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“Ageing in Place” - Social and Health Implications in Hong Kong

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ABSTRACT

The demand for elderly services is rising while the problem of the ageing population becomes more serious. Since the prevalence of diseases may increase with age, the elderly may need long-term care services from the nursing homes; meanwhile, they have to give up their original community life. Hong Kong government is advancing the “ageing in place” plan for reducing the overload of nursing homes. This study explores the social and health implications of promoting “ageing in place” in Hong Kong, draws on examples from Singapore and provides suggestions for improvement.

KEYWORDS: Ageing in place, Ageing population, Long-term care, Nursing homes, Health, Social implications

1 INTRODUCTION

Ageing populations are growing fast worldwide and Hong Kong is of no exception. They give rise to major problems, affecting the healthcare system, social welfare and elderly care services (Research Office Legislative Council Secretariat, 2018). It is estimated Hong Kong will have more than 700,000 elder adults over the age of 85 in 2064, several times higher than now (Hong Kong Elderly Commission, 2017). “ageing in place”, the working direction of Hong Kong elderly policy, aims to reduce long-term care services. Elderly should be living within the right environment to ensure that they can maintain connections with the community (World Health Organization, 2015). At the same time, ageing in place is one of the policy strategies for the elderly in Singapore (Rogerson & Stacey, 2018). This project is going to study the policy of ageing in place with reference to Singapore and to evaluate the social and health implications of ageing in place in Hong Kong.

2 CHALLENGES OF THE AGEING POPULATION

Hong Kong people have the longest life expectancy in the world, possibly due to continuous progress in medicine (Loo et al., 2017). It may result in the increase of the proportion of the dependent population in the future (Christensen et al., 2010). The prevalence of diseases will increase with age, and as high as 55% to 98% of the elderly are suffering from two or more chronic diseases (Rizzuto et al., 2017). Moreover, an ageing population may give rise to increased demand in related assistance and healthcare expenditures. The burden of the future healthcare system may increase. Housing environment is also important for the elderly apart from medical needs. In the United Kingdom, even though most elderly who reach retirement age have their own houses, it may not meet the standards of life-long houses because of the lack of provisions such as convenient transportation and barrier-free design (Ruddock & Ruddock, 2016).

Frail elderly need comprehensive care services from the nursing home, such as medication, skincare, and supporting dietary service because of worsening physical conditions (elderly with eating difficulties) (Næss et al., 2017). The setting of a nursing home includes a living place, health care facilities and professional nursing staff. A nursing home provides the concept of home feeling for the elderly but is a collective living environment. The nursing staff substitute the family members as the main caregivers, even to be the closest interpersonal relationship with the elderly. On the other hand, nurses always provide professional care for the elderly in order to complete their desired tasks, but the lack of providing the emotional support has made the nursing home more like a small hospital (Rijnaard et al., 2016). Therefore, most of the elderly prefer to live at home rather than nursing homes (Boldy et al., 2010). In 2014, 5,568 of the elderly applicants in Hong Kong died while waiting for the services of subsidised residential care (Legislative Council Secretariat, 2015).

3 AGEING IN PLACE

“Ageing in place” is a multiplex term. It represents the elderly may consider changing their living environment that depends on their situation (Fong & Law, 2018). It covers three key aspects: housing, location and support (Boldy et al., 2010). As the elderly grow with age, they may need to make various housing adjustments in arrangements to stay as independent as possible. Except for the original housing of the elderly, it also includes the connection between the residence and the community, like neighborhoods and “good location”. The elderly may move for easy care and better medical service support. In certain countries, the needs of long-term care services (such as the nursing homes) have been lowering due to the implementation of ageing in place (Alders & Schut, 2018). Although ageing in place is the preferred approach for most of the elderly, physical ageing causes them to need more assistance in the living or to

rely more and more on care by others (Brittain et al., 2010) Therefore, elderly policies should focus on assistance and support for the elderly so as to promote ageing in place and with aim of a healthy life at home.

3.1 Hong Kong - Principles and Strategic Directions

The Chief Executive of Hong Kong announced in the 2014 Policy Address that the Elderly Commission (EC) would launch an Elderly Services Programme Plan (ESPP) and would invite some university scholars as consultants. The formulation process would include three stages: “Scoping”, “Formulation” and “Consensus Building”. The project would review the elderly population status, existing services and elderly care services to draft preliminary proposals for public comments.

One of the overarching principles of the ESPP includes ageing in place which is intended for the elderly to live in an accustomed environment. It aims to strengthen community care services, and advocate family members to take care of the frail elderly in order to reduce the need for care services by residential care homes. Consequently, this project plans to expand community care services, such as day care centres, home care services as well as training for foreign domestic helpers since some elderly may lack family support. Besides, the regional elderly centres are intended to promote a healthy lifestyle for the elderly, with emotional support and temporary care services, to ensure most of the elderly can live healthily in the community and reduce the pressure on family caregivers (Elderly Commission, 2017).

The Hong Kong Housing Society started to implement ageing in place in 20 rented housing estates in 2012 (Hong Kong Housing Society, 2020). It has served more than 80,000 elderly residents until now. The goal of this housing plan is to strengthen the health of the elderly and delay ageing, so that they can continue to live at home after retirement as well as to avoid the need to living in a nursing home. The service scope includes five aspects and works together with other government departments, including services for their needs in housing, socialising, and medical care in order to achieve ageing in place. The specific details are conducting home assessments, providing health care services, preventing falls, organising community activities, and providing some professional training to prevent cognitive decline.

3.2 Singapore - “Three-Generation” Housing Plan

The ageing strategy in Singapore emphasises family support with special reflection of the Asian culture of filial piety. There is legislation to require children should support and care for their parents based on the “Maintenance of Parents Act” (Devasahayam et al., 2018). There are four aspects of Singapore’s elderly policy strategy, including “ageing in place”. The Housing and Development Board (HDB) of Singapore has launched a “Three-Generation” housing plan since 2013 to encourage three generations of families to live together to replace the single apartments. In addition, the Singaporean government has started to develop the communities regarding barrier-free facilities to strengthen the hardware enhancements of the elderly living environment since 1985. For example, the HDB houses are equipped with lifts on each floor (Ministry of Health, 2016). At the same time, Singapore establishes an “age-friendly city” by way of the ageing in place programme. It has mapped out a series of policies to evaluate the elderly population and spatial distribution for the improvement of ageing services and facilities. Furthermore, the HDB has launched various housing advancement programmes suitable for the elderly, for example the housing improvement programme (HIP) to raise the possibility for the elderly to live at home.

4 SOCIAL AND HEALTH IMPLICATIONS

4.1 Effects of Social Policies on the Elderly

4.1.1 Hong Kong

Social and medical services in Hong Kong are partly modelled after those of the United Kingdom (Woo, 2017). Public medical services are mainly provided by the government at a low charge for the public. It has resulted in overcrowded hospitals and long waiting time for services. The direction of elderly policy is “ageing in place as the core” to advocate a living mode of “home-based” for the elderly and to alleviate the needs for long-term care services and even to replace the services provided by nursing homes. Even if the government adopts “institutional care as back-up” as the strategy, the current supply of residential care services is far lower than the service demand. Some transitional nursing services may help the elderly to continue to live at home. Furthermore, elderly with higher education level prefer more autonomy and flexibility of care services. Thus, expansion of community care services, such as day care centres and home care services teams, is a practical plan. Thereby, more should be explored in the practical provision of home care services, which can first be initiated in certain rental housing estates, and then extended to all 18 districts.

4.1.2 Singapore

Since 1995, the Singaporean government launched a nationwide survey to determine the role of individuals, families, communities and the state in the care of the elderly, and then recommended the promotion of ageing in place (Rogerson & Stacey, 2018). Singapore has adopted a number of measures and public policies, with focus on the advancement of “senior-friendly” community, the improvement of building and outdoor environments, such as increase in the lighting and ample handrails. It simultaneously aims to build a barrier-free community, to improve the transportation and public spaces. The Land Transport Authority has studied public transport with the elders to directly understand their needs and difficulties (Ministry of Health, 2016). The authority discovered that some station signs are vague for the elderly and now most public areas are using larger fonts. These strategies are specific implementations, allowing the elderly to integrate into the community and live actively, so as to fulfil the objective of ageing in place. In addition to a series of hardware improvements in the community environment, the Singaporean government has also launched a “Three-Generation” housing plan to encourage three generations living together. As the elderly prefer to reunite with children (the characteristics of Asian families), this housing plan is more attractive to the elderly who live with the families and gain a sense of belonging.

4.2 Social Environment - “Age-friendly”

The elderly has to give up their original community life if they live in a nursing home. Therefore, sufficient living space and private space may make the residents feel respected and secured (Dijck-Heinen et al., 2014). Some personal belongings and home environment may increase the sense of belonging, privacy, quality of life and so on. In contrast, a bad nursing home provides a poor sanitation environment, such as shared bathrooms and living with roommates. It may make the elderly feeling depressed since there is a lack of independent and private area. Consequently, nursing homes may not present a feeling of “home” for the elderly because it is like a shelter unless the nursing home can provide a living room, bedroom, and independent bathroom facilities for every resident.

On the other hand, the older adults can get emotional support from family members or friends when they are connected with the society in an age-appropriate environment and improving their communication with others indirectly. In addition, to improve the quality of life of the elderly, the government should plan barrier-free housing for the elderly (Miao, Wu & Zeng, 2018). The elderly will gain greater respect and social status and will actively move

towards ageing. Furthermore, transportation and housing are important factors in setting up an “age-friendly environment”, helping the elderly to participate in local community activities, obtaining medical care services as well as visiting their family and friend (Lai et al., 2016). Besides, the interior design and the facilities of the building are equally essential. The design concept should take into account the mobility of the elderly so that they are able to live more safely and independently.

4.3 Health Implications for Elderly

4.3.1 Physical Health

Elderly are usually affected by obstacles arising from degenerative visual, auditory and memory functions. Therefore, they have a greater demand for nursing care of chronic diseases, rather than emergency treatment (Lai et al., 2016). With the changes in the society and culture, the elderly prefers to receive health care services at home to replace formal places such as hospitals or institutions (Gillsjö, Schwartz-Barcott & Post, 2011). In fact, ageing in place is providing a perfect place for the elderly to receive nursing services and health promotion particularly for those with restricted physical activity resulting from conditions such as stroke or disability. Nurses or other professionals such as occupational therapists may directly provide nursing service within the client’s home. They can observe the living environment and provide assistance for the elderly accurately or recommend adding handrails in the bathroom. Therefore, ageing in place contains community healthcare services and offers healthcare support for the elderly as well as personalised professional health information for the elderly.

4.3.2 Psychosocial Health

Elderly who live alone because of being single, divorced or widowed may be more likely to suffer from depression due to a reduced social connection and they may feel lonely leading to the poor mental health state (Lim & Kua, 2011). Thereby, inadequacy of family support and absence of life happiness are risks for the elderly. Even if nursing homes provide comprehensive nursing care service, they may limit the social circle of the elderly who need to give up their original community life. On the contrary, the elderly are able to enjoy greater freedom when living at home, and participate in social activities. Therefore, ageing in place may assist the elderly to get better psychological support since it emphasises family togetherness and more familiarity place for the elderly.

4.3.3 Healthy Living

Elderly who maintain close ties with the society may have better physical and mental health in order to reduce the incidence of depression by participating in various social activities (Miao, Wu & Zeng, 2018). The World Health Organization recommends the elderly should have “active ageing” and participate in community activities and engage in social or economic productive activities. Social participation (SP) may bring a positive health outcome, including self-esteem, sense of belonging, and life goals (Tomioka, Kurumatani & Hosoi, 2017). Active participation in the society and healthy lifestyles may enhance the living quality of the elderly. For instance, doing exercise in public sports venues can help promote health meanwhile allowing the elderly to determine their life goals (Lai et al., 2016). At the same time, SP may provide social support and interpersonal networks for the elderly. However, some mandatory social participation or frequent social activities may burden the elderly.

5 IMPROVEMENTS IN AGEING IN PLACE

5.1 Encouragement of Living with Children

Traditionally, Chinese elderly prefer to live with children and this can increase family reunion, intimacy and social-psychological support (Devasahayam et al., 2018). The family is

an integral part of the elderly's living that symbolising their own spirit of the human being (Gillsjö, Schwartz-Barcott, & Post, 2011). Elderly living with their children or family members can get a better living arrangement and a higher sense of happiness as well as to avoid loneliness. Conversely, living alone is more difficult to get emotional well-being and more likely to suffer from depression (Lim & Kua, 2011). Although the general characteristics of Asian children are filial piety and taking care of parents is usual, there are less than half of the elderly living at home with their children and/or spouses in Hong Kong (Census and Statistics Department, 2018). Thereby, the government should implement some housing policies to assist children to live with their parents, and strengthen family support for the elderly. For example, families with elderly should be given priority to relocate to larger public housing units.

5.2 Strengthening Community Infrastructure

There should be improved community infrastructure to support the elderly who normally suffer from physical function restrictions. The government should strategically ameliorate the accessibility of community medical facilities since they are essential health factors of the elderly (Loo et al., 2017). Elderly people with chronic diseases need to visit nursing facilities and get necessary medical services regularly. It may bring negative health consequences for the elderly if the nursing facility is too far away or not barrier-free. Besides, the original residential area and transportation network should be improved to ensure road safety for the elderly. For example, the elderly can use the Senior Citizen Card to extend the time to cross the road. On the other hand, dealing with the increasing elderly population and considering financial sustainability, the government should formulate a framework of elderly housing budget plan to build residential buildings specially designed for the elderly, as well as improving the nearby living environment, streets, transportation and other constructions. To provide an accessible community for the elderly is one of the requirements for promoting ageing in place, allowing the elderly to be more integrated into the community life, actively participate in different affairs, and improving their quality of life.

5.3 Expanding Home Care Services

For the purpose of meeting the rising demand for elderly care in the future, the role of home care services is becoming important, including Home Health Care (HHC) and Homemaking/Personal Support (HMPS). HHC includes nursing nutrition information or medical services provided by professional medical staff and HMPS includes daily life care, such as meal preparation, personal hygiene and cleaning (Mery Wodchis & Laporte, 2016). Community nursing services (CNS) by the Hospital Authority aim at reducing the chance of re-admission of discharged patients and provide nursing services for mental patients (Chan, Fung & Chan, 2017). The government should establish the home care service plan specifically for the elderly to provide the most appropriate home care services and rehabilitation services. Home care services are different from general nursing services. Thus, the government should have a dedicated team in "home care services" for the elderly which should include social workers, doctors, nurses, physical therapists and so on. On the other hand, the HMPS mainly provides seniors with life assistance such as assisting in bathing and so on. At present, there are some private companies and non-government organisations provide targeted care services for the elderly, such as meal delivery and laundry services. Therefore, the government should coordinate and lead the implementation of relevant policies so as to ensure the unity of service quality and satisfy the care service needs of the elderly.

6 CONCLUSION

The elderly is a part of the life cycle. As the elderly are ageing, their physical abilities may worsen. Even if the advancement of medicine may improve their health or prolong life,

people cannot ignore other basic needs for the elderly, including living style and living environment. The government hopes the elders stay in a familiar environment, get proper care and also living with the family. However, the programmes of ageing in place are still in their infancy and need time to develop, such as community centres and medical institutions. Therefore, the government should consider maintaining a high quality living environment for the elderly by the implementation of ageing in place. More elderly can connect with the society closely rather than living in nursing homes.

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REFERENCES

Alders, P., & Schut, F. T. (2018). Trends in ageing and ageing-in-place and the future market for institutional care: scenarios and policy implications. *Health Economics, Policy and Law*, 14(1), 82-100.

Boldy, D., Grenade, L., Lewin, G., Karol, E., & Burton, E. (2010). Older peoples decisions regarding 'ageing in place': A Western Australian case study. *Australasian Journal on Ageing*, 30(3), 136-142.

Brittain, K., Corner, L., Robinson, L., & Bond, J. (2010). Ageing in Place and Technologies of Place: The Lived Experience of People with Dementia in Changing Social, Physical and Technological Environments. *Techno Genarians*, 97-111.

Census and Statistics Department. (2018). "2016 Population By-census Thematic Report: Older Persons". Retrieved on March 20, 2020, from https://www.censtatd.gov.hk/press_release/pressReleaseDetail.jsp?charsetID=1&pressRID=4367

Chan, W. Y., Fung, I. M., & Chan, E. (2017). Universal Health Coverage through Community Nursing Services: China vs. Hong Kong. *Revista Latino-Americana De Enfermagem*, 25(0). Retrieved on March 27, 2020, from http://www.scielo.br/scielo.php?pid=S0104-11692017000100302&script=sci_arttext

Christensen, K., Doblhammer, G., Rau, R., & Vaupel, J. W. (2010). Ageing populations: the challenges ahead, Retrieved on March 27, 2020, from <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC2810516/>

Devasahayam, T. W., Dhirathiti, N. S., Higo, M., & Klassen, T. R. (2018). *Ageing in Asia-Pacific: Interdisciplinary and Comparative Perspectives*. Routledge.

Dijk-Heinen, C. J. M. L., Wouters, E. J. M., Janssen, B. M., & Hoof, J. (2014). A Sense of Home Through the Eyes of Nursing Home Residents. *International Journal for Innovative Research in Science & Technology*, 1(4): 57-69.

Elderly Commission. (2017). *Elderly Services Programme Plan (ESPP)*. Retrieved on February 12, 2020, from https://www.elderlycommission.gov.hk/en/download/library/ESPP_Final_Report_Eng.pdf

Fong, B. Y. F. & Law, V. T. (2017). Aging in place. In B. Y. F. Fong, A. Ng, & P. Yuen. (Eds). *Sustainable Health and Long-Term Care Solutions for an Aging Population*. Hershey, PA: IGI Global, pp. 259-276.

Gillsjö, C., Schwartz-Barcott, D., & Post, I. V. (2011). Home: The place the older adult cannot imagine living without. *BMC Geriatrics*, 11(1).

Hong Kong Housing Society. (2020). *Ageing-in-Place Scheme*. Retrieved on February 12, 2020, from <https://www.hkhs.com/en/our-business/elderly-housing/ageing-in-place>

Lai, M. M., Lein, S. Y., Lau, S. H., & Lai, M. L. (2016). Modeling Age-Friendly Environment, Active Aging, and Social Connectedness in an Emerging Asian Economy. *Journal of Aging Research, 2016*, 1-14.

Legislative Council Secretariat. (2015). *Challenges of population aging*. Retrieved March 13, 2017, from <http://www.legco.gov.hk/research-publications/english/1516rb01-challenges-of-population-aging-20151215-e.pdf>

Lim, L. L., & Kua, E. H. (2011). Living Alone, Loneliness, and Psychological Well-Being of Older Persons in Singapore. *Current Gerontology and Geriatrics Research, 673181*, 1-9.

Loo, B. P. Y., Lam, W. W. Y., Mahendran, R., & Katagiri, K. (2017). How Is the Neighborhood Environment Related to the Health of Seniors Living in Hong Kong, Singapore, and Tokyo? Some Insights for Promoting Aging in Place. *Annals of the American Association of Geographers, 107*(4), 812-828.

Mery, G., Wodchis, W. P., & Laporte, A. (2016). The determinants of the propensity to receive publicly funded home care services for the elderly in Canada: a panel two-stage residual inclusion approach. *Health Economics Review, 6*(1). Retrieved on March 9, 2020, from <https://link.springer.com/article/10.1186/s13561-016-0086-6>

Miao, J., Wu, X., & Zeng, D. (2018). *Neighbourhood and Mental Health among Hong Kong Elderly*. Center for Applied Social and Economic Research. Retrieved on March 9, 2020, from <https://pdfs.semanticscholar.org/54e1/12b423fc8923b27fefa6c808c85ad51ced19.pdf>

Ministry of Health. (2016). *Action Plan for Successful Ageing*. Retrieved on March 9, 2020, from https://sustainabledevelopment.un.org/content/documents/1525Action_Plan_for_Successful_Aging.pdf

Næss, G., Kirkevold, M., Hammer, W., Straand, J., & Wyller, T. B. (2017). Nursing care needs and services utilised by home-dwelling elderly with complex health problems: observational study. *BMC Health Services Research, 17*(1). Retrieved on March 9, 2020, from <https://bmchealthservres.biomedcentral.com/articles/10.1186/s12913-017-2600-x>

Research Office Legislative Council Secretariat. (2018). *Policy measures to promote smart elderly care services in selected places*. Retrieved March 9, 2020 from <https://www.legco.gov.hk/research-publications/english/1718in07-policy-measures-to-promote-smart-elderly-care-services-in-selected-places-20180228-e.pdf>

Rijnaard, M. D., Hoof, J. V., Janssen, B. M., Verbeek, H., Pocornie, W., Eijkelenboom, A., ... Wouters, E. J. M. (2016). The Factors Influencing the Sense of Home in Nursing Homes: A Systematic Review from the Perspective of Residents. *Journal of Aging Research, 2016*(6143645), 1-16.

Rizzuto, D., Melis, R. J. F., Angleman, S., Qiu, C., & Marengoni, A. (2017). Effect of Chronic Diseases and Multimorbidity on Survival and Functioning in Elderly Adults. *Journal of the American Geriatrics Society, 65*(5), 1056-1060.

Rogerson, A., & Stacey, S. (2018). Successful Ageing in Singapore. *Geriatrics*, 3(4), 81. Retrieved on March 9, 2020, from <https://www.mdpi.com/2308-3417/3/4/81/htm#B23-geriatrics-03-00081>

Ruddock, L & Ruddock, S. (2016). *The financial and economic challenges of housing provision for an ageing society, the University of Salford*. Retrieved on March 9, 2020, from <http://usir.salford.ac.uk/id/eprint/38967/1/JFMPC.pdf>

Tomioka, K., Kurumatani, N., & Hosoi, H. (2017). Positive and negative influences of social participation on physical and mental health among community-dwelling elderly aged 65-70 years: a cross-sectional study in Japan. *BMC Geriatrics*, 17(1). Retrieved on March 9, 2020, from <https://www.tandfonline.com/doi/full/10.1080/24694452.2016.1271306>

Woo, J. (2017). Designing Fit for Purpose Health and Social Services for Ageing Populations. *International Journal of Environmental Research and Public Health*, 14(5), 457. Retrieved on March 9, 2020, from <https://www.mdpi.com/1660-4601/14/5/457/htm>

World Health Organization. (2015). *World report on ageing and health*. Retrieved on March 9, 2020, from https://apps.who.int/iris/bitstream/handle/10665/186463/9789240694811_eng.pdf?sequence=1