the Flemish Council for the Elderly also believes that initiatives that benefit different generations should be considered.

**Communal living projects** are an interesting way to live independently for longer. Communal living has many gradations and forms. At present, the possibilities and advantages are often still unknown and the start-up is not evident. Nevertheless, various projects, such as Abbeyfield living, the housing projects of the Knowledge Centre for Work and Income and [the project Oost West thuis best in Genk](#), show that there is a clear interest among some of the elderly. According to the Flemish Council for the Elderly, several steps can still be taken to make communal living more familiar and attractive.

Furthermore, there are large price differences between assisted living facilities today. Many elderly people consider these daily prices simply too expensive. It is also one of the reasons why certain municipalities are struggling with an oversupply and vacancy. Ghent, Kortrijk and Mechelen, among others, have already started offering **social assistance houses** and the first mobile assistance houses are also popping up. An expansion of the supply of these flexible forms of housing can increase accessibility for all elderly people, regardless of their income. Affordability can also be increased by investing in allowances for elderly people on low incomes who are not (yet) eligible for a care budget.

#### *Action points:*

- Remove as soon as possible the legal obstacles to making **new forms of housing** possible. Do not wait for the results of the experimental environment for housing, but anticipate them. Together with organisations and stakeholders who have experience with

such forms of housing to what a regulatory framework for new forms of housing might look like.

- Relax the conditions for **care accommodation**. Make the separate numbering/registration in the National Register also possible when the bathroom and kitchen are shared. For larger dwellings, it must be possible to report two additional units (instead of the current single additional unit) (Samenhuizen, 2019).
- Draw up a framework for **mobile home care homes** where there is only an obligation to report and a separate care code is provided in the population register, so that those in need of care do not have to give up their allowances.
- Investigate in which way, from the housing care policy and the social housing policy, stronger incentives can be offered for the realisation of **social assistance housing**, which meets the need for affordable assistance housing for elderly people with a lower income.
- Investigate alternative mechanisms or specific programmes for buying and selling housing whereby older people can **exchange** their unadapted and/or underutilised home for an adapted and better located one. This would also free up larger homes for young families. In this regard, we also refer to the need for specific initiatives regarding the problem of retired self-employed people who are forced to stay in their commercial property (see p.9).
- Introduce senior citizens to alternative living. Projects that use **test living** could ensure that senior citizens become acquainted with the advantages and disadvantages of alternative forms of living.
- Invest in **awareness-raising campaigns** that increase the awareness of life-long living and the consideration of future housing needs or wishes.

#### 4.4. Encourage social inclusion and participation in the neighbourhood

The disadvantages of living in a dispersed manner in Flanders are increasing all the time due to the disappearance of services such as bakeries, butchers, grocers, banks, etc. Shops and meeting places outside the city centre are often barely accessible without a car. As mentioned earlier, more attention should be paid to compensating for the loss of local facilities, especially with consequences for the exclusion of vulnerable groups. The Flemish Council of Elders considers mobile services and possibilities for participation in the neighbourhood to be crucial elements in this. More attention should also be paid to vulnerable groups when designing the residential environment, the public domain and developments in the area of transport.

*Action points:*

- Make the project resources for disadvantaged groups under the **Participation Decree** available to all people with long-term care needs (= broadening the target group of people with disabilities to include, among others, people over 65 with long-term care or support needs). In this way, tailor-made initiatives can also be set up for the vulnerable elderly.
- In order to make local cultural offerings more accessible to the elderly, a new impetus must be given to [Long Live Arts](#), the commitment of the outgoing ministers for culture and welfare to bring the culture and welfare sectors closer together, to support new initiatives on the elderly and cultural participation, and to strengthen the competences of professionals in both sectors.
- Recognise, value and support **associational life for the elderly**. Take into account the importance of associational life for the elderly when evaluating the new decree on socio-cultural work.
- Ensure that club life can develop to its full potential by, among other things, investing in safe, nearby, affordable and accessible **meeting and conference venues**.
- The decree on basic accessibility must provide strong guarantees of **available, affordable and accessible transport**, especially for people who cannot do without public or adapted transport. The availability of initiatives should not be region-specific, there should be a minimum offer for each municipality. For the elderly, transport to day care centres, local service centres, hospitals, etc. is often an obstacle.
- Work on an **area-wide 'mobile' service**. This will ensure that older people can retain their independence even when they cannot drive a car or there is no public transport available. Mobile and ambulatory services and facilities should be offered mainly in residential areas outside the cores or in drying-out neighbourhoods. Village points offering various services also fit into this story.

*The village point in Beveren aan de IJzer (Alveringem) is an example of this. A village point is a place where inhabitants of Beveren and surroundings can meet each other and find services that have disappeared from the village. The Village Point is run by people with a mental handicap who are supported by De Lieve vzw. With the Village Point we want to connect people and invest in a safe and caring neighbourhood.*

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A major bottleneck for the social inclusion of older people with disabilities is the age limit of 65 years as a ceiling for the recognition of disability. Those who are older than 65 and are confronted with a disability are excluded from all services, allowances and tailored support for people with disabilities. The Flemish Elderly Council therefore advocates that all people with care or support needs, regardless of their age, can make use of appropriate



support such as VAPH support in the form of home adaptations, aids, car adaptations, ...

- Commit to **dementia-friendly municipalities** in view of the increase in the number of people with dementia. The number of people suffering from dementia is expected to rise from 131,800 to 188,000 in 2035. The recognisability, clarity and legibility of (public) spaces ensure that people with dementia can move around independently for longer.
- For the creation of a **healthy public space or barrier-free public space** accessible to all, several tools have already been developed such as the walkability score, the roadmap 'Integral age-friendly test,... For the Flemish Council for the Elderly, these tools must be introduced more widely and their use must be stimulated. The Flemish Government has a leading role in this.
- Encourage the **integration of residential care facilities in the neighbourhood, focusing** both on accessibility aspects and meeting opportunities...

#### 4.5. Provide effective prevention, detection and support from the neighbourhood

For effective **prevention and detection** aimed at preventing or reducing vulnerability and loneliness, cooperation between care and welfare actors is crucial, in addition to a strong social fabric. The new impulses within the residential care decree, the first line and the integrated broad reception play an important role in this. Each of these reforms is based on a thorough knowledge and analysis of the neighbourhood in order to focus on the self-reliance of vulnerable elderly people. Only in this way is it possible to detect elderly people who feel that their social network is shrinking or disappearing completely without them wanting it. In the Decree on residential care, the local service centre has been given the task of making a neighbourhood analysis. This gives the local service centre a central role in detecting and reaching vulnerable residents in the neighbourhood.

*Action points:*

- Offer a **guideline and methodology** for carrying out the neighbourhood or environment analysis and for converting it into a multi-year plan. Each locality has its own specificities, but the Flemish authorities can offer support in this.
- Make efforts to further roll out and adequately fund local service centres with a view to their role in detecting and supporting vulnerable people in the neighbourhood in cooperation with local government, local residents, associations and welfare and care organisations.

- As for specific action points on loneliness among the elderly, the Flemish Council of Elderly is currently working on a **more detailed advice** that is scheduled to appear at the end of 2019.

In addition to prevention and detection of vulnerable situations, elderly people must be sufficiently informed about the existing framework of **care and support possibilities** in the neighbourhood. Today, too few older people find their way to the social rights and support that are relevant to them, resulting in a major non-take-up. At the same time, the supply of care and support must meet the real needs and requirements of older people living at home.

*Action points:*

- Explore the possibility of developing a **local social care map** following the example of the project Thuis in Gavere. This could start from the social map at the Flemish level, which is a source database for all the data of reliable care providers.

*The project Thuis in Gavere designed a social care map at the request of the elderly. It should offer a sufficiently good insight into the local care offer. The composition of the social care map should collect that supply. A draft of the care map is presented to the local care network. The map covers the topics of entertainment, chores, meals, cleaning, social contact, transport, care, information, finances and aids.*

– Invest in a sufficiently large supply of **care and support forms**, in every municipality (see Advice 2018/2 on the preliminary draft of the decree on residential care). Family care and the provision of respite care are playing an increasingly important role in enabling people to continue living at home in a qualitative manner, without overburdening the informal carer. It should also be possible to further expand the support for informal carers through, for example, the informal carers' associations.

*Approved by the Management Board on 25 September 2019.*

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