## aging services of california



Inside:

From Caring to Coaching: The Evolution of Senior Living and Care

## From Caring

The Evolution of Senior Living and Care

by Roger Landry

roviders of housing and services for elders are focused on care. It's who we are, and we do it extremely well. It permeates our culture. Some of us run continuing care retirement communities; some of us offer lifecare; most of us have care plans; many of our organizations have the word *care* in their names. Our very beginnings date back to the early 19th-century almshouses, which came into being because of the growing need to care for indigent women. As Social Security and Medicare allowed us to grow as an industry, we offered comfort, safety and higher levels of care. Today, we face changing generational expectations that call on us to expand our concept of care to embrace an ethos of coaching that will support our residents' personal growth.

Up until the last couple of decades, the promise and delivery of high-quality care was the primary reason for older adults to seek out senior living communities. But American society is experiencing an ever-growing rate of change, and the field of aging is not immune. After a long period of growth in housing

for elders, downward trends in occupancy are now more the rule, even as we offer discounts and resort-like accommodations in an effort to attract residents. Yes, the recent economic downturn may be part of the explanation, but many also are noticing that a phrase our sales and marketing people often hear from older adults – "I'm not ready yet" – is

beginning to sound more like "I'll never be ready." The trends of the last few years suggest they may well be right:

 The village movement, which offers opportunities for social engagement along with vetted and discounted services provided to elders in their own homes and neighborhoods, is growing

continued on page 14

## From Caring TO COACHING

continued from page 3

exponentially, with over 50 communities employing the village model nationwide.

- Niche communities for older adults with similar interests and lifestyles have burgeoned to 100 examples, with the fastest-growing type, university-based retirement communities, already numbering 50.
- There are now 112 creative cohousing projects offering communal living with a social compact; half are in California. Cohousing communities specifically for older adults now number four, with 20 more in the planning stage.
- Surveys show an overwhelming majority of older Americans wish to remain in their homes and communities – and a growing number of providers offer home health services to help them do so.

Given these trends, those of us responsible for more established forms of housing and services for older adults should be wondering, is what we are doing sufficient? Will the promise and delivery of high quality-care in an environment of comfort and security be enough to fill our independent living, assisted living and continuing care retirement communities even after the real estate market recovers?

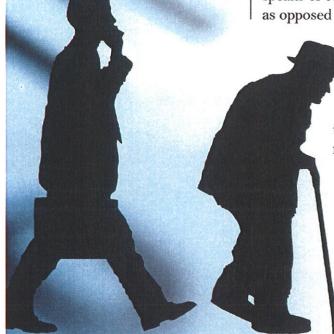
Some of the visionaries among us don't think so. The recent decision by the American Association of Homes and Services for the Aging to adopt the new brand LeadingAge, for instance, represents much more than just a name change. Instead, it's a reflection of a substantial transformation taking place as a generation of older adults exponentially larger than the preceding one reaches retirement age, bringing with it new expectations regarding the later years of life. When LeadingAge President and CEO Larry Minnix speaks of centers for healthy aging as opposed to CCRCs, we must

> realize we are on the brink of a profound shift in the orbit of senior living. A leader in the field who has recognized this impending change is Colin Milner, president of the International Council on Active Aging. Addressing solutions for the shifting needs and desires of an aging

population, he puts forth two basic requirements: First, "we change the expectations we have of growing old from those of decline and decay to those of untapped human potential and capital." And second, "we empower older adults to take better care of themselves through a variety of health and wellness solutions." Indeed, a recent issue of the journal *Senior Living Business* noted that wellness centers of the sort Milner mentions are a new focus of CCRC design.

So what is driving this change in older adults' expectations? Numerous societal trends are operating here, but the research on aging is a major player. When the MacArthur Foundation revealed the results of its decade-long study on aging some 20 years ago, it smashed the long-held stereotype of later life as a period of inevitably rapid decline and social disengagement. The discovery that lifestyle choices are the major determinant of how we age was the equivalent of debunking the flat-earth concept. The resulting new understanding of aging laid the foundation for the healthyaging movement that is still influencing older adult preferences and expectations

Subsequent studies, such as brain research that dramatically changes our view of the possibilities of intellectual growth in later decades and that inspires optimism about the possibilities for decreasing the risk of dementia, added to this major shift. Other studies that conclusively demonstrate the possibility of lowering risks for heart disease, cancer and falls with relatively minor lifestyle refinements further



encouraged people to expect an enhanced quality of life in old age. Given this change in perspective among prospective residents, the care we offer may itself not be out of sync with the times; rather, the problem may be our perceived position of "When all else fails, we'll be there for you."

Boomers in the United States will be turning 65 at a rate of one every eight seconds - that's 8,000 a day – for the next 18 years. Although they are not, in general, immediate candidates for senior living, they are driving the debate, the media attention and the future. The new older adult knows what the research on aging is telling us. They know what's possible. They expect to postpone or avoid aging-related impairments through a preventive focus. They expect to continue experiencing personal growth. And they want to be in places that support these expectations. It's no coincidence that university-sponsored niche communities are popular, for in the university environment, physical wellness and intellectual, social and spiritual growth are an intrinsic part of the organizational environment.

This is why terms such as "centers for healthy aging" or "destinations for maximizing human potential" have claimed a place in the debate on the future of senior living. Simply changing the terminology, however, will not be enough. We will have to deliver on these promises of continued growth just as we have long delivered on promises of excellent care. Wellness programs alone will not be enough to attract the new elder. Recent

initiatives to bring higher levels of hospitality to our communities will have some effect, but will still fall short of any promise to provide residents a better, healthier, more vital and more successful aging experience. So what will be required to appeal to the new, informed, expectation-rich older adult?

Before the Industrial Revolution, most human beings lived in villages. As a species, we are drawn to the concept of the village. I believe we in the aging field intuitively know this, as demonstrated by the number of our communities that have the word *village* in their names. The village concept that resonates somewhere deep within each of us reflects two key concepts:

- All the residents in the community have a social role and a social standing.
- The community embodies a social compact of giving and receiving assistance as needed.

To the extent that we bring these characteristics to life, our senior living communities will be much more attractive to the emerging generation of older adults. But I believe a third cultural characteristic will be a critical deal-maker for the successful community: Building on our firm foundation of caring, we must become communities where growth is the currency. Yes, decline will be present as an inevitable companion of living longer and growing old, but it will not dominate the culture of the community. Instead, the focus will be on ongoing growth.

As complex organisms, humans have multiple components that the research

on aging tells us are amenable to such continued growth. Growth occurs when we have knowledge of what's possible, a sense of what is needed - and when we find ourselves in a supportive community that does not direct, demand or manage, but instead coaches its members to become all they want to be. A coaching environment empowers, providing knowledge, guidance and opportunities to achieve personal goals. A coaching environment is not just the work of one or two staff members; rather, it is reflected throughout the community's culture.

The Masai have a saying: "All things change." For individuals and organizations, growth requires change. Coaching skills are different from caring skills, yet both germinate from the same basic desire to help others. Katie Sloan, chief operations officer for LeadingAge, tells us, "There is an attitudinal fault line built around shifting expectations.... We need to listen hard and actively because what we learn will define our success in future years." Building on our well-honed caring skills, senior living communities can become places that care enough to support residents' growth - and the change will at the same time help our communities thrive. •••

Roger Landry is a preventive medicine physician and president of Masterpiece Living, a group of multispecialty experts on aging based in Palm Beach Gardens, Fla. He can be reached at rlandry@ mymasterpieceliving.com. Visit the Masterpiece Living website at www. mymasterpieceliving.com.