

exploring reciprocity

a dive into history, theory, rituals, identity, wishes and precedents

research booklet by Renske de Meijer

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preface

Before you lies the work of a year-long journey, my graduation research. Ever since I started the studio Designing for Care I have not stopped enjoying this expedition, for this it was. It was more than I hoped it would be and exactly why I initially started this study: the possibility to do something for someone.

I want to thank my tutors Birgit Jürgehake, Mo Sedighi and Paddy Tomesen for all their support during this year.

I hope you enjoy reading!
Renske de Meijer

structure

During the past year, multiple studies have been done that resulted in a lot of guidelines and tools for design. This booklet is a gathering of all these studies. The booklet does not end with one big conclusion, for this will be the final design. The conclusions that are important can be found after every separate study.

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the studio ‘Designing for Care’

Introduction

The studio ‘Designing for Care – towards an Inclusive Living Environment’ engages with the living environment of elderly that are in need of care. Existing structures and neighbourhoods are often not adequate for housing this growing frail, often less mobile group. This, together with a shift from institutional buildings to informal support networks ask for new concepts regarding the housing of the elderly. New concepts in which the elderly are again part of society, where support is given by neighbours if possible instead of professional caretakers and where they can live as independent as possible.

Argumentation of choice

For me, the graduation studio Designing for Care was an opportunity to do a studio that works in close collaboration with a real care and housing association and involves not only architecture but also anthropological studies. During my studies I missed the realness of projects and the feeling of doing something for someone. With this graduation studio I get to explore a topic that is very much human centred and focusses on a vulnerable group that relates to and is the prospect of all of us.

The posed problem

Our society has to cope with a growing amount of elderly and less young people to take care of them. The existing buildings and neighbourhoods often do not meet the needs and wishes of this growing group. Besides, the future generations value their independence, they want to be self-governing. No-one looks forward to the prospect of having to spend the rest of their days in an elderly home, but why is that?

The ethnographic research into the daily lives of residents in an elderly home has brought to light the deprived independence of the residents. The elderly are willing

to do things, talk to others and to go outside, but are often not able to do so because of the way things are organized, their fixed schedules and the way the building and neighbourhood are designed. It means a loss of their independence, resulting in being lived, instead of choosing how to live.

Literature stresses the importance of independence for intrinsic motivation in life, and motivation for participation. In fact, the feeling that people have a free choice, that they can be sociable if they like to, but that it is also okay if they retreat, will make them more likely to interact. Two other notions important for this intrinsic motivation are relatedness and competence. Independence, the state of being free from the control of others, like autonomy, is directly related to competence, which is about mastering skills and the ability to execute certain tasks, leading to the feeling of contribution and thus the feeling of still being “of use”. Relatedness is being connected to others. Making contact with others and being able to interact has been proven to be important for staying engaged and prevent loneliness.

While these notions turn out to be essential, the ethnographic research showed that all three are impeded in elderly homes resulting in passive elderly and the prevailing stigma around those homes. How can we design in such a way that the elderly can stay independent and engaged, just as much part of society, so that everyone has something to look forward to?

Research question

How to translate the intertwined relationship between independence, relatedness and competence to a spatial design that creates an inclusive community for elderly?
(for an extensive overview of all questions see the appendix)

Design Assignment

To be able to house the future generations, things have to change. The goal is to design a place where elderly with and without care can live together with others, which takes into account the wishes and needs of elderly and gives them something to look forward to. A place that does not exclude elderly from society, but makes them part of it again. One that stimulates them, encourages them to participate and contribute, enjoy, laugh. In which people look after each other and take care of each other. A social net. A place they can transfer their knowledge gathered throughout life. Tell their stories. And one in which they can in turn learn from others. A community based on generous reciprocity.

Method

Throughout the project, research plays an important role. The studio started with small exercises to get to know a new field of research: anthropology. Later, the anthropological research methods learned were applied in a fieldwork week, in which I slept in an elderly home for one week, observing the daily lives of the elderly. The methodology applied during this week is called ethnography, which is about studying a group and its rituals. The usual product of an ethnographic research is a written text. Since the architectural language is a visual one, instead of a written text, the observations were made visual, resulting in analytical drawings. The observations, but also conversations lead to the first design guidelines. Literature, studying existing theories, questionnaires and case studies have been used to validate, reinforce and expand these guidelines.

Staying in a place where elderly live, being part of their lives for one week and doing the same things, gave me the opportunity to really dive into their rituals and daily lives. Having this experience and knowledge is really valuable as a designer. It gives me the chance to really ground my design and take well-considered decisions.

Because of the multiplicity of the topic, different research methods at different stages have been and will continue to be combined. An overview can be found in the appendix.

Wie zal straks ónze billen wassen?

Ouderenzorg is volledig uitgekleeed

NRC Nov 2019

PREMIUM 01 okt. | Binnenland

Aantal 80-plusser explodeert komende jaren

Telegraaf Oct 2019

31 mrt. | Binnenland

Oudere verdient betere zorg

Telegraaf Mar 2019

Is Nederland voorbereid op hausse aan ouderen?

We worden steeds ouder in ons land; de nieuwste prognose van het CBS is dat een 65-jarige in 2025 nog bijna 21 jaar leeft. De

Telegraaf - 1 Nov 2019

a history of elderly housing

Introduction

The way elderly lived and were taken care of changes throughout history. In our current society, we are asked to take responsibility for our own lives, to be more self-reliant and support on family as much as possible. But it has not always been like this. How the elderly live, is determined by three things: their social status, the organisation and financing of the care system and lastly the regulations shaping this system. This chapter will give a short summary of the developments in The Netherlands, mainly focussing on the way of living (isolated, with family, etc.). For this summary the book of Noor Mens and Cor Wagenaar, *De Architectuur van de Ouderenhuisvesting* (2009), has been used.

Before 1945

The situation before war was actually not that different from what is being asked from us now. A family was responsible for all of its members, including the elderly. If they did not have any family (children mostly) to take care of them, they were dependent on the good deeds of the rich, since most of them were poor and did not have much money to spend. It is in these times that monasteries often took care of the elderly and the first "hofjes" started to arise. In these hofjes the elderly lived independent and shared some communal spaces. The elderly that were bedridden ended up in hospices (gasthuizen), women's- and men's homes in which they did not have any privacy, but shared all rooms, including sleeping.

1945 - the welfare state

After the war, the status of an elderly person changed from being seen as poor to being someone that has worked hard during his/her life and deserves to be taken care of. It was the time of the reconstruction and the rise of the welfare state. Willem Drees was a very important figure in the Netherlands. He established a law in 1946

that stated that every elderly from the age of 65 should get a payment. In 1957 this law changed into the law that we still know as "Algemene Wet ouderdomsvoorziening (AOW)". This social status change also brought forth a new dwelling typology, namely elderly housing, with a new type per care demand. Another reason people were eager to place the elderly in separate and specialised buildings was the fact that there was a large housing shortage and now the homes of the elderly became available for families. Back then, organising proper housing for elderly really was the government's way of taking care of them. and living in an elderly home was a luxury. Though there wasn't much privacy. The institutions focussed on personal development and community building, resulting in small private rooms along long small hallways and daytime activities with everyone together.

1963 - more focus on living

The in the 60's and 70's popular structuralism resulted in more focus on living and more human ideals within the elderly homes. The goal was for elderly to stay useful, near their kids and not become isolated. De Drie Hoven, designed by Herman Hertzberger, for example, is designed like a small city with more attention to the individual human (privacy), but with care just around the corner. The more care a person needed, the smaller the room, but bigger the communal spaces and the more individual, the bigger the private room. Even couples could live here. An important aspect was the freedom of the residents to bring their own furniture, to decide themselves what activities they wanted to do and room for appropriation of the communal space, leading to a feeling of home and more encounters.

1991 - separation of living and care

Because of the popularity of elderly homes since the ABWZ (Algemene Wet Bijzondere Zorgkosten) and an increase in

elderly the costs became too high for the government, that couldn't provide the care like they had provided anymore. Besides, the average age kept increasing, making the institutions less popular for the vital elderly and more focused on giving care. The government realised the elderly had changed and definitely not all of them were and wanted the same. The new solution was a separation of the organisation and financing of care and living, with customised care (zorg op maat). A lot of new typologies arose, like sheltered homes (aanleunwoningen), that made more independent living possible. To enable elderly to stay longer in their own homes, facilities that could provide care were implemented in neighbourhoods.

Present

Ever since care and living are separated, the elderly are expected to live more and more independent. Decentralisation made municipalities and health insurers responsible in stead of the government that now only supports the heavy care. The elderly homes from the first generation are not suited for a more independent life, so many have to close their doors and elderly are searching for new concepts, in which they live with smaller groups and the focus is more on informal care from friends, neighbours and family.

Conclusion

We have gone from elderly being a family responsibility, to big institutions in which everything was arranged for the elderly but with hardly any privacy, to structuralist ideals, a separation of care and living, to elderly being a family responsible again as long as can be. And not only what is expected from elderly has changed, the elderly themselves and how they want to live also changed. If we take this into account, from all these phases valuable lessons can be learned. Where the structuralist design of Hertzberger lost its value at some point in history, nowadays a concept like that would be more adored than the elderly homes that are available at the moment, especially if it would be destined for other target groups as well. This would mean that maybe we don't have to reinvent the wheel, but could build on what is already there.

a theoretical framework

Introduction

After coming back from the fieldwork, the observations had to be ordered, categorized and analysed. To be able to conduct a useful analysis, there needed to be a guiding theme or fascination. This fascination turned out to be the elderly's independence. To start and structure the analysis, literature concerning independence in the life of elderly was consulted. A leading article has been the one of Ryan and Deci (2000) about the Self-Determination Theory. In this research they point out that independence is one of the three psychological needs that enhances intrinsic motivation, mental health and well-being. The other two are relatedness and competence. It is for this reason that the focus of my research will be into these three notions.

Independence

Independence is not only something the government is asking from our elderly. Research shows it is something elderly themselves also value high in preserving. It is the reason that many elderly still prefer to age in their own homes, because moving to an institution might or probably will mean losing control over their own lives.

Theorists have explained this fear as reflecting the disempowering effect of institutional settings in reducing people's sense of self-determination (Foucault, 1977; Goffman, 1961; Rothman, 1971), in creating and reinforcing dependencies through their organizational structures (Townsend, 1981), and in reducing personal and functional independence because they are run as impersonal and regimented living environments (Booth, 1985; Miller & Gwynne, 1972; Rowles, 1978). (Hillcoat-Nallétamby, 2014, p1)

If you think about it, it makes sense: having lived a long life in which you, as a child were encouraged to and since adulthood have made all your choices on your own, planned every day yourself and having to give that up, suddenly.. The bad the condition, control over one's life is something no one wants to lose. It does not mean that help is not wanted. That misconception should be solved now and forever. If at a certain age help is needed, because of illness or deteriorated mobility, help with some of the daily tasks, like showering, increases independence. It is not about doing everything on your own. It is about making your own choices, deciding at what time you want to do what, whether to get up at 6 or at 10, to play a game or not, to go outside or not, to have vegetables for dinner or a lovely pizza. It is what is called decisional autonomy. If for one of those things you need help from someone, it could still very well be in a way that you want it to be.

The research of Hillcoat-Nallétamby (2014) shows that independence has multiple meanings, but that some are the same for everyone. Of course, doing things alone is seen as the key point of independence, in which the preservation of mental and physical capacities plays a crucial role, but also here accepting help at hand if necessary is emphasized as part of independence. That might sound weird, but it can be explained by Collopy's (1988) words about autonomy(ies) in long term care. Autonomy in this case is seen as similar to independence.

..... autonomy is understood as a cluster of notions including self-determination, freedom, independence, liberty of choice, and action. In its most general terms, autonomy signifies control over decision-making and other activities by the individual. It refers to human agency free of outside intervention and interferences. (Collopy, 1988, p10)

So again, it is about the freedom of coercion and the power of making decisions yourself, being in control, choosing how to live. This way they maintain a sense of self-identity.

If help from others is inescapable, a very important aspect of maintaining one's independence is the access to resources that could provide this help, especially with daily needs. Family and friends are very well suited for this, for they can easily help with things like groceries, personal care and other daily activities like going for a walk. Since family does not always live close, friends are mentioned here as well. You could imagine that if an elderly lives in a neighbourhood where the community feeling is very strong, they become the friends taking care.

Having a private living space, a place for one's own, that contains personal stuff also turns out to be part of elderly's comprehension of independence. It does not only make them feel more at home, it also enables them to retreat or invite people over, which again is part of maintaining control over their own lives. It will also give them the opportunity to choose to stay at "home" and not participate in certain activities (if institutionalised). This freedom to choose to participate or not, but also who can visit and who not, is called social independence.

Something elderly have indicated that is part of losing their independence is losing the ability to maintain social contacts. So staying independent would mean being able to maintain these social contacts. This is actually very much related to the next theme, relatedness, where it will be further elaborated.

Relatedness

Relatedness is a second theme that turns out to be key in elderly's life. Relatedness is about social interactions and being able to build relationships with others. But also receiving emotional support and understanding is part of relatedness (Strizhitskaya & Davedyuk, 2014). Making contact with others and being able to interact has been proven to be very important for staying engaged and preventing loneliness, a common phenomenon in elderly houses. To reach this it is important for elderly to not become isolated. They should be able to get in contact with others easily.

A condition for relatedness is the feeling of being at home, since this will make someone more open to others. For both, Talja Blokland, Jan Gehl and Herman Herzberger stress the importance of planned and unplanned encounters: Sporadic unplanned encounters in a neighbourhood, even if they do not lead to anything concrete at that moment, do contribute to a feeling of 'home' and safety. To reach durable social relationships unplanned encounters on a more regular basis are necessary (Blokland, 2008).

"There can be no adventure without a home-base to return to: everyone needs some kind of nest to fall back on."

- Herman Hertzberger (1995) p. 28

Another phenomenon that enhances the feeling of home is the act of making space one's own, called appropriation. Herman Hertzberger has emphasized the importance of appropriation for a feeling of responsibility and social contact in his book *Lessons for Students in Architecture*, from 1995 / 2005:

"Concretization of the threshold as an in-between means, first and foremost, creating a setting for welcomes and farewells, and is therefore the translation into architectonic terms of hospitality. Besides, the threshold as a built facility is just as important for social contacts as thick walls are for privacy." - p.35

"Even a minor adjustment by way of spatial articulation of the entrance can be enough to encourage expansion of the personal sphere of influence, and thus the quality of public space will be considerably increased in the common interest." - p.41

"The point is to give public spaces form in such a way that the local community will feel personally responsible for them, so that each member of the community will contribute in his or her own way to an environment that he or she can relate to and identify with." - p.45

Competence

The third theme is competence. Competence is about mastering skills and the ability to execute certain tasks, which leads to the feeling of contribution and thus the feeling of still being "of use". It determines the capacities of

a person to regulate his own life. This should not only be taking into account when designing the private dwelling of elderly, but also when designing the collective and public spaces, in- and outside. These should be designed in such a way that it enables elderly to keep on executing their daily tasks, like going to the supermarket or having a shower. Also being able to help others for example results in a sense of purpose and self-esteem. It turns out that generative activities in intergenerational care programs, in which the elderly teach or tell something to children from their experiences, gives the elderly purpose which in turn positively effects their well-being. All of this is important if we want elderly to stay engaged and part of society. This feeling of being of use when helping others and the need for social contacts are called social interdependencies, which we need in life to make it fulfilling.

Conclusion

From this study it becomes clear that there are actually three psychological needs that if paid attention to could stimulate elderly to stay engaged and enhance their intrinsic motivation for life in general, mental health and well-being. These are independence, relatedness and competence. For independence, it turns out that self-governance, being able to decide yourself what to do when and in what way to do it, access to sufficient resources and having a place of one's own are very important. For relatedness the feeling of being at home and the importance of planned and unplanned encounters is stressed, enhancing this feeling of home. For competence it is important that the environment is stimulating and enables elderly to keep on executing daily tasks.

Independence

- self-governance
- having a place of one's own
- access to sufficient resources

Relatedness

- feeling of being at home
- planned an unplanned encounters

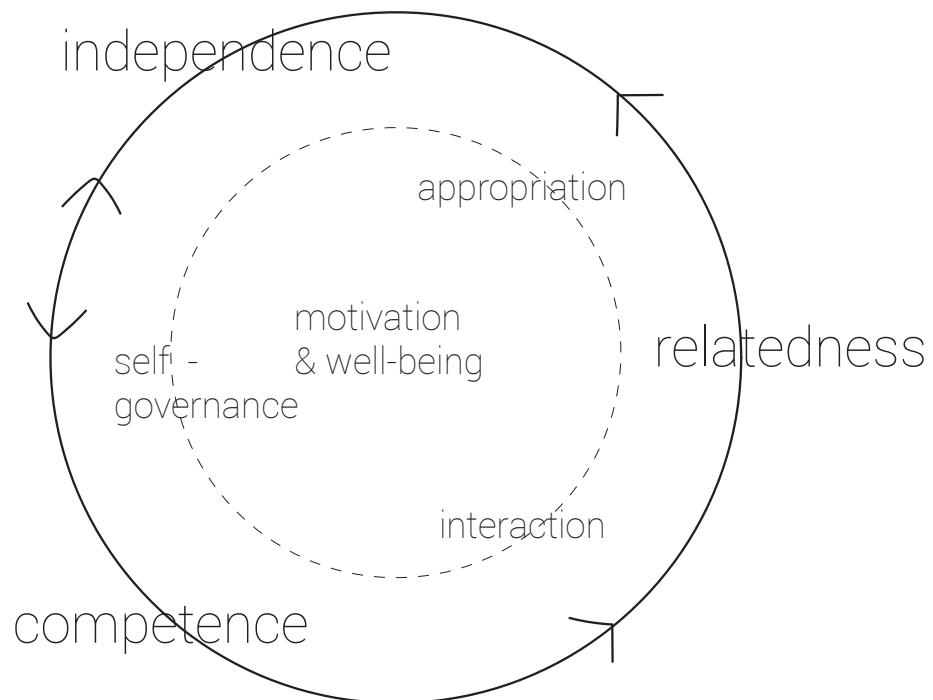
Competence

- enabling and stimulating environment
- intergenerational activities

Whatever space and time mean, place and occasion mean more. For space in the image of man is place, and time in the image of man is occasion.

- Aldo van Eyck (1962)

Maybe you could say that if an elderly has lost motivation in life, not being able to do things in his or her own way, and not feeling at home, time will be time and spaces will be spaces, while in a situation that a house feels like home, people feel related and are in contact with others, feel useful and are part of society, time becomes occasion and spaces becomes places.



independence

the state of being free from the control of others

relatedness

a particular manner of connectedness

competence

the ability to perform certain tasks contributing to the feeling of being of use

a collection of rituals

the fieldwork

Introduction

"The best source of information is the person for whom the designer is designing the product." (Buti, L.B. 2018, P.8)

How to come up with a design for a group of people that is in age and habits furthest away from you? How do you get to know their rituals and habits, their use of their homes, their limitations? What they need? The main research of this graduation studio consists of anthropological research, staying in an elderly home for one week, observing their daily lives: a fieldwork week. To make this possible, the studio works in close collaboration with a care and housing association called 'Habion'. During this week, I stayed in Huis Assendorp, in Zwolle. Huis Assendorp is a recently renovated place, where Habion has already implemented their new vision on elderly living:

a place where all ages live together, where you can stay no matter how old or ill you get. The care is the thing that adapts, not the residents.

Staying in a place where elderly live, being part of their lives for one week and doing the same things, gave me the opportunity to really dive into their rituals and daily lives. Having this experience and knowledge is really valuable as a designer. It gives me the chance to really ground my design and take well-considered decisions.

The following pages show the conclusions of my observations. An extensive overview of all the drawings and analysis of the whole can be found in the fieldwork booklet "a collection of rituals".



Huis Assendorp, own picture, Oct 2019

I want to start with a story.

I know a woman.
Her name is Jeanneke.

When Jeanneke's husband died, she was left alone in her house. She moved 3 times, before ending up where she lives now.

She tells me that the house is so beautiful. That she only needs to push a button and the nurse will be right at her service.

But she is also sad because the residents are much worse than she is. She misses a good conversation or a laugh.

Because she is actually quite sharp still! And has a sharp tongue.

She is just afraid of falling and therefore she needs help with almost everything

She does not dare to walk alone, but the nurses are busy, so she never goes outside

To stay engaged, she goes to a day care where they read the newspapers together and talk about the news.

But this is only twice a week and the other days, she fills with reading and looking out of the window, in between the fixed moments food is served.

That's why she loves when we, her family, visit her.

I noticed something similar, in my week in Zwolle.

There was a woman.

Here name was betty.

Betty is woken up every day at 7. She thinks this is too early, but this is when the nurses do their round.

Because she can't move herself she gets help from the nurses. At 8 she has breakfast in her room and reads the papers.

At 10 she is put downstairs at the coffee round, where the other care residents are as well.

At 11 she is brought back to her room again and she watches tv, because at 12 lunch is served in the common kitchen again with the other care residents.

After lunch the nurses bring her back to her room and install her in front of the television again.

This lasts until 5, when she is picked up by a nurse to have dinner at the common kitchen, again with the other care residents.

After dinner, betty is brought back to her room, where she watches television until the nurses put her in bed at 12.

When we visited Betty, she told us she was waiting for 3 weeks already for someone to go with her to the Jumbo. And that she hoped we would soon come back.

I think she loved it that we visited her.

Observations

What I noticed in Huis Assendorp and my other visits to elderly homes

They all seem to look for engagement but value their privacy just as much. This engaging is impeded by the fixed schedules and rules in the elderly homes, and their limited mobility, taking away the independence of the elderly.

Both Betty and Jeanneke are unable to go outside independently, while they do really enjoy it. Jeanneke is afraid of falling and Betty's wheelchair needs someone to push it. Going outside would give them the opportunity to meet and interact with others, since the buildings they live in are quite closed to the outside world and people don't randomly go there. Making contact with others and being able to interact is very hard for them, while it has been proven that being in contact with others is important for staying engaged and prevent loneliness.

I also noticed the joy our presence brought and the incidental moments of a resident taking care of a fellow resident in the right setting. While most of the common spaces were not used, some were and here the act of taking care of each other was visible.

So, in the right forms, the feeling of a community that takes care of each other, can happen. And I do have the feeling they want to be part of something, but because of different factors are unable to. To be able to create such an environment, in which people naturally interact, it has to give the feeling that people have a free choice. That they can be sociable if they like to, but that it is also okay if they retreat. The funny thing is that giving them this freedom to retreat, will make them more likely to interact.

Since this freedom, this independence is lacking for most of the people in elderly homes, I think here lies a chance for improvement. A community in which freedom of choice rules. In which they are not dependent of fixed schemes and are neither forced to take care of each other, but some place it naturally evolves. A place where all elderly, in any physical state, have the possibility of interacting with others and are not secluded from society.

What stands out from the two stories on the previous pages is the willingness of these elderly to do things, talk to others, go outside, but their inability to do so. And the reason for this is their loss of independence. Resulting in being lived, instead of choosing how to live.

And as seen in the previous chapter, literature actually emphasizes the importance of independence for intrinsic motivation in life, and motivation for participation. In fact, the feeling that people have a free choice, that they can be sociable if they like to, but that it is also okay if they retreat, will make them more likely to interact.

So this raised the question for me:

Could independence be key to an inclusive living environment for elderly?

And thus:

How can we create a community in which elderly in need of care get back their independence – in which the independence of elderly is stimulated?

With this question in mind I started digging more into the literature. And I found some interesting themes to structure my research.

Independence is often used together with two other notions: **relatedness** and **competence**, as key elements for intrinsic motivation for life.

Independence is the state of being free from the control of others. A bit like autonomy. It is directly related to **competence**, which is about mastering skills and the ability to execute certain tasks, which leads to the feeling of contribution and thus the feeling of still being "of use". **Relatedness** is being connected to others. Making contact with others and being able to interact has been proven to be important for staying engaged and prevent loneliness.

So after coming back from the fieldwork, these themes and the literature study helped with asking the right questions and categorizing the analysis.

For **independence** I have looked at the following:

- What about their day schemes, how fixed are these?
- Are there enough activities and facilities?
- How is the neighbourhood designed? Can they easily go out? Are facilities like a supermarket nearby?
- What do their private rooms look like? Do they have the ability to pull back, cook themselves, invite others, etc?

Relatedness can be found in other elements:

A condition for relatedness is the feeling of being at home. To reach this, Talja Blokland, Jan Gehl and Herman Herzberger all stress the importance of unplanned encounters. So from my observations, I looked at:

- Are there opportunities for encounters and interaction?
- What about the people that live there, how do they interact with or help each other?

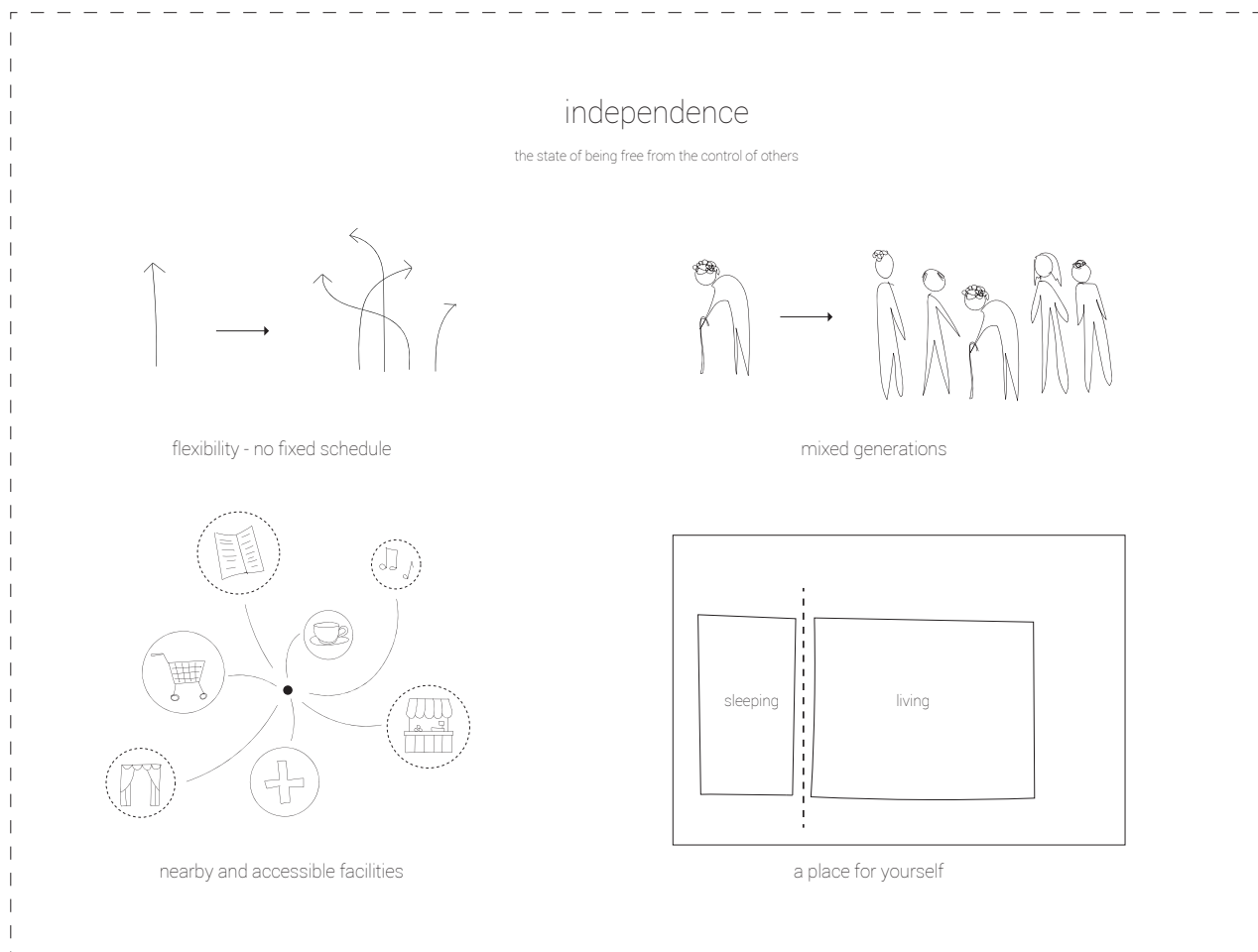
Another important theme for relatedness and the feeling of home is **appropriation**. The act of making something your own. For this theme I looked at the way the people make the building or space their own and found why certain spaces worked while others didn't.

- What did they do to personalise their rooms?
- Were there any transition zones
- What did they look like?
- Did and how did they domesticate the common spaces?

For **competence**, the possibility to execute (daily) tasks and being stimulated to participate looking at the design of the neighbourhood as with independence is very useful.

- Can they easily go to the supermarket etc?
- But also are there activities that ask for certain skills that make the elderly useful and engaged?

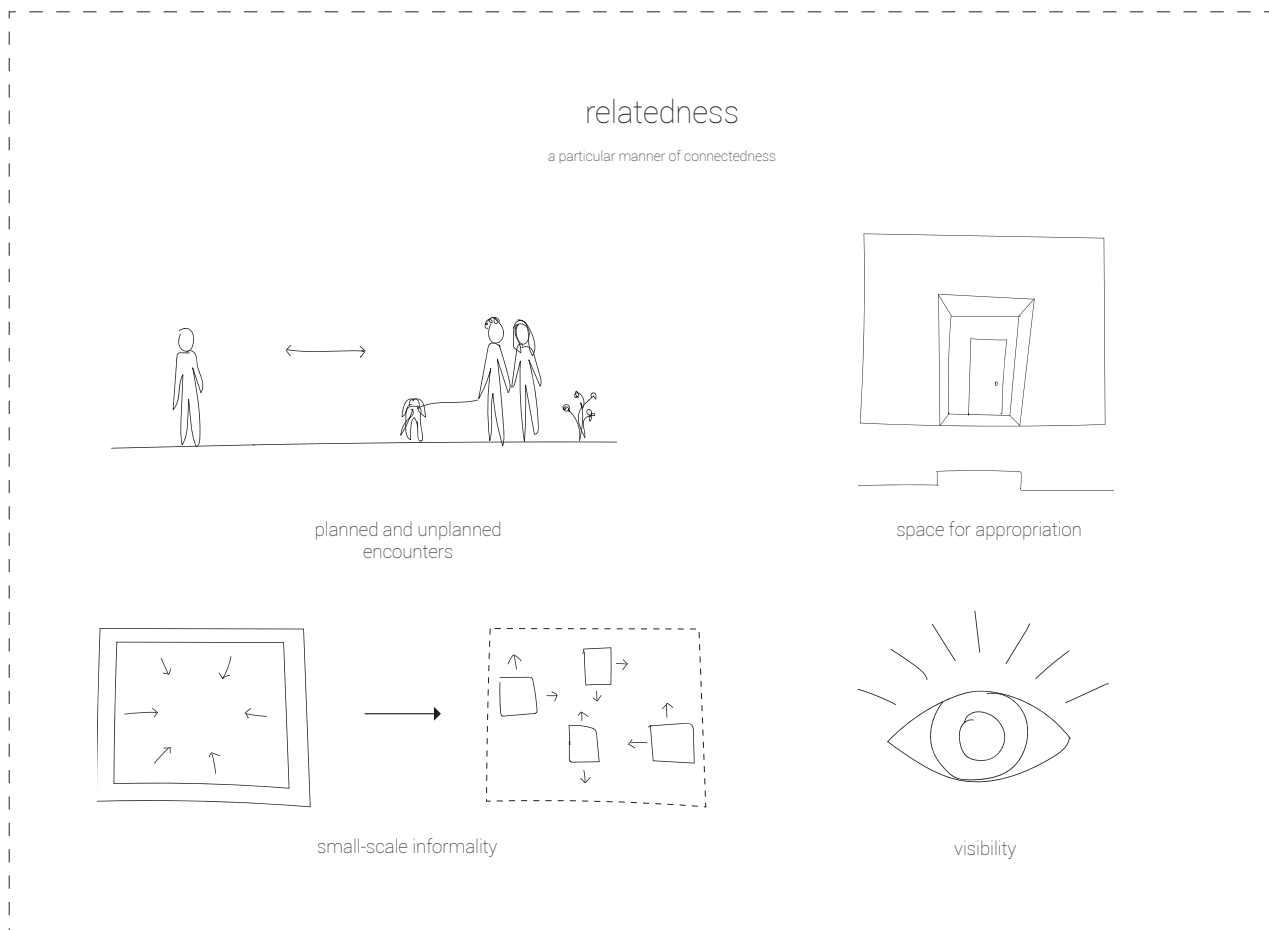
The following pages show the conclusions of my time in Zwolle. Some observations were more general, not directly linked to the 3 themes, but still led to useful design guidelines. The main analysis and conclusions are though about the three themes of independence, relatedness and competence, and what is important to take into account when designing something new.



Conclusion

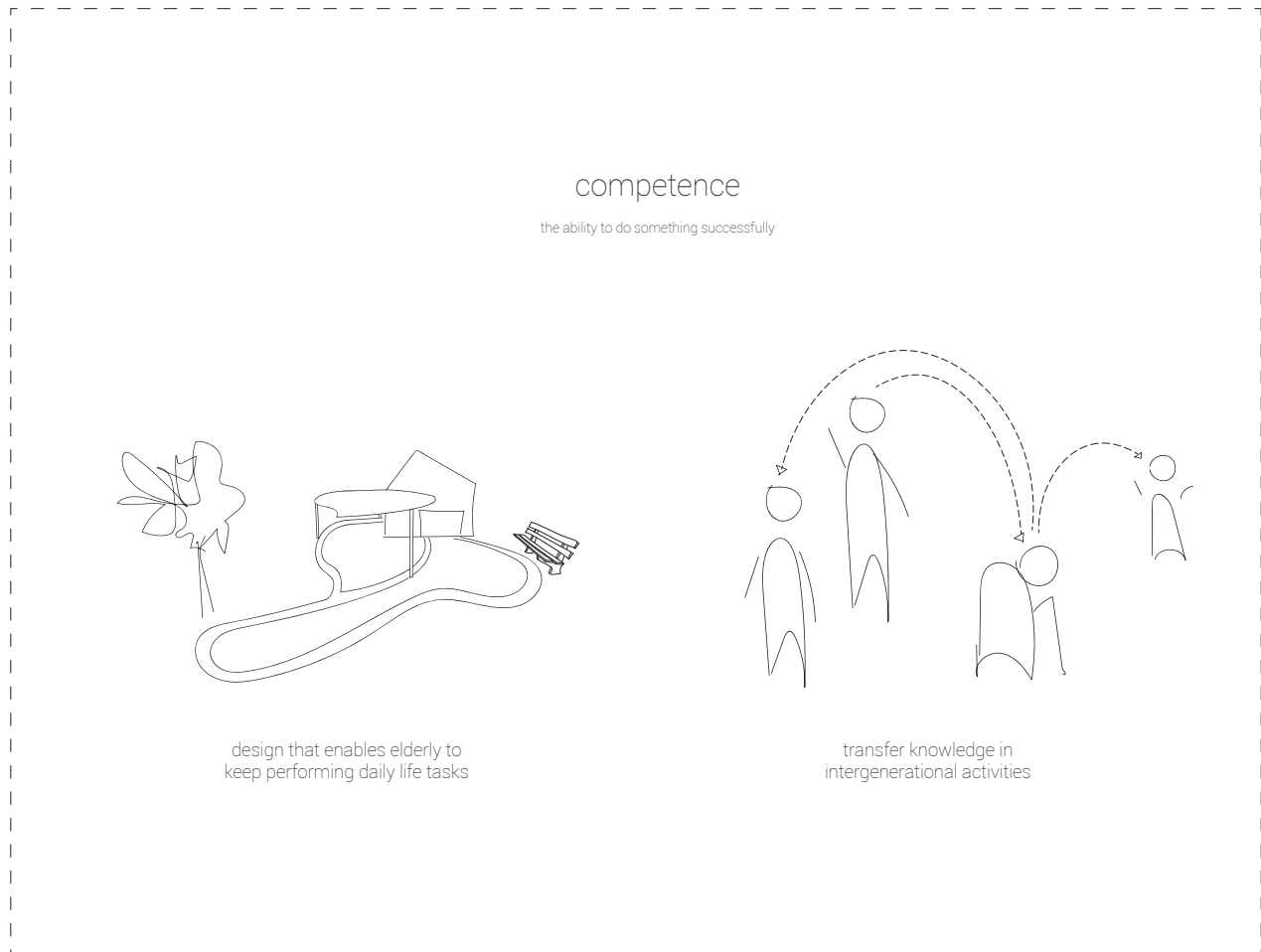
From the analysis it has turned out that for independence 4 things are key. One is about flexibility, the ability to choose when to do what, to rule your own agenda. Second is a mix of generations, being surrounded by other people, that do not need care. This will lead to more hands to help a little bit with stuff that otherwise care takers have to do. Plus being surrounded by old and decaying

people only will make one grow older faster as well. Third is easy accessible facilities in the near surrounding. This will ensure that also less mobile elderly can do their own groceries as long as possible. The last, but not the least important is privacy, a place that is your own, that gives the opportunity to retreat, but also invite people over for a visit.



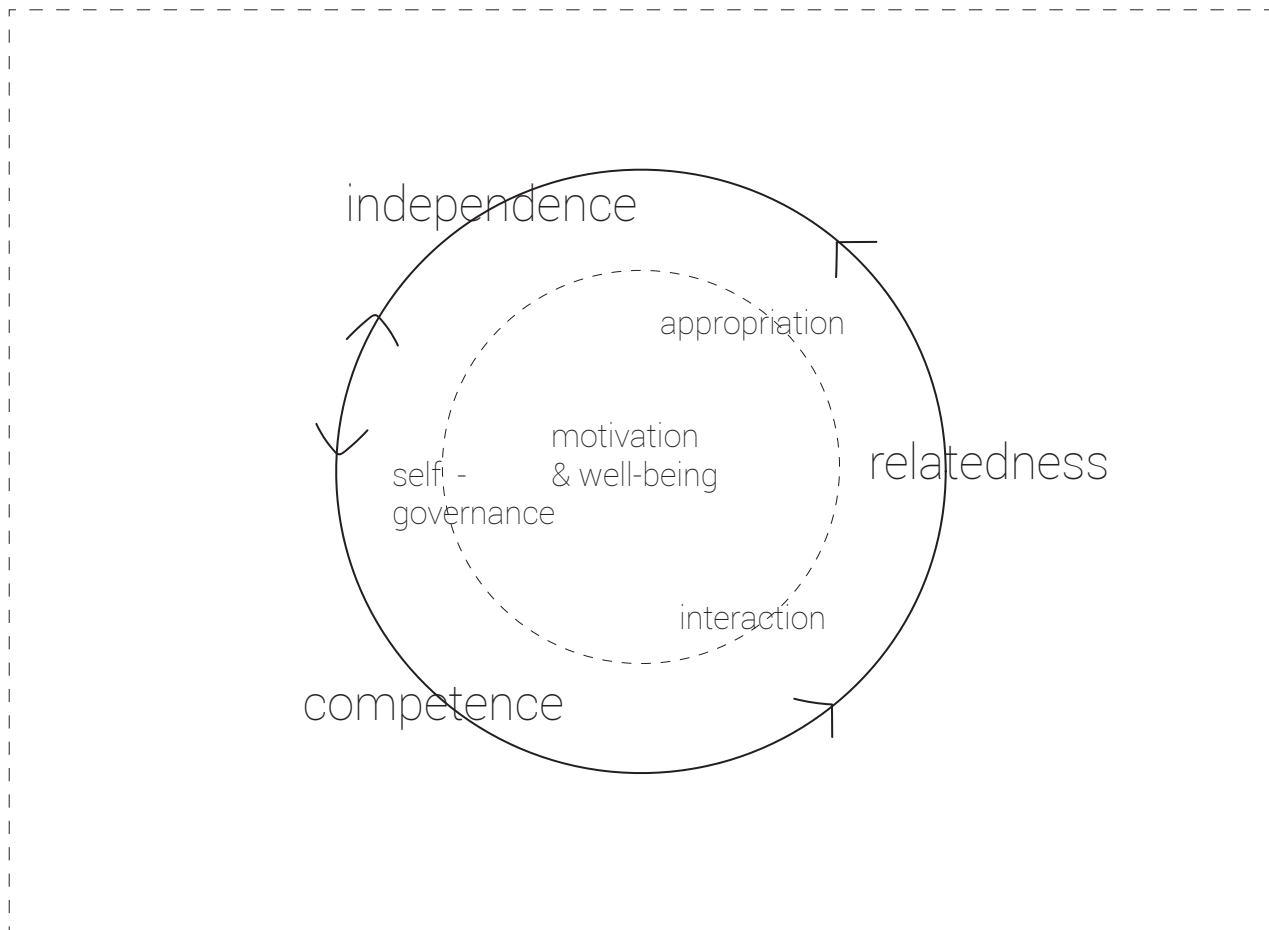
As said before, relatedness is existential in staying engaged and prevent loneliness. The fieldwork has shown that attention should be paid attention to a couple of things. The meeting of others, planned and unplanned, is very important for establishing relationships. Next to this, room for appropriation is key to make people feel at home, which will lead to a feeling of being responsible for

that space and thus engagement. From anonymous big institutional buildings to small-scale informal housing is important for connecting easier with others and doing stuff for others without having the feeling of owing that to everyone else. Lastly, visibility leads to a feeling of safety and more frequent use of space.



Competence is about mastering skills and the ability to execute certain tasks, leading to the feeling of contribution and thus the feeling of still being "of use". For elderly executing daily tasks gets harder and harder as their bodies fail them. To ensure they can execute these daily tasks as long as possible, the built environment should be designed in such a way that this becomes possible for them. Think of smooth covered paths, support bars,

enough rest opportunities, no steps or stairs, domotica even, etc. Another way to improve competence is to keep elderly active and engaged. Let them interact with youngsters that are still vital and let them do stuff. Keep them busy, let them tell stories or teach others what they have learned through time, so they feel useful again. The old days do not have to be just sitting and staring out of the window!



What becomes clear is that the fieldwork confirms what the literature study claims. It for example showed that spaces that were appropriated were used more often and that places like the tea house became social places because of the location next to the busy entrance. After a talk with a lady, it was even more clear that it is all related and that it is an iterative process. You could see it like this: If the base is good, if it feels like **home**, if I can decide

myself **how** I want to live, only then the step to the outside world is possible and will I be open to **socialize** and be more confident to do so. My contribution then will give me more **confidence**, my **competence** grows and I will feel even more at home.

This iterative process only becomes stronger and I believe it could make a difference for this vulnerable group.

a combination of care: elderly vs. children

tutorial paper

Abstract

This study titled “*Bridging the Gap: Combining the young and the old that are in need of care, from day care to elderly homes*” investigated the effects of nonfamilial intergenerational care on the well-being of elderly and children. Literature and case studies show that well constructed programs that are about giving and receiving are successful in achieving this improved well-being as long as attention is paid to the content of the activities, the abilities of the elderly are taken into account, enough staff

is provided and equal focus is on the elderly and children. They contribute to less loneliness, reduced depressions, more physical activity, less thinking about pains, the feeling of being connected and useful and cognitive stimulation for elderly and being less scared of growing old, more understanding towards the elderly and more self-confidence for children, all improving what defines well-being according to literature.



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Introduction

In the Netherlands, shortages in healthcare are a big problem. The baby boom generation is getting old, less babies are being born and our life expectancies are going up. As a result the ratio of old people keeps on growing and institutions can't cope with the care demand anymore. Also within education shortage in teachers has reached a critical point. In the 5 big cities in the Netherlands the school boards are even considering an emergency plan, where children go to school only at 5 years old, instead of 4 (van Gaalen, 2019). This means that kids have to stay longer at their day care facilities. If we want to be able to provide the care and attention everyone needs and deserves, we'll have to come up with new solutions. At first, those groups don't seem to have anything in common: the latter being at the beginnings of their fruitful lives and the first at their gloomy ends. But research has proven that both groups benefit from each other (Hernandez & Zubiaur, 2008; Riesing & Fees, 2007; Morita & Kobayashi, 2013; Knight, Skouteris, Townsend & Hooley, 2014). The event that groups of different age categories (generations) interact with and benefit from each other is called intergenerational care. When those groups are not family related, it is called nonfamilial intergenerational care. So if this is true and if both branches have such a shortage, why don't we try to combine them?

The aim of this paper is to find an answer to the question how nonfamilial intergenerational care can improve the well-being of elderly and children, while at the same time responding to the shortages by combining their care. To be able to answer the main question, chapter 1 will first examine which categories of both parties are suited for this combination. After this, chapter 2 will discuss which part of the care and what activities could be combined in an intergenerational care program. Which effects the target groups have on each other, both positive and negative can be found in chapter 4. A case study, the nightingale house in London, will then show an example of how this intergenerational care is being facilitated at this very moment.

Important is to clarify how well-being in older adulthood is defined. The article of Riesing & Fees (2006) used in this paper uses Ryff's (1995) set of six core dimensions of well-being, that she assembled from guiding theories and empirical studies on the meaning

of psychological well-being and aging. These core dimensions include "self acceptance, positive relations with others, sense of autonomy, environmental mastery, purpose in life, and personal growth" (Ryff, 1995, p.99). It is also important to define the well-being of children. Since day cares are informal educational settings, the research of Laevers (2011) can be used. In his research, Laevers defines two aspects in the educational model Experiential Education (EXE) that make care and education more effective, namely the emotional well-being and the level of involvement of the child. Here, well-being is described as the satisfaction of basic needs and "the degree to which they feel at ease, act spontaneously, show vitality and self-confidence" (Laevers, 2011, p1).

Which categories of both parties are suited for nonfamilial intergenerational care?

In the Netherlands, the care system indicated 6 categories of care, the "zorgtredes" (NZa, 2018). They indicate the independence of the elderly and the amount and type of care they need. Step 1 are the elderly that live independently and only go to the doctor once in a while, but don't get specialized medical care. Step 2 are the independently living elderly that, because of an acute care demand or chronic disease, do get this specialised medical care. Step 3 are elderly that are a little bit more dependent and need support with for example their household. The elderly in Step 4 are again more dependent and need temporary professional medical and personal care at home. In step 5, the elderly make use of the care in the previous steps, but then structurally. The last step, step 6, are the elderly that are institutionalised or get full-time care at home and are thus completely dependent of others.



Figure 1. Care indications in the Netherlands (zorgtredes) (NZa, 2018).

There are different ways to indicate which groups of the elderly that are in need of care, are suited for

intergenerational care programs. This could be done by for example looking at their care demand, the *zorgtrede*s. The articles used, include even people with dementia that will spend the rest of their lives in nursing homes, corresponding to step 6. This would imply that, if the elderly of step 6 are even considered as fit, the elderly belonging to all the other steps are as well.

If looking at the case study, the Intergenerational Programme at Nightingale House in London, this would not apply just like that. In this case, only residents of the Nightingale House participate in the programme. The reason for this is that it is a very intensive program where the elderly and children participate in multiple activities per day. This would almost be impossible for non-residents. But also within a nursing home, the amount and type of care differs per person and some might be much more independent than others. Some might have very clear minds, but need physical care, while others are physically well, but their minds let them down, for example when dementia starts to show up. Dr. A. Somers, who conducted a research about the Nightingale programme, writes that "Elderly residents who were frail, had dementia, or had lost verbal communication, participated alongside those who lived almost independently and received only light touch support from the care home, yet all benefited from interaction with the nursery children." (2019, p.9). She also says that even the residents participating once a month showed lasting impact. This proves that actually all types of elderly are suited for participating in an intergenerational program.

Since this paper is looking at day cares, the age of the younger group will be between 0 and 5 years old. One of the reasons for focussing on this younger group is the fact that both are in day care facilities, which generates the possibility for combined care. Combining the care in its turn might alleviate the pressure on both the medical and educational branch that suffer from shortages. The most important reason however, is that it is proven that the interaction of these young children with elderly has an enormous potential in improving the well-being of elderly, not only reducing loneliness, but also giving them more purpose in life and making them more physically active (see next chapters). In the Netherlands, a distinction is made between children with and without a handicap, either physically or mentally. All could choose to

go a regular day care, but not all regular day cares accept children with a handicap, since it asks for specialised care and staff. Because of this, there are also specialised day cares for handicapped children, either ortho-pedagogical day centres, day cares focussing on a sensible day completion ("dagbestedingscentrum"), or medical day cares (WMOwijzer, n.d.). No research, however, yet investigated the combination of specialised day care for children and elderly day care.

For now it can be said that all types of elderly, preferably living in the care home that offers the program, and at least all children at regular day cares are suited for nonfamilial intergenerational care programs, with the possibility of looking at specialised day cares as well.

Which part of the care and what kind of activities could be combined in an intergenerational care program?

You might think the care preschool children and elderly need is of a complete different level. This is true, partly. The children need someone to watch over them, entertain them or give them something to entertain themselves with, mostly with an educational twist to prepare the children for primary school and teach them social skills. The care elderly need is divided into two parts: their medical care and their social care. The medical care is of course something the children don't need. But it is the second one, the social care, that is interesting for looking at if talking about nonfamilial intergenerative care. This social care consists of the things the elderly undertake between the moments they need medical care, like activities to stay active, to prevent from getting lonely, or to stay socially engaged, etc. It is even called 'elderly day care'. This then, is quite similar to the care the children get. The part of the care that could be combined, thus comes down to their day care activities

But "bringing young and old together does not automatically result in positive and beneficial exchange. If not properly facilitated and planned, activities may confirm or exacerbate prejudice" says Granville (as cited in Somers, 2019). This indicates activities should be well thought through. The research of Knight, Skouteris, Townsend and Hooley (2014) shows that it should be activities that both parties experience as meaningful:

Intergenerational research has emphasized the importance of the older generation perceiving their contribution to the interaction as valued and meaningful in order to instill a sense of generativity. Erikson (1959) uses the term generativity to explain the psychosocial drive seen in older adults to guide the next generation. These findings show that it is the generative act of contributing meaningfully to the lives of others that provides psychosocial benefits, and suggest that the perceived failure to contribute can actually have negative effects in older persons. (p.272).

The above shows that special attention should be given to activities in which elderly have to carry out tasks or actively participate, since the inability to do so could lead to negative effects. The research of Reisig & Fees (2006) concludes that elderly of 85 years and older weren't as satisfied as the younger elderly groups and felt less positive about themselves after engaging with the children. A reason for this could be the increased loss of senses, like seeing or hearing and decreased mobility, that are more common when growing older and that make it harder to participate in certain activities. The feeling of not being able to participate or not being able to carry out certain tasks could be frustrating. When designing an intergenerational care program it is important to take this, the different age groups and their capabilities, in mind.

The two cases that are seen as successful, offer a vast array of activities. They have a deliberate programming alternated with spontaneous encounters and enough staff to lead the sessions. At Providence Mount Saint Vincent in Seattle, the residents and children engage in activities, like music, dancing, art, lunch, storytelling or just visiting. At Nightingale House in London, the activities range from reading and drama therapy, to exercise class, math sessions, creative sessions and baking. When organising these activities, the institutions make sure that both groups, the children and the elderly, can participate equally, without focussing too much on the performance of one of the two. This equality and feeling of shared experience is important for the establishment of relationships between the young and the old. It's about giving and receiving. An important

element of these activities is reminiscence. Reminisce literally means "indulge in enjoyable recollection of past events" (Lexico, n.d.). Doing things that remind of the past or bring back lost memories, are proven to be important in the maintenance of psychological well-being (Mroczek & Spiro; Pasupathi & Carstensen, in Knight et. al., 2014). Incorporating it in intergenerational programs doesn't only improve the elderly's well-being, it also helps with changing attitudes from both groups towards each other, in a positive way (DeSouza, 2007). A special activity is when the children visit the houses of dementia residents. By doing this the children are introduced to aspects of aging, namely getting tired and the need to sleep.

With a little extra attention to generative activities, making sure to take into account even the frailest elderly, and with equal attention for both groups that give and receive and enough staff around, actually many different activities of the day cares of elderly and children could be combined in nonfamilial intergenerative care programs.

What effects (positive and negative) do the target groups have on each other?

The effects intergenerational programs have on elderly and children don't only affect their physical health, but also their psychosocial health. They include a vast array of aspects, from feeling useful to forgetting about their pains for elderly and acceptance and reduction in stereotyping for children.

The research of Reising & Fees (2006), that focusses on the older adult's perception of well-being after intergenerational experiences with youth, points out some beneficial effects the elderly experienced. The elderly that participated felt more active and younger, stopped worrying and thinking about their pains, felt connected to the community again and changed their perception of the children in a positive way.

Somers (2019), who researched the programme at Nightingale House, found quite similar things. The elderly of the program were relieved of not being the object of care for a moment, being in a child centred surrounding, and because of that stopped thinking about their pains. They engaged in socializing activities that made it possible to establish friendships, fighting loneliness,

depression and insecurity and stimulating confidence and participation. The elderly were cognitively stimulated through the learning activities and by observing the kids. When seeing the children grow and develop, they sensed a feeling of being proud. Next to this, they experienced reminiscing and had the feeling of being useful by helping the children with small tasks and exchanging knowledge and stories. Lastly, the older participants' mobility increased by participating in physical activities and performing movements to play with and help the kids they would usually not perform. Reising & Fees (2006) did however also conclude that the elderly aged above 85 didn't benefit as much as the younger elderly, since the feeling of not being able to engage or participate can enhance a negative feeling (as mentioned in the previous chapter).

The effects the elderly have on children are not as widely examined, but do show some promising outcomes. Middlecamp and Gross (2002) argue that stereotyping and negative attitudes towards elderly and getting older are frequent amongst children, resulting in a preference for younger adults and not willing to age. Both Somers (2019) and Riesing & Fees (2006) have found that after intergenerational programs, children show an improved attitude and less stereotyping towards elderly. The fear of elderly and aging reduced and their acceptance of people with disabilities grew. Next to this, the activities encourage children to actively participate and come up with solutions themselves, stimulating their self-confidence.

More research is done into intergenerational care programs with other target groups, aged up to 25. In these programs, similar beneficial effects within both groups are visible. In the systematic review paper of Knight et al. (2014), in which they reviewed 13 nonfamilial intergenerational interaction studies, the effects are described as "increased positive attitude and reduced stereotypic thinking toward the other, broader views of self, increased social connectedness, reduced depression, and hope for the future." (p.275) corresponding to the findings of Reising & Fees (2006) and Somers (2019). Also at Nightingale House they found that the presence and engagement of other age groups was beneficial for elderly. Especially the middle aged group of parents, teachers, nannies, or volunteers that accompanied the children that were previously missing from the care home

contributed to this (Somers, 2019). The programs with the youngest children, however do show the greatest improvements.

Though some negative effects were observed within the oldest group of elderly, the positive effects within both groups prevail. These include less loneliness, reduced depressions, more physical activity, less thinking about pains, the feeling of being connected and useful, cognitive stimulation and a more positive attitude towards the children for elderly and being less scared of growing old, more understanding towards the elderly and more self-confidence for children.

Case study - Nightingale House - London

I never had any children of my own, and now I feel I am a grandmother to so many of them. I have made wonderful friends, and being with the children is the highlight of my week. When I arrived here at Nightingale, I was terribly depressed. I felt- this was it, and I didn't want to live. But now, I feel I have some use, and I have this joy of being with the children, and the whole nursery team. I visit with them, and I feel part of something that is truly wonderful. (Resident aged 90, as cited in Somers 2019)

In September 2017 the Apples and Honey nursery opened its doors on the grounds of the care residence Nightingale House after the weekly intergenerational baby and toddler group turned out to be a great success. Now, every day and even multiple times per day, the toddlers and elderly engage in joint activities.

The care home houses 185 elderly, aged between 85 and 107, providing a wide range of care, from little nursing to specialised dementia care. The nursery for children has an average of 25 children, aged between 2 and 4, participating in activities every day. The activities are set up and tested by both organisations, child nursery and elderly care, with help from other parties like the activity co-ordinators and the physiotherapist. They make sure to maintain a great variety of events, from bigger communal events to smaller interaction groups and

always give the elderly the choice to participate or not. Nothing is mandatory.

One of their intergenerational activities is the baby and toddler group, that is meant for children that live in the near surroundings and their parents. It consists of 13 residents, 20 children, 20 parents/nannies, 1 nursery teacher, 3 nursery volunteers and 2 additional carers. By organising this activity for the even younger children, or babies actually, the neighbourhood is also involved. Figure 2 shows the effects the intergenerational programme has on the elderly that participate. The resident is placed in the middle, surrounded by the different actors in the program in the closest circle and the belonging impact they have in the outer circle.

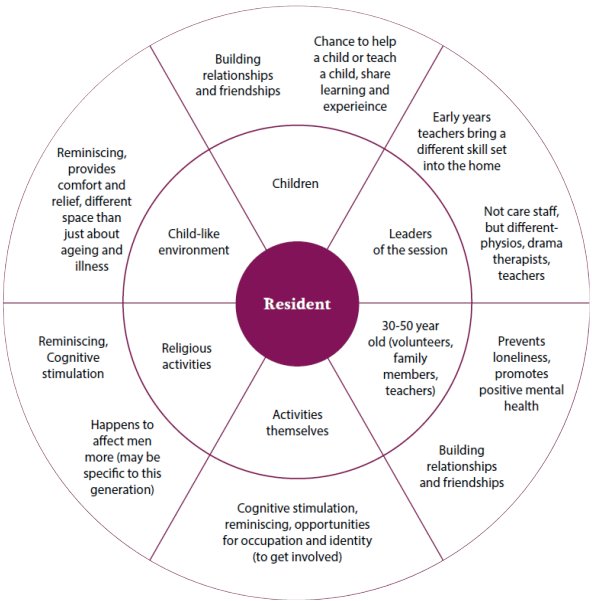


Figure 2. Impact map for elderly participating in intergenerational programme. (Somers, 2019)

Conclusion

The aim of this paper was to look into how nonfamilial intergenerational care can improve the well-being of elderly and children, while at the same time responding to the shortages by combining their care. To be able to provide an answer to this question, literature about previous nonfamilial intergenerative care programs and a case study of a currently existing example have been examined.

Nonfamilial intergenerational care is the event that groups of different age categories (generations) interact with and benefit from each other. It turns out that, though some negative effects were observed among the oldest group of elderly, a nonfamilial intergenerative program mainly has positive effects on the elderly. These effects include less loneliness, reduced depressions, more physical activity, less thinking about pains, the feeling of being connected and useful, cognitive stimulation and a more positive attitude towards the children. These beneficial effects respond to Ryff's (1995) set of core dimensions of well-being, including self acceptance, positive relations with others, sense of autonomy, environmental mastery, purpose in life, and personal growth.

Also the effects on children turn out to be beneficial. It is proven that after participating in an intergenerational care program, the children were less scared of growing old, showed more understanding towards the elderly and were more self-confident. These effects respond largely to the factors that Laevers (2011) indicated for the well-being of children, namely feeling at ease, acting spontaneously, showing vitality and self-confidence.

To be able to engender these beneficial effects, it is important to not just put elderly and children together, but really put time in establishing an effective programme, like Providence Mount Saint Vincent and the Nightingale House did. The activities could range from creative sessions to more educative sessions that are about giving and receiving, as long as all different types of elderly and their abilities are taken into account, there is enough staff and equal attention is paid to both the elderly and the children. Especially generative activities, asking participation and skill from the elderly, need special attention. If not properly thought through, they could have negative effects on the elderly that are not able to execute them. Reminiscing, bringing up memories or feelings from the past, has proven to be an important element in the success of the activities.

The beautiful thing is that, if looking at their care demands, actually all categories of elderly and children attending day cares are suited for nonfamilial intergenerational care programmes. However, the programmes at the mentioned case studies are long-term programmes that, because of their intensity, work

only with residents of the elderly homes. For this reason it can be said that it is preferable that the participants are residents of an elderly home offering the program.

The research shows that by carefully constructing a program with children and elderly, that is about giving and receiving, in which all different types of elderly and their abilities are taken into account, enough staff is around and equal attention is paid to both the elderly and the children, the well-being of both groups can be improved. The reason is the contribution to less loneliness, reduced depressions, more physical activity, less thinking about pains, the feeling of being connected and useful and cognitive stimulation for elderly and being less scared of growing old, more understanding towards the elderly and more self-confidence for children, all improving what defines well-being according to literature.

Discussion

This research has mainly focussed on the findings of Somers' research (2019) into the intergenerational programme of the Nightingale House. This was a first step in tracking and identifying specific impact from previous anecdotal evidence. Though she did work with a methodology, to improve the scientificity of the research and to be able to give a grounded answer to the main question, her findings should be further elaborated on, using her framework as starting point for more quantitative measures.

Because the cases focussed on long-term programs, the effects occasional interactions could have, are left underexposed in this paper. Even though Somers (2019) mentions residents that only participated once a month also benefited, it would be interesting to look at the effects short-term meetings or less intensive programs, also for non-residents, have on the well-being of the elderly and the children.

It does seem to be an intensive program. The baby and toddler group of the Nightingale House has 1 nursery teacher, 3 nursery volunteers and 2 additional carers on a group of 13 residents and 20 children. It was however beyond the scope of this study to really dig into the numbers of staff needed for both regular and intergenerational programs. To be able to say something about alleviating the shortages, a more comprehensive

study should be done into how many staff is needed.

No studies yet investigated the possibility of combining specialised day cares for children with a handicap and elderly day cares. The fact that both groups need more specialised care than regular day care children could make it even more interesting, especially when thinking of a solution for the shortages in the medical and educational branch. The question is if it will bring forth the same positive effects. This is something that should be further investigated.

I do think this program has a lot of potential. More and more elderly are going to live longer in the future and loneliness will be a big problem. Day cares for children will exist anyway and young children will always be there. So by cleverly positioning them near each other or preferably even in the same building, the possibility to start such a program is there. There are already documents that show guidelines on how to set up an intergenerational program. I think it just has to be promoted a little bit more, because people are sceptic about it and think that it is too much effort and asks too much guidance of staff. That's why research into the numbers of staff needed is so important, to try to find a way that it does not ask for more staff, but that it actually alleviates the demand for staff. It would be a shame if such a beautiful program stays largely unused just because of too little perseverance.

a place for encounters

lessons from Jan Gehl

Introduction

Since encounters play an important role in a design for elderly, this part of the research is about how to facilitate these encounters. For this the book *Life between Buildings*, (2011) from Jan Gehl is used. This chapter will summarise the most important lessons, using schematic representations and citations.

figures become human individuals:
social field of vision

possible to determine characteristics, like sex,
appr. age and activity of person

possible to see facial features, hairstyle,
age and recognise people

possible to perceive moods and feelings.
Point that meeting becomes interesting and
relevant in a social context

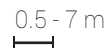
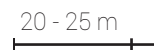
distance at which less intense contacts take place

distance at which normal conversations take
place. Degree of detail necessary for meaningful
human contact

intense emotional contacts

Social distances

In his chapter *Senses, Communication, and Dimensions*, Gehl expands on Edward T. Hall's social distances in *The Hidden Dimension* (1966). With a more elaborated gradient, he indicates which distances induce different forms of communication.



Isolation and contact [citations]

In the chapter isolation and contact, Gehl indicates principles, physical conditions, that either lead to contact or isolation. The ones that induce contact are to be taken into account while designing.

It is important that all meaningful social activities, intense experiences, conversations, and caresses take place when people are standing, sitting, lying down, or walking. One can catch a brief glimpse of others from a car or from a train window, but life takes place on foot. Only "on foot" does a situation function as a meaningful opportunity for contact and information in which the individual is at ease and able to take time to experience, pause, or become involved. - p. 72

This implies that a high level of activity in a certain area can be stimulated both by ensuring that more people use the public spaces and by encouraging longer individual stays. - p. 77

Lengthy stays outdoors mean lively residential areas and city spaces. - p. 79

The wish for light and sun, plus a modest-sized space in which people can congregate, can, however, be combined. Front yards in front of row-houses assure both wide, sun-filled spaces and a reasonably narrow, intimate street. - p.92

When buildings are narrow, the street length is shortened, the walking distances are reduced, and street life is enhanced. Narrow street frontages mean short distances between entrances – and entrances are where the majority of events nearly always take place. - p.94

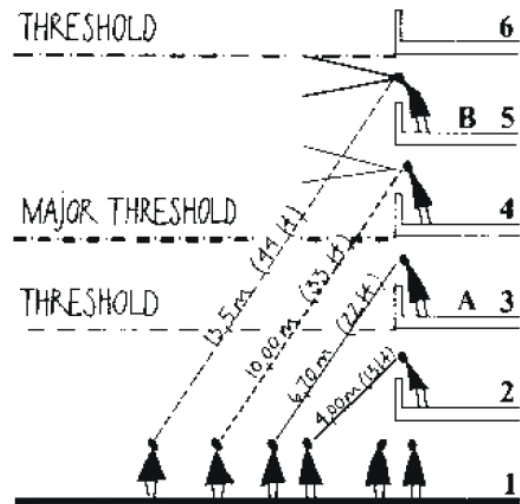
Acceptable walking distances in ordinary daily situations: 400 to 500 meters. For children this is 50m.

isolation

walls
long distances
high speeds
multiple levels
orientation away from others

contact

no walls
short distances
low speed
one level
orientation toward others



Contact with ground level in a multi-story building. p. 98

Meaningful contact with ground level events is possible only from the first few floors in a multi-story building. Between the third and fourth floors, a marked decrease in the ability to have contact with the ground level can be observed. Another threshold exists between the fifth and sixth floors. Anything and anyone above the fifth floor is definitely out of touch with ground level events. - p. 98

To assemble or disperse [citations]

This chapter deals with a number of planning decisions that influence the assembly or dispersal of people and events.

If activities and people are assembled, it is possible for individual events, as mentioned, to stimulate one another. Participants in a situation have the opportunity to experience and participate in other events. A self-reinforcing process can begin. - p. 81

Flexible boundaries in the form of transitional zones that are neither completely private nor completely public, on the other hand, will often be able to function as connecting links, making it easier, both physically and psychologically, for residents and activities to move back and forth between private and public spaces, between in and out. Being able to see what is going on in public spaces also can be an element of invitation. - p. 113

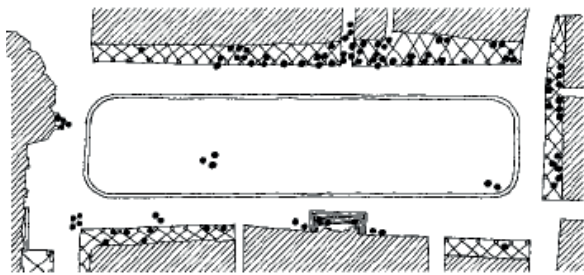
Interweaving motives, combining the useful with the pleasurable, emphasize the importance of destinations

in the public environment: things and places that the individual can seek out naturally and use as a motive and inducement to go out. For children, the playground is the place where one can always go. - p. 117

Spaces for walking, places for staying [citations]

This section discusses a number of quality demands on the outdoor environment that concern basic activities such as walking, standing, and sitting, as well as seeing, hearing, and talking.

Though people tend to take the shortest route to their destination, when large spaces are to be crossed, it is usually most comfortable to move along the edge instead of having to traverse a broad surface or walk down the middle of the space. Movement at the edge of a space makes it possible to experience simultaneously both the large space as well as the small details of the street facade or the spatial boundary along which one walks. p. 142



Survey of the city square, Ascoli Piceno, Italy: p. 148

Standing (and sitting) people tend to congregate around the edges of the square. People can be found standing alongside façades, under porticoes, in niches, and next to columns. Within staying zones, people carefully select places to stand in recesses, on corners, in gateways, or near columns, trees, street lamps, or comparable physical supports, which define resting places on the small scale. - p. 148

"If the edge fails, then the space never becomes lively."
- Christopher Alexander (1977) p. 150

Sitting people prefer a place that offers intimacy and security, for example a niche or a corner. View and orientation are important as well, for example looking at an activity.

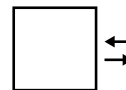
Conclusion



soft edges / transition zones



purpose in front of house



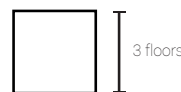
easy access in and out



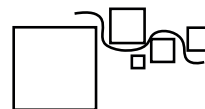
open up



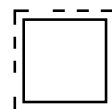
max distance till public life



maximum building height



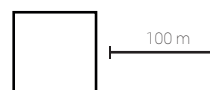
integration



fast traffic outside plot



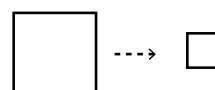
places to sit and stay



maximum open distance



facilities on walking distance
(500 m max)



logical route from A to B

a search for identity

the location research

Introduction

Another essential part of the research is the location research. To be able to know what to do with all the previous findings, it is important to know what is already there, what is not, what the difficulties are and where the opportunities lie. The site of this project is one of the locations of Habion, the housing association that the studio has worked in close collaboration with. At this moment, the site is home to one of their buildings, called

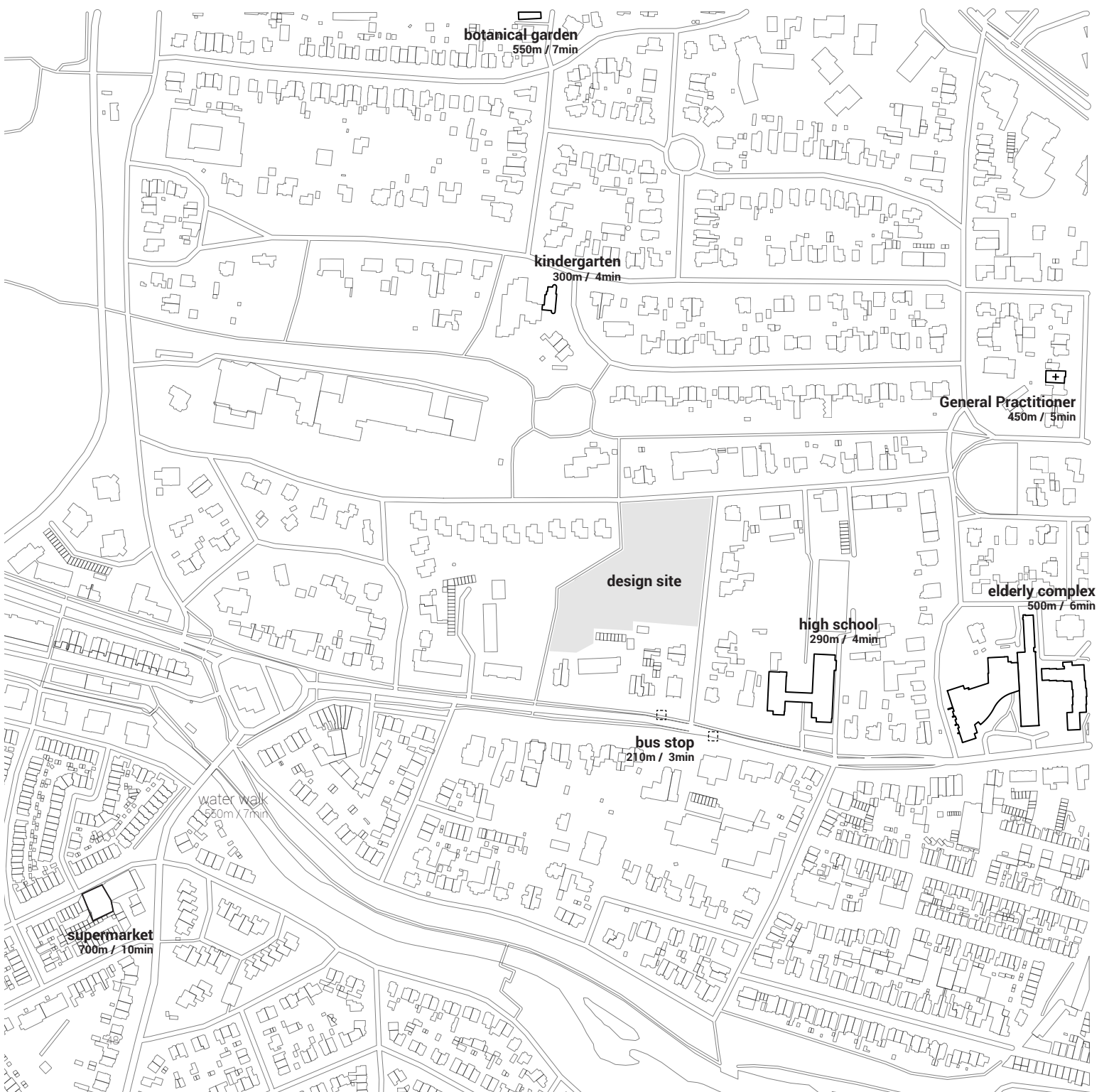
Goozicht. Since this building is about to be demolished, the site is an ideal location for a new development that is more of this time. On the following pages, an overview of the characteristics of the location can be found.

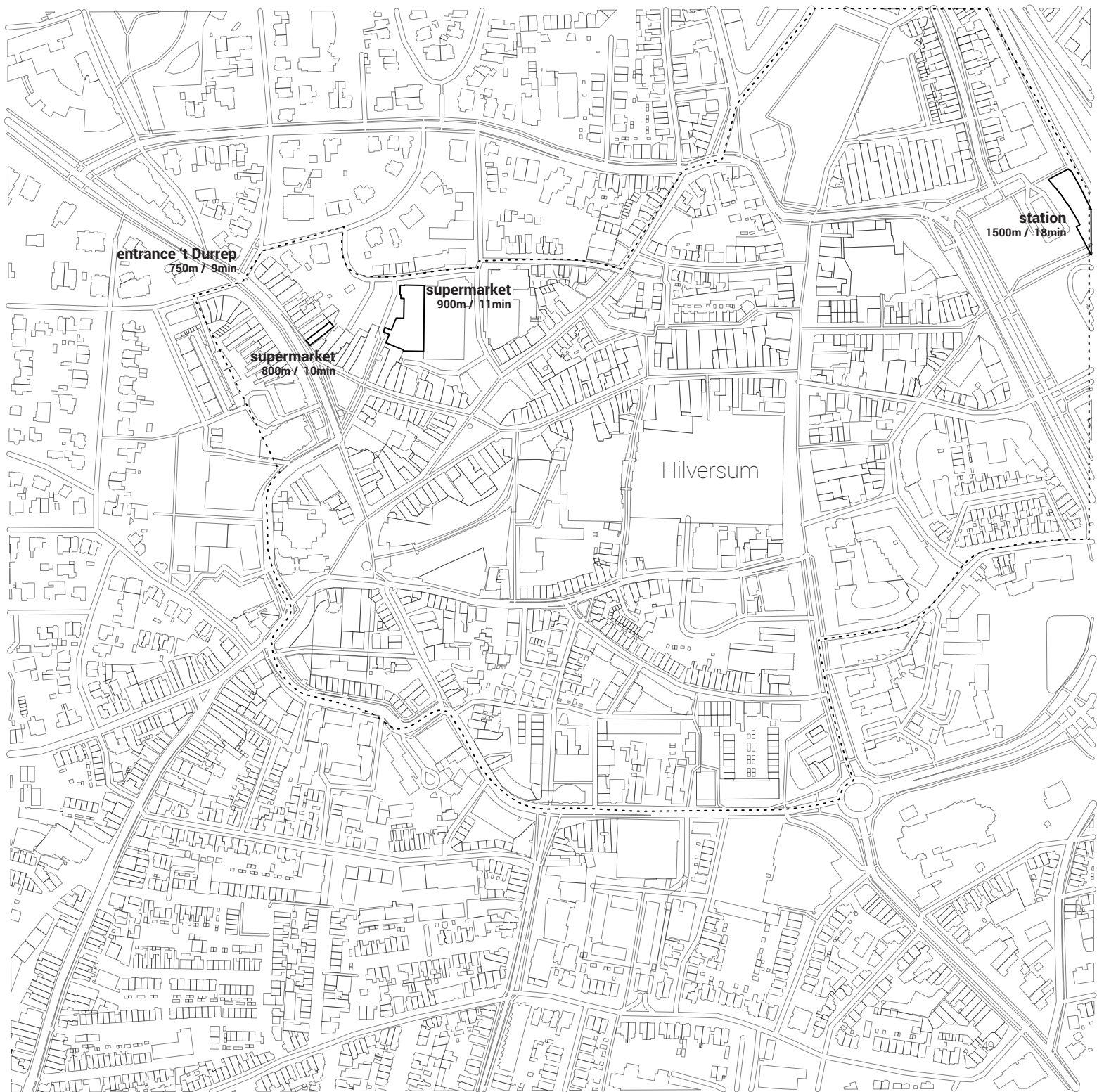
Address:

Paulus van Loolaan 21,
1217SH Hilversum



Amaris Gooizicht, own picture, Nov 2019







Jan van Ravenswaay by John van Ravenswaay, 1841



View from Boomberg by Jan van Ravenswaay, 1847

The design site

The location for the design is the former plot of care facility Gooizicht. It is located in the neighbourhood Boomborg, a suburb of Hilversum. Hilversum is located South-East of Amsterdam and North of Utrecht and is a small town of about 90.000 inhabitants. Over time the town has expanded and grown more compact, but the oldest residents now alive still call it "t Durrep", referring to the village like character of the town. The town actually still has this village like feeling, due to the many villa's with big gardens and all the nature (green) around.

The neighbourhood Boomborg, just outside the city centre of Hilversum, is mainly a residential area, with large villa's and some relatively small apartment buildings (not higher than 4 stories). The neighbourhood is characterised by its green and calm atmosphere. A big contributor to this green character is the Boomborgpark North of the plot, designed by 19th century Dutch painter Jan van Ravenswaay.

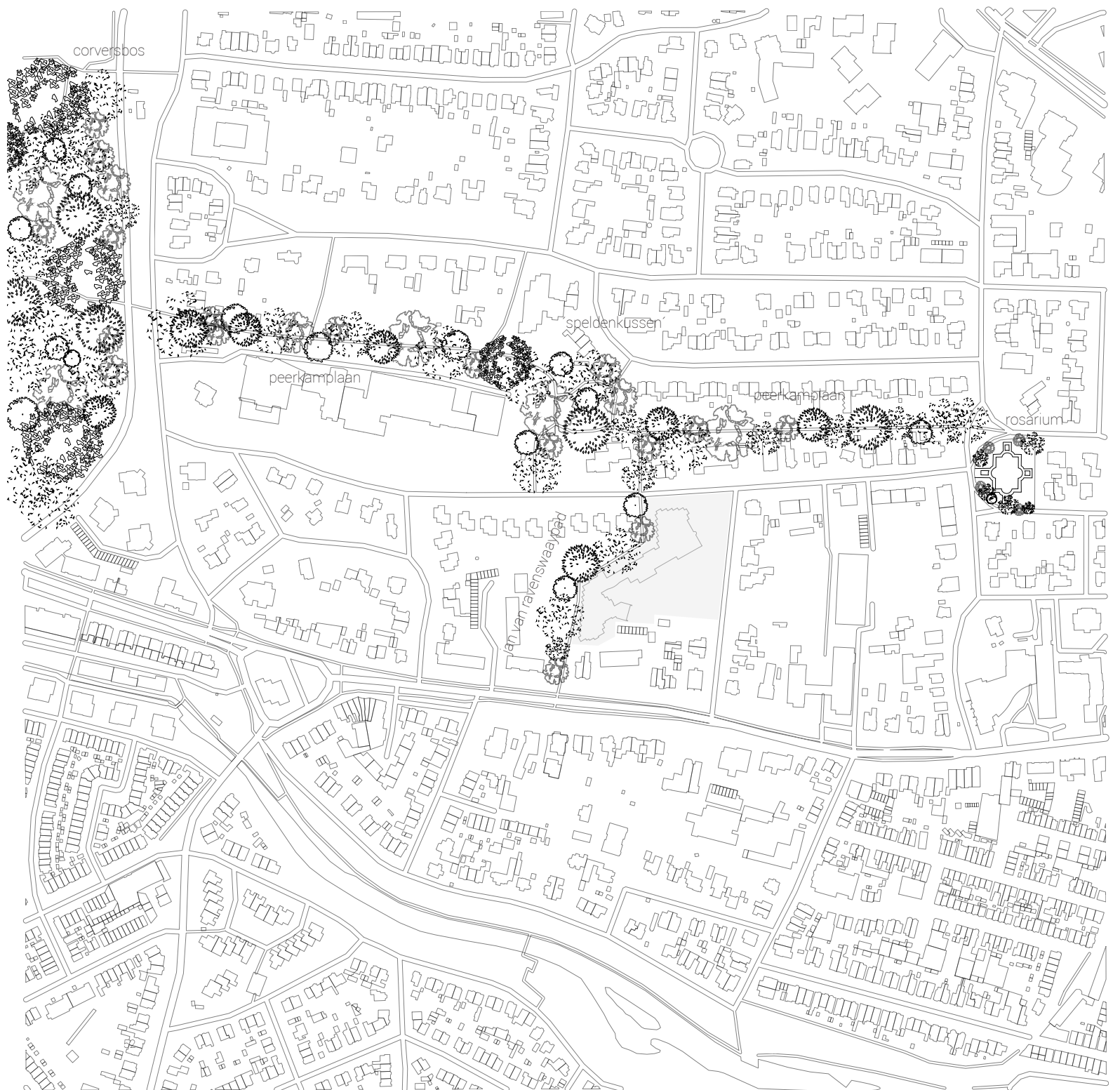
There are some facilities in the near surrounding, like a high school and a day care for kids, but most of the facilities that are needed for daily stuff, like a supermarket, are located in the city centre. Though the centre is not so far away, namely 750 meter / 9 minutes walking, for elderly that are often less mobile this is quite a challenge. A positive thing is the bus stop at the end of the street, which makes it possible for future residents to go by public transport from and to their home, making it also more attractive for other younger target groups.

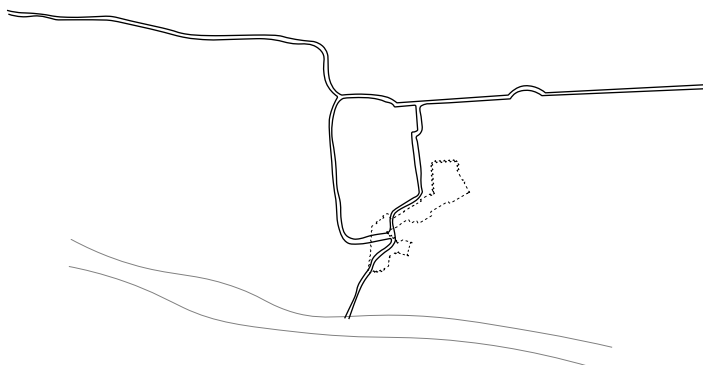
The Boomborg Park

The park that lies North of the site, the Boomborgpark is designed by 19th century Dutch painter Jan van Ravenswaay. The path named after him, the Jan van Ravenswaaypad used to go through the plot before Gooizicht was built, but was moved in 1909 to make room for Villa Corvin and its garden. This is quite strange actually, since the painter explicitly stated that the public walking route was to be preserved at all times, to allow the residents of Hilversum and other visitors to enjoy the "belommerde wandeling", the shaded walk, that he created.

"Uitdrukkelijk wordt bepaald, dat de publieke wandeling ten allen tijde zal moeten worden gelaten onverlet zoo als die nu is bestaande en alzoo eene belommerde wandeling opleverende van den hoek van het Schoonmakersweegje of den diepen weg, over den berg tot bij de gronden van den Heer Corver Hooft, aan den schapenstal, en tevens aan de oost en westzijde van den berg om, naar de molendrift, zonder dat hierop, als eene voorwaarde door de verkopers bedongen, in vervolg van tijd, eenigen inbreuk zal mogen worden gemaakt, door besturen in deze tijd, of de rechtverkrijgenden aan gemelde gronden."
- Jan van Ravenswaay

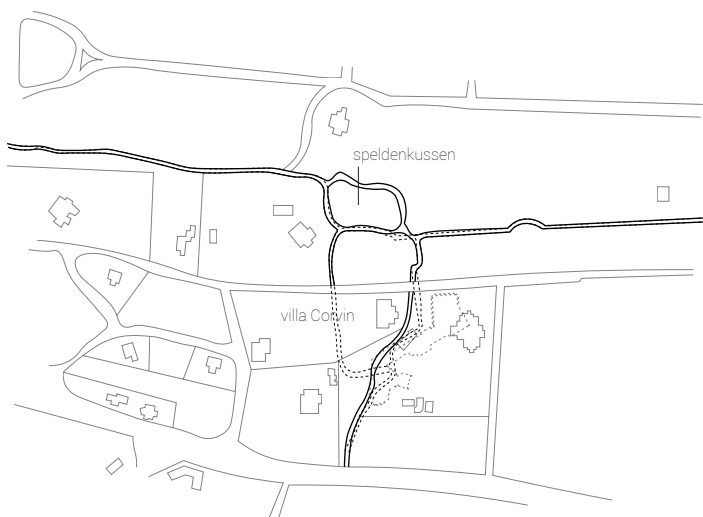
Jan van Ravenswaay (1789 – 1869) was a 19th-century landscape painter from the Northern Netherlands. He was born in the town of Hilversum and was responsible for the initiation and design of the Boomborgpark. With the park, he wanted to give the people the possibility to always and easily enjoy a green and natural surrounding, a walk under the trees providing shade in summer times. In his paintings, landscape and the way he envisioned it always came back.





1835

the original plan for the Boombergpark, by Jan van Ravenswaay



1909

loss of a part of the path because of the Bergweg and the construction of villa Corvin with garden and garden house. An extension to the North is already visible, shaping the now called 'speldenkussen'.



2019

the current plan with the Jan van Ravenswaaypad changed following the shape of Gooizicht and extensions to the North.



*a lady, resident of Gooizicht, who got lost while looking for the way to 't Durrep.
Own picture, Nov 2019*



a happy lady after guiding her to the city centre. Own picture, Nov 2019





















Demographics

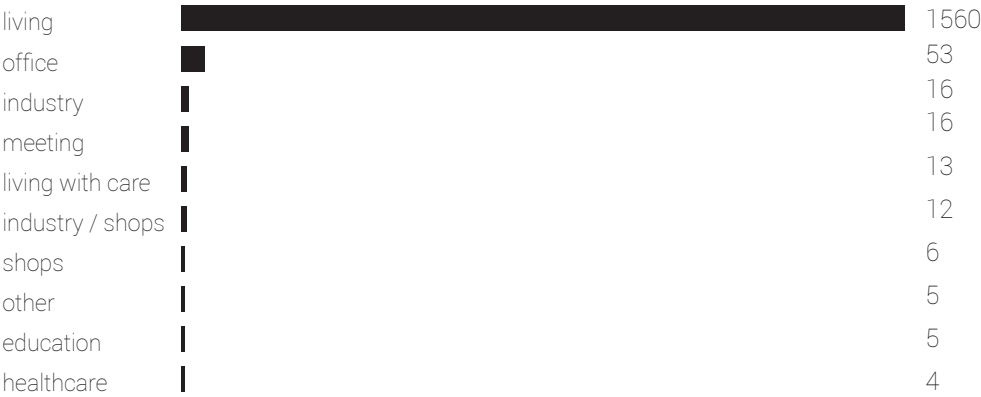
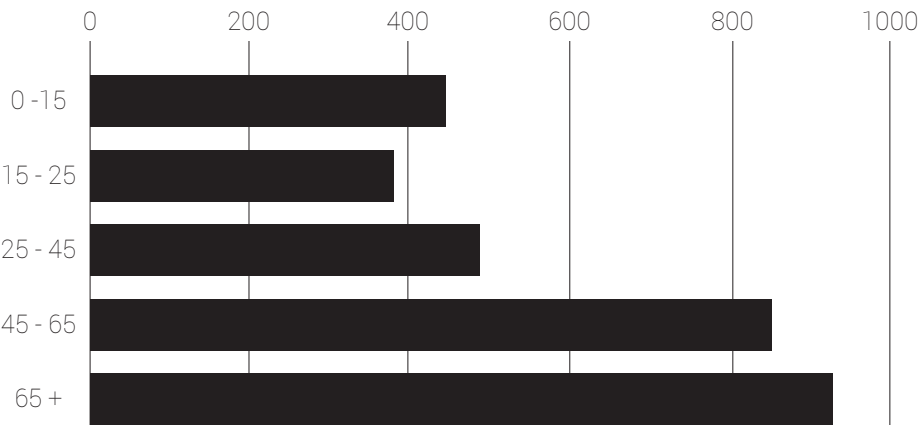
The graphs below show that the neighbourhood really is a residential neighbourhood that consists mostly of the two oldest age categories of 65+ and 45 - 65. The group of 15 - 25 is the smallest, which could be explained by the absence of a university in Hilversum. The fact that the group of 45 - 65 years old is this big, is quite interesting since these will be the people "becoming old" in the coming years that will have to think of a place to live when they need more care. Next to this, when still fit and relatively young, they are the ones that could help with informal care and when the children still live at home bring life and youth to the neighbourhood.

Average amount of m2 per person in 2017 in Hilversum

Couple no kids	57,59
Couple with kids	35,07
Single person	83,61
Total	61,67

Average amount of m2 per person in 2017 in NL

Single person	87,7
Couple no kids	64,2
Couple with kids	38
Other	44,9
Total	64,8





atmosphere, own picture, Nov 2019

Conclusion

The current building, Goozicht, is like an alien in its surrounding (page 118). While the rest of the neighbourhood consists of detached relatively small and low houses, Goozicht is big and aloof. A vacant plot gives the opportunity to respond more to the spatial layout, integrating it with the neighbourhood.

The walking path running through the design site, designed by Jan van Ravenswaay, had to move for the construction of the current building while it was written down that no adaptations were to be made to the path. It is an element that brings history to the site and for that it will be used as a binding element within the new design. It functions as a connector between the site, the neighbourhood, the future residents, the current neighbours and everyone else using the path for walks. At the same time, it is a very green element that invites for physical activity, like walking and cycling, or just strolling and enjoying nature. This being with or surrounded by nature has proven to be beneficial for a person's well-being.

The fact that there are no facilities nearby makes it hard for elderly that are less mobile to make use of them. This means less independence and often less physical activity. To ensure all elderly can stay as independent and active as possible the new design should include the most necessary facilities.

These new facilities, the restored path and a more integrated design will help attract the neighbourhood to the site.

Summary:

- Respond to spatial layout of the neighbourhood: detached buildings and low-rise
- Use the green and historical character of the plot
- Respond to lack of facilities
- Attract residents of the neighbourhood

a gathering of wishes
the user research

HOW DO YOU WANT TO LIVE WHEN YOU ARE OLD ?

Introduction

The fieldwork and literature study have given me some information on how the current elderly are living and what their rituals are. The design, however, will also be for the elderly of the future, the people that are now still young and vital. To come up with a design that also suits them, I need to know their wishes and conditions as well. For this

I made a survey, first a small one and later a bigger one more specified on the topics from my research. These questionnaires have given me a lot of relevant information that I can take with me during the design process. Both questionnaires are about the question: *how do you want to live when you are old?*

Questionnaire 1

The first questionnaire was a small survey I did among family, friends and other relatives, all being 60+ of age. It was before I knew exactly what my point of focus would be, but when I did already have a lot of things in mind that might be important. A lot of the questions return in the second questionnaire as well, which was held among more and also younger people. The questions are mainly about the themes what, who and where, so what needs to be there, where would it be and who would you want to live with. Below are the questions and results:

Who would you want to live with?

like-minded	I
anyone	I
people with ambition	
people that accept each other	I
family / partner	
same age	I

What is possible there?

walking/going outside	I
'klussen'/'knutselen'/painting (atelier)	I
listening to or playing music	II
reading (library)	
watching television	I
sporting/dancing/yoga	
cooking together	
receiving guests	II
everything I now do or still can do	II
gardening	I
swimming	
privacy	
theater	I
billiard / jeu de boules	
day trips	I
games	I

Where would this be?

near a lively centre	I
near a lively city with green	
in / near green or a park	
near the water / sea	

the edge of a village	I
with a beautiful view	I
near facilities	I
near my old neighbourhood	II
near public transport	II
a quiet place	I

What would you want for your own?

kitchen	II
television	
bathroom	
living room	II
outside space (balcony, little garden)	
atelier	I
my own furniture	
music intallation	

What would you want to share?

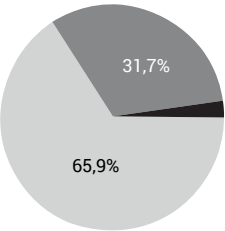
kitchen / dining room	
bar	I
reading room	I
television room	II
music room	I
laundry room	I
guest room	I
living room	
everything but bed and living room	I
multifunctional room	

Questionnaire 2

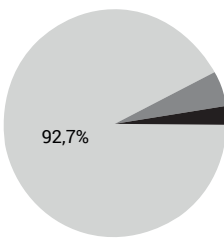
The second questionnaire was set up when the design location and a more specific focus from the fieldwork were known. Some questions are really straightforward, while others are more sensitive. The aim of the questionnaire was to find out what people find most important from their living environments when they grow old and to see how willing people are to help others and share things.

Though a lot of the answers were what I expected, I did not think it would be so obvious. I was really surprised by how willing people still are to do things for others and how much they want to stay independent and have control over their own lives. It was a real motivator to continue with the themes I had chosen and gave me a lot of energy to try and come up with something innovative.

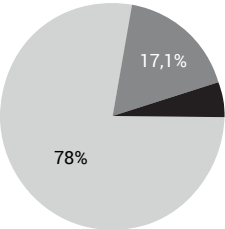
It brings satisfaction to help someone who is not able to do everything independently anymore



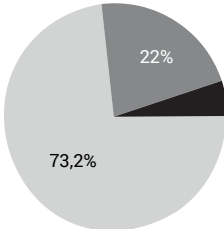
I would drive my neighbour to the hospital if needed



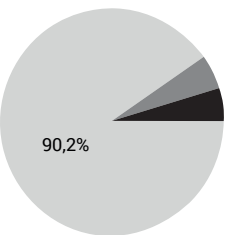
I would not mind an elderly asking some of my time once in a while



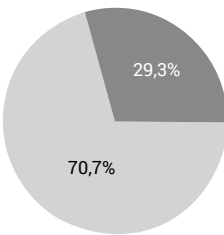
I do not mind sharing stuff that I do not use very often



It is important to me to be able to choose what I want and when at any time

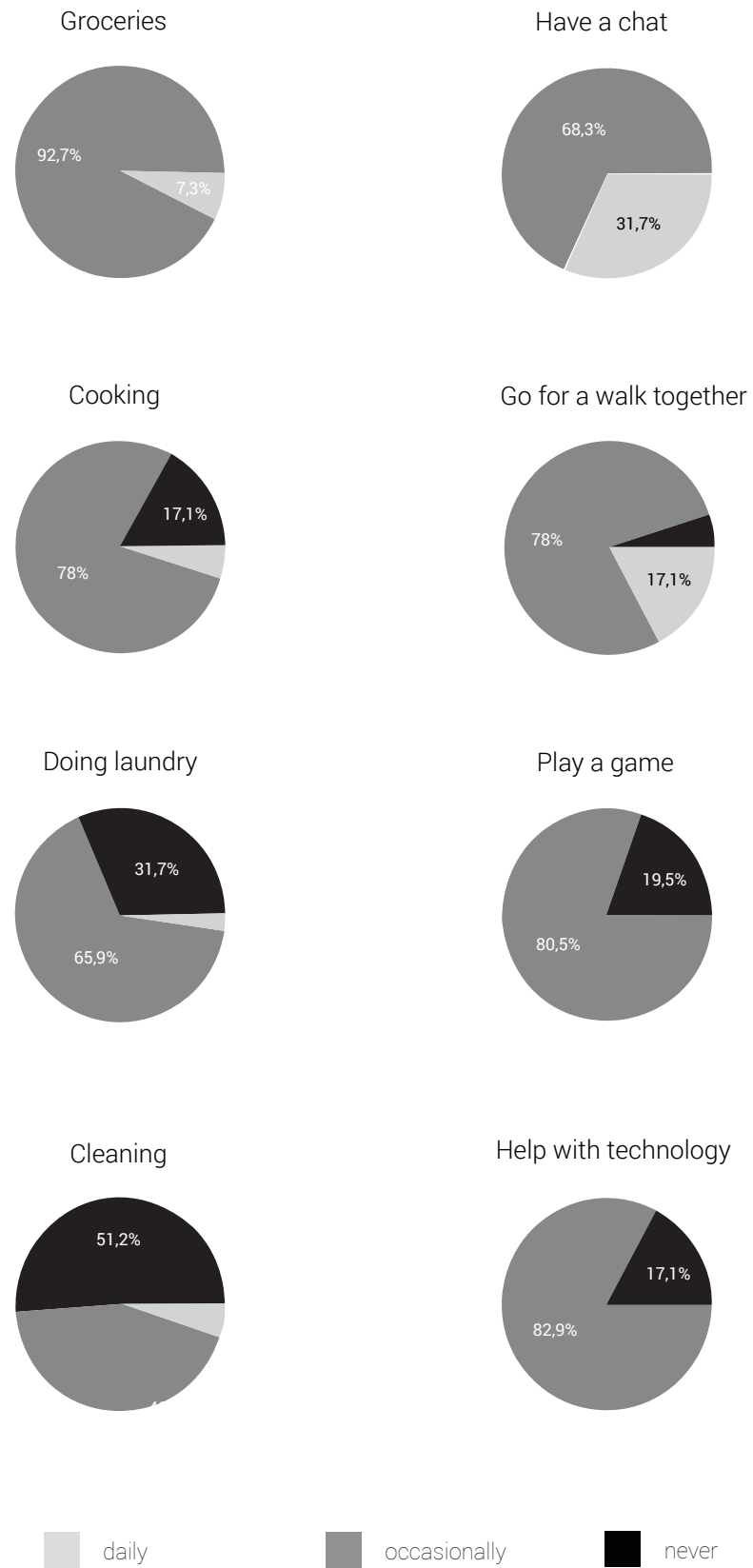


I would love to transfer my knowlegde when I'm older

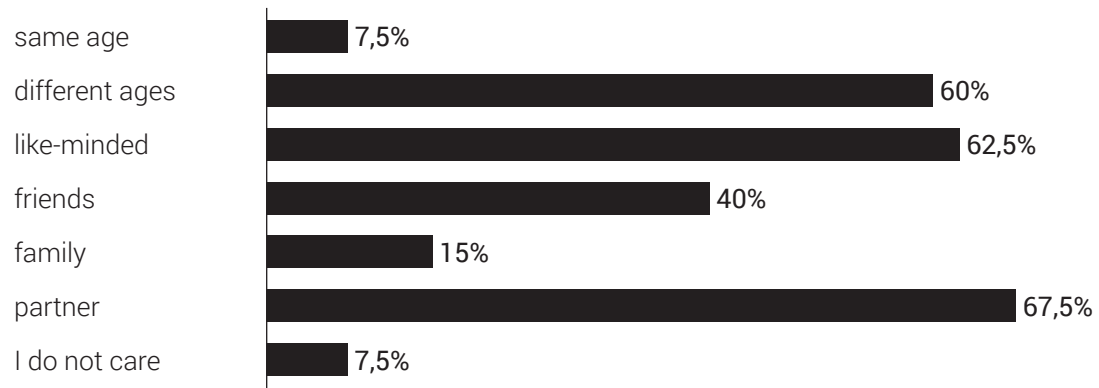


agree neutral disagree

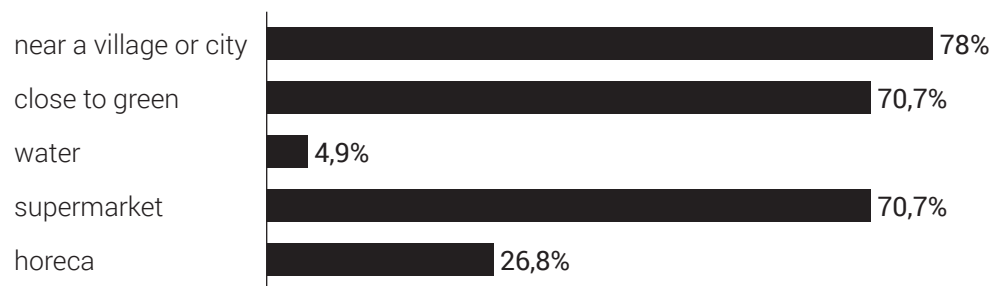
what are you willing to do for or with someone else?



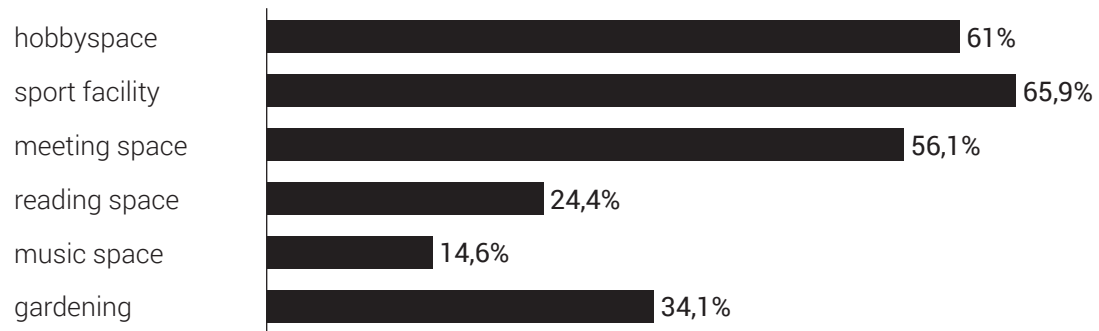
Who would you want to live with?



What is important in the near surrounding?

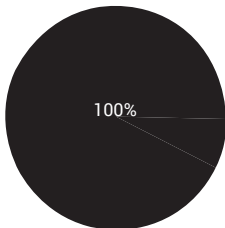


What would you like to have as an extra function?

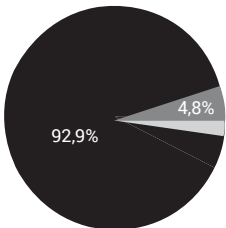


what would you want for yourself?

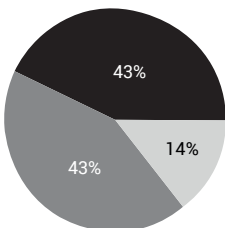
Bedroom



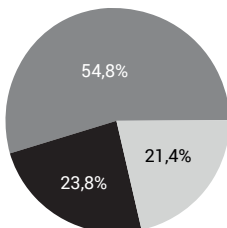
Bathroom



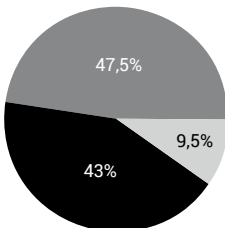
Kitchen



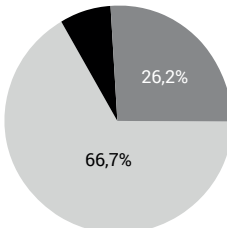
Dining room



Living room



Garden



shared

both

private

what is most important?

doing my own thing, not being told what to do

sporting and staying independent

socializing: being among other people

go for a walk, physical movement and being independent

TV, music, going for a walk, reading

go outside

privacy and freedom

determining when (at what time of the day) to get certain care

do everything I do now, leading my own life

be as independent as possible

maintaining privacy

go out

sporting and having a chat

living in own home as long as possible, staying physically active, gardening

using computer, reading, going outside

going outside

cooking myself and determining how to structure my day

staying independent

gardening and going for a walk

staying mobile and living independently

doing my own thing, alone and with others

function independently despite care demand

sporting, ability to have a private life

staying physically active

as much independence as possible

not be completely dependent

Needs and wishes families

Since the design will not only include elderly but families as well, it is important to also know their needs and wishes. How much space do they need? Which facilities should there be? This chapter will elaborate on these needs on site level, building level, house level and outside space, making use of online documentation composed by a Dutch property development company (BPD).

Site

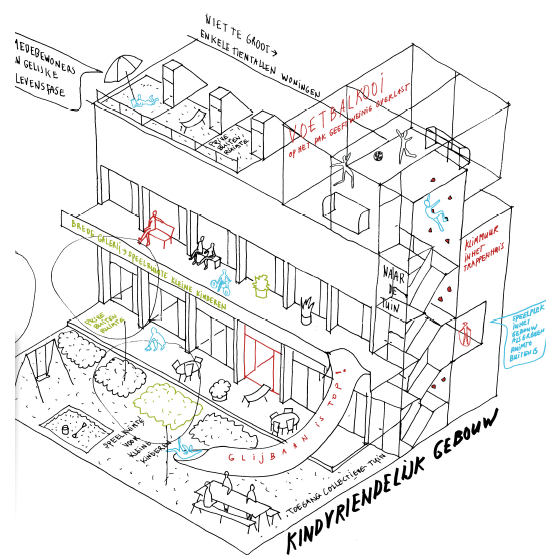
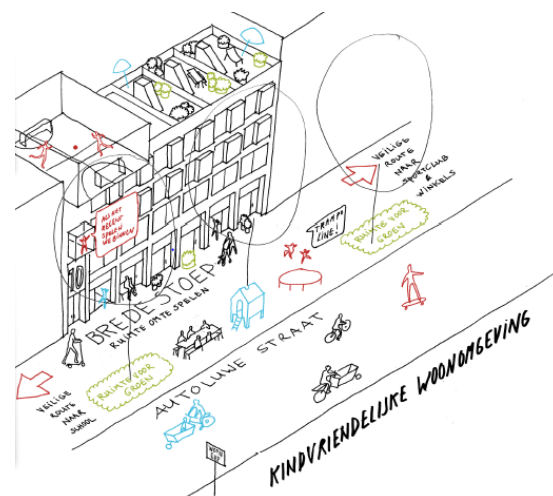
Walking distances are an important factor in the design of the site. The distance should be no longer than 10 minutes / 800m to facilities like an elementary school, daycare, playground, grocery store and communal centre. For elderly this was 500m. The walking route towards these facilities should be safe by separating pedestrian and vehicular traffic with wide pedestrian paths and car free streets. Green space and places meant for children to play, should have "eyes on the street" all the time. (ANA Architects & BPD, 2017)

Building

The building should not contain too many dwellings (20 <> 100) and preferably has more families living there that have the same lifestyle. Shared spaces are desirable, but not too many and well controllable. The complex should offer play facilities, inside as well as outside of the house. Important is the stimulation of encounters between the residents. To enable this, the entrance of the building could be transformed into a collective outside space. It would also give another safe opportunity for children to play. An extended (wider) hall, gallery or vide makes it possible to establish horizontal and vertical connections. In order to stimulate encounters and create a sense of responsibility among the residents, the residents should be able to appropriate the semi public spaces and the spaces adjacent to their house. This personalisation process will give them a sense of ownership and responsibility which in turn leads to more controlled, clean and used space.

House

The house of a family should have a minimum of 90 sqm with a separate bedroom for every child. There should be enough storage space to put away all the stuff the family has gathered and if possible even an extra room



for guests. Families prefer to have a private outside space, if possible partly covered and a living room connected to it. Parents would like to have a good view towards their children playing outside, without experiencing too much noise nuisance. The desire for a private garden makes an apartment ground floors favourite and allows for a front door at street-level. A changeable apartment, with some flexible elements could offer multiple smart solutions, like folding walls or sliding cabinets to enlarge or divide a room and loft beds to create extra space. These could also serve as smart storage solutions.

Playgrounds

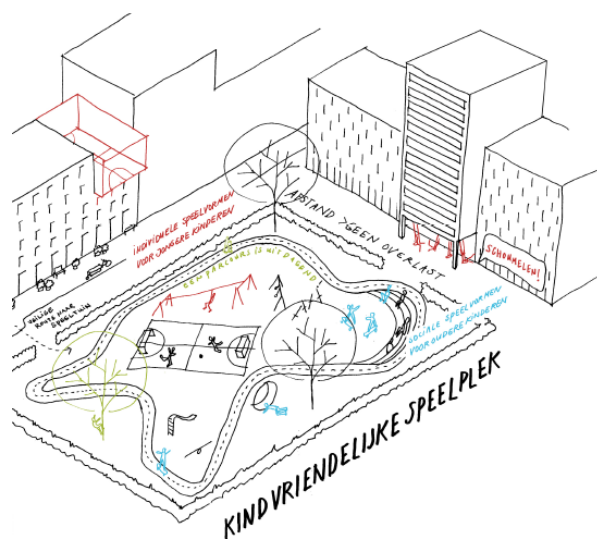
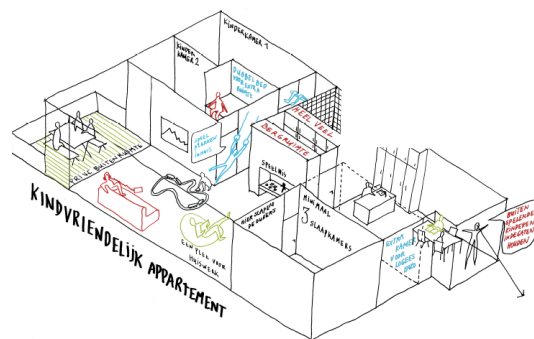
Children of families want to be able to play, inside and outside the house. It is important that outside play facilities are suitable for children of different ages. Popular are playgrounds on top of the building, in a wide gallery or enclosed garden. Within the building it is only interesting for children if real playing material is present. Variation in playing equipment is important to attract different ages:

- 6 - 7 y/o : play individualistic
- 10 - 11 y/o boys : soccer and being active.
- 10 - 11 y/o girls : social playgrounds
- older children : social play possibilities.

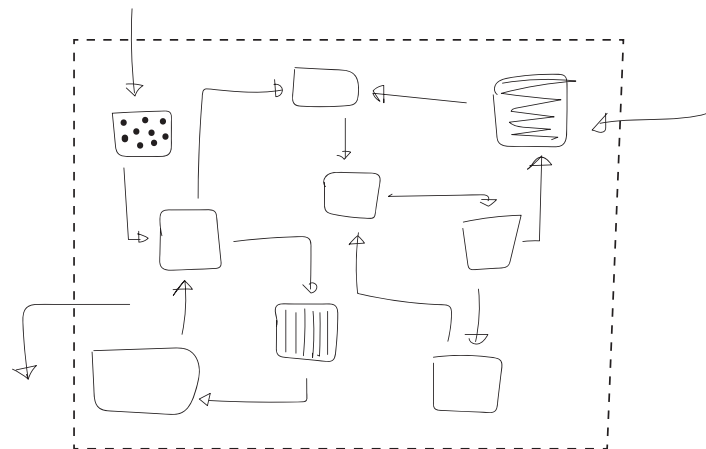
No busy roads should be crossed to reach the playground and it shouldn't cause noise nuisance.

Summary

- child friendly (safe) environment
- green surrounding
- near a city (for work)
- near facilities
- mixed neighbourhood (at least enough other families)



An exploration of reciprocity and the act of giving to reinvent the elderly home



Conclusion

From the questionnaire there is one thing that stands out from almost all answers. That is that it appears people want to stay part of something, or add to society, be useful, do things etc. and very willing to give. To give some of their time, their experience, their stuff, their knowledge, etc. This really touched me, since I think it is a very beautiful thing and it is actually the reason why I chose this studio in the first place. The possibility to do something for someone. It appears I am not the only one who thinks this is something that gives purpose to life. I think basing my design on the act of giving, or said differently: reciprocity, will be very relevant and useful when designing a new concept for elderly, since reciprocity is about giving and getting in return, which will enhance the notions that lay at

the ground of my design: independence, relatedness and competence.

How?

Well: getting something extra from others in the form of informal support networks increases independence, in the form of attention will increase relatedness and in the form of knowledge will increase competence.

And giving will have the exact same effect.

It has led to the title of this research "exploring reciprocity" and the main concept and title of my final design "ensemble, an exploration of reciprocity and the act of giving to reinvent the elderly home".

an exploration of precedents

reference projects

Throughout the whole process, different projects have been looked at and studied. These range from other elderly homes and co-housing projects to kindergartens, elementary schools and landscape designs. They have not all been thoroughly studied, but still have at least

been an inspiration for either programming, organisation, conceptualisation or materialisation. On the following pages, a short description will tell the essence of every project and how it is of use for my design process.

De Drie Hoven



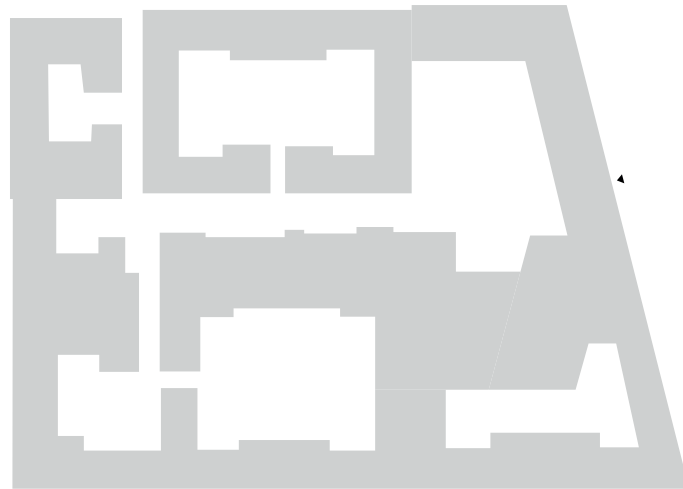
De Drie Hoven, designed by Herman Hertzberger, is designed like a small city with more attention to the individual human (privacy), but with care just around the corner. The more care a person needed, the smaller the room, but bigger the communal spaces and the more individual, the bigger the private room. Even couples could live here. An important aspect was the freedom of the residents to bring their own furniture, to decide themselves what activities they wanted to do and room for appropriation of the communal space, leading to a feeling of home and more encounters.

Reigershoeve



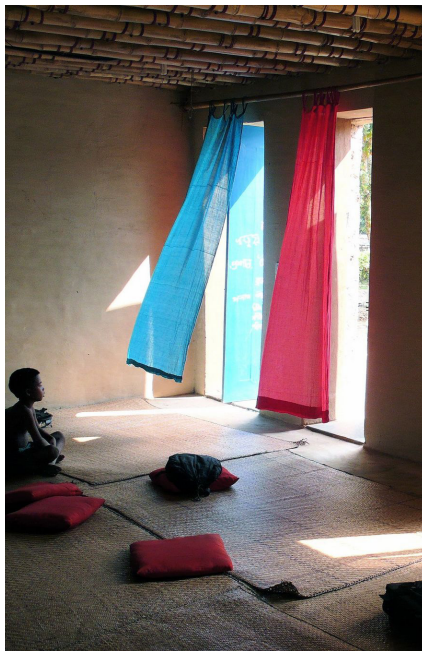
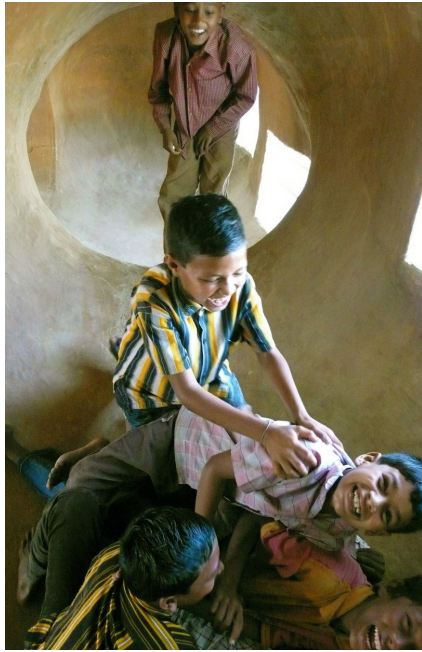
The Reigershoeve en Hogeweyk are two examples of dementia specialised villages. Reigershoeve is a rural establishment, while Hogeweyk is more urban. They are very popular because of their different approach than standard elderly complexes. The residents live in small groups and have more freedom than usually.

Hogeweyk

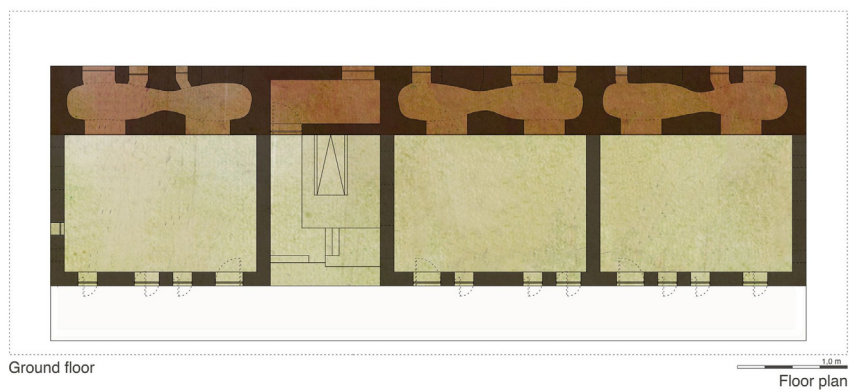
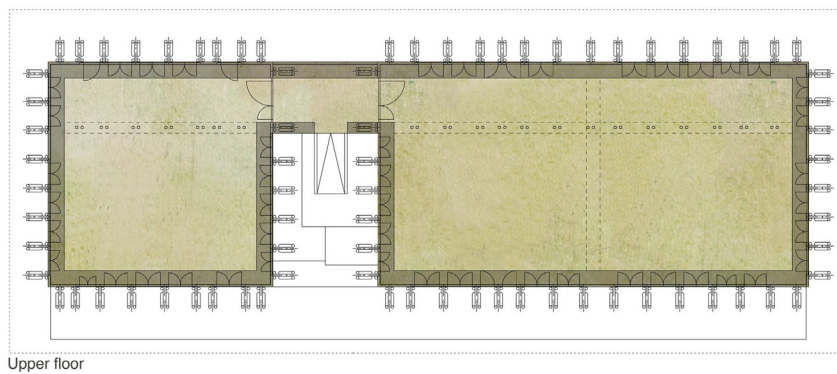
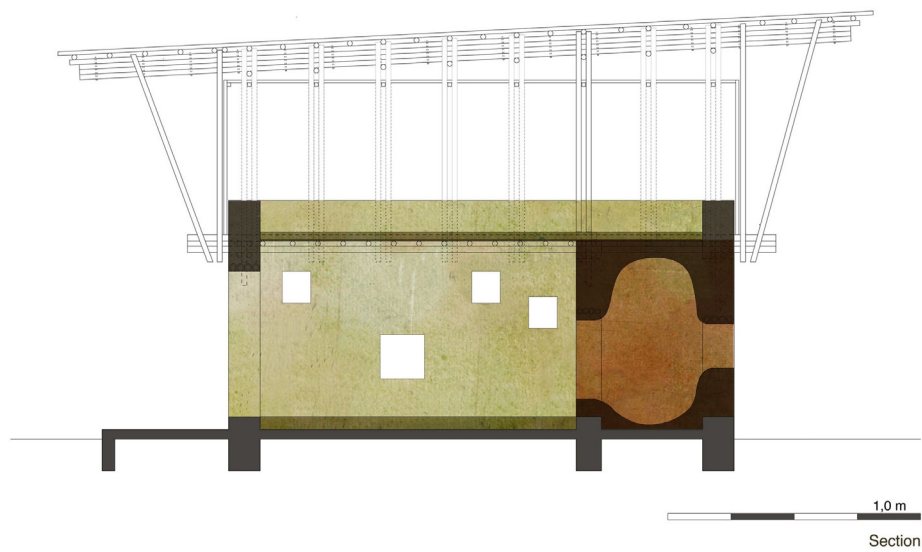


The plans of the two complexes are completely different. The Reigershoeve (above) is a longitudinal building that encloses a lot of green. The Hogeweyk is designed more like a city block with more smaller city blocks, the outer buildings really enclosing the complex.

METI (Modern Education and Training Institute)

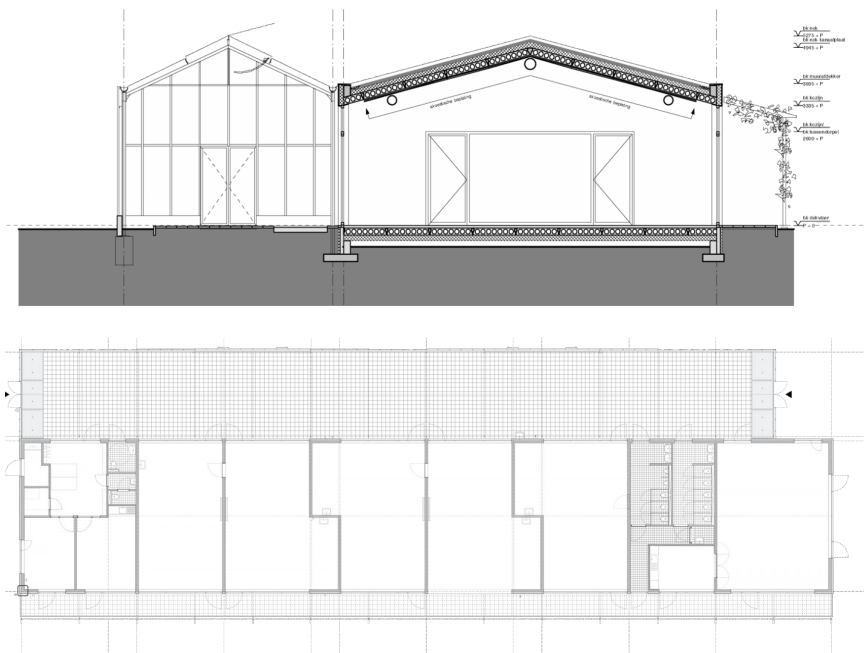


The philosophy of METI is learning with joy. The teachers help the children to develop their own potential and to use it in a creative and responsible way. The building reflects these ideas in terms of materials, techniques and architectural design. The aim of the project is to improve existing building techniques, to contribute to sustainability by utilising local potential and to strengthen regional identity.



There are three classrooms on the ground floor, made up of thick earth walls. To one side, these earth walls contain hand-crafted caves for the children to creep into and get lost in their own worlds. The finishing of the caves is made soft, inviting children to explore, feel safe, touch, nestle up against or concentrate, either alone or together.

Freinet-schools in Lille and Herentals



The school is characterised by its big classrooms, high ceilings and a lot of light. Embedded in nature, the compact school has no such thing as a hall / corridor. What stands out the most is the big glass conservatory, made for the children to play in, run around or garden. A big, green pergola offers protection from too much sun, so no sunscreens are needed. Every classroom has big opening doors to the garden, allowing a living and learning environment in the middle of nature.



The projects of the Freinet- primary schools in Lille and Herentals are inspired by the rich tradition of the open air schools in Europe. Mainly in the first half of the 20th century, the movement has produced extraordinary buildings in which the relation of the students to nature played a key role. The often radical simplicity of the architecture is timeless and especially interesting and actual in current times.

Magneten Sensory Garden



The raised, shielded garden at Frederiksberg is a green oasis for people with special needs. In only a small footprint, the garden offers carefully designed sense stimulation on the user's own terms. It provides a variety of experiences that can be used in treatment, containing smaller intimate spots for one-on-one sessions, larger spaces for group activities and areas for physical activities like balance exercises. Most important is that it brings happiness and joy to the everyday life of its users.



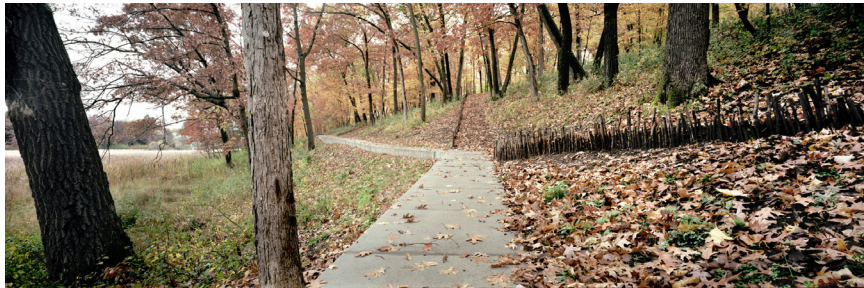
The garden consists of three areas: a vegetable garden, a bonfire garden, and a flower garden. The three gardens vary in size and each stimulates different senses. In the vegetable garden, a greenhouse prolongs the season. Around the greenhouse, raised beds for vegetables, beehives, fruit trees and bushes produce edible results. The bonfire garden and the greenhouse play important roles as gathering points and in winter activities. The flower garden is the most shielded and intimate area, where lush plantings display an assortment of smells and colours to stimulate the senses.

Shan Shui Ci'an, China



The portico's designer by Moosbach create a protected intimate atmosphere, while being open. They give direction and frame natural views. The flowers stimulate the senses, not only sight, but especially smell.

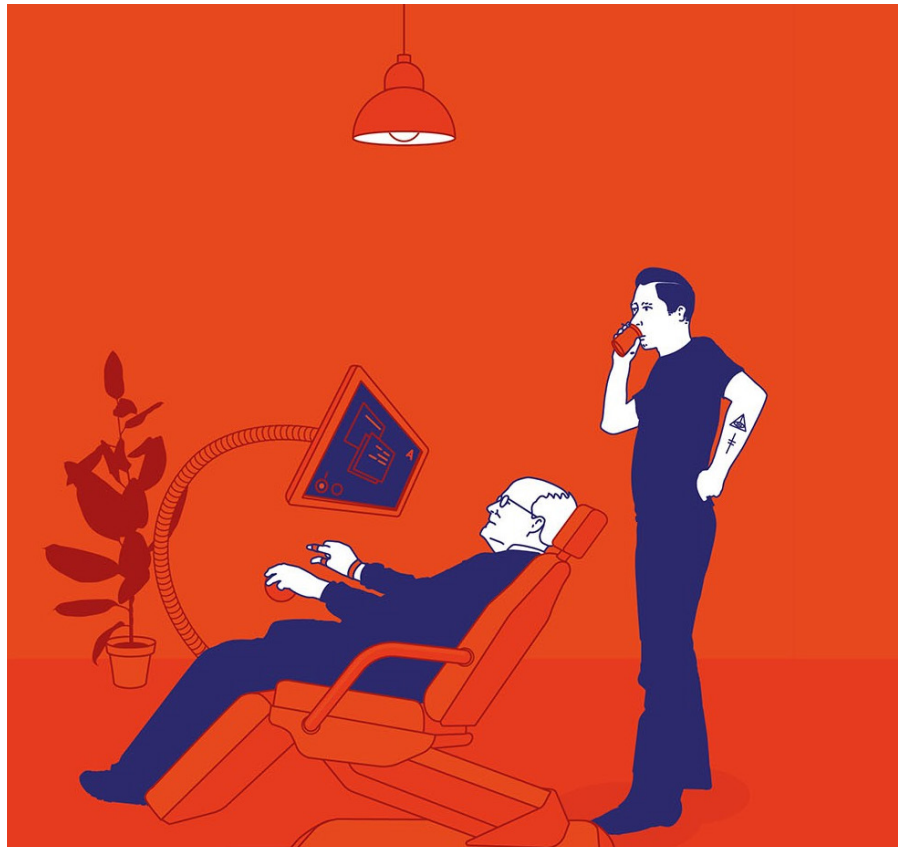
Lake Marion Residence



The lone path designed by COEN + PARTNERS induces a melancholic feeling, of being one with nature. It allows for different walks every season. More open in the winter, covered with leaves in a bronze glow in autumn, green and blossomy in spring and rich and leafy in summer.

Labor Lab: Senior Spaces

‘(Hoe) gaan we
ondernemen in
onze laatste
levensfase?’



An aging population, an increased average life expectancy and an unsure retirement are causing us to continue working much longer than we used to. Labor Lab: Senior Spaces by Studio Lonk concentrates on questions like: how far will we go to facilitate our mental and physical health in such situations? What are the consequences for the design of our working environments if they should be suited for a 70+ generation? And do the millennials realise it's them this is about?

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appendix

questionnaire 1

Als je later zorg nodig hebt (en dus niet meer thuis kunt blijven wonen)en helemaal zelf jouw leefomgeving samen zou mogen stellen, hoe zou deze er dan uitzien?

- a. Met wat voor soort mensen woon je er? (met leeftijdgenoten, gemengd met jongere doelgroepen, met gelijkgestemden, maakt niks uit, etc.)
- b. Wat kan je er allemaal doen? (welke faciliteiten zijn er, welke activiteiten wil je kunnen doen, maar ook welke vrijheden wil je nog hebben)
- c. Wat zou je privé willen hebben? (denk aan slaapkamer, badkamer, etc.)
- d. Wat zou je wel willen delen? (denk aan woonkamer, keuken, etc.)
- e. Waar zou het zijn? (in de stad, aan het water, bij de zee, dicht bij, etc.)
- f. Eigen aanvulling

questionnaire 2

Beste buurtbewoner,

Onze namen zijn Stefan Lichtenveldt en Renske de Meijer. Op dit moment zijn wij bezig met ons afstudeeronderzoek aan de faculteit Architectuur van de Technische Universiteit Delft. Wij doen onderzoek naar nieuwe woonconcepten voor ouderen die zorg nodig hebben en baseren onze ideeën op de wensen van mensen. De locatie voor ons concept ontwerp zal de plek zijn waar het huidige Gooizicht staat. We zouden u om deze reden willen vragen of u de volgende vragen zou willen invullen (voor de online versie ga naar:)

Leeftijd

Geslacht

Beroep

Huidige woonsituatie

	eens	neutraal	oneens	opmerking
Als ik een (grotere) behoefte aan zorg krijg en hierdoor niet meer thuis kan blijven wonen zou ik graag in Hilversum blijven wonen.				
Ik ken mijn buren goed.				
Ik zou mijn buren graag beter leren kennen.				
Ik eet het liefste samen met anderen.				
Ik kook graag voor mezelf en anderen.				
Ik heb er geen problemen mee om naast een oudere te wonen die wellicht af en toe om een paar minuten van mijn tijd vraagt.				
Ik haal er voldoening uit om iemand te helpen die niet meer alles zelfstandig kan.				
Ik zou best af en toe boodschappen willen halen voor een oudere buurman/vrouw als hij/zij dat zelf niet meer kan.				
Ik vind het niet erg om spullen te delen die ik zelden gebruik.				
Als mijn oudere buurman/vrouw een keer naar het ziekenhuis zou moeten zou ik hem/haar best willen brengen/ophalen.				
Als ik meer inspraak zou hebben bij het ontwerp en de samenstelling van een woongroep voor ouderen, zou ik sneller overwegen om daar naartoe te verhuizen.				
Ik zou het leuk vinden om mijn kennis op mijn oude dag over te kunnen dragen aan jongere mensen.				
Ik wandel wel eens door het Boomborgpark				

Stel u voor dat u niet in uw huis blijft wonen, maar naar een kleine woongroep verhuist waar u als dat in de toekomst nodig is zorg kunt krijgen.

Met welke mensen zou u daar het liefste wonen? (meerdere antwoorden mogelijk!)

Leeftijdsgenoten	
Verschillende leeftijden	
Gelijkgestemden	
Vrienden	
Partner	
Familie	
Maakt me niets uit	
Anders, namelijk:	

Wat zou u voor uzelf willen hebben en wat zou u eventueel wel willen delen?
(beide kan ook, bv. zowel een eigen keuken als een gezamenlijke keuken)

	Privé	Gedeeld	Beide	Opmerking
Slaapkamer				
Badkamer				
Keuken				
Eetkamer				
Woonkamer				
Tuin				
Washok				
Berghok				

Wat zou u als extra ruimte of functie er bij willen hebben (meerdere antwoorden mogelijk)?

Hobbyruimte	
Sport mogelijkheid	
Ontmoetings mogelijkheid	
Leesruimte	
Muziekruimte	
Mogelijkheid om te tuinieren(moestuin)	
Eigen toevoeging:	

Wat zou u bereid zijn voor of met een oudere buurman/vrouw te doen als dit hem/haar zelf niet meer goed lukt of blij zou maken?

	Dagelijks	Af en toe	Nooit	Opmerking
Boodschappen				
Koken				
Was doen				
Schoonmaken				
Een wandeling maken				
Een praatje maken				
Een spelletje spelen				
ICT hulp (tel, pc, etc.)				

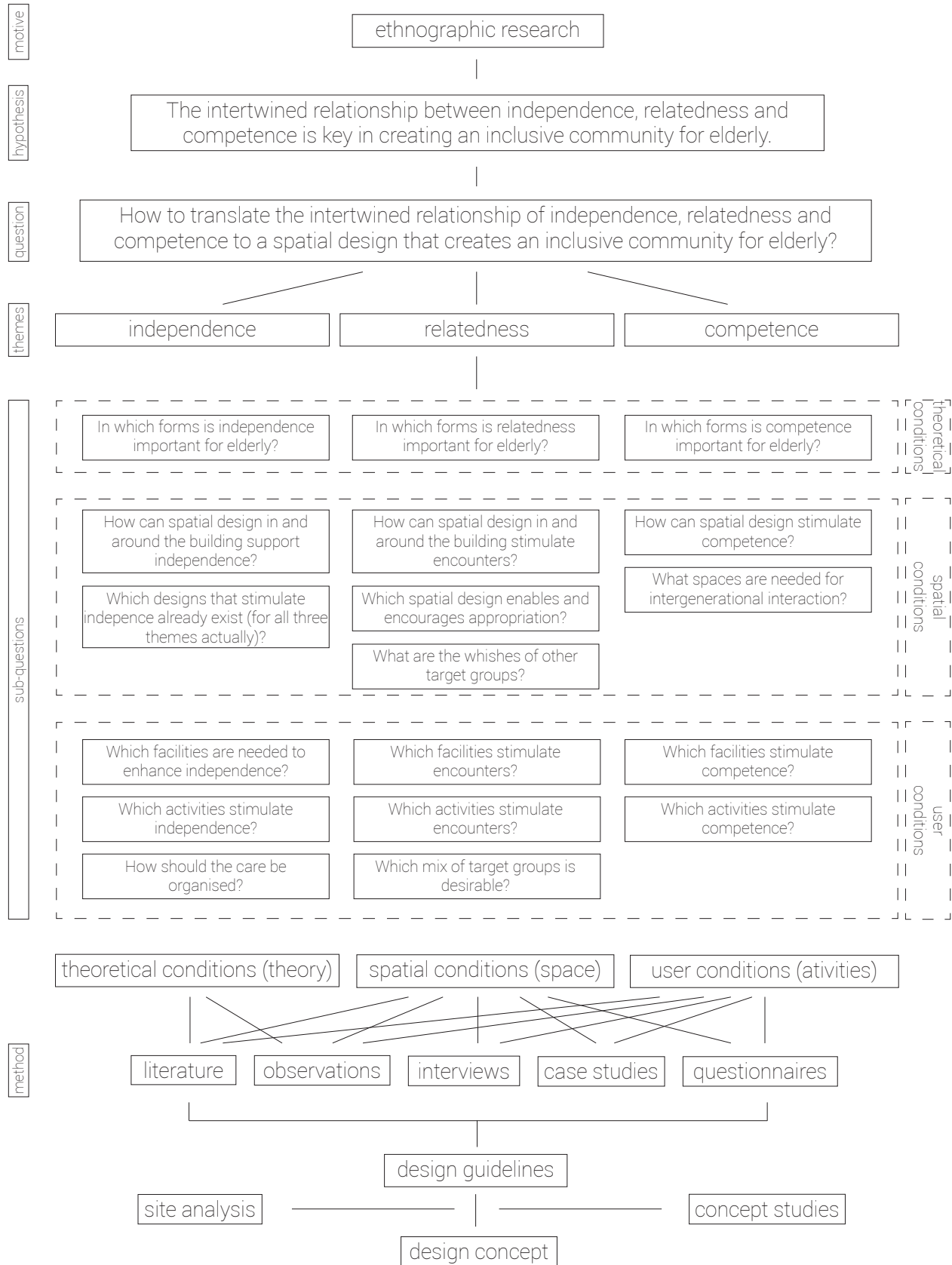
Wat vindt u het belangrijkste dat u kunt blijven doen als u ouder bent en zorg nodig hebt?

.....

U kunt een scan of foto van het formulier mailen naar R.L.C.deMeijer@student.tudelft.nl. Uw mening opschrijven is een kleine moeite en kost slechts enkele minuten van uw tijd, maar is voor ons onderzoek erg waardevol!

Hartelijk dank,
Stefan en Renske

method

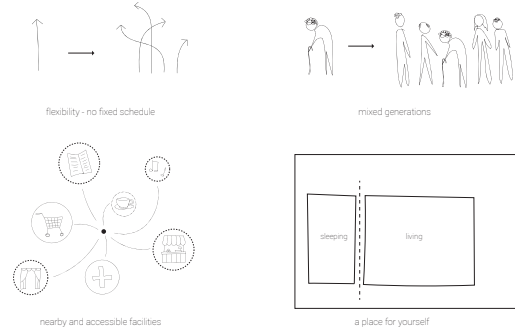


	<p>tutorial</p> <p>week 1 - 12</p>		<p>fieldwork</p> <p>week 3 - 11</p>
questions	<p>How can nonfamilial intergenerational care improve the well-being of elderly and children, while at the same time responding to the shortages by combining their care?</p>	questions	<p>What does the daily life of elderly look like? How is their living environment designed?</p>
method	<p>Studying literature and a case study to dig into the state of the art of intergenerational care programs</p>	method	<p>Ethnographic research. 2 short visits to and one entire week staying in an elderly home to observe their behavior, talk to them, interact with them, etc.</p> <ul style="list-style-type: none"> - participant observations - interviews - sketches
conclusion	<p>Well constructed programs that are about giving and receiving, that pay equal attention to the elderly and children, take into account the abilities of the elderly and provide enough staff contribute to less loneliness, reduced depressions, more physical activity, less thinking about pains, the feeling of being connected and useful and cognitive stimulation for elderly and being less scared of growing old, more understanding towards the elderly and more self-confidence for children, all improving what defines well-being according to literature.</p>	conclusion	<p>The way the care is organised, the fixed schedules of the residents that need care, their immobility and the lack of choice results in elderly that are being lived in stead of living their lives themselves. It is mainly their independence that is the victim of this.</p>
literature	<p>Hernandez, C. & Zubiaur González, M. (2008). Effects of Intergenerational Interaction on aging. <i>Educational gerontology</i>, 34. 292-305. https://doi.org/10.1080/03601270701883908.</p> <p>Knight, T., Skouteris, H., Townsend, M. & Hooley, M. (2014). The Act of Giving: a Systematic Review of Nonfamilial Intergenerational Interaction. <i>Journal of Intergenerational Relationships</i>, 12(3), 257-278. doi:10.1080/15350770.2014.929913</p> <p>Morita, K. & Kobayashi, M. (2013). Interactive Programs with Preschool Children bring Smiles and Conversation to older Adults: Timesampling Study. <i>BMC Geriatrics</i>, 13, 111.</p> <p>Reisig, C. N., & Fees, B. S. (2007). Older Adults' Perceptions of Well-being after Intergenerational Experiences with Youth. <i>Journal of Intergenerational Relationships</i>, 4(4), 6-22.</p> <p>Ryff, C. (1995). Psychological Well-Being in Adult Life. <i>Current Directions in Psychological Science</i>, 4(4), 99-104.</p> <p>Somers, a. (2019). <i>The Intergenerational Programme at Nightingale House: a Study into the Impact on the Well-being of Elderly Residents</i>. London: Nightingale Hammerson Trustee Company Limited [case study]</p>	literature	<p>Lucas, R. (2016). <i>Research Methods for Architecture</i>. London: Laurence King Publishing Ltd.</p>
			<p>theory</p> <p>week 7 - 11</p>
		questions	<p>In which way is independence important in the lives of elderly?</p>
		method	<p>Studying literature to check if my observations are and can be grounded.</p>
		conclusion	<p>Literature confirms the loss of independence is a recurring problem in elderly homes. Because of this elderly become passive even faster, which will influence their well-being. They mention the combination of independence, relatedness and competence as conditions for well-being and intrinsic motivation for life, which is often missing in the lives of elderly.</p>
		literature	<p>Ryan, R. & Deci, E. (2000). Self-Determination Theory and the Facilitation of Intrinsic Motivation, Social Development, and Well-Being. <i>American Psychologist</i>, 55(1), 68-78</p> <p>Hillcoat-Nallétamby, S. (2014). The Meaning of "Independence" for Older People in Different Residential Settings. <i>Journals of Gerontology, Series B: Psychological Sciences and Social Sciences</i>, 69(3), 419-430</p>

conclusions

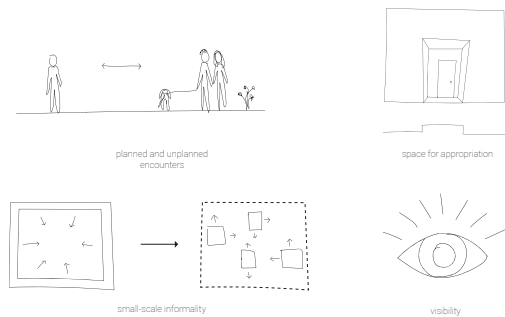
independence

the state of being free from the control of others



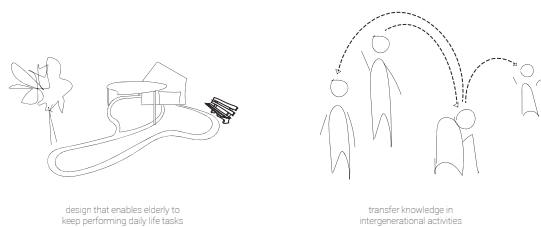
relatedness

a particular manner of connectedness



competence

the ability to do something successfully



location

week 12 - 17

questions

What are the neighbourhood's characteristics?
Which facilities are there?
What opportunities are there?

method

- observations
- sketches
- photographs
- studying official documents about demographics

conclusion

The neighbourhood Boomberg, Hilversum is a quiet **residential area** with mainly villa's. The city centre is at 10 mins walking and is also the nearest place that has facilities like a supermarket. A characterising element is the **monumental Jan van Ravenswaaypad** that is designed by Dutch painter Jan van Ravenswaay in the 19th century and runs through the design site, connecting it to the Boombergpark and the Corversbos. It is home to a big variety of plants and animals and has protected value.

literature

Gemeente Hilversum. (2005). *Het Boombergpark te Hilversum. Verleden, heden en toekomst van een monumentaal wandelgebied*. Hilversum: Uitgeverij Verloren.

target group

week 13 - 20

questions

How do you want to live when you are old?

method

Informal conversations with family and friends and the development of a questionnaire to find out what it really is that people, not only the current elderly, but also the future elderly (aged 30 - 85), find important.

conclusion

Results show people really value their independence, in being able to choose what to do at what time. They also say to be willing to do quite some stuff for others: they are **willing to give** (time, affection, knowledge, experience, etc.) They are open to **shared living** to a certain level, prefer living with **mixed ages, like-minded** and preferably with **partner**. Important are **facilities** and **green** nearby and **staying active**.

concept development
week 7 - 11

questions

How to translate the intertwined relationship between independence, relatedness and competence to a spatial design that creates an inclusive community for elderly?

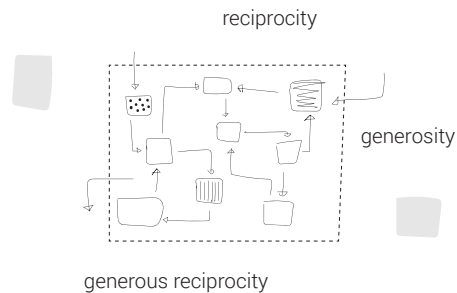
method

Exploratory research into my own material.

conclusion

The intertwined relationship between independence, relatedness and competence seems to be reinforced by the principle of **reciprocity**. Reciprocity is the mutual act of giving and affects all three notions. Since these indispensable notions are inextricably linked, the reinforcement of them will only result in more reinforcement of the whole. Since a lot of the outcomes of my research are about giving in some sort of way, it seems a logical concept to built upon.

concept



exploratory research
week 16 - 20

questions

What is reciprocity? How to deal with reciprocity in architecture?

method

Studying literature that contains existing theories about reciprocity to find possible architectural design guidelines.

conclusion

Aldo van Eyck has written about reciprocity. The core of his story is about **twin phenomena**, like open - closed, part - whole, individual - collective, outside - inside, simplicity - multiplicity, etc. These twin phenomena cannot be seen separately, because their power lies in their unity. Equally using them in a well-considered balance to achieve **diversity through unity**. By allowing polarities to coexist, no physical centre is needed, it will arise in between.

literature

Van Eyck, A. (1960). De Milde Raderen van de Reciprociteit. *Forum*, 6/7, 205-206.

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