Housing Issues for Older People in Rural Areas
HOUSING ISSUES FOR OLDER PEOPLE IN RURAL AREAS

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The views expressed in this report are those of the researchers and do not necessarily represent those of the Scottish Government or Scottish Ministers.
NOTE ON TERMINOLOGY USED IN THIS REPORT

This report was commissioned and completed under the previous Scottish administration, which was known as the Scottish Executive. The administration post-May 2007 refers to itself as the Scottish Government. However, the original terminology (“Scottish Executive”) and references to Scottish Executive departments have largely been retained in this report to reflect the period in which the research was commissioned and conducted.
Introduction

1. This paper or ‘think-piece’ has been commissioned by the Scottish Executive Development Department. Its aim is to offer expert reflections on the policy actions that might be inferred from the evidence base on older people’s housing and support needs in rural Scotland.

2. The project brief required a focus on Scottish data and Scottish evidence where possible, and set out a number of key topics that the think-piece might consider, including:

   - Types of tenure and household size for older people in rural areas;
   - Housing and support service aspirations of older people in rural areas;
   - Information needs of older people in rural areas, and how information about services is traditionally accessed;
   - Relative cost of providing housing services for older people in rural areas and the cost-effectiveness of alternative approaches;
   - Exploration of the barriers to delivering services for older people in rural areas and how these might be overcome;
   - Consideration of any potentially useful alternative approaches to service delivery that have been put in place.
   - Consideration of the different ‘ruralities’ in Scotland.

3. With regard to the overall evidence base, it is to be noted that the Scottish evidence base is not substantial, and some Scottish studies are now quite dated and may not reflect more recent trends and concerns (for example, Shucksmith 1994, Shucksmith, 1996). Although there are a number of studies undertaken outside Scotland that have considered the housing and support needs of older people generally, and older people in rural areas (see for example, The Housing and Support Needs of Older People in Rural Areas (Bevan and Croucher, 2006); Time to Move: A Literature Review of Housing for Older People (Scottish Executive, 2006); Literature Review for the Strategy for Older People in Wales: Housing Services for Older People (Burholt and Windle, undated)), there are questions about how well the findings of such studies transfer to the Scottish context.

4. In preparing this paper, we have drawn on a number of studies and papers (included work previously commissioned by the Scottish Executive). The following papers have been particularly important sources of information:


5. In addition we have drawn on preliminary findings of an on-going Review of Sheltered Housing in Scotland currently being undertaken by researchers at the Centre for Housing Policy for the Scottish Executive. Although not yet completed, much data has already been collected and analysed regarding the provision of sheltered and very sheltered housing in Scotland. The Elderly Accommodation Counsel (EAC) database has been used to estimate provision in Scotland. Comparing these data with data returned to the Scottish Executive Development Department by local authorities, (notably the S1B returns) we are reasonably confident that the EAC database provides a good representation of current provision in Scotland.

6. This first section of this paper addresses population trends in rural areas. In the second section we then consider “housing” issues as follows:

- Patterns of tenure;
- Occupancy;
- Provision of specialist housing for older people;
- Older people’s preferences for “staying put” or moving to specialist provision;
- Cost effectiveness of different services models;
- Building accessible homes for the future;
- Developing the potential of the existing housing stock.

7. The third section addresses services for older people, and covers the following topics:

- Maintaining networks of informal and formal support;
- Preventative support services;
- Barriers to delivering services to older people in rural areas;
- Advice and information

8. Finally in Section 4, we make suggestions for policy and practice for consideration by the Scottish Executive.

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1 See [http://www.scotland.gov.uk/Topics/Housing/Housing/ROOPH/ROOPHprojectoverview](http://www.scotland.gov.uk/Topics/Housing/Housing/ROOPH/ROOPHprojectoverview)
Section 1: Population trends in rural areas

9. The Scottish Executive (2006) has noted that a shift in the composition of public services will be required in order to respond to the ageing of Scotland’s population. Projected increases in the number of older people need, however, to be set against the trend of declining overall population in Scotland and geographical variations in population trends, as these will have major implications for the provision and shape of public services, particularly if the intention is to deliver a similar level of service provision across the country.

10. Different trends in the total population of areas are important since younger people form the majority of migrants. The following specific trends have implications for service provision in rural areas:

- Migration of population from cities to certain rural areas and from west to east;
- Greater proportion of the ageing population in some parts of rural Scotland compared with non-rural areas;
- The apparent out-migration of young adults from some rural areas;
- Differences in social and economic well-being within rural local authority areas.

11. Regional differences in ageing across Scotland point towards greater proportions of older people in a number of rural local authorities (Wood and Bain, 2001). By 2016, Perth and Kinross, South Ayrshire, Argyll and Bute, Western Isles, Orkneys, Highland and Angus will have particularly high proportions of their populations composed of old people, similarly Dumfries and Galloway is projected to have a significant increase in the proportion of older people (Scottish Executive, 2006). Other studies have highlighted the high proportion of older people in the Scottish Borders (Scottish Health Advisory Service, 2000). In contrast, Edinburgh will have a lower rate of population ageing, whilst Glasgow will see a fall in the population aged 65 and over (Wood and Bains, 2001). Migration is highlighted as a key factor driving these trends.

Black and Minority Ethnic older people in rural areas

12. A recent analysis of the Census 2001 Scotland data shows that overall in Scotland, people from BME groups account for just over two per cent of the population. Areas with the most significant BME populations aged 60 and above are Glasgow, Edinburgh, East Renfrewshire, Dundee City, and East Dunbartonshire. Most rural areas have a very small older BME population, as can be seen in the Table overleaf.
<table>
<thead>
<tr>
<th>Local Authority</th>
<th>% of population aged 60+ from BME groups</th>
<th>Number in population from BME groups</th>
</tr>
</thead>
<tbody>
<tr>
<td>Aberdeenshire</td>
<td>0.19</td>
<td>83</td>
</tr>
<tr>
<td>Argyll and Bute</td>
<td>0.3</td>
<td>68</td>
</tr>
<tr>
<td>Dumfries &amp; Galloway</td>
<td>0.22</td>
<td>82</td>
</tr>
<tr>
<td>East Ayrshire</td>
<td>0.26</td>
<td>68</td>
</tr>
<tr>
<td>East Lothian</td>
<td>0.23</td>
<td>46</td>
</tr>
<tr>
<td>Eilean Siar</td>
<td>0.25</td>
<td>17</td>
</tr>
<tr>
<td>Highland</td>
<td>0.35</td>
<td>163</td>
</tr>
<tr>
<td>Moray</td>
<td>0.25</td>
<td>47</td>
</tr>
<tr>
<td>Orkney Islands</td>
<td>0.21</td>
<td>9</td>
</tr>
<tr>
<td>Perth and Kinross</td>
<td>0.24</td>
<td>78</td>
</tr>
<tr>
<td>Scottish Borders</td>
<td>0.19</td>
<td>49</td>
</tr>
<tr>
<td>Shetland</td>
<td>0.10</td>
<td>4</td>
</tr>
</tbody>
</table>

*Source: 2001 Census Scotland: An Analysis of Older People and Employment Data for Black & Minority Ethnic Communities in Scotland*

13. It seems likely that there are few services in rural areas specifically for older members of BME communities.
Section 2: Housing for Older People in Rural Areas

Patterns of tenure in rural areas

14. Meeting the needs and aspirations of older people in rural areas of Scotland in the future will have to respond to a requirement for appropriate mainstream accommodation – especially for owner occupiers. Data from the Scottish Household Survey show that levels of owner occupation across all age groups are higher in rural areas compared with non-rural areas (Philip et al, 2003). The difference between rural and urban owner occupation rates increased with successive age bands. Non-rural over 75s were 16.1% more likely than their rural counterparts to rent accommodation. Nevertheless, older people in both rural and non-rural areas were more likely to live in rented accommodation than younger households.

15. Where more detailed information about tenure is available at local authority level, this suggests that patterns of tenure vary not only between rural and urban areas, but also between different rural areas. For example, research in the Highlands Council area (DTZ Pieda, 2003) found that tenants in the privately rented sector tended to be older than the average for Scotland, and to have lived in their properties for a long time; similarly single pensioners were particularly prevalent in social rented accommodation (34 per cent of social rented tenants were single pensioners compared with 20 per cent of all households).

<table>
<thead>
<tr>
<th>Age band</th>
<th>Tenure</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Owned outright, Or buying</td>
</tr>
<tr>
<td>Rural</td>
<td></td>
</tr>
<tr>
<td>under 55</td>
<td>71.6%</td>
</tr>
<tr>
<td>55-64</td>
<td>75.7%</td>
</tr>
<tr>
<td>65-74</td>
<td>64.1%</td>
</tr>
<tr>
<td>75 and over</td>
<td>64.1%</td>
</tr>
<tr>
<td>Non-rural</td>
<td></td>
</tr>
<tr>
<td>under 55</td>
<td>65.9%</td>
</tr>
<tr>
<td>55-64</td>
<td>69.1%</td>
</tr>
<tr>
<td>65-74</td>
<td>60.8%</td>
</tr>
<tr>
<td>75 and over</td>
<td>51.0%</td>
</tr>
</tbody>
</table>

Source: Philip et al, 2003 (drawn from Scottish Household Survey, available observations: n = 28330)

16. It seems highly likely that current patterns of tenure will change given the increase in owner-occupation in Scotland over the last 25 years. Indeed Highland Council (2004) drew attention to rapid shifts in the tenure aspirations of older people. People who have become used to owner-occupation may be very reluctant to entertain becoming tenants in the future. However, there is also some evidence that people find home ownership increasingly burdensome as they get older. Many have particular concerns
about their ability to afford essential maintenance and repair, as well as concerns about managing repair programmes (Hancock et al, 1999; Askham et al, 1999; Croucher et al, 2003). There is also some evidence that some older people, particularly the very old, or those whose properties are not particularly valuable and do not allow trading down (for example, those who have bought under the Right to Buy) are prepared to change tenure to escape the responsibilities and costs of home maintenance, and release housing equity (Croucher and Hicks, forthcoming). It is also important to note that although older home-owners as a group have gained the most from the increase in house values, not all older people have been winners in the housing market.

17. Commentators have highlighted a number of reasons why levels of social rented sector provision are lower in rural areas of Scotland. There has traditionally been a lower rate of construction of local authority accommodation in rural areas compared to urban centres, combined with higher levels of Right To Buy (Philip et al, 2003). Thus patterns of tenure may simply be a reflection of supply factors rather than demand for a particular type of tenure. One issue arising from this pattern is the extent to which there may be an element of frustrated demand amongst older people in rural areas for social rented accommodation.

18. At a recent focus group in Scotland (conducted as part of The Review of Sheltered Housing for Older People in Scotland) participants, who were all frail older homeowners in their eighties, were asked about tenure preferences and how this might influence their choice of housing options. For these individuals tenure was not the main consideration, and most said they would be prepared to move to rented properties within sheltered housing schemes if this was the best option for them in the future. Spending their housing wealth to make their own lives more comfortable was seen to be sensible rather than leave a property/money to their families.

**Occupancy**

19. The Scottish Executive (2006) noted that solo living has become more common, with one person households now making up one-third of all households in both Britain and Scotland. Solo living amongst adults aged 30-74 is higher in Scotland (18%) than the rest of Britain (15%), although it is also much more common in cities than in rural areas. Solo living is proportionally more common amongst older people, which means that it is expected that people will live a much greater proportion of their lives alone as they live longer. Older women (aged 65 and over) are twice as likely to live alone as older men, whereas young men (24-44) are more likely to live alone than young women.

20. With the proportion of elderly people in rural Scotland projected to increase in coming decades it is likely that the proportion of single pensioner households will also increase. An increase in solo living has implications for the way that patterns of informal care and support may be configured in the future. Further, under occupancy of houses by older people in rural areas has been identified as an issue of concern by
Communities Scotland in their 2002 Housing Market Context Statements. This is a particular problem in the public rented sector, and can result in a lack of family-sized affordable accommodation being available. A lack of family-sized accommodation has been cited as a factor encouraging young families to leave rural areas.

21. However, the trend towards smaller household size does not necessarily equate to aspirations for small properties, as evidenced by the low demand for bedsits or one bedroom sheltered housing in some rural authorities. Instead, accommodation requirements for single people often tend to reflect an aspiration for housing with two bedrooms. Accommodation with a spare room offers flexibility for occupants which can help to enable independent living, by providing space for friends or family to stay, which can be purely social (but no less important for that), but which can also facilitate meeting care needs. Indeed, Highland Council has recognised the need for a spare room to allow for a live-in carer (Highland Council, 2003). A spare room also provides space for potential conversions to accommodate adaptations and storage.

Provision of specialist housing for older people

22. Shucksmith et al (1994) identified an under-provision of sheltered housing in most rural areas of Scotland, and an almost total absence of very sheltered accommodation in all rural areas in Scotland.

23. The on-going Review of Sheltered Housing for Older People in Scotland presents a different picture. Across Scotland there are approximately 35,000 units of sheltered housing, clustered in approximately 2,000 schemes. The rates of sheltered housing provision per head of population are as follows:
   - 32.2 dwellings per 1,000 population aged 60+
   - 43.0 dwellings per 1,000 population aged 65+
   - 94.2 dwellings per 1,000 population aged 75+
   - 380.9 dwellings per 1,000 population aged 85+

24. These rates mask considerable variation in provision in different areas in Scotland, as is shown in the table overleaf. When the 32 Scottish local authorities were ranked according to the level of provision, Dundee City was ranked first (i.e. the greatest number of sheltered housing schemes per head of population aged 60+) and Orkney was ranked last, with only 8.9 units of sheltered housing per head of population aged 60+. The table below shows the ranking of rural local authorities and the rates of sheltered housing, and very sheltered housing provision. Note that the ranking for sheltered and very sheltered housing provision is not the same.
<table>
<thead>
<tr>
<th>Local Authority</th>
<th>Rank (SH)</th>
<th>Rate of sheltered housing per 1,000 aged 60+</th>
<th>Rank (VSH)</th>
<th>Rate of very sheltered housing per 1,000 aged 60+</th>
</tr>
</thead>
<tbody>
<tr>
<td>Shetland</td>
<td>3</td>
<td>59.5</td>
<td>5</td>
<td>5.3</td>
</tr>
<tr>
<td>Aberdeenshire</td>
<td>6</td>
<td>40.6</td>
<td>8</td>
<td>4.3</td>
</tr>
<tr>
<td>Scottish Borders</td>
<td>7</td>
<td>37.0</td>
<td>23</td>
<td>1.8</td>
</tr>
<tr>
<td>Perth and Kinross</td>
<td>12</td>
<td>27.0</td>
<td>10</td>
<td>4.0</td>
</tr>
<tr>
<td>East Lothian</td>
<td>15</td>
<td>26.6</td>
<td>27</td>
<td>1.2</td>
</tr>
<tr>
<td>East Ayrshire</td>
<td>16</td>
<td>26.1</td>
<td>14</td>
<td>2.8</td>
</tr>
<tr>
<td>Argyll and Bute</td>
<td>18</td>
<td>25.6</td>
<td>20</td>
<td>2.1</td>
</tr>
<tr>
<td>Moray</td>
<td>19</td>
<td>25.5</td>
<td>24</td>
<td>1.5</td>
</tr>
<tr>
<td>Highland</td>
<td>22</td>
<td>22.8</td>
<td>28</td>
<td>0.8</td>
</tr>
<tr>
<td>Eilean Siar</td>
<td>25</td>
<td>21.7</td>
<td>30</td>
<td>0</td>
</tr>
<tr>
<td>Dumfries &amp; Galloway</td>
<td>30</td>
<td>15.4</td>
<td>15</td>
<td>2.7</td>
</tr>
<tr>
<td>Orkney Islands</td>
<td>32</td>
<td>8.9</td>
<td>7</td>
<td>4.9</td>
</tr>
</tbody>
</table>

25. It would be unwise to generalise about levels of sheltered and very sheltered housing provision in rural areas, as clearly in some rural areas levels of provision are similar, if not greater to those within urban districts, and in others levels of provision appear to be extremely low in comparison with both urban and other rural areas. It would be useful to know whether those areas with low levels of provision have developed alternatives to sheltered or very sheltered housing, and there is some evidence that may indeed be the case in Eilean Siar (see below). Nevertheless there are some startling differences which are worthy of further exploration.

26. Whilst there may well be an under provision of sheltered housing in some rural areas, there is also the issue of low demand in some rural schemes, which suggests that the current configuration of housing provision for older people does not match levels of need or people’s aspirations.

27. Philip et al (2003) suggested that increasing numbers of older people in rural areas may mean that demand for specialised accommodation will also increase. With the proportion of over 80s increasing across rural Scotland there will be increasing demands for supported accommodation places in rural communities where shortfalls in such accommodation have already been identified.

28. However, current analysis of waiting lists for sheltered accommodation note that many people apply as a safety net. In one authority, not many people appeared to express a positive choice for sheltered housing in preference to other forms of accommodation (Highland Council, 2004). For example, of the applicants aged 65+ for Highland Council’s waiting list, 45 per cent wanted ground floor housing, but only 12 per cent stated that they only wanted sheltered housing and would not consider any other type of property. Thus, the development of accessible general needs housing, rather than sheltered housing per se, in rural communities may go
some way to meet current aspirations. Further, an increasing emphasis on supporting people in their own homes may reduce the need for sheltered style accommodation and instead it may be better to go for an option where services enable people to live in their own homes until a move to very sheltered accommodation becomes necessary.

29. Demand for sheltered accommodation in rural areas can be very localised and reasons for low demand in some schemes may be specific to individual schemes. The Void Review Report by Highland Council (2006) offers the kind of detailed analysis that can reveal the reasons for difficulties with individual sheltered schemes. The review showed that some schemes in rural locations were suffering from low demand because of the following issues:

- their remote location in relation to other services, or a lack of public transport services to connect people with nearby services;
- poor siting of a sheltered scheme, with access up or down a steep hill;
- outdated design or facilities;
- over-provision of sheltered accommodation locally.

30. Drawing on data collected for the Review of Sheltered Housing in Scotland, it is clear that there are pockets of both high and low demand in both rural and urban areas. In discussion with housing managers both within local authorities and housing associations, it appears that demand for different schemes can be very localised, and accounted for by a range of factors including location, age of the scheme and quality of accommodation, and whether the scheme had a “good reputation” with local residents. Demand also appeared to be mediated by what other schemes were available in the vicinity.

31. COSLA (2006) recognised that one of the problems in shifting grant monies between public services is that whilst finance for education is quite ‘lumpy’, financial support for services for older people is more incremental. As Philip et al (2003) noted, demand for specialised accommodation is likely to increase over time as the number of older people increases. However, new development to match this demand needs to be carefully staged between local authorities and housing associations. If provision runs ahead of demand, then the current difficulties of over supply in some schemes will be replicated elsewhere.

32. One difficulty in providing housing for older people in rural locations is that a scheme may well be planned and built to be close to existing services, but those services may shut down or move over the coming decades – a housing scheme may be left high and dry as services erode around it. This danger reinforces the need for developments to be planned in such a way that schemes can adapt to changing circumstances, through greater flexibility in built form and the potential for flexibility of use. For example, schemes may require the potential for, say, mobile services to be delivered to their residents. Alternatively, there are a number of instances of schemes in rural areas that act a base to deliver services into surrounding communities.
Older people’s preferences for “staying put” or moving to specialist housing

33. A number of particular issues are associated with the provision of supported accommodation in rural areas. Supported accommodation is not distributed evenly across rural areas and a move into such accommodation often entails a move out of an older person’s local community. This can mean that older people lose touch with their community and may feel lonely and isolated. In particular, very sheltered accommodation or institutional care is likely to be more centralised than less intensive forms of supported accommodation. For older people from remote rural areas a move into very intensively supported accommodation is likely to require a long distance move.

34. A study of the housing and support needs of older people in England (Bevan et al, 2006) found that most respondents in England were keen to stress that they intended to stay in their own homes, although some respondents were aware that as their needs changed over time they would prefer to move to larger settlements (to get better access to facilities) or to smaller, more manageable properties. A crucial factor in prompting a move was the ability or not to drive.

35. These findings are supported by evidence from Scotland. A survey in rural areas of Dumfries and Galloway found that 84 per cent of older people stated that it was important for them to remain in their home for as long as possible (Dumfries and Galloway Council, 2003).

36. Aberdeenshire Council (2004) noted that whilst demand for sheltered accommodation is healthy in the larger settlements, there is an issue of low demand in some of the more rural locations. Aberdeenshire Council (2004) noted that an analysis of the preferences of older people was required to establish whether older people were opting for moves to the towns where support and medical services are more readily available or whether older people prefer to remain in their own communities if more services were brought to them. Note however, in interviews undertaken for the Review of Sheltered Housing in Scotland, key informants also noted that some older people living in remote communities have sometimes welcomed the opportunity to move sheltered housing scheme in larger settlements, despite having to move some distance from their original home. Ease of access to facilities, but also opportunities to have some company and social engagement have been motivating factors in these moves, and staff reported that some formerly isolated older people have thrived following a move to more comfortable and sociable surroundings. Whilst it is the case that many older people state a preference for remaining in their own homes, this does not mean that a move is necessarily always viewed as forced. Bevan et al (2006) noted that for some older people in rural areas of England, a move from a village to a larger settlement, perhaps to a sheltered housing scheme, was seen as a positive choice.

37. It would seem therefore that facilitating housing choices for older people in rural areas is not just about increasing the availability of a greater diversity of dwellings
(such as bungalows) or offering specialist provision (such as sheltered housing or very sheltered housing), but making sure that people’s existing accommodation arrangements can be sustained as far as is practicable (see below).

Cost effectiveness of different service models

38. One of the main dilemmas facing service delivery in rural areas is balancing an objective for enabling people to age in place against the costs of providing a wide range of choice at local level. Although an aspiration for facilitating choice in terms of a range of models of accommodation and support for all wherever they live is laudable, in practice the costs are likely to be prohibitive. For example, research on housing and support needs in rural areas of England noted difficulties faced by practitioners around the costs of one model of extra care that was focused at village level (Bevan et al, 2006). There is the danger in developing ‘flagship’ schemes for rural communities at very local level that whilst the immediate settlements may benefit tremendously from such a scheme, the revenue costs alone mean that such specialised provision cannot hope to be replicated in other rural areas.

39. A review of very sheltered accommodation across Tayside noted that in those parts of Angus and Perth and Kinross out with the main settlements there were difficulties in justifying developments of 20 or more units (Williams, 2001). There can also be difficulties in making a case for developments which would be too small to be cost effective. Alternative mechanisms will have to be considered for meeting the needs of those older people in rural areas who could benefit from very sheltered housing including, intensive home care packages, mobile wardens and befriending schemes. This point ties in with the view identified above, by Aberdeenshire Council, that services may need to be flexible and mobile to be taken out to rural communities, rather than expecting older people to move to the services in larger settlements.

40. To our knowledge, there has been little work undertaken to assess the cost effectiveness of services such as Care and Repair, or the cost effectiveness of adapting older people’s homes in comparison with developing sheltered or very sheltered housing.

Building accessible homes for the future

41. Discussions in Scotland about how housing can respond to the needs of an ageing population have focused upon ensuring that accessible homes form a key element of new developments (COSLA, 2006). These discussions noted the need for accessible housing and to employ flexible designs in new build to ensure compatibility with wheelchair access and other accessibility features. There was a general view that developments needed to be seen in terms of spending to save, i.e. forward planning in the early stages of new developments would reduce the added cost of making houses accessible at later stages.
42. This issue also reflected in reviews on the future care for older people. The Range and Capacity Review Group (2006) noted the importance of the physical design of housing in enabling people to remain in their homes for longer. As a condition of funding, Communities Scotland already seeks compliance with the Housing for Varying Needs Design Guidance, so that newly-built, refurbished or adapted social housing achieve a degree of flexibility, suit people of different abilities, are convenient to use and fit for their purpose.

43. In rural areas, the limited amount of new housing being developed in any single community, if at all, will mean that any policy objective for achieving increases in accessible housing through new build in rural areas will be necessarily marginal. However, any change in policy now will lead to an incremental addition to the accessible rural housing stock over the coming decades, which will help to meet the additional demand from the increasing older population in these areas over this period of time. Therefore, given the low rate of new development in rural areas, there is an even greater imperative for policymakers to ensure that any new build in rural areas – both public and private - should meet standards of design that facilitate access. Further, there is also the opportunity to ensure that in cases where any existing stock is being redeveloped, either on an individual basis, or perhaps as part of a regeneration initiative, then existing dwellings can play a greater role in providing a flexible and accessible housing stock for the future.

44. A real step forwards has been taken with revisions to building standards later in 2007. The revised editions of the 2007 Technical Handbooks will come into force on 1st May 2007 (Scottish Building Standards Agency, 2007). Some of the revisions will extend standards to address ‘liveability’ and the needs of occupants, which supports the Scottish Executive’s aim of promoting a more inclusive built environment. The aim of the revisions will be to better address the changing needs of occupants over time and relate to the provision, on one level, of an enhanced apartment, and kitchen under this standard, together with accessible sanitary accommodation (standard 3.12) and improvement to circulation spaces (standard 4.2) will assist in creating more sustainable homes. The Scottish Building Standards Agency note that the guidance has been based around, and developed from, ‘Housing for Varying Needs’ and the Lifetime Homes concept developed by the Joseph Rowntree Foundation.

**Developing the potential of the existing housing stock**

45. There is also the importance of making the best possible use of the existing stock in rural areas. Equipment and adaptations have a crucial role to play here, and to a certain extent, recognition of the importance of this role can be seen in the recent announcement that an extra £1.6 million is to go to the Highland and Island councils in the form of Private Sector Housing Grant. However, enabling people living in private sector stock to meet their own needs also requires a flexible approach by planners to allow people to improve their homes through conversions and extensions.
46. Research has also highlighted the role that housing agencies can play in making better use of existing stock, including reviewing the use of difficult to let sheltered housing (Cairncross et al, 2005). The Range and Capacity Review Group highlighted that consideration could be given to the "future proofing" of new buildings at the design stage, so that they can be used for different purposes in future as needs change. The Range and Capacity Review Group noted one example by South Lanarkshire Council where at least two new care homes have been designed to high space standards and high standards of interior design. This development has allowed a wide range of needs to be addressed including respite and palliative care, and they could even be used as extra care or as hotels - depending on need.

47. In rural areas, designing from the start for a flexible use of affordable accommodation, may need to recognise the very localised nature of housing and support needs. Over time, the housing needs of any single rural community may fluctuate markedly in terms of type of household requiring accommodation. This variation in needs may require the development of affordable accommodation that can meet a range of needs over time. It also requires flexible allocation policies to allow accommodation to be under-occupied.
Section 3: Services for Older People

Maintaining networks of informal and formal support

48. The Scottish Executive (2006) highlighted the important role of support networks, based on family and more formal structures. However, in remote rural areas there is an issue about the availability of volunteers or formal carers. Informal carers can also find themselves very isolated. The Range and Capacity Review Group argued that older people are citizens with important roles in supporting families and within communities: they are also the biggest providers of support to other older people. Support can thus be inter-generational as it can be between peers. Younger households may be able to provide informal support for older family members or friends. Older people can also provide support, for example, in the form of childcare, for younger family members.

49. There is an important role for housing here in helping to sustain support networks, through the provision of affordable housing (Bevan et al, 2001). This is a key point. Affordable housing across generations can contribute to the continuation of family and social networks. The provision of affordable housing can also assist in making rural areas more attractive for key workers. Research has noted the difficulty in attracting and retaining staff in rural areas.

Preventative support services

Linking support needs with housing in rural areas

50. Philip et al (2003) noted that a central tenet of Care in the Community policy is to enable people to live in their own home for as long as possible, yet rural areas pose particular challenges to the delivery of such assistance. As noted by Henderson (1997) supporting older people to live in rural areas requires an integrated, partnership-based approach to be developed between those responsible for housing, health care and support and - crucially - transport services.

51. Discussions with older people in rural areas of England about their housing and support needs found that the majority of respondents commented on the desirability of low-level support as a crucial way of helping people to continue living in their current home, either provided formerly by services, or as was more likely, informally by friends, family and neighbours (Bevan, et al, 2005). Given limited alternative options in terms of accommodation, low-level support was viewed as a crucial way of helping people to maintain their independence in the countryside.

52. A consultation exercise with older people living in Sutherland identified similar requirements (www.hact.org.uk/downloads.asp?PageId=145). Older people in this area of the Highlands stated that they wanted the kind of low level help that was not available from statutory or voluntary agencies, such as small repairs around the home.
Handypersons Services are one response to this demand. One example is the Handypersons Service run by Albyn Housing Association in Sutherland and Ross-shire, which has been noted as a ‘wider role’ case study by Communities Scotland (http://www.communityscotland.gov.uk/stellent/groups/public/documents/webpages/otcs_010454.pdf).

53. Philip et al (2003) concluded that there was some evidence that the home care services provided to older people are not always the services most valued by older people themselves.

54. MacDonald (2004) also highlighted that evidence from research and audit indicates that overall in Scotland there has been a reduction in total home care provision at the expense of people with low level support needs. Although this evidence related to the 1990s, this finding has implications for taking forward a policy for maintaining people in their own homes. There is a need to re-assess how far this trend is still the case. A central conclusion is that low level preventative support is a key issue for rural areas.

55. MacDonald (2004) also reviewed research by Stalker and Campbell (2002) that considered how local authorities in Scotland were using care management to sustain people at home in a study commissioned by the Scottish Executive. They conducted a Scotland-wide survey to obtain the views of service managers and care managers about policy and practice in each council area. Case studies were selected purposively in Stalker and Campbell's study for their good practice features including multidisciplinary working, effective screening, effective single shared assessment tools, budgets devolved to care manager level and a high level of user involvement. The study found that predominantly rural authorities were more likely than urban to have adopted creative care management practices and the report suggests that this may not be accidental. Smaller authorities lend themselves to closer working relationships between staff at different levels and in different agencies (which is a feature of partnership working in rural areas which was also noted in Bevan and Rugg (2006).

Telecare

56. Telecare offers considerable potential in enabling older people to maintain their independence in their own homes. The Range and Capacity Review Group (2006) identified that the key to successful application of telecare is the support service infrastructure that is around the technology,

*Installing monitors on their own, or even monitors and a call centre, does not provide the solution. It is the response mechanism - whether that is the neighbour who is prepared to be contacted at any time of the day or night, or on call staff - that allows frailer older people to remain at home, p36.*
57. It is with regard to the support mechanisms that care would have to be taken in delivering telecare in remote areas. West Lothian constitutes the main example of applying telecare in Scotland, and housing agencies have an important role in terms of providing funding, in partnership with a range of other organisations. However, consideration of the Scottish Executive 6-Fold Urban Rural Classification 2003-2004, by Local Authority, shows that this authority was predominantly urban in nature, with only 14 per cent of the population living in accessible small towns and a further 16 per cent living in accessible rural areas. Thus, there may be an element of replicability for other accessible rural areas. In remote areas, there would need to be a network of individuals within a reasonable distance in terms of travel time who would be able to respond with sufficient rapidity to make telecare work effectively. There could be potential for volunteers to take on this role within rural communities, perhaps even as an extension to the development of first responders with respect to accident and emergency or fire. However, it is also important to recognise that this role would itself need considerable support to develop a network of volunteers. Even so, such a network may be patchy and uneven in coverage, both geographically, and also over time as volunteers may drop out for whatever reason. Further, there may be an issue that people making use of telecare may feel that their dignity and privacy is being compromised if they know the volunteer in a social capacity.

58. According to Shucksmith and Philip (2000), rural communities have a tradition of mutual aid, self-help organisations and other community resources, which are seen as a necessary response to the lack of certain services. This may be a reason why more people in these areas are involved in the voluntary sector, although as Shucksmith and Philip note, the number of volunteers has decreased as in urban areas.

**Barriers to delivering services for older people in rural areas**

59. Older people consistently express high levels of satisfaction with service provision despite more restricted access to services. This seems to be the result of lower levels of expectation among this age group (Hope et al 2000). Accent Scotland and Mauthner (2006) identified a number of themes either from their literature review or focus groups in relation to services for older people in rural areas. For older people, the general point to make is that the normal range of support required (e.g. hedge cutting, grass cutting, weeding, food, general support), has another dimension in rural areas, mainly due to the problems of access (e.g. transport to health care services).

60. The literature in several areas listed the needs of the elderly as being a priority (Argyll and Bute Council (2001), East Ayrshire SIP (2000), Highland Council (2004), Orkney CPP (2005). In Dumfries and Galloway (Dumfries and Galloway Council (2003) there was a call for services that focused more on prevention of problems of old age rather than only providing ones that alleviate the problems once they occur.

61. Rural transport is a key factor in determining whether people in rural areas can access a full range of services, and rural residents cite transport as the over-riding problem in rural areas. Accent Scotland and Mauthner (2006) have restated the challenges that
face rural communities in rural and remote areas in terms of delivering and accessing services, including difficulties in achieving economies of scale; the high cost of transport that can hinder the provision of services locally as well as access to services in more distant population centres.

Overcoming barriers in rural areas

62. Accent Scotland and Mauthner (2006) make a distinction between remote and accessible rural areas in terms of the way that services are configured. They suggest that remote communities may need the provision of services on the ground while in more accessible areas transport to services in towns may be more cost effective. McQuaid et al (2003) set out a range of possible options for improving access to services in rural areas by resolving some of difficulties of providing rural transport.

63. Different options for providing services to rural communities have been identified, including:
- working in partnership with other service providers by sharing premises, staff or vehicles;
- making better use of technology;
- outreach and mobile services;
- one stop shops;
- an affordable, accessible and flexible range of transport options, including community transport schemes, to access services (Accent Scotland and Mauthner (2006); Pickering (2003).

64. One point about these examples is that generic approaches to service delivery in rural areas may have potential for meeting the specific needs of older people. Nevertheless, care does need to be taken in terms of tailoring these generic options to meet the needs of older people. For example, MacDonald (2004) noted that an English evaluation of two integrated teams in a rural area concluded that the features of integration adopted, such as co-location, were insufficient in themselves to produce better outcomes for older people. The authors concluded that more evidence was needed to support the claim that integration is of benefit (Brown et al 2003).

65. Evidence regarding potential models of service delivery in rural areas should be enhanced by the DESERVE project (www.nppdeserve.info), which is due to be completed by summer 2007. This project is a collaboration between Scotland, Sweden, Iceland and Finland to test the transferability of models of service delivery to remote and rural areas. Each participating region will implement a project utilising a model previously tested by partners in their own countries. The emphasis is on the models of service delivery to remote and rural areas rather than on the specific services provided, so it may be hoped that some of the lessons may be learnt which could be applied in the context of housing and support, even if projects have not directly been involved in this type of service.
66. It may not necessarily be the case that rural areas are perceived as lacking in terms of services and facilities. Hall Aitken (2007) noted strong anecdotal evidence that older people were moving into the Outer Hebrides because they feel that health and social services are better than in many parts of the mainland (Hall Aitken, 2007).

67. The shifting balance in the type of provision leads to trade offs for providers. Hall Aitken (2007) noted that there had been a noticeable drop in applications for sheltered accommodation, and this trend was associated with developments in levels of home care. Hall Aitken (2007) also noted that not only has the number of home visits increased, but that the profile of care has also changed, previously it was task-centred but now there has been a switch to personal care that is tailored to meet individual needs. For example home care used to be once a day, now there may be as many as four or more visits in any one day. The Comhairle Eilean Siar Health Board employs 12 people to provide a mobile overnight support service, which allows people to stay in their own communities for longer, and also helps to create local employment. However, it was noted that the service was relatively expensive compared with residential care, and that the social work service has overspent its budget in this area in the two years prior to the publication of the research.

68. A considerable body of good practice in delivering services for older people in rural areas has resulted from the evaluation of Better Neighbourhood Services Fund (Shiel et al, 2006). A strong focus for the projects was upon independent living and safety in the home. In two areas, Argyll and Bute and Dumfries and Galloway, there was a particular focus on the development of preventative services and pre-crisis intervention.

**Advice and information**

69. Some older people remain ‘hard to reach’ in terms of identifying needs. Bailey et al (2004) highlighted the role of statutory agencies, the voluntary sector and community and family networks in providing help and support for older people in Argyll and Bute. However, they also noted the following:

> “Yet, in spite of the range of options, some elderly people are outside of all these networks; the mechanism for detection of problems is unsophisticated, and cases exist of elderly people struggling with severe problems in difficult and isolated conditions. These problems are further exacerbated by a general confusion about benefits and entitlements, and a complete absence of any system to disseminate such information”. (Bailey et al, 2004, p46).

70. Improving access to information was considered in the report ‘Service Priority, Accessibility and Quality in Rural Scotland’ (Accent and Mauthner, 2006). This research noted that in Dumfries and Galloway, a need was identified to help older people apply for services and benefits they may not necessarily be aware of and to enhance incomes generally. Analysis of responses by age noted that older participants
and their carers were most concerned with access to care, support, training for carers and information on benefits.

71. However, Accent and Mauthner (2006) also noted examples of good practice, including one that was specific to older people:

*Directory 'Guid Services for Older Folk' (Dumfries and Galloway).* This Directory was produced to plug an information gap. Whilst the Council assists many older people, it was known that a lot more were reluctant to approach Social Services. It was also known that if older people could access services before they hit a crisis as opposed to the point or just after crisis then they would be more likely to journey through successfully - possibly even avoiding a crisis situation developing. This Directory gives practical information on support services that are available by direct referral i.e. an older person could access services without going to Social Services. There is also a list of 'approved contractors' from the Council's Property Services department. There is an 'information bank' containing information on a broad set of generally useful services and information; a section on home safety advice; information about day centres and care homes. This directory has been useful to agencies as well as older people with the Police promoting its use in the fight against bogus workman scams (www.dumgal.gov.uk/dumgal/).

72. Discussions with older people about improving access to information about services indicated that any information strategy (indeed where these are in place) should be wide reaching, and not necessarily focused on venues or services that are most usually associated with older people, as younger family members or friends often passed on information to older people that they thought would be of use to them (Bevan et al, 2006).

73. Further, older people who participated in this research noted a range of possible sources of information: village magazines, church newsletters, local radio and television, notice boards in community venues or shops and post offices, mobile libraries, were all cited as means of promoting the awareness of older people’s services in rural areas. Doctors' surgeries were frequently mentioned as a key information point. It was also felt that care workers going into people’s homes should also be aware of the types of services that were available and assist people in accessing them. Thus different agencies – whether health services, voluntary sector, housing, care and repair – should have some knowledge of what other agencies offer and how services can be accessed.

74. Work by Albyn Housing Association suggested that a similar approach may also be applicable in rural areas of Scotland. The development of a handypersons service by this Association highlighted that it was important to gain the support of the community. Further, that it was important to identify key people within the community who could promote the service in addition to the usual promotional materials. Innovative working by statutory agencies can also lead to the development
of targeted information and advice, especially in remote rural contexts. For example, the housing allocations section of Orkney Islands Council has changed the way they work when they visit islands off the mainland. If they have an appointment to see somebody, they visit all the people on the waiting list on that island there to see if there are any issues that need to be flagged up. If people are struggling then the officer responsible can signpost people in the right direction. Although this is an example of a generic service, and not specifically targeted at older people, it highlights that a flexible approach can lead to a more efficient use of time by staff, and also greater benefits for residents.
Section 4: Policy implications

75. Research has suggested that there was a poor linkage at the end of the 1990s between health and housing in Scotland in relation to planning for older people (Harrison and Heywood, 2000). However, increasingly there is a recognition of the importance of using a whole systems approach as an integral component of strategic planning. The Range and Capacity Review Group (2006) noted that housing has a significant contribution to make towards the care needs of older people. A focus on housing within the context of broader strategic planning can also be seen at local authority level: Orkney’s Strategy for Older People notes the central focus on housing within the wider strategy.

76. We too would stress the vital and essential contribution of housing to the health and well-being of older people generally, but particularly in rural areas. However if the contribution of housing is to be maximised, there must be an overall policy and strategic framework that takes a wider view of services for older people, incorporating health care, personal care, preventative services, information, and crucially transport and access to service.

77. Current population trends in rural areas suggest that overall the proportion of the population made up of older people will be greater in rural areas than in urban areas, and greater in some rural areas than in others. A greater proportion of older people in rural areas will be owner occupiers compared to urban areas. There will be increasing numbers of older home owners reflecting the increase in home ownership of the last 25 years. More generally many older people will live alone, often for many years. Increasing numbers of people will live with chronic life-limiting conditions (such as dementia, and heart failure).

78. In terms of addressing current and future housing needs, rural policy needs to be sufficiently flexible to take account of the diversity between and within rural areas, different levels of existing provision (for example, the differing availability of sheltered and very sheltered housing). Similarly it needs to take account of other policy initiatives – particularly free personal care – as it seems that free personal care might provide an incentive for people to remain in their own homes as opposed to moving to residential care or very sheltered housing.

79. Policy should address services and support to enable people to remain in their own homes. Such services should address a range of needs, including:

- Repairs and maintenance to the home;
- Adaptations to the home to facilitate “staying put”.
- Fuel poverty
- Low level preventative services such as “handyperson” schemes,
80. Such services can and should be tenure neutral. Inevitably there will be questions about how far older home owners should be expected to retain the responsibility, particularly the financial responsibility, for the maintenance and repair of their homes and the installation of adaptations. Often the concern of older home-owners is not just the cost, but the worry and difficulties of finding reputable workmen. There may be some value in offering incentives to ‘younger old’ homeowners to think about their homes, and how they might not only be maintained, but also made ready for some of the possible eventualities of later old age (for example, installing a downstairs toilet and shower, installing effective heating, and energy saving measures such as insulation). Promoting this type of forward planning may be a cost effective way of enabling older home owners to stay put.

81. With regard to more specialist provision, there are no simple answers to how much or how little sheltered or very sheltered housing should be in place in rural communities. In those rural communities that are more accessible, larger settlements that offer easy access to a range of services, and are also accessible to outlying communities seems to be the most suitable location for sheltered or very sheltered housing schemes. There is some evidence that some older people prefer to move to a location that offers easier access to services rather than remain in remote and isolated communities. It is perhaps not always wise to assume that older people want to “stay put” come what may. In more isolated rural areas however, different solutions may be required. There are difficulties in sustaining sheltered housing schemes in some small rural communities. In such communities, options to deliver the same level of services to people in the community need to be explored. Whether it will always be possible to provide the same level of services to all individual wherever they live is a moot point. The cost implications of equity of access need to be addressed.

82. Of importance is the capacity of local authorities, housing associations, and private sector providers of sheltered and very sheltered housing to work and plan together, and with other services providers such as local health care and social services, to ensure that supply is in line with demand, and with future projected demands. Our work on the Review of Sheltered Housing in Scotland indicates that there has not been the coordination of provision across different provider sectors.

83. In order to address the future needs of growing numbers of older people, all new housing should be developed with the future needs of an ageing population in mind. It is particularly important in rural areas where the amount of new housing being developed is likely to be small that opportunities to “future proof” the housing stock should not be missed. Planning regulations should also allow for existing homes to be “future proofed”.

84. These and other measure might be thought of as purely “housing” policy. In isolation they will only go part way to meeting the needs of older people. Other services will also be crucial. We highlight two important topics – that of preventative services (or the types of low level support that older people consistently say they most value), and that of transport and access. In our work for the Countryside Agency in England, and
also in writing this paper, we have come across examples of good practice for both low level support and transport services. How best to provide such services in conjunction with housing services particularly in more isolated rural areas should be a shared concern. One way of pushing local authorities to think and invest more in such services might be through the introduction of performance indicators that address these two crucial topics. While we acknowledge the perverse incentives that performance indicators can sometimes introduce, nevertheless they also focus attention on particular issues of concern.

85. Finally, there are particular concerns about the information needs of older people in rural areas. Much rural poverty could be ameliorated if older people claimed all the benefits they were entitled to, similarly crises might be avoided if people knew where to go to get help or ask advice before difficulties arise. We have noted above examples of good practice in this area. Directories of services, that are regularly updated, and are in a format that is accessible to older people, appear to be a useful way forward. These and other information regarding services for older people should be widely disseminated to a range of community facilities, particularly GP surgeries.
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