

COHOUSING FOR ELDERLY

A study into the organization of cohousing for elderly

Waling Bergsma

Master thesis

Waling Bergsma
Student number 9057388

TU Delft
Faculty of Architecture
Health-Lab
Management in the Built
Environment

1st mentor:
Dr. C.J. van Oel

2nd mentor:
Ir. J.S.J. Koolwijk

Zorginstellingen Pieter van Foreest:
Ir. R.J.M. Spinnewijn

Delegate board of examiners:
Dr. H.M.H van der Heijden

14 april 2020

Preface

This report is made for my graduation at the Faculty of Architecture of the TU Delft. This study was done within the master track Management in the Built Environment. For my graduation I participated in the Cross Domain Health-Lab in which students from different disciplines work together on the subject of Health. For the realization of this report I would like to thank my first mentor Clarine van Oel for her dedication, motivation and valuable insights. In addition thanks to my second mentor Jelle Koolwijk for his motivation and insights. I would like to thank Raymond Spinnewijn from Pieter van Foreest for his contribution from practice. I also would like to thank Luc Willekens, Birgit Jurgenhake and the student of the Cross Domain Health-Lab for their support. Last but not least I would like to thank my family and friends for their support so that I could finish my graduation.

Waling Bergsma

Contents

Preface	
Contents	1
Abstract	4
1 Introduction	6
1.1 Cohousing	9
1.2 Reading guide	10
2 Background	11
2.1 Residential normalcy	11
2.2 Main determinants of continuity in cohousing for elderly	13
2.3 Explorative study	15
3 Research methods	17
3.1 Participants	17
3.1.1 Survey	17
3.1.2 Case studies	17
3.2 Materials	18
3.2.1 Survey	18
3.2.2 Interview protocol	18
3.3 Procedure.....	19
3.3.1 Survey	19
3.3.2 Interviewing	19
4 Results of the survey.....	20
4.1 Descriptives.....	20
4.2 Members with care demands.....	21
4.3 Final model: distinguishing between cohousing.....	21
5 Cases description	23
5.1 Case A.....	23
5.2 Case B.....	25
5.3 Case C.....	26
5.4 Case D	27
5.5 Case E.....	28
5.6 Case F	29
6 Findings cases	31
6.1 Motives for living in cohousing for elderly.	31
6.1.1 Maintaining independence	31
6.1.2 Social cohesion	31
6.1.3 A clean living environment.....	33
6.1.4 Feelings of safety	33

6.2	What defines cohousing for elderly cohousing.....	34
6.2.1	The common room	34
6.2.2	Activities.....	36
6.3	Governance.....	39
6.3.1	Regulations	39
6.3.2	Who decides the next resident (waiting list)	41
6.3.3	Cohesion	43
6.3.4	Urbanity and the size of the waiting list.....	44
6.3.5	Continuity	45
6.4	The relationship with the landlord.	46
6.4.1	Agreements about the placing of tenants.	46
6.4.2	Involved housing associations	48
6.4.3	Vacancy length between residents	49
6.4.4	Rent harmonisation	49
6.4.5	Wealth and social housing.....	50
6.4.6	Housing shortage	51
6.5	Care.....	52
6.5.1	Assistance	52
6.5.2	Informal care	53
6.5.3	No combined home health care.....	56
6.6	Age	57
6.6.1	Whether or not a mix of ages.....	57
7	Summary and discussion	62
7.1	What are important motives for elderly people to participate in a cohousing groups for elderly? 62	
7.2	What determinants are important in ensuring continuity of cohousing groups for elderly?	63
7.2.1	Shared activities in shared spaces.....	63
7.2.2	Care demands.....	63
7.2.3	Waiting list policy.....	64
7.2.4	Sustainable relations with the landlord	64
7.3	Recommendations.....	65
7.3.1	General recommendations.....	65
7.3.2	Challenging the vision of PvF.....	65
8	Reflection on the graduation project	68
8.1	Reflection on the graduation process	68
8.2	Reflection on the subject.....	68
9	References	69
10	Annexes.....	71
10.1	Annex 1 Questionnaire	71

10.2	Annex 2 Survey results.....	81
10.3	Annex 3 Interview protocol	104
10.4	Annex 4 Interview transcript A.....	105
10.5	Annex 5 Interview transcript B.....	106
10.6	Annex 6 Interview transcript C.....	107
10.7	Annex 7 Interview transcript D.....	108
10.8	Annex 8 Interview transcript E	109
10.9	Annex 9 Interview transcript F	110

Abstract

The ability to sustain long-term care systems lies at the heart of the policy debate in Western European countries. The growing number of older people in the population and the restricted economic development reinforce the need to devise a resilient care system. For decades, the Dutch government has been responsible for long-term care provision. Providing help for people with health impairments to enable them to continue participating in society continues to be high on the political agenda. However, as this gives rise to relatively high publicly funded costs, particularly for residential long-term care, in 2015 a profound change in the financing structure of the health care system was initiated. Like other European countries with a high proportion of publicly funded care, there is a steering towards a larger share of informal care. Purpose of the reforms was also to enable elderly to live at home as long as possible. Necessary care will come from the local authority and care insurer (Verbeek-Oudijk, Woittiez, Eggink, & Putman, 2014).

One of the consequences of the 2015 reforms was that care providers closed care homes. In Delft Pieter van Foreest is the main institutional care providers with partly vacant real estate. Consistent with the advice of the committee 'Toekomst zorg thuiswonende ouderen', and following several other student reports in the Health@BK graduation lab 2018, this report addresses the advice to explore whether new ways of independent living – in between the time-honored own home and the nursing home – will be helpful to elderly to independently age in place and provide a solution to existing real estate vacancies at institutional care providers. It was argued that the vacancy might be used to house independent living elderly of lower and middle income groups seeking a break out from loneliness, and willing to live their life in the vicinity of other elderly without abolishing the independence, thus in a cohousing group for elderly. The current study aims to gain insight into the conditions that influence the continuity of cohousing groups for elderly.

It is well known that in general elderly are reluctant to relocate (Bakker, Hu, & Wittkämper, 2018). Furthermore, if elderly are inclined to downsize, they will face further difficulties. Due to differences in past and current housing policies there is a shortage of nearby situated small scale suitable housing, or the available small scale housing is considered highly unattractive, while private retirement housing applies service charges challenging affordability. Given elderly's reluctance to relocate however, the first step was to gain further insights in when elderly will consider relocation. Following the Model of Residential Normalcy of Golant (Golant, 2011) older people will apply accommodative (mind) strategies and/or assimilative (action strategies) to remain in their comfort and mastery zones. They will only voluntarily move when all of the following conditions are met:

- 1) other adaptive efforts have not been successful in maintaining such;
- 2) moving is considered a feasible option;
- 3) the individual believes that moving will improve his residential experiences;
- 4) the individual does not perceive the actual move as too strenuous.

According to Granbom (Granbom et al., 2014) this model should be limited to voluntary moves within the ordinary housing stock. Since relocation then needs to improve one's residential experiences, this raises the question what motives elderly may have to relocate into a cohousing group. So far only Nuesink (Nuesink, 2016) investigated cohousing for elderly, and a main lesson here is that important determinants of continuity in cohousing for elderly cannot be identified through quantitative study only, as particularly Trust and Dependency, Rules and Conditions and Involvement are not properly (validly) conceptualized in a survey. Also, as cohousing is put forward

as a means to reduce the costs for care and combat loneliness, that means that motives of elderly people to move into a cohousing group need to be addressed as well. Therefore, to be able to provide recommendations to Pieter van Foreest, this study was design as a mixed method study. Through a general survey factual information on group size and average age as important determinants for the continuity was assessed. Then the survey was used to identify distinct cohousing groups to gain a deeper understanding of the motives new participants may have and to gain in-depth understanding of how ways of governance (Rules and Conditions), and other important lessons can be learned from existing cohousing groups for elderly.

The first lesson from this study is to use a waiting list and require all aspiring members of cohousing for elderly to actively participate with shared activities to distinguish between aspiring members that have motives that are incongruent with the social dimension of cohousing. This also allows the current members to get acquainted with future members. The person who fits best with the group members should be chosen. Secondly the formal admission procedure should not (only) be depending on length of time on the waiting list. This gives the group the possibility (again) to choose the person they think is best for their group. Thirdly, a large mixture in age will ensure that new (young) elderly are willing to get involved, particularly if they are willing to take part in governance. Groups with ages from one generation age together while a mix of ages ensures continuity. The forth recommendation is to include membership fees in the rental agreement to avoid the financial burden in case members do not longer take part in the cohousing group. Especially the rent for the common room should be part of the rent. Fifth, rent harmonization need to be avoided as this negatively impacts the social cohesion. Member from the same cohousing group should have a rent that is similar to avoid discussions. Last, restrict access to the waiting list to those without compelling care demands? This is a question. In most of the researched cohousing group informal care is not given by members. Informal care is mainly given by family or professionals. Couples are an exception as they do give informal care to each other in cohousing.

1 Introduction

The sharp increase in the living age in Europe causes myriads of health-related problems in older people which could be managed and minimized using recent technological advances and increased knowledge. An important challenge to society is the extension of healthy, working lives through reduction, prevention and management of physical disabilities and mental incapacity. Many problems such as depression, anxiety, insomnia, dementia, or personality disorders are frequently encountered in older people and often remain unattended. Reports from the World Health Organization suggest that approximately 15% of adults above 60 years of age suffer from some form of mental disorder with an expected threefold increase by 2100 (WHO, 2017).

Age-related changes in one's life become noticeable above the age of 55, but in the 'first stage' of senior life, between 55-65 years, one often continues to work. In the absence of employment moves to smaller, less expensive accommodation are not uncommon. During the 'second stage' of senior life, between 65-75 years, the majority of people retire from employment, but many, although not all, continue to live a healthy life by remaining physically active and mentally stimulated through interactions within the family and through social networks in charity / community work. A large percentage of second stage people, if supported, could continue to work, even if only on a part-time basis. The support needed to continue some form of employment is rarely available and the usual outcome above 75 years is an increase in health problems, depression, insomnia and a reduction in mental capacity. The behavior of the second-stage senior often changes through increased isolation, usually within one's home.

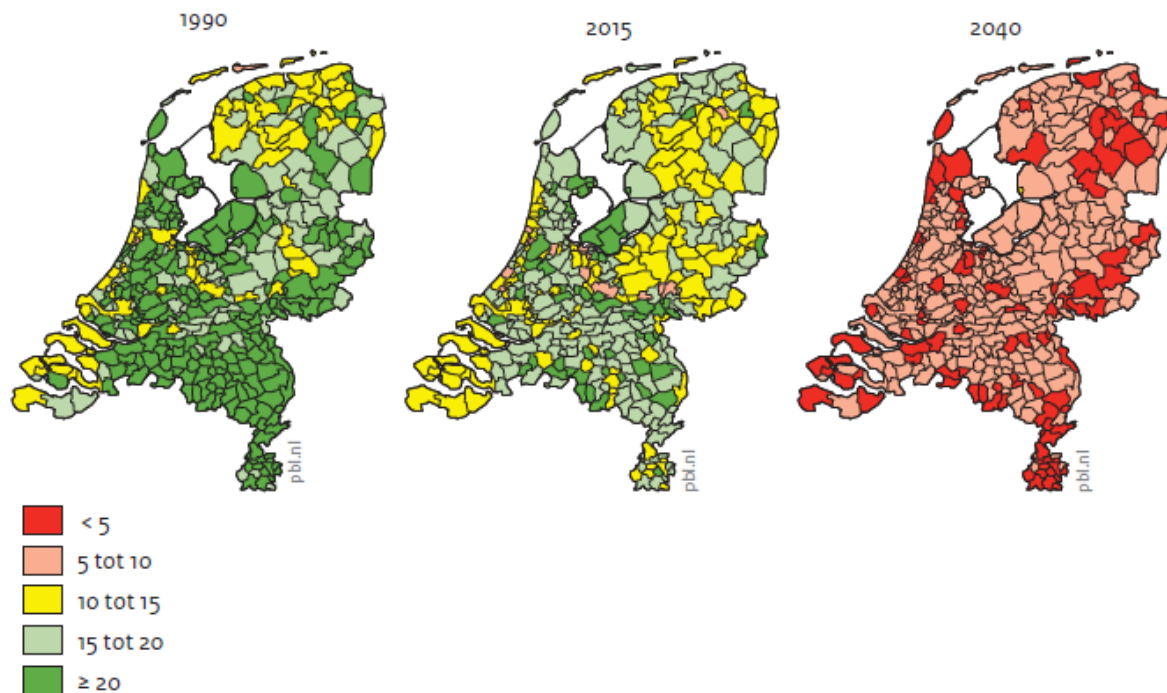
The ability to sustain long-term care systems lies at the heart of the policy debate in Western European countries. The growing number of older people in the population and the restricted economic development reinforce the need to devise a resilient care system. For decades, the Dutch government has been responsible for long-term care provision. Providing help for people with health impairments to enable them to continue participating in society continues to be high on the political agenda. However, as this gives rise to relatively high publicly funded costs, particularly for residential long-term care, in 2015 a profound change in the financing structure of the health care system was initiated. Like other European countries with a high proportion of publicly funded care, there is a steering towards a larger share of informal care (Verbeek-Oudijk et al., 2014).

Relative to other European countries, Dutch over 50s living independently have less often health impairments, are relatively affluent and have a partner on whom they can call if they need help. Despite this, fewer Dutch over-50s living independently receive unpaid care from other household members than in adjacent European countries, instead they do make more use of paid network care (Tinker, Ginn, & Ribe, 2013). As of January 1, 2015 spending cuts in Dutch long-term care applied that were partly based on the assumption that a reduction in paid care will mean that more support is provided from the recipient's network. Care insurers are now responsible for the delivery of personal and nursing care. The purpose of the reforms was to enable people to continue living at home for as long as possible, where necessary with support from the local authority and/or their care insurer (Verbeek-Oudijk et al., 2014).

Back in 2015, there was uncertainty regarding the degree to which unpaid care can meet the care need of elderly (Tinker et al., 2013). Recently, this concerns grows as for instance the Dutch Social and Cultural Planning Office further investigated the influence of the enduring aging in the Netherlands (Kooiker, De Jong, Verbeek-Oudijk, & De Boer, 2019). Figure 1 visualizes that by 2040

both lower dense areas and the highly dense areas in the Netherlands will have oldest to old support ratios, be it that the regions with a shrinking population (i.e. Eastern Groningen, region of Delfzijl, Southeast Drenthe, the Achterhoek, Zeeuws-Vlaanderen en the province Limburg) and more affected than other regions.

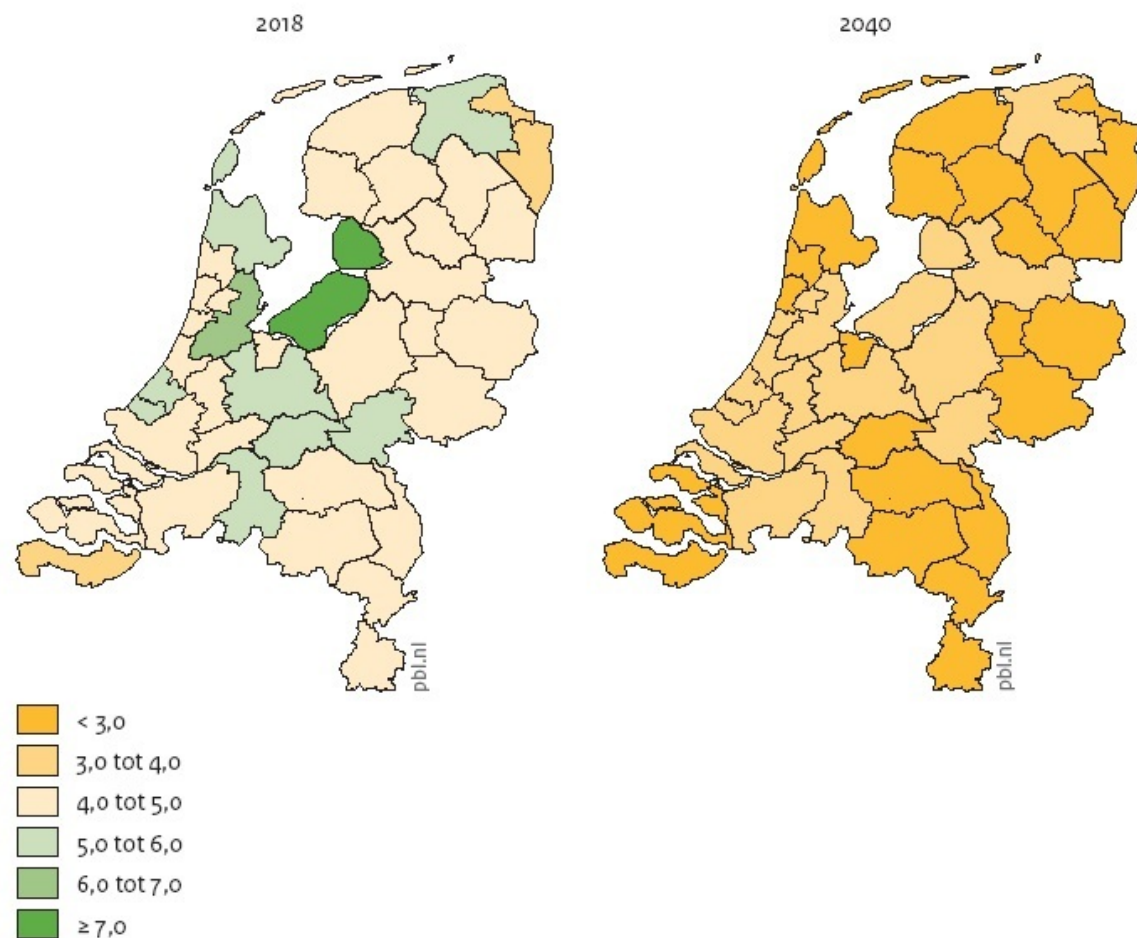
Oldest Old Support Ratio (verhouding tussen 50 -74-jarigen en 85-plussers), 1990, 2015 en 2040



Bron: De Jong en Kooiker (2018)

Figure 1 Oldest Support Ratio (ratio between number of people aged 50-74 years and those of 85 years and older) in 1990, 2015 and 2040 (Kooiker et al., 2019).

Indeed, as shown in Figure 2, that the number of informal caregivers of independently living elderly that can spend at least 4 hours a week on informal care will decrease from nearly 5 per elderly in 2018 to 3 in 2040. This figure describes the national average number of informal caregivers per elderly aged 75 years and older. However, Figure 2 shows that by 2040 in less urban dense areas the number of informal caregivers will be even fall below 3. Since these regions are the kind of regions that have a higher share of elderly persons, because younger people leave the region for study and no longer return because of a lack of suitable jobs, the living conditions will become compelling in near future. Even though the SCP takes into account that up to the age of 85 years, elderly will stay more healthy because of medical developments and that increasingly informal caregivers will be aged 75 years and older, according to the director of the SCP, the livability in particularly these regions is at stake because of the high number of vacancies in formal care in these regions. Whereas this might be particularly true for these shrinkage areas, the advice by the committee 'Toekomst zorg thuiswonende ouderen' or after its chair the committee 'Wouter Bos' highlights that by the end of June 2019 there were already 38.000 vacant job positions in the health care domain and as this also applies to other public domains, e.g. teachers and policemen, their advice was to reform the way elderly people age in place (Commissie Toekomst zorg thuiswonende ouderen, 2020).



Bron: SCP/CBS (IZG '14-'16; OZG '14-16) en PBL/CBS (regionale bevolkings- en huishoudensprognose 2019)

Figure 2 Overview of number of informal caregivers available per person aged 75 years and older in 2018 and the expected rates for 2040 (Sociaal en Cultureel Planbureau, 2019).

The consequence of the 2015 reforms was that residential care providers closed care homes where elderly lived without major care demands. Elderly are only entitled to receive nursing home care if their care indication is so high that they almost require care 24 hours a day. In the region of Delft, Pieter van Foreest is a main institutional careprovider with vacant health care real estate. Consistent with the advice of the committee 'Toekomst zorg thuiswonende ouderen', and following up on several other student reports in the Health@BK graduation lab 2018, providing strategic (Tjoa, 2018) and transformative (Yasir Sorgucu) advice to Pieter van Foreest, this report addresses the advice of the committee to explore whether new ways of independent living – in between the time-honored own home and the nursing home – will be helpful to elderly to independently age in place and provide a solution to existing real estate vacancies at institutional care providers.

1.1 Cohousing

Figure 3 shows part of the residential care apartments of the Bieslandhof in Delft. These are quite recent developments from 2005 and house units for psychogeriatric care. Each layer consists of two times two groups of 8 individual rooms and a common room per group with shared facilities.



Figure 3 The Bieslandhof - expertise location in Delft of Pieter van Foreest.

Shown on picture 4 are obsolete parts that were constructed in the seventies of the former century. This part has a more spacious layout and it was agreed by the real estate manager that demolishment would never result in the same spacious quality under the current real estate regime. It was argued that it might be used to house independent living elderly of lower and middle income groups seeking a break out from loneliness, and willing to live their life in the vicinity of other elderly without abolishing the independence, thus in a cohousing group for elderly.



Figure 4 Vacancy at The Bieslandhof - expertise location in Delft of Pieter van Foreest.

The cohousing model is a residential typology consisting of individual residential dwellings with collectively owned facilities, with communities seeking to develop and maintain strong social bonds between residents through shared management (Hammond, 2018). Living in a cohousing community means that the social context and the organization of the physical environment are significantly different than living in a regular neighborhood (Bouma & Voorbij, 2008).

Cohousing is not a recent development, as in the Netherlands the first cohousing groups date back to the late sixties of the former century (Kesler, 1991). The cohousing groups that were initiated in the last three decades of the former century are fundamentally different from the kind of cohousing that is suggested by the committee. These earlier initiatives all share an ideological common ground, i.e. these were rooted in the utopic, feminist and communitarian ideologies (Kesler, 1988) (Nuesink, 2016). The kind of cohousing groups that the committee 'Toekomst zorg thuiswonende ouderen' is after, are not rooted in ideology but are more pragmatic (Nuesink, 2016).

As Kesler already identified back in 1991, continuity is an issue in cohousing groups. The continuity of a cohousing group requires a balance between community living and individual life. A too strong emphasis might discourage (future) participants, whereas a too strong emphasis on individual life may attract (future) participants without a wish to interact with the group. Kesler found that this places a pressure on the continuity of the group. Though Kesler investigated an ideological type of cohousing, the atmosphere in a cohousing group will influence its success, as the continuity of such a group will depend on its attractiveness to new participants. The continuity of cohousing for elderly has not been investigated in great depth. Nuesink used a survey and found that involvement is a major indicator of cohousing continuity. However, this does not provide an insight as to how to organize a cohousing group in such a way that it supports continuity.

Therefore, for Pieter van Foreest in particular, and the importance further increased given the advice of the national committee 'Toekomst zorg thuiswonende ouderen', the current study aims to gain insight into the conditions that influence the continuity of cohousing groups for elderly.

1.2 Reading guide

To meet this aim, a mixed method study will be conducted. First a survey will be developed using the main concepts as described in chapter two. Chapter 3 will explain the methods used in this study. The main outcomes of the survey are summarized in chapter 4. Then in-depth interviewing will be used to develop a qualitative analysis of what cohousing groups phrase as the main lessons in ensuring their continuity as a cohousing group. Thereafter, the main findings will be summarized and discuss what conditions influence the continuity of cohousing groups for elderly, and finally recommendations will be made to Pieter van Foreest as of how to facilitate a successful cohousing group for elderly.

2 Background

With a growing population of older people in the Netherlands, a housing supply and demand mismatch has developed where many homes are now too large for this group and/or unsuitably adapted to their needs. Because of the steering towards prolonged independent living, local authorities have been given responsibility for supporting other citizens with a long-term care need, through the Social Support Act (Wmo) (Verbeek-Oudijk et al., 2014). This includes home adaptations to support independent living. Because of constraint budgets, independent living older people need to adjust to declining physical and cognitive capacities by downsizing. The report of the committee 'Toekomst zorg thuiswonende ouderen' marks an impending turning point in the national health care policy. The dictum is now changing from 'one has to age in place' (Tinker et al., 2013) into 'one has no right to age in place' (Commissie Toekomst zorg thuiswonende ouderen, 2020). Explicitly, the committee states that elderly have to relocate – which will be downsizing as most of them continued to live in the family house after their children moved out, and to use the money that will be freed to pay for the care themselves. Currently, elderly who are entitled to be taken into a nursing home, are not willing to do so because they will be charged for the residential component when staying in a nursing home. The larger their wealth the more they are charged, so they will opt for home care, which places a load on the care providers due to low efficiency and long travel times (Li Ling Tjoa, 2018).

However, it is well known that in general elderly are reluctant to relocate (Bakker et al., 2018). Furthermore, if elderly are inclined to downsize, they will face further difficulties. Due to differences in past and current housing policies there is a shortage of nearby situated small scale suitable housing, or the available small scale housing is considered highly unattractive, while private retirement housing applies service charges challenging affordability.

In this sense, the idea of the current study to find new solutions for the vacancy at Pieter van Foreest will provide timely insights by investigating the conditions that need to be addressed in organizing such a cohousing group for elderly at Pieter van Foreest. Given elderly's reluctance to relocate, however, the first step will be to gain further insights in when elderly will consider relocation. This behavior has been linked to the concept of 'residential normalcy' (Golant, 2011).

2.1 Residential normalcy

Older people may be reluctant to downsize because of emotional bonds to their existing homes, and the distress involved in breaking these. They may also be concerned about the ability to develop emotional bonds with their new home. Following the Model of Residential Normalcy of Golant older people will apply accommodative (mind) strategies and/or assimilative (action strategies) to remain in their comfort and mastery zones (see also Figure 5). They will only voluntarily move when all of the following conditions are met:

- 5) other adaptive efforts have not been successful in maintaining such;
- 6) moving is considered a feasible option;
- 7) the individual believes that moving will improve his residential experiences;
- 8) the individual does not perceive the actual move as too strenuous.

According to Granbom (Granbom et al., 2014) this model should be limited to voluntary moves within the ordinary housing stock. Since relocation then needs to improve one's residential

experiences, this raises the question what motives elderly may have to relocate into a cohousing group.

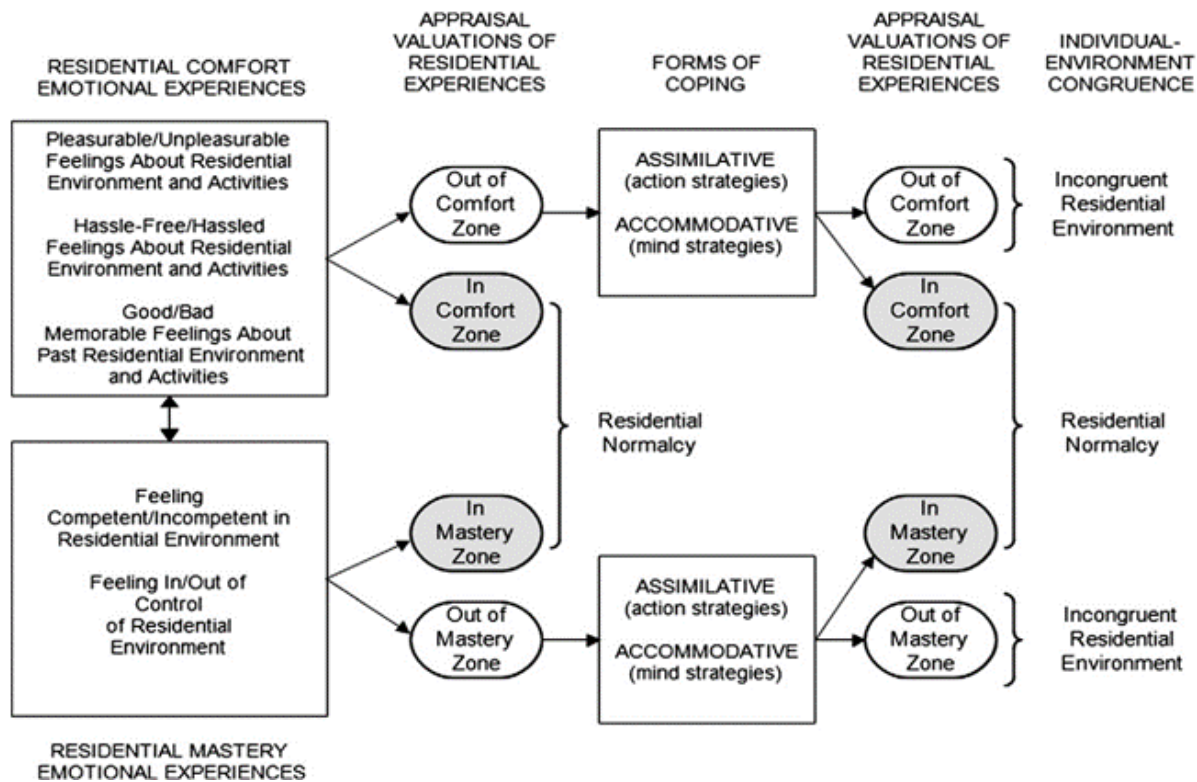


Figure 5 The model of residential normalcy as put forward by Golant (2011).

The model in 5 highlights that the residential environment as perceived by the elderly not only requires the physical environment to be hassle-free, and offering positive feelings and memories. It also includes the need for an environment that support activities, and as elderly report strong feelings of loneliness with increasing age this may not only involve the nearby presences of amenities such as shops and (public) transport, but also the nearness of their social network. In former times, the social network might be more easy to sustain with people living at greater distance, but with increasing age this becomes more difficult. Not only will their social network become smaller as some members pass away, but both the persons in their social network and they themselves may increasingly experience difficulties because of impaired mobility, cognitive decline, etc.

Therefore, if elderly experience loneliness, for instance after their partner passed away or their relationship broke up, or if they fear loneliness—for instance if their social network shrinks, elderly people may consider to opt for living in a cohousing group. One of the primary advantages of cohousing is that sharing space and activities facilitates social support (Hammond, 2018). Social support however, is but one of the aspects that elderly people will review before moving into a particular cohousing group. They will not only assess their current situation, but also evaluate aspects that concern the continuity of the cohousing group, alongside the evaluation of other coping strategies.

2.2 Main determinants of continuity in cohousing for elderly

As explained before, these cohousing initiatives that were developed in the last three decades of the former century all share an ideological common ground, i.e. these were rooted in the utopic, feminist and communitarian ideologies (Kesler, 1988; Nuesink, 2016). In this report the focus is however on a different kind of cohousing groups, i.e. not being rooted in ideology. Cohousing groups for elderly share a more pragmatic approach (Nuesink, 2016). Indeed, Nuesink is so far the only study investigating into the determinants of continuity of Dutch cohousing groups for elderly. All other studies either focused on cohousing groups with a shared ideology only (Kesler, 1988) or concerned cohousing groups for elderly in different countries as for instance the US (Glass, 2020). There are methodological concerns with using concepts from for instance the US and apply these in the Dutch situation, as not only the health care system is fundamentally differently financed and further organized, but also because the studies in the US draw upon a different sample of particularly rather wealthy cohousing communities for retired people. As Kesler already reported, a large share of Dutch cohousing groups concerns social housing. Furthermore, Pieter van Foreest particularly focus on the lower and middle income persons, as it is thought that wealthy elderly will buy themselves into private care homes.

Nuesink (2016) therefore is an important study and particularly because he investigated the continuity of cohousing groups for elderly. His study involved a qualitative study in which he used an expert panel to identify, using a Delphi approach. He then used a survey that was made available through and emailing to members of the Federatie Gemeenschappelijk Wonen and the Landelijke Vereniging van Gemeenschappelijk wonen van Ouderen, in addition to a banner on the websites woongroep.net and omslag.nl. About 60% of the visitors to the latter websites belong to the target population. This was done to increase the sample size. 254 persons answered at least two questions, so the sample is rather big. The disadvantage though might be that only 25,7% of the respondents indicate that the cohousing was intentionally for elderly persons and that the mean age of the respondents was 54 years (range 15-88 years).

The qualitative part identified factors that could not be investigated in a quantitative way, but were considered important determinants of continuity. The experts considered Involvement, Trust and Dependency, and Rules and Conditions as the three main determinants of continuity. The determinants of continuity that were identified in the qualitative part as difficult to conceptualize, were number 1-5; thereafter the four determinants that were identified as important through the quantitative study were number 6 to 10.

- 1) **Trust and dependency (expert opinion).** As he found, the level of dependency together with the size of the cohousing groups were important to whether or not they place a trust in the continuity of cohousing groups. In smaller cohousing groups, with more shared facilities, and less private space, trusting relationships may be a prerequisite for continuity. In larger cohousing groups with more private facilities, where participants are less familiar with each other, and tasks and responsibilities are formally arranged, trusting relationships were considered less important. However, if there is mistrust, the cohousing group will be abandoned.

Furthermore, it was expressed that there should be symmetry in dependency: as Nuesink (2016, page 56) quotes:

'Ik durf de stelling wel aan dat een woongroep (zoals we die in Nederland kennen) alleen

maar kan bestaan als er sprake is van een symmetrische afhankelijkheid' (respondent 3, 18-6-2016).

[“I dare to say that a cohousing group (as we have in the Netherlands) can only exist if there is symmetrical dependency” (respondent 3, 18-6-2016)”]

- 2) **Leadership or key person (expert opinion).** Typically one or more key persons are important for a cohousing group to come into being. Key persons are common and take on specific tasks. Many cohousing groups have a chosen board with well described responsibilities and duties.
- 3) **Shared goals or shared identity (expert opinion).** This compares to what Kesler (1991) identified as one of the important determinants in ideologically based cohousing groups. As Nuesink (2016) found, a shared identity is not only important in starting a new cohousing group, but it helps to select new participants. However, at the same time it can turn into a disadvantage, particularly if such identity softens or becomes more fluent over time to some, but not all involved.
- 4) **Critical moments over time (expert opinion).** There are 3 moments that are critical to the continuity of a cohousing group. Evidently, these are
 - *In the initiative phase*, as this requires the right knowledge and skills in addition to sufficient time to develop the initiative and get together a group with *realistic expectations*.
 - *At project delivery when the group comes into being* living together is not always positive and participants may feel disappointed and leave.
 - *During change of residents*, for instance when a residents moves out, passes away, and when new residents come in. This will repeatedly happen in cohousing groups, particularly cohousing for elderly people.
- 5) **Further lawful restrictions in assigning social housing (“passend toewijzen” ; expert opinion).** If the cohousing group rents their spaces from a housing association, the cohousing group has to face the consequence of a change in law that further restricts entrance to the cohousing group to those who meet income requirements that the housing association is required to use. This limits cohousing groups in their free choices which is thought to negatively influence continuity. Municipals can allow housing associations to make exemptions to this rule.
- 6) **Involvement (significant in survey, and highlighted by experts).** This concerns how much residents were involved in the cohousing group, the frequency of shared activities, and the extent of participation in these activities. This had a positive weight so the more the better.
- 7) **Group size (significant in survey):** this concerns the number of households and the total number of persons in the cohousing group. Larger groups outperformed smaller groups regarding continuity.
- 8) **Support (significant in survey):** this concerns the degree of support the housing association offers as well as the degree of support the group members experience within the group.

- 9) **Age (significant in survey):** the higher the age of the participants in a cohousing group the longer the continuity of cohousing group.

Figure 6 gives an overview of all 21 factors in Nuesink's study with the red spikes highlighting the determinants that he tentatively considered as relevant based on his qualitative and quantitative study.

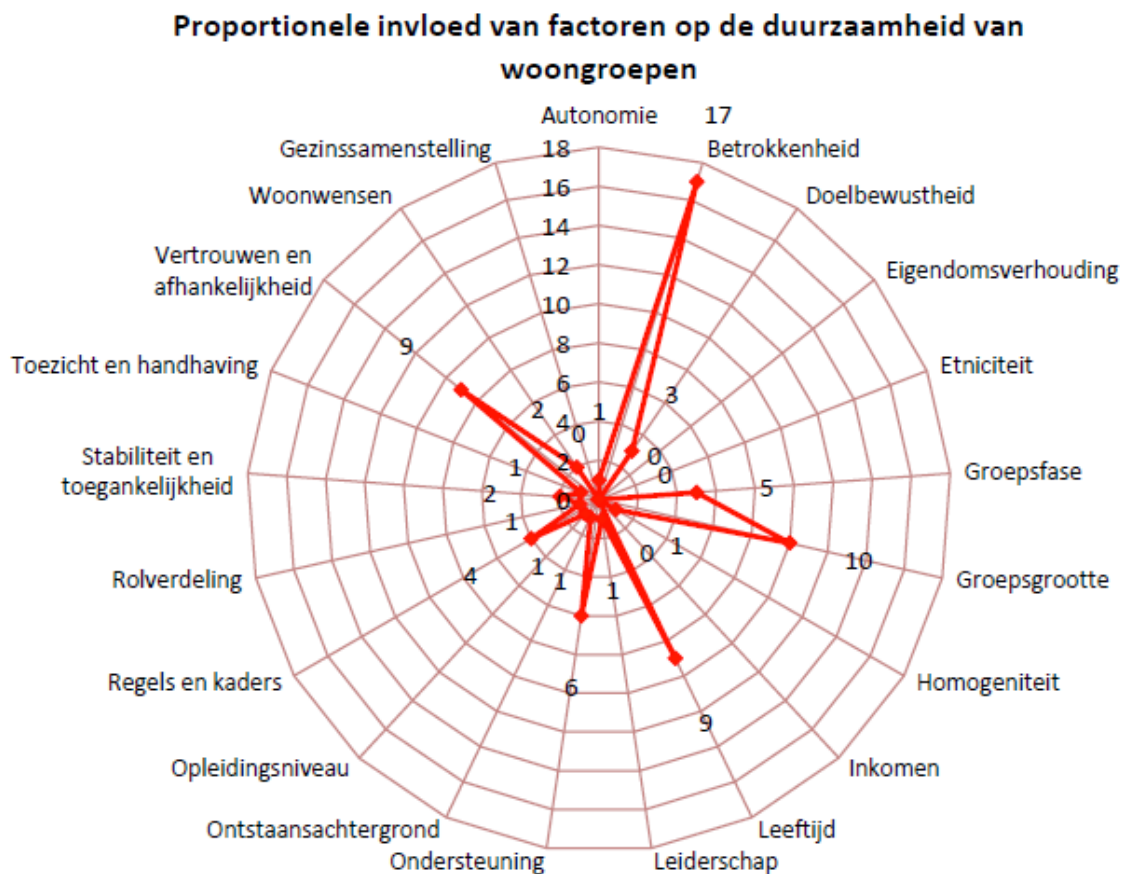


Figure 6 Overview of weights given to determinants of continuity in cohousing from elderly (source Nuesink, 2016). The most important are involvement ('betrokkenheid'), trust and dependency ('vertrouwen en afhankelijkheid') and Rules and Conditions ('Regels en Kader'), Involvement ('Betrokkenheid'), Group size ('groepsgrootte'), Age ('Leeftijd'), and Support ('Ondersteuning').

2.3 Explorative study

So far only Nuesink (2016) investigated cohousing for elderly, and a main lesson here is that important determinants of continuity in cohousing for elderly cannot be identified through quantitative study only, as particularly Trust and Dependency, Rules and Conditions and Involvement are not properly (validly) conceptualized in a survey. Also, as cohousing is put forward as a means to reduce the costs for care and combat loneliness, that means that motives of elderly people to move into a cohousing group need to be addressed as well.

Therefore, to be able to provide recommendations to Pieter van Foreest, this study was design as a mixed method study. Through a general survey factual information on f.i. group size and average age as important determinants for the continuity will be assessed. Then the survey will be used to identify distinct cohousing groups to gain a deeper understanding of the motives new participants may have and to gain in-depth understanding of how ways of governance (Rules and Conditions), and other important lessons can be learned from existing cohousing groups for elderly. In this way, this study will find an answer to the main research question:

What are the most important lessons that can be learned from existing cohousing groups for organizing such a group ?

Sub questions are:

- 1 What are important motives for elderly people to participate in a cohousing groups for elderly?
- 2 What determinants are important in ensuring continuity of cohousing groups for elderly?

3 Research methods

In order to answer the main research question, a mixed method study was used. The first phase consist of a quantitative part in which a survey was developed. Then the survey was used to select distinct cases for in-depth interviewing and thus constituted the qualitative part of the study.

3.1 Participants

3.1.1 Survey

To obtain a unselected sample for the survey, the database of the LVGO (Landelijke Vereniging Gemeenschappelijk wonen van Ouderen) was accessed and all 114 registered cohousing groups were included in the sample. Of these, 59 groups started the survey, yielding a net response of 52%. In further analysing the data, one respondent had misunderstood that the questions were asked to fill out for the whole group and this group was excluded from the dataset in further analyses. One group was in the initiative phase, so not all answers applied. Of the remaining, 42 cohousing groups had fully completed surveys.

3.1.2 Case studies

In the survey, cohousing groups could indicate whether they were willing to participate in further interviewing.

To select cases from the survey, initially the following eligibility criteria were defined and cases were such as that the total cases showed the largest possible diversity regarding:

- longest continuity
- different culturally background than native Dutch
- native Dutch only
- presence of a common garden
- difference in size
- difference in ownership

The first two groups that agreed were both in highly urbanized areas, and it turned out that a major motive for new participants was that the cohousing would be a way to bypass the waiting list that would otherwise apply. As this may highlight an influence of urban density, and thus reduce the importance of the outcomes to the Randstad only, it was decided to adapt the eligibility criteria and to include cohousing groups from less dense areas. Furthermore, there were no cohousing groups that targeted other cultures that answered the repeated emails for interviews.

Therefore the eligibility criteria were changed accordingly into total cases showed the largest possible diversity regarding:

- high / low urban density
- outdoor space/garden
- ownership

and at the same time all cohousing groups had

- long continuity

- private bathrooms and kitchens

3.2 Materials

3.2.1 Survey

In the survey only factual information was asked for, as it was argued that this would make the survey more easy to fill out. Information about motives for instance was on purpose therefore not included in the survey, as this was included in the in-depth interviews.

The survey covered the following topics:

- Outline of the cohousing group: information on the number of households, number of persons, shared activities, age range of its members, etc.
- Descriptive information on the dwellings, e.g. information about ownership, the floor plan including information on private facilities such as bathroom, kitchen, storage, etc.
- Descriptive information on the cohousing building, and particularly on the shared outdoor and indoor spaces, building year, etc
- Amenities in the neighbourhood
- Governance covering whether formal arrangements were made or not, and how decision regarding the waiting list were made, etc.
- Care, since this was a main topic questions on the number of residents with care demands were asked as well as to what extent the cohousing group took care of those in need of care.

For a detailed overview of the survey, please look up the survey in annex 1 and 2.

3.2.2 Interview protocol

To prepare for the interview, each time a general description of the cohousing group was made using the outcomes of the survey. Open in-depth interviewing was used with probing to encourage interviewees to explain their perspective and the meaning they assigned to the examples we asked them to provide (Moerman, 2010). An example of the Dutch interview protocol is included in the annex 9.3.

The main topic were

- Who is the interviewee, and since when is (s)he involved in the cohousing group.
 - How did the cohousing group start
 - What changed
 - Wat is the focus
- What makes this a cohousing group?
 - Motives to participate
 - Are motives now different than at the start
 - What roles do motives have in deciding about a new member
 - Does it influence the current mix
 - Waiting list, and what are the rules here
 - Aspirant members?

- How is the relation between the co-housing group and the housing association / investor (adapted accordingly)
 - Influence at the time of the initiative
 - Influence on daily practices
 - Difficulties with vacancy?
- Housing and Care
 - Are there members using informal care now?
 - Does the cohousing group includes persons with a care demand?
 - Since 2015, were there any members that moved out because of too high care demands (and did they went into a nursing home or elsewhere)
 - How does the cohousing group deals with the changes in care?
 - Is the building sufficiently adapted (e.g. what about scooters)
 - Is there a working relationship with one particular care provider?
 - Is there interaction between informal caregivers from outside and members of the cohousing group?
 - Are/were there members experiencing cognitive decline, and does it place a burden on the cohousing group?
- Lessons learned
 - What are the major lessons that can be drawn from this cohousing group?
 - What are the most important pitfalls?
 - What does a new cohousing group certainly have to consider?

Depending on the interview, the main topics were always addressed, but the listed follow-up questions would be depending on the answers.

3.3 Procedure

3.3.1 Survey

Statistical analyses included descriptives and logistic regression modeling. These were conducted in SPSS version 26, and a significance level of $p \leq 0.05$ was used as a threshold in analyses.

3.3.2 Interviewing

Interviewees were asked to consent with audio recording. Afterwards, they received a small present without such being mentioned upfront.

The audio recording was used to make a full transcript. These transcripts were anonymized and included in the annexes. They were then coded using motives, governance, and care demands as deductive codes. Rent harmonisation and the motive to bypass the social housing association waiting list were used as an inductive code.

For further analyses and presentations, thick descriptions were selected and included in the line of reasoning as presented in the chapter on Findings of the Interviews.

4 Results of the survey

In total, 55 groups started the survey, whereas 42 cohousing groups completed the survey. An extensive summary of the outcomes per variables is included in Annex 2. As discussed in Chapter 3, the survey was used to further select cases for the second qualitative stage of the study, i.e. for in-depth interviewing. Therefore, here only a brief summary is made, describing the mean number of residents per cohousing group, whether housing was social or private tenancy, or occupant owned, how long the co-housing group exists (continuity) and how many residents the cohousing groups had with care demands. The latter is an important feature, as the main idea behind the renewed interest for cohousing for elderly of the committee 'Toekomst zorg thuiswonende ouderen' is that the cohousing group is willing to provide informal care to co-residents with care demands.

It was further argued that co-housing groups that were more similar might be different from socially diverse co-housing groups, and forward logistic regression modeling was used to explore what characteristics distinguished between both groups.

4.1 Descriptives

On average, as summarized in Table 1, groups have about 25 members. There are no groups without women; 4 groups had only women.

Table 1 Overview of group size of cohousing groups.

	N of groups	Minimum	Maximum	Mean	Std. Deviation
Number of residents in CH with only Women	4	8.00	22.00	13.00	6.22
Number of residents in CH with only Men	0				
Number of residents in CH	41	8.00	67.00	24.44	12.28

Table 2 describes whether cohousing groups had only social or private tenants, or were occupant owners, or whether there was a mixture of both. Most were social rent only. Since this also reflects differences in socio-economic status, and since it might be possible that there is a difference in continuity in socially homogeneous groups and socially mixed groups, the groups were further combined into groups without social mix (so only social tenants (n=26), or only occupant owners (n=4), or only private rent (n=1)) versus cohousing groups with a mix of social economic status. So in total, there were 31 socially homogeneous cohousing groups, and 9 socially mixed groups.

On average cohousing groups were existent for 17.8 years (s.d.=8.8 years). There were no significant differences in how long the cohousing groups were existing between groups that were

classified as social mix or not ($p=0.64$); or between groups with only social tenants and all other groups ($p=0.64$).

However, there was a significant difference in the size of the group, but this was only true between groups that had a social mix or not (social mix $T=-2.49$, $p=0.02$; social rent vs other: $T=-1.09$, $p=0.29$). Social mix cohousing groups had significantly more members (mean=35, sd=16.4) than had cohousing groups without social mix (mean=23.4, sd=9.81).

Table 2 Overview of ownership of cohousing groups.

Frequency			Percent	Valid Percent	Cumulative Percent
Valid	social rent only	26	61,9	65,0	65,0
	socal and private rent	1	2,4	2,5	67,5
	social rent & occ. owned	8	19,0	20,0	87,5
	private rent only	1	2,4	2,5	90,0
	occ owned only	4	9,5	10,0	100,0
	Total	40	95,2	100,0	
Missing	System	2	4,8		
Total		42	100,0		

4.2 Members with care demands

As of 2015, the change in law urges elderly to age in place. Table 3 shows that 14 cohousing groups did not have any members with care demands. There were no significant differences between the number of members with care demands according to social mix, or between social rent versus others types of ownership. On average, per cohousing group there were 2.5 members with care demands.

4.3 Final model: distinguishing between cohousing

The number of members with care demands were then used to classify cohousing groups into those without members with care demands, and those with members with care demands (this is the variable CareDemand2).

Together with the variable CareDemand2, several other variables were included in a logistic regression analysis to investigate what distinguished cohousing groups with social mix from those without social mix. A forward selection of the following variables was used to obtain the final logistic regression model as summarized in Table 4: in addition to CareDemand2, these were AgeCH# (age –or continuity- of the cohousing group), CH_nrWomenAndMen# (total number of

members), CultureMix (whether or not the CH group had a cultural mix or only existed of Dutch), CH_nrRation75plus (% members aged 75+), CH_nrRation80plus (% members aged 80+), CH_nrRation85plus (% members aged 85+), pp1HH_Total (number of single persons households).

Table 3 Number of residents per cohousing group with care demands.

Frequency		Percent	Valid Percent	Cumulative Percent
Valid	,00	14	33,3	33,3
	1,00	2	4,8	38,1
	2,00	7	16,7	54,8
	3,00	3	7,1	61,9
	4,00	8	19,0	81,0
	5,00	3	7,1	88,1
	6,00	2	4,8	92,9
	7,00	2	4,8	97,6
	9,00	1	2,4	100,0
	Total	42	100,0	

Table 4 Final model describing the factors distinguishing a homogeneous social group from a mixed social group.

Variables in the Equation

		S.E.	Wald	df	Sig.	Exp(B)	95% EXP(B) Lower	C.I.for Upper	
B									
Step 1a	CH_nrWomenAndMen	0,089	0,046	3,660	1	0,056	1,093	0,998	1,197
	Constant	-3,675	1,432	6,583	1	0,010	0,025		
Step 2b	CareDemand2(1)	2,112	1,151	3,366	1	0,067	8,263	0,866	78,880
	CH_nrWomenAndMen	0,116	0,052	4,855	1	0,028	1,122	1,013	1,244
	Constant	-5,385	1,924	7,837	1	0,005	0,005		

It turns out that social mixed groups were larger and were less likely to have members with care demands than were the socially homogeneous cohousing groups. By including CareDemand2 the model fit significantly improved (-2LL changed from 27.38 to 23.43), and the Nagelkerke R square, reflecting the explained variance changed from 24% to 40%. The Hosmer and Lemeshow Test, reflecting the goodness of fit of the model, improved from $\chi^2=13.19$, $df=7$, $p=0.068$ to $\chi^2=7.52$, $df=8$, $p=0.48$.

5 Cases description

As described in chapter 3, five cohousing groups were selected for an interview. Case A was situated in Amsterdam, case B in Leidsche Rijn near Utrecht, case C in Utrecht, case D was in Leeuwarden, case E was in Rotterdam and case F in Wassenaar. The map below shows the different location on the map of The Netherlands.

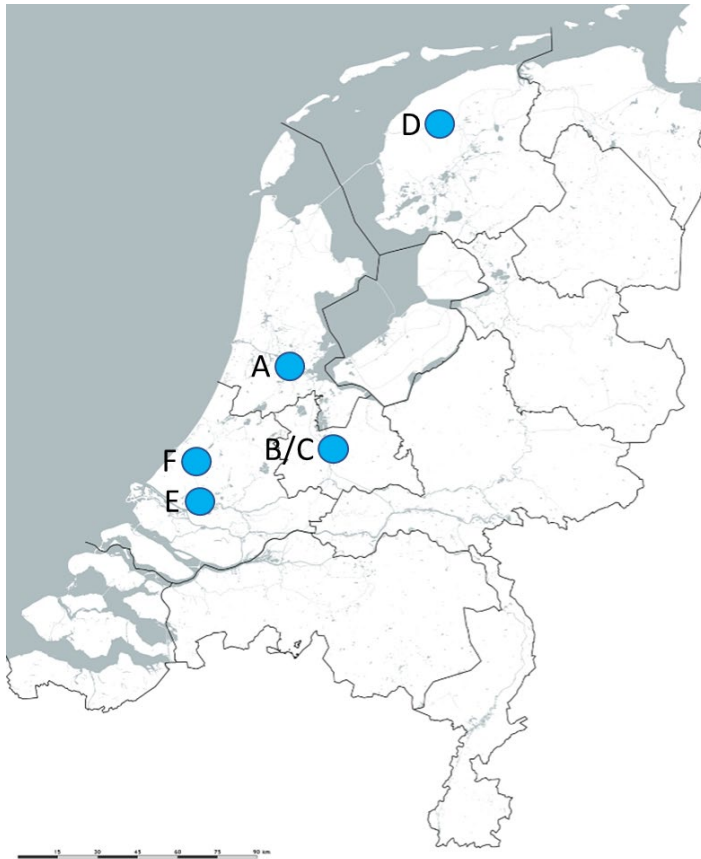


Figure 7 Location map of the 6 interviewed cohousing groups

5.1 Case A

This cohousing is located in the North of Amsterdam. The cohousing group was founded in 1996 when the apartment building in which it is located was newly build. A group of interested elderly contacted the future landlord and asked for the possibility to start a cohousing group. Eventually two cohousing groups for elderly started at this location. Case A has the two top floors in one part of an eight storey building.



Figure 8 Impression of case A.

All dwellings are socially rented apartments. The group consists of households of which 14 single person households and 7 two persons households. There are only residents with a Dutch background. Five of the residents have a paid job and six are doing voluntary work. The cohousing group has a board with 4 members and there are different committees for activities. Four of the residents have care demands. Informal care is given by family, friends and professionals. Informal care is not given by residents other than partners. The residents do give old fashion neighbour assistance. The dwellings have wide hallways and door openings. The bathroom is also good accessible. The dwellings are therefore future proof for elderly. All dwellings have an extra sleeping room for a guest. The common room has been realised in one of the dwellings. This dwelling has the layout of a regular apartment. Some of the walls were removed as to create one big common space. This common room is situated in the first dwelling next to the elevator and staircase.

The cohousing group are choosing their members themselves. To this end, they use a waiting list and an aspiring-member list. Future members have to join regular meetings and activities to show their interest in the group. When a dwelling becomes available the current members choose a member out of the aspiring-member list. The time an aspiring member has been on the list is not a decisive factor. When a member of the group is not participating anymore in the cohousing group the other members can abandon this member from the group and thereby also from his or her dwelling.

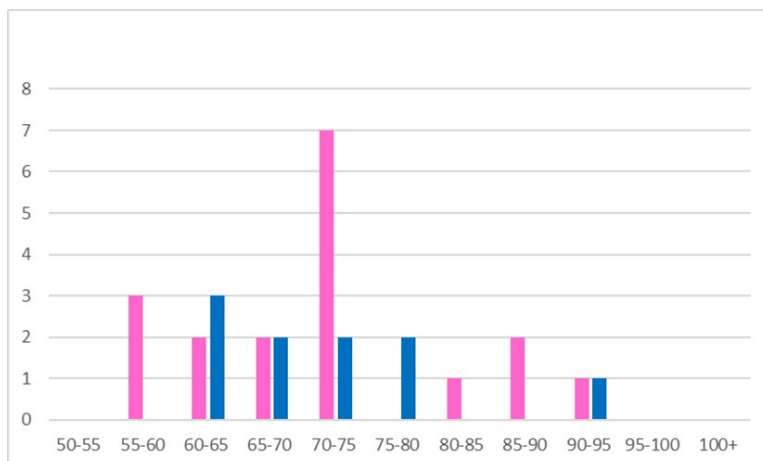


Figure 9 Age range of the members. Blue indicate men; pink are women.

5.2 Case B

Cohousing B is located in Leidsche Rijn. This cohousing started in 1999. The group started when the apartments were newly built. The group has 21 households of which 12 are single person households and 9 are two persons households. Two members have a paid job and four do voluntary work. There are no members with a background other than native Dutch. There is also a second cohousing group for elderly in this building. This second group is for people from a Chinese background. There is little contact between the two groups. In total the building has 48 dwellings. Five of the dwellings do no longer belong to the cohousing groups.



Figure 10 Impression of cohousing group B.

A board of members leads the activities and also financial issues. They have a waiting list of two persons. Adoption policy is on the basis of agreement. Registration time is however leading. Four of the members have a care demand. Informal care is given by family and professionals. Members are not giving informal care to any other than their own partners. The dwellings are future proof for aging residents.

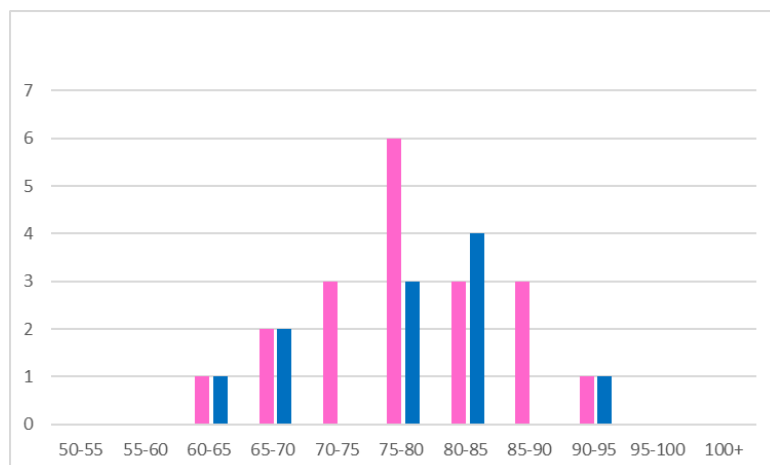


Figure 11 Age range of the members. Blue indicate men; pink are women.

5.3 Case C

Cohousing C is located in Utrecht. This group has 10 single person households. All apartments are social rented. The dwellings are located in a building which has 60 apartments that do not belong to the cohousing group. The group has a common room, a shared garden and a shared serre. There is also a separated workshop which the cohousing group uses for painting.



Figure 12 Impression of cohousing group C.

There is no care demand in the group. Doors and hallways are wide and future proof for the elderly.

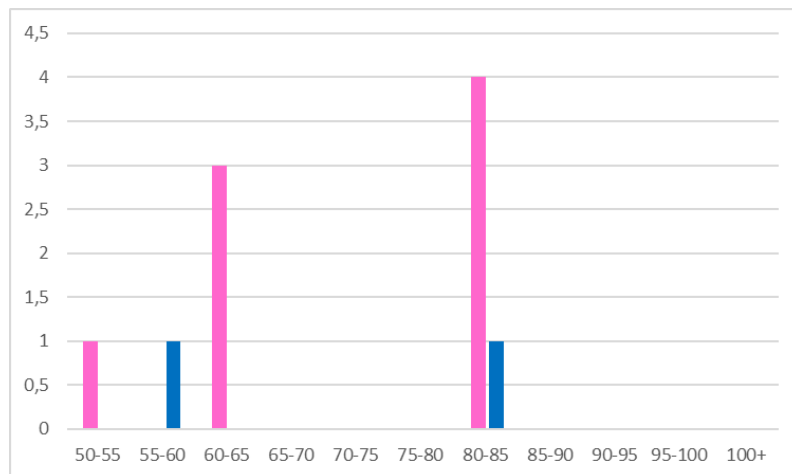


Figure 13 Age range of the members. Blue indicate men; pink are women.

5.4 Case D



Figure 14 Impression of case D.

This group is located in Leeuwarden. This cohousing started in 2006. The building was newly built after a former apartment block was demolished. The group consist of 16 households, but originally the cohousing group had 21 dwellings. There are 13 one person households and 3 two persons households. The dwellings of the group are scattered throughout the building. All apartments are socially rented. The common room is situated on the top floor in an adapted apartment. There are no members with a paid job but 12 do voluntary work. All members in het group are native Dutch. There are work-groups for cleaning and maintenance. The dwellings are future proof for elderly. The waiting list consist of one person. Acceptance is on basis of agreement.

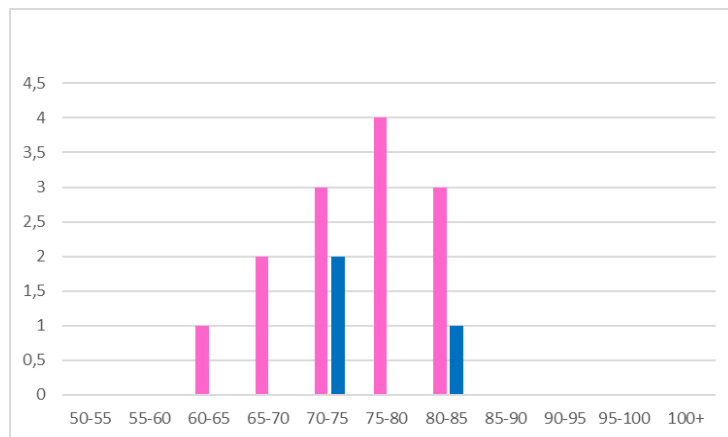


Figure 15 Age range of the members. Blue indicate men; pink are women

5.5 Case E

Cohousing D in Rotterdam consists of 38 households. There are 32 single person households and 6 two persons households. The group started in 2006. One third of the apartments are owner occupied. The remaining are socially rented. There are no members with a paid job, but 15 of them do voluntary jobs. All members have a Dutch background. The common room is situated at ground level. The common room also features a spare room for a guest to sleep in.



Figure 16 Impression of case E.

As there are owner occupied apartments, management is done by the Vereniging van Eigenaren (owner association) and a board of members. On the waiting list they have 3 aspiring members. Membership is on basis of approval of the board. Two members have a care demand. Members of the cohousing group do not provide informal care to any other than their partner. There is a lot of social control. The group has a special commission called care and attention. This group makes sure that all members of the group regularly receive attention and care. The group has a lot of activities. Of the interviewed groups it has the most activity commissions.

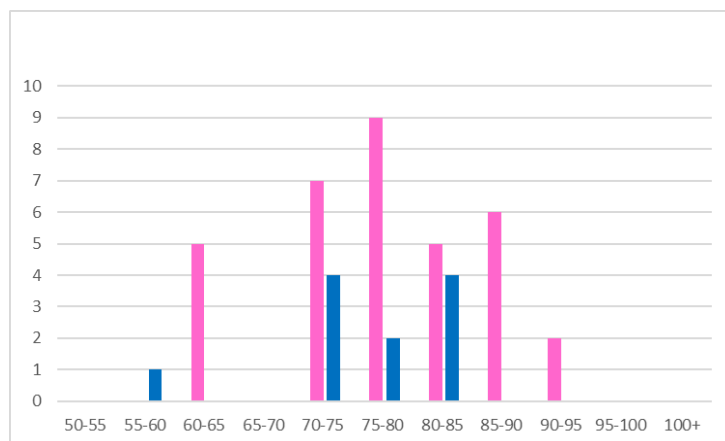


Figure 17 Age range of the members. Blue indicate men; pink are women.

5.6 Case F

This cohousing in Wassenaar consists of 3 social rented dwellings and 15 private rented dwellings. The group started in 1993. At the ground floor level there is a common room. One third of the group are single person households. The remaining are two person households. Four members have a paid job. Five of them do voluntary work. All members are from a Dutch background.



Figure 18 Impression of Case F.

The group has a waiting list of 6 persons. Originally the apartments were owned by a housing association. Nowadays a private party owns the building. Acceptance is in accordance with legislation for the social dwellings and on financial basis for the private rented apartments. There is minimal influence by the current inhabitants on the acceptance policy. The group therefore has less coherence than the other interviewed groups. Mediation between residents is given by the owner. Informal care is not given by residents.

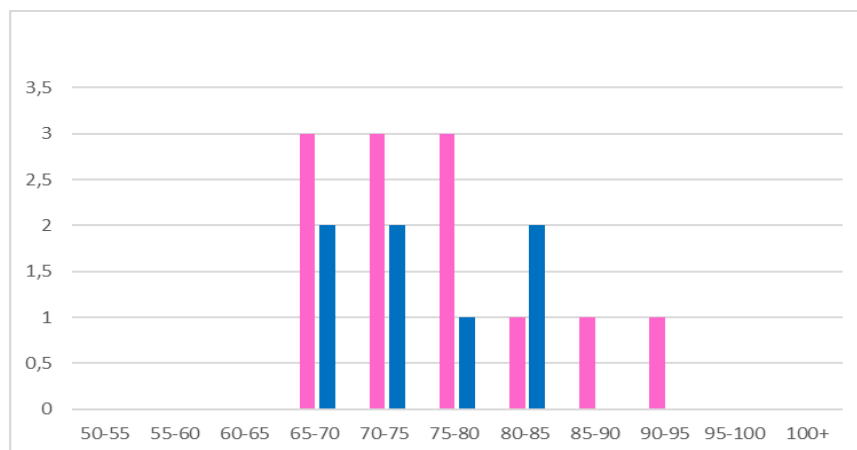


Figure 19 Age range of the members. Blue indicate men; pink are women.

Table 5 Overview of some characteristics of the 5 cohousing groups.

	Case A	Case B	Case C	Case D	Case E	Case F
Group composition						
Households	21		21	10	16	43
Children (<18years)	0		0	0	0	0
Single households	14		12	10	13	32
Two-persons households	7		9	0	3	6
Non-Dutch background	0		0	1	0	0
Working	5		2	3	0	0
Voluntary work	6		4	3	12	15
Dwellings						
Appartements	21		21	10	15	39
Own kitchen	yes	yes	yes	yes	yes	yes
Own bathroom facilities	yes	yes	yes	yes	yes	yes
Outdoor space	balcony	balcony	collective garden	gallery	gallery	balcony
Bicycle storage	yes	yes	yes	yes	yes	yes
Social rented appartments	21		21	10	15	24
Private rented appartments	0		0	0	0	0
Owner occupied appartments	0		0	0	0	12
Building						
Floors	9		8	3	4	3 and 5
Elevator	yes	yes	yes	yes	yes	yes
Cohousing groups	2		2	1	1	1
Other use of building	no	no	no	no	private owned dwellings	no
	(cohousing one part of flat)	(5 dwellings not cohousing)	(60 dwellings not cohousing)	(other dwellings not cohousing)	not cohousing	
Built for cohousing	no	no	yes	yes	yes	yes
Services						
Shared services	common room	common room	common room	common room	common room	common room
		news papers				
			garden		garden	
			atelier (workshop)			
Use by others	no	no	no	no	yes (common room)	no
Parking spaces	public		50	0	public	42
Reserved parking	no	no	no	no	yes	no
Services within walking distance	supermarket	supermarket	supermarket	supermarket	supermarket	
		bakery	bakery	bakery	bakery	
	butcher		butcher	butcher	butcher	
	greengrocer			greengrocer	greengrocer	
	general practitioner	general practitioner	general practitioner	general practitioner	general practitioner	
		sports facilities		sports facilities		
	busstop	busstop	busstop	busstop	busstop	busstop
	station					
	community centre	community centre		community centre	community centre	
				swimming pool		
Organization						
Start cohousing	1996	1999	1990		2006	2006
Original residents present	yes	yes	yes	yes	yes	yes
Waiting list (persons)	3	2	6	1	3	6
Adoption policy based on	age	age	age	age		
	agreement	agreement	agreement	agreement		agreement
	involvement					financial
		registration time				cosiderations
					recruitment and selection	
					committee	
					approval board	
Residents decide new members	yes	yes	yes	yes	no (board and committee)	no
Houserules on	neighbour assistance	togetherness	meeting	rights and obligations	almost everything	noise
	conversation topics	motivation	joint meals		(statutes and regulations)	
	(no religion or politics)	attention	activities			
Joint responsibilities	Shared spaces cleaned		committees (recruitment,	cleaning	owner association is	Cleaning
	by externals		cosiness)	maintenance	responsible (maintenance	
	board 4 members	board (activities and finance)	board (treasurer, chairman,		and cleaning)	
			secretary)			
Care						
Members with care demand	4	4	0	0	2	4
Informal care	by family	no informal care			no informal care	no
	short-term neighborly help				(commission care and	
					attention)	
Informal care providers	family					
	friends					
	professionals					
Building care proof	no	no	no	no	yes	no
Guest room	in dwellings	no	no	no	yes in common room	no

6 Findings cases

6.1 Motives for living in cohousing for elderly.

6.1.1 Maintaining independence

One of the first motivations that the an interviewee indicated for living in cohousing for elderly was maintaining independence. As one gets older you can expect support from fellow residents in the cohousing when assistance is needed. It should be noted here that support does not mean care.

“Cohousing is for people who do keep their independence. And yes, my feelings is that it isn’t anticipated at all. A nursing home is for when you are, yes, terminally or you are left to your own devices. And that is why residential groups... are pleasant for people.”

“Woongroepen zijn voor mensen die wel hun zelfstandigheid houden. En ja daar wordt helemaal nog niet op ingespeeld voor mijn gevoel. Verpleeghuis is voor als je, ja, terminaal bent of je wordt aan je lot overgelaten. En daarom zijn woongroepen.. zijn prettig voor mensen.”

Quote from Case A.

In addition to fourteen single people, seven couples live in this cohousing group. According to the interviewee, the couples also indicated that support from fellow residents is an important reason to live in cohousing.

“For example, there are couples who sign up here and say well we like that if one of us drops out, the other is in a familiar environment and can therefore expect support. And so yes that can also be a consideration.”

“Ook bijvoorbeeld er zijn echtparen die zich hier aanmelden en zeggen nou we vinden het fijn dat als één van ons wegvalt dat de ander in een bekende omgeving zit en dus steun kan verwachten en ja dus dat kan ook een overweging zijn.”

Quote from Case A.

It is also that the caregiver in the couple has support from co-inhabitants.

6.1.2 Social cohesion

The second motive mentioned is social contact with neighbours and neighbourhood. The residents of the cohousing group enjoy being in contact with their immediate living environment. This interviewee believes that contact with your neighbours and living environment in Amsterdam is no longer obvious.

“And so the anonymity. We also have a lot of single people and they are a bit tired of the anonymity in the city. We are of course very Amsterdam-like and the

neighbourhoods are changing incredibly and there is no longer any cohesion and that is against them. So then they look for another form of living and this is something.”

“En de anonimiteit dus. We hebben ook veel alleenstaanden en die zijn het een beetje zat die anonimiteit in de stad. We zijn natuurlijk erg Amsterdams en de buurten veranderen ongelofelijk en er is geen cohesie meer en dat staat ze tegen. Dus dan zoeken ze een andere woonvorm en dat is dit iets.”

Quote from Case A.

People in the residential group know each other and, according to the interviewee, there is more contact with each other than in a traditional residential setting.

“Yes and that you know your neighbours. And that when you stand in the elevator and if you know that he or she has something difficult, you ask. Just the normal real things.”

“Ja en dat je je burens kent. En dat als je in de lift staat dat je weet dat huppelepup iets moeilijks heeft dus je vraagt er even na. Gewoon het echte ja.”

Quote from Case A.

The social contact with fellow residents and especially the ease with which this contact is established is mentioned as one of the most important motives for choosing a cohousing group.

“Just the normal social contact. And some more too. Having a club for when I want to go to the movies, I can just ask on the group-app who wants to join. You know, well I say that this is a multi-storey village. Yes, the social aspect is the most important.”

“Gewoon het normale sociale contact. En ook wat meer dus. Een club hebben van wanneer ik naar de film wil dan kan ik even op de groepsapp even vragen van wie wil er nog meer mee. Je kent, nou ja ik zeg een dorp op etages. Ja het sociale aspect is wel het belangrijkste.”

Quote from Case A.

This interviewee indicates that the mentioned loss of cohesion mainly occurs in neighbourhoods where there are relatively a lot of social rented properties.

“Look if you have a owner-occupied house and you live in South with children, then you are not all that bothered. Then you can also have an argue with your neighbours so to speak but if you live in the social rented sector you will not be really happy. There are also neighbourhoods here, well where I wouldn't want to be found dead. And it is a terrible mess there and no one says good day anymore and things like that.”

“Kijk als jij een koophuis hebt en je woont in Zuid met kinderen dan heb je er allemaal niet zoveel last van. Dan kun je ook wel ruzie hebben met je burens bij wijze van spreken maar als je in de sociale sector woont nou daar wordt je niet echt vrolijk van. Er zijn hier achter

ook wijken, nou ik zou er niet dood gevonden willen worden. En het is een ontzettende rotzooi en iemand zegt meer gedag en dat soort dingen.”

Quote from Case A.

6.1.3 A clean living environment

The last motive is the tidiness of the living environment. The cohousing group of this interviewee is housed together with another group in one wing of a larger apartment building. In this building the interviewee sees the difference between the part where the living groups are located and the other social rental properties.

“We clean up the mess around the apartment twice a week and keep things tidy. The flat has just been renovated, I mean the elevator. But if you saw the lifts in the other part of the flat yes that is awful and messy. If something is lying in the flat here, someone will pick it up and it will be cleaned up.”

“We ruimen zelf de rotzooi op twee keer in de week om de flat heen en houden de boel netjes. De flat is net gerenoveerd, de lift bedoel ik. Maar als je de liften in het andere deel van de flat zag ja dat is vreselijk en rotzooi. Als hier iets in de flat ligt dan raapt iemand het op en wordt het opgeruimd.”

Quote from Case A.

Other cohousing groups also stated this.

“I think we're a little better house-fathers when it comes to the residents. That it's just neater.”

“Ik denk dat wij een wat betere huisvaders zijn wat de bewoners betreft. Dat het gewoon netter is.”

Quote from Case B.

6.1.4 Feelings of safety

Living in a commune also gives the residents a sense of security. The residents pay for example attention to who enters the building. There is social control in a living group.

“You feel safe. People are not allowed to open here if they don't have an appointment. Don't just open the door because then someone can come in. Once we had it here that we said, what are you doing here? They were selling at the door to have the furniture upholstered. How do you come in? Is the first thing we said.”

“Je voelt je veilig. Mensen mogen hier eigenlijk niet opendoen als ze geen afspraak hebben. Niet zomaar de deur opendoen want dan kan iemand binnenkomen. Eén keer hebben we

hier gehad dat we zeiden wat doen jullie hier? Die waren aan het colporteren aan deur om de meubels te laten bekleden. Hoe kom jij binnen? Is het eerste wat we zeggen.”

Quote from Case E.

6.2 What defines cohousing for elderly cohousing

6.2.1 The common room

When asked what cohousing for elderly makes it cohousing several things are mentioned. First, the importance of a common room is mentioned.

“Without a common room, there is no cohousing.”

“Zonder gemeenschappelijke ruimte heb je geen woongroep.”

Quote from Case D.

One of the interviewees, where there is a discussion about the continued existence of the common room, sees the loss of the common room as the end of the living group.

“I couldn’t think about it going away. I would find it terrible. Because it is the second family for me. The second family. I come here more, I see more people here, I see our living group more than my family. And I have a very nice and sweet family but yes, this is just close by. (...) The people will continue to live here, but the connecting factor is the room. (...) What did we call it again the vein of life? The living room, the second living room. The living room of the group. If it is gone then we no longer have cohesion. No.”

“Ik moet er niet aan denken dat het weg gaat. Zou ik verschrikkelijk vinden. Want het is het tweede gezin voor mij. De tweede familie. Ik kom meer ik zie meer ik zie onze woongroep meer dan mij familie. En ik heb een hele fijn en lieve familie maar ja dit is gewoon dichtbij. (...) De mensen blijven hier wel wonen maar de verbindende factor is de ruimte. (...) Hoe noemden we het ook al weer de levensader? De huiskamer, de tweede huiskamer. De huiskamer van de groep. Als die weg is dan hebben we geen samenhang meer. Nee.”

Quote from Case D.

It is also indicated that the common room should be situated in such a way that the residents will pass it when entering their apartment building. With a common room near the entrance of the cohousing group, chance encounters are stimulated which strengthens social contact.

“I think that's very important when you set up something like that. That there is accessible space right at the start. (...) And then, for example, they have a room where they enter at

the entrance, which is very cosy. Where a coffee machine and tea can be made. Where you sit down with your groceries. And there is always someone there. And then you have more contact. We always have to go to this floor. (...) But such a space as you enter is very important to me."

"Dat vind ik wel heel belangrijk als je zoiets opzet. Dat er meteen aan het begin toegankelijke ruimte is. (...) En dan hebben ze bijvoorbeeld een ruimte waar ze binnenkomen bij de ingang die heel gezellig is. Waar een koffiezet apparaat en thee gemaakt kan worden. Waar je neerzigt met je boodschappen. En er zit altijd wel iemand. En dan heb je meer contact. Wij moeten altijd naar deze etage toe. (...) Maar zo'n ruimte als je binnenkomt vind ik heel belangrijk."

Quote from Case A.

In a number of cases, the common room was an existing dwelling that had been converted into a common room since its construction. This had the shell of a house but the partition walls were not built so that one large space was created.

"With an adjustment it is like a house again. Well there is nothing in it. No shower. It is a small effort for the housing association, the shower is there. But the space is there. Yes, it is there."

"Met een aanpassing is het zo weer een woning. Nou er zit niks in. Geen douche. Het is een kleine moeite voor de woningbouw, de douche zit er wel. Maar de ruimte is er wel. Ja het is er wel."

Quote from Case D.

In the common room, social contact with residents can be experienced differently than in the houses themselves. Social contact with people whom you have less of a social click is made here.

"If you are going to invite people to your home instead of the common room, you start selecting. You don't want that. You do want to treat people with respect. But if you go and have a cup of coffee with someone in your house, then we're actually a little careful not to let everyone get involved (...)."

"Als je mensen bij je thuis gaat uitnodigen in plaats van de gemeenschappelijke ruimte, moet je ook gaan selecteren. Dat wil je niet. Je wil mensen wel met respect behandelen. Maar als je bij iemand even een kopje koffie gaat drinken, dan kijken we eigenlijk wel een beetje uit dat niet iedereen erbij wil komen (...)."

Quote from Case A.

Residents also indicated that for the strengthening of social cohesion in apartment buildings there should always be a common room for elderly.

“But apart from the fact that we are a cohousing group, a common room should be created in apartment complexes similar to this one. (...) In any case also for the future of the elderly, who will then indeed be able to move to a common room.”

“Maar afgezien dat wij een woongroep zijn zou in een soortgelijk appartementencomplex als dit zou eigenlijk een gemeenschappelijke ruimte moeten komen. (...) Sowieso ook voor de toekomst van ouderen die dan inderdaad naar een gemeenschappelijke ruimte kunnen.”

Quote from Case D.

It was also indicated that a shared garden could have the same function as a common room.

“Well I come to other residential groups and there they have a beautiful garden. And I also like that very much. People then sit outside. The same as you have with the common room you have with the garden.”

“Nou ik kom op andere woongroepen en daar hebben ze een mooie tuin. En dat vind ik ook erg leuk. Mensen gaan dan buiten zitten. Hetzelfde als die ontvangsthall zeg maar dat heb je ook met de tuin.”

Quote from Case A.

6.2.2 Activities

In cohousing for elderly many activities are organized. The interviewees indicate that this is an important part of the living group.

“I think the advantage is the collectively. And yet my own home. The togetherness, the conviviality that I don't have to go on the streets. In the past I had to attend meetings in the evening. Here I only have to go downstairs nice and dry. And I can have a drink whenever I want with the people. I can take part in the activities, I see only advantages.”

“Ik vind het voordeel de gezamenlijkheid. En toch mijn eigen huis. De gezamenlijkheid de gezelligheid dat ik niet straat op hoef. Vroeger moest ik vergaderingen notuleren 's avonds. Hier hoef ik alleen maar naar beneden te gaan lekker droog. En ik kan een borrel drinken wanneer ik wil met de mensen. Ik kan aan de activiteiten meedoen vind ik alleen maar voordelen.”

Quote from Case E.

Several residents have indicated that it is important to organise these activities on a regular basis.

“Yes, I think that our weekly reception is also very important. You see each other at least once a week.”

“Ja ik denk dat onze wekelijkse borrel ook heel belangrijk is. Je ziet elkaar in ieder geval elke week.”

Quote from Case A.

“Otherwise you won't get together at all in the long run, I guess. Then you don't know about what's going on and what everything is like.”

“Anders kom je helemaal niet meer bij elkaar op den duur denk ik. Dan weet je ook niet van de hoed en de rand en hoe alles is.”

Quote from Case D.

Loneliness is also mentioned in this context. Single people who are a bit older and could become lonely remain social contact in cohousing.

“Yes, that's true and especially for those who are old, they have little family or activities so she is here always on Monday morning. Really always.”

“Ja dat kopt wel en vooral voor degen die oud zijn, die hebben weinig familie of activiteiten dus die is er standaard op de maandagochtend. Echt altijd.”

Quote from Case F.

“I hope there will be more residential groups. Because when I see a program about loneliness then I think oh how sad.”

“Ik hoop dat er meer woongroepen komen. Want als ik dan een programma over eenzaamheid zie dan denk ik o wat erg.”

Quote from Case E.

“We are, of course, taking a number of problems on board... there is no need to solve the problem of loneliness here.”

“Wij nemen natuurlijk een aantal problemen uit.. hier hoeft niet het probleem van de eenzaamheid opgelost te worden.”

Quote from Case B.

“Yeah, there we are. No one is lonely with us”

“Ja daar zijn we. Niemand is bij ons eenzaam.”

Quote from Case D.

Several interviewees indicated that residents who are older or who have been living in the cohousing for some time are less likely to participate in the activities.

“And what I have understood, we are now 12-13 years I existents, a number of people who have lived here from the beginning are also 12-13 years older. There are a few who are well into their eighties. (...) There is another one of 94, very nice person, still coming. But there are also people who don't find it necessary to participate as much anymore.”

“En wat ik ook begrepen heb, we bestaan nu 12-13 jaar, en een aantal mensen die hier al vanaf het begin wonen, zijn wel 12-13 jaar ouder. Er zitten een paar die ver in de tachtig zijn. (...) Er is er nog een van 94, heel leuk mens, komt nog steeds. Maar er zijn ook mensen waar het dan niet meer zo nodig voor hoeft.”

Quote from Case E.

“Or they're so old, it's going to be difficult. So then whatever happens but that's more... Yes, one of the residents is in pain but she could come. (...) While that is just a matter of perseverance. Anyway, it's a good thing.”

“Of ze zijn zo oud dat het moeizaam wordt. Dus dan wat ook wel gebeurt maar dat is meer.. Ja, één van de bewoners die heeft wel pijn maar ze zou dus kunnen komen. (...) Terwijl dat is gewoon een kwestie van volhouden. Maar goed.”

Quote from Case B.

For elderly residents, it sometimes becomes physically or mentally more difficult to participate. Occupants who have lived in the living group for a longer period of time, which often goes together with older age, sometimes lose some of their enthusiasm for common activities. The interviewees indicate that they appreciate the participation of the residents in the activities to maintain social contact with the group.

“The other thing that happens is that some of them only come when it suits them. So they don't think that I might like to see them.”

“De andere wat een beetje gebeurt sommige die komen alleen maar als het hun uitkomt. Die denken er dus niet bij na dat ik misschien behoefte heb zoals ze zeggen om hun te zien.”

Quote from Case B.

It is striking that one cohousing group, whose common room is maybe going to be closed, also indicates that the activities in their group are partly seen as a replacement for the activities in the community centre. Due to cutbacks there would be less space and opportunities there.

“People who are now dependent on us here, on the cohousing group that we are with each other, they must then seek their salvation outside the home. (...) They will then send you

to the community centre. The community centre is bursting at the seams, bursting at the seams. For everything is closed where there were activities (...)."

"Mensen die hier nu afhankelijk zijn van ons, van de woongroep dat we met elkaar zijn, die moeten dan hun heil buitenshuis zoeken. (...) Ze sturen je dan door naar het wijkcentrum. Het wijkcentrum barst uit zijn voegen, uit zijn voegen. Want alles wordt gesloten waar activiteiten waren (...)."

Quote from Case D.

The interviewee indicates that single people expect more from the activities organized in the living group than couples.

6.3 Governance

6.3.1 Regulations

Almost all of the cohousing groups interviewed stated that they have house rules. Some had these in writing. For others they are unwritten rules. House rules relate mainly to participation in activities and periodic meetings. Often participation is not compulsory, but it is highly desirable.

"Well they have drawn up rules, also living rules of course. What was very strong emphasised here, which was stressed to me, is that they told me I had freedom to participate or not. Nice if you would like you to participate, but if you don't want to participate, you have to know yourself. So it's pretty non-committal."

"Nou ze hebben regels opgesteld, ook leefregels natuurlijk. Wat hier sterk gold wat nadrukkelijk was, dat werd mij ook gezegd dat het vrijheid blijheid is. Graag dat je meedoet maar als je niet mee wil doen dan moet jij dat zelf weten. Dus het is tamelijk vrijblijvend."

Quote from Case B.

"No, and we don't ask where you were either. You could say I missed you. That's what will be said. No, and you don't have to say you're not coming. (...) The only rule we do have is that someone attends the meetings. This has to be watched. There are now people who stay away very often. And that. We have a new board and yes, you always notice that some meetings are being less attended. (...) Yes, and on the other hand those meetings... they can also read the notes. Yes, but it is written in the rules. Yes, it's in the rules, otherwise those meetings won't help anything."

"Nee en we vragen ook niet waar was jij. Je kan wel zeggen ik heb je gemist. Dat wordt wel gezegd. Nee en je hoeft ook niet te zeggen dat je niet komt. (...) De enige regel die we wel hebben is dat iemand de vergaderingen bijwoont. Het wordt wel gezegd, het moet wel in de gaten gehouden worden. Er zijn nu mensen die wel heel vaak wegblijven. En

dat. Wij zijn net een nieuw bestuur en ja dan heb je altijd dat je merkt dat er wat dingen gaan versloffen. (...) Ja en aan de andere kant die verdergingen... ze kunnen het ook lezen. Ja maar goed het staat wel in de regels. Ja het staat in het regelement anders heb je ook niets aan die vergaderingen."

Quote from Case D.

In addition to statements about participation in activities and meetings, a number of the interviewed groups also have agreements about subjects they would rather not discuss in the group. These subject are on religion and politics.

"We don't like ecclesiastical things either. In principle, not politics either, although I love that, but sometimes it ends up in discussions."

"We houden ook niet van kerkelijke dingen. In principe politiek, hoewel ik daar dol op ben, maar dat komt toch wel eens op de tafel."

Quote from Case E.

In some cases, there are also rules on how to deal with one's own home. These rules are for example about noise in the evening, the keeping of pets and commercial activities.

"Yes, don't make any noise after 12 o'clock and don't hang out the laundry, that kind of rule."

"Ja geen herrie maken na 12 uur en de was niet buiten hangen, dat soort regels."

Quote from Case F.

"You are not allowed to have pets here, I don't agree with that either. The reason is that when someone dies, the animal has to go to the shelter and that costs a lot of money."

"Je mag hier geen huisdieren hebben, daar ben ik het ook niet mee eens. De reden is dat als iemand overlijdt, moet het dier naar het asiel en dat kost heel veel geld."

Quote from Case F.

"But you do abide by the rules of the house, don't you? Because there was someone here who wanted to sell jewellery, when they were still living in your house. Well, that's not allowed."

"Maar je houdt je wel aan de regels van het huishoudelijk reglement, hè? Want er was hier iemand die sieraden wilden verkopen, toen woonden ze nog in jouw huis. Nou, dat mag dus niet."

Quote from Case E.

6.3.2 Who decides the next resident (waiting list)

Housing groups have a waiting list for new residents. Most of the interviewed groups consisted of social housing. Normally, the majority of social rental housing goes to the person who has been registered with the regional housing network the longest. In addition, the appropriate allocation rules apply. This means that the tenant is not allowed to have too much or too little income and that the age requirements are met. However, it is important for residents of a cohousing group that they are allowed to choose their own co-tenants. In this way they can choose someone who suits their group best. This means that an exception must be made for cohousing to the normal distribution key for social housing. The appropriate allocation rules however do apply. Mostly this means that a tenant must be 50 years or older. This means that housing groups only get an exception for the registration period of their future residents. In practice it appears that this selection process is not arranged in the same way for every cohousing group. There are housing groups that place future residents on their waiting list where the person who has been registered the longest gets the vacant house.

“And we don't have a fixed order either. Downstairs they have that. If you're on that waiting list and you don't care anymore then you'll be on number one. And then you can no longer be refused that house or at least that is the politics below.”

“En wij hebben ook geen vaste volgorde. Beneden hebben ze dat wel. Als je op die wachtlijst staat en je trek je er daarna niets meer van aan dan kom je vanzelf op nummer één te staan. En dan kan je die woning niet meer geweigerd worden of althans dat is de politiek beneden.”

Quote from Case A.

There are also housing groups that want to approve future residents. They often have to participate in activities and meetings of the cohousing before they can live there. This makes them prospective members. It is often the case that the person who has been registered the longest and has taken part in the compulsory activities is the first to be eligible for if a house in the group becomes house.

“Exactly. You always fill in a form, don't you? Why and where you come from and you name it, and on the basis of that you were invited for a first interview. That was the famous ballotage. (...) Yes, they are now aspirant members anyway and after six months they can become members. But they actually have to attend activities as many times as they can.”

“Precies. Je vult altijd een formulier in, hè? Waarom en vanwaar je vandaan komt en noem maar op en aan de hand daarvan werd je uitgenodigd voor een eerste gesprek. Dat was de beroemde ballotage. (...) Ja ze zijn nu sowieso kandidaat-lid en naar een halfjaar mogen ze lid worden. Maar ze moeten dan eigenlijk zoveel keer een activiteit bijwonen.”

Quote from Case E.

“Yes, the one who has been through six meetings first is the one who is at the top of the list. In front of someone who has been through five meetings. Unless the one who's first says it

doesn't suit me right now.”

“Ja diegene die het langst die dus zes vergaderingen heeft meegemaakt die dus bovenaan staat gaat voor iemand die vijf vergaderingen heeft meegemaakt. Tenzij diegene die zegt van het past me nu even niet dan.”

Quote from Case D.

Last there are living groups that use a waiting list and also an aspirant member list. People on the waiting list are asked to participate in activities and sometimes to already dedicate themselves to the cohousing group. With this, they become aspirant members. The cohousing group chooses from the aspirant members the one who they think fits best with the current residents. This doesn't have to be the one who has been on the list the longest.

“But so we have that freedom. We now have a number of people on the list that we can ask for at any time. Because we know they have a rental property, they want it, we find them okay. So then we more or less follow the order of arrival when we say one or the other. But we absolutely want to keep that freedom, yes.”

“Maar dus die vrijheid hebben wij. We hebben nu een aantal mensen die op de lijst staan die we elk moment kunnen vragen. Omdat we weten ze hebben een huurwoning, ze willen graag, wij vinden ze oké. Dus dan houden we min of meer de volgorde aan van binnenkomst als we zeggen de een of de ander nou ja. Maar die vrijheid willen we absoluut houden, ja.”

Quote from Case A.

The choice of a new occupant can be made by voting or by mutual agreement.

“I'm also on the introductory committee and then there are usually present residents who say when that persons comes to live here, not next to me. And people who don't want to sit next to that person on a drink. Well that's what they tell me in secret. And yes, that's enough. So you only need to have four or five (...) and then we say yes that just doesn't click. (...) Then you hold it in own control.”

“Ik zit ook in het kennismakingcomité en dan zijn er meestal bewoners die zeggen als die hier komt wonen nou dan niet naast mij hoor. En mensen die niet naast die persoon op de borrel willen zitten. Nou dat vertellen ze mij dan even tussen neus en lippen door. En ja dat is al voldoende. Dan hoef je er maar vier of vijf te hebben (...) en dan zeggen we ja dat klikt dus gewoon niet. (...) Dan houd je het zelf in de hand.”

Quote from Case A.

6.3.3 Cohesion

For a cohousing group it is important that the procedure of the waiting list and aspirant member list is well organized. The most important thing is that future residents enthusiastically participate in activities. In this way, the residents can discover whether the aspirant member fits in with their group.

“We expect involvement and that is also said in the first interview. And you must also indicate what you might want to mean for the group.”

“We verwachten betrokkenheid en dat wordt in het eerste gesprek ook gezegd. En je moet ook aangeven wat je eventueel voor de woongroep wilt betekenen.”

Quote from Case A.

In one cohousing group, even a small financial contribution is required from prospective members.

“And now we have to write to four people to see if they are eligible to become aspirant members. That means that they will become aspirant members and be approved. They have to agree to that. That also means that they're going to pay financial dues.”

“En nu moeten we vier mensen gaan aanschrijven of zij in aanmerking willen komen om aspirant lid te worden. Dat betekent dat ze aspirant lid worden dat ze goedgekeurd worden. Daar moeten ze mee eens zijn. Dat betekent ook dat ze contributie gaan betalen.”

Quote from Case B.

If new residents are only admitted on the basis of registration time, this can lead to problems. The new residents may not have a connection with the current one and this process can repeat itself until the group no longer functions as a group.

“Yes and the order in which a vacant property is offered. That you do not have a fixed order. Because that's what they have downstairs and there they've got the wrong people. And that has become a division of the group. That has become a tragedy. Because they again attract the wrong people and they also get on the waiting list. They just didn't notice it very well.”

“Ja en de volgorde van aanbieding van een leegkomende woning. Dat je niet een vaste volgorde hebt. Want dat hebben ze beneden en daar hebben ze dus de verkeerde mensen gekregen. En dat is een splitsing geworden van de groep. Dat is een drama geworden. Want die trekken ook weer verkeerde mensen aan en die komen ook op de wachtlijst. Ze hebben het gewoon niet goed in de gaten gehad.”

Quote from Case A.

One interviewee also indicated that older people are likely not to change their opinion easily about disagreements.

“In other words, yes conflicts always arise, a number of people are hot-tempered, a

number of people are silent and then suddenly come back. Well that's what you have... children you can still raise and knead, these people not anymore. ”

“Met andere woorden ja conflicten ontstaan altijd een aantal mensen is dat heetgebakerd is, een aantal mensen is die over zich heen laat lopen en dan opeens terug komen.. Nou ja dat heb je.. kinderen kun je nog opvoeden en kneden, deze mensen niet meer hoor.”

Quote from Case C.

The lack of clear rules on assumption can lead to an unclear situation with regard to the assumption policy.

“Nothing has been arranged. We have a bundle of rules but simple rules only. The rule whether you nominate someone who is an aspiring member, who has been approved, to the corporation. Or whether you nominate them in the order of people coming in. That has not been arranged.”

“Er is niks geregeld. We hebben zo’n pakket statuten maar dat soort simpele regels. De regel of je iemand die aspirant lid is, die goedgekeurd is, aan de corporatie is voordragen. Of volgens de volgorde van mensen die binnekomen. Dat is niet geregeld.”

Quote from Case B.

What is indicated by several groups is that you can't keep people on a waiting list for years. At some point, prospective members will drop out and look for another home.

“No, because you can't leave people on a waiting list for six, seven or eight years. Unless they choose to do so themselves.”

“Nee want je kunt mensen niet zes, zeven, acht jaar op een wachtlijst laten staan. Tenzij ze daar zelf voor kiezen.”

Quote from Case A.

6.3.4 Urbanity and the size of the waiting list

Cohousing groups in the major cities sometimes find that prospective members are not so much looking for a cohousing group as for a house. The housing supply in the social rental sector is limited in the Randstad and people sometimes try to circumvent the waiting lists in the sector by pretending to be nicer than they are for the cohousing group.

“But I have to say it's about the only way to get into Amsterdam. (...) Yes, so we have to be very careful what the arguments are and of course everyone can formulate that very positively but in the end everyone wants a house. And in the end it's people who want to go to Amsterdam.”

“Maar daar moet ik ook bij zeggen het is ongeveer de enige manier om nog Amsterdam in te komen. (...) Ja, dus wij moeten vreselijk opletten wat de argumenten zijn en natuurlijk

kan iedereen dat heel positief formuleren maar uiteindelijk wil iedereen een woning. En uiteindelijk zijn het mensen die Amsterdam in willen."

Quote from Case A.

Outside the Randstad, the opposite sometimes happens. It is can be difficult to find enough prospective members.

"Because we don't have twenty-one homes yet. We are now at thirteen, fourteen. (...) So when seven houses become vacant in one week, we are offered seven houses. But of course we don't have people for that."

"Want wij hebben nog niet eenentwintig woningen. We zitten nu aan dertien, veertien (...) Dus als er in één week zeven woningen leegkomen krijgen wij zeven woningen aangeboden. Maar daar hebben we natuurlijk geen mensen voor."

Quote from Case D.

6.3.5 Continuity

It happens that after a while residents no longer participate in the joint activities and therefore no longer in the cohousing. It is difficult to then evict these residents from their homes. One interviewee indicated that this is possible, but that this is not an easy decision for the group.

"There was one couple before my time and they were away all winter and in their caravan all summer. And then they said that is not what a living group is meant for (...) And they left. But no one else ever left. We do have someone who came here in a devious way. Who doesn't live here either but who has this just as a spare. Who we can place out but that means that we have to talk about it in the full meeting and make the decision we are going to place her out. And then the housing association can do something. But without that, the housing association can't do anything."

"Er is één stel voor mijn tijd geweest en die waren de hele winter weg en de hele zomer op de caravan. En toen zeiden ze dus daar is een woongroep niet voor bedoeld (...). En die zijn weggegaan. Maar verder is er nooit iemand weggegaan. We hebben wel iemand die hier op slinkse wijze binnen is gekomen. Die woont hier dus ook niet maar die heeft dit gewoon achter de hand. Die kunnen we er dus wel uitzetten maar dat betekent dat we in de volle vergadering daar over moeten gaan praten en de beslissing nemen we gaan haar eruit zetten. En dan kan de corporatie iets doen. Maar zonder dat kan de corporatie niets doen."

Quote from Case A.

Another living group indicated that a number of residents had left the joint activities. However, they could not be evicted from their homes because this is not legally possible.

"But because of that we are now in trouble. We have misled in the past. That there always was said. It is also in our contract that terminating membership of the group expires the

lease. It is not possible at all. They just get another lease. It is the lease together with the group. The lease with the group expires but not the normal lease. They just get a new one. You get a rental contract that specifically corresponds to the group and if you are no longer a member, it expires and you get a new one without the group.”

“Maar daardoor zijn wij nu wel in de problemen. We zijn daar in het verleden mee op het verkeerde been gezet. Dat er dus altijd gezegd was. Het staat ook in ons contract dat bij opzeggen van het lidmaatschap van de woongroep vervalt het huurcontract. Het kan helemaal niet. Ze krijgen gewoon een ander huurcontract. Het is het huurcontract samen met de woongroep. Het huurcontract met de woongroep vervalt maar niet het gewone huurcontract. Ze krijgen gewoon een nieuw. Je krijgt een huurcontract wat speciaal overeenkomt met de woongroep en als je dan geen lid meer bent dan vervalt dat en krijg je een nieuwe zonder de woongroep.”

Quote from Case D.

It will be an extra big problem if the residents who no longer participate in the living group do not pay for the common room either. It is wise for living groups to have the rent of the common room as part of the rental contract for their house.

“ (...) they are obliged to continue to pay. You have signed for that. Otherwise, you supposedly would have to leave the house. Although, legally speaking, if someone wants to, it's very difficult.”

“Dat zouden ze niet maar die zij verplicht om mee te blijven betalen. Daar heb je voor getekend. Anders moet je zogenaamd uit die woning. Hoewel als iemand dat wil juridisch gezien ligt dat heel moeilijk.”

Quote from Case B.

6.4 The relationship with the landlord.

6.4.1 Agreements about the placing of tenants.

Sometimes it happens that cohousing group find suitable candidates who do not fully meet the requirements set by the government for social housing.

“For example, we now have a house that is currently vacant and we have the people. They may be too low in income. Highly motivated and they are next week in conversation and it has to be seen if they will get it.”

“We hebben nu bijvoorbeeld een woning die op het moment leegstaat en we hebben mensen. Die zijn mogelijk te laag in inkomen. Zeer gemotiveerd en die gaan nu volgende week in gesprek en het is maar gevraagd of ze het krijgen.”

Quote from Case B.

Ten percent of the social housing stock may be allocated by the social housing sector outside the set requirements. Something this is sometimes invoked, but the interviewees haven't been successful here. This ten percent is mainly for groups other than cohousing for elderly.

"That's what we think. It's only not said that way. The government has set very strict rules and those rules must be applied. Only the housing association has a ten percent possibility to deviate."

"Dat denken wij. Dat wordt niet zo gezegd. De overheid heeft hele strenge regels gesteld en die regels moeten gehanteerd worden. Alleen de woningbouwvereniging heeft tien procent mogelijkheid om af te wijken."

Quote from Case B.

"That ten percent we say, put that with us. But then the club that has to place asylum seekers says exactly the same thing."

"Die nijging hebben wij om te zeggen zet dat bij ons. Maar dan zegt de club die asielzoekers moet plaatsen precies het zelfde."

Quote from Case B.

Housing groups like to stick to their own placement of people. Placing other target groups is seen as the end of the living group.

"It's the end of your living group when that happens. Because then anyone who is eligible for a social rental property can be placed."

"Het is het einde van je woongroep als dat gebeurt. Want dan kan iedereen er opgezet worden die in aanmerking komt voor een sociale huurwoning."

Quote from Case A.

It also happens that the houses in the cohousing are oversized for a single person households, a group of which cohousing largely consists.

"Then there was also the rule that we were not allowed to place singles. Because the houses are oversized. They are five square metres too big. So we received a letter. You are not allowed to have singles anymore. Well, that's off the table again. And now that the government is only talking about informal care.. Again, we need to be a little more accommodating. We're now seeing a shift."

"Toen was er ook nog de regel dat wij geen alleenstaanden mochten aannemen. Want de woningen zijn te groot. Die zijn vijf vierkante meter te groot. Dus we kregen een brief. Jullie mogen geen alleenstaanden meer hebben. Nou dat is inmiddels weer van tafel. En nu de overheid alleen maar aan het praten is over mantelzorg.. Ook weer van wij moeten wat toegefelijker zijn. Wij zien nu een kentering."

Quote from Case B.

6.4.2 Involved housing associations

Some corporations are very enthusiastic about cohousing for elderly and are happy to commit themselves to them.

“For example Doesburg, which includes a housing association and a government. The local government and the housing group who work together. And I believe that they have forty people on the waiting list because it flourishes on all sides. (...) They see that it has benefits for them.”

“Bijvoorbeeld Doesburg waar een woningbouwvereniging inzit en een overheid. De plaatselijke overheid en de woongroep die werken met elkaar samen. En ik geloof dat die veertig mensen op de wachtlijst hebben want dat floreert aan alle kanten. (...) Die ziet hé dat heeft voor mij voordelen.”

Quote from Case B.

For others, this is clearly not the case.

“Oh, of course there are those arguments, but they don't really care at all. They only have one interest. How do we maintain the stuff? And how do we meet all kinds of requirements. And I noticed in the conversations that what happened to Vestia has a resonance, reverberation now again. Vestia is on the brink of bankruptcy. And they have an appeal and they also have to deliver another billion to the government every year. Or one and a half. They are stuck. And a constantly changing workforce.”

“Oh, natuurlijk zijn die argumenten er maar dat interesseert ze eigenlijk helemaal niet. Ze hebben eigenlijk maar één belangtelling. Hoe houden we de spullen in stand. En hoe voldoen we aan allerlei eisen die gesteld worden. En ik heb gemerkt in de gesprekken dat wat met Vestia is gebeurt dat heeft een weerklank, nagalm nu weer. Vestia staat op springen. En er wordt een beroep op ze gedaan en ze moeten ook elk jaar nog een miljard leveren aan de overheid. Of anderhalf. Zij zitten klem. En een personeelsbestand dat voortdurend wisselt.”

Quote from Case B.

Residents indicate that in some cases you are dependent on who is in charge of the cohousing groups at the housing association at that moment.

“But it's just which housing association club, which one from the association you're meeting.”

“Maar het is net welke woningbouw club, welke je van de corporatie je treft.”

Quote from Case B.

6.4.3 Vacancy length between residents

The time that a house may be vacant between the old and new resident varies per landlord. In some cases, the cohousing group may rent the vacant property for a while if they are unable to find a suitable candidate. In this way, it is prevented that a household will be placed without consent of the group.

“According to the rules, this has to be fixed at fourteen days (...) If we wait any longer, we have to pay the rent. (...) Then we rent a house. Formally this is a very difficult thing because we are not a tenant.”

“Dat is volgens de regels vastgelegd op veertien dagen (...) Als wij langer willen dan moeten we de huur betalen. (...) Dan huren wij een woning. Wat formeel een hele moeilijke zaak is want we zijn geen huurder.”

Quote from Case B.

“If we have no one suitable then we have a period of a few months in which we may still search and then we must pay the rent together. To prevent the housing association from just placing anyone.”

“Mocht het nou zo zijn dat wij niemand geschikt hebben dan hebben wij een periode van een paar maanden die we nog mogen zoeken en daarna moeten we de huur gaan betalen met zijn allen. Om te voorkomen dat woningbouwvereniging er zomaar iemand opzet.”

Quote from Case A.

“We do have, if something is vacant here in the complex, a month time to find someone for the cohousing group.”

“Wij hebben wel, als er hier iets in het complex vrijkomt, een maand de tijd om iemand te zoeken voor de woongroep.”

Quote from Case D.

“We have tried to do that... 14 days is also much too short. It then stood empty for two months. And then it goes to the landlord to find someone.”

“We hebben wel geprobeerd om dat... 14 dagen is ook al veel te kort. Het heeft toen twee maanden leeggestaan. En dan gaat het naar de verhuurder om iemand te zoeken.”

Quote from Case E.

6.4.4 Rent harmonisation

If a property changes owner, the landlord or housing association can increase the rent. In cohousing where residents know each other well, the differences in rent can lead to a feeling of injustice.

“Well, that is another injustice. At that time, those people have a relatively low rent, an

irresponsibly low rent. These are houses that I believe may cost seven hundred and seventy euros. And there are still people living for five hundred and ninety euros. (...) In 2016, I think rents were harmonised again, which means that these homes reached their maximum. That costed seven hundred and ten. So the new residents were going to pay a new price. There are three new residents who pay between eighty and ninety euros more than their neighbours. But in 2016, the government said no. (...) So in the meantime the rents have been lowered again. So the houses were suddenly lowered by sixty or seventy euros."

"Nou dat is dan weer een ander onrecht. In die tijd hebben die mensen een vrij lage huur een onverantwoord lage huur. Het zijn woningen die geloof ik zevenhonderdzeventig euro mogen kosten. En er wonen nog mensen voor vijfhonderdnegentig euro. (...) In 2016 meen ik zijn de huren weer geharmoniseerd en dat betekent dat deze woningen op hun maximum kwamen. Dat koste zevenhonderd tien. Dus de nieuwe bewoners die gingen een nieuwe prijs betalen. Er zijn drie nieuwe bewoners gekomen die betalen tussen de tachtig en negentig euro meer dan hun burens. Maar in 2016 heeft de overheid gezegd nee. (...) Dus intussen zijn de huren weer verlaagd. Dus de woningen werden ineens met zestig zeventig euro verlaagd."

Quote from Case B.

There was one housing group that had the rent harmonisation banned in statutes. This was arranged in consultation with the housing association.

"Well with the other housing group not having this clause they have to participate in the rent harmonisation. And we don't. We are the only ones. (...) But then we were sitting there with a lot of housing groups from Amsterdam (.) that rent harmonisation and the problems that this causes with new.. And we thought, oh, we're the only one. Well here we have no business because we are privileged."

"Nou bij die andere woongroep is die clause niet dus die moeten meedoen aan de huurharmonisatie. En wij dus niet. Wij zijn de enige. (...) Maar toen zaten we daar met een heleboel woongroepen van Amsterdam (...) die huurharmonisatie en de problemen die dat oplevert om nieuwe.. En wij dachten, oh, wij zijn de enige. Nou hier hebben we niks te zoeken want we zijn bevoorrecht."

Quote from Case A.

6.4.5 Wealth and social housing

In the allocation of properties by a housing association, the future residents are tested on their income. According to one of the interviewees, wealth is not included in this test. In their group they did have a residents who had moved from their sold house to the social rented cohousing.

"Yes, the income is tested the year before you are offered the house. And capital is not a criterion, it's about your income. So we do have people here who have sold their home and who do have capital. But it's about your income."

"Ja het inkomen wordt getoetst het jaar voor je de woning aangeboden krijgt. En

vermogen is geen criterium, het gaat om je inkomen. Dus we hebben hier inderdaad mensen die hebben hun huis verkocht en die hebben dus wel vermogen. Maar het gaat om je inkomen."

Quote from Case A.

This could indicate that it is possible for elderly with more financial wealth than average in social housing to participate in social rented cohousing.

6.4.6 Housing shortage

In the major cities, the Randstad, the interviewees indicated that there was a housing shortage. The relationship with the housing association sometimes comes under pressure because the housing association would like to use the houses in the cohousing for other purposes than cohousing.

"Because of all these developments within. Because of Vestia, for example, that they don't have a penny left, their enthusiasm for housing groups.. And also because of the asylum seekers, they have to deliver an incredible amount of houses and there aren't any. So they have, these are three senior flats that have been closed down. Because they have to do with their quotas, they have it. That stamp has been taken off."

"Door al die ontwikkelingen binnen die. Door Vestia bijvoorbeeld dat ze geen meer cent meer hebben is hun animo voor woongroepen.. En ook door de asielzoekers, ze moeten ongelooflijk veel woningen leveren en die zijn er niet. Dus hebben ze, dit zijn drie senioren flats dat is opgeheven. Omdat ze aan hun contingenten moeten doen hebben ze dat. Die stempel is eraf gehaald."

Quote from Case B.

" (...) and that year ago I wasn't the chairman, but the chairman at the time had asked me if I wanted to be at a meeting with the housing association. And then they literally said well fine that you want to stop, then we have two houses. Here we have houses. Just stop."

" (...) maar die jaar geleden toen was ik geen voorzitter, maar de toenmalige voorzitter had mij gevraagd of ik bij een gesprek met de woningcorporatie wilde zijn. En toen zeiden ze letterlijk nou ja prima dat jullie willen ophouden, dan hebben we twee woningen. Hierzo hebben we woningen. Stop er maar mee."

Quote from Case B.

"No, if a house is released here at some point. Look, we have rights, we are allowed to supply people. But if we can't deliver someone, they'll put in whoever they want. At the moment, for example, this could be a family with children. We have one extra bedroom, so that is possible."

"Nee, als een woning hier op een bepaald moment vrijkomt. Kijk wij hebben rechten, wij

mogen mensen leveren. Maar als wij iemand niet kunnen leveren dan zetten zij erin wie ze willen. Dat kan op dit moment bijvoorbeeld een gezin met kinderen zijn. We hebben één slaapkamertje extra dus dat zou kunnen.”

Quote from Case B.

6.5 Care

6.5.1 Assistance

All interviewees indicated that residents in the cohousing pay attention to those in the group who are physically or mentally less healthy. For example, they look if the curtains are open in the morning and whether the residents are doing their daily things. One of the interviewed cohousing groups had institutionalised this assistance by setting up a care and attention committee. In this committee the state of affairs concerning the health of the residents is shared. If necessary, action is taken.

“For example, at two o'clock I stand outside smoking a cigarette and then she comes out and goes shopping in the dark. You have to go to bed, girl, the shops are not open. Well, we keep an eye, because we also have a Care and Attention Committee and they will keep you informed.”

“Om twee uur sta ik bijvoorbeeld nog een sigaretjes te roken buiten en dan komt ze naar buiten en dan gaat ze boodschappen doen in het hartstikke donker. Je moet naar bed hoor meid, de winkels zijn nou niet open. Nou, hou je toezicht, want we hebben ook een Commissie Zorg en Aandacht en die houd je wel op de hoogte.”

Quote from Case E.

When required the residents do take action.

“I happened to know which doctor she had, it was also mine. I called and said I know that you are not allowed to say anything but this and that is happening at the moment. Well she'd be admitted and eventually she got a place. And there were also some other defects found. Whether it is dementia... but in any case. (...) So we tried to exert some pressure there.”

“Ik wist toevallig welke huisarts ze had, het was ook de mijne. Ik heb opgebeld en gezegd ik weet dat jullie niks mogen zeggen maar dit en dat gebeurt op het ogenblik dus. Nou ze zou opgenomen worden en uiteindelijk heeft ze een plek gekregen. En daar zijn ook wel één en andere mankementen geconstateerd. Of het nou dementie is.. maar in elk geval. (...) Dus daar hebben we wat druk proberen uit te oefenen.”

Quote from Case A.

In case of illness or discomfort help and assistance is provided by members of the cohousing

structural care however is not provided.

“Soup pans are made if someone is ill, but structural care of course isn’t provided at all. That is not the intention. Absolutely not.”

“Er worden pannetjes soep gebracht als iemand ziek is maar structurele zorg wordt natuurlijk absoluut niet geboden. Dat is ook niet de bedoeling. Absoluut niet.”

Quote from Case A.

6.5.2 Informal care

All interviewed cohousing groups indicated that they did not provide informal care to their co-residents.

“No, no, we are not.. We always say that we’re not informal care providers. (...) Just like good neighbours. We are not a care centre.”

“Nee, nee we zijn geen.. We zeggen ook steeds we zijn geen mantelzorgers. (...) Net als goede burens. We zijn geen zorgcentrum.”

Quote from Case D

“Of course we care for each other and we look out for each other. If we see something, we jump in. But if something needs to be arranged in the longer term, there are other institutions for. ”

“Natuurlijk we hebben zorg voor elkaar en we kijken naar elkaar om. Signaleren we dan springen we in. Maar al er iets geregeld moet worden op de langere termijn daar zijn andere instanties voor. ”

Quote from Case C.

“Yeah, and that's just that we're now seeing that it's one of the problems. That by wanting to be free, that is in the genes of such a club, informal care is of course not possible.”

“Ja en dat is ook juist dat we nu zien dat het één van de problemen is. Dat door vrij te willen zijn, dat in de genen van zo’n club zit, mantelzorg dus natuurlijk eigenlijk niet kan.”

Quote from Case B.

“It's all on an individual basis, through care institutions or from your children. And if you don't have that, it ends.”

“Het is allemaal op individuele basis, via zorginstellingen of van je kinderen. En als je die niet hebt houdt het op.”

Quote from Case F.

The reason why there is no informal care provided by residents is that the relationship between the

residents themselves is not suitable for this. Care is personal. In addition, residents are often elderly and therefore physically unable to provide care.

“Yes, and I have to say I'm a bit double in that. I've personally experienced what it means when you have neighbours who are over 90 and I'm 80. And then you can get a call in the night with the neighbour lying on the floor. (...) And that then happens by a bell. That's not possible at all. You can't handle that.”

“Ja. En ik moet zeggen ik ben een beetje dubbel daarin. Ik heb aan den lijve ondervonden wat het betekent als je buren hebt die over de negentig zijn en ik tachtig ben. En je dan gebeld kan worden in de nacht van de buurvrouw ligt op de grond. (...) En dat gebeurt dan via een belletje. Dat kan helemaal niet. Je kan dat niet aan.”

Quote from Case B.

“And then it happened the night before that the neighbour called in the night, or not the neighbour but the institution, and I was lifting someone together with two others, which we shouldn't have done but we did. The average age was eighty-two. With a woman of ninety-two. So I think we are not doing this. (...) That was also sensible because it meant that the doctor had to come out of her shell. So then we have to start arranging other things.”

“En toen gebeurde de avond daarvoor dat de buurvrouw belde in de nacht, of niet de buurvrouw maar de instantie, en ik nog met twee anderen aan iemand staan te tillen, wat we niet hadden moeten doen maar dat hebben we wel gedaan. De gemiddelde leeftijd was tweeëntachtig. Met een vrouw van tweeënnegentig. Dus ik denk dit doen we niet. (...) Dat was ook verstandig want daardoor moest die arts uit haar schulp komen. Dus dan moeten we andere dingen gaan regelen.”

Quote from Case B.

An exception to this is that couples who live together in a living group sometimes do provide informal care to each other. This is usually not a structural solution since couples, of whom one needs care, are often also elderly.

“Yes, especially the oldest couple, yes she will be ninety-two this week and she provides care to her husband a lot. And they also have a lot of support from the children and also a professional, but that is too much for her. Ninety-two. And she needs care herself.”

“Ja vooral dat oudste stel, ja zij wordt tweeënnegentig deze week en die verzorgt haar man dus heel veel. En die hebben ook heel veel steun van de kinderen en dus ook een professionele maar dat wordt haar ook teveel. Tweeënnegentig. En ze heeft zelf ook zorg nodig.”

Quote from Case A.

One interviewee indicated that his living group was originally started with care as part of the set up. However, this had not been continued.

"In the beginning the living group was very caring. A number of residents came from a clinic, all already deceased. The owners of the clinic also started the living group. The nurturing element is still difficult sometimes. Someone suddenly says yes there must be called, do you do that for me? But then I think you can't do that yourself? But now it's different, care comes from outside, they come to put on your socks and fish you out of the bed. That whole factor of care has disappeared from the living group."

"De woongroep is in het begin erg verzorgend geweest. Een aantal bewoners kwam uit een kliniek, allemaal al overleden hoor. De eigenaren van de kliniek zijn ook de woongroep begonnen. Het verzorgende element is nog wel lastig soms. Zegt iemand opeens ja er moet gebeld worden, doe je dat even voor me? Maar dan denk ik kan je dat zelf niet? Maar nu is het anders, zorg komt van buitenaf, Ze komen je sokken aantrekken en uit bed vissen. Die hele factor zorg is weggevallen uit de woongroep."

Quote from Case F.

The interviewed cohousing groups are also reluctant to accept new residents who have a care demand. They do not know what a neighbour with a care demand will mean for the group.

"And then we explained it to him and he left happily. But there was such a situation. (...) and that's a difficult point if you know in advance that it's going to happen. Yes, what are we getting at?"

"En toen hebben we het uitgelegd en hij is toch tevreden weggegaan. Maar daar had je zo'n situatie. (...) en dat is toch wel een moeilijk punt als je dat van te voren weet dat dat gaat gebeuren. Ja wat halen we op onze hals."

Quote from Case B.

One interviewee indicated that if care is provided by residents, the homecare organisation might provide less care. After all, the residents are already doing it.

"Moreover, that's a tricky business. I had made a leaflet for recruitment. I had written care for that once. And then someone pointed out to us, very sensibly, that word 'care' is something you absolutely have to get out of it. That should be attention, but not care. After all, as soon as the authority hears that there is care here, the lady in question, who actually needs to be washed or put on the stockings, will no longer receive it. After all, she has a neighbour who can."

"Bovendien is dat een linke zaak. Ik had een foldertje gemaakt voor werving. Daar had ik een keer in geschreven zorg. En toen wees iemand ons er op, heel verstandig, dat woord zorg moet je er absoluut uithalen. Dat moet aandacht zijn maar geen zorg. Want op het moment dat de instantie hoort dat hier zorg is dan krijgt de betreffende mevrouw die eigenlijk gewassen moet worden of de kousen aangetrokken moeten worden, dan krijgt ze dat niet meer. Want ze heeft een buurvrouw die dat wel kan."

Quote from Case B.

6.5.3 No combined home health care

In some of the interviewed groups there was more than one resident with a care demand. Often there are several home care organizations visiting these people. If there is only one organisation for several residents, it is because they happen to be with the same family doctor or care institution.

“Well, you just have to arrange care with your family doctor. So we have different people who work for different organisations.”

“Nou ja, je moet gewoon via je huisarts zorg zien te krijgen. Want we hebben dus verschillende mensen die bij verschillende organisaties werken.”

Quote from Case A.

“We don't have one person, but we do sometimes have people who come to visit a few residents. But not with all the residents. (...) They have the same general practitioner or care institution and that is than coincidentally.”

“We hebben niet één iemand maar we hebben wel soms mensen die bij een paar bewoners komen. Maar niet bij alle bewoners. (...) Ze hebben dezelfde huisarts of zorginstelling en dat komt dan toevallig zo uit.”

Quote from Case A.

“And in our group we have five or six people who need care. And there are five agencies at five different times with five different cars to wash, to put on socks so to speak. While if there was one agency, it could come at nine o'clock in the morning and leave at eleven o'clock and done everything. And everyone knows their fixed times.”

“En in onze groep zitten vijf of zes mensen die zorg nodig hebben. En er komen vijf instanties op vijf verschillende tijden met vijf verschillende autootjes voorrijden om te wassen, om steunkousen aan te trekken bij wijze van spreken. Terwijl één instantie was dan kon die 's morgens om negen uur komen en om elf uur ga ik weg en ik heb alles gedaan. En iedereen weet zijn vaste tijden.”

Quote from Case B.

Residential groups are considering to organise their professional care more efficiently, but in practice this is not yet the case for interviewed groups.

“There are voices saying it should. I know other groups are in the process of buying care. As a group of thirty forty people, you buy care and you can call on it when needed.”

“Er gaan wel stemmen op dat dat zou moeten. Andere groepen weet ik zijn bezig om zorg in te kopen. Je koop als groep dertig veertig mensen zorg in en daar kun je dan een beroep op doen.”

Quote from Case B.

“For example I know about the purchase of these things from a living group. When they started thinking about it. Yes, that means you become a small business. Becoming a kind of care provider and you have to.. It's a commercial business and that means that tax systems will be introduced. Well, it got very complicated and when you're eighty you say I'm not going to do that.”

“Bijvoorbeeld die inkoop van die dingen weet ik van een woongroep. Toen ze daar over gingen nadenken. Ja, dat betekent dat je een bedrijfje wordt. Een soort zorgverlener wordt en dat moet.. Het is een commercieel bedrijfje en dat betekent dat er belastingssystemen over komen. Nou het werd heel ingewikkeld en daar zeg je van als je tachtig bent dat doe ik niet.”

Quote from Case B.

6.6 Age

6.6.1 Whether or not a mix of ages

Cohousing for the elderly is for people who have a minimal age of fifty or fifty-five. However age is relative. Within the target group there can be range in age of more than forty years . This means that different generations can live in one group. The interviewees think differently about this mix of ages. A number of interviewees indicated that they would like to have residents of different ages. Age differentiation ensures dynamism in the group and prevents the residents from all getting old at the same time.

“We have about four people under the age of sixty. No, we would like to have that because then you get a build-up in the group and we also want as much differentiation in the age structure as possible. Because there are groups where there is only one age and they all die within five years. Well, that's a disaster.”

“We hebben een stuk of vier mensen onder de zestig. Nee dat hebben we graag omdat je dan namelijk een opbouw krijgt in de groep en we willen ook zoveel mogelijk differentiatie in de leeftijdsopbouw. Want je hebt groepen waar maar één leeftijd is en die gaan allemaal binnen vijf jaar dood. Nou dat is een ramp.”

Quote from Case A.

“But it's better for the balance. Our society is not just old or young. It's nicer when there's some mix in it.”

“Maar het is voor het evenwicht is het beter. Onze maatschappij is niet alleen maar oud of jong. Het is leuker als er wat mix in zit.”

Quote from Case D.

“Yes we do pay attention to age at the moment because at the moment we consist for more than half out of elderly, over eighty, and we would like to have a couple of youngsters. We have some, but right now we have a stop at seventy years for a while. Preferably”.

“Ja we letten op dit moment wel op leeftijd omdat we op dit moment meer dan de helft uit ouderen bestaan, boven de tachtig, en willen we graag een stel jonkies hebben. We hebben er een aantal maar op dit moment hebben we een stop op zeventig jaar eventjes. Bij voorkeur”.

Quote from Case C.

If you want younger residents in your cohousing group it's wise to have them already in your group. To attract younger candidates you need younger residents. Younger people do not want to live with purely elders.

“But the beauty of it would be that we now have a younger woman. It's really nice if we get some younger people that keeps it a bit balanced. Otherwise people will shy away from it. Like I don't want to be among those old people. (...) Otherwise, someone will be frightened in advance.”

“Maar het mooie zou zijn, we hebben nu ook weer een jongere vrouw erbij gekregen. Het is echt mooi als we wat jongere mensen krijgen dat houdt het een beetje in evenwicht. Want anders schrikken mensen ervan terug. Van ik wil niet tussen die oude mensen zitten. (...) Anders schrikt iemand bij voorbaat al.”

Quote from Case D.

“What's more, what's difficult, because that's what I hear from other cohousing groups, is that if you have a lot of elderly people, it's very difficult to get young people to want to live with those old people.”

“Bovendien maar wat dus moeilijk is, want dat hoor ik dus van andere woongroepen, is als je dus veel ouderen hebt is het heel moeilijk om jongeren zover te krijgen dat ze bij die oudjes willen wonen.”

Quote from Case A.

“In the beginning... Some of them are well over eighty years old. I'm glad to see a few more of my age.”

“In het begin... er zitten een aantal ver boven de tachtig. Ik ben blij dat er weer een paar van mijn leeftijd bijkomen.”

Quote from Case E.

There are also residents who indicate that they prefer members of the same generation. Their experiences and opinions about society are more in line.

“Eighty years and nobody sees it. (...) I can tell from myself, having worked until I was seventy-five, that I just need to live with those dully older people a little. Well, I'll say it a bit...”

“Tachtig jaar en niemand die het ziet. (...) maar ik merk wel aan mijzelf, terwijl ik tot mijn vijfenzeventigste gewerkt heb, dat ik er gewoon behoefte aan heb om een beetje met die suffere ouderen om te gaan. Nou zeg ik het een beetje..”

Quote from Case B.

“Another generation. I also get along very well with her, but she could be my mother. And you notice with the one of your age its different.”

“Andere generatie. Met haar kan ik het ook heel goed vinden maar die zou mijn moeder kunnen zijn. En je merkt toch met die van je leeftijd is het toch anders.”

Quote from Case E.

“Yes, my general opinion is that these groups should be mixed with young and old. And I don't believe in that. Although I'm vital and try to think young and still communicate with young people, I think you shouldn't pull those ages too far apart in such a cohousing group.”

“Ja mij algemene stemmig is dat die woongroepen eigenlijk gemengd zouden moeten zijn met jong en oud. En ik geloof daar niet in. Hoewel ik vitaal ben en jong probeer te denken en nog met jonge mensen te maken heb vind ik dat je die leeftijden in zo'n woongroep niet te ver uit elkaar moet trekken.”

Quote from Case B.

“I find sixty-five sometimes already a bit on the young side.”

“Ik vind vijfenzestig soms al een beetje aan de jonge kant.”

Quote from Case B.

There are also residents who do not so much make a choice and classification on the basis of age as on the level of education, background or character.

“We are average of what there is in the Netherlands so to speak. We have a number of people who have studied and we have people, an old-fashioned couple whose wife has little education. We have a bus driver, we have someone else in that category. We have a lot of things. People who need some mental assistance that is good for them to live with us. Who only do volunteer work. A lot of things. (...)”

“Wij zijn gemiddeld zeg maar van wat er is in Nederland zeg maar. We hebben een aantal mensen die gestudeerd hebben en we hebben mensen, een ouderwets echtpaar waarvan

de vrouw weinig opleiding heeft. We hebben buschauffeur, we hebben nog iemand die categorie. We hebben van alles. Mensen die geestelijk wat bijstand nodig hebben waarvan het goed is dat ze bij ons wonen. Die alleen maar vrijwilligers werk doen. Van alles. (...)"

Quote from Case A.

"No, and I think that's the power too. Because only highly educated that yes that. (...) Well I have the feeling that there are some more heated discussions and yes you all have to go through one door. And that is easier with the one than the other. But I like the fact that there are people who need a little support and that you can give it to them. I think the variation is pleasant."

"Nee, en ik denk dat dat ook de kracht is. Want alleen maar hoog opgeleid dat ja dat. (...) Nou ik heb het gevoel dat daar wel wat heftigere discussies en ja je moet toch met zijn allen door één deur. En dat is met de ene makkelijker dan met de ander. Maar ik vind het fijn dat er mensen zijn die even wat steun nodig hebben en dat je dat kan geven. Ik denk dat de variatie juist prettig is."

Quote from Case A.

"I don't have that with age. I think that would be more like mixed character. For me it doesn't matter at what age they are."

"Ik heb dat niet met de leeftijd. Ik heb dat meer met gemixt qua karakter zou zijn. Voor mij maakt dat niet uit op wat voor leeftijd ze dan hebben."

Quote from Case D.

A number of people indicated that elderly people within the group are more likely to be conservative and stick to habits.

"It's also a bit of a fuss and a bit scary and well we've never done that. The well-known phenomenon because that's what we talked about at the LVGO as well. Above all, don't say that we've never done that, we've always done it this way and that. People are really conservative."

"Het is ook onwennig en een beetje eng en poe dat hebben we nooit gedaan. Het bekende fenomeen want daar hebben we het bij de LVGO ook over gehad. Vooral niet zeggen dat hebben we nooit gedaan, we hebben het altijd zo gedaan en. Mensen zijn toch echt behoudend."

Quote from Case A.

Age is not always related to experiences or regression. There are vital eighty year olds and less vital sixty year olds.

“But that's not all. Fifty-year-olds can be as old as eighty years old.”

Maar dat zegt niet alles iemand van vijftig kan wel als tachtig jarige zijn.”

Quote from Case D.

“There's one who's already demented, a woman, and someone's already becoming a bit demented. They are under seventy.”

“Er is één en die is al dement, een vrouw, en er is iemand al een beetje dement aan het worden. Die zijn onder de zeventig.”

Quote from Case B.

What was also emphasized by several people was that those under the age of sixty-seven are often still working and therefore spending less time in the living group.

“I then receive all the e-mails, requests and likewise, which are people aged between fifty and sixty-five who are actually still working.”

“In de zestig. Ik krijg dan alle mailtjes binnen, aanvragen en dergelijken, dat zijn mensen tussen de vijftig en vijfenzestig die eigenlijk nog werken.”

Quote from Case D.

7 Summary and discussion

The cohousing model is a residential typology consisting of individual residential dwellings with collectively owned facilities, with communities seeking to develop and maintain strong social bonds between residents through shared management (Hammond, 2018). It is exactly for this reason that the national committee 'Toekomst zorg thuiswonende ouderen' considers cohousing for elderly a means to reduce health care costs, and calls for another change in policy. The dictum is now changing from 'one has to age in place' (Tinker, 2013) into 'one has no right to age in place' (Commissie Toekomst zorg thuiswonende ouderen, 2020). Explicitly, the committee states that elderly have to relocate – which will be downsizing as most of them continued to live in the family house after their children moved out, and to use the money that will be freed to pay for the care themselves.

As there is a shortage in independent housing that is suitable for elderly, a possible solution might be to take advantage of existing vacancies of institutional care providers that have vacancies in former nursing homes. Pieter van Foreest, as an institutional careprovider had argued that demolition of some obsolete parts would not return a similar quality of space. Instead, co-students suggested the possibility to offer co-housing facilities to elderly currently living in surrounding areas. The challenge is how to motivate elderly to move into cohousing, and how to organize cohousing in such a way that it will be successful.

Continuity is an issue in cohousing groups requiring a balance between community living and individual life. A too strong emphasis might discourage (future) participants, whereas a too strong emphasis on individual life may attract (future) participants without a wish to interact with the group (Kesler, 1988).

Therefore, for Pieter van Foreest in particular, and the importance further increased given the advice of the national committee 'Toekomst zorg thuiswonende ouderen', the current study aims to gain insight into the conditions that influence the continuity of cohousing groups for elderly as a means to identify the most important lessons that can be learned from existing cohousing groups for organizing such a group.

7.1 What are important motives for elderly people to participate in a cohousing groups for elderly?

An important motive for older people to live in cohousing is the social connection with other residents. Residents know each other and together ensure that there is supervision at the immediate surroundings. This creates a feeling of safety. They also ensure that the living environment remains clean and tidy.

Residents further indicate that they've chosen for this type of housing because they can live here independently for longer. Although cohousing groups are largely inhabited by single elderly people, this motive also applies to couples. If one of the two becomes less mobile or is mentally in decline, the other has the support of other residents and the familiarity of the know living environment.

However, particularly the cohousing groups in the highly urbanized areas mentioned that another main reason was that it was in their view the only way to bypass the regular waiting list for social housing in these cities. Clearly the waiting list of cohousing groups in these areas are much longer

than they are in areas of lower density. Waiting lists might even not exist in the latter. Such a motive might be a threat to the continuity of these cohousing groups, as these new members might withdraw themselves from the community once they got in. Noticeably, in many of the interviewed cases there were former members who quit the cohousing. Depending on the further (rental) agreements, this may further challenge the continuity of these cohousing groups. This may be particularly true for those groups where the housing association had not included the membership fees in the rental contract, but required the cohousing group to collect the fees themselves. Indeed, one of the cases had serious problems regarding the continuity of the cohousing group as this leaves the remaining members with (unaffordable) costs for the common room.

7.2 What determinants are important in ensuring continuity of cohousing groups for elderly?

7.2.1 Shared activities in shared spaces

In order to maintain a sense of community within the group, activities in the living group must be held on a regular basis. Preferably on a weekly basis. Residents who live in the group for a longer period of time, more than ten years, and residents who are older, tend to participate less in activities. As put forward by all interviewees, the most important part of a residential group is the common room and they all mentioned that these shared spaces were an important part of their identity as a cohousing group. Without the common room, there is no living group. In the common room, the resident also makes contact with those who are not necessarily invited into their home. It is best to situate this room in such a way that its immediately visited when entering the apartment building. Such a location enforces encounters between residents. It happens that the communal space is not designed as such. In that case, it is mostly an apartment that has been arranged as a common room. It is also possible that the dwellings are not all at one corridor. Sometimes these are scattered throughout the building and the common room is not centrally located.

Participation in activities is often laid down in house rules. Participation is desirable but is not compulsory in practice. In addition there are house rules on topics that people prefer not to discuss in the group, such as politics and religion. Other rules are on household matters such as noise and the use of public spaces.

7.2.2 Care demands

Informal care is in all interviewed group provided by family caregivers and it was very clear that it was not considered the cohousing's responsibility to look after chronically ill members. Some groups have accommodation for family members who provide informal care, or set up a committee for this. Members look after each other, and provide assistance, but up to a certain level. As one interviewee explained, since they are of higher age themselves, this places a too high burden on them. Formal care is provided by professional organisations. Often there are several care organisations in one group fulfilling this task.

All interviewed cohousing groups were clear that if an aspiring member would develop a serious, chronic health condition, that they be rejected as a potential member to be placed on the waiting list. Indeed, interviewees made clear that if a member for instance developed dementia, in the end this would mean that such a member needs to move out, unless there is a partner able to address

al care demands.

In this sense age is relative. Age does not always go hand in hand with health. There are healthy people in their eighties and less healthy people in their sixties.

7.2.3 Waiting list policy

When an apartment becomes available it is customary for residents to choose their new occupants themselves. To avoid vacancy, cohousing groups place home-seekers on a waiting list and, depending on their motivation, they become aspirant members. Aspirant members are requested to participate in activities prior to their allocation. The current residents can then get to know the aspirant members.

There were two ways in which cohousing groups decide about new members if there is a waiting list. Some cases had decided formal rules, which means that the first aspirant member(s) on the waiting list get offered the dwelling, conditional on acceptance by the housing association. In one case, the board has the right to propose any candidate from the waiting list, irrespective of the time they were on that list. The existing residents know the aspirant members and can agree or not using their vote. It was argued that the latter procedure was particularly important to ensure the continuity of cohousing groups. The most successful selection process is the one selects the kind of person the cohousing group needs. For instance, although all residents in a residential group are fifty years of age or older, there might be a rather large difference in age between the youngest and oldest residents, sometimes even about forty years. All groups that existed for years mentioned the need to have a mix of ages. As a result, the cohousing group does not age together. Younger residents are also a guarantee for attracting new younger residents. However, it was also mentioned that a character that suits the group might be more important than age, and in this sense, it was mentioned a number of times that the cohousing group was actually in need of members willing to engage in governance.

7.2.4 Sustainable relations with the landlord

A good relationship with the landlord is very important for the continued existence of a housing group. In areas where there is a shortage of housing, the landlord himself may want to place residents who have an testimony of urgency, thereby endangering the group's continued existence. Placement of new residents by the landlord is also possible if the cohousing group itself is unable to nominate a new resident themselves. It is therefore important for housing groups to have aspirant members and to make agreements with the landlord about the duration of vacancy between occupants. Some landlords allow the tenants to temporarily rent the empty apartment until they have a candidate.

Rent harmonisation can lead to residents having a difference in the rent. This can lead to disagreement within the group and it invokes conflicts. One cohousing group made agreements with the landlord about this in advance, and here rent harmonisation was not an issue.

7.3 Recommendations

7.3.1 General recommendations

A number of lessons can be learned from this research in setting up a cohousing group for elderly.

- The first recommendation is to have a common room and shared outdoor space (garden). This common room should be close to the entrance to the cohousing. Without a common room, there is no cohousing group. Typically, cohousing groups all used a standard apartment as a common room, even if the cohousing group was very large. In addition, additional workshop space is very important as this will add to social cohesion and avoids disturbance of common activities if f.i. solvents were used in a painting workshop. A shared garden adds that it offers a shared activity to the benefit of all members.
- The second recommendation is to use a waiting list and require all aspiring members to actively participate with shared activities to distinguish between aspiring members whom have motives which are inconsistent with the social dimension of cohousing, and for instance prevent that aspiring members are only interested to become a member as a mean to bypass the regular waiting list for social housing in Delft. This also allows the existing members to get acquainted with future members.
- Thirdly, the formal admission procedure should not (only) be depending on length of time on the waiting list. The person who best fits in with the group members should be chosen. For instance, this may be someone who is also willing to take part in the governance of the cohousing group.
- The fourth recommendation is that it is important to strive for a broad age range as this will add to the continuity of the cohousing group. Not only will such a cohousing group stay more attractive to the younger aged elderly. A cohousing group that starts with members of about the same age, typically at about the age of retirement, will age together and become less attractive to new members below 65 years. It is not only a matter of a large age difference, but the cohousing group will as a whole also remain more stable regarding the individual needs for care. A mixed age group is more likely to support others, than a 'single age' group.
- The fifth recommendation is to include membership fees in the rental agreement to avoid the financial burden that will arise if members do not longer take part in the cohousing group. Especially the rent for the common room should be part of the rent.
- Finally, rent harmonization needs to be avoided as this negatively impacts the social cohesion. Member from the same cohousing group should have a rent that is similar to avoid discussions. Last, restrict access to the waiting list to those without compelling care demands? This is a question. In most of the researched cohousing group informal care is not given by members. Informal care is mainly given by family or professionals. Couples are an exception as they do give informal care to each other in cohousing.

7.3.2 Challenging the vision of PvF

Challenging the vision of PvF being only an institutional care provider. To date, PvF can be considered an institutional care provider aiming at lower people of lower and middle incomes. Since the enactment in 2015 of the current law on healthcare provision, however, the length of stay has been declined from about 7-9 years to 7-9 months. This means that once elderly are taken

into care at for instance the Bieslandhof, there are only few months left, and institutional care becomes the more and more terminal care (Tjoa, 2018). Currently, there are some care experiments, i.e. Pieters Kamerhuis and Pieters Behandelpraktijk. Pieters Kamerhuis is a residential provision for independently living elderly with a small care demand. Pieters behandelpraktijk is an integrated care experiment targeting independent living by elderly through the participating of a medical specialist elderly in the professional team. There are several reasons to make a strong plea for PvF to extend the regular care by considering experiments as Pieters Kamerhuis and Pieters behandelpraktijk as regular care, and including cohousing for elderly as a further alternative.

- First, a relocation into institutional terminal care is a major life event that negatively impacts the elderly's quality of life. By extending the care to include cohousing for elderly, the transition from independent living into fulltime care will be less disruptive. Elderly may already know care providers, and may feel more comfortable as they do not move outside their neighbourhood.
- Second, most cohousing groups concerned a mixture of couples and singles. If a person needs to be taken into care, often that is because a his or her family caregiver could no longer have the burden. Given the high number of vacancies for care professionals, including cohousing for independently living elderly into the regular activities of PvF, offers the partner to remain active as a nearby informal care provider when one has to be taken into the nursing department, will ease the burden of the informal care provider and improve the quality of life of the elderly taken into the nursing department, and lower the workload of nursing staff. Clearly, this needs PvF to reconsider their vision about the position of the informal caregiver. However, it should be noticed that PvF already has experience with non-professionals, as there are volunteers fulfilling several roles in the care institutes.
- Third, in making a plea for PvF to have cohousing groups for independently living elderly, it is also recommended to consider PvF as a service provider. From the case studies it appears that social cohesion is important and PvF has many specialists that may support these cohousing groups in achieving and supporting social cohesion, or engage in mediation if necessary. For instance, personnel involved in supervision of day care activities (activiteiten begeleid(st)ers) can also support cohousing groups in organizing workshops, or supporting the daily board in its activities. This may be an important add to the cohousing group for which PvF can charge a small fee.
- Indeed, this service function can be furthered into a surveillance function. If these professionals notice a care demand, they may notice the medical specialist elderly, much in the same way the team in Pieters Behandelpraktijk is used to work (Tjoa, 2018).
- Yet, the former recommendation should not be considered a plea to abandon autonomy. To age in dignity means that the cohousing group stays autonomous, meaning that professionals facilitate but not organize activities; that there is surveillance, but not enforcement. This autonomy is organized at the group level. That is, from the case studies it can be learned that cohousing groups take responsibility to look after one another. As mentioned, they assist each other with the kind of assistance good neighbours offer. However, all cohousing groups refused new aspiring members with existing care demands. It is strongly recommended that PvF allow cohousing groups this autonomy and not enforce that all members should have a minimum care demand. As explained in the interviews, an important reason was that if a new member for instance has existing signs of dementia, that may mean that this new member cannot well contribute to group interactions. Also, existing members were also facing declining health and for instance assisting a neighbour

after a fall can be too strenuous to themselves. However, not accepting new members with care demands does not mean that as a group, there are no care demands. With increasing age, several members will develop care demands. On average, groups had about 2 persons with care demands.

- Finally, in initiating or in continuing a group after a single person left the cohousing group, it is important to maintain a balance in age (wide age range), capacities (including governance), and care demands. It is not always that the eldest persons have the largest care demands, and are the first to die. The advantage of PvF facilitating cohousing groups for elderly may be that it might be one of the few cohousing groups for a 75 years old person to join.

8 Reflection on the graduation project

8.1 Reflection on the graduation process

For my graduation subject I wanted to choose what I call a social subject within Management in the Built Environment. This meant that I wanted to graduate on a subject in which the end user of real estate is central. And more specifically a subject that would be about residents and their immediate living surrounding. One of the graduation topics to choose was mental ownership, which was in line with my interests. I did my graduation in addition to my work, which resulted in the graduation project not going according to the regular schedule. After my P2, on advice of my lecturers, I changed the subject of my graduation and joined the then newly founded Health-Lab. In this lab, which focuses on the end user, students from different disciplines work together on an overarching subject. I have always experienced the joint meetings with several lecturers and students as very instructive. The various disciplines provide information that you yourself hadn't thought of at first. The Health-Lab also cooperates with the care institution Pieter van Foreest. For this care institution, I went looking for a new destination for their vacant real estate. Together with my teacher, I decided to do research into cohousing groups for elderly. You can learn from existing cohousing groups about how to organise such a group. In addition to a survey to obtain general information about cohousing groups I also, on the advice of my teachers, conducted interviews with residents. The enrichment and interpretation of the quantitative data by conducting interviews was for me one of the greatest learning moments of the graduation process.

8.2 Reflection on the subject

Care and, in particular, care for the elderly, is a relevant subject in The Netherlands. An ageing population and cutbacks in healthcare are putting healthcare under pressure. The government has been stimulating informal care for a number of years. Cohousing groups for elderly can be a new way to respond to this changing situation. Research into housing groups was mainly carried out in the 1970s and 1980s, when cohousing groups mainly had an idealistic basis. Current living groups for the elderly are still an underexposed field of study. The insights gained with this graduation project can contribute to the development of this type of housing and the possible advantages it offers in the field of care and support for elderly. In addition to general information about the demographics of these groups, examples from practice are also presented in this study. This makes it possible to learn valuable lessons about how to organise and facilitate such cohousing groups. The cohousing groups I approached for the interviews were, without exception, enthusiastic to give insight into the daily affairs in their group. I visited two residential groups together with my first teacher, two I interviewed on my own and two groups I visited together with two fellow students who carried out a study for their case studies education. They conducted a study into the feelings of control and comfort that residents experience in a such a cohousing group. During the interviews, the interviewees also shared personal information. Statements about people were made anonymous in the interview results so that no direct link can be made to these persons.

9 References

- Bakker, W., Hu, M., & Wittkämper, L. (2018). *Ouderenmonitor 2018*.
- Bouma, J., & Voorbij, L. (2008). Factors in social interaction in cohousing communities.
- Commissie Toekomst zorg thuiswonende ouderen. (2020). *Oud en zelfstandig in 2030 Een reisadvies*
Retrieved from <https://www.rijksoverheid.nl/documenten/rapporten/2020/01/15/oud-en-zelfstandig-in-2030-een-reisadvies>
- Glass, A. P. (2020). Sense of community, loneliness, and satisfaction in five elder cohousing neighborhoods. *Journal of Women & Aging*, 32(1), 3-27.
- Golant, S. (2011). The quest for residential normalcy by older adults: Relocation but one pathway. *Journal of aging studies*, 25, 193-205. doi:10.1016/j.jaging.2011.03.003
- Granbom, M., Himmelsbach, I., Haak, M., Löfqvist, C., Oswald, F., & Iwarsson, S. (2014). Residential normalcy and environmental experiences of very old people: Changes in residential reasoning over time. *Journal of aging studies*, 29, 9-19.
- Hammond, M. (2018). Spatial Agency: Creating New Opportunities for Sharing and Collaboration in Older People's Cohousing. *Urban Science*, 2, 64.
- Kesler, E. B. T. A. (1988). Wonen in groepsverband, in het bijzonder voor ouderen. *Tijdschrift voor Huishoudkunde*, 9(2).
- Kooiker, S., De Jong, A., Verbeek-Oudijk, D., & De Boer, A. (2019). *Toekomstverkenning mantelzorg aan ouderen in 2040 Een verkenning van de regionale ontwikkelingen voor de komende 20 jaar*. Den Haag.
- Moerman, G. A. (2010). *Probing behaviour in open interviews A field experiment on the effects of Probing Tactics on Quality and Content of the Received Information*. VU Vrije Universiteit,
- Nuesink, R. O. (2016). *Woongroepen: de continuïteit van collectiviteit*. Radboud Universiteit
- Sociaal en Cultureel Planbureau. (2019). In 2040 meer mantelzorg van ouderen voor andere ouderen. Retrieved from <https://www.scp.nl/actueel/nieuws/2019/11/08/in-2040-meer-mantelzorg-van-ouderen-voor-andere-ouderen>
- Tinker, A., Ginn, J., & Ribe, E. (2013). The Long Term Care Revolution: A study of innovatory models to support older people with disabilities in the Netherlands. *Housing Learning and Improvement Network*.
- Tjoa, L. L. (2018). *Better together The short-term care centre as a means for integrated care - a qualitative study*. TU Delft,

Verbeek-Oudijk, D., Woittiez, I., Eggink, E., & Putman, L. (2014). *Who cares in Europe? A comparison of long term care for the over 50s in sixteen European countries*.

WHO. (2017, 12-12-2017). Mental health of older adults. Retrieved from <https://www.who.int/news-room/fact-sheets/detail/mental-health-of-older-adults>

10 Annexes

10.1 Annex 1 Questionnaire

Woongroepen Langer Zelfstandig Wonen

Intro Beste meneer/mevrouw,

Bedankt voor uw interesse! Vanwege de veranderingen in de zorg moeten mensen steeds meer voor elkaar gaan zorgen. Voor mijn onderzoek wil ik leren van bestaande woongroepen voor personen van 50 jaar en ouder om advies te kunnen geven aan een zorginstelling. Net als veel andere zorginstellingen is deze instelling op zoek naar nieuwe gebruiksmogelijkheden voor leegstaande verpleeg- en verzorgingshuizen. Wat dit onderzoek bijzonder maakt, is dat we niet alleen naar betaalbare technische mogelijkheden kijken. We zijn vooral geïnteresseerd in de organisatie van de woongroep en waar de grenzen liggen van de zorg die mensen aan elkaar kunnen geven.

Wij willen een goed advies geven en hebben uw hulp daarbij nodig. Wij vragen daarom 20 minuten van uw tijd. Om u te belonen voor uw hulp verloten we 3 bossen bloemen onder de deelnemers. Wilt u mee doen aan dit onderzoek en aan de online vragenlijst beginnen? Als u hieronder aangeeft mee te willen doen met het onderzoek, geeft u toestemming voor het verzamelen, bewaren en inzien van de door u verstrekte gegevens.

- ☐ Ja, ik doe graag mee aan het onderzoek (1)
- ☐ Nee, ik doe niet mee aan het onderzoek (2)
- ☐ Ik twijfel nog, ik wil graag meer informatie (3)

Skip To: Intro_vervolg If Beste meneer/mevrouw, Bedankt voor uw interesse! Vanwege de veranderingen in de zorg moeten m... = Ik twijfel nog, ik wil graag meer informatie

Skip To: End of Survey If Beste meneer/mevrouw, Bedankt voor uw interesse! Vanwege de veranderingen in de zorg moeten m... = Nee, ik doe niet mee aan het onderzoek

Skip To: End of Block If Beste meneer/mevrouw, Bedankt voor uw interesse! Vanwege de veranderingen in de zorg moeten m... = Ja, ik doe graag mee aan het onderzoek

Intro_vervolg Meedoen aan het onderzoek is natuurlijk vrijwillig. U kunt de vragenlijst ook pauzeren en op een later moment verdergaan. Wilt u tijdens het invullen van de vragenlijst stoppen dan kan dat. U hoeft hiervoor geen reden op te geven maar wij zouden de vragen die u wel hebt ingevuld graag gebruiken voor het onderzoek. Uw gegevens en antwoorden blijven vertrouwelijk en zijn niet naar u persoonlijk te herleiden. Als u de resultaten van het onderzoek wilt ontvangen dan kunt u aan het einde van de vragenlijst uw contactgegevens

invullen. Als u de vragenlijst liever niet per computer invult, kunt u contact opnemen met het secretariaat housing van de TU Delft (015 278 1288). Het secretariaat kan dan zorgen dat u een vragenlijst krijgt toegestuurd, of dat u wordt teruggebeld. U kunt ook per email contact opnemen met de onderzoekers, Waling Bergsma (W.Bergsma@student.tudelft.nl) en Dr. Clarine van Oel (c.j.vanoel@tudelft.nl). Ook later kunt u voor vragen per email contact opnemen met ons.

Wilt u mee doen aan dit onderzoek en aan de online vragenlijst beginnen? Als u hieronder aangeeft mee te willen doen met het onderzoek, geeft u toestemming voor het verzamelen, bewaren en inzien van de door u verstrekte gegevens.

- ☐ Ja, ik doe graag mee aan het onderzoek (1)
- ☐ Nee, ik doe niet mee aan het onderzoek (2)

Skip To: End of Survey *If Meedoen aan het onderzoek is natuurlijk vrijwillig. U kunt de vragenlijst ook pauzeren en op een... = Nee, ik doe niet mee aan het onderzoek*

Samenstelling woongroep

Q3 Uit hoeveel huishoudens bestaat de woongroep? (Vul hieronder een getal in).

Q4 Wonen er kinderen onder de 18 jaar in de woongroep?

- ☐ Ja, namelijk: (1) _____
- ☐ Nee (2)

Q5 Uit hoeveel eenpersoons huishoudens bestaat de woongroep? (Vul hieronder een getal in).

Q6 Uit hoeveel tweepersoons huishoudens bestaat de woongroep? (Vul hieronder een getal in).

Q7 Zijn er huishoudens met meer dan twee personen?

- ☐ Ja, namelijk: (1) _____
- ☐ Nee (2)

Q8 Kunt voor elke leeftijdscategorie invullen hoeveel mannen en vrouwen er in deze leeftijdscategorie vallen? (Er is alvast een nul ingevuld maar daar kan overheen getypt worden).

	to t 5 0 jaa r (1)	50 to t 55 (2)	55 to t 60 (3)	60 to t 65 (4)	65 to t 70 (5)	70 to t 75 (6)	75 to t 80 (7)	80 tot 85 (8)	85 to t 90 (9)	90 tot 95 (10)	95 tot 100 (11)	100 jaar en oud er (12)
Vrouwen (1)												
Manne n (2)												

Q9 Zijn er bewoners met een andere culturele achtergrond dan de Nederlandse?

- ☐ Ja, namelijk: (2) _____
- ☐ Nee (3)
- ☐ Dat weet ik niet (4)

Q10 Hoeveel bewoners hebben betaald werk? (Vul hieronder een getal in).

- ☐ Aantal werkenden is: (1) _____

Q11 Hoeveel bewoners doen vrijwilligerswerk?

- ☐ Het aantal bewoners dat vrijwilligers werk doet is: (1) _____

Woningen

Q12 Uit hoeveel woningen bestaat de woongroep?

- ☐ Het aantal woningen is: (1) _____

Q13 Beschikken alle woonruimten over eigen kookgelegenheid?

- ☐ Ja (1)
- ☐ Nee (2)
- ☐ Anders, namelijk: (3) _____

Q14 Beschikken alle woonruimten over eigen sanitaire voorzieningen?

- ☐ Ja (1)
- ☐ Nee (2)
- ☐ Anders, namelijk: (3) _____

Q15 Beschikken alle woonruimten over een eigen buitenruimte?

- ☐ Ja, een balkon (1)
- ☐ Ja, een tuin (2)
- ☐ Anders, namelijk: (3) _____
- ☐ Nee (4)

Q16 Beschikken alle woonruimten over een eigen berging voor fietsen?

- ☐ Ja (1)
- ☐ Nee (2)
- ☐ Anders, namelijk: (3) _____

Q17 Zijn er woonruimten in de sociale huur?

- ☐ Ja, het aantal woonruimten in de sociale huur is: (2) _____
- ☐ Nee (3)

Q18 Zijn er woonruimten in de particuliere huur?

- ☐ Ja, het aantal woonruimten in de particuliere huur is: (2) _____
- ☐ Nee (3)

Q19 Zijn er woonruimten die in eigendom zijn van de bewoner(s)? (Koop).

- ☐ Ja, het aantal woonruimten in eigendom van de bewoner(s) is: (2) _____
- ☐ Nee (3)

Woongebouw

Q20 Uit hoeveel etages bestaat het woongebouw? _____

Q21 Is er in het woongebouw een lift aanwezig?

- ☐ Ja (1)
- ☐ Nee (2)

Q22 Wonen er in het gebouw meerdere woongroepen?

- ☐ Ja, namelijk: (2) _____
- ☐ Nee (3)

Q23 Wordt het gebouw alleen gebruikt door uw woongroep?

- ☐ Ja (1)
- ☐ Nee, het gebouw wordt ook gebruikt door: (2) _____

Q24 Is het woongebouw oorspronkelijk gebouwd voor een woongroep?

- ☐ Ja (1)
- ☐ Nee, het had oorspronkelijk een andere functie en is verbouwd voor onze woongroep. (2)
- ☐ Anders, namelijk: (4) _____

Q24 Is het woongebouw oorspronkelijk gebouwd voor een woongroep?

- ☐ Ja (1)
- ☐ Nee, het had oorspronkelijk een andere functie en is verbouwd voor onze woongroep. (2)
- ☐ Anders, namelijk: (4) _____

Voorzieningen

Q25 Kunt u aangeven welke voorzieningen er door de woongroep worden gedeeld?

- ☐ Keuken (1)
- ☐ Tuin (2)
- ☐ Wasmachine (3)
- ☐ Woonkamer (4)
- ☐ Auto (5)
- ☐ Sportvoorzieningen (6)
- ☐ Bibliotheek (7)
- ☐ Fietsenberging (8)
- ☐ Kranten/tijdschriften (9)
- ☐ Anders, namelijk: (10) _____

Q26 Kunnen de voorzieningen in de woongroep ook gebruikt worden door personen die niet in de woongroep wonen?

- ☐ Nee (1)
- ☐ Ja, de volgende voorzieningen kunnen ook door anderen gebruikt worden: (2) _____

Q27 Kunt u aangeven hoeveel parkeerplekken er bij de woongroep zijn?

- ☐ Het aantal parkeerplekken is: (1) _____

Q28 Zijn de parkeerplekken gereserveerd voor bewoners van de woongroep?

- ☐ Ja (1)
- ☐ Nee (2)
- ☐ Anders, namelijk: (3) _____

Q29 Welke van de volgende voorzieningen zijn op loopafstand van de woongroep?

- ☐ Supermarkt (1)
- ☐ Bakker (2)
- ☐ Slager (3)
- ☐ Groentewinkel (4)
- ☐ Huisarts (5)
- ☐ Sportvoorzieningen (6)
- ☐ Bushalte (7)
- ☐ Station (8)
- ☐ Buurthuis (9)
- ☐ Anders, namelijk: (10) _____

Organisatie

Q30 In welk jaar is de woongroep gestart? (Het gaat hier om de bewoning niet het bouwen voortraject).

- ☐ De woongroep is gestart in: (jaartal) (1) _____

Q31 Zijn er bewoners die er vanaf de start van de woongroep wonen?

- ☐ Ja (1)
- ☐ Nee (2)

Q32 Hoe groot is de wachtlijst op dit moment voor vrij te komen woningen?

- ☐ Aantal huishoudens op de wachtlijst is op dit moment: (1) _____

Q33 Is er een aannamebeleid voor nieuwe bewoners?

- ☐ Ja (1)
- ☐ Nee (2)

Q34 Waar is het aannamebeleid gebaseerd:

- ☐ Leeftijd (1)
- ☐ Inschrijfduur (2)
- ☐ Overeenstemming / in overleg met huidige bewoners (3)
- ☐ Anders, namelijk: (4) _____

Q35 Bepalen de huidige bewoners wie de nieuwe bewoners worden?

- ☐ Ja (1)
- ☐ Nee dat wordt bepaald door: (2) _____

Q36 Zijn er huisregels of samenleefregels opgesteld? Zo ja, waarop hebben deze regel betrekking?

- ☐ Ja er zijn regels op het gebied van de volgende zaken: (2) _____
- ☐ Nee (3)

Q37 Zijn er afspraken gemaakt over verantwoordelijkheden? (Verantwoordelijkheden voor bijvoorbeeld onderhoud, schoonmaak, gezamenlijke financiën, etc.).

- ☐ Nee (1)
- ☐ Ja, er zijn afspraken over de volgende zaken: (2) _____

Zorg

Q38 Wonen er in de woongroep bewoners met een zorgvraag?

- ☐ Ja (1)
- ☐ Nee (2)

Skip To: Q42 If Wonen er in de woongroep bewoners met een zorgvraag? = Nee

Q39 Wilt u aangeven hoeveel bewoners er zijn met een zorgvraag?

- ☐ Het aantal bewoners met een zorgvraag is: (1) _____

Q40 Is er voor de bewoners met een zorgvraag mantelzorg aanwezig?

- ☐ Ja (1)
- ☐ Nee (2)
- ☐ Anders, namelijk: (3) _____

Q41 Door wie wordt de mantelzorg voor de bewoners met een zorgvraag geleverd?

- ☐ Partner (1)
- ☐ Familie (anders dan de partner) (2)
- ☐ Vrienden (3)
- ☐ Medebewoners (4)
- ☐ Professionals (5)
- ☐ Anders, namelijk: (6) _____

Q42 Is er bij de inrichting van de woongroep rekening gehouden met het leveren van mantelzorg?

- ☐ Ja, namelijk door: (1) _____
- ☐ Nee (2)
- ☐ Anders, namelijk: (3) _____

Q43 Is er een logeerruimte in het woongebouw?

- ☐ Ja (2)
- ☐ Nee (3)
- ☐ Anders, namelijk: (4) _____

Overige zaken

Q44 Als u informatie wil toevoegen die niet in bovenstaande vragen zijn beantwoord kunt u die hier toevoegen:

Afsluiting enquête

Q45 Mogen wij u benaderen voor een vervolgonderzoek?

- ☐ Ja (1)
- ☐ Nee (2)

Skip To: Q46 If Mogen wij u benaderen voor een vervolgonderzoek? = Ja

Skip To: Q47 If Mogen wij u benaderen voor een vervolgonderzoek? = Nee

Q46 Hieronder kunt u uw contactgegevens invullen voor een eventueel vervolgonderzoek:

Q47 Als u de resultaten van dit onderzoek wilt ontvangen kunt u hieronder uw e-mailadres noteren:

Q48 Bedankt voor uw deelname aan het onderzoek.

10.2 Annex 2 Survey results

Samenstelling woongroep

Q3 - Uit hoeveel huishoudens bestaat de woongroep?

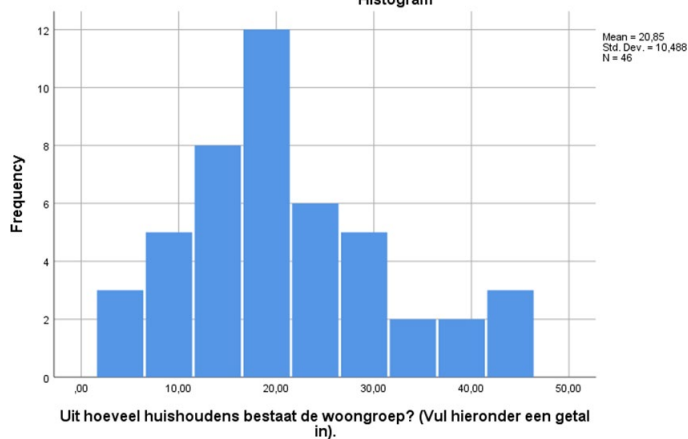
Case Processing Summary

	Valid		Cases Missing		Total	
	N	Percent	N	Percent	N	Percent
Uit hoeveel huishoudens bestaat de woongroep? (Vul hieronder een getal in).	46	80,7%	11	19,3%	57	100,0%

Descriptives

		Statistic	Std. Error
Uit hoeveel huishoudens bestaat de woongroep? (Vul hieronder een getal in).	Mean	20,8478	1,54637
	95% Confidence Interval for Mean	Lower Bound	17,7333
		Upper Bound	23,9624
	5% Trimmed Mean	20,4734	
	Median	19,5000	
	Variance	109,999	
	Std. Deviation	10,48802	
	Minimum	4,00	
	Maximum	46,00	
	Range	42,00	
	Interquartile Range	14,50	
	Skewness	,637	,350
	Kurtosis	-,039	,688

Histogram

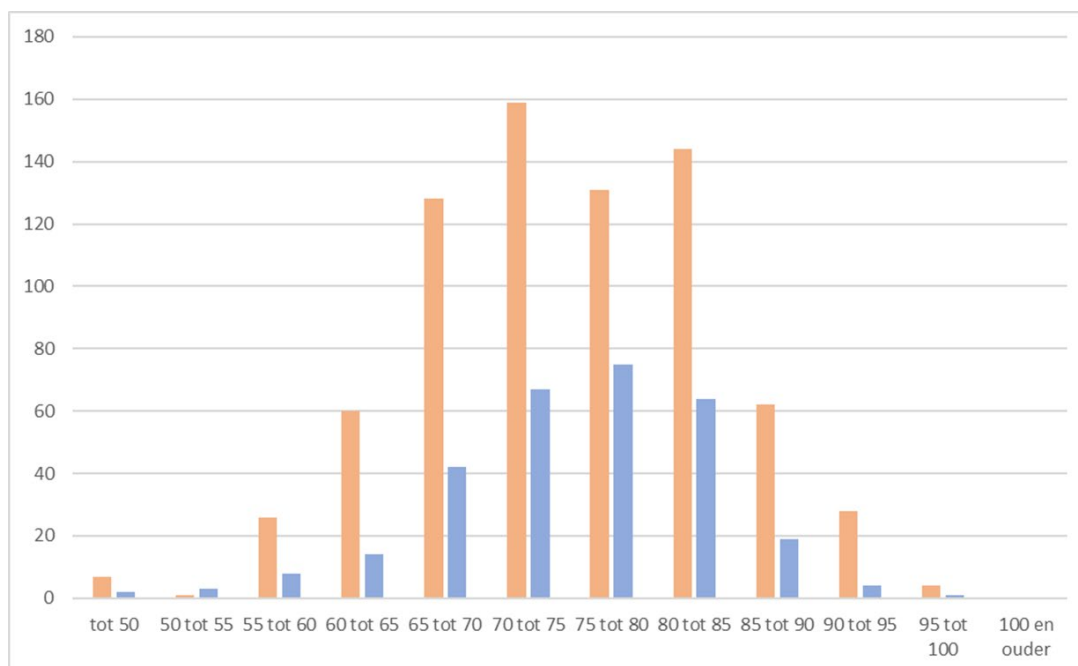


Q7 - Zijn er huishoudens met meer dan twee personen?

Zijn er huishoudens met meer dan twee personen? - Selected Choice

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Ja, namelijk:	4	7,0	8,7	8,7
	Nee	42	73,7	91,3	100,0
	Total	46	80,7	100,0	
Missing	System	11	19,3		
Total		57	100,0		

Q8 - Kunt voor elke leeftijdscategorie invullen hoeveel mannen en vrouwen er in deze leeftijdscategorie vallen?



Q9 - Zijn er bewoners met een andere culturele achtergrond dan de Nederlandse?

Zijn er bewoners met een andere culturele achtergrond dan de Nederlandse? - Selected Choice

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Ja, namelijk:	8	14,0	18,6	18,6
	Nee	35	61,4	81,4	100,0
	Total	43	75,4	100,0	
Missing	System	14	24,6		
Total		57	100,0		

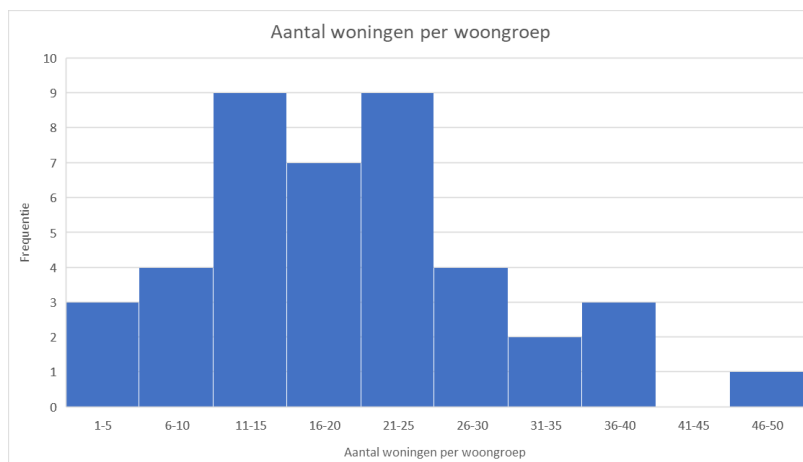
Q10 - Hoeveel bewoners hebben betaald werk? 100 van de 1049. Oftewel 9,5%

Q-11 Hoeveel bewoners doen vrijwilligerswerk? 312 van de 1049. Oftewel 29,7%

Woningen

Q12 - Uit hoeveel woningen bestaat de woongroep?

Descriptive Statistics					
N		Minimum	Maximum	Mean	Std. Deviation
Q12 nr houses	43	,00	46,00	19,7209	10,10263
Valid N (listwise)	43				



Q13 - Beschikken alle woonruimten over eigen kookgelegenheid?

**Beschikken alle woonruimten over eigen kookgelegenheid?
- Selected Choice**

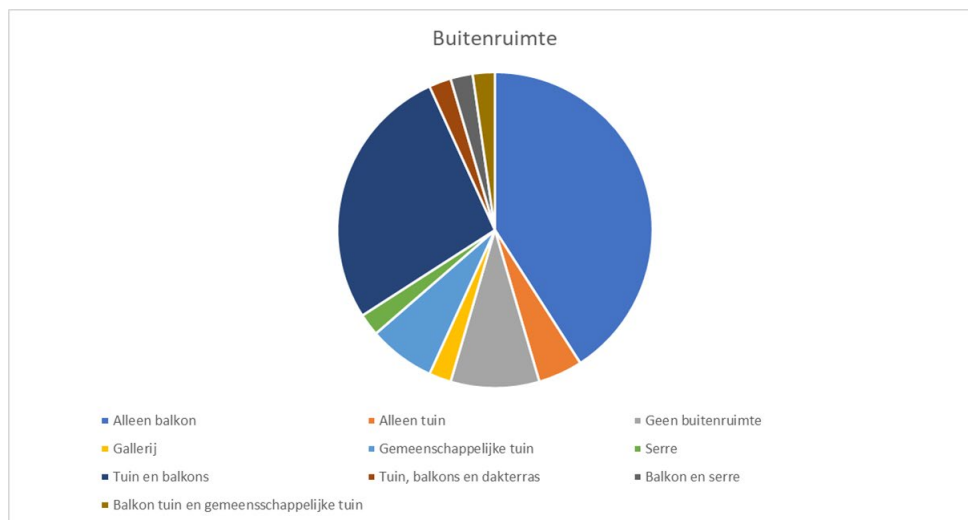
		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Ja	42	73,7	97,7	97,7
	Nee	1	1,8	2,3	100,0
	Total	43	75,4	100,0	
Missing	System	14	24,6		
Total		57	100,0		

Q14 - Beschikken alle woonruimten over eigen sanitaire voorzieningen?

**Beschikken alle woonruimten over eigen sanitaire
voorzieningen? - Selected Choice**

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Ja	42	73,7	97,7	97,7
	Nee	1	1,8	2,3	100,0
	Total	43	75,4	100,0	
Missing	System	14	24,6		
Total		57	100,0		

Q15 - Beschikken alle woonruimten over een eigen buitenruimte?



Q16 - Beschikken alle woonruimten over een eigen berging voor fietsen?

Beschikken alle woonruimten over een eigen berging voor fietsen? - Selected Choice

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Ja	23	40,4	53,5	53,5
	Nee	4	7,0	9,3	62,8
	Anders, namelijk:	16	28,1	37,2	100,0
	Total	43	75,4	100,0	
Missing	System	14	24,6		
Total		57	100,0		

De optie anders is door alle ingevuld als gezamenlijke fietsenberging

Q17 - Zijn er woonruimten in de sociale huur?

Zijn er woonruimten in de sociale huur? - Selected Choice

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Ja, het aantal woonruimten in de sociale huur is:	36	61,0	81,8	81,8
	Nee	8	13,6	18,2	100,0
	Total	44	74,6	100,0	
Missing	System	15	25,4		
Total		59	100,0		

Q18 - Zijn er woonruimten in de particuliere huur?

Zijn er woonruimten in de particuliere huur? - Selected Choice

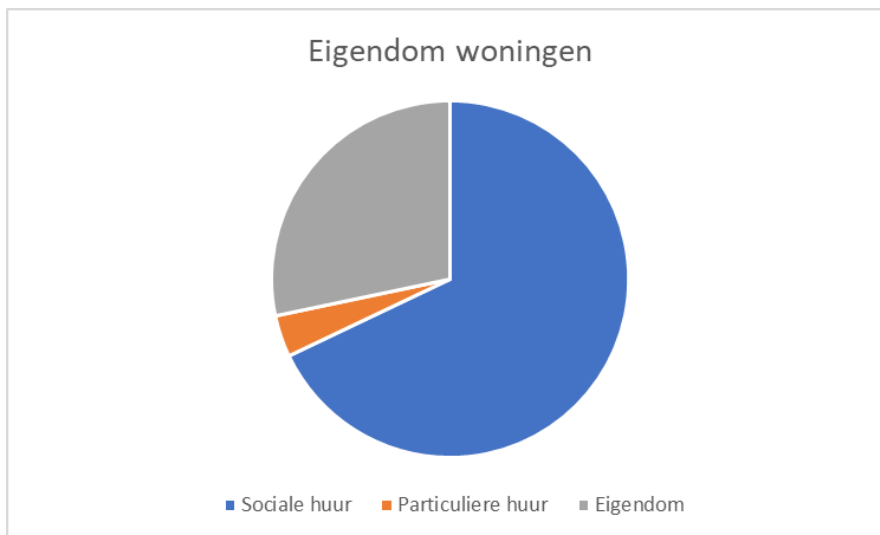
		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Ja, het aantal woonruimten in de particuliere huur is:	2	3,4	4,5	4,5
	Nee	42	71,2	95,5	100,0
	Total	44	74,6	100,0	
Missing	System	15	25,4		
Total		59	100,0		

Q19 - Zijn er woonruimten die in eigendom zijn van de bewoner(s)? (Koop).

**Zijn er woonruimten die in eigendom zijn van de bewoner(s)? (Koop). -
Selected Choice**

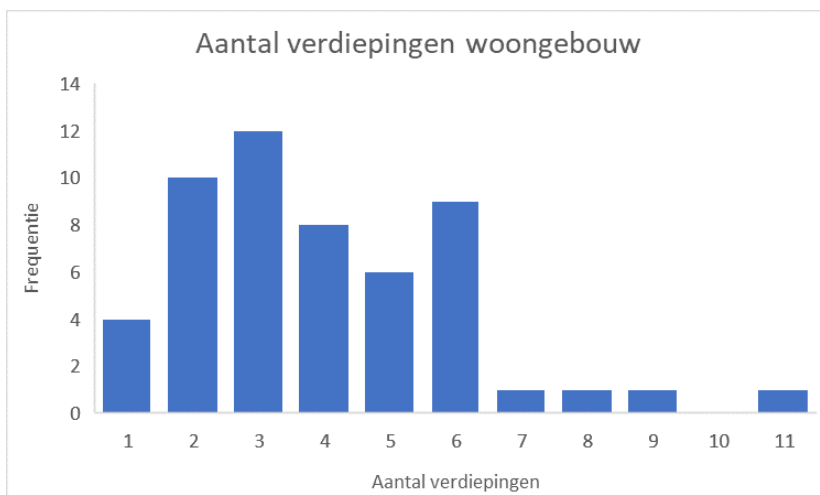
		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Ja, het aantal woonruimten in eigendom van de bewoner(s) is:	15	25,4	34,1	34,1
	Nee	29	49,2	65,9	100,0
	Total	44	74,6	100,0	
Missing	System	15	25,4		
Total		59	100,0		

Q17-19 – Eigendom verhoudingen woningen



Woongebouw

Q20 - Uit hoeveel etages bestaat het woongebouw?



Uit hoeveel etages bestaat het woongebouw?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid		15	25,4	25,4	25,4
	1	2	3,4	3,4	28,8
	2	6	10,2	10,2	39,0
	2 (en begane grond)	1	1,7	1,7	40,7
	2 metzolder	1	1,7	1,7	42,4
	2, dus 3 woonlagen	1	1,7	1,7	44,1
	3	8	13,6	13,6	57,6
	3 EN 5	1	1,7	1,7	59,3
	4	6	10,2	10,2	69,5
	4 en. 6 en 11	1	1,7	1,7	71,2
	4 woonlagen	1	1,7	1,7	72,9
	5	4	6,8	6,8	79,7
	6	2	3,4	3,4	83,1
	7	3	5,1	5,1	88,1
	8	1	1,7	1,7	89,8
	9	1	1,7	1,7	91,5
	gedeeltelijk 1, gedeeltelijk 2	1	1,7	1,7	93,2
	parterre, eerste etage en tweede etage.	1	1,7	1,7	94,9
	twee woonlagen	1	1,7	1,7	96,6
	wij hebben 4 huizen, geen woongebouw	1	1,7	1,7	98,3
	Zes, waarvan voor ons drie etages	1	1,7	1,7	100,0
	Total	59	100,0	100,0	

Q21 - Is er in het woongebouw een lift aanwezig?

Is er in het woongebouw een lift aanwezig?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Ja	40	67,8	90,9	90,9
	Nee	4	6,8	9,1	100,0
	Total	44	74,6	100,0	
Missing	System	15	25,4		
Total		59	100,0		

Q22 - Wonen er in het gebouw meerdere woongroepen?

Wordt het gebouw alleen gebruikt door uw woongroep? - Selected Choice

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Ja	26	44,1	60,5	60,5
	Nee, het gebouw wordt ook gebruikt door:	17	28,8	39,5	100,0
	Total	43	72,9	100,0	
Missing	System	16	27,1		
Total		59	100,0		

Wordt het gebouw alleen gebruikt door uw woongroep? - Nee, het gebouw wordt ook gebruikt door: - Text

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid		42	71,2	71,2	71,2
	2 gezinnen in 2 koopwoningen	1	1,7	1,7	72,9
	4 commerciële ruimten	1	1,7	1,7	74,6
	44 woningen waarvan 19 woningen voor de woongroep voor ouderen.	1	1,7	1,7	76,3
	48 woningen, 5 bewoners niet bij woongroepen	1	1,7	1,7	78,0
	andere 55+	1	1,7	1,7	79,7
	Andere bewoners	1	1,7	1,7	81,4
	Andere huurders en een begeleid wonen afdeling van Abrona	1	1,7	1,7	83,1
	bestaat uit 70 woningen	1	1,7	1,7	84,7
	de andere woongroep	1	1,7	1,7	86,4
	Een groot aantal zelfstandige huurwoningen	1	1,7	1,7	88,1
	Het is een complex met 114 appartementen	1	1,7	1,7	89,8
	Huishoudens van "gewone" mensen	1	1,7	1,7	91,5
	Huurders van de woningbouwvereniging	1	1,7	1,7	93,2
	NEE, OOK DOOR KOPERS DIE GEEN LID VAN DE WOONGROEP ZIJN	1	1,7	1,7	94,9
	ook gebruikt door zorginstelling Gemiva	1	1,7	1,7	96,6
	WAMO woningen op de beg. grond.	1	1,7	1,7	98,3
	woningbouw	1	1,7	1,7	100,0
	Total	59	100,0	100,0	

Q24 -Is het woongebouw oorspronkelijk gebouwd voor een woongroep?

Is het woongebouw oorspronkelijk gebouwd voor een woongroep? - Selected Choice

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Ja	28	47,5	63,6	63,6
	Nee, het had oorspronkelijk een andere functie en is verbouwd voor onze woongroep.	4	6,8	9,1	72,7
	Anders, namelijk:	12	20,3	27,3	100,0
	Total	44	74,6	100,0	
Missing	System	15	25,4		
Total		59	100,0		

Is het woongebouw oorspronkelijk gebouwd voor een woongroep? - Anders, namelijk: - Text

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid		47	79,7	79,7	79,7
	als seniorencomplex	1	1,7	1,7	81,4
	De 2 etages in het flatgebouw zijn als woongroep gebouwd, de rest als woningen voor 2,3,4 persoonshuishoudens	1	1,7	1,7	83,1
	De woongroep is "ingebreed" in het flatgebouw	1	1,7	1,7	84,7
	Gebouwd voor woongroep en sociale huur.	1	1,7	1,7	86,4
	het is een villa uit 1915	1	1,7	1,7	88,1
	Het zijn gewone woningen, die vanaf het begin bewoond zijn door woongroepen	1	1,7	1,7	89,8
	moet nog ge/verbouwd worden	1	1,7	1,7	91,5
	Van een nieuw appartementencomplex is in 2018 een portiek voor onze woongroep bestemd.. Niet speciaal gebouwd voor een woongroep	1	1,7	1,7	93,2
	Vanaf start wel duidelijk dat drie etages voor onze woongroep waren,	1	1,7	1,7	94,9
	Vroeger belastingkantoor	1	1,7	1,7	96,6
	Wij als woongroep kregen in dit nieuwe complex 24 appartementen	1	1,7	1,7	98,3
	wij hebben geen woongebouw	1	1,7	1,7	100,0
Total		59	100,0	100,0	

Voorzieningen

Q25 - Kunt u aangeven welke voorzieningen er door de woongroep worden gedeeld?

Gedeelde voorziening	Frequentie
Keuken	8
Tuin	24
Wasmachine	8
Woonkamer	11
Auto	1
Sportvoorzieningen	2
Bibliotheek	8
Fietsenberging	24
Kranten/tijdschriften	7
Logeerkamers	5

Q26 - Kunnen de voorzieningen in de woongroep ook gebruikt worden door personen die niet in de woongroep wonen?

Kunnen de voorzieningen in de woongroep ook gebruikt worden door personen die niet in de woongroep wonen? - Selected Choice

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Nee	31	52,5	70,5	70,5
	Ja, de volgende voorzieningen kunnen ook door anderen gebruikt worden:	13	22,0	29,5	100,0
	Total	44	74,6	100,0	
Missing	System	15	25,4		
Total		59	100,0		

Kunnen de voorzieningen in de woongroep ook gebruikt worden door personen die niet in de woongroep wonen? - Ja, de volgende voorzieningen kunnen ook door anderen gebruikt worden: - Text

	Frequency	Percent	Valid Percent	Cumulative Percent
Valid	46	78,0	78,0	78,0
-gemeenschappelijke ruimte ,alleen als er een woongroep lid bij aanwezig is - hobbyruimte,als er een woongroep lid bij aanwezig is -tuin	1	1,7	1,7	79,7
activiteiten	1	1,7	1,7	81,4
De eetkamer wordt soms voor vergaderingen gebruikt, vooral voor groepjes die in de buurt actief zijn.	1	1,7	1,7	83,1
de gemeenschappelijke "woonkamer"	1	1,7	1,7	84,7
De huiskamer	1	1,7	1,7	86,4
de woonkamer als stoelgym ruimte en eventueel vergaderruimte voor de gemeente	1	1,7	1,7	88,1
gemeenschappelijke ruimte	1	1,7	1,7	89,8
hebben we nog niet over nagedacht	1	1,7	1,7	91,5
logeerkamer	2	3,4	3,4	94,9
Logeerruimte,	1	1,7	1,7	96,6
onze gemeenschappelijke ruimte wordt aan derden verhuurd (per dagdeel)	1	1,7	1,7	98,3
RECREATIEZAAL	1	1,7	1,7	100,0
Total	59	100,0	100,0	

Q27 - Kunt u aangeven hoeveel parkeerplekken er bij de woongroep zijn?

**Kunt u aangeven hoeveel parkeerplekken er bij de woongroep zijn? -
Het aantal parkeerplekken is: - Text**

	Frequency	Percent	Valid Percent	Cumulative Percent
Valid	15	25,4	25,4	25,4
0	5	8,5	8,5	33,9
10	3	5,1	5,1	39,0
12	2	3,4	3,4	42,4
13	1	1,7	1,7	44,1
14	1	1,7	1,7	45,8
18	2	3,4	3,4	49,2
19	1	1,7	1,7	50,8
2	2	3,4	3,4	54,2
20	3	5,1	5,1	59,3
21	1	1,7	1,7	61,0
25	1	1,7	1,7	62,7
3 plus 12 openbare	1	1,7	1,7	64,4
30	1	1,7	1,7	66,1
4 auto boxen en 2 vrije plaatsen	1	1,7	1,7	67,8
42	1	1,7	1,7	69,5
5	2	3,4	3,4	72,9
50	1	1,7	1,7	74,6
6	2	3,4	3,4	78,0
9	1	1,7	1,7	79,7
alleen openbare	1	1,7	1,7	81,4
Er geen geen vaste parkeerplaatsen voor de woongro	1	1,7	1,7	83,1
geen	1	1,7	1,7	84,7
Geen	1	1,7	1,7	86,4
genoeg	1	1,7	1,7	88,1
gewoon in de straat	1	1,7	1,7	89,8
Groot parkeerterrein voor alle bewoners	1	1,7	1,7	91,5
grote parkeerplaats voor de hele flat	1	1,7	1,7	93,2
ongeveer 25	1	1,7	1,7	94,9
openbaar	1	1,7	1,7	96,6
voldoende	1	1,7	1,7	98,3
Zij individuele parkeerplaatsen	1	1,7	1,7	100,0
Total	59	100,0	100,0	

Q28 - Zijn de parkeerplekken gereserveerd voor bewoners van de woongroep?

**Zijn de parkeerplekken gereserveerd voor bewoners van de
woongroep? - Selected Choice**

	Frequency	Percent	Valid Percent	Cumulative Percent
Valid				
Ja	6	10,2	13,6	13,6
Nee	31	52,5	70,5	84,1
Anders, namelijk:	7	11,9	15,9	100,0
Total	44	74,6	100,0	
Missing				
System	15	25,4		
Total	59	100,0		

Zijn de parkeerplekken gereserveerd voor bewoners van de woongroep? - Anders, namelijk: - Text

	Frequency	Percent	Valid Percent	Cumulative Percent
Valid	52	88,1	88,1	88,1
12 van de 19	1	1,7	1,7	89,8
18 voor bewoners en 3 voor bezoekers	1	1,7	1,7	91,5
2 garages	1	1,7	1,7	93,2
betaald parkeren in het centrum	1	1,7	1,7	94,9
er zijn 8 garages en 4 parkeerplaatsen	1	1,7	1,7	96,6
iedere bewoners kan in principe een parkeerplek huren in de garage die onder de grond ligt	1	1,7	1,7	98,3
wel de autoboxen, niet de vrije plaatsen zijn gereserveerd voor de bewoners	1	1,7	1,7	100,0
Total	59	100,0	100,0	

Q29 - Welke van de volgende voorzieningen zijn op loopafstand van de woongroep?

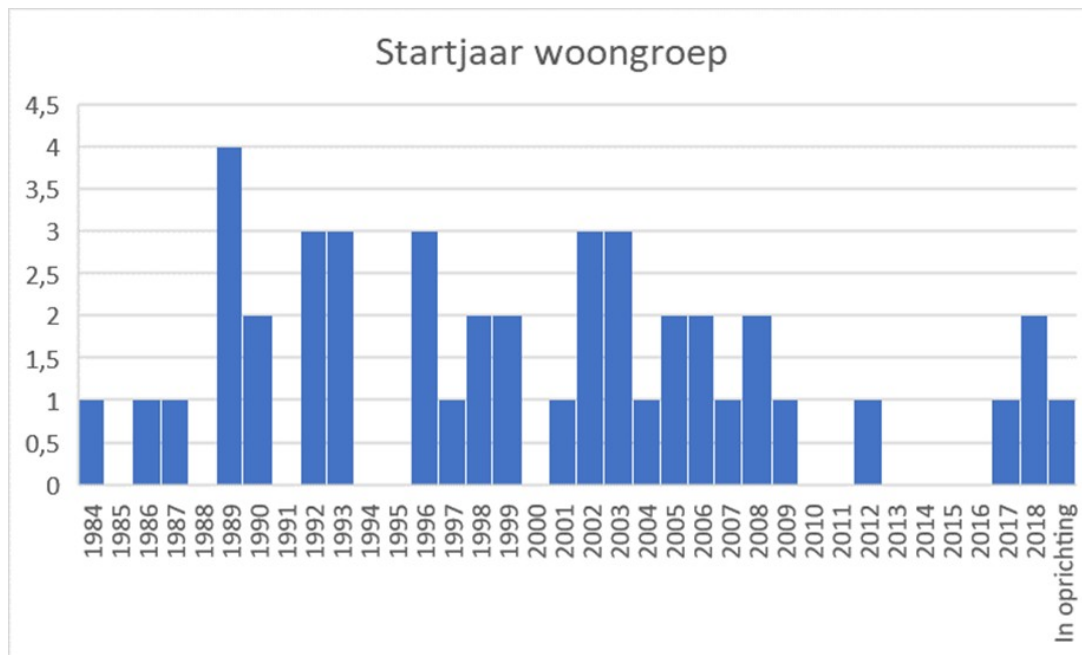
Percentage van alle woogroepen dat de voorziening op loop afstand noemt:	
Supermarkt	71%
Bakker	51%
Slager	49%
Groentewinkel	37%
Huisarts	58%
Sportvoorzieningen	31%
Bushalte	67%
Station	24%
Buurthuis	29%

Welke van de volgende voorzieningen zijn op loopafstand van de woongroep? - Anders, namelijk: - Text

	Frequency	Percent	Valid Percent	Cumulative Percent
Valid	48	81,4	81,4	81,4
Beperkt winkelcentrum	1	1,7	1,7	83,1
Buurtkamer,toneelgroep, koor,parken	1	1,7	1,7	84,7
cafés restaurants	1	1,7	1,7	86,4
cultureel centrum, bieb .	1	1,7	1,7	88,1
niets dus	1	1,7	1,7	89,8
op 15 min. lopen zit het centrum van Leerdam.	1	1,7	1,7	91,5
Tandartsenpraktijk	1	1,7	1,7	93,2
Thuiszorg van Cordaan; Bibliotheek	1	1,7	1,7	94,9
tramhalte	2	3,4	3,4	98,3
Zwembad	1	1,7	1,7	100,0
Total	59	100,0	100,0	

Organisatie

Q30 - In welk jaar is de woongroep gestart? (Het gaat hier om de bewoning niet het bouw en voortraject).



Q31 - Zijn er bewoners die er vanaf de start van de woongroep wonen?

Zijn er bewoners die er vanaf de start van de woongroep wonen?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Ja	41	69,5	93,2	93,2
	Nee	3	5,1	6,8	100,0
	Total	44	74,6	100,0	
Missing	System	15	25,4		
Total		59	100,0		

Q32 - Hoe groot is de wachtlijst op dit moment voor vrij te komen woningen?

Aantal huishoudens op wachtlijst	Frequentie
Geen gebruik wachtlijst	3
0	4
1	2
2	5
3	5
4	3
5	5
6	6
7	
8	
9	
10	5
11	1
12	
13	
14	
15	1
16	
17	
18	
19	
20	1
21	
22	
23	1
24	
25	
26	
27	
28	
29	
30	1

Q33 - Is er een aannamebeleid voor nieuwe bewoners?

Is er een aannamebeleid voor nieuwe bewoners?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Ja	42	71,2	95,5	95,5
	Nee	2	3,4	4,5	100,0
	Total	44	74,6	100,0	
Missing	System	15	25,4		
Total		59	100,0		

Q34 - Waar is het aannamebeleid gebaseerd:

Waar is het aanname beleid op gebaseerd	
Leeftijd	58%
Inschrijfduur	10%
In overeenstemming	62%
Anders	6%

Q35 - Bepalen de huidige bewoners wie de nieuwe bewoners worden?

Bepalen de huidige bewoners wie de nieuwe bewoners worden? - Selected Choice

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Ja	34	57,6	77,3	77,3
	Nee dat wordt bepaald door:	10	16,9	22,7	100,0
	Total	44	74,6	100,0	
Missing	System	15	25,4		
Total		59	100,0		

Q36 - Zijn er huisregels of samenleefregels opgesteld? Zo ja, waarop hebben deze regel betrekking?

Zijn er huisregels of samenleefregels opgesteld? Zo ja, waarop hebben deze regel betrekking? - Selected Choice

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Ja er zijn regels op het gebied van de volgende zaken:	39	66,1	88,6	88,6
	Nee	5	8,5	11,4	100,0
	Total	44	74,6	100,0	
Missing	System	15	25,4		
Total		59	100,0		

-één keer per week gezamenlijk eten ,zo mogelijk -Bijwonen van de algemene- en jaarvergadering, zo mogelijk -geen huisdieren in de gemeenschappelijke ruimte -de gemeenschappelijke ruimte wordt niet verhuurd aan derden.	Alles wat met gezamenlijk wonen te maken heeft	Er is een bestuur en statuten en huishoudelijk reglement. Er moet voor de tuin gezorgd worden, de bar, huishoudelijke taken. Lief en Leed.
> huur gezamenlijke ruimte > frequentie vergaderingen van bewoners. > toezicht rooster betreffende schoonmaak door derden >huishoudelijk reglement als aanvulling op de statuten >statuten (we zijn een Vereniging) > beheer gezamenlijke ruimte	Bestuur, Gebruik algemene ruimten, Huisdieren, Lopen avondronde en Schoonmaakronde.	er is een huishoudelijk reglement
Alle bewoners zijn lid van de vereniging groeps wonen van ouderen en zijn verplicht mee te betalen aan de huur van de gemeenschappelijke ruimtes. Verder normale huisregels.	de VvE heeft een splitsingsreglement/ statuten en een huishoudelijk reglement	er is een huishoudelijk reglement gemaakt
Er zijn huisregels. Deze zijn niet anders dan een normaal gezin en niet bindend.	gebruik van de gezamenlijke ruimten en tuin, de 2 ateliers , de logeerruimten, het bezoeken van de maandelijkse vergaderingen, het dragen van de gezamenlijke verantwoordelijkheid om het gebouw goed te houden en de sfeer prettig.Bij te dragen aan taken in deze.	HHR (en Statuten)
er zijn statuten en een huishoudelijk reglement. (o.m. over het deelnemen aan gezamenlijke activiteiten, commissies en conflicten)	geen overlast veroorzaken met betrekking tot geluid. Dat is het voornaamste. Er is ook een huishoudelijk reglement.	hoe we met elkaar omgaan hoe we met de gemeenschappelijke ruimten en tuin omgaan
Er zijn statuten en er is een huishoudelijk reglement. Hoe gaan we met elkaar om; hoe gebruiken we de gemeenschappelijke ruimte; vergaderfrequentie etc.	Geluid, colportage, gebruik gemeenschappelijke ruimte, fietsenberging, vrijvallen appartement, roken, zittingsduur bestuur, afname stroom grmeenschappelijke ruimte ivm e-bikes,	Huishoudelijk Reglement
gebruik gemeenschappelijk ruimte, onderhoud tuin, mate waarin en wijze waarop aandacht is voor elkaar (geen zorg), enz. enz.	Gemeenschappelijke waarden; Toelatingscriteria; Toelatingsprocedure en toelatingstraject; Wachtlijstbeheer Contributie; Financiën Wijze van opzegging Afspraken over het samen wonen/ huisregels; Gebruik van de gemeenschappelijke ruimte ; Taken werkgroepen; Afspraken over logees en gasten; Zorg en wederzijdse hulpverlening; (geen verplichte mantelzorg) Rechten en plichten; Vergaderreglement; Arbitrage	Iedereen geeft 2 mensen in de groep een sleutel en een contactpersoon die in geval van nood wordt gewaarschuwd. Iedereen moet zelfredzaam zijn en anders thuiszorg inschakelen.Hulp van de leden is incidenteel.
Men moet gemotiveerd zijn t.a.v. het wonen in een woongroep Saamhorigheid is doel en moet nagestreefd worden Zorg voor elkaar is er niet, wel aandacht	Statuten en een huishoudelijk reglement	Tuincie,toelatingscie,huisce,bestuur
Over de gang van zaken in de groep ledere eerste dinsdag. Van de maand kort overleg en dan is iedereen aanwezig	STATUTEN EN EEN HUISHOUDELIJK REGLEMENT, BIJNA ALLES	veel
Rechten en plichten in de breedste zin des woords	Statuten en Huishoudelijk Reglement	Vereniging met statuten en huishoudelijk reglement
Respect met en voor elkaar	statuten van de vereniging huishoudelijk reglement	vergaderingen samen eten uitjes
We verlenen de ouderwetse burenhulp. Op onze wekelijkse borrel wordt er niet over politiek of godsdienst gesproken	zoals een vereniging	

Q37 - Zijn er afspraken gemaakt over verantwoordelijkheden? (Verantwoordelijkheden voor bijvoorbeeld onderhoud, schoonmaak, gezamenlijke financiën, etc.).

- bestuur, penningmeester, secretaris en voorzitter - in commissies, onderhoud, bar, zorg, PR,	Bijdrage per huishouden voor o.a. betaling huur gezamenlijke ruimte We hebben een BC (bewonerscommissie) die minimaal 2x per jaar overleg heeft met de woningcorporatie betreffende servicekosten en frequentie van schoonmaak	er is een bestuur
-bestuursverantwoordelijkheid zoals financiën ,administratie ,leiden van vergaderingen. - onderhoud van de tuin -verzorgen van planten -huishoudelijke taak -huismeesterschap - verzorgen van een culturele middag, ook voor mensen buiten de gemeenschap - beantwoorden en bijhouden van de lijst met belangstellenden voor onze woongemeenschap -bijwonen van vergaderingen van de bewonerscommissie.	Buurman en Buurman, technische zaken, Recreatie Cie; Leesclub; Kookgroep; Uitjes; WSW Cie (aannname nieuwe bewoners); Bestuur; PR groep; Tuingroep.	er is een bestuur bestaande uit een voorzitter, secretaris en penningmeester
Bestuur regelt de belangrijkste zaken en verder zijn er werkgroepen o.a schoonmaak en onderhoud	commissie gezelligheid commissie werving bestuur, penningmeester, voorzitter en secretaris	Er is een bestuur dat zaken regelt en overlegt met bewoners tijdens ledenvergadering.
Bestuur WE	die komen er wel	Er is een bestuur, die leiding geeft aan activiteiten en de financiën van de woongroep als vereniging beheert
Er is een bestuur, een penningmeester en er zijn commissies	gebruik en onderhoud gezamenlijke gebouwen: Deelhuis, fietsenschuur, knutselschuur, tuinschuur, tuin, moestuin. De WE beheert financiën en onderhoudsplan/ - reserve	onderhoud gezamenlijk. Huishoudelijke hulp Penningmeester Verder geen specifieke afspraken
Er is een bestuur, penningmeester. We betalen contributie, hiervan wordt o.m de schoonmaak betaald van de gemeenschappelijke ruimten. We hebben een tuincommissie, huishoudelijke commissie, introductiecommissie (nieuwe leden wachtlijst), interieur commissie ad hoc. Eenmaal per maand eten we samen en wordt er om de beurt gekookt. Eenmaal per maand is er een huis vergadering. Beiden verplicht.	Ja , voor sommige taken zijn er commissies anderen worden ter plekke verdeeld.	onderhoud gezamenlijke tuin, de gemeenschappelijke ruimte, gebruik van de wasmachine. We hebben een bestuur met voorzitter, secretaris en penningmeester. We vergaderen een aantal keren per jaar. We zijn een vereniging en ingeschreven bij de Kamer van Koophandel.
Er zijn commissies: HHR/St, Beheer (gem.ruimte), Lief en leed, , Belangstellenden, Bewoners, Kookgroep	onderhoud (WE), schoonmaak (door een bedrijf) financiën (penningmeester) etc..	Onderhoud, schoonmaak, koffie zetten, financien, enz. enz.
financiën, commissies voor het regelen van koken, film, spelletjes	ONDERHOUD DOET DE VERHUURDER EN DE WE. SCHOONMAAK IS UITBESTEED CONTRIBUTIE WORDT BETAALD AAN DE VERENIGING	schoonhouden van openbare ruimtes het verzorgen van de rolcontainers voor afval
schoonmaak, en wie de koffie verzorgt.	schoonmaken gemeenschappelijke woonkamer	Statutaire regels en reglement voor we en vereniging
schoonmaak, gezamenlijke financiën	Schoonmaken van de groepsruimte	Toezicht gemeenschappelijke ruimte en commissies voor technisch onderhoud, belangstellenden, tuin, inkoop en activiteiten. Verder is er een bestuur bestaande uit voorzitter, penningmeester en secretaris.
schoonmaak, gezamenlijke financiën voor tuin en gezamenlijke ruimte.	servicekosten, onderhoud van het gebouw, schoonmaak, wasserette, tuinonderhoud, koffie drinken en happy hour	Verplichte jaarvergadering. Contributie en verzekering. Onderhoud en schoonmaken wordt door bestuur geregeld.
schoonmaak, koffiedienst (corvee voor de wekelijkse inloop), corvee voor spelavond en filmavond en knutselmiddag en mah-jong-avond, kookdienst en corvee voor de gezamenlijke maaltijden, organiseren van activiteiten,	Staat allemaal in het huis. Reglement opgenomen	Via Statuten en Huishoudelijk Afspraken
we hebben een bestuur van 4 leden de algemene ruimte wordt door een externe schoongemaakt	We hebben een bestuur w.o. Een penningmeester,voorzitter secretaris.Een werkster voor de huiskamer.Een maal per jaar dakterras schoongemaakt	werkgroepen en bestuur; lidmaatschap van de vereniging schoonmaak, financiën en hoofdelijke aansprakelijkheid

Zijn er afspraken gemaakt over verantwoordelijkheden?
(Verantwoordelijkheden voor bijvoorbeeld onderhoud, schoonmaak, gezamenlijke financiën, etc.). - Selected Choice

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Nee	2	3,4	4,7	4,7
	Ja, er zijn afspraken over de volgende zaken:	41	69,5	95,3	100,0
	Total	43	72,9	100,0	
Missing	System	16	27,1		
Total		59	100,0		

Zorg

Q38 – Wonen er in de woongroep bewoners met een zorgvraag?

Wonen er in de woongroep bewoners met een zorgvraag?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Ja	31	52,5	72,1	72,1
	Nee	12	20,3	27,9	100,0
	Total	43	72,9	100,0	
Missing	System	16	27,1		
Total		59	100,0		

Q39 – Wilt u aangeven hoeveel bewoners er zijn met een zorgvraag?



Q40 – Is er voor de bewoners met een zorgvraag mantelzorg aanwezig?

**Is er voor de bewoners met een zorgvraag mantelzorg aanwezig? -
Selected Choice**

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Ja	8	13,6	25,8	25,8
	Nee	10	16,9	32,3	58,1
	Anders, namelijk:	13	22,0	41,9	100,0
	Total	31	52,5	100,0	
Missing	System	28	47,5		
Total		59	100,0		

Alleen goede burenhulp. Verdere hulp komt van professionele instelling of van familie.	de partners geven die zorg	In dit geval is de echtgenoot de mantelzorger. Mantelzorg is niet aanwezig in de woongroep
alleen in het weekend op zondag	Gedeeltelijk , boodschapje meegaan naar de specialist hapje eten	In principe is dat de eventuele familie. Voor kortdurende hulp helpen we elkaar.
Alleen in noodgevallen, zo nodig zelf zorg regelen is verplicht	Geen echte mantelzorg maar wel helpend hand als dat nodig.	Ja, door eigen kinderen en bv. thuiszorg. De woongroep verleent geen mantelzorg
dat verschilt denk ik of het een paar of een alleenstaande betreft en hoe de woongroep zich ontwikkeld	Hoe wordt mantelzorg gedefinieerd? Boodschap doen voor elkaar, rijden naar ziekenhuis, mee gaan naar ziekenhuis e.d. wel, maar we verzorgen elkaar niet. We zijn hele goede burens en kunnen 3x per week koffie drinken, 1x per 2 weken samen eten, 1x per week borrelen, enz. enz.	komt langs
mantelzorg kunnen we aan alle bewoners bieden mits het tijdelijk is en het niet om professionele verpleging gaat.		

Q41 – Door wie wordt de mantelzorg voor de bewoners met een zorgvraag geleverd?

Door wie wordt de mantelzorg geleverd	
Partner	15%
Familie (anders dan partner)	19%
Vrienden	8%
Medebewoners	8%
Professionals	29%
Anders	5%

Q42 – Is er bij de inrichting van de woongroep rekening gehouden met het leveren van mantelzorg?

Is er bij de inrichting van de woongroep rekening gehouden met het leveren van mantelzorg? - Selected Choice

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Ja, namelijk door:	6	10,2	14,3	14,3
	Nee	30	50,8	71,4	85,7
	Anders, namelijk:	6	10,2	14,3	100,0
	Total	42	71,2	100,0	
Missing	System	17	28,8		
Total		59	100,0		

Is er bij de inrichting van de woongroep rekening gehouden met het leveren van mantelzorg? - Ja, namelijk door: - Text

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid		53	89,8	89,8	89,8
	burenhulp door medebewoners, geen lich. verzorging.	1	1,7	1,7	91,5
	LOGEERKAMER	1	1,7	1,7	93,2
	mantelzorg is niet verplicht. Voor twee bewoners die inmiddels allebei overleden zijn is dit in het verleden wel geleverd op basis van vrijwilligheid.	1	1,7	1,7	94,9
	rekening te houden met de leeftijd van (nieuwe) bewoners	1	1,7	1,7	96,6
	uitgaan van een visiedocument, waarin noaberschap en zorg heel belangrijk zijn, naast duurzaamheid en gemeenschappelijkheid, zie onze website:www.vriendenerf.nl	1	1,7	1,7	98,3
	wooncorporatie	1	1,7	1,7	100,0
	Total	59	100,0	100,0	

Is er bij de inrichting van de woongroep rekening gehouden met het leveren van mantelzorg? - Anders, namelijk: - Text

	Frequency	Percent	Valid Percent	Cumulative Percent
Valid	53	89,8	89,8	89,8
Alleen in noodgevallen	1	1,7	1,7	91,5
De bewoners leveren geen mantelzorg.	1	1,7	1,7	93,2
Expliciet aangegeven dat bewoners geen mantelzorg leveren.	1	1,7	1,7	94,9
In de statuten is opgenomen dat de woongroep geen mantelzorg levert	1	1,7	1,7	96,6
wij zijn zorgzaam tegenover elkaar en helpen waar nodig en mogelijk is	1	1,7	1,7	98,3
zie Huishoudelijk Reglement	1	1,7	1,7	100,0
Total	59	100,0	100,0	

Q43 – Is er een logeerruimte in het woongebouw?

Descriptive Statistics

	N	Minimum	Maximum	Mean	Std. Deviation
Is er een logeerruimte in het woongebouw? - Selected Choice Ja	13	1	1	1,00	,000
Is er een logeerruimte in het woongebouw? - Selected Choice Nee	24	1	1	1,00	,000
Is er een logeerruimte in het woongebouw? - Selected Choice Anders, namelijk:	6	1	1	1,00	,000
Valid N (listwise)	0				

Overige zaken

Q44 - Als u informatie wil toevoegen die niet in bovenstaande vragen zijn beantwoord kunt u die hier toevoegen:

We hebben een parkeerkelder onder het gebouw dus alle parkeerplaatsen zijn overdekt 1 vier kamer woning is tijdens de bouw omgebouwd tot gezamenlijke ruimte.	De bewoners met een zorgvraag betrekken die zorg vanuit de instanties die dat in hun pakket hebben.	Focus ligt sterk op "zorg". Het wonen in een woonvereniging betekent voor veel bewoners voldoende sociaal contact bij het ouder worden. Samen ouder worden. Een punt dat even belangrijk is als het verlenen van zorg. Als de professionele zorgverleners zorgen dat mensen langer thuis kunnen blijven wonen dan zorgen initiatieven als het onze voor de tweede minst zo belangrijke component. Eenzaamheid op afstand houden. Niet teveel alleen maar focussen op de zorg. Het is een combinatie.
Alle woningen hebben een tweede slaapkamer voor logees. Wij leveren geen zorg maar zorgen wel voor elkaar. We hebben een activiteitengroep. Filmclub, een leesgroep, gespreksgroepen, 1x p.w. borreluurtje, zondagmorgen koffiedrinken en 1x per maand gezamenlijk eten, samen naar het museum, theater of gewoon op stap. Kortom, er is hier veel te doen	De woongroep is een stichting en de bewoners zelf zitten in het bestuur. We hebben geen enkele dogma en zo weinig mogelijk huisregels.	Onze woongroep verleent geen zorg, wel kijken we naar elkaar om.
Bewoners dienen zelfstandig en zelfzorgzaam te zijn. Woongroep is geen mantelzorger al zal er altijd naar elkaar omgekeken worden en daar waar nodig in de eerste levensbehoefte geholpen worden.	Dit is een woongroep van 50 plussers die allemaal lid zijn van de Vereniging Groepswonen van Ouderen Schiedam.	We hebben een bestuur, met uiteraard een penningmeester, statuten en huisreglement. We zijn allemaal zelfstandig met eigen voordeur. Het lijkt allemaal mooier dan het is, Leeftijd vanaf 50 jaar. 2 mannen, jammer, gemengd zou beter zijn. Het relativeren van mannen zou welkom zijn.
Wij bestaan 15 jaar en hebben geen van allen spijt van de stap die we gezet hebben. Wij verlenen wel mantelzorg in de zin van: bij ziek zijn een boodschap doen, mensen naar een ziekenhuis brengen/halen, op bezoek gaan bij elkaar, kleine handreikingen. Zelf professionele hulp regelen is verplicht. Wij willen geen zorg/verpleeghuis worden. Met een rolstoel, enz. wonen is mogelijk. Je moet de regie kunnen voeren over je eigen huishouding.	Wij vergaderen op basis van de sociocratische besluitvorming. Aan de start is een lange tijd van voorbereiding vooraf gegaan met veel overleg met (stadsdeel)gemeente en woningbouwcorporatie. In een woongroep wonen levert veel op, maar kost ook tijd, aandacht en energie van iedere bewoner of a.s. bewoners Er is geen verplichting m. b. t. gezamenlijke activiteiten. Recentelijk heel veel knelpunten ondervonden met betrekking tot onze wachtlijst en nieuwe bewoners vanwege strengere eisen van sociaal huurbeleid.	Woongroep is hoofdzakelijk bedoeld om niet anoniem ergens te wonen. Leden woongroep kijken naar elkaar om en helpen bij eenvoudige zaken. Er vinden sociale activiteiten plaats in de gemeenschappelijke ruimte zoals kaarten, sjoelen, koffie drinken 3 à 4x per jaar gezamenlijk buffet.
Wij informeren potentiële bewoners tijdens kennismakingsgesprek over de wijze waarop en de mate waarin we aandacht hebben voor elkaar. Als mensen zorg nodig hebben, schakelen ze professionele zorg in (wijkverpleegkundige, huishoudelijke hulp, enz.). Wel hebben wij sleutels van medebewoners, zodat we elkaar altijd in noodgevallen kunnen helpen. Naar mijn mening is de kans op eenzaamheid bij het wonen in een woongemeenschap aanzienlijk kleiner.	Wij zijn een kleine woongemeenschap met 4 huizen. In 1986 hebben wij (vier echtparen) een oude boerderij gekocht en zodanig verbouwd dat we bij het ouder worden konden blijven wonen. Drie van de oorspronkelijke bewoners zijn inmiddels overleden. Daardoor kwam een huis vrij. Daar woont nu een jong gezin met twee kinderen. Zij maken deel uit van onze woongemeenschap.	woongroep zal altijd een juridische structuur moeten zijn, bijvoorbeeld Vereniging
zie onze website, www.vriendenerf.nl . Wij zijn een VvE, gebouwd door onszelf als CPO project. De initiatiefnemers zijn in januari 2012 gestart, bouw was klaar in juni 2017. Onze huizen staan op een grote tuin, net als de gezamenlijke gebouwen.	Zoals eerder opgemerkt zijn wij een woongroep in oprichting die nog zoekende is naar een geschikte locatie en financiering. als mede leden. Wij willen een woongroep van 50+ers waarin nabuurschap hoog in het vaandel staat. De woningen moeten levensloopbestendig en liefst energieneutraal zijn met domotica.	Zoals ik eerder zei: we verlenen ouderwetse burenhulp. Dat wordt geleverd door verschillende mensen, nl door diegenen waar je een affiniteit mee hebt. Andere zorg wordt niet verleend behalve als er een acute situatie ontstaat die meteen actie verlangt.

10.3 Annex 3 Interview protocol

1. Samenstelling woongroep

Mix leeftijd/demografie.

Leefstijlen.

De reden om in een woongroep te gaan (tegen eenzaamheid?). Tijdsbesteding samen.

2. Woningen

Hoeveel ongeschikte woningen voor ouderen? Toekomst bestendigheid van woningen.

Gezamenlijke huur/privé huur.

3. Woongebouw

Geschikt voor ouderen? Aanpasbaarheid.

4. Voorzieningen

Walkability. Keuze locatie?

5. Organisatie

Zelfbestuur.

Samenleefregels (bezoek/wonen/zorg/onderhoud/eten). In en uitstroombeleid.

Bestuursvorm. Waarom deze keuze? Ontstaansgeschiedenis.

Krijgt men subsidie?

Drijvende kracht achter het project. Handhaving.

Wie regelt wat.

Problemen die van niemand zijn. Hoe ga je daarmee om? Ontwikkeling traject. Iedereen nog aan boord?

Werkt het zoals verwacht. Is er iets bedacht van te voren wat nu niet meer zo werkt? Bv grote keukens die niet meer wordt gebruikt.

Is de groepssamenstelling nog hetzelfde? Organisatie vorm? Vereniging?

Wat is er over van het begin. Denkt men er nog hetzelfde over? Koop. Ballotage?

Mix van eigendom in een gebouw. Weiger je mensen.

Financiële haalbaarheid. Meerdere functies? Waar woon je prettig.

6. Zorg

Hoeveel mantelzorgers zijn er? 1 op...

Hoeveel mensen kunnen überhaupt mantelzorger zijn? Sociale controle en interactie.

Uitstellen extramurale zorg. Zorg wegnemen?

Gezonde leefomgeving. Cluster van ouderen.

Mix zorg. Mobiliteit.

10.4 Annex 4 Interview transcript A



10.5 Annex 5 Interview transcript B



10.6 Annex 6 Interview transcript C



10.7 Annex 7 Interview transcript D



10.8 Annex 8 Interview transcript E



10.9 Annex 9 Interview transcript F

