

Small-Scale Shared Housing Projects Outside Public Schemes for the Elderly in Japan: A Comparative Study of Multiple Projects

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Abstract: This paper has examined how a mutual balance can be achieved between aspects such as the care of residents, their privacy, the expenses involved, and the scale of operating companies in order to better implement shared housing for the elderly, which has been developed on an exploratory basis in Japan, under the current social circumstances. Specifically, the three following observations can be made.(1) Reducing the room area in order to keep living expenses affordable will attract more residents who require greater long-term care.(2) Projects that cannot fund the construction of new buildings due to low rent can be executed by refurbishing existing buildings in suburban cities. (3) A strong business foundation that is capable of handling changes in the physical and mental well-being of residents over the long term is necessary, and companies can improve operational stability by introducing a long-term care insurance business or a local volunteering business in addition to their housing business.

1. Introduction

1-1. BACKGROUND

Aging population is becoming an increasingly severe problem in Japan, with people aged 65 and older now accounting for 28.4% of the total national population (proportion of the elderly). This figure is projected to hit 38.4% by 2065. It is anticipated that the problem of an aging population will also rapidly worsen in the next 50 years in other countries as well. Some factors that are responsible for an aging population include the longer life expectancy of the elderly as well as a declining birthrate due to more individuals remaining single.

In Japan, the Long-Term Care Insurance System was introduced in 2000 and direct support such as long-term care is now provided under a public scheme. However, children play an important role in the mental support of the elderly.

The number of elderly individuals without children is expected to rise in the future, and friends are typically responsible for the mental support of these individuals. Therefore, small-scale housing has been developed in Japan on an exploratory basis to encourage vibrant communal living in which elderly residents can offer mutual support to one another.

These residences are different from housing for the elderly that has been institutionalized under the Long-Term Care Insurance System, and they have been rolled out in response to the various needs of the elderly population under the current social circumstances in Japan.

1-2. RESEARCH QUESTION

However, companies in various regions are still exploring methods for operating this form of housing, and it is still unclear how its operational stability can be achieved. Therefore, through a comparison of multiple residential projects that offer shared housing for the elderly outside public schemes, this paper aims to examine how a mutual balance can be achieved between aspects

such as the care of residents, their privacy, the expenses involved, and the scale of operating companies under the current social circumstances.

1-3. OVERVIEW OF LONG-TERM CARE FACILITIES IN JAPAN

Elderly residents in Japan are traditionally taken care of by their family members in three-generation households, but the rise of nuclear families has led to an increase in the number of single

Table1_an overview of the residences and facilities for the elderly

Facility categories	Definitions	The number of residents
Special nursing home for the elderly*	It aims to provide assistance in activities of daily living such as care for bathing, toileting, eating etc. and others, functional training, health control and recuperative care to their residents requiring long-term care.	544,355 ***
Fee-Based Homes for the Elderly*	It provides elderly persons with nursing care services such as bathing, using the restroom, meals, etc. and any other services.	496,771 ***
Senior residences offering services**	It is rental housing for elderly people with providing watching and consulting services for their health.	262,021 ****
Small group home setting for the elderly with dementia*	Assistance in activities of daily living such as care for bathing, toileting, eating etc. and others, and functional training, provided at housings for shared living for persons.	260,800 ***

* is established by Act on Social Welfare for the Elderly

** is by Act on Securement of Stable Supply of Elderly Persons' Housing

*** data from 2019 Statics_Ministry of Health, Labour and Welfare

**** data from 2020 data from the registration system of Senior residences offering services

elderly individuals and a decline in the proportion of elderly individuals that are taken care of by their children. The introduction of the Long-Term Care Insurance System has led to homes for the elderly being rolled out in response to the needs of elderly residents.

Table 1 presents an overview of the residences and facilities for the elderly that have been rolled out in Japan under the Long-Term Care Insurance System. Facilities that have been made available in large numbers include special nursing homes for the elderly, paid nursing homes, and senior residences offering services. With an increasingly severe aging population problem and an urgent need for long-term care, many homes for the elderly have been designed with the aim of facilitating long-term care for elderly individuals who require such services. However, almost all of these homes have not taken into account the relationships between fellow residents despite having been designed with the same layout as shared housing with shared bathrooms and dining rooms.

The Long-Term Care Insurance System in Japan assesses the need of individuals for long-term care (their long-term care level) on a five-point scale, according to which they will be able to receive the long-term care services required. The residential projects studied in this paper are shared rental housing with shared kitchens, dining rooms, and bathrooms, with the elderly residents receiving the care services they require in the same manner as other elderly individuals living at home. Such services are expected to include assistance with chores such as cleaning and laundry, bathing, and commuting to daycare centers, depending on the individual's long-term care level.

1-4. ELDERLY GROUP LIVING

Some of the shared housing for the elderly studied in this paper is known as Elderly Group Living (EGL). EGL is a way of living that is defined as "a residential arrangement where elderly residents live in a group through mutually supporting and rationalizing aspects of one another's lives in order to compensate for the decline in their physical functions due to the aging process." In EGL, small groups of around 10 residents each share their household equipment and, in many cases, dine as a group. This is a private initiative that takes place outside public schemes.

COCO Shonandai began operations in 1999 and has served as the prototype for similar residences developed in subsequent

years. COCO Shonandai was not shared housing for the elderly that had been conceived based on the premise of providing long-term care, but rather, it had aimed to create a stable infrastructure for the daily life of residents and encourage social participation in the course of their everyday life by alleviating the anxiety of living alone in old age and preventing the lack of communication.

A grant was set up based on the template of COCO Shonandai, on the basis of which 10 projects were launched. An organization called Group Living Management Council was established and organized around these operating companies. The author of this paper is a member of this organization and has been conducting research on shared housing for the elderly both inside and outside the organization along with other operating companies.

1-5. METHODS

The construction process, building summary, organizational structure, resident background research, and the reasons for moving in and out were reviewed for each project mainly through interviews with operating companies and the use of resident directories. See the references for more information.(Miyano (2016,2017,2020)) The sizes of corporations were determined based on their ordinary revenue published in the 2019 business report on the Cabinet Office NPO portal website and their 2020 sales in the Teikoku Databank. A comparative analysis was performed for the various projects using this information.

1-6. LITERATURE REVIEW

There have been cases studies conducted on the emerging private shared housing for the elderly by Doihara and Oe(2015) who had studied COCO Shonandai as well as projects that were modeled after it, as well as Miyano and Takada(2016), who had studied "Group House Sakura" which was launched 10 years before COCO Shonandai. Previous case studies have also found (1) a lengthy residence period, (2) the presence of mutual support between fellow residents, (3) significant variations in the nursing care needs of residents depending on the period of time in question, and that (4) the upper threshold of care required for communal living has been similar to that for ordinary households. However, the small sample size was unable to provide a useful comparative analysis, making it difficult to acquire a holistic understanding of the situation. This will be the objective of this paper.

Table2_an overview of the projects studied in this paper

	Locations	Company type	Estab. date of the Group Living	Estab. date of the company	Survey year	the business period	The number of rooms	The area of one room (㎡)	Average nursing care level of residents	Average age of residents
A	Saitama	Co. Ltd.	1990	1990	2014	24	6(3)	14-19(after33)	0.00 ~ 2.00	75.6-90.2
B	Kanagawa	Nonprofit	1999	2000	2013	13	10	25.0	0.16	79
C	Kanagawa	Nonprofit	2003	2003	2013	10	10	24.8	0.43	80
D	Osaka	Nonprofit	1999	2004	2018	14	7	6.6 ~ 10.3	1.68 ~ 3.50	88.5
E	Hokkaido	Nonprofit	1999	2006	2013	7	9	25.0	0.44	90
F	Fukushima	social welfare corporation	1988	2009	2019	10	10	25.2	-	-
G	Hyogo	Nonprofit	2010	2010	2019	9	7	25.2	0.46	82
H	Hyogo	Co. Ltd.	2003	2010	2015	5	4	11.6	2.06	76.5
I	Hokkaido	Nonprofit	2010	2010	2016	6	24	23.7 ~ 33.6	0.25 ~ 0.92	80.9
J	Saitama	Nonprofit	2003	2011	2019	8	10	26.5	0.34	84
K	Kanagawa	Nonprofit	2013	2014	2019	5	10	22.6	0.09	79

2. Analysis of Projects Studied

2-1. OVERVIEW OF PROJECTS

Table 2 presents an overview of the projects studied in this paper. The year of establishment of these corporations ranges from 1990 to 2013. Some corporations were founded for the purpose of setting up shared housing for elderly, while others were not. These residences offer 4 to 10 rooms for each group of residents, with the private area of individual rooms ranging from 14.0 m² to 33.6 m². Meals are provided at all residences, and residents have their dinner (as well as breakfast and lunch in some cases) in a group. For certain residences, resident meetings are held one to three times a month. The residences marked with bold are subsidized projects constructed based on the template of COCO Shonandai.

2-2. NUMBER OF BUSINESS YEARS AND THE RESIDENCE PERIOD AMONG RESIDENTS

Figure 1 shows a comparison of the business period of the various corporations and the average and maximum residence periods among residents. Assuming that elderly individuals move into a residence in their late 70s and vacate the residence when they pass away in their 90s, the maximum residence period is believed to be around 15 years. "Group House Sakura(A)," which has been in operation for the longest period of time, has a business period of 25 years, a maximum residence period of 18 years, and an average residence period of 8 years and 6 months. Like "Group House Sakura," projects D and H all have an operating policy of marketing their residences as a "final home" for residents. Since they have been in operation for less than 20 years, the maximum residence periods for these projects are the same as their respective business periods as many of their first residents still remain over the course of their relatively short business periods. Of course, the average residence period is shorter than the maximum residence period and is only around half the latter due to the early death and departure of some residents. It is believed that residents can continue to live in these residences for as long as they prefer even if their dementia is becoming progressively worse. This is because the companies operating these residences also provide long-term care insurance in conjunction with their housing business, and they have some degree of expertise in the long-term care of the elderly.

On the other hand, the average residence periods for projects B and C are shorter and are less than half of their respective

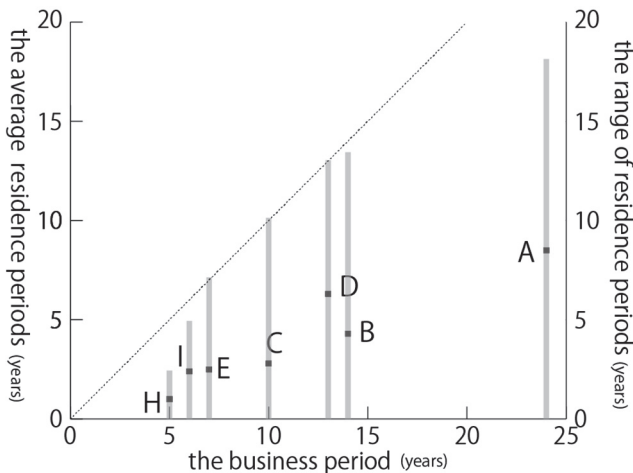


Figure 1_ A comparison of the business period of the various corporations and the average and maximum residence periods among residents

maximum residence periods. The corporations for these projects only operate a housing business without any long-term care facilities. At these residences, residents are unable to continue living there once their dementia progresses. It has also been previously reported that as residents age and require greater day-to-day support, they tend to relocate to special nursing homes for the elderly as these homes are cheaper.

Based on residents living at residential projects for which calculations can be made, the average residence period is 8 years and 6 months.

2-3. PRIVATE AREA AND THE LONG-TERM CARE REQUIRED ON AVERAGE

Figure 2 shows the relationship between the area of one room and the long-term care required on average. The grant that was set up based on the template of COCO Shonandai specified a room area of 25 m² as part of its subsidy criteria. Because of this, many rooms have an area of around 25 m². The room area of 25 m² is also the standard room area for senior residences offering services. However, these residences have an en-suite bathroom, whereas the rooms for the projects studied in this paper do not. This makes the latter more versatile as private rooms. The room area of 25 m² at COCO Shonandai was adopted as the template because it was determined that this is the minimum living area that an independent elderly individual requires. On the other hand, projects A, H, and D have smaller rooms to keep their monthly charges lower, which results in them being the choice of residents who require greater long-term care on average.

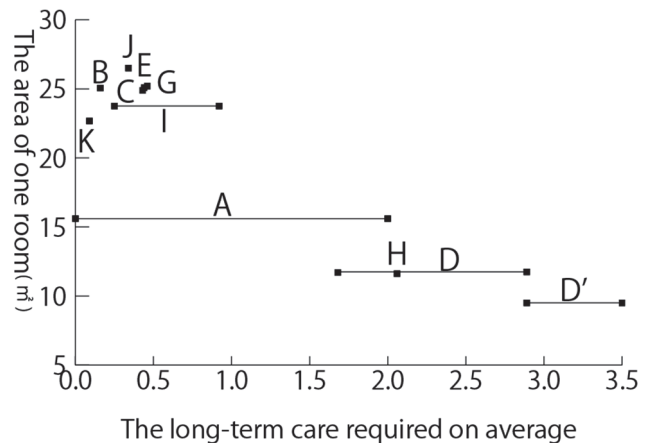


Figure 2_ The relationship between the area of one room and the long-term care required on average

2-4. MONTHLY LIVING EXPENSES AND THE LONG-TERM CARE REQUIRED ON AVERAGE

Figure 3 shows the relationship between monthly living expenses and the long-term care required on average. Monthly living expenses include rent, common service charges, housekeeping and administrative charges, as well as the cost of meals, but exclude long-term care insurance premiums that are borne by residents. Projects B, C, K, and J are located in the Tokyo metropolitan area where rent is expensive, and they are all newly constructed residences. The other projects are located in suburban cities. The rent in the area of these projects is low and the companies could not fund the construction of new buildings, thus existing buildings that had been built for a different purpose were refurbished as housing for the elderly in these cases.

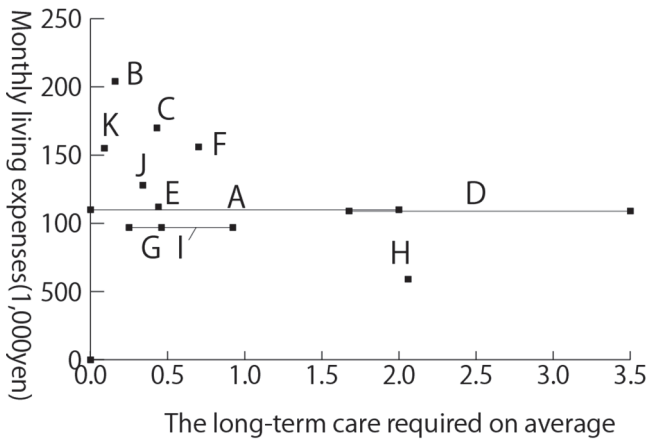


Figure 3_ The relationship between monthly living expenses and the long-term care required on average

2-5. THE BUSINESS FOUNDATIONS OF COMPANIES AND THE LONG-TERM CARE REQUIRED ON AVERAGE

Figure 4 shows the relationship between the income of operating companies and the long-term care required on average. The projects studied in this paper are residences for groups of around 10 residents, and the income generated by companies from this business does not very much. In addition, they are not expected to generate large profits. However, there are significant differences in the size of different corporations. Corporations that run a long-term care insurance business involving home visits and daycare centers tend to be larger(A,D,H,and J), followed by corporations that run a local volunteering business engaged in community support activities and salon management(C and E). Finally, corporations that only operate housing for the elderly tend to be small(B,C ,and K).

Although it has been previously reported that the care required by resident communities living in shared housing for the elderly tends to fluctuate significantly over the long term due to changes in the residents' physical and mental well-being, larger corporations have the advantage of being more well-positioned to absorb the fluctuations in these expenses.

On the other hand, companies that only run a housing business require appropriate operational management that is capable of handling any changes associated with the greater care required by aging resident communities.

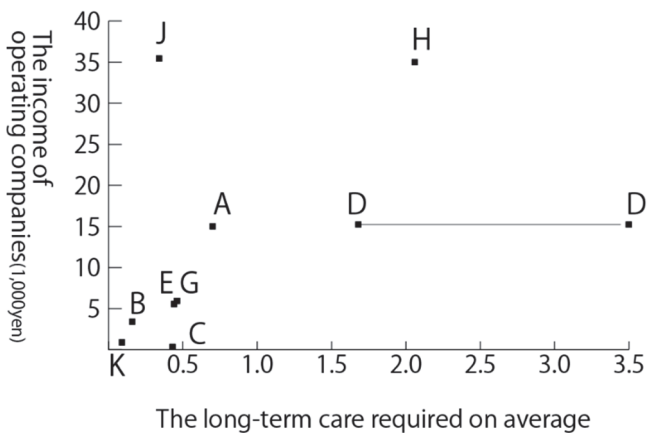


Figure 4_ The relationship between the income of operating companies and the long-term care required on average

3. Conclusions

This paper has examined how a mutual balance can be achieved between aspects such as the care of residents, their privacy, the expenses involved, and the scale of operating companies in order to better implement shared housing for the elderly, which has been developed on an exploratory basis in Japan, under the current social circumstances. Specifically, the three following observations can be made.

- (1) Reducing the room area in order to keep living expenses affordable will attract more residents who require greater long-term care.
- (2) Projects that cannot fund the construction of new buildings due to low rent can be executed by refurbishing existing buildings in suburban cities.
- (3) A strong business foundation that is capable of handling changes in the physical and mental well-being of residents over the long term is necessary, and companies can improve operational stability by introducing a long-term care insurance business or a local volunteering business in addition to their housing business.

Current housing for the elderly has been responding to changes in the day-to-day support required by residents through their relocation. While there are limitations to shared housing, it is desirable to affirm the need for a long-term residence from the perspective of offering residential stability to individuals in their old age. It is hoped that a method to facilitate the stable operation of small-scale shared housing for the elderly that draws on the relationships between independent individuals can be achieved.

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