Ageing and its Implications for Housing and Urban Development: South Australia
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Abstract: Declining fertility, increasing life expectancy and the effect of the ‘baby boomer’ generation moving into older age groups has contributed to an increase in the proportion of the population aged 65 years and over. This trend will continue over years, to such an extent, that the proportion of the population aged 65 years and over will grow, from the current 13% to 25% by 2051. Demographic changes and urban policies/governance issues are major concerns in cities, and it is expected to have a significant impact on cities in the future. The changing age profile, along with lifestyle and work pattern changes, will effect the future housing arrangements and urban development.

The aim of this paper is to examine the consequenc es of ageing on urban development and housing in South Australia. The research found that current and future housing requirements of older South Australians, varies within and between some groups/cohorts and this differentiation was clearly related to where people live, their age, socio-economic status and the assets they hold. ‘Ageing in situ’ or ‘ageing in place’, is seen as a more preferred option by the aged people. There is a strong need to offer more support for ageing in place and options for appropriate and affordable accommodation in suitable locations with a right house design.

Introduction
It is well recognised that population throughout the world is ageing and Australia’s population is no exception. Ageing is the most dramatic change that will occur to Australia’s population, particularly over the next 50 years (Luszcz et al., 2004).

Population of Australia is ageing because of the combined effects of increasing longevity and decreasing fertility. These demographic changes are producing economic, social, and personal challenges for the Australian society, families and individuals. The implications of an ageing society have increasingly become a focus of research, policy, and debate in Australia and many other countries: developed and developing. At the international, national and state level, there have been policies and strategies developed that focus on the ‘challenges and opportunities’ facing the country, in relation to its ageing population.

Much of the focus has centered on the fiscal implications of providing retirement incomes and projected increase in the cost of healthcare system. Astonishingly, less attention is paid on other aspects of ageing such as planning, housing and factors contributing to ageing well. Rosenberg and Everitt (2001) state that after health and financial situation, aged people’s concern is their housing. Indeed, housing can not be separated from their health and income because all three are inter-related (Golant, 1992; Rosenberg and Everitt, 2001).

Ageing is a critical issue for the states’ housing systems as it affects the level of demand for housing and the unique nature of the demand. In addition, the suitability or unsuitability of housing as the population ages influences the demand for support services and care in the community. Improving with Age: Our Ageing Plan for South Australia recognizes that ‘different accommodation options are required to meet our changing needs over time’ (Government of South Australia, 2006). Housing alternative and maximisation of choice need to be made available to the aged people (Lawton, 1981; Maddox, 1995; Warnes and Law, 1985).

Baby boomer generation will enter older age with different aspirations and expectations (Beer et al., 2006; Commonwealth of Australia, 2002). They are likely to demand for greater services and various housing options. Beer (2006) argues that previous generations had relatively modest aspirations in retirement, where as baby boomers are expected to have higher aspirations, with respect to the quality of their housing, use of services, travel and recreation. The leading edge of the baby boom generation will pass the age 65 in year 2011 (Beer, Faulkner and Gabriel, 2006). The housing preferences of this group will differ from earlier generations, as will their capacity to achieve them. There is also another argument that this generation will have to sell their family homes to fund living after retirement (McKinnon, 2005). Baby boomers have been strongly associated with the ‘Sea
Change’ and ‘Tree Change’ phenomena (Burnley and Murphy, 2004; Salt, 1994). Baby boomers’ aspirations will have direct and/or indirect impact on housing and urban development policies.

A key concern of aged people will be the quality of life in old age. Housing is important not only because aged people need a secure and comfortable home but also because housing provides social surroundings for aged people, to interact with others in the community and live quality life. However, planners from both public and private sectors, with the responsibility to provide housing and services for aged population, are divided into two schools of thoughts. One believes in full integration of the ageing communities for their healthy living whereas the other in a built environment which specifically caters to their particular needs (Rosenberg and Everitt, 2001).

Literature on ageing suggest that large number of older people prefer ‘ageing in place’ as their first choice (Brook Lyndhurst Ltd., 2004; Chapman and Howe, 2001; Government of New South Wales, 2004; Pastalan, 1990). This means the neighbourhoods they moved in during their early family years continue to be their home for the rest of their lives. In other words, ageing in place refers to growing old in the home, community and environment that one is familiar with. This implies that neighborhoods need to be aged friendly. It is also observed that only after reaching 80 years of age people prefer to move out as then they begin to depend on others.

The aim of this paper is to examine the consequences of ageing on urban development and housing, in South Australia. First part of the paper provides an overview of the ageing trends in South Australia and the rising demand for housing choices suitable for the aged population. The second part will dwell on the aspirations of older Australians, for their living needs and housing options and consider whether current planning policies in place support these needs. Finally, the paper will discuss the implications of the changing needs of older population and policies necessary to meet these needs.

**Demographic and housing trends**
South Australia has the highest proportion of population (26%) aged 65 and older compared to the national proportion of 23% (Planning SA, 2007). Figure 1 shows the projected age structure of South Australia.

![Figure 1: Age Sex Composition of Projected Population, South Australia 2006, 2021 and 2036](Source: Planning SA 2007)

The shape of the projected age-sex pyramid of South Australia in year 2036 resembles coffin shape and to see these changes one feels that many changes would be required in the social, economic, urban development and environmental policies in future, to make aged friendly cities.

Whatever projection we consider, it is very clear from figure 2 that there will be an increased need for more adaptable houses, with local support services, to accommodate aged population. From 2006 to 2031, the number of the South Australians aged 65-84 will rise from 206,000 to 374,000 and people
aged 85 and over will increase from 32,000 to 73,000 (refer table 1), which is more than double the current population. At least three out of four people in age 85 and over cohort will require a place with support. Figure 3, depicts the spatial distribution of the aged population in South Australia.

Table 1: Population projection, 2031, South Australia

<table>
<thead>
<tr>
<th>Age Cohort</th>
<th>Year 2006</th>
<th>Year 2031</th>
</tr>
</thead>
<tbody>
<tr>
<td>Aged 65-84</td>
<td>206,000</td>
<td>374,000</td>
</tr>
<tr>
<td>Aged 85+</td>
<td>32,000</td>
<td>73,000</td>
</tr>
</tbody>
</table>

Source: Planning SA

Figure 2: Projected Population in age group 65-84 and Aged 85 and over, South Australia 2001-2031
Source: Planning SA 2007

Figure 3: Population aged 65-79 and 80+ years as a percentage to total population (2001 SLAs)
Source: Planning SA

The general pattern of high percentage of population aged 65-79, are in the ‘middle suburban’ ring Statistical Local Areas (abbreviated hereafter as SLA) that enclose the Adelaide CBD, as well as a high percentage in the Victor Harbor and surrounds, Gawler and Barossa (Figure 3). This implies that 65-79 age cohorts are still a very independent and mobile age cohorts.

SLAs with high percentage of the population aged 80+ are those that are centrally located, as well as Victor Harbor and Barossa. This trend demonstrates that the 80+ age cohort needs to be easily able to access aged care services on account of reduced mobility and a higher incidence of disability and
health problems. They are therefore either unwillingly forced to move to some form of institutional care or tend to be located in areas where required services are easily accessible. This is reflected in high concentration of aged care services around the city centre and central locations.

It is observed that high proportion of 65-84 age cohorts live at the same residence as they did five years ago (refer figure 4). Majority of the people are living in their family home, may be because they do not prefer to move or unable to move due to a number of constraints. Therefore, it is imperative that if there were more suitable and affordable housing options available in the same neighbourhood, which is affordable and suitable for aged people, then the migration level might increase. Compared to the 65-84 age cohorts mobility levels of people aged 85+ is generally higher. This is likely to be a reflection of 'enforced' migration of this age group due to disability and deteriorating health conditions.

Figure 4: Mobility of aged persons
Source: Planning SA

Figure 5 shows that from 2001 to 2051, the number of lone person households (male and female) will increase where as other types of households will experience a slight change or will remain stagnant. This is because of the rising incidence of divorce and separation (Legge, 2005) which leads to increasing number of households falling out of home ownership (AHURI, 1998). Increase in lone female households suggests that more female-headed household will enter retirement. This group will have different desires than men or couples; they might like to live in co-living arrangement (Faulkner and Beer, 2006).
In general, approximately 90% people aged 65+ live in private dwellings and the remaining 10% in non-private dwellings. People who live in non-private dwellings are mainly the 85+ age cohorts. As depicted in figure 6, about 73% of population in 65-84 age cohorts live in separate houses whereas only 48% of the 85+ live in separate houses. This demonstrates that high proportion (95%) of 65-84 age cohorts live in some form of private dwelling and very small percentage in other types of dwelling. About 45% of 85+ age cohorts live in private dwellings. Due to increase in aged population, there will be a need for more appropriate housing for aged population in private and non private sector.

Even though table 2 depicts a large increase in construction activity in the retirement village and independent living, it accounts for a small percentage of the demand for such housing. Retirement villages in Australia only cater to mere 3% of the required housing for aged persons.

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1 Non-private dwelling consists of institutions that provide low to high-level care to the elderly such as hostels, nursing homes and supported residential facilities. These facilities are commonly known as Residential Aged Care Facilities (RACF).
Table 2: Proposed increase in aged care Facilities by number of beds/places

<table>
<thead>
<tr>
<th>Facility Type</th>
<th>2003/04 Current</th>
<th>2004/05 New/Proposed</th>
<th>Increase</th>
</tr>
</thead>
<tbody>
<tr>
<td>Residential aged care facilities</td>
<td>11765</td>
<td>689</td>
<td>5.9%</td>
</tr>
<tr>
<td>Retirement Village/Independent Living Units</td>
<td>11080</td>
<td>3291</td>
<td>29.7%</td>
</tr>
</tbody>
</table>

Source: Planning SA

Average age of people living in residential aged care facilities is 85+. It clearly demonstrates a very small increase but due to the projected increase in population aged 85+ by 2031 in Adelaide and Outer Adelaide region, there will be a need for a large number of residential aged care facilities consisting of nursing home and hostels.

**Expectations of aged people**

In April 2007 Planning SA commissioned a structured focus group to obtain the views of people (55 years and over) and stakeholders on current and future housing requirements of South Australians. AHURI Southern Research Centre conducted the focus groups in nine locations in South Australia namely Burnside, Glenelg, Inner Adelaide, Elizabeth, Marion, Findon, Clare, Murray Bridge and Goolwa (Faulkner et al., 2007). These focus groups consisted of people in 55-60, 61-65, 65-75 and 75+ age cohorts and from groups such as social housing tenants, low-income renters, self-funded retirees and ethnic groups. A separate focus group consisting of only members of the Urban Development Institute of Australia was conducted to obtain views of private sector/market perspectives on ageing population and their housing needs.

The research found that housing need varies within and between some cohorts and groups. These differences were related to where they live, socio-economic conditions, age, and assets. Majority of responses were astonishingly similar on how they viewed ageing and what they expected from their housing. The majority were happy with their house and the neighbourhood they live and want to stay in-situ as long as possible.

Ageing in place was obviously the preferred option for aged people. Most people in the focus group were practical and indicated that they would consider moving to accommodation that is more suitable when their health declines or they become disabled. However, almost all expressed a common apprehension that when they will need to move out of their home there may not be many affordable and appropriate accommodations with easy access to required services. Another concern raised was that if due to reasons such as health, property becoming unaffordable or want to downsizetheir property for maintenance and upkeep reasons, their preference will be for housing that is well serviced, especially near public transport and well integrated with the community instead of being located on the fringes of cities/towns. Major concern of most of the participants was on the accessibility to public transport and other transport options. For the 55+ group, transport seems to be the key in overcoming isolation and it is seen as crucial when they will no longer be able to drive to the services and facilities they need.

Respondents favoured the development of small ‘clusters’ of housing (5-10 dwellings) for older people. They preferred locations scattered throughout the city/towns and located closer to existing services and infrastructure (transport, shopping centres, medical and health facilities) rather than moving into large-scale retirement villages or residential parks. It also emerged from the focus group that their ability to delay the move to more intensive care accommodation was (and is) being affected by the availability of minor home maintenance assistance for day-to-day needs. People in 75+ age cohort stressed the need for better and more ongoing aftercare options to support people to ‘age in place’.

It was observed that social housing tenants and private rental tenants have limited financial resources; hence have limited options to move into other housing tenures as they age. The three focus groups that targeted these cohorts showed that they are negatively affected by the antisocial groups and drugs related behaviour of the surrounding social tenants. Despite this, they were mostly happy with where they are living and the services available to them (except for transport services in Murray Bridge). Social housing tenants were generally grateful to the government for their tenure. The private rental tenants however, face major housing affordability issues.

The research clearly brought out that even though older people do not want to be socially isolated or segregated from the mainstream community, they prefer to be buffered to some degree from noise, crime, general antisocial behaviour and other disruptions right on their doorstep and prefer housing in locations well linked to the services they require (including medical and health services, social
activities/groups and accessible public transport options). Older people expect that governments at various levels (federal, state and local) should provide more services to them as they age, which will allow them to ‘age in place’ and provide easily accessible information on such services for aged people.

Participants form development industry shared concerns about the ability of the housing industry to provide affordable housing for older people in future. They predict that the industry will experience significant consolidation in the future. They also mentioned that the retirement housing sector is now designing and building larger dwellings than in the past; attractive and suitable designs have become a selling point. Design features now include the application of universal design principles. Industry participants expressed that high-rise housing is becoming a popular option for older South Australians, but the current planning regulations make it difficult to implement such projects.

Not surprisingly, the findings of the focus groups reinforce trends observed interstate and overseas. The findings have significant implications not only on the design of housing for aged people but also on the need for a re-think of the design of Adelaide’s suburbia.

**Current housing options**

This section provides an overview of the housing options available to aged population. There are many international housing models for ageing population. They can be categorised into three main groups: (1) conventional housing (2) independent living, and (3) assisted living.

**Conventional housing**

Conventional housing is the most recognised model advocated in housing literature and it reflects the desire of people to remain in the community rather than enter residential care. Conventional housing is, and will remain the most important form of housing for older people in Australia.

**Independent living**

Independent living includes retirement village, senior apartment and co-housing. Retirement villages are the most recognised form of alternative housing for older people in Australia. However, in many parts of the world, it is an option chosen by a very limited number of older people. Around 3% of older Australians live in self-care retirement villages compared to around 7% in United States. Definition of retirement village varies from state to state (Eardley and Birch, 1998; Stimson et al., 1997). Retirement village industry is at present generally geared towards the higher socio economic groups.

Co-housing is one of the successful models in Europe, in particular Netherlands, Denmark, and Germany. Co-housing schemes vary in size and are characterised by shared communal areas and self-sufficient private accommodation for individual residents. Some authors argue that this may be one of the choices for the baby boomer generation, especially for the women (Brenton, 2001).

‘Lifestyle Villages’ is very common in Western Australia. Developed by the National Lifestyle Village (NLV), it is similar to caravan park and provides the security of a retirement village. Generally people not eligible for retirement villages opt for lifestyle villages.

The home share program originated in 1953 in the US now operates in UK, Canada, Spain, the Czech Republic, Germany, Austria and Australia. In Australia, it first began in mid 1990s and there are now active programs in Victoria, New South Wales and Queensland. Home share programs are operated by not-for-profit agencies.

**Assisted Living**

Assisted living is an excellent choice for people who choose not to live on their own but do not necessarily require 24-hour care. Assisted living bridges the gap between independent living and nursing homes. Assisted living choice is a combination of housing, personalised support services and health care designed to meet the individual needs. Assisted living facilities assist with Activities of Daily Livings (ADLs) such as eating, bathing, dressing, laundry, housekeeping, and assistance with medications. It is not an alternative to a nursing home, but an intermediate level of long-term care appropriate for many aged persons. The term used for assisted living facilities differs across the world. Other common terms are Residential care, Supported care, Adult living facilities, Retirement residences etc. Assisted Living Facilities differ from nursing homes. Nursing homes and hostels are designed to care for very frail people with numerous health care requirements and not able to care for themselves.

**Discussion and Conclusions**

The study has documented the current and projected trends in the age structure of the population, preferred dwelling types and mobility patterns of elderly and obtained views of aged people and stakeholders on current and future housing requirements of South Australians aged 55 years and
over. The study found that high percentage of aged people live in ‘family’ homes and only a small percentage reside in age care facilities. It is difficult to assess whether more people would choose to change their living conditions, if more housing options were made available to them, given that occupancy rates of aged care facilities at present is nearly 100%. Even if the percentage of aged people living in aged care facilities remain at current levels, with the growing proportion of aged population, it is clear that in the future there will be a high demand for more aged care facilities.

Generally, aged people are reluctant to move from their local neighbourhood, but are often forced to move when they can no longer care for themselves because of disability or declining health or due to affordability reasons. This is more common in the 80+ age cohort. High assisted living such as nursing home and hostel category facilities will be needed in the future because of a large increase in population aged 85+ years. The best location for these types of facilities will be locations where there will be high proportion of aged population in the future. This will enable aged people to live in their local neighbourhood. Hence, this will support ‘ageing in place’, which is seen as a very important life-style need of aged people (Commonwealth of Australia, 2002).

In Australia, 73% of people aged between 65-80 years of age either own their home outright or are purchasing them. In theory, homeowners are in best position to modify or adapt their home to make them more suitable for their changing needs; however, it is not necessary if their income is less. Even though home ownership levels of aged Australians are high by international standards, it may change in the coming years. Over the last thirty years, there has been a decline in owner occupancy (Jones et al., 2004). It is important to obtain the views of aged population of their choices of housing and services, to make cities and neighbourhoods aged friendly (Michael et al., 2006). Michael et al advocates that neighbourhood design influence active ageing. Research in transport planning, urban planning and public health areas indicates that people are more active in accessible neighbourhoods with mixed land uses, high street connectivity and high population density (Handy et al., 2002; Saelens et al., 2003).

From focus groups, it also emerged that familiarity with neighbours and neighbourhoods is a key driver of housing choice in later life, and it is an important factor for older people wanting to live in their family house. They feel it will be harder for them to make friends in any new place. Therefore, ‘staying local’ is as important as living in their family home, but the availability and affordability of retirement housing in mature suburbs may restrict their choice. The study also revealed that a small section of elderly within the aged population consider living in the ‘family’ home is not appropriate and affordable, and require housing more suitable to their needs. This group sees dwellings such as apartments, small style units with small backyards or no backyards to care for as an ideal option. For many, where to move was as difficult a decision as when to move. People considering a move to a small house or unit are afraid that the value of their existing home would not be sufficient to cover the cost of new smaller accommodation. For older people who have sufficient resources the main concerns were location, public transport facilities, services, and familiarity with the area, social networks and cost of living.

‘Ageing in situ’ or ageing in place is a highly preferred option for the aged people. However, this is restricted because of provision of services that varies with age (Treas, 1995). In many countries, there are provisions for social and medical services to help aged population to age-in-place and to improve their quality of life (Rowles, 1993). If they have to move, their preference is to be scattered throughout suburbs and towns, closer to existing services and infrastructure (transport, shopping centres, medical and health facilities) rather than moving into large-scale retirement villages or residential parks. It has also emerged from the focus group that their ability to delay moving into more intensive care accommodation was (and is) being affected by the availability of minor home maintenance assistance for day-to-day needs. Focus groups also revealed that among various income groups, only a small section of people can afford and affordability remains a problem for a majority of people. Therefore, it is clear from the study that there is a strong need for wide range of options between independent living on one hand and institutional care on the other.

The study also reveals the need to assess the availability of suitable land for the development of aged care facilities and other types of housing including large demand for aged care facilities in the future.

Some researchers advocate that people aged 80+ will exert a slightly higher demand for self care units and the demand for hostel and nursing home accommodation will increase particularly for the population aged 80 and above. Where as, some of the research show that older Australians are strongly in favour of living in their own home for as long as possible, with only 7% of Australians aged more than 70 years living in residential care. However, the design of their home may make it impossible to continue to live at home. Some researchers suggest that maintenance costs and property rates can be a challenge, particularly, for people living on the basic age pension who are likely to be living in their own homes.
To support the government’s objectives of ageing in place, increase in aged care developments should be located in the areas projected to have the highest increases in aged population in the future. This means areas to the north and south of the inner Adelaide region, and to a lesser extent the SLAs in outer Adelaide, Victor Harbor, Barossa and its surroundings with fewer aged care facilities.

It is very clear that in order to look after the well being of aged South Australians, the government requires to facilitate various housing options for different economic groups. The study reflects the need for policies and programs to facilitate independent living and in situ arrangement. To encourage these types of housing, institutions at various levels need to support the aged population by providing required infrastructure and services. Along with independent living, there will be demand for assisted living and the government needs to identify sites for specific types of housing. Based on population growth trends it is predicted that in 2031, population aged 85 and above will be more than double requiring more assisted housing than unassisted housing. At the same time, design of these housing should be flexible to meet the needs and tastes of the aged population. There is a strong need for the adoption of universal design principles to take care of both old and young. In many European countries and the United States, the concept of universal design for products, public building and housing has been adopted and is becoming more readily accepted (Christophersen, 2002; Hanson, 2001; OECD, 2003).

Detailed household survey will be required to estimate the housing requirements of ageing population in terms of housing type, locations, size of the dwellings and to analyse market trends. It is not always true that small households automatically want smaller houses.

Planning and development of wide range of facilities can have significant impact on the quality of life of older people and can influence the way they enjoy and participate in their local community. However, many barriers exist in the current planning and development processes towards the provision of age-friendly infrastructure, timely completion and various housing requirements. Issues of ageing in South Australia will become more predominant by 2021. It needs to be addressed sooner than later.

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