Village People:  
The changing role of retirement villages in New Zealand’s ageing society.

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Abstract

This thesis explores the development and the future of the retirement village industry in the Auckland, Waikato and Bay of Plenty regions from a geographic perspective. The ageing of New Zealand’s population means that facilities for people in their retirement have become more crucial. These facilities are going to become even more important as the baby boomers begin to reach retirement age. Retirement villages are one of the more visible facilities available to older New Zealanders. The retirement village concept originated in North America and has existed in New Zealand since the 1950s. The retirement village industry has experienced substantial growth in the past 20 years with the number of retirement villages in Auckland increasing almost threefold since 1991. More recently the industry has seen the implementation of the Retirement Villages Act 2003 which will have effects on village operators and residents alike. Many small charitable or religious groups are selling their retirement village facilities which are often purchased by existing retirement village operators thus resulting in a consolidation of the retirement village industry. Australian retirement village operators have become more active in the New Zealand retirement village industry and some have expressed a view that by the end of the first quarter in 2006 all retirement villages in New Zealand will be owned by Australian operators.

There are many housing options available to older New Zealanders, ranging from living in one’s own home to living in a full time residential care facility. Most older New Zealanders live in their homes and this is something that the government tends to encourage with policies of ‘ageing in place’. However, many suburbs are not conducive to ageing in place positively. In order to assist older New Zealanders to age positively in place we need to provide access to facilities and resources in the community and investigate living options which give older people independence in the community but also provide support and companionship when necessary. While the retirement village industry does provide this, retirement villages are an exclusive living option which is not financially accessible to all older New Zealanders.

**Key phrases:** retirement village, ageing in place, ageing population, retirement
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Chapter One
Introduction

The age composition of New Zealand’s population has been quietly but substantially reshaped over recent decades. Today, children are not seen in suburban streets and school playgrounds as often as they were in the 1960s, whereas elderly people are encountered much more frequently in shopping precincts, doctors’ surgeries and elsewhere.

(Heenan, 1993: 29)

1.1 Introduction

New Zealanders pride themselves on being members of a diverse society, a wholly inclusive society which is unique from any other. However, one way in which we are not particularly unique is in the composition of our population by age. We, like much of the developed world, have an ageing population and as a nation we are getting older. As the population continues to age, facilities for older New Zealanders are going to become more visible and more important. This thesis focuses on the role of one of these facilities, retirement villages, in our society. This introductory chapter firstly outlines the aims of the thesis before briefly discussing the methodology used to achieve these aims. I then provide some definitions of what a retirement village is and what constitutes an ‘older New Zealander’. This chapter concludes with an outline of the thesis organisation.

1.2 Aims

This thesis has three main aims. Firstly, I intend to analyse the role of retirement villages in providing accommodation to older New Zealanders. Secondly, I will investigate issues of accessibility relating to retirement villages and analyse whether or not retirement villages need to be made more accessible spaces. Thirdly I will scrutinise the regulatory issues affecting retirement villages and evaluate the impact of these issues on the residents and operators of the retirement villages.
1.2.1 The role of retirement villages

Housing is obviously an important issue for older New Zealanders, especially as many older people find that they are living either alone or with their spouse or partner in the home in which they may have raised their family. Therefore, the home is often too large for the older person’s needs and requires more maintenance than they can easily deal with. It becomes inevitable for many older New Zealanders that they will have to move, either to a smaller dwelling in the community or to some sort of supported living option. There are many housing options available to older New Zealanders who find themselves in this situation, including the option of moving into a retirement village facility.

This thesis investigates the retirement village industry both in New Zealand and internationally and evaluates the role of retirement villages in providing secure accommodation to older New Zealanders. This section analyses what retirement villages offer older New Zealanders and the costs of moving into a retirement village facility and discusses the popularity of retirement village living in New Zealand today. I analyse how the roles of retirement villages have changed in recent times and how it will continue to change into the future. This is followed by some predictions about the future of the retirement village industry.

1.2.2 Issues of accessibility

Retirement villages have a reputation of being very elite spaces. They often cost a lot to enter into and can appear to be exclusive in terms of ethnicity, class and income. This thesis investigates whether or not this reputation is deserved and evaluates whether this exclusivity is necessarily a bad thing. While exclusivity is normally seen to have detrimental effects on society, retirement villages may be the exception to this. This thesis will analyse the role of retirement villages in providing accommodation to older New Zealanders and will assess the need for retirement villages to become a more accessible living option for more older New Zealanders.

1.2.3 Regulatory issues

The ageing population is not going to go away. New Zealanders are getting older; there can be no escaping this fact. This is something that we as a nation need to accept and plan for. The New Zealand government has started to plan for the ageing of our population with strategies
such as the New Zealand Positive Ageing Strategy and the Health of Older People Strategy. This thesis analyses these strategies and assesses their value in providing for an ageing society.

This thesis also analyses the Retirement Villages Act 2003, which is still coming into force, and discusses the effects this is likely to have on operators and intending and existing residents of retirement villages. I also discuss the role of the Retirement Villages Association in the governance of retirement villages and how this role is likely to change as the retirement village industry continues to change.

1.3 Methodology

In a broad sense, qualitative research is concerned with elucidating human environments and human experiences within a variety of conceptual frameworks.

(Winchester, 2000: 3-4)

The thesis was researched using qualitative research methods, primarily using semi-structured interviews.

1.3.1 Recruiting

For this thesis I interviewed a total of 28 people. Ten of these people are operators of retirement villages in Auckland, Hamilton and the Bay of Plenty and include two representatives of large retirement village operators. Fourteen of the interviewees were residents in retirement villages in the same three areas and the remaining four were involved in the governance and policy making part of the industry. These four people represented the Retirement Villages Association, the Ministry of Health, the Office for Senior Citizens (an office of the Ministry of Social Development) and the Retirement Commission.

I obtained the operators’ contact details from the websites of the Retirement Villages Association and the District Health Boards. I sent letters to half of the retirement village operators in Auckland and all of the retirement village operators in Waikato and the Bay of Plenty. I chose to send letters to only half of the retirement village operators in Auckland
because of the large number of retirement villages in Auckland. These letters requested an interview with the operator or another representative of the management of the village. The letters explained the research project in full and were accompanied by a consent form which operators were asked to sign and send back if they wished to participate in the research.

The letters also asked for permission to interview residents of the retirement village and was accompanied by posters advertising the research. Operators were asked to display the posters on a notice board in the common areas of the village. Valentine (1997) warns about possible difficulties with this method of recruitment:

> Beware, however, particularly when you are relying on gatekeepers for an introduction to members of a social group … that they do not try to direct you to a narrow selection of the members … and discourage you from talking to others.

(Valentine, 1997: 116)

While this was clearly a risk, the operators’ potential for gate keeping was kept to a minimum. It was obviously up to the operators whether or not they chose to display my poster and there was really a limit to what I could do to encourage them to display the poster. However, once the posters were displayed, the operators had no control over which of their residents saw the poster or chose to contact me.

Upon reading the poster, interested residents then phoned or emailed me to register their interest in the research and we would arrange a time to meet. Before meeting, I would post the residents a copy of my participant information sheet and consent form in order to better inform the residents more about the research prior to the interview. Most of the residents were recruited in this manner. However, I found that the response from residents in Hamilton and the Bay of Plenty was disappointing. It was here that the tactic of snowballing was used:

> The initial contact may be a friend, relative, neighbour, or someone from a social or formal group.

(Valentine, 1997: 117)

Initial contacts in the Bay of Plenty were made through a friend who had friends living in retirement villages in that area. Initial contacts in Hamilton were made found through my employment in the New Zealand Geographical Society. It was brought to my attention that one of the Society’s members lived in a retirement village. I wrote to her asking her to
participate in my research. She agreed and also helped me to make additional contacts with other residents of retirement villages in Hamilton.

Contact with government and policy officials was made by writing to the various organisations and government departments requesting an interview with a key staff member. These letters were very similar to the letters written to the operators of retirement villages and were also accompanied by a consent form which participants could send back if they wished to be involved.

1.3.2 Interviewing

Interviews bring people ‘into’ the research process. They provide data on peoples’ behaviour and experiences. They capture informants’ views of life. Informants use their own words or vernacular to describe their own experiences and perceptions.

(Dunn, 2000: 80)

I chose to use a semi-structured interview technique for this research because I felt that face-to-face interviews would allow me to accurately gauge the feelings and opinions of the interviewees. This technique was chosen over the option of questionnaires. While the use of questionnaires was considered and would have had advantages (such as a possible higher response rate), it was considered that questionnaires would gain little insight into actual experiences of the interviewees and may result in important issues being excluded. Using the semi-structured interview technique allowed me to direct the conversation but also allowed interviewees the freedom to raise issues that they considered to be important.

Sometimes the researcher will not be in control of where an interview takes place. The subject may choose where to be interviewed – in a place of paid employment, in the home or perhaps in some neutral location – and gatekeeping individuals or agencies may well dictate the interview location.

(Cloke et al., 2004: 157)

All interviews were conducted in a location of the interviewees’ choice. Interviews with operators and policy makers were usually conducted in the interviewees’ office or in a conference room at the interviewees’ workplace. The only exception to this was the operator of a Tauranga retirement village who chose to be interviewed in the common lounge area of
the village. Most of the interviews with residents took place in the residents’ home in the retirement village, with the exception of one resident who also chose to be interviewed in the common lounge area of his village. Valentine (1997) recognises benefits associated with interviewing people in their own homes:

Talking to people on their own ‘territory’, i.e. in their home, can facilitate a more relaxed conversation. It also offers you the possibility to learn more about the person from seeing them in their own environment.

(Valentine, 1997: 118)

This was particularly relevant to this research because I was talking to the residents about their housing choices and it was beneficial to see residents interacting with their chosen housing environment. This was the case especially with the older residents for whom mobility may have been an issue. It also made it easier for them to show me the aspects of retirement village living that they enjoyed the most.

I chose to record the interviews using a portable tape recorder in order to accurately document the opinions of the interviewees. Only one interviewee declined to be recorded. Recording the interviews allowed me to concentrate entirely on listening to the interviewee and allowed the conversation to flow naturally. This method also allowed me to accurately use direct quotes from my interviewees in my thesis. It has been argued by Butler (Butler, 2001) that the use of direct quotes allow the voices of the interviewees to be heard.

1.4 Definitions

There are primarily two terms which may cause some confusion in this thesis. There is some debate about what a facility must provide in order to be classified as a retirement village. There are also varying opinions on who is classified as ‘old’. This section provides definitions for these two terms.

1.4.1 What is a retirement village?

One of the main functions of the Retirement Villages Act is to provide a strict definition of a retirement village. In the past definitions have varied between organisations, making it difficult for government agencies to enforce legislation and making it easier for smaller villages not to comply with any regulations.
In this Act, … retirement village means the part of any property, building, or other premises that contains 2 or more residential units that provide, or are intended to provide, residential accommodation together with services or facilities, or both, predominantly for persons in their retirement, or persons in their retirement and their spouses or partners, or both, and for which the residents pay, or agree to pay, a capital sum …

(Retirement Villages Act, 2003: Section 6)

The provision of this definition is of particular importance because prior to the introduction of the Retirement Villages Act, definitions of a retirement village varied between organisations. For example, until the implementation of the Retirement Villages Act, the Retirement Village Association operated under the following slightly different definition:

A resident-funded complex where mature-aged persons purchase, subscribe for or otherwise acquire the right to accommodation (whether by way of proprietary interest in land or otherwise) which may be associated with the right to care and support services and includes a right to share community facilities, and any similar arrangement or scheme, whether run as a profit or non-profit organisation.

(Retirement Villages Association of NZ, 2004)

In 1991 the Retirement Villages Act was not even in the pipeline and Burgess (1991) created her own definition of a retirement village:

Planned spatial concentrations of elderly people designed to promote independent living for the elderly for as long as possible within a supportive and community environment.

(Burgess, 1991: 4)

Burgess (1991) adds two extra dimensions to her working definition of a retirement village. She adds the requirement that at least part of the village must be made up of units purchased by residents for a capital sum, rather than rental units. Burgess also states that residents must have access to communal facilities and an emergency call system (Burgess, 1991).

Grant (2003) quotes a slightly different definition given by the New Zealand Law Commission:

According to a New Zealand Law Commission Report retirement villages are a purpose built complex of residential units with access to ancillary facilities planned especially for the comfort and convenience of the residents. They are also environments that are segregated from the broader community by age.

(New Zealand Law Commission as cited in Grant, 2003: 137)
While these four definitions are clearly different, there is one key point which is consistent throughout the four definitions. All four definitions state clearly that residents of retirement villages must have access to community facilities and services. Therefore, a group of units, flats or houses owned by older people in a body corporate type of arrangement would not be considered a retirement village under any of the above definitions. Three of the four definitions also state that there must be an aspect of capital investment in the retirement village. Therefore, if a village was composed only of rental properties then it would not, under these three definitions, be considered to be a retirement village.

Because of this thesis’ focus on the governance and legislative aspects of the retirement village industry, the main definition used in this thesis will be the one provided by the Retirement Villages Act 2003.

1.4.2 Who is old?

While many retirement villages have a minimum age limit of 55, very few 55 year olds would consider themselves to be old. Old age is a term around which there are varying definitions and many people aged in their 70s would not think of themselves as old. Dependency ratios classify anyone over the age of 65 as economically dependent and therefore old. In New Zealand it is illegal for anyone to be forced to retire at any age and therefore people aged over 65 can be economically independent. However, one becomes eligible for New Zealand Superannuation at 65 and most academics and policy makers would consider anyone over the age of 65 to be ‘old’. Therefore, when referring to older New Zealanders I do primarily mean those aged over 65.

1.5 Thesis organisation

Chapter two of this thesis is a literature review chapter providing a theoretical background of my thesis topic. This chapter discusses the phenomenon of ageing populations firstly in the international context before moving to a discussion about New Zealand’s ageing population. Here I describe population patterns and discuss reasons for an ageing population. The chapter then shifts slightly to discuss the lived experience of old age and being old in Aotearoa/New Zealand.
Zealand. This section talks about the positive and negative aspects of being old in New Zealand and the public perceptions of old age. From here the chapter moves to discuss housing options available to older New Zealanders. This section analyses the entire spectrum of aged housing in New Zealand from living independently to living in full time residential care. This moves naturally onto a broad discussion about the retirement village industry internationally before embarking on a more in depth discussion of New Zealand’s retirement village industry.

Chapter three focuses primarily on policy analysis and analyses the governance issues facing retirement villages, their operators and their residents. This chapter begins with a discussion of the New Zealand Positive Ageing Strategy before moving on to discuss the Health of Older People Strategy. The chapter then briefly discusses Building the Future: The New Zealand Housing Strategy which succinctly considers the housing issues faced by older New Zealanders. The focus of the chapter then shifts to specific discussions about retirement villages, firstly analysing the Retirement Villages Act 2003 before discussing the role of the Retirement Villages Association in the governance of the retirement village industry.

Chapter four is chiefly a discussion chapter, analysing the arguments for and against age segregated communities. Age segregated communities such as retirement villages have been widely criticised for cutting older people off from younger generations and creating ‘ghettoes for old people’. Others have praised age segregated communities for providing a safe space in which older people can live independently and age positively. This chapter analyses the arguments both for and against segregation by age and concludes that although age-segregated communities can have negative impacts on older people, they are not necessarily completely detrimental and can lead to the empowering of some older people. Here I draw on the relevant literature as well as on my own experiences as a researcher in this field.

Chapter five provides an analysis of the operation and operators of retirement villages and provides an in depth discussion of the composition of the New Zealand retirement village industry. The chapter begins by outlining recent developments in the retirement village industry, primarily because 2005 saw many changes to the composition of the industry and to the ownership of many of the key operators. This is followed by a discussion of the
conflicting operations and views of the not-for-profit operators and the for-profit operators using the examples of New Zealand’s largest retirement village operator and the largest not-for-profit retirement village operator. The experiences of the some of the interviewees are then used to discuss the operations of smaller retirement villages. The chapter concludes by discussing the future of the aged care industry and in particular the retirement village industry. The main sources for this chapter are newspaper articles and my own communication with operators of retirement villages but a small amount of literature is also used.

Chapter six is possibly the most important chapter in the thesis as it discusses the views of the retirement village residents. The chapter starts by introducing the reader to some of the residents I met in my research in order to show that retirement village residents are people who have led interesting working lives and who in retirement continue to have valid opinions about the world and about their own lives. I then talk about the reasons given by the residents for moving into a retirement village facility and compare these reasons to the reasons given in the literature. The chapter then discusses the experiences of retirement village residents, whether positive or negative, and any impacts they feel living in a retirement village environment has had on their quality of life and general wellbeing. I then attempt to make a statement about the role that retirement villages have played in these people’s lives before making a broad statement about the role of retirement villages in providing accommodation for older New Zealanders.

Chapter seven is the concluding chapter of the thesis. This chapter starts by briefly recapping the aims of the thesis and providing a short summary of the thesis findings. This is followed by a section of comment on the future of the retirement village industry before offering some suggestions for the industry, policy makers and the literature. I bring the thesis to a close by suggesting some ideas for the continuation of this research before offering a brief concluding statement.
Chapter Two
Theoretical Background

The needs of baby boomers have been driving western economies since the late 1940s. Their needs through infancy, schooling, tertiary education, careers, home buying, family rearing, middle age, increased affluence and leisure time, and now looking towards retirement, have brought prosperity to western nations and growth in sectors relevant to each stage of their lives. (Wilde, 2001: 1)

2.1 Introduction

As New Zealand’s population follows the trend of the rest of the developed world and grows older, ageing and being old are becoming topics of concern to many academics. This chapter aims to give a brief overview of the literature related to this subject and will discuss both New Zealand and international literature. This chapter will start by discussing ageing populations in the international context before discussing the broad theme of New Zealand’s ageing population, in which I will describe population patterns and identifying reasons for an ageing population. It will then go on to discuss the experience of old age and being old in Aotearoa New Zealand, discussing the positive and negative aspects of being old in New Zealand as well as discussing common perceptions of ageing. From here the chapter will proceed to discuss different housing options for older people in New Zealand before moving on to discussing the international retirement village industry before finally discussing the retirement village industry in New Zealand.

2.2 Ageing populations

New Zealand is not at all alone in experiencing an ageing population. The post World War II baby boom was a phenomenon experienced by most of the developed world. One must also consider the fact that World War II was almost immediately preceded by the Great Depression of the 1930s. Therefore many couples were delaying having children for
economic reasons well before the war broke out. This caused the baby boom to even bigger than it would have been had it just been caused by the end of World War II. Thus, much of the developed world experienced a population explosion at the end of World War II. The baby boom is generally accepted to have occurred between the years of 1946 and 1965. New Zealand’s baby boom is slightly different to that of some other countries but the effects remain the same:

People born between 1946 and 1965 currently make up a slightly larger proportion of the total population in Canada, the USA and Australia than they do in New Zealand. However, the United Kingdom, France and Germany all have, proportionally, slightly smaller baby-boom generations than New Zealand. This is primarily related to the effects of World War II. Although the initial rise in births in New Zealand was very similar to other industrialised nations, the fall in New Zealand births after the baby boom occurred later and was less pronounced. By contrast, there was a striking decline in births in the USA over the same period.

(Statistics New Zealand, 1995: 7)

New Zealand is comparatively slow in regards to the ageing of its population. Many European countries are experiencing a much faster rate of growth of their older populations. For example, countries such as Italy are experiencing total fertility rates of less than the generally accepted population replacement level of 1.23 births per woman. This is particularly interesting because Italy is primarily a Catholic country and Catholic countries traditionally have relatively high total fertility rates because of the Catholic Church’s disapproval of contraception. A 2004 editorial in the New Zealand Listener claims that this is due to the gender roles which still exist in many Italian homes:

The Italian government has tried bribes – paying $1890 to every woman who has a child. But most mothers go on strike after having the first baby. Why? Because Italian men do almost no housework. Swedish men do more. And clearly get their reward. The birthrate is higher.

(Stirling, 2004)

Demographers claim that if Italian birth rates continue in this fashion, Italians will slowly die out (Stirling, 2004). While the Italian case is obviously an extreme example, the ageing of the world’s population is becoming a more important issue. Many developed countries are experiencing population ageing and New Zealand is no exception to this. If governments and populations worldwide fail to plan for the inevitable increase in the numbers of aged people, the ageing population will become the problem that it could be rather than the opportunity that it should be.
Chapter 2: Theoretical Background

2.3 New Zealand’s ageing population

New Zealand, like many developed nations, has an ageing population. People aged over 65 currently comprise approximately 12 percent of New Zealand total population (Statistics New Zealand, 2004a). However, this is projected to rise dramatically in the next 50 years to 13 percent in 2010, 22 percent by 2031 and 25 percent by 2051 (Dyson, 2002). To put the figures into a different perspective, it is likely that by 2051 the median age of New Zealanders will be 46, compared with a current median age of 34 (Khawaja, 2000). It is predicted that by 2051 the number of people aged over 100 years will rise from the current 300 to around 12,000 (Khawaja, 2000). In 2051 it is also expected that people aged younger than 15 will comprise only 16 percent of the total population (Dyson, 2002) and in 2004, for the first time ever, those aged over 60 outnumbered preschoolers (Stirling, 2004).

New Zealand’s ageing population is the result of many factors which combine to influence the structure of the population. Three of the primary factors are increasing life expectancy, baby boomers beginning to reach retirement age and decreasing total fertility rates. Mortality rates have improved dramatically over the past 100 years. This is especially true for child mortality. In the past up to 100 out of every 1000 babies born would die before their first birthday. That figure has been reduced dramatically to approximately 7 babies out of every 1000 dying in their first year (Khawaja, 2000). The fewer children dying within one year of birth will obviously result in an increase in the number of people reaching median life expectancies in the future. The life expectancy for New Zealanders currently stands at approximately 81.1 years for women and 76.3 years for men (Statistics New Zealand, 2002). There are several reasons for this increased life expectancy, one of the main ones being that we are living healthier lives. This is accompanied by improvements in medicine resulting in health conditions being recognised and treated more efficiently. The Prime Ministerial Task Force on Positive Ageing (1997) identifies that the health complaints of older people are often dismissed as being inevitable effects of growing old:

The effects for ageing per se and the effects of illness are frequently confused. Health conditions arising for people in these groups can frequently be considered to be “only old age” when, in fact, a treatable, reversible illness may well be unrecognized [sic] and become irreversible if ignored too long.

(Prime Ministerial Task Force on Positive Ageing, 1997: 19)
The more efficient identification of these health conditions allows the conditions to be treated efficiently, allowing older people to lead fuller and longer lives.

Another factor contributing to the ageing of New Zealand’s population is the ageing of the ‘baby boomers’ – those born in the post-World War II period of 1945 to 1961.

Between 1946 and 1965, 1.125 millions babies were born in New Zealand. This was over 77 percent more than in the 20 years before the baby boom (1926-1945), when 634,000 babies were born. At the start of the baby boom, the New Zealand population was 1.7 million, by 1966 it had risen to 2.7 million.

(Statistics New Zealand, 1995: 1)

The older of the ‘baby boomers’ are now approaching the age of 60 and are therefore probably not yet retiring but they will begin to retire within the next decade. Those born during the baby boom are approaching old age and comprise a significant proportion of New Zealand’s, and the world’s, ageing populations. Developed economies have been driven by the needs of baby boomers since the late 1940s (Wilde, 2001). The aged care sector of the economy is currently benefiting from the baby boomer generation.

The final contributing factor has been a dramatic decrease in total fertility rates. Total fertility rates in New Zealand peaked in the 1960s and have been on a downward trend ever since. It is projected that by the 2030s, deaths will outnumber births (Statistics New Zealand, 2002). The latest total fertility rates suggest that New Zealand women average 1.98 births per woman (Ewing, 2004). The population replacement level is generally accepted to be 2.1 births per woman (Khawaja, 2000). New Zealand’s total fertility rates, whilst low when compared with historical total fertility rates, are still higher than other developed nations. In 1997 the total fertility rate in Italy stood at 1.2 children per woman (Golini, 1997). Italy’s total fertility rate currently stands at 1.23 children per woman and is the second lowest in the developed world (Stirling, 2004). New Zealand’s population is ageing but, as shown by the Italian example, it is ageing at a slower rate than many other developed nations (Age Concern New Zealand Incorporated., 2002; Dean, 1993b; Dyson, 2002). Two of the primary reasons that New Zealand’s population has aged at a slower rate than other countries which have experienced similar economic development are ‘comparatively high total fertility rates and significant periods of net migration’ (Dyson, 2002: 6).
While approximately 15 percent of New Zealand’s population identify as being Māori, Māori make up only 3.1 percent of New Zealand’s older people. The majority (92.9 percent) of New Zealanders aged over 65 identify themselves as being of European origin (Statistics New Zealand, 2001). Statistics New Zealand (1998) outlines two specific reasons for this. Māori generally have higher mortality rates than non-Māori, thus resulting in less Māori reaching old age. Māori also have higher total fertility rates than non-Māori meaning that the Māori population is more youthful than the non-Māori population (Statistics New Zealand, 1998). However, trends for the Māori population are changing as life expectancy for Māori improves and fertility rates decrease (Statistics New Zealand, 1998). New Zealand’s Pacific peoples have similar population patterns to the Māori and are under-represented in elderly age groups. It is projected that the numbers of both Māori and Pacific elderly people will increase dramatically in the next 50 years (Dyson, 2002). It is expected that in the next 50 years the proportion of Māori people aged over 65 will increase by 270 percent while the proportion of Pacific peoples in the same age group will increase by 400 percent. While most other ethnic groups in New Zealand, particularly Asian groups, have relatively young populations, it is expected that the proportion of older people in these groups will increase significantly also (Dyson, 2002).

Statistics New Zealand (1998) suggests that the reason why Pacific and Asian populations have comparatively small numbers of older people could be because these populations are mostly made up of migrants and are therefore yet to reach retirement age (Statistics New Zealand, 1998). It must be acknowledged however, that more than half of New Zealand’s Pacific population is now New Zealand born. Therefore it is not accurate to described Pacific peoples as a migrant population. In the 2001 census, six out of every ten people who identified themselves as being of Pacific ethnicity were born in New Zealand (Statistics New Zealand, 2005). This figure is greater for those of Cook Island and Niuean ethnicity (seven out of every ten born in New Zealand) and smaller for Tuvalu Islander ethnicity (three out of every ten) (Statistics New Zealand, 2005). It must also be remembered that the Pacific population in New Zealand is, in many cases, far bigger than the Pacific population in the Pacific Islands. For example, the 2001 census count of people of Niuean ethnicity is ten times larger than the estimated 2001 population of Niue (Statistics New Zealand, 2005). Nearly half of New Zealand’s 2001 population of Pacific peoples who were born overseas arrived in New Zealand prior to 1981 (Statistics New Zealand, 2005). New Zealand’s high rates of net
migration across all ethnic groups have contributed to New Zealand’s population ageing at a slower rate than other developed nations (Dyson, 2002).

While New Zealand definitely has an ageing population this does not necessarily equate with an acceptance of ageing or of older people in the general community. Old age is not only a natural stage in everyone’s biological life, it is also a concept around which there are social perceptions which affect the experience of old age in Aotearoa New Zealand.

2.4 Old age in Aotearoa New Zealand

The term ‘old age’ is a term around which there are varying definitions.

‘Old age’ is both a physiologically determined period of life cycle dependency as well as being socially and culturally defined.

(Dean, 1993b: 8)

Dean (1993b) believes that when we refer to ‘age’ we are usually referring to old age as opposed to any other age group. There are negative connotations associated with the word ‘age’ and the ageing process compared with the positive viewpoints usually held about youth (Dean, 1993b). McHugh (2000) believes that many people find it difficult to come to terms with old age because we tend to regard it as something different and foreign (McHugh, 2000).

Saville-Smith (1993) believes that older people have a unique position in New Zealand society. She claims that older people are the only group in New Zealand society who have been able to receive considerable financial support from the government without experiencing any form of stigmatisation or humiliation that other beneficiary groups often suffer (Saville-Smith, 1993). However, whilst Saville-Smith (1993) acknowledges that older people avoid the stigmatisation experienced by other beneficiaries, she also acknowledges that they are excluded from society and discriminated against in other ways. Income maintenance schemes, whilst helping older people to avoid being stuck in paid labour that they are physically unable to handle, also forces them to be excluded from social and economic life (Saville-Smith, 1993). This is especially true for those retiring now as they are likely to have been in the same job or at least the same company for a number of years and therefore have made friends and built up social networks that may decline after retirement. This is not helped by the state’s
response to ageing which, Saville-Smith claims, has helped to define ageing as an illness and has, for the most part, excluded older people from the public sphere. This in turn has contributed in New Zealand’s relatively high rate of institutionalisation (Saville-Smith, 1993).

2.4.1 Dependency ratios

In the past, dependency ratios have been commonly used to classify the aged and have contributed significantly to the stigmatisation of older people. Dependency ratios are simply defined as groups within the population who are not considered to be economically active (younger than 15 and older than 65) divided by those who are considered to be economically active (i.e., aged 15-64) (Dean, 1993a). Therefore it is taken for granted that those over the age of 65 will not be economically active and are therefore dependent on support networks, whether they be state, family, private or informal support networks (Dean, 1993a). This corresponds with the standard model of the life course where the life course is divided into three stages, each associated with a specific built environment, school, work or home:

Under modernism, the second stage, associated with adulthood, productivity and work, was prized above all else. This meant that old age, and the built environments serving it, were devalued and marginalized.

(Laws, 1995: 256)

However, the current law in New Zealand tends to contradict the relevance of dependency ratios and the manner in which they are calculated. As from February 1999 age could no longer be a reason to deny a person employment opportunities, not could a person be forced to retire at any time:

A contract of employment will not be able to stipulate a retirement age, and it may not offer less favourable terms and conditions on employment based on age.

(Prime Ministerial Task Force on Positive Ageing, 1997: 12)

A so-called ‘over-emphasis’ on youth culture and the lack of older role models in the consumer and media markets have created a common perception that older people are generally ill (Prime Ministerial Task Force on Positive Ageing, 1997). Dependency ratios tend to aid this stereotype by categorising older people into a homogenous groups, all of whom are dependent on, and not at all contributing to, society (Burgess, 1991). Dependency is ‘the situation whereby an individual is described (by self or others) as having nothing of value to exchange, that results in the individual being branded as dependent’ (Dean, 1993b: 6). However, there are, as always with this type of definition, differing opinions on what
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constitutes value and productivity. Dependency ratios do not take into account the importance placed on the leadership of kaumatua and kuia within the whanau and iwi structure. Kaumatua and kuia are likely to be above the age of 65 and therefore officially classified as dependent but it is doubtful that members of iwi groups would consider the traditional knowledge and leadership offered by kaumatua and kuia as being without value (Dean, 1993b).

Dependency ratios do not take into account the unpaid work undertaken by many older people. For many families, grandparents are often the first choice of babysitters and many New Zealanders, including the author, have memories of being cared for by their grandparents when their parents had other commitments. For many people retirement occurs at a time when their grandchildren are growing up and many older people wish to spend time with the younger members of their families while they are still relatively active. However, as pointed out in a 2004 editorial in the *New Zealand Listener*, decreasing birth rates mean that this may not be the reality for many older people:

This year [2004] the proportion of people aged 60 or over will surpass the proportion of pre-schoolers. Just when the boomers were getting all geared up for trendy grandparenthood – Goldie Hawn has already coined the term “Glamma” for glam grandmas like herself – there will be precious few babies for most older people to hold.

(Stirling, 2004: 5)

Many older people who are retired find enjoyment and satisfaction in working for charities or community groups on a voluntary basis. These people are often providing services to the older old and the less fortunate. For example, I personally have memories of accompanying both of my sets of grandparents on meals on wheels runs, providing food to the very old. These volunteers are officially seen as being dependent on the state or their families, yet there are probably other people who are more dependent on them than they are on anyone else.

The concept of older people being useful in their volunteer work is not a new idea. This is something Mumford discusses in his 1956 article, ‘For Older People – Not Segregation but Integration’. Mumford believed that older people should be utilised in the community and appreciated for the skills they could provide to others. He uses examples such as gardening, carpentry, babysitting and baking to make the point that older people are capable of providing
services to younger people in the community (Mumford, 1956). Mumford believed that allowing older people to provide services (either paid or voluntary) to the community would serve several purposes. Firstly and most obviously it would provide the community with valuable services. Secondly, it would allow younger people to have interaction with older people. This would be especially valuable to younger people who have limited contact with their own grandparents. Thirdly, and arguably most importantly, this would provide older people with a feeling of value in their own community and allow them to have social engagements with members of younger generations:

To cause the aged to spend all their time glued to a television set is to damn them prematurely to a second childhood. Though these passive amusements have their place in the life of the aged, especially for the crippled and bedridden, there is little reason for reducing their lives as a whole to such a soporific routine. What the aged need is activities: not just hobbies, but the normal participation in the activities of a mixed community.

(Mumford, 1956: 194)

The dependency ratio only takes into account earned income, and does not consider that someone is not necessarily dependent simply because they are no longer active in the paid workforce. Dependency ratios are misleading because they take no account of the contribution that an older person may have made to society and their own communities and families over time (Age Concern New Zealand Incorporated., 2002).

2.4.2 Family support

One of the most pressing issues for older New Zealanders is lack of potential family support in very old age. Family members, especially adult daughters, are still the main source of social and emotional support and physical care for many older people in New Zealand and overseas. Lack of this family support has been proven to lead to institutionalisation of older people (McPherson, 1993) However, McPherson (1993) explores the possibility that this support may be seriously lacking to some cohorts of older New Zealanders. McPherson argues that some cohorts of older women will be particularly affected by a lack of family support. McPherson researched the vulnerability of cohorts born 1897-1961 to establish which cohorts were most likely to experience a lack of family support in old age. It was found that the most vulnerable cohorts were women born between 1897 and 1916, who experienced old age in the 1980s and 1990s and those born since 1942 who will experience old age from 2022 onwards (McPherson, 1993). There are various reasons for the lack of family support which will be experienced by many older women. These include many couples opting for smaller families, having families later in life and the increasing likelihood of women in their
40s and 50s to continue working. McPherson (1993) indicates that these demographic trends and policy changes may have negative effects for the future of care for older New Zealanders:

Policy shifts from state to family provision of care cannot ignore demographic trends which will make this task difficult for families to fulfil. There is also the problem of trying to impose a collective ideology of family responsibility on to generations valuing individualism and self-fulfilment rather than self-sacrifice. Failure to take account of these demographic and ideological shifts is likely to result in failed policy outcomes.

(McPherson, 1993: 90)

McPherson’s argument is supported by Pool (2003) who challenges the conventional view of ageing in New Zealand. Pool claims that traditionally ageing has been viewed as a slow-moving shock which will hit New Zealand within the next decade. However, Pool prefers to view ageing as one part of a highly disordered age-structural transition consisting of different sized cohorts all reaching key life-cycle stages at unbalanced intervals (Pool, 2003). Pool states that policy changes need to move quickly to make the most of those who were born in the ‘baby blip’ (those born circa 1990) who will be entering the workforce around 2011. Pool expresses concern that New Zealand will fail to make the most of this youth bulge, thus missing the knowledge wave and consequently losing membership of what he calls the ‘club of developed countries’ (Pool, 2003). Pool also expresses concern about the effects these changes will have on our wellbeing and on our ageing population:

This review of population waves and especially of disordered cohort effects has generated some results that have major implications for policy, and for our well being. We have entered an era in which changes will be structurally-drive rather than growth-driven, and are going to produce demographic turbulence that will make policy making increasingly difficult. These changes cannot be averted or rolled back – they are inexorable. Moreover, it is not at all evident that policy initiatives in the areas of ageing, the family and human capital are sensitive to these questions.

(Pool, 2003: 36)

2.4.3 Government policy

The New Zealand government has a policy called the *New Zealand Positive Ageing Strategy*. This strategy was launched in 2001 and has ten goals which reflect ‘the wishes of New Zealanders to create a society in which people can age positively’ (Dalziel, 2001b: 3). The goals of the *New Zealand Positive Ageing Strategy* are outlined in Table 1.
Table 1: Goals of the New Zealand Positive Ageing Strategy (Source: Dyson, 2005)

<table>
<thead>
<tr>
<th>Number</th>
<th>Goal</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Secure and adequate income for older people</td>
</tr>
<tr>
<td>2</td>
<td>Equitable, timely, affordable and accessibly health services for older people</td>
</tr>
<tr>
<td>3</td>
<td>Affordable and appropriate housing options for older people</td>
</tr>
<tr>
<td>4</td>
<td>Affordable and accessible transport options for older people</td>
</tr>
<tr>
<td>5</td>
<td>Older people feel safe and secure and can “age in place”</td>
</tr>
<tr>
<td>6</td>
<td>A range of culturally appropriate services allows choices for older people</td>
</tr>
<tr>
<td>7</td>
<td>Older people living in rural communities are not disadvantaged when accessing services</td>
</tr>
<tr>
<td>8</td>
<td>People of all ages have positive attitudes to ageing and older people</td>
</tr>
<tr>
<td>9</td>
<td>Elimination of ageism and the promotion of flexible work options</td>
</tr>
<tr>
<td>10</td>
<td>Increasing opportunities for personal growth and community participation</td>
</tr>
</tbody>
</table>

The New Zealand Positive Ageing Strategy is supported by yearly action plans, outlining which agencies around New Zealand are working towards which goals and how they are doing this.

The New Zealand Positive Ageing Strategy is supported by the Health of Older People Strategy. The Health of Older People Strategy recognises that most older New Zealanders are healthy and independent individuals and very few have a need for extensive care. The strategy aims to develop health and disability support services which are appropriate and responsive to the varied needs of older people:

This approach, the integrated continuum of care, means that an older person is able to access needed services at the right time, in the right place and from the right provider.  

(Dyson, 2002: 3)

In the most recent New Zealand Positive Ageing Strategy Action Plan 109 out of 195 projects concentrate on Goals 3 and 5, indicating that 56 percent of the New Zealand Positive Ageing Strategy is concentrated on ‘ageing in place’ and making it easier for older New Zealanders to remain in their homes for as long as possible.

The promotion, enhancement and maintenance of “independence” and “ageing in place” have been fundamental themes in policy and practice relating to older people in New Zealand for at least the last ten years.  

(Keeling, 1999: 95)
2.6 Housing options for older people in New Zealand

As New Zealand’s population ages, housing for older New Zealanders is becoming an important issue. This section aims to explore the housing options for all New Zealanders as they enter old age. Most older people in New Zealand live independently in their own home which they usually own freehold (Statistics New Zealand, 1998). Very few elderly people live in rented accommodation and the number of older people living in residential care is quite small. Around one quarter of those aged over 85 live in residential care facilities (Statistics New Zealand, 1998). Approximately one third of older people live alone (Statistics New Zealand, 1998).

2.6.1 Living at home

At the time of the 1996 Census the most common living situation for older New Zealanders was living with a spouse or partner. 53.9 percent of elderly respondents identified this as their normal living situation (Statistics New Zealand, 1998). By 2021 the number of people living with a spouse or partner without children is expected to increase by 431,000. 40 percent of this increase will be a result the increase in the number of people aged over 65 (Statistics New Zealand, 2004b).

By 2021, people aged 65 years and over will account for 31 percent of all people living as couples without children, compared with 26 percent in 2001. (Statistics New Zealand, 2004b: 7)

Almost one third of elderly respondents (121,077) identified their normal living situation as living in a one-person household. This was a huge increase from 1966 when only one fifth of older New Zealanders were living in one-person households (Statistics New Zealand, 1998). In the 2001 Census, 333,000 people in total identified that living in a one-person household was their normal living situation. This is projected to increase by 45 percent to 482,000 in 2021. It is expected that people aged over 65 will account for 47 percent of one-person households (Statistics New Zealand, 2004b). Government policy in New Zealand has moved towards a policy of ‘ageing in place’. This policy is aimed at providing assistance to older New Zealanders in their homes and providing access to resources and services in the community so that the elderly can remain independent for as long as possible. This policy is
supported by strategic documents such as the *New Zealand Positive Ageing Strategy* and the *Health of Older People Strategy*. When these two strategies were in the development stages, a working party canvassed issues relating to housing for older people in order to establish where older people wanted to live:

> They found that most older people wish to remain in their homes for as long as possible, and that this should be supported by better integration of housing for older people within the wider community. Housing interventions for older people need to be developed with services that support older people wherever they live.
>
> (Maharey, 2005: 62)

As a result of this, two of the goals outlined in the *New Zealand Positive Ageing Strategy* are aimed specifically at housing needs for older people. Goal 3 provides for ‘affordable and appropriate housing options for older people’ (Dalziel, 2001b: 20) and the key actions for this goal refer to legal protection for those living in retirement villages (Dalziel, 2001b). Goal 5 allows older people to ‘age in place’ (Dalziel, 2001b: 21), which encourages older people to remain in their homes for as long as they can before moving into a care facility. Retirement villages can be seen as assisting the ‘ageing in place’ policy as they allow residents independence for as long as possible.

While the ‘ageing in place’ policy is sensible in theory, the fact remains that as people age their health begins to decline and they are less able to cope with the maintenance required in a large house. This is especially so if the person has recently experienced the death of a partner or spouse. They suddenly find themselves alone in a large house, not able to cope with the maintenance requirements of the house and often in a neighbourhood which is empty during the day when all the other residents go to work or school, and frightening at night:

> So many people continue to live alone, often frightened at night and of the night time when their loneliness is emphasized. The range of domiciliary services meets many needs but not the need to have someone within call at night.
>
> (Dunster, 1986: 234)

The problem with the theory of ‘ageing in place’ is that it forces people to ask which place. It may make sense for the policy makers to provide home care for people in their own homes to prevent them needing residential care but many older people require company more than any type of home help. This company is not limited to company in their own homes and
neighbourhoods but being able to access services in the community. Living independently does not equate with living alone. In order for an older person to live independently they need to have easy access to services and resources so they can enjoy a good quality of life regardless of any age-related illnesses or disabilities they may be suffering (Davey, de Joux, Nana, & Arcus, 2004).

One of the problems associated with older people living at home is the quality of the housing in which they live. One person superannuitant households are among the poorest households in New Zealand and the quality of their housing often reflects this (Howden-Chapman, Signal, & Crane, 1999). These people are more likely to live in older houses in need of refurbishment and this often has detrimental effects on the health of the resident. More than 35 percent of New Zealand’s houses were built before World War II and are often in need of repairs and modern conveniences:

> As housing is the biggest item of household expenditure for low-income older people, older people who are mainly on fixed incomes are particularly affected by the level at which rents are set. Housing costs are the main determinant of how much food is on the table and, when it is cold, whether the heater will be turned on. Some choices can be fatal.
> (Howden-Chapman et al., 1999: 25)

### 2.6.2 Living with family or friends

Another option is to move in with family or friends. While this may seem like an obvious solution to this problem, many older people do not want to be dependent on their children or grandchildren. There are other problems with this solution. The relative’s home may be unsuitable in terms of size, the family may go out to work or school during the day, thus increasing the loneliness during the day. Moving in with family may involve moving away from an area the older person knows as well as moving away from services they know such as the doctor, chemist, clubs or churches (Dunster, 1986). Another problem with this plan is the mix of ages. While most older people love seeing their families often and enjoy sharing their lives, many also freely admit that they could not take the noise and activity involved in living in a household with children and teenagers again (Dunster, 1986).

> Many elderly people do not want to make their home with close relatives or friends, fearing that they might become, or be felt to be, a burden. Some quite honestly admit that they cannot take for long the constant noise and activity of the young or teenage household and that, as much as they love
seeing their families regularly and being involved in aspects of their lives, they would not want to live with them.

(Dunster, 1986: 235)

A small number of older New Zealanders live with family members other than a spouse or partner. At the time of the 1996 Census 76,086 older people stated that they normally live with relatives other than a spouse or partner. This figure is primarily made up of people who live with their children or siblings. (Statistics New Zealand, 1998).

2.6.3 Abbeyfield housing

Abbeyfield housing provides another option for older people who are not ready to go into institutional care. The Abbeyfield concept originated in England in the 1950s and was founded by Richard Carr-Gomm. Carr-Gomm bought a house and invited four lonely older people to live in it with him. The theory was that the residents would contribute towards food, electricity and heating. Carr-Gomm would cook and clean in the house and encourage other neighbours to help as well (Abbeyfield New Zealand, 2005). As the concept grew and became better known, public funds became available and the Abbeyfield Society was registered as a charity in 1957 (Abbeyfield International, 2004). In 1988, in response to overseas interest, Abbeyfield International was formed and there are now Abbeyfield Houses in 16 countries (Abbeyfield International, 2004).

The Abbeyfield concept was introduced in New Zealand in 1991 by Dr Ted Bassett, a GP from Wakefield near Nelson. Bassett recognised that Nelson had an ageing population and traveled to the UK to look for housing solutions for older people. He was introduced to the Abbeyfield concept and helped to establish Abbeyfield New Zealand in 1992 (Abbeyfield New Zealand, 2005). The first Abbeyfield House in New Zealand was opened in Nelson in 1994. This was followed by Masterton in 1996, Whangarei in 2001 and Motueka in 2002. Houses are planned for Golden Bay, Dunedin, Palmerston North, Auckland, Kaeo, Waitangi, Christchurch, Feilding, Hamilton, Queenstown and another house in Nelson (Abbeyfield New Zealand, 2005). Abbeyfield houses are funded by the community and no capital contribution is asked from the residents of the houses (Davey et al., 2004). Residents are selected according to individual needs and suitability, not on financial grounds (Davey et al., 2004).
Although Abbeyfield houses are open to all those above the age of 55 and target widows and widowers above the age of 65, residents in New Zealand’s Abbeyfield houses currently range in age from 70 to 100 (Davey et al., 2004). The success of the Abbeyfield housing concept is attributed to the mix of ages and personalities of the residents (Abbeyfield New Zealand, 2005). Abbeyfield housing is a practical housing option available to older people. However, due to the small number of existing Abbeyfield houses in New Zealand, currently a maximum of 48 older New Zealanders are able to enjoy the benefits of living in an Abbeyfield home. With numerous new houses planned around the country, the Abbeyfield concept has the potential to become an important option for older New Zealanders in the future.

2.6.4 Full time residential care

Another housing option for older New Zealanders is full time residential care. This is most common for people aged 75-84 with 19 percent of men in this age group living with unrelated people compared to 30.8 percent of women (Statistics New Zealand, 1998). Living with unrelated people includes people living in rest homes and living with a caregiver (Statistics New Zealand, 1998). Saville-Smith (1993) discusses the living situations of older New Zealanders:

…a relatively large proportion of older New Zealanders were being systematically excluded from social and economic life by institutionalising them in residential rest homes. By the mid-1970s, 6.2 percent of New Zealand’s older population was in residential care, compared with 4.7 percent in Sweden and 4.3 percent in the United States.

(Saville-Smith, 1993: 76)

At the time of the 1996 Census, 6.3 percent of those aged 65 and over were living with unrelated people. This included only 3.7 percent of the young-old age group (Statistics New Zealand, 1998). In 2001 there were 76,000 New Zealanders living in non-private dwellings or institutions. It is projected that by 2021, this figure will have increased 32 percent to 100,000. It is estimated that 40 percent of New Zealanders living in non-private dwellings in 2021 will be over 80 years old, compared to 28 percent in 2001 (Statistics New Zealand, 2004b).

The retirement village offers a different housing option again for older New Zealanders. As will be discussed in detail in the next two sections, the retirement village offers a supported yet completely independent living option for those aged over 55.
2.7 The Retirement Village Industry

The origins of the retirement village industry as it exists in New Zealand can be traced to England and the USA. Retirement villages are based on the idea of an English village, defined by the *Oxford English Dictionary* as:

A collection of dwelling-houses and other buildings, forming a centre of habitation in a country district; an inhabited place larger than a hamlet and smaller than a town, or having a simpler organization and administration than the latter.

(Del Webb, 2005).

Retirement communities in the United States date back to the 1920s when fraternal, labour and religious organisations such as the Loyal Order of the Moose purchased relatively cheap land in Florida in order to create ‘a supportive living environment for their retiring members’ (Marans, Hunt, & Vakalo, 1984: 59). After World War II private builders began to realise the potential in marketing homes to older people, and retirement communities were developed across America. Despite some scepticism from social critics such as Margaret Mead and Lewis Mumford, who believed that an age homogenous community was unnatural, retirement communities in the United States were very successful:

The proliferation of retirement communities during the 1950s was accompanied by a rash of retirement community research, designed to examine some aspect of life in these residential settings. . . . Reasons given for preferring the age-concentrated environment dealt with the possibilities for association with others, the mutual assistance in time of illness, and the desirability of being in a quiet, child-free setting.

(Marans et al., 1984: 59)

2.7.1 Integration

Lewis Mumford was an urban planner, historian and sociologist and is recognised as one of the greatest urbanists of the 20th century (Del Webb, 2005). Mumford (1956) believed that older people should not be completely separated from the community but should not be completely integrated either. Mumford proposed that the proportion of older people in the population should be kept constant in all communities.
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Mumford claimed that by keeping the proportion of older people in the community consistent with the proportion of older people in the general population, opportunities for paid and unpaid employment for older people in the community would arise, thus allowing older people to feel they are still contributing, and helping them to feel less dependent. These jobs include gardening, babysitting, carpentry and repair work (Mumford, 1956). This would ‘not merely provide older people with new forms of work: it would, even more importantly, give them the human contacts that a more restricted life fails to offer’ (Mumford, 1956: 193). Mumford believed that the institutionalisation of older people could be delayed by changing the structure of the urban environment. He claimed that if the built environment was designed so that older people could access all the amenities they needed without crossing the road, the rates of institutionalisation among the elderly would decline significantly (Mumford, 1956). Interestingly, Mumford suggested a means of transport for older people which would have at the time been considered to be extremely far-fetched but which we now consider to be the norm:

> Someday, when our motor care production is designed to fill varied human needs, rather than the requirements of the assembly line, we will produce electrically-powered rolling chairs for the aged, which can go safely anywhere a pedestrian can go.

(Mumford, 1956: 193)

### 2.7.2 Sun City, USA

One of the most significant retirement village groups in the USA is the Sun City group of retirement villages, developed by the Del Webb Corporation. Using Sun City complexes as an example, Laws (1995) discusses the concept of surveillance in retirement communities. Retirement communities tend to be a place where an outsider is noticed (which is easy given that the age difference between the residents and the visitors is often significant) and watched. Despite Del Webb’s original intentions of Sun City communities being accessible to retirees with modest income, Sun City residents tend to be upper middle class and white:

> This homogeneity ensures that surveillance is real since an emplaced Self and Other is easily established, identified and recognized.

(Laws, 1995: 267)

Sun City retirement communities tend to be racially and ethnically homogenous (Gober, 1985; Laws, 1995). In 1983, there were 25,000 units in Sun City’s Phoenix development.
This included only thirteen black households and forty Hispanic households. The remaining units all housed white people (Gober, 1985: 193).

As would be expected in any age-segregated community, illness and death become relatively normal in Sun City communities.

Sun City Center has its own meals on wheels unit; it has a blood bank; and it has oxygen tanks strategically placed around the town. (FitzGerald, 1986: 243)

FitzGerald (1986) likens death in Sun City to death in wartime. It is expected and it happens to people that the residents know but unless it is their spouse, the deceased is not someone who they have known for a long time (FitzGerald, 1986). However, despite this normalisation of illness and death, Sun City has never had a cemetery. It would be easy to think that this is a design fault. Surely a community which is home to literally thousands of people nearing the end of their lives should have a cemetery. This would make things easier for widows and widowers to visit their departed spouses. However, the developers of Sun City (and other retirement villages) have made a point of keeping graveyards out of the complexes and indeed at some distance.

Not long after Del Webb founded Sun City, Arizona, a speculator bought some land near the development and threatened to turn it into a cemetery. Del Webb bought him out at several times the price he had paid. (FitzGerald, 1986: 244)

Instead, many residents of Sun City communities choose to be cremated and buy spaces in a nearby memorial park. It was even suggested that people establish a feeling of community when they discovered they have purchased spaces near to where other residents have also purchased spaces (FitzGerald, 1986). It appears that providing a cemetery would be a means of reminding the residents of the community that they are nearing the end of their lives. Instead, Sun City’s developers have chosen to encourage their residents to enjoy life while they can.

The creators of Sun City retirement communities have taken extraordinary measures to protect their residents.

The community is surrounded by a nearly continuous line of white six-to-eight-foot-high block walls that give it the air of an oasis. Only a few major
roads pass through Sun City, and most of these are broad, often have a developed median or drainage ditch in the middle, and are usually lined with the ubiquitous walls that protect the residential units from undefined encroachments from the roads.

(Sargent, 1988: 120)

Sargent (1988) is talking about one particular Sun City community, Sun City in Phoenix, Arizona and discusses the variation in housing within the development. When Sun City was first designed small single-family bungalow homes were the only residential options. However, there has been a change in the dwelling type required by residents and in response to these demands, larger homes have been developed:

Variation in housing quality, however, is far less significant that it is in Phoenix. There is no substandard housing in Sun City.

(Sargent, 1988: 120)

2.7.3 The social village

Lewis Mumford would have agreed with the concept of the social village, a village which attempts to integrate generations by providing health and community services within the village (Davey et al., 2004). Davey et al. (2004) provides two examples of social villages, one in Kobe, Japan and one in Raetihi in the central North Island. Shiawase-No-Mura (‘The Village of Happiness’) was a site of temporary relief housing following the Hanshin-Aqaji earthquake in January 1994. However, the older people living there liked the intergenerational atmosphere and petitioned to stay in the temporary housing (Davey et al., 2004). The complex has since been developed and now provides facilities designed to support older people and people with disabilities and to help them to lead independent lives (Davey et al., 2004).

Facilities to promote self-sufficiency and participation in society include a 180 bed rehabilitation hospital and an inpatient/outpatient rehabilitation facility specifically for older people, a dementia care centre, job training for people with disabilities and a day care respite facility for people with severe disabilities living at home.

(Davey et al., 2004: 106)

The Waimarino Elder & Care Village has been established in Raetihi in the central North Island as a result of a partnership between the Waimarino Rest Home Trust and Presbyterian Support (Central). Originally, the Waimarino Rest Home Trust intended to establish a rest home. However, recent government policy has focussed on ‘ageing in place’ and capital funding for rest home development was withdrawn. When Presbyterian Support became involved the decision was made to create a social village. Community support was secured
through ongoing consultation with the District Health Board, local iwi and community, national-level care providers and the local council (Davey et al., 2004). At present the Waimarino Elder & Care Village is a residential village housing 14 residents. When it is complete it will provide accommodation for 20 to 28 older people. The village’s community centre will provide care and services for residents in the village as well as members of the Raetihi and Ohukune communities:

The vision for the Elder & Care Village is that it will allow the district’s elders to remain safely in the community in an environment where they will be cared for, where they will be stimulated, and where they will be able to maintain social contacts they have established through living and working in the district. The village combines housing and care needs, and provides a model for ‘ageing in place’ in more remote communities.

(Davey et al., 2004: 108)

While the social village concept is an interesting idea to assist older people to ‘age in place’, especially in rural communities, this model is not widely used in New Zealand. Most of New Zealand’s retirement villages are private organisations owned either by commercial enterprises or by charitable trusts. The retirement village industry in New Zealand is detailed in the following section.

2.7.4 The Japanese retirement village

In addition to the social village described above, communal living arrangements such as retirement villages are proving to be a population living option for older people in Japan (Burgess, 1991). Migita, Yanagi and Tomura (2005) discuss the concept of the ‘Silver Peer Housing Project’ – a scheme launched in 1987 by Japanese local and central governments to provide independent older Japanese people with communal living facilities.

Residents moving into a Silver Peer Housing Facility must be 65 years or older, currently living alone or as a couple, and currently living independently, and must have an income less that 122,000 yen/month for singles or 184,000 yen/month for couples.

(Migita et al., 2005: 2)

Silver Peer Housing Facilities must have a warden, an emergency information system, shared communal spaces, barrier-free concepts and good connections with services (Migita et al., 2005). This concept has been proven to be very popular and in 1998 there were approximately 7500 Silver Peer units in metropolitan Tokyo (Migita et al., 2005).
2.8 New Zealand’s Retirement Village Industry

With New Zealand’s ageing population, the retirement village has experienced a dramatic transformation in recent years. When Melanie Burgess conducted research for her Masters thesis in 1991, there were 21 villages in the Auckland region (Burgess, 1991). There are now at least 58 villages in the Auckland region, nearly trebling the 1991 figure. All of the villages in Burgess’ 1991 study still exist, although some have changed slightly in terms of operation and ownership. Auckland is home to New Zealand’s largest concentration of retirement villages, with 22 percent of retirement villages being located in Auckland in 2001. Auckland is followed by Christchurch (18 percent) and the Bay of Plenty region (10 percent) (Mansvelt, 2001).

2.8.1 The early days

The retirement village industry in New Zealand began with charitable trusts establishing facilities for low-income elderly people. These were often church groups or societies such as the Freemasons. One of the first retirement villages in Auckland, Selwyn Village in Point Chevalier, was established by the Selwyn Foundation, the aged care component of the Anglican Social Services for the Diocese of Auckland.

Most of the original retirement villages in New Zealand have changed dramatically and moved away from the church system.

> Often these developments are now largely self funding and are owned by autonomous trust boards who manage them independently from church interests. (Burgess, 1991: 54)

Selwyn Village is unique in the sense that it has not moved away from the original church foundations. Although the village accepts residents from all faiths, it is still operated very much on Christian principles. The village’s mission statement is “to provide quality Christian care and support for the elderly” (Selwyn Foundation, 2005) and many of their values and philosophies are based on Christian principles.

The Selwyn Foundation is the largest-not-for profit aged care provider in New Zealand and is significant in size even when compared to the private and listed operators (Scoop Independent
Selwyn Village remains one of Auckland’s largest retirement villages and shows no signs of selling or closing. Perhaps the village’s commitment to Christian care has contributed to its longevity by operating on a charitable basis and not being obligated to providing a profit to any shareholders. Another factor possibly contributing to Selwyn Village operating for such a long period of time may be that Selwyn Village is one of the few facilities to offer all degrees of care. The village has both licence to occupy units and townhouses (most retirement villages operate under a licence to occupy arrangement) and cottages available to rent. Selwyn Village also offers rest home and hospital care as well as care for older people with dementia (Selwyn Foundation, 2005). This is particularly significant as it appears that dementia is the one condition that many retirement village operators are not prepared to deal with. Most village managers, when asked if they have a screening process for residents, answered that they look for dementia patients.

The Selwyn Foundation does not only operate Selwyn Village in Point Chevalier. They also operate Selwyn Oaks in Papakura, Selwyn Park in Whangarei and Selwyn Cottages in Birkenhead and are acquiring additional aged care facilities at a rate of one per month (D. Macdonald, pers. comm., 5 October 2005).

2.8.2 The first resident funded retirement villages

While early retirement villages were based on the principle of providing a service to low-income elderly people, those who could afford to pay were not excluded.

The church-developed villages were intended to assist the needy elderly but this did not exclude those who were asset-rich with the ability to contribute substantial funds for their care. Often these residents chose to contribute funds either as donations or gifts at death but there was no compulsion.

(Burgess, 1991: 54)

In the 1970s, it became apparent that there was a market for retirement village care for those who were able to pay for it. Such villages were established in the early 1970s, mainly by people from within the surrounding community (Burgess, 1991). The first purpose built private retirement villages were opened in the 1980s (Mansvelt, 2003). Initially these villages provided simply for those who could afford to buy a unit. However, they soon realised that there was a demand for a more lavish style of accommodation. Developments then moved from catering for those who could afford to pay for a unit to those who could afford to pay a lot for a unit (Simmons, 1986). These villages were different from the trust-developed
villages. The facilities offered and the style of accommodation provided changed from catering for people who were growing older, frailer and nearing the end of their lives to providing a lifestyle for the young-old (Simmons, 1986). Laws (1995) supports this in her analysis of Sun City communities in the USA’s ‘sun belt’ states of California, Arizona, Nevada and Florida. Sun City communities are designed to provide resort-like lifestyles but while they are meant to allow the residents to escape from reality, they do not appear to allow residents to relax too much:

The dominant theme is leisure, but it is a busy leisure – just like a day at Disneyland.

(Laws, 1995: 268)

While Simmons (1986) and Laws (1995) are talking about retirement villages in Australia and the USA, the same is true in New Zealand. Many of the trust owned villages have a focus on caring for frailer older people and their advertising reflects this. However, many of the privately developed villages market themselves towards the young old, those aged 55 and upwards. Images in advertising and on the websites of these villages reflect this. Many of the websites show young looking old people enjoying a variety of leisure activities. Websites and advertising appear to be attempting to make retirement village lifestyle as much as holiday lifestyle as possible. Many websites emphasis the ‘resort’ like qualities of their retirement village and have photos which reflect this. Lucas (2004) claims that the resort villages are making the most of the fact that positive ageing has become synonymous with the continued acquisition of material possessions:

The aging industry and the discovery of the potential profits to be earned from exploiting the mature market have produced the close association of successful aging with the continual attainment of material possessions.

(Lucas, 2004: 457)

2.8.3 Recent developments

Thornton (2000) points out that the international retirement village industry has grown immensely in the past two decades as a result of ageing population, changes in family structures and older people needing security and support without the health and personal care services associated with rest homes (Thornton, 2000). In recent years, many trust owned villages have been sold or taken over by commercial operations. The most recent of these was the Roskill Masonic Village in Mount Roskill. Roskill Masonic Village was purchased by the Selwyn Foundation for an undisclosed sum in September this year. Paul Heeney, the CEO of
Roskill Masonic Village released a statement outlining the reasons for the Freemasons to sell Roskill Masonic Village. The primary reason Heeney gives for selling is financial, stating that the village had been operating at a loss for some time and was only able to continue operating through donations and investments:

A recent industry study shows that increases of between 10 percent and 25 percent are required to restore prices to a viable level. … Most operators are struggling to cover day-to-day operating costs, let alone to get a return on capital.

(Heeney, 2005)

Heeney also cites lack of funding and staff shortages as reasons for the Freemasons to sell up. Many operators of retirement villages cite staff shortages as a serious issue, especially in the rest home part of their operation. Most speak of increased wages in the public sector leading to difficulties in getting quality registered nurses in the private sector. Heeney claims that the retirement village industry needs a coherent workforce development strategy. Without this the industry has had to rely on health professionals from overseas whose:

… language and/or clinical skills may not meet our requirement. Meanwhile, NZ-trained health professionals continue to head overseas in droves, in search of better returns on their skills

(Heeney, 2005).

Staffing in the actual retirement village does not seem to be an issue as few retirement villages have trained dedicated staff. Often retirement villages will have registered nurses associated with them, often primarily involved with the rest home or hospital part of the retirement village but also answering emergency call outs from the retirement village.

The sale of the Roskill Masonic Village has however bucked at least one trend. Many trust operated aged care facilities which are sold because they are operating at a loss are sold to commercial operations. For example, Australian owned company Eldercare (owned in turn by Australia’s Macquarie Bank) recently purchased all eleven of the Salvation Army’s rest homes (Collins, 2005b). Corporate buyers have also bought homes from charities such as the Methodist Mission Northern and Presbyterian Support in Auckland and the northern South Island. Both the Methodist Mission and Presbyterian Support say they could not continue operating with the levels of loss they were experiencing (Collins, 2005b).
Roskill Masonic Village has however been purchased by another charitable trust, the Selwyn Foundation, in an unconditional deal which is due for settlement on November 1, 2005 (Scoop Independent News, 2005). It is interesting that the Selwyn Foundation has been operating for as long as it has and can not only afford to continue operating but to buy new operations as well. Rev. Duncan Macdonald, CEO of the Selwyn Foundation has stated that the Selwyn Foundation has owned are large amount of land around the Auckland region for many years and the returns on these property investments have allowed the Selwyn Foundation to start putting more money into their aged care facilities. Macdonald has said that it is likely that new facilities will be added to the Roskill Masonic Village (Scoop Independent News, 2005).

2.9 Conclusions

Although retirement villages have existed in New Zealand since the 1950s, we have to remember that our population is ageing, not aged and therefore the aged care industry is still growing. As ‘ageing in place’ becomes a more widespread phenomenon, those involved in the aged care industry are becoming more creative in the services that they offer. The aged care industry is not simply composed of housing for older people. This industry includes businesses providing a diverse range of services ranging from maintenance and home help to caring callers and emergency call alarms. The baby boomers are yet to hit retirement and therefore are yet to have a serious impact on the aged care industry. As the minimum age for entry into most retirement villages is 55, some baby boomers are already living in retirement villages. However, the first of the baby boomers will not reach retirement age until 2010 and probably will not start needing aged care facilities until some time after that. Most retirement village operators are experiencing huge demand for accommodation in their villages, with one village reporting a wait of up to ten years for a two bedroom apartment. This indicates that the retirement village industry is still experiencing growth, despite the government’s policy of ‘ageing in place’.

As the population ages, the government is creating policies to make the population’s ageing process easier and essentially cheaper by implementing ‘ageing in place’ policies and delaying the necessity for older people to move into residential care facilities. Approximately five percent of older New Zealanders live in retirement villages. However, they remain a
significant housing option for older New Zealanders and, given their size and often distinctive appearance, they are one of the more visible accommodation options for older New Zealanders.
Chapter Three
Governance

The New Zealand Positive Ageing Strategy reinforces Government’s commitment to promote the value and participation of older people in communities. Older people are important members of society and have the right to be afforded dignity in their senior years. They have skills, knowledge and experience to contribute to society, and the expected growth in the proportion of older people during the coming decades will provide New Zealand with a valuable resource. Further, continued participation in older age has benefits for the individual concerned, the community and the country as a whole.

(Dalziel, 2001a: 6)

3.1 Introduction

Policy relating to New Zealand’s ageing population has turned in recent times to a policy of ‘ageing in place’. This policy has focused on providing older people with access to services and resources in the community so they do not have to move out of their own home before absolutely necessary. Moreover, it has seen a decrease in the amount of government funding available to both new and established rest homes and retirement villages and has resulted in some facilities falling on hard times and thus selling their operations. This in turn caused an increase in the number of businesses starting up to provide services to older people in their own homes. This chapter analyses governmental and non-governmental policies and agencies affecting older New Zealanders with a focus on the policies affecting those older New Zealanders living in retirement villages. It begins with an overview of the New Zealand Positive Ageing Strategy. This moves naturally into a discussion of the Health of Older People Strategy, a joint Ministry of Health and Ministry of Disability Issues strategy which operates within the New Zealand Positive Ageing Strategy. A brief discussion about Building the Future: The New Zealand Housing Strategy follows and its relevance to older people and housing is considered. The chapter then shifts focus from discussions about ageing to discussions about retirement villages, starting with analysis of the Retirement Villages Act 2003, before moving to a discussion about the Retirement Villages Association. The chapter
concludes with a brief overview of the policies relating to retirement village accommodation in New Zealand.

### 3.2 The New Zealand Positive Ageing Strategy

First released in April 2001, the *New Zealand Positive Ageing Strategy* (NZPAS) aims to provide a framework under which policies affecting older people can be easily understood. NZPAS aspires to identify barriers which older people face when attempting to participate in the community. By working with a variety of community groups, NZPAS endeavours to improve the opportunities for older people to participate in the community however they may choose, while considering the needs of younger and future generations as well as older people (Dalziel, 2001a). NZPAS involves many government ministries and departments, from rather obvious inclusions such as the Ministry of Health and the Office for Senior Citizens to more surprising inclusions such as the Department of Labour and the Ministries of Justice and Education. By involving 26 government portfolios from the very beginning the Office of Senior Citizens is acknowledging the importance of New Zealand’s ageing population. NZPAS also includes non-governmental organisations such as the Fire Service, Archives New Zealand, New Zealand Artificial Limb Board and the Land Transport Safety Authority to name but a few. By including so many different groups and organisations the developers of NZPAS are recognising that an inclusive and holistic approach is required when dealing with ageing in New Zealand.

Both the *New Zealand Positive Ageing Strategy* and the yearly action plans which support it, have focused on the policy of ‘ageing in place’, a policy adopted by the New Zealand government as well as many other governments and other organisations such as the Organisation for Economic Co-operation and Development (OECD) (Davey et al., 2004). The fifth goal of NZPAS is to encourage ‘ageing in place’ by helping older people to feel safe and secure in their homes (Dalziel, 2001a). While this is the only one of the ten goals in NZPAS which specifically encourages ‘ageing in place’ most of the other goals are intended to support New Zealanders in old age and to help them ‘age in place’. The goals, as outlined in Chapter 2, include issues such as income, health, housing, transport and accessibility to services, cultural diversity, opportunities for older people living in rural areas, perceptions and attitudes towards ageing and older people, ageism and flexible employment options and
opportunities for community involvement (Dalziel, 2001a). By including issues which are relevant not only to older New Zealanders but to all New Zealanders, the New Zealand Positive Ageing Strategy discourages younger New Zealanders from considering ageing as something foreign and different. The New Zealand Positive Ageing Strategy deals with issues which all New Zealanders have to deal with in their everyday lives. This helps younger people to realise that the issues older people face are not so different to those faced by the rest of the population (Dalziel, 2001a).

The concept of ‘ageing in place’ is not purely a government policy. As the population grows older, New Zealand is seeing an increase in the number of companies and firms specialising in promoting services to older New Zealanders in their homes. This includes maintenance services such as lawn-mowing, gardening, cleaning and caring caller services as well as emergency call alarms which can be activated as soon as an older person experiences a fall or a home invasion. Indeed, churches and charitable organisations such as the Red Cross have been providing services such as Meals on Wheels to older people for many years.

An important part of NZPAS is the inclusion of a changing of attitudes relating to older people. Goal eight of NZPAS is for ‘People of all ages [to] have positive attitudes to ageing and older people’ (Dyson, 2005: 3). This will help younger generations to think of ageing as a positive part of life and to realise that an ageing population is an opportunity, not a problem. This will in turn help older people to accept and enjoy the ageing process.

NZPAS has several other strategies which operate within it. One such strategy is the Health of Older People Strategy.

3.3 The Health of Older People Strategy

The Health of Older People Strategy (HOPS) was launched in April 2002 by the then Minister for Disability Issues and Associate Minister of Health, Hon. Ruth Dyson. The vision for HOPS is to create a society where:
Older people participate to their fullest ability in decisions about their health and wellbeing and in family, whānau and community life. They are supported in this by co-ordinated and responsive health and disability support programmes.

(Dyson, 2002: 1)

HOPS recognises that the majority of older New Zealanders are fit and healthy individuals and most do not require large amounts of care and support. However, in the past, health and disability support for older New Zealanders has been provided in a piecemeal fashion, resulting inevitably in gaps and overlaps in provision of services. This approach causes confusion for older people and their carers and means that the improvement of quality of life for many older people is delayed.

Particularly for frail older people, the way health and disability support services are provided is a key component of their quality of life. To recognise this, services need to develop to support ageing in place – offering people the opportunity to continue to live safely in their community. This includes appropriate treatment for acute episodes of ill health, rehabilitation to support recovery, and ongoing support for people who are disabled.

(Dyson, 2002: 3)

HOPS supports NZPAS in promoting the option of ‘ageing in place’ to older New Zealanders.

The development of HOPS is a key action in NZPAS. The New Zealand Positive Ageing Strategy, the New Zealand Health Strategy, and the New Zealand Disability Strategy are the overarching strategies which guide the Health of Older People Strategy. The Health of Older People Strategy is linked with five other strategies administered by the Ministry of Health. The Primary Health Care Strategy, the Mental Health Strategy and the New Zealand Palliative Care Strategy are all service based strategies. The Pacific Health and Disability Action Plan is both a service and population based strategy while the Māori Health Strategy (He Korowai Oranga) is a population based strategy (Dyson, 2002).

HOPS has eight main objectives. The strategy states that unless change is implemented in all eight objectives it will be impossible for the vision of the strategy to be achieved (Dyson, 2002). The eight objectives are shown in Table 2.
Table 2: Objectives of the *Health of Older People Strategy* (Source: Dyson, 2002)

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<tbody>
<tr>
<td>1.</td>
<td>Older people, their families and whānau are able to make well-informed choices about options for healthy living, health care and/or disability support needs</td>
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<tr>
<td>2.</td>
<td>Policy and service planning will support quality health and disability support programmes integrated around the needs of older people</td>
</tr>
<tr>
<td>3.</td>
<td>Funding and services delivery will promote timely access to quality integrated health and disability support services for older people, family, whānau and carers</td>
</tr>
<tr>
<td>4.</td>
<td>The health and disability support needs of older Māori and their whānau will be met by appropriate, integrated health care and disability support services</td>
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<tr>
<td>5.</td>
<td>Population-based health initiatives and programmes will promote health and wellbeing in older age</td>
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<tr>
<td>6.</td>
<td>Older people will have timely access to primary and community health services that proactively improve and maintain their health and functioning</td>
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<tr>
<td>7.</td>
<td>Admission to general hospital services will be integrated with any community-based care and support that an older person requires</td>
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<tr>
<td>8.</td>
<td>Older people with high and complex health and disability support needs will have access to flexible, timely and co-ordinated services and living options that take account of family and whānau carer needs</td>
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Like the *New Zealand Positive Ageing Strategy*, the *Health of Older People Strategy* takes an inter-departmental approach, recognising that the health issues which older New Zealanders face can not be solved by the Ministry of Health alone. Implementation of the strategy involves input from various organisations including the Ministry of Health, the Ministry of Social Development and District Health Boards around the country (Dyson, 2002).

While the *New Zealand Positive Ageing Strategy* and the *Health of Older People Strategy* are the primary government strategies affecting the health and wellbeing of older New Zealanders, the ageing population means that it is necessary for many strategies which are not directly related to older people to have a provision for older New Zealanders. There is not enough space or time in this thesis to discuss each and every strategy which will have effects on older New Zealanders and the ageing population. However, one strategy which is particularly relevant for the purposes of this thesis is *Building the Future: The New Zealand Housing Strategy*. 
3.4 Building the Future: The New Zealand Housing Strategy

The New Zealand Housing Strategy (NZHS) was launched in May 2005 by Steve Maharey, the then Minister of Housing. This strategy impacts on all New Zealanders and has a vision that:

All New Zealanders have access to affordable, sustainable, good quality housing appropriate to their needs.

(Maharey, 2005: 7)

NZHS recognises that the ageing population is one of the many driving forces changing housing needs in New Zealand. This strategy supports the ‘ageing in place’ policy implemented by the *New Zealand Positive Ageing Strategy* and the *Health of Older People Strategy*.

Housing issues for older people were canvassed in forums related to the development of the Positive Ageing Strategy 2001, the Health of Older People Strategy, and the Older Person’s Working Party’s report for the New Zealand Housing Strategy. They found that most older people wish to remain in their homes for as long as possible, and that this should be supported by better integration of housing for older people within the wider community.

(Maharey, 2005: 62)

NZHS outlines two primary initiatives and six supporting initiatives aimed at assisting older New Zealanders with issues relating to housing. These initiatives are outlined in Table 3. NZHS appears to support ‘ageing in place’ by promoting increased use of social housing ideas. Social housing can be taken to mean that informal arrangements which may involve a communal housing experience for older people, not unlike flatting. Groups of older people are already choosing informal living arrangements with others their age instead of moving into residential care facilities. One such example is a group of older sisters living together in Stokes Valley:

Four Stokes Valley sisters, aged 78 to 86, are fast attracting notoriety for their own take on a First Wives’ Club – a communal living arrangement. … The arrangement also meant they no longer suffered the loneliness of living by themselves or feared for their safety at night. They encouraged other elderly people to consider flatting with friends.

(Nichols, 2005)
Table 3: Initiatives of *Building the Future: The New Zealand Housing Strategy* (Source: Maharey, 2005)

<table>
<thead>
<tr>
<th>Primary Initiatives</th>
<th>Supporting Initiatives</th>
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<tr>
<td>1. Develop ways to enhance tenure security and support ageing in place, whether in</td>
<td>1. Develop low-cost communal and supported housing arrangements for older people,</td>
</tr>
<tr>
<td>homeownership, private rental or social housing</td>
<td>including promoting the development of marae-based kaumatua housing</td>
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<tr>
<td>2. Promote the use of universal design principles in state and private sector housing</td>
<td>2. Continue to develop social housing options for older people, particularly in</td>
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<td>suitable for older people</td>
<td>partnership with local authorities and third sector providers</td>
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<td></td>
<td>3. Develop and implement responses to concerns about the quality of many existing</td>
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<td></td>
<td>owner-occupied and rental houses, including home improvement assistance and energy</td>
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<td></td>
<td>efficiency initiatives, to support ageing in place</td>
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<tr>
<td></td>
<td>4. Provide increased case management services for frail older people with associated</td>
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<tr>
<td></td>
<td>complex housing needs</td>
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<td></td>
<td>5. Support and protect older people on low and fixed incomes by reviewing the Rates</td>
</tr>
<tr>
<td></td>
<td>Rebate Scheme and implementing the Retirement Villages Act 2003</td>
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<tr>
<td></td>
<td>6. Undertake research into older people and housing in areas such as: design for</td>
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<td></td>
<td>older people’s housing; factors influencing older people’s ability and desire to</td>
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<td></td>
<td>relocate; factors influencing future demand for residential care; and different</td>
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<td></td>
<td>housing models for older people</td>
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NZHS also makes the point that the increasing proportions of older New Zealanders are helping to contribute to the change in the composition of the rental housing sector in New Zealand. This, coupled with rising university fees, student debt and property prices have all contributed to the transformation of the rental housing sector:

Over the last 10 years, the characteristics and circumstances of those who rent have changed. Proportionally fewer young people are flatting away from home, more older people and families are renting, and there is greater cultural diversity within the renting population that corresponds to the changing nature of the population.

(Maharey, 2005: 37)

While older New Zealanders are by no means the only or most important group taken into consideration in NZHS, all changes in the population composition have significant effects on housing demands and the resulting policies. There can be no doubt that New Zealand is experiencing a significant change in the make-up of the population and older New Zealanders are contributing to this change dramatically.
As the proportion of New Zealanders aged over 65 grows, legislation relating directly to older New Zealanders is becoming increasingly prevalent. One such piece of legislation is the Retirement Villages Act 2003.

3.5 The Retirement Villages Act 2003

Passed in October 2003, the Retirement Villages Act\(^1\) was introduced in order to strengthen the legal protections provided for residents and potential residents of retirement villages and to regulate and monitor operators of retirement villages (Department of Building and Housing, 2005). Previously, there were few protections in place for residents of retirement villages and if, for some reason, a resident needed or wanted to leave the village they could be seriously financially disadvantaged:

> They put what was often their life savings into this new accommodation and yet in the event of something major happening or even if the services were not at a required standard, unless the village belonged to the Retirement Village voluntary code of practice, people could lose out heavily. … The problem that may result is that the residents may not then have the financial ability to make another move.

(Leonard, 2004: 7)

The Act will replace any obligations retirement village operators have under the Securities Act 1978 (Department of Building and Housing, 2005). Parts of the Act came into force in February 2005 and the remainder will come into force in March 2006. The Act was originally administered by the Ministry of Social Development and the Ministry of Economic Development. However, on 1 July 2005 responsibility for the administration of the Act was assumed by the Department of Building and Housing (Retirement Commission, 2005b).

3.5.1 Key points of the Retirement Villages Act 2003

The Act has six key points. Section 12 of the Act states that retirement villages must be registered with the Registrar of Retirement Villages (Retirement Villages Act, 2003). In order to become registered the operator of the village must provide key documents including the “disclosure statement” given to all intending residents and the “occupation right agreement” –

\(^1\) Hereafter referred to as the Act
the contract entered into with all residents. They must also provide the Registrar with annual returns and audited financial statements, both of which will be public information (Retirement Commission, 2005a). Section 11 of the Act makes the point that registration of a retirement village does not imply that the Registrar or the Crown approves of the village and its operations (Retirement Villages Act, 2003).

Section 38 of the Act states that all retirement villages must have a statutory supervisor approved by the Registrar (Retirement Villages Act, 2003). A statutory supervisor is an independent organisation or individual who monitors the financial position and operation of the retirement village. Operators must enter into a “deed of supervision” with their statutory supervisor. The statutory supervisor is also someone to whom residents can go if they believe there has been a breach of the Code of Residents’ Rights (Retirement Commission, 2005a).

Intending residents of retirement villages are protected by the Act in several ways. Under the Act, all advertising must be accurate and non-registered villages are prevented from advertising. Operators are required under the Act to provide intending residents with copies of the occupation right agreement, the disclosure statement, the retirement village Code of Practice (when complete) and the Code of Residents’ Rights (Retirement Commission, 2005a). The Act also requires all intending residents to seek independent legal advice before entering a retirement village and allows a 15-working-day “cooling off” period after they have signed the agreement during which they are able to change their minds (Retirement Commission, 2005a).

Existing residents are also protecting under the Act. Operators and managers are legally obliged under the Act to keep residents informed and to consult them about matters that may affect them. The Act also allows for residents to avoid signing an agreement if some conditions were breached before signing. Complaints and disputes procedures are provided by the Act, as is protocol to be followed when a resident leaves and if the village gets into financial difficulty or is sold (Retirement Commission, 2005a). All existing residents of retirement villages must be given a copy of the disclosure statement by March 2007, one year after the Retirement Villages Act is fully enforced (Retirement Commission, 2005a).
There are two documents provided by the Act designed for the protection of retirement village residents and intending residents. Section 32 of the Act requires all retirement villages to have a Code of Residents’ Rights. The Code of Residents’ Rights provides a summary of the minimum rights residents have under the Act. The retirement village operator must provide all intending residents with a copy of the Code of Residents’ Rights before the intending resident enters into an Occupation Right Agreement. A copy of the Code of Residents’ Rights must also be given to existing residents (or his or her representative) if requested (Retirement Villages Act, 2003).

Still in the draft stages, the second document designed for the protection of retirement village residents is the Code of Practice. When the Act is fully implemented, the retirement villages’ Code of Practice will set out the minimum requirements for the operation of a retirement village (Retirement Commission, 2005a). In August 2005 Diana Crossan, the Retirement Commissioner, reported her recommendations on the Draft Code of Practice to Hon. Chris Carter, then Minister for Building Issues. The Draft Code of Practice was drawn up with contributions from the Retirement Villages Association and submissions from the public and other interested parties. It is expected that the Minister for Building Issues will approve a Code of Practice later in 2005 and the Act will be fully enforced in March 2006. The Code of Practice will cover ten topics, including staffing, resident involvement, complaints, communication, safety, security and maintenance (Retirement Commission, 2005b).

3.5.2 Roles under the Retirement Villages Act 2003

There are five main statutory roles under the Retirement Villages Act. The Registrar of Retirement Villages is the Registrar of Companies in the Companies Office in the Ministry of Economic Development. The Registrar of Retirement Villages is responsible for the registration of retirement villages and maintaining the register. The Registrar approves statutory supervisors and notifies the Registrar-General of Lands when a retirement village is registered or an order for a “memorial” is to be placed on the village titles (Retirement Commission, 2005a).

The Registrar-General of Land must note on every certificate of title or computer register relating to a registered retirement village the words “Subject to section 22 of the Retirement Villages Act 2003 (which provides
priority for the rights of residents ahead of the rights of holders of security interests)”.

(Retirement Villages Act, 2003: Section 21)

Section 22 of the Act states that placing a “memorial” on the title of a registered retirement village will restrict the changes an operator can make to the village. If there is a “memorial” on the village, operators must have the written consent of at least 90 percent of their residents before they are able to dispose of the villages as anything other than a going concern, disclaim occupation right agreements or evict or exclude any residents. All residents giving consent must have received independent legal advice prior to giving their consent (Retirement Villages Act, 2003). The Registrar is also responsible for monitoring compliance with both the Retirement Villages Act and the Financial Reporting Act 1993 and for receiving complaints from residents about breaches of the Code of Residents’ Rights (Retirement Commission, 2005a). The Registrar has the power to suspend a village’s registration; to exempt a village from the requirement to have a statutory supervisor; to exempt a village from any provision in the Code of Practice; and to inspect and retain any documents (Retirement Commission, 2005a).

The Retirement Commissioner, currently Diana Crossan, is an independent civil servant who has the power to obtain any information she requires from retirement village operators and auditors of retirement villages (Retirement Commission, 2005a). The Retirement Commissioner has seven main responsibilities under the Retirement Villages Act (Retirement Commission, 2005a). These are shown in Table 4.

Table 4: Roles of the Retirement Commissioner under the Retirement Villages Act (Sources: Retirement Commission, 2005a; Retirement Villages Act, 2003)

| 1. Monitoring the effects of the Act, its regulations and the Code of Practice. |
| 2. Advising the Minister for Building Issues on issues relating to retirement villages when requested by the Minister or when required to do so under the Act. |
| 3. Promoting education about retirement villages and publishing information on retirement village issues. |
| 4. Collecting and publishing information on the functions of the Retirement Commission under the Act. |
| 5. Approving people who operators appoint as members of disputes panels and collecting the decisions made by disputes panels. |
| 6. Seeking submissions on a draft Code of Practice and making recommendations on this to the Minister. |
| 7. Receiving complaints from residents of retirement villages about breaches of the Code of Residents’ Rights. |
The Registrar-General of Land is responsible for placing ‘memorials’ on the titles of registered villages. This prevents operators of villages from making any major changes to the operation of the village as detailed above. The Registrar-General of Land also has the power to remove “memorials” in some circumstances (Retirement Commission, 2005a).

The Retirement Villages Act is administered by the Department of Building and Housing. The Department resumed responsibility for the Retirement Villages Act in July 2005. Prior to July 2005 the Retirement Villages Act was administered by the Ministry of Social Development (Department of Building and Housing, 2005). The Minister for Building Issues (currently Clayton Cosgrove) is responsible for approving a Code of Practice which will apply to all retirement villages (Retirement Commission, 2005a).

3.5.3 The impacts of the Retirement Villages Act 2003

Many of the operators of retirement villages indicate that they don’t believe the Retirement Villages Act will have a great impact on the way they operate. Many believe that the Retirement Villages Act will have a greater affect on other operators than themselves.

It won’t make any difference to us. We will have to update our documentation to meet the new criteria but everything that we do currently meets the criteria anyway, it’s just the wording of the documentation that needs to be changed. And it’s time for a change, our documents are very old and there’s a lot of duplication in them so they need a tidy up. So that’s about all that will change for us but other villages, yes it will make a huge difference.

(Helen, pers. comm., 14 June 2005)

Only time will tell what the long term effects of the Retirement Villages Act will be. It has been suggested, by Helen (above) and many others that the Retirement Villages Act will have a phenomenal effect on some operators and even force some operators out of the business:

Some suggest that enforcement of the Act will cut out some operators. If this means it is cutting out the ‘cowboys’ then it is a good step. If it means only some players are left then time will tell whether it will affect services to clients.

(Leonard, 2004: 8)
Many have a belief that because they are already members of the Retirement Villages Association, they already have completed most of the necessary documentation and will only need to update their records rather than create new documents from scratch. Petrina Turner, Executive Director of the Retirement Villages Association said that the Retirement Villages Association would argue that retirement villages which are already members of the Retirement Villages Association would find it easier to comply with the Retirement Villages Act. Turner also stated that since the Retirement Villages Act has been implemented many villages have joined the Retirement Villages Association to make it easier for them to comply (P. Turner, pers. comm., 23 June 2005).

3.6 The Retirement Villages Association

The Retirement Villages Association is the national body that represents retirement villages. The Retirement Villages Association has five key areas of work which are shown in Table 5.

| 1. Lobbying and informing government on development of policy and legislation likely to impact upon the retirement village industry. |
| 2. Hosting an annual conference to allow members to network and discuss new innovations in the industry. |
| 3. Providing assistance to member villages to help them comply with the Retirement Villages Act. |
| 4. Publishing *Retirement Views*, a bi-monthly magazine providing news about the sector to all members and associate members as well as Government officials and stakeholder groups. |
| 5. Using the membership of the association for bulk purchasing of goods and services thus helping members to save money. |

The Retirement Villages Association currently represents 179 retirement villages and has 68 associate members who are individuals or commercial organisations with a vested interest in the retirement village industry. Associate members include lawyers, accountants, auditors, valuers, architects, furniture providers and providers of medical equipment (Retirement Villages Association of NZ, 2005). It is believed that the Retirement Village Association currently represents approximately 60 percent of the retirement villages operating in New Zealand:
We don’t know until registration is complete how many exactly there are but we work on the basis that there are 300-320 and 160 are members. Pretty much just over half the operators and about 65 percent of the units, the residents are represented by RVA villages. The five biggest villages in the country, the five biggest chains are all members so the vast majority of non-member villages, we believe, are quite small or we would know about them or have heard of them. So we think the ones that are left are probably predominantly rest homes which might have a few units out the back which under the Act are retirement villages.

(P. Turner, pers. comm., 23 June 2005)

The Retirement Villages Association has for many years had a Code of Practice included in their minimum operating standards which all their member villages have to comply with. The Code of Practice in the Retirement Villages Act is the original Code of Practice submitted to government by the Retirement Villages Association (P. Turner, pers. comm., 23 June 2005). It is on this basis that the Retirement Villages Association claims that it would be easier for member villages of the Retirement Villages Association to comply with the Retirement Villages Act. The Retirement Commission claims that the main aim of the Retirement Villages Act is to establish minimum operating standards for retirement villages (W. Proffitt, pers. comm., 24 June 2005).

All the operators of retirement villages interviewed for this thesis stated that their village is a member village of the Retirement Villages Association. In most cases, the Retirement Villages Association was the only organisation the village had any official involvement with outside of their own village. Most of the village operators interviewed for this thesis were operators of comparatively large villages and therefore it is no surprise that they were member villages of the Retirement Villages Association, with some operators even sitting on the association’s board. As Turner states in the quote above, most non-member villages are likely to be small and unknown.

The Retirement Villages Association plays an important role in the retirement village industry and this role is set to escalate as the Retirement Villages Act comes into full force. Retirement Villages Association Executive Director Petrina Turner believes that while the retirement village sector and the role of the Retirement Villages Association may grow, the rest home sector of the aged care industry may experience a shrinkage in the future as a result of the ‘ageing in place’ concept. Turner also expressed a view that retirement villages as we know them may change and become less formalised accommodation options:
I think that we’re going to have more communal type accommodation for older people; it’s just that we won’t necessarily call it a village.

(P. Turner, pers. comm., 23 June 2005)

3.7 Conclusions

New Zealand’s ageing population has meant that the number of strategies and pieces of legislation affecting older New Zealanders is increasing steadily. While the *New Zealand Positive Ageing Strategy*, the *Health of Older People Strategy* and *The Retirement Villages Act 2003* obviously directly deal with the lives of older New Zealanders, many other strategies include older New Zealanders. One such example is *Building the Future: The New Zealand Housing Strategy*. As New Zealand’s population continues to age and facilities for older New Zealanders expand and become more important, legislation affecting older New Zealanders will also have to expand and become more important. Many of the strategies and legislations affecting older people today have been in place for some time. As the population ages, more and more government strategies and legislations will be forced to consider older New Zealanders and the ageing of New Zealand’s population.
When I asked people how they liked living in an age-segregated community, a few said they missed seeing children around. (Some of them went on to explain that they meant this quite literally: What they missed was seeing children – they didn’t miss having them around all the time).

(FitzGerald, 1986: 234-235)

4.1 Introduction

Retirement villages have been criticised by many academics and social policy makers on the basis that any type of age-segregated community cannot be healthy for older people or for society as a whole. Many seem to believe that housing older people in age-segregated communities like retirement villages will only contribute more to the stigmatisation of older people and that removing older people from view will contribute to old age becoming something of a foreign concept to younger generations. This chapter shows the arguments both for and against age-segregated communities and concludes that segregation by age is not necessarily a negative thing.

4.2 Ghettoes for the Elderly

The image conveyed is often one of old people huddled helplessly behind closed doors, deprived of communication with the outside world, with virtually no friends or neighbors beyond their immediate residence. The elderly are portrayed as outcasts, existing in a stifling atmosphere without stimulation from the young and productive members of society. Such is the spectre raised by senior citizen housing and retirement communities – or geriatric ghettoes, to use the harsh term applied by their critics.

(Golant, 1987: 49)

The idea of age-segregated communities being geriatric ghettoes is not a concept unique to Golant (1987). In 2002 Isobel Munro completed her thesis “I’m still me inside” – An analysis of the quality of life of older women in New Zealand 2001 for a Master of Arts in Women’s Studies at Victoria University of Wellington. Although Munro’s thesis does not deal
exclusively with the issue of housing for older New Zealanders, she does touch briefly on
housing and retirement villages. Munro found that the women who she spoke to her for thesis
all had strong opinions about retirement villages, although very few actually stated that they
lived in a retirement village. Cost and isolation were the main concerns for those who had
negative views about retirement villages (Munro, 2002). The following comment was deemed
to be a typical response:

“Ghettos to hide old people away from society.”
(A survey respondent in Munro, 2002: 163)

4.2.1 Public Perceptions

The creation of the ‘active-adult’ identity has spawned a new form of built
environment. Similarly, an old person living in a nursing home has a
particular public identity, even if it is one that the resident does not accept.
(Holdsworth & Laws, 1994: 180)

One of the fundamental problems with the public perception of retirement villages is that
many people do not seem to be able to understand the difference between a retirement village
and a rest home. Many people, upon hearing about my research would go on to ask a question
specific to rest homes. It is often as if they have completely misheard the explanation of the
research. This is apparently rather common:

I think there’s a couple of reasons why people don’t do it [move into
retirement villages] and one of them is essentially because they still don’t
understand the difference between a rest home and a retirement village. I
think there’s a clear marketing issue there.
(P. Turner, pers. comm., 23 June 2005)

This is something recognised by some of the residents of retirement villages as well as those
involved in the operation and governance of retirement villages. The residents who
understand this seem overly keen to dispel this perception and replace it with an image of a
place full of life:

And I think it’s that concept of imagining, of seeing what it was like in rest
homes with everybody sitting around half asleep, watching TV. Well, that
concept, I know that’s still around but certainly this new concept of living is
totally and utterly new and it’s a whole brand-new outlook on everything.
(Zara, pers. comm., 4 July 2005)

This corresponds with the common perception of older people being frail, ill and dependent.
The reality is that very few older New Zealanders are frail, most are relatively fit and healthy
individuals (Dyson, 2002). There appears to be a view among many that rest homes foster
dependence and illness:
Interestingly, nursing homes … were disdainfully spoken of – as ‘unhealthy’ places that inhibit independence and autonomy.

(Kearns & Andrews, 2005: 19)

Mumford (1956) spoke rather disdainfully about retirement communities, promoting an integrated housing plan for older people, rather than segregated. Mumford proposed an ideal community where the composition of the community by age would mirror the composition of the entire population:

This means that there should be from five to eight people over sixty-five in every hundred people; so that in a neighborhood unit of, say, six hundred people there would be between thirty and forty old people. Any large-scale organization of habitations for the aged, which upsets this proportion, should be avoided.

(Mumford, 1956: 192-193)

However, Mumford was not advocating complete integration. When reading some of Mumford’s essay, it is easy to imagine that he would ideally have older people scattered evenly throughout the community. He recognises however that this would not be conducive to easy access to nursing care or companionship. Mumford recognises that older people may not be happy surrounded completely by people of other age groups, and vice versa. Thus he proposes that older people should live in small groups of apartments so they live in close proximity to other older people for companionship as well as younger:

But once a reasonable degree of closeness is established between small groups of the aged, there is much to be gained by giving them apartments on the lower floors of two- or three-story houses whose upper floors will be occupied by childless people in other age groups...

(Mumford, 1956: 193)

The Retirement Villages advisor at the Retirement Commission agrees with this proposal. Wendy Proffitt stated that in the submissions on the Retirement Villages Act, a point was made that some older people feel more vulnerable when there are no younger people to assist in an emergency situation. The mixed community option is one currently being explored in the USA (W. Proffitt, pers. comm., 24 June 2005) and already operates in the social village setting in Kobe, Japan (Davey et al., 2004).

Retirement villages often use advertising methods intended to sell an image of the ‘active retiree’, using images of younger old people enjoying sporting activities and taking part in the
convivial atmosphere of the village. Newer age-segregated communities are likely to emphasise the lifestyle aspect of the community and are less likely to provide extensive continuing care facilities (Cohen, Tell, Batten, & Larson, 1988). Despite this, Mansvelt (2005) believes that these spaces of supposed freedom, youth and activity only contribute to the construction of ageing as a time of dependency and decline:

This occurs through the spatial separation of ageing bodies, and through residents’ identification of ‘others’ – those whose bodies are not found in assisted living spaces and who are excluded from participating in such places.

(Mansvelt, 2005: 88)

Although retirement villages are intended to provide older people with a supportive yet independent living environment, they are viewed by much of the public as merely one step up from the rest home. This is interesting as it would be logical to assume that complexes which encourage older people to be healthy and active would help younger generations to see ageing in a positive light. Instead, retirement villages are seen by younger generations as simply another assisted living space.

Often age-segregated communities are viewed with distaste in the general community (Mangum, 1988). However, Mangum (1988) explores whether this distaste is a sign of ageism or a general dislike to all types of group housing facilities. This study found that respondents from two middle-class suburban communities objected to all types of group housing in their community. However, when asked to rank types of group housing facilities, the same group of respondents indicated a clear preference for a cluster of single-story apartments for the elderly over any other group housing option. Other options included a share-a-home for older people, a high-rise condominium and group homes for unwed mothers, students, people with mental illnesses and juvenile delinquents, with group housing for male juvenile delinquents being the least preferred option (Mangum, 1988).

It is interesting that this group of respondents has identified share-a-home arrangements for older people as an undesirable housing option in their community. This option looks to be very similar to the Abbeyfield housing model. Many people in New Zealand believe that
housing for the elderly will move towards the Abbeyfield model in the future and one would think that this would be a popular housing option for most people.

Municipal councils in Canada also prefer retirement communities to other types of group housing options but for financial reasons rather than social reasons. Retirement communities are seen by municipal councils to bring in a group of people with a large amount of disposable income who will place no demands on the existing school systems (Research and Special Projects Branch, 1989).

4.2.2 Relationships with younger generations

The spatial separation of young and old people reflects ageist ideologies that permeate modern societies. Just as classism, sexism, and racism have shown themselves in the built and social geographies of the modern city, so too we might expect ageism to be reflected in urban structure.

(Laws, 1993: 673)

One of the primary concerns about age-segregated communities is the possibility of decreasing contact and thus declining relationships between older people and their friends and families in the wider community (Buys, 2001). This has potential to lead to older people becoming isolated and alienated (Laws, 1995). Older people often move into retirement villages to attempt to suppress the loneliness they experience living in the community. 32 percent of the participants in Buys’ study stated that this was the case for them (Buys, 2001).

Buys indicates that friendships tend to cease once one friend moves into an age-segregated community:

… the further apart friends live, the less likely they are to provide support for each other. In addition, the type of accommodation where older people reside has an impact on relationships. Friendships rarely extend to places of institutionalisation, such as nursing homes and other places seen as accommodation for dependent people. As such, older adults are ‘even for their “good friends”, socially dead’.

(Buys, 2001: 55-56)

However, Buys (2001) found that this was not the case so much in retirement villages. Most of the residents in her study indicated that they had some contact with friends outside of the retirement village and those who didn’t have much contact with friends outside the retirement village had contact with those inside the village. Buys concluded that living in a retirement community influences the amount of informal contact older people have with other older
people. This may have a positive impact on wellbeing for those who move to retirement villages in order to combat loneliness and isolation (Buys, 2001).

Blaikie (1999) discusses the effects age-segregation can have on relationships between families. This is a phenomenon which seems to be much more wide-spread in the USA than in New Zealand.

The segregationist impulse suggests a willingness to cut generational ties, voiced quite clearly in such things as bumper stickers reading: ‘We’re spending our children’s inheritance.’

(Blakie, 1999: 178)

This is a sentiment echoed by FitzGerald (1986). It appears that many older people move into retirement communities partially so they do not become a burden on their children or grandchildren. It allows children peace of mind because they know that their parents are in a secure environment and it relieves older people of the guilt they may feel when making contact with their children. Older people feel more comfortable contacting their children when they are secure in the knowledge that they are not a burden (FitzGerald, 1986). However, at the Sun City community that FitzGerald (1986) discusses, the concept of cutting the ties with children seems to be taken one step further:

… dependence on children is treated as a weakness. A woman going north to be with her children and grandchildren is said to have “gramma-it is.”

(FitzGerald, 1986: 242)

Retirement communities in the USA are different from those in New Zealand in the sense that many people in the USA will have moved great distances to move into a retirement community. Most of the managers spoken to in the course of this research stated that the majority of their residents come from a 10 kilometre radius. This is most certainly not the case in the USA, with many residents of retirement communities moving between states. The amount of interstate migration of older Americans increased 54 percent between 1970 and 1980 with many elderly interstate migrants heading for the Sunbelt states of Florida, Arizona, California and Texas (Gober, 1985).

4.2.3 Overcontrol

Another negative aspect of age-segregated communities is the prospect of overcontrol and the effects this can have on the well-being of other residents (Lapsley, 2001). Lapsley is not
discussing the overcontrol by operators over residents but rather the overcontrol residents have over other residents.

... retirement communities offer ideal environments for aging overcontrollers, since there they face no ageist discrimination in competition for positions of leadership in the community.

(Lapsley, 2001: 440)

Overcontrolling behaviour is likely to have an adverse effect on all involved, especially the overcontroller. Lapsley believes that overcontrollers experience harm to the psyche and to the spirit. Damage can also occur to the wider retirement community resulting from conflict and instability within the community (Lapsley, 2001).

4.2.4 Disharmony within age-segregated communities

There is a view held by some residents of retirement villages that age-segregated environments incorporate a range of older people which is too inclusive. Manicaros and Stimson (1999) found that the range of ages in retirement villages can extend from people in their early 60s to those in their 80s and 90s. Some residents expressed dissatisfaction with this arrangement:

Some commented on the negative aspects of the wide age span in their village ... citing dissimilar social interests, the unwillingness of younger people to associated with older people and visa versa, and management focusing on caring and activities for the older residents to the exclusion of activities and facilities directed towards younger residents.

(Manicaros & Stimson, 1999: 63)

While Manicaros & Stimson (1999) were discussing retirement villages in the Australian setting, Burgess (1991) found similar opinions in retirement villages in Auckland. Many retirement village residents felt that once they were in their eighties they should no longer be involved in the organisation of activities and sit on residents’ committees. They felt it was important to allow a certain proportion of younger people into the village to ensure that activities were kept going:

Some respondents felt that managers should gatekeep more actively in order to ensure the wellbeing of the village community is maintained

(Burgess, 1991: 79)

While most retirement villages have a waiting list of some length, some villages, particularly not-for-profit villages, manage their retirement villages on the basis of need. This often results
in the median age of the residents being significantly higher in these villages than in lifestyle villages. While many retirement villages are ‘lifestyle villages’ and cater primarily for the young old who can afford to enter, other villages exist to provide residents with support rather than a lifestyle, thus meaning that those on the waiting list who are considered to be the most vulnerable will be given the first priority. One such village is Selwyn Village in Point Chevalier:

It is probable that the offer [of accommodation in the village] will be made to a woman, for women, particularly those living alone and above all single women without younger relatives, tend to be the groups outside the Village most in need of residential care. It is significant that women outnumber men in the Selwyn settlements by four to one.

(Stone, 1979: 17)

While this example is obviously fairly old, not much has changed in the gender composition of retirement village populations in New Zealand. Various factors including the higher life expectancies of women than men and the tendency of women to marry older men have contributed to a greater number of women than men living alone later in life. Most of the managers of retirement villages spoken to for this research stated that single women made up the largest proportion of their residents.

4.2.5 Self and Other

The issue of surveillance is a key theme in many criticisms of age-segregated communities. Many believe that with so many non-working people around, residents are watching and being watched by each other for a large part of every day. There are often also official surveillance systems in place, making it nearly impossible for visitors to enter the community unnoticed:

Often, the security system plays the role of panopticon: I cannot be sure that I am being watched but I might be; postmodern surveillance encourages, if not ensures, self discipline.

(Laws, 1995: 260)

Outsiders are easily identified and ‘self’ and ‘other’ are easily established. Retirement villages are ideal locations in which to create ‘imagined communities’. The concept of ‘imagined communities’ was first established by Anderson (1983) who claimed that nation states are imagined communities because it will never be possible for all residents of the nation to know all of their fellow residents yet they will often still have a sense of a collective identity. This is
a concept which has been grasped by other geographers in order to understand the concept of ‘community’ at a local scale. It is unlikely, especially in some of the larger retirement villages, that residents will meet and know all of the other residents in the village. However, many still feel a sense of comradeship with other villagers and are able to identify easily who does not belong. Valentine (1999) claims that when we are constructing our own ‘imagined communities’ we are constantly thinking of how our communities will interact and connect with others:

> These connections always offer us different possibilities for how to relocate ourselves. On the one hand, connections (in the imaging of self, sameness or difference) can make us more certain in our own identities, and this foster an insular sense of ‘us’ versus ‘them’. On the other hand, connections offer us new possibilities of sharing in difference through interaction.
> (Valentine, 1999: 58)

The retirement village community segregates older people from younger generations thus creating a sense of difference and this, it could be argued, denies both generations the opportunity to interact with and learn from each other.

Laws describes standing out because of her young age and being reminded by one of the sales personnel that she had to be at least 55 to order to move into Sun City. She was therefore forced to explain why she was there and thus complete the surveillance process (Laws, 1995). Not all of the Sun City communities are gated but they all have walls around the development creating both a physical barrier and a sense of containment. The communities are often designed not to give non-residents a reason to enter unless they are considering purchasing a unit:

> The one in Palm Springs [California] will maintain its status as a private community not only by the imposing guard house structure but also, I was assured by one sales representative, by the absence of any shops. There is no reason for an outside to enter the Palm Springs’ Sun City unless it is to visit a resident or to considering purchasing a home.
> (Laws, 1995: 265)

The imposing guard house structure mentioned by Laws (1995) is not an uncommon feature of retirement communities, even in New Zealand. Most retirement villages in New Zealand have an impressive looking gate at the entranceway. At least one retirement village in Mount Maunganui has a guard house like building at the entranceway, shown in Figure 1, making one think that they are entering a truly exclusive community.
The grand entranceway, although probably primarily decorative, gives outsiders the feeling that they are not allowed into the area and contributes to the feeling of security that the residents feel while in the community. Despite this, immediately inside the gate of this retirement village, and all the other retirement villages visited in the course of this study, is a map of the village. This allows visitors to enter the village and navigate around the village without officially making themselves known to management staff. This is interesting because one of the key reasons people move into retirement villages is because of the security offered. Therefore, it is noteworthy that during the daytime visitors, both invited and uninvited, can enter and exit the village as they please.

The design of retirement villages is an interesting topic for discussion. Laws (1995) discusses the location of the sales office forcing prospective residents to view the entire community before finding the office:

The lavish sales office, complete with model units, is always located in a distant corner of the development so that prospective clients have to drive through the development to reach it.

(Laws, 1995: 264)

While design and layouts of villages in New Zealand varies between companies and sites, it is not unusual to be forced to drive or walk through the entire village before finding the reception area. In 73 percent of the retirement villages visited for this thesis it was necessary to either drive or walk past houses or communal facilities before arriving at the management area of the village. This not only allows the visitor to view a large part of the village before
approaching reception staff but it also allows for residents to identify any strangers. Many of the residents interviewed for this thesis mentioned that they are encouraged by management to activate their emergency call systems if they see someone who ‘doesn’t belong’:

They’ve got 24 hour security; we’ve got buttons in the toilet, in the bathroom and in our bedroom. If anything happens, if we see anybody that shouldn’t be in the village you press the button and they come.

(Penny, pers. comm., 15 June 2005)

As a stranger in the villages I visited, I never had anyone call security upon seeing me. However, I did always feel as if I was being watched. Many residents of the village do not make a secret out of watching strangers and in most villages someone would greet me while I was walking from my car to the office or unit that I was visiting. While there was nothing sinister about this and most people were very friendly, the unofficial surveillance made me aware that I could be seen and that these people would not hesitate to call security if they felt it was necessary. In this sense, I benefited because of what I look like. Because I am fairly young, female and of European descent, I do not believe anybody felt threatened by me. They may have greeted me and watched me but chances are they thought I was somebody’s granddaughter and I do not think anyone ever seriously doubted the legitimacy of my visit. Mansvelt (2001) discusses the issue of surveillance at some length:

Retirement villages are planned and controlled privately-owned spaces, which often have 24 hour surveillance (both formally and informally via the gaze of existing residents), they are usually fenced and are often gated (many have restricted access at night), and visitors’ presence is normally noticed (provision of special parking, no thoroughfare access).

(Mansvelt, 2001: 331)

All of the retirement villages visited in the course of this research were fenced spaces and none had thoroughfare access.

While it is potentially problematic to say that nobody felt threatened by me because I am of European descent, I believe this is true. Two separate experiences at two very separate villages made me believe this. When Penny (quoted above) spoke about the 24 hour security system she cited one particular experience when she opened the blinds one morning and saw an unfamiliar face looking in. Understandably, this would be an upsetting experience for any older person. However, Penny found it necessary to tell me that the face looking in was ‘black’. She knew instinctively that this person did not belong in the village. As it happens,
she was correct. The same man was found later that week trying to take keys from the office. However, the fact that she felt she needed to tell me that he was ‘black’ and that this told her immediately that he didn’t belong there tells us something about the composition of retirement village populations in New Zealand.

The second experience involved talking to Jim at a village in a high socio-economic area of Auckland. We were sitting in a communal lounge area of the village when two young women came in and started taking photos of the architecture. One of the women was Asian and the other was European and dressed in what some might describe as a slightly alternative fashion. Jim felt inclined to pause our interview and ask the women immediately what their business was at the village, even though they had both just spoken to the receptionist and obviously had a legitimate reason for being there. While I don’t think Jim felt threatened by these women, he obviously knew they didn’t belong. I wondered if he would have questioned them if they had both been European and dressed professionally. These two experiences told me that these two people felt uncomfortable with anyone different to themselves. I do not believe that these views are limited to a few residents of retirement villages. Retirement villages in New Zealand tend to be home to middle class white people, with very few people of other ethnic groups living in them. This is not only a New Zealand phenomenon, most of the residents of Sun City communities are middle class white people, with very few black or Hispanic households (Gober, 1985; Laws, 1995).

The issue of ethnicity is a very important one when discussing the people who live in retirement villages. Burgess (1991) noted that very few residents of retirement villages in Auckland at the time of her study were of non-European descent:

It was interesting that, of all the residents met and observed during the course of this study, there did not appear to be any Maori and only one Pacific Island resident (this woman was married to a man of European extraction). Nor did there appear to be any Asian residents, although retirement villages are receiving popular attention in Japan. It could be speculated that the apparent mono-racial nature of Auckland’s retirement villages is a function of differences in cultural attitude towards aging, a function of financial access to retirement village accommodation, and demographic differences in life expectancy.

(Burgess, 1991: 124-125)
Although Burgess’ thesis was written almost 15 years ago, not much has changed. I also did not observe any non-European people living in any of the retirement villages I visited. It is a well known fact that different cultures have different attitudes towards ageing and many older Māori and Pacific peoples often live with extended family in their later years. However, one finds themselves asking whether members of non-European ethnicities exclude themselves or are excluded by the management and other residents of the village. The reactions of both Penny and Jim when faced with a person of another ethnicity were telling of the possible reactions people of other ethnicities might receive if they moved into a retirement village. To be fair, Penny was faced with someone looking in her window and it is possible that she would have had the same reaction regardless of the ethnicity of the person.

Age-segregated communities are interesting spaces as they appear to bypass many of the rules which usually apply:

While it would be illegal to advertise a housing estate for “active Asian-Americans” and insist that at least one member of each household be an Asian-American, we do allow the construction of residential subdivisions that have age stipulations in the occupancy agreements.

(Laws, 1995: 254)

It is interesting that we allow communities like retirement villages to exist in today’s society of supposed inclusiveness. As Laws says, if we tried to officially create a community of people from only one ethnic group it would be highly controversial, not to mention illegal. What makes age segregation different from ethnic segregation?

4.3 The argument for age-segregated communities

One of the great ironies of postmodernity is that an enhanced range of choices brings with it the possibility of opting for a culturally homogenous lifestyle enclave in which sameness rather than diversity is of the essence.

(Blaikie, 1999: 178)

Blaikie (1999) makes the point that even though we live in a diverse and interesting society, many people choose to live in places in which they are comfortable, and often this means that the people living in these communities are homogenous in some way. Golant believes that the critics of age-segregated communities are allowing their judgments to be tainted by their own
personal opinions and emotions and the critics’ findings are inconsistent with the findings of most of the social and behavioural scientists, social workers and counsellors working with and studying older people (Golant, 1987). The critics of age-segregated housing claim that this type of housing isolates older people from the rest of society and prevents older people from sharing their knowledge and experiences with younger generations. They also claim that segregating older people can result in older people having a limited group of contacts and can contribute to the uselessness and rejection that some older people feel in the later years of their lives. Golant (1987) argues however, that most older people are still relatively active in activities outside of the community in which they live:

They often belong to clubs and organizations whose members include young and old alike: they eat and shop in establishments patronized by all age groups; they visit with kin, friends and neighbors – of all ages – on a regular basis; they communicate daily by mail and phone with persons who are considerable distances away: and their spheres of activity often extend beyond their immediate residences.

(Golant, 1987: 51)

4.3.1 Companionship

One of the main reasons older people give for moving into age-segregated housing is the other older people. It is natural for people of all ages to surround themselves with the people they are most comfortable with, usually like-minded people of a similar age to themselves. Older people are no exception to this. These people have grown up in the same generation as each other and will therefore have similar personal experiences. Most of them will have similar experiences of having children leave home, coping with having excess spare time after retirement, being less active than they were when they were young and losing spouses. They are able to understand and sympathise with each other and provide support to one another in a way that younger people never could (Golant, 1987). These people have also lived through some of the most life-changing events anyone could imagine. They dealt with the hardships of the Great Depression, lived through the horror of World War II and watched in fascination as technology changed so quickly to include the television, the cellular telephone and the internet. While many younger people are interested in the experiences of the older generations through these events, we cannot even pretend to understand what these experiences must have been like to live through:

Because they have very similar life concerns and backgrounds, members of an older peer group are more likely than younger persons to serve successfully as friends, neighbors, and acquaintances. Thus, the age-
segregated setting offers an older person a large potential number of congenial personal relationships.

(Golant, 1987: 52)

Studies of social networks have shown that older people living in age-segregated housing often enjoy more friends and social interactions as a direct result of living in such close proximity with other older people. People living in retirement village situations often feel as if they belong and are able to forge strong and intimate relationships with one another (Manicaros & Stimson, 1999).

The community atmosphere of retirement communities can be seen to promote high levels of health and well-being (Kearns & Andrews, 2005). The culture of the community setting allows people the strength and support deemed necessary to stay healthy for longer periods of time:

Residents perceived themselves to be part of a community which, rather than focusing on illness and degeneration, focuses on ability, mutual interdependence and well-being.

(Kearns & Andrews, 2005: 19)

4.3.2 Environment

The immediate environment surrounding the retirement community can also have a positive effect on the well-being of the residents of the community. Historically, coastal landscapes have been viewed as healthy and therapeutic (Kearns & Andrews, 2005). For years, people have visited the coast to recuperate from illness and coastal environments have been labelled as ‘therapeutic landscapes’ by many health geographers. Coastal communities are seen to contribute to ageing positively, not only because of their physical or atmospheric conditions but also because of the social and historical connotations associated with coastal environments (Blaikie, 1997).

Golant (1987) states that society is too often preoccupied with the desirability of youth, the satisfactions gained from paid employment and the joys gained from raising children. This society, Golant claims, offers very few guidelines on how to lead life after retirement. By surrounding themselves with other people who are retired, older people can create their own subcultures in which they are able to value each other’s contributions to society and in which they can understand and appreciate each other’s lives (Golant, 1987).
4.3.3 Acceptance of death

Death is an all too real reality for older people and is often a cause of stress. Research has suggested that older people who live together and are able to discuss their fears of death with each other are able to face the prospect of their own death much more calmly than those older people who surround themselves with younger people who are still full of life (Golant, 1987). FitzGerald (1986) discusses the concept of death among the older people at the Sun City communities in the USA:

Death occurs more frequently in Sun City than it does in most other communities. Yet it is much like death in a wartime army: it is expected, and it happens to comrades, but not (except in the case of a husband or a wife) to somebody one has known all one’s life. Sun Citians don’t celebrate it with elaborate rituals; they don’t talk about it very much, or worry about it in the way they worry about prolonged sickness or incapacity. They are stoics, and they have, in a sense, tamed it.

(FitzGerald, 1986: 245)

FitzGerald’s statement about death in Sun City communities is quite typical of the attitudes about death in retirement villages in New Zealand. Death is often a reason given for older people to move into a retirement village. Many of the residents interviewed for this thesis were still living with their spouses and stated that one of the primary reasons for moving into a retirement village was so that if one spouse should die, the other would have a support network within the village. Often a couple would move into a retirement village shortly after one spouse had been diagnosed with a mild but potentially serious illness. The illness would often be potentially life-threatening, such as a treatable cancer, but enough to scare both partners into making plans for the advent of the death of one partner. One manager interviewed for this research spoke, quite casually, about the death of a resident having occurred in the village that very morning. He simply stated that the partner of that resident was surrounded by neighbours and friends and would continue to have this support throughout the grieving process and into the future (Graeme, pers. comm., 29 July 2005). I thought that the manner in which the manager spoke about this was telling. For a start, he spoke very casually, just bringing up this death as an example of how the support networks in the village operate. Secondly, I do not think it ever would have crossed his mind that he should cancel our appointment or any of his other appointments that day, in order to deal fully with the death of this resident. It appeared that the manager relied completely on the informal support networks established by the residents within the village to provide the support.
required during the death of a resident. I believe that the manager would have undertaken the
more official tasks of informing the family of the deceased and helping with funeral
arrangements if necessary but would not get involved with the emotional side of the process.
It appeared that the manager expected the other residents to get involved in this situation and
that the other residents knew that this was expected of them. In this situation, the remaining
spouse gained more support from their immediate neighbours than they probably would have
in an integrated neighbourhood setting. This is not to say that neighbours of younger age
groups would not have been concerned and would not have provided support where they
could. This is simply a matter of time. Many younger people would go to work every day and
often have young families to care for in the evenings and thus are unlikely to have the time to
provide support to an elderly neighbour as they go through the process of grieving for a
spouse.

Despite the apparent acceptance of death in age-segregated communities, it is still not
necessarily easy to be reminded of the fact that death is more likely to be a daily or weekly
occurrence in these communities than in general society. Mabel discussed this briefly when
talking about the rest home facilities in her retirement village:

> We don’t have many undertakers coming up, they are kinder to us than that
and they tend to send people away to hospital rather than have those hearses
in and out.

(Mabel, pers. comm., 8 August 2005)

Mabel was not trying to deny the fact that death is something one is forced to come to terms
with, she was merely expressing a relief that the operators of the retirement village were
sensitive enough to allow those still living to enjoy life without being reminded of the
possibility of dying on a daily basis.

**4.3.4 Security and safety**

Another reason for moving into an age-segregated community is that of security. Many older
people fear being attacked and robbed in their homes or neighbourhoods. It is not unusual at
all to find older people in the community who are terribly security conscious. I for one
remember both sets of my grandparents being much more conscious of locking the house and
setting alarms than my parents ever have been. Golant (1987) supports this with extensive
discussion about security measures taken by most retirement communities:
Well-guarded and fenced-in retirement villages and condominium complexes and all-night doormen and desk clerks in retirement hotels and high-rise apartments all produce a level of protection against intruders that is often unavailable in housing and communities occupied by all age groups. (Golant, 1987: 52)

Many of the retirement villages visited in the course of this research were ringed by a large fence and had a large gate which residents and managers informed me was locked at nights. Residents had codes which they used to enter and exit at their leisure and were able to buzz visitors in and out. The two villages visited which did not have fences or gates were designed in a different manner to the other villages. These villages were made up of apartments which were arranged in a square, all with balconies overlooking the common area. Entrance to the apartments was gained from the inside. It was impossible for an uninvited visitor to get to the apartments without being seen by the receptionist. However, one experience at a retirement village in West Auckland made me wonder how effective the security actually was. The resident I was visiting lived in an apartment on the upper story of the main building in the village. In order to get to her apartment I had to take the lift which required a swipe card to activate it:

… you can use the lifts but you have to have a magic wand to use the lifts. (Karen, pers. comm., 1 June 2005)

I told the receptionist who I was visiting and was asked if I was expected. When I said yes the receptionist simply called out to the person using the lift at the time and asked her to hold the lift for me. I was surprised that the receptionist made no attempt to check my identity and did not phone the resident to check that she was actually expecting me. As I pointed out earlier, I do not believe I look as if I pose a threat to anyone but regardless of this, I was surprised that I was allowed to enter a supposedly secure area so easily.

4.3.5 Voices for older people

Age-segregated communities allow older people an effective avenue to exercise their rights and voice their opinions

A greater potential exists for a “single-minded” electorate to influence the outcomes of local voting referendums. The residential concentration of elderly people becomes a political base from which to influence local issues and a source of support for national, state, and city organizations that are representing the interests of elderly people. (Golant, 1987: 53)
One example of this in the New Zealand setting is the implementation of the Retirement Villages Act. In this research I asked all the residents I visited how aware they were of the Retirement Villages Act and the effects that the Retirement Villages Act would have on their lives and their rights within the village. All knew about the Retirement Villages Act and knew the impacts the Retirement Villages Act would have on their residential agreements. Most had attended meetings within the village to discuss the Retirement Villages Act and one resident of a retirement village on Auckland’s North Shore was part of a committee within the retirement village formed to analyse the Retirement Villages Act and inform the other residents of its effects for them.

Another positive feature of age-segregated communities is that when a neighbour is in trouble it is more likely to be noticed quickly. Older people in the general community, especially those who lead isolated lives, may find it difficult to obtain help when necessary and if they do not have support networks already established in the community it can be difficult for social workers and health professionals to detect the problem (Golant, 1987). However, in an age-segregated community such as a retirement village, elderly people who need assistance are much more likely to come to the attention of other residents or a manager:

Since many residents in retirement housing are involved in activities in their dwellings, there are more opportunities for noticing an elderly neighbour in need of help. The residents can either assist the person or notify the appropriate professional agency.

(Golant, 1987: 53)

This was another point that was raised in most interviews with managers of retirement villages. When asked what benefits they thought older people gained from moving into a retirement village, most managers answered with security and neighbourhood support. Most said that they often get phone calls in the mornings from residents concerned because their neighbour’s curtains had not been opened and they were worried that something may have happened. The manager would then phone or visit the neighbour and if something was wrong they could act appropriately. Managers spoke of this as if it was a regular occurrence and one they would encourage. It appears to be much more effective than any official neighbour support system.
4.3.6 Stability

Planned age-segregated communities such as retirement villages and large apartment complexes provide a sense of stability for the residents. They provide relatively unchanging and predictable living environments:

This is in contrast to age-integrated neighbourhoods and communities that can undergo unexpected and undesirable changes in their population, dwelling, and land use attributes.

(Golant, 1987: 54)

Neighbourhoods can change dramatically over a short space of time. Land use in once thriving working- and middle-class communities can be changed to incorporate so-called undesirable land uses such as taverns and brothels. On the other hand, poorer neighbourhoods can be upgraded and revitalised, resulting in an increase in rent, which can result in the displacement of the population already living there (Golant, 1987). The threat or reality of either of these scenarios can be a cause of great stress to many older people, especially when their lifestyles are often centred on their immediate surroundings (Golant, 1987).

4.3.7 Positive ageing

Retirement communities emplace positive aged identities, notions about successful aging (the ability to maintain in later life activity levels, values, and consumption patterns typical of middle age), and, equally importantly, the positive images used to describe both in specific bounded, and easily distinguishable, spaces.

(Lucas, 2004: 449)

Retirement villages seem to promote a youthful ageing process. Retirement village advertising often features young looking older people. These people are probably in their 50s and 60s and are seen to be enjoying so-called youthful activities such as swimming, exercise and dancing. Often advertising focuses on sporting pursuits which older people are likely to enjoy, such as bowls and golf. Advertising is usually focussed on an active retirement, rather than the traditional restful view of retirement (Laws, 1995; Mansvelt, 2005). Retirement villages in New Zealand and the USA use similar advertising mechanisms to attract the young older and to sell an image of a ‘leisured lifestyle’ (Mansvelt, 2005). Lucas (2004) claims that retirement village operators are striving to change the image of old age from a time of dependence and loneliness to a time of independence and companionship and endeavour to make retirement villages an essential component of this new image of old age:

Old age is portrayed as a time of opportunity to enjoy a well-deserved rest and a plethora of leisure activities. Residents of retirement communities are
depicted as healthy, physically active, busy individuals enjoying various social and recreational pursuits with considerable financial resources at their disposal.

(Lucas, 2004: 450)

Many of the residents interviewed in this research believed that they lived much busier lives in the retirement village than they ever did outside the village. Many said they weren’t involved in any activities outside of the village anymore, except perhaps golf and bowls, for those who were more competitive in these sports. People in retirement villages in New Zealand are more likely to have lives outside of the village because space constraints do not allow for golf courses to be located inside the village, unlike in the USA:

Sun Cities are always built around a golf course (or 2 or 3 – or 7 in the case of Sun City West).

(Laws, 1995: 264)

When asked about the problems residents face when moving into a retirement village, the manager of one retirement village on Auckland’s North Shore said that the most serious problem is adjusting to such a busy life.

4.4 Conclusions

As New Zealanders we like to think of ourselves as living in a completely integrated and inclusive society. Segregation is a phenomenon which occurred in the southern states of the USA or in South Africa. Segregation is not considered to be a New Zealand phenomenon. However, when discussing segregation we usually mean segregation by race or ethnicity. Often people who find themselves living in segregated communities are forced into that situation by economic or social circumstances. This can lead to a perpetuating cycle of poverty and discrimination. Segregated communities, in these cases, can only be considered to be a negative and problematic issue in today’s society. Segregation by age is not something we usually consider. However, we live in a society where segregation not only happens; it is accepted and encouraged by many. Retirement villages look to be well-designed comfortable spaces and although they are not everyone’s idea of an ideal living space, they suit some people very well indeed:
Perhaps the best way to deal with the question of age-segregation is to accept the concept of freedom of choice, thereby recognizing retirement communities as just one of many housing alternatives available to seniors. (Research and Special Projects Branch, 1989: 3)

Age-segregated environments give older people, if they want it, an opportunity to live among people of the same age with similar life experiences. They give older people a sense of belonging and a sense of security and companionship. Retirement communities seem to allow older people to accept the concept of positive ageing and allow them an opportunity to accept the very real prospect of their own deaths. Once they have accepted the inevitability of the end of their lives, many older people find they are able to enjoy the remainder of the lives and enjoy their health while they have it. If age-segregated communities allow older people to age positively, happily and safely and enjoy the last years of their lives without being a burden to their families, then who am I, as a member of a younger generation, to say that is a bad thing?
“We used to run orphanages,” says the head of Presbyterian Support Northern, Winsome Stretch. “We don’t lock children up merely because they don’t have parents anymore,” she says. “And merely because people are old is not a good enough reason to lock them up.”

(Collins, 2005c)

5.1 Introduction

The aged care industry has experienced some major changes and will continue to experience changes as New Zealand’s population continues to age. One of the primary issues affecting older New Zealanders is provision of housing for older people. As discussed in chapter two, there are many housing options available for older New Zealanders. Statistically, retirement villages are one of the less popular accommodation options for older New Zealanders but are definitely one of the more visible options. Although most New Zealanders will have little cause to visit a retirement village unless they are visiting relatives, most will be aware of their existence and will probably be able to name at least one village. This chapter discusses the operation and operators of some retirement villages in the Auckland, Bay of Plenty and Waikato regions. The chapter will begin with a brief overview of recent developments in New Zealand’s retirement village industry. 2005 has been a year of great change in New Zealand’s retirement village industry, seeing the implementation of parts of the Retirement Villages Act, the takeover of one of the larger companies and the sale of one of Auckland’s original and most well known retirement villages. The chapter will then move on to talk about and compare New Zealand’s largest private operator, ElderLiving, and the largest trust owned operator, the Selwyn Foundation. This section will discuss different policies of each company and my personal communication with a representative of each company. The chapter will then discuss the experiences and opinions of the operators of some of the smaller retirement villages. Some of these villages are privately owned while others are owned by trusts. The ways in which the villages are operated varies depending on their ownership but the operators often have similar opinions about the retirement village industry. The next and possibly most

2 ElderLiving is a pseudonym, a representative of the company asked that the company’s real name not be used.
important section will discuss the opinions of the operators in regard to the future of the aged care industry and, in particular, the retirement village industry. I will then offer some conclusions about the roles of operators in the retirement village industry and their opinions.

5.2 Recent developments in the retirement village industry

The retirement village industry is a very dynamic and potentially highly profitable industry which has experienced a huge amount of change in recent years. In October 1993 Nick Stride published an article in The New Zealand Herald with details of a sale between the State Bank of South Australia and a New Zealand retirement village company. The item involved in the sale was a portfolio of four retirement villages which had collectively contributed a loss of $NZ14.8 million to the bank’s 1992 financial result (Stride, 1993). The purchasing company still owns those four villages (Two located in Auckland, one in Nelson and one in Mount Maunganui) and is now known as ElderLiving, New Zealand’s largest retirement village operator.

ElderLiving now owns 13 retirement villages nationwide and was recently taken over by Retirement Villages New Zealand, an Australian company which is a joint venture between Macquarie Bank and FKP Property Group (Steeman, 2005). The chairman of ElderLiving, was quoted in The New Zealand Herald as saying that the takeover agreement would give certainty to minor shareholders and residents (Inder, 2005). This takeover went unconditional on November 9, 2005 (New Zealand Herald, 2005a).

The ElderLiving takeover is simply one in a string of takeovers of New Zealand retirement villages. Merely a week after the ElderLiving agreement was reached, the National Business Review reported that the same group, Retirement Villages New Zealand was in the process of acquiring another retirement village group:

FKP Property Group and Macquarie Bank are understood to be in the process of acquiring Private Life Care New Zealand (PLC) … FKP and Macquarie Bank have formed a joint venture called Retirement Villages New Zealand (RVNZ) to carry out the transactions.

(Bridgeman, 2005: 2)
PLC was previously owned by its chairman, John Bethell, a key player in the growth of New Zealand’s resident funded retirement villages and ex-chairman of the New Zealand Retirement Villages Association (Bethell, 1991). PLC operated Hibiscus Coast Village in Whangaparaoa, Longford Park Village in Takanini and Hillsborough Heights Villages in Hillsborough (Bridgeman, 2005). Bridgeman (2005) also reported that the ElderLiving and PLC deals are not the only takeover agreements affecting the New Zealand aged care industry in 2005. Primecare Holdings, operators of Ocean Shores (Mount Maunganui), Mayfair Village (Browns Bay, Auckland), Parklane Village (Forrest Hill, Auckland), Knightsbridge (Mairangi Bay, Auckland) and Peninsula Club (Whangaparaoa, Auckland) has recently been taken over by PrimeLiving Trust, an Australian company owned by Babcock & Brown, MFS and Prime Life (Bridgeman, 2005).

It is not unique for Australian companies to become involved in the New Zealand retirement village industry. One such example is the PrimeLiving Trust which was established solely to:

… take advantage of the emerging consolidation opportunities in the Australasian retirement village market.

(Primelife Corporation Limited, 2005)

Other Australian takeovers of New Zealand aged care facilities include Australian company DCA’s takeover of Guardian Healthcare in June and Macquarie Bank’s purchase of Eldercare and Salvation Army homes (Bridgeman, 2005). It is expected that the Australian interest in the New Zealand aged care sector will continue and there are believed to be at least six large overseas investors currently active in the New Zealand aged care market. Key players in the New Zealand industry believe that the entire transtasman aged care industry will be owned by Australian companies by the end of the first quarter in 2006 (Bridgeman, 2005).

However, the owner of New Zealand’s oldest retirement village is still going strong and shows no sign of selling up. Selwyn Village in Point Chevalier, Auckland was established in 1954 by the Selwyn Foundation, the aged care arm of the Anglican Social Services for the Diocese of Auckland (Stone, 1979). In 2005, the Selwyn Foundation is thriving, using its land investments around Auckland and the rest of New Zealand to take over struggling trust operated retirement facilities at a rate of approximately one per month (D. Macdonald, pers. comm., 5 October 2005). The most notable of these takeovers was the purchase in September 2005 of Auckland’s iconic Roskill Masonic Village.
Chapter 5: The Villages and Their Operators

The 5.1 hectare Masonic Village complex, which was built in 1960, includes 46 retirement units, a 117 bed resthome and a 92-bed hospital. The proceeds from the sale would go back to the Freemasons, who own it, and be used for charitable purposes.

(Scoop Independent News, 2005)

While it was widely reported that Retirement Village New Zealand paid $341 million for 60 percent of ElderLiving (Inder, 2005), many retirement village takeovers, including the Selwyn Foundation’s purchase of Roskill Masonic Village, are agreed for ‘undisclosed sums’. However, Bridgeman (2005) uses the PLC example to suggest a formula by which these figures can be established:

Although the asking price for PLC is likely to remain confidential, a general rule of thumb is that each bed sells for $100,000. On that basis, PLC could have fetched at least $70 million.

(Bridgeman, 2005: 1)

If this theory is accurate it could be assumed that the Selwyn Foundation purchased Roskill Masonic Village for around $30 Million, making the Selwyn Foundation not only the most significant player in New Zealand’s not-for-profit retirement village industry but also making them an extremely significant player in New Zealand’s retirement village industry as a whole.

Ryman Healthcare is another significant operator in the retirement village industry. Ryman currently owns 12 retirement villages with more in development. In November 2005 Ryman Healthcare reported record profits in the six months to September 2005 and expected to report similar figures for the second half of the financial year:

Revenues rose 18 percent to $68 million, due largely to strong growth in the sale of occupation rights to retirement village units.

(New Zealand Herald, 2005b: C3)

Ryman aims to build more than 250 new retirement village units per year and claims that they are on target to achieve this aim. Ryman’s landbank is adequate to build around 1200 new retirement village units (New Zealand Herald, 2005b).
5.3 The role of managers

Mangers also play a significant role in helping frail elderly tenants remain in the community.

(Barker, Mitteness, & Wood, 1988: 610)

While retirement villages promote themselves primarily as offering an environment of independence to their residents, there can really be no argument that managers play an important role in providing their residents with feelings of security and support. Most of the residents interviewed for this research spoke positively about their relationships with the managers and operators of their villages and the managers and operators in turn spoke of their relationship with the residents as if they were honoured to have such an occupation.

Barker et al. (1988) suggest that managers of age-segregated communities take up the role of being gate-keepers in their community and thus are in charge of the upkeep of community standards. They help to keep out unwanted visitors or, especially in the case of frail or confused older people, anyone who may try to take advantage of the older person (Barker et al., 1988). This is particularly good for more vulnerable older people who may be easily coerced into buying into schemes which they do not understand. I remember visiting my grandmother in a retirement village and at the time the management was warning the residents against giving their bank pin numbers out over the phone or so anyone who came to the door. Apparently, there has been a spate of people posing as members of the police phoning residents asking for their bank details. Anecdotal evidence such as this shows the important function of retirement village managers.

While generally this gate-keeping is viewed as positive, it can cause difficulties for researchers. This was a problem that Burgess (1991) struck when researching her thesis. Burgess (1991) stated that some managers strived to provide a sheltered environment with no contact with the outside world unless the residents specifically sought it:

Retirement villages advocate an independent, non-institutionalised living environment and yet, in the course of this research, it was not acceptable to simply go to the door of any unit and request an interview with residents. Permission had to be sought from the village managers, who must in some cases go to a company director. As long as permission to interview was refused without consultation with the residents, management personnel must be seen as gatekeepers. The attitude described here begs the question whether it is only student research which is filtered by managers, or if this
practice extends to other, perhaps more important, potential social interactions with the wider community. In other words managers not only restrict the opportunity of some elderly people to buy into and enjoy the lifestyle offered in a retirement village but some also choose to restrict the social contacts of those selecting this residential option.

(Burgess, 1991: 122-123)

I found a similar situation in my own research. In order to recruit interviewees, I wrote to the managers of retirement villages asking them for an interview and asking them to display a poster on their notice board advertising my research to the residents and asking their residents to become involved. Whether or not they displayed my poster was entirely their choice and there was nothing I was able to do to influence their decision. While many retirement villages advertise themselves as open to the public, they are still private property and as a researcher, I felt I was not able to enter unless invited by either the management or a resident.

5.4 Not-for-profit vs. for profit

Churches and charities have sold out of another 11 rest homes including Auckland’s Roskill Masonic Village. … The buyer is in the aged care industry and will keep the retirement units, rest home and hospital as a going concern. It is also looking at building more retirement units on the site.

(Collins, 2005a)

The sale of Roskill Masonic Village was simply one of the latest in a long line of deals involving not-for-profit organisations opting out of the aged care industry. Presbyterian Support, Methodist Mission and the Salvation Army have all sold their aged care operations in the last few years and have all been purchased by large commercial aged care providers. ElderLiving and the Selwyn Foundation have both been relatively active in the takeovers of struggling aged care facilities in recent times. These are two organisations whose names have become synonymous with aged care provision.

5.4.1 ElderLiving

In her 1991 thesis, Melanie Burgess provided a sound overview of all the retirement villages in the Auckland region at that time and did not mention the name ElderLiving once (Burgess, 1991). In 1991, ElderLiving did not exist. In 2005 ElderLiving owns thirteen retirement villages and is New Zealand’s largest retirement village operator. ElderLiving was established in 1992 when a New Zealand man (still the chairperson of ElderLiving) and an insurance company entered a joint venture to purchase a retirement village in Pakuranga.
Twelve of ElderLiving’s villages are located in the North Island, with only one in Nelson. ElderLiving Royal Oak\(^3\) in Nelson was purchased in 1993 as part of a group of village acquired in a ‘distress sale’. ElderLiving has no further plans to extend into the South Island aged care market (Ralph, pers. comm., 27 September 2005), an interesting choice when one considers the fact that the average age in the South Island is higher than the national average age (Statistics New Zealand, 2004b). Ralph, a representative of ElderLiving, said that the company has looked into locating in Christchurch but have never found the capital growth in Christchurch sufficient for ElderLiving’s operations (Ralph, pers. comm., 27 September 2005).

ElderLiving is however expanding further in Auckland. They have recently purchased a 1.8 hectare site adjacent to North Shore Hospital in Takapuna. This will be the first ElderLiving village located to the north of Auckland City, an interesting point in itself as the Hibiscus Coast, north of Auckland is home to some of the Auckland region’s original retirement villages. ElderLiving plans a full lifestyle village in Takapuna, with 260 apartments planned and all the amenities expected as well as a resident care facility. The North Shore already has 14 retirement villages, including several large lifestyle villages such as Knightsbridge (Mairangi Bay), Fairview (Albany) and Parklane (Forrest Hill), in addition to the five villages located on the Hibiscus Coast, merely 20 minutes north. However, ElderLiving still feels that the aged care market on the North Shore has not yet reached saturation point:

> We’re going to be building a 260 apartment village, that will be spread out around seven or eight distinct buildings, varying sizes. It’ll be a full village so will have all the resident amenities, and we’ll have a resident care facility on site, and we’ve just started the process of getting a consulting team together to start designing it and contracts out. … we will be the only one of size in that particular area. For us it will be the only village we will have on the North Shore so it’s a good market to get into. We’re well covered in East Auckland and West Auckland and further out but not on the North Shore so it’s a fabulous opportunity, it’s a great piece of land.  
> (Ralph, pers. comm., 27 September 2005)

One of the main criticisms of private-sector retirement village operators is the lack of continuing support offered by many newer commercially-operated retirement villages. Some

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\(^3\) Also a pseudonym.
of the newer retirement villages market themselves as ‘lifestyle villages’ and do not provide continuing retirement care for their residents. ElderLiving tends to contradict this. Out of the 13 ElderLiving villages nationwide, only three offer only independent living options. Two of these are located in Auckland with the other located in Mount Maunganui. One village in Tauranga offers independent living and serviced apartments. Three villages (all in Auckland) offer independent living, serviced apartments and a rest home while six ElderLiving villages (located in Paraparaumu, Nelson, Palmerston North, Auckland, Mount Maunganui and Masterton) offer independent living, serviced apartments, a rest home and a hospital. A representative of ElderLiving stated that all of the ElderLiving villages which have continuing care facilities are villages which have been acquired, rather than developed, by ElderLiving. The other four villages will have continuing care facilities in the future but these will only be small facilities, available to existing residents only:

All of those [the villages providing continuing care] would have been villages that we’ve acquired as we’ve grown, going forward the other four villages will have care facilities available but in fact they will be resident only amenities. So putting it somewhat crudely, they are exactly like a billiard room, or a swimming pool, or a bowling green, it’ll be very small facilities, our village in Remuera is going to have two beds. Treetops\(^4\), which is going to be our biggest village with 500 residents, will only have a ten bed care facility but it will be for residents only so we’re strategically positioning ourselves in the care area as have having continuing care but pretty much resident focused.

(Ralph, pers. comm., 27 September 2005)

ElderLiving markets their villages to anyone above the age of 55. However, a representative of ElderLiving states that very few residents actually enter retirement villages at this age. Ralph admitted that while the company likes to say that most of their residents move in while they are in their late 60s, in reality it is more likely to be early 70s. However, they also have people in their 80s believing that they are too young for the retirement village lifestyle:

It’s a purchase decision very much driven by individual circumstances but far and away the largest one is people’s perceptions of if they are ready or not.

(Ralph, pers. comm., 27 September 2005)

\(^4\) Also a pseudonym.
ElderLiving’s representative believes that there is a space in the New Zealand retirement village industry for both commercial and not-for-profit operators and laments the exit of many not-for-profit players from the industry. He is of the opinion that the aged care sector will be worse off if the not-for-profit providers continue to exit the industry. While the providers who are choosing to exit the sector were focused mainly on providing care rather than a lifestyle retirement, the retirement village part of their operations was an important contribution to the retirement village industry as a whole:

I think that their absence or their departure leaves a gap for people on low incomes to access to both the care and residential options. A lot of those providers were 90 percent care focused and only 10 percent, I guess, retirement village accommodation providers in terms of the range within their villages but still that 10 percent was an important one. … I think it’s a pity but perfectly understand why they are getting out, that’s part of the tragedy and people will look back in two or three years time and say ‘that’s a real pity’.

(Ralph, pers. comm., 27 September 2005)

ElderLiving has, in the past, been heavily involved in the takeover of struggling retirement villages but has not been so active in this sense in recent times. This is perhaps due to the uncertainty of their operations, especially regarding their own takeover. When I spoke to the representative of ElderLiving the takeover process was still very much up in the air and there was a lot of uncertainty regarding the company and its future operations. This may also be because of the large amount of development occurring at several of the current ElderLiving villages, as well as the undoubtedly costly development of the new ElderLiving village on the North Shore. When Auckland’s Roskill Masonic Village came up for sale in February 2005 ElderLiving did consider getting involved but chose not to take part in the tender process. However, the representative of ElderLiving believes that the purchase of Roskill Masonic Village by the Selwyn Foundation was a good move and says that he:

… can perfectly understand why from a values perspective and continuity perspective why Selwyn would be a very big contender to take over the running of the village.

(Ralph, pers. comm., 27 September 2005).

5.4.2 The Selwyn Foundation

Selwyn Village was officially opened on May 22 1954 by Hilda Ross, the Minister of Social Welfare in the government of the time. Originally intended to provide accommodation for 70
people, it was not long at all before visions for Selwyn Village were being extended well beyond this modest number:

Even before the first residents entered the gates, however, it was decided to enlarge the settlement beyond this original conception. With so great a number of applicants for so few places could the Mission in all conscience stop at a population of 70? Perhaps it could rise to 150 without becoming too impersonal.

(Stone, 1979: 43)

Selwyn Village is now New Zealand’s largest retirement village with around 700 residents with additional developments being built and planned at the original Point Chevalier site. The Selwyn Foundation has also expanded dramatically, currently with eight sites around New Zealand. This number is increasing at a rate of approximately one per month, with one of the latest acquisitions being Roskill Masonic Village, which has recently been renamed Selwyn Heights Retirement Village (D. Macdonald, pers. comm., 5 October 2005).

The expansion of the Selwyn Foundation’s operations makes the Selwyn Foundation a unique case study when analysing the not-for-profit aged care industry. This is unusual in a time when many of the not-for-profit aged care providers are opting out of the industry. In 2004 and 2005 organisations such as the Freemasons, the Methodist Mission, the Care and Independence Charitable Trust, Presbyterian Support and the Salvation Army have all sold some, if not all, of their aged care operations (Collins, 2005a). The Selwyn Foundation is not only continuing their operations but is also expanding their existing facilities and buying new facilities. Rev. Duncan Macdonald, CEO of the Selwyn Foundation, believes that this is partly due to the Selwyn Foundation having no other commitments or interests aside from aged care provision:

Selwyn’s been lucky in that we are solely an aged care provider, we don’t take money out of our aged care for other generic social services, which is what I believe other not-for-profits have been doing for the last 20 years, using these profits from aged care to provide other services.

(D. Macdonald, pers. comm., 5 October 2005)

Macdonald stated that he believed that the other service commitments of many of the other not-for-profit providers had resulted in a lack of reinvestment in their operations meaning that many of their facilities and buildings are rundown and in need of upgrading. Rather than
commit to upgrading their facilities many are choosing to sell up and reinvest the profits in other types of services:

Rather than spend money and get little return, [they] would rather get $40 million and see what else you can do with it.
(D. Macdonald, pers. comm., 5 October 2005)

Religion is another issue upon which the Selwyn Foundation is unique to other not-for-profit providers. Many of the trust owned villages were originally established by church groups. However many of them are religious in name only now. For example, St Andrew’s Village in Glendowie, Auckland, was established and is still owned by the Presbyterian Church but has no other links with the church at all (Caleb, pers. comm., 9 June 2005). The Selwyn Foundation however is the aged care arm of Anglican Social Services of the Diocese of Auckland and has a mission to ‘provide quality Christian care and support for the elderly’ (Selwyn Foundation, 2005). The Selwyn Foundation makes no secret of the fact that their operations are based on Christian principles and teachings:

We think that faith is a very important issue. We have a philosophical belief that caring for the elderly is part of the Christian mission and we’re pretty upfront that that’s the mainstay of what we offer.
(D. Macdonald, pers. comm., 5 October 2005)

While the Selwyn Foundation accepts residents on the basis of need, not religion or beliefs, Macdonald says that many of the residents do tend to enter Selwyn villages through their churches and that any residents or staff of other religions would need to be aware that the Selwyn Foundation is a Christian organisation and makes no apologies for the Christian base of their works (D. Macdonald, pers. comm., 5 October 2005). The focus on Christianity is made immediately obvious upon entering Selwyn Village in Point Chevalier, Auckland, where the chapel is the focal point of the village as shown in Figure 2.

Figure 2: The chapel at Selwyn Village, Point Chevalier, Auckland (photo by author)
The Selwyn Foundation focuses on providing care to older people, rather than providing a retirement lifestyle that many of the more commercially operated villages focus on. Selwyn Village in Point Chevalier is one of the few retirement villages which offer all stages of care necessary for older people. Many retirement villages offer independent living options and serviced apartments and some also offer rest home and hospital facilities. However, very few retirement villages deal with dementia care and many of the operators interviewed for this research indicated that one thing they look for when interviewing potential residents is dementia. Selwyn Village however, offers a wide spectrum of services from independent living options through to a stage 3 dementia care rest home and dementia day care services:

We’re not-for-profit and we do things that others don’t do. We’re happy to lose money on Alzheimer’s and dementia care because that’s a very specialised area.

(D. Macdonald, pers. comm., 5 October 2005)

The Selwyn Foundation distinguishes between the provision of love and the provision of care. Macdonald believes that packages of care can be purchased but love is not a purchasable commodity. Macdonald states that he knows of people who receive more love and care in the community from their churches and neighbourhoods than they could purchase in a retirement village environment. The Selwyn Foundation prides itself on offering both purchasable care and an environment of love (D. Macdonald, pers. comm., 5 October 2005).

Macdonald sees the Selwyn Foundation expanding further in the future, both in providing accommodation to older New Zealanders but also in providing care to older people in the community:

We’ve allocated this year half a million dollars and we will increase that in the future to work in our parish churches to provide services from the point of view of church and community and that’s growing. … and we’ll continue to grow our operations. And as I said we’re getting lots of requests now from smaller retirement villages, rest homes and hospitals to join the Selwyn Villages.

(D. Macdonald, pers. comm., 5 October 2005)

In doing this, the Selwyn Foundation is recognising that aged care provision in New Zealand is shifting towards and model of ‘ageing in place’ and is gradually shifting their operations to fit in with this trend.
5.5 Smaller operators

While companies such as ElderLiving and the Selwyn Foundation are the biggest and most well-known faces of the retirement village industry, many of New Zealand’s retirement villages are much smaller than many of the ElderLiving and Selwyn villages and are often independent or belong to a small group of retirement villages. Out of the eight operators of smaller villages interviewed for this thesis (excluding the representatives of ElderLiving and the Selwyn Foundation), four operated trust operated villages while the other four operated private, commercially operated villages. Out of the commercially operated villages, two were independently owned and two belonged to a group of retirement villages.

5.5.1 Trust operated villages

A lifecare based village was chosen with independent apartments, a smaller rest home and hospital all on the same site. Community facilities were also included. Potential villagers were invited to make a deposit on their unit and then development began. The village is now the largest on the North Shore and was the first resident funded village to be built in the Auckland region. (Burgess, 1991: 56)

Burgess (1991) is referring to Northbridge Retirement Village, located in Northcote, just north of the Auckland Harbour Bridge. Northbridge is no longer the largest retirement village on the North Shore, Fairview Lifestyle Village in Albany is larger (Jack, pers. comm. 8 June 2005) and ElderLiving’s new development in Takapuna is planned to be larger (Ralph, pers. comm., 27 September 2005). However, Northbridge remains an interesting case study because of the circumstances under which it was developed and because of its current ownership status. The development of Northbridge followed the development of several charitable retirement villages in the Auckland region in the 1950s and 1960s, including Selwyn Village in Point Chevalier, Lady Allum Village in Milford, St Andrew’s Village in Glendowie and Roskill Masonic Village in Mount Roskill (Burgess, 1991). However, the development of Northbridge brought about a significant shift in the focus of the retirement village industry:

A fundamental change in the rationale behind the provision of retirement village accommodation occurred with the development of Northbridge Retirement Village on a resident funded, rather than charitable, basis in 1976. (Burgess, 1991: 56)
Northbridge, although resident funded, is still owned by a trust, making it a unique operation in today’s retirement village industry. More interesting, and quite unusual, is the fact that the trust which operates Northbridge has no other interests. The trust was created solely to establish and operate Northbridge Retirement Village and that is all it does. A representative of Northbridge considers this to have positive effects on the services and facilities the village is able to provide to its residents. Because the profits from the village are always being reinvested into the village and there is no owner wanting a profit, Northbridge is able to provide more services to the residents of the village (Helen, pers. comm., 14 June 2005). The village is operated by a board, made up of volunteers in the community who have appropriate skills and experience to contribute to the operation of the village:

It’s a charitable trust so it’s not really owned by anybody. It’s managed by a group of trustees who give their time freely and they are appointed, some by the trust itself, some by the board, and some, well one is recommended by the Society of Accountants, some by the Solicitors and Lawyers group, and some other agencies are supposed to appoint people but they no longer wish to do that so we’re just going through a process of change.

(Helen, pers. comm., 14 June 2005)

Northbridge has no associations with any societal or religious groups and is unique in this sense as most trust-operated village have, initially at least, links with a church or societal group.

Cambridge Resthaven is also operated by a trust made up of representatives of service groups in the community:

We’re a charitable trust so we’re run by what we refer to as a community trust, mainly because it’s made up of service groups. … The board is made up of service group members such as Rotary, Lions and Federated Farmers.

(Darren, pers. comm., 8 August 2005).

Darren feels that as a trust, Cambridge Resthaven is able to provide services to their residents at a rate cheaper than would be offered by privately operated villages for much the same reasons cited by Helen. Cambridge Resthaven is an interesting case study because it is one of two retirement villages in Cambridge, a small town in the Waikato. Both of the retirement villages in Cambridge are operated by trusts, with St Andrew’s Village located just down the road from Cambridge Resthaven. Cambridge is located 20 minutes south of Hamilton and it appears that Cambridge’s retirement villages service Cambridge’s population only. Hamilton is home to several retirement villages, including at least four ‘lifestyle’ type of villages. This
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seems to indicate that the residents of retirement villages in Cambridge are people who have lived in Cambridge before or who have family in Cambridge. People tend to move into Cambridge Resthaven on the basis of need and residents tend to be the older old, i.e., those aged over 80. Cambridge Resthaven is not a lifestyle or resort based village, as is made apparent by its modest entrance, shown in Figure 3.

![Figure 3: The modest entrance to Cambridge Resthaven (photo by author)](image)

St Andrew’s Village in Glendowie, Auckland, is owned by the Auckland Presbyterian Hospital Trustees. However, this has no impact on who is accepted into the village or how the village is operated:

> It’s actually a bit of a misnomer because we have no links with the Presbyterian Church in any way, shape or form.
> (Caleb, pers. comm., 9 June 2005)

St Andrew’s provides rest home and hospital care as well as retirement village units. When I spoke with Caleb in June 2005 there were 84 licence to occupy homes as well as 12 rental cottages. He spoke of plans for a maximum of 90 more retirement village units which were in the resource consent stage at that time (Caleb, pers. comm., 9 June 2005).

Elmwood Village in South Auckland was established originally by a religious organisation but is now owned by the Macpherson Group. The Macpherson Group now owns several retirement villages which were originally all originally owned by charitable trusts including Lady Allum Village in Milford, St John’s Village in South Auckland and Meadowbank Village in East Auckland (Macpherson Group, 2005).
All of the trust village operators reported staffing problems. However, they went on to say that staffing problems were more likely to occur in the rest home and hospital part of their operations rather than in the village itself. Most villages did not have staff allocated specifically to the retirement village; rather they had staff that crossed between the retirement village and the continuing care facilities as was necessary. All reported issues particularly in attracting quality registered nurses for their hospital and rest home operations. They claim that government regulations and District Health Boards can prevent them from attracting registered nurses and quality caregivers:

They are a special sort of person who will come and work here in the rest home or hospital. They’re not there for the money because we don’t pay a lot. We can’t, we’re governed by the government as to how much we can charge for our fees and the hospital boards, the DHBs [District Health Boards] just agreed or negotiated with the nurses’ union to get huge pay rises in the public hospitals. And those same DHBs pay us but they don’t let us increase our fees so we can’t pay the nurses what they can get in the public hospitals. So it’s very hard to compete. So I would hope that people who work here are people who want to be here rather than people who have to be here for the money.

(Helen, pers. comm., 14 June 2005)

5.5.2 Commercially operated villages

While the operators of commercially owned village seem to have very similar opinions to their trust operated counterparts, the ownership structures and operations can vary hugely. Fraser Sanderson is the director and founder of the Sanderson Group and was a founding member of the Retirement Villages Association and is still actively involved in the Retirement Villages Association. The Sanderson Group currently owns four retirement villages in Waikato and the Bay of Plenty: The Cascades Retirement Resort in Hamilton, Omokoroa Country Estate outside of Tauranga, Bethlehem Country Club outside of Tauranga and The Avenues Retirement Resort in Tauranga. Fraser Sanderson also established Beachside Village\(^5\) in Mount Maunganui which has since been sold to ElderLiving (The Cascades, 2005). In the course of my research I visited and interviewed representatives of two of these villages, The Cascades in Hamilton and The Avenues in Tauranga. As can be seen in Figure 4, these are large, resort style complexes. These complexes were designed more as apartment blocks, rather than the sprawling village design of many of the other retirement villages visited. It was impossible to access any of the apartments from the outside, unless one

\(^5\) Also a pseudonym.
was somehow to get to the centre of the village (an issue in itself) and climb up the drainpipes. The design of the villages means that visitors cannot drive into the village complex itself, although both provide parking facilities to residents and The Cascades provides some off-road parking for visitors. Because the apartment buildings are arranged in a ring type setting, it is impossible to get to the communal outdoor area without going inside. Upon entering the main village building, one is immediately faced with a receptionist, and if by chance the reception desk is not occupied, the lifts cannot be operated without a swipe card. The combination of these features meant that out of all the retirement villages visited in the course of this research, these villages appeared to be the most secure and provide the safest environment for their residents. It could also be argued that the design of these villages makes them feel more exclusive and segregated than many of the open-plan villages.

All of the other retirement villages visited in the course of this research allowed visitors to drive into the village complex and it was possible to approach individual units without (officially) being seen by village staff or management. Of course, the surveillance systems discussed earlier were in place in all villages, thus making these villages just as secure as The Cascades and The Avenues.

Greenview Park Village in Otatia, Auckland and Fairview Lifestyle Village in Albany, Auckland are both independently owned private villages. Both offer continuing care services, with Greenview Park Village offering a rest home and hospital facility as well as license to occupy units (Graeme, pers. comm., 29 July 2005). Fairview Lifestyle Village has offered license to occupy units since opening in 2000 and at the time that I spoke to a representative of the village, was in the process of completing a rest home and hospital facility. Jack, a
representative of Fairview Lifestyle Village’s management, stated that when the hospital facility is completed it will have 47 beds which will serve the whole village. It is interesting that Fairview Lifestyle Village planned to accommodate so many residents in their hospital and rest home facilities when large operators such as ElderLiving are choosing to add small continuing care facilities to their existing operations. The most intriguing part of this is that Fairview Lifestyle Village is self-described in their name as a ‘lifestyle village’ rather than a ‘retirement village’, yet they are choosing to provide facilities for people in the late stages of their lives.

5.6 Operators’ views of retirement village living

Jack was the only retirement village operator interviewed for this thesis who was wholly positive about retirement villages as an accommodation option for older people. In fact, Jack was positive to the point that he and his wife were living in the village as live-in managers and had purchased a unit in the village to live in when they retired (Jack, pers. comm., 8 June 2005). Most of the other retirement village operators said they would consider retirement village living but had accepted that it was not everyone’s idea of a perfect retirement lifestyle. Helen stated that she would consider retirement village living but not while her husband was still alive because she did not think the retirement village lifestyle would suit him (Helen, pers. comm., 14 June 2005). This is noteworthy because other retirement village operators (such as Keith) and residents (such as Daisy, Larry and Penny) all warned against moving into a retirement village soon after the death of a spouse and Daisy, Larry and Penny all agreed that they think that people tend to be happier in retirement villages if they move in as a couple. Helen possibly viewed herself as strong enough to cope with the move after losing her husband or had only witnessed positive experiences of residents moving into her village soon after the death of a spouse.

It is also interesting that Jack had purchased a unit in the village he was operating. When asked if she would consider retirement village living in her future, Helen said that she would never consider living in a retirement village she had worked in (Helen, pers. comm., 14 June 2005). Helen was of the opinion that she would find it difficult to consider the village to be a home when for so long it had been a workplace. This would possibly be different for Jack
because he had already lived in the village for a long period of time in his capacity as manager and therefore already regarded the village to be his home.

5.7 Into the future

All the operators of retirement villages agree that the retirement village industry is experiencing a time of change. However, with the exception of Jack from Fairview Lifestyle Village, all the village operators said that they believed that there were enough retirement villages in their area. Many cited the government’s policy of ‘ageing in place’ and decreasing amounts of available funding for retirement villages as reasons for the area not needing more retirement villages. Helen talks about having a long waiting list but often when an apartment becomes available the people on the list are not ready to enter a retirement village. However, although Helen is satisfied that there are sufficient facilities in her area at present, she doesn’t expect this to always be the case:

But then the baby boomers are coming along and that’s going to make a huge difference. We’re going to have so many people wanting this sort of accommodation, I imagine. Because the baby boomers are people who like to get out and do things and they’ll want to come to a village knowing that they won’t have to worry about the lawns and they won’t have to worry if the house is empty while they go away for three months, that sort of thing. So we will need more but at the moment they’re ok.

(Helen, pers. comm., 14 June 2005)

Jack states outright that he believes that there are not enough facilities in his area for the ageing population. This is particularly intriguing as both Jack and Heather operate retirement villages on Auckland’s North Shore, yet they have opposing views of the industry in their area. However, Jack does point out that there is not only a need for more retirement facilities, but for more quality retirement facilities:

We’ve got a waiting list already for our nursing home; we get enquiries almost every day. There’s a demand for good quality, stress that, good quality facilities and staff.

(Jack, pers. comm., 8 June 2005)

Despite the fact that most operators believed there are already enough retirement village facilities, none of the operators found it necessary to advertise extensively. Most claimed that
word of mouth was the most effective form of advertising and that the state of their waiting lists made advertising pointless:

But there’s no point in advertising. The only thing I have to advertise I suppose is that people put their name down sooner because it’s a ten year wait at the moment for a two bedroom apartment.

(Helen, pers. comm., 14 June 2005)

It must be noted, however, that ElderLiving, New Zealand’s largest retirement village operator, does advertise quite extensively, as do many of the other larger operators. However, these operators do not usually advertise their whole operation but rather choose to promote one village, especially if a particular village has an open day approaching or has had some new development. This suggests that ElderLiving and the other larger operators do not need to advertise but can afford to and choose to in order to keep their name at the forefront of the retirement village industry.

Many operators, such as Keith, representing a trust operated village in South Auckland, and Ralph, representing ElderLiving, mentioned the Abbeyfield concept as a possibility for retirement living, and suggested that the Abbeyfield model may become more prevalent into the future (Keith, pers. comm., 25 July 2005; Ralph, pers. comm., 27 September 2005). Petrina Turner from the Retirement Villages Association and Wendy Proffitt from the Retirement Commission also suggested the Abbeyfield model as a possible accommodation option for the future (P. Turner, pers. comm., 23 June 2005; W. Proffitt, pers. comm., 24 June 2005). The interviewees did not necessarily indicate that they thought that the works of the Abbeyfield Society (either in New Zealand or internationally) were going to become more popular but rather that a less formal, non-charitable equivalent would start to emerge. It was described by some as a form of flating for older people and when Turner was asked if this was what she meant, she answered with:

Exactly. Or not even necessarily flating together but an apartment block central to town with a body corporate, no manager. That people have just decided to buy into a space with the sort of companionship and support.

(P. Turner, pers. comm., 23 June 2005)

Duncan Macdonald from the Selwyn Foundation said that he does not believe that the Abbeyfield model of accommodation is sustainable. He believes that it is a good model but describes it as ‘a unique one off’ which will provide a good service to those who live in that type of accommodation but he does not believe it is practical as a long-term solution for
accommodation for older people (D. Macdonald, pers. comm., 5 October 2005). Macdonald predicted that the retirement village industry as we know it today will experience many more changed into the future:

… you will see a balanced need for hospital care, and some kinds of sheltered housing, community or otherwise. The retirement village thing is going to end up as a back water, as only for one or two percent of the population with the money.

(D. Macdonald, pers. comm., 5 October 2005)

When asked if they thought the retirement village lifestyle is an accessible accommodation option for all older New Zealanders, many of the retirement village operators replied that they thought it was as financially accessible as it needed to be. It was acknowledged by many of the operators that the retirement village option is only one of many accommodation options available to older New Zealanders and that many older people wish to stay in their own homes for as long as possible. They seemed to admit that while the retirement village industry is growing, this is only because the aged population is getting larger, not because the proportion of people choosing the retirement village lifestyle is increasing. However, Petrina Turner did mention that there are options available to those who are living in retirement villages but wish to free up their assets:

Another thing that might be making it potentially more accessible, the retirement village lifestyle more accessible, is this whole issue around the equity release scheme and suddenly people have got the choice because they still have the right to get access to their funds to be able to go overseas.

(P. Turner, pers. comm., 23 June 2005)

All the operators interviewed stated that they did not envisage any problems in complying with the Retirement Villages Act. They were all positive about the Retirement Villages Act and said that compliance with the Retirement Villages Act will help them to tighten their operations and make their operating procedures more effective:

A lot of things we do already but we will need to develop a prospectus, we will need to provide additional information with the disclosure which is really why the law is coming in. In lieu of not having a prospectus, there’s nothing that we’ll do any different, pretty much just consolidating the approach we have now anyway.

(Caleb, pers. comm., 9 June 2005)
However, all retirement villages visited were already members of the Retirement Villages Association and it has been previously mentioned that member villages of the Retirement Villages Association will find it easier to comply with the Retirement Villages Act than non-member villages.

5.8 Conclusions

… you can walk down the street here, anytime of the day or night and no-one will harm you, no rabid dogs will come out and bite you, anybody at all you can wave out to. It’s a village of friends. That’s number one, security. And then there’s companionship, we’ve got lots of clubs, lots of things to do, lots of fun. We have street parties. It’s a community, it is a community. Lovely lifestyle.

(Jack, pers. comm., 8 June 2005)

Jack was extremely positive about the retirement village lifestyle and the advantages that residents gain from retirement village living. However, not all retirement village operators were as positive as Jack about the role of retirement villages in providing accommodation to older New Zealanders. All the operators recognised retirement village living as a valuable accommodation option for older people but were aware that it is not the most significant accommodation option available, and is definitely not the most popular. The operators were aware that their services attract a small group of older New Zealanders and accepted that retirement village living is not for everyone. Many suggested alternative accommodation options to be investigated and developed into the future.

New Zealand’s retirement village industry is undergoing a time of change, with some people estimating that by the end of the first quarter in 2006, all of New Zealand’s retirement villages will be under Australian ownership. While many would prefer for New Zealand operations to remain under New Zealand control, Australian ownership does not appear to have a major effect on the residents of the villages or on the ways in which the villages are operated.

With large companies such as ElderLiving now under Australian ownership and with Australian operators becoming increasingly active in the New Zealand retirement village industry, it appears that the one New Zealand operator to watch is the Selwyn Foundation. New Zealand’s largest not-for-profit retirement village operator and operator of New
Zealand’s largest retirement village, the Selwyn Foundation is becoming more active in the industry as a whole. The Selwyn Foundation is increasing their operations at a rate of one aged care facility per month and their ownership structure and the philosophy under which they operate indicates that they will not be selling their operations in the near future:

What we offer is four things – faith, wellness, care and independence. That’s what Selwyn Care stands for and that’s what we offer that the commercial sector doesn’t.

(D. Macdonald, pers. comm., 5 October 2005)

Macdonald predicts that ElderLiving and other commercial operators will experience a decrease in the demand for their services which will result in them failing to provide their shareholders with a return on their investments (D. Macdonald, pers. comm., 5 October 2005). The representative of ElderLiving of course disagrees with this prediction and it could be argued that ElderLiving are developing existing villages and establishing a new village and are therefore obviously confident about their future. Ralph predicts a growth in the retirement village industry and a subsequent growth in the operations of ElderLiving, both in New Zealand and internationally (Ralph, pers. comm., 27 September 2005). However, Duncan Macdonald claims that the Selwyn Foundation is willing to lose money on providing care and is prepared to move into providing care in the community through their churches, thus moving their operations slightly to include providing care to those choosing to ‘age in place’. The Selwyn Foundation has a focus of providing love, care and support to older people in their facilities and in the community and do not have shareholders to whom they are beholden. This may result in the Selwyn Foundation becoming the most significant player in the New Zealand aged care industry and possibly the only New Zealand owned player.
Retirees who purchase homes in Sun City have made a deliberately self-conscious choice about their identity. They belong to a small group of people who not only have the resources to make that choice but also to an even smaller group who choose to exercise it. There are many older people who will not have the opportunity to adopt the tanned-golfer identity, who will remain dependent on families and the state for support and housing during their retirement years. There are those who do not see grandparenting as a disease or a burden. There are those whose bodies have imposed an identity of “frail elderly” upon them. Sun City communities are thus part of the fragmentation of identities which has characterized postmodernism.

(Laws, 1995)

6.1 Introduction

It must be remembered that while retirement villages are one of the more visible and space consuming accommodation options available to the elderly in New Zealand, they are by no means the most significant or important accommodation option. Only about five percent of older New Zealanders choose to live in retirement village accommodation. The majority of older New Zealanders live in their own homes, either alone or with their spouse or partner. However, the comparatively small group of people who choose to live in retirement villages helps to make this a very interesting and rather exclusive group to study. This chapter will talk about the types of people who choose retirement village living and why they have made these choices. This is based primarily on my own experiences in visiting retirement villages and talking to residents. However, I do draw on some literature where appropriate. I will begin by talking about some of the people I spoke to and the lives that they led as working people. It appears that the lives that village residents lead when they live in a retirement village are directly influenced by the lives they led as working people. I will then discuss the reasons residents gave for moving into retirement villages; I find that the reasons given by residents are often as varied as the residents themselves. The chapter will then go on to discuss the residents’ experiences in the retirement village environment, whether positive or negative, and how they feel this has contributed to their overall wellbeing and quality of life.
as they age. I will then attempt to make a somewhat broad conclusion about the type of people living in New Zealand’s retirement villages and whether retirement villages play an important role in providing accommodation to older New Zealanders.

6.2 Retirees as people

… you have to be able to … remember that many of the old people, you look at them and they just look like an older person but in fact they’ve been the town clerk or they’ve been the matron of a big hospital or the principal of a school or whatever. And it’s very easy to forget that when you see old people just dressed in their everyday clothes.

(Helen, pers. comm., 14 June 2005)

When a person reaches old age it is easy for members of younger generations to forget that these people led meaningful lives as working adults and just because they have stopped working does not mean that their lives are now void of meaning.

The cost of moving into many of New Zealand’s retirement villages is quite significant and most older people would have to have led fairly lucrative working lives if they are to afford retirement village living in later life. While in theory, anyone who previously owned a house without a mortgage (which is the case for most older New Zealanders (Statistics New Zealand, 1998)) should financially be able to enter a retirement village, many retirement villages are very expensive and some older people cannot afford to move into a retirement village and support themselves for the remainder of their lives, especially if they enter the retirement village while still in the ‘young old’ age group. Many retirement villages market themselves to age 55 and older. Most retirement villages require residents to be mortgage-free when they enter the village although many are now offering equity release schemes for later in life. New developments at some villages mean that some independent living apartments in retirement villages are priced at over one million dollars:

Under construction at present and due for completion June 2006 are 25 apartments all on one level. … They include one bedroom apartments from $350,000 up to the penthouse priced from 1 million to 1.4 million.

(Eastcliffe on Orakei, 2005a)

Even with property prices rising as they are, very few older people would be able to afford a retirement village unit worth up to one million dollars. Perhaps it is because of the cost of
retirement village living that most of the residents interviewed for this research were fairly well educated people who appeared to have a relatively large amount of discretionary income.

One of the primary things I noticed about the older people I spoke to was their level of computer literacy. Out of the thirteen retirement village residents I interviewed, 10 definitely owned a computer. Some of them made contact with me via email, demonstrating proficiency in using the computer. One even spoke of the online DVD rental service she uses regularly and the many other online services she utilises frequently:

So I’ve organised myself with the DVD, the Sky, I’ve got myself this wonderful entertainment system. Through the internet I found this thing Fatso … I have organised the lifestyle that suits me down to the ground. Reading the paper, organising my emails and I do my banking on the laptop which is fabulous. It means you can pay your Visa account, you don’t have to stand in the queue, I can remember the days back when you stood in the queue for ages and they all just had ledgers. So this to me is just absolutely wonderful.

(Zara, pers. comm., 4 July 2005).

I found this absolute comfort with technology that many of the older people seemed to have quite startling. It is easy to dismiss older people as having little or no knowledge of technology, yet my interviewees proved this theory completely wrong. Older people appear to be one of the groups in society who can fully benefit from advanced technology. For younger generations, technology such as the internet and text messaging can definitely make life easier but for older people, especially those who are not particularly mobile, technology appears to have the ability to make the difference between being alive and living.

Three of the female interviewees I spoke to had themselves led very interesting and active working lives, or had been overly involved in her husband's working life. Mabel lives with her husband in a retirement village on the outskirts of Hamilton. She has a PhD and was an academic at Waikato University. In retirement she still does some part-time research work at the university and authors or co-authors books and articles from time to time. Zara lives in a retirement village in West Auckland. While she personally did not lead an active working life, her late husband was a vital figure in the third Labour government under Norman Kirk and life as the wife of a prominent politician involved a large amount of travelling and entertaining overseas dignitaries. Karen lives in the same retirement village, in the same building in fact as Zara. Karen worked in retail before retirement but openly admitted that she
made her money buying and selling property around Auckland. She had lived in her current retirement village for around two and half years when I spoke to her but had previously lived for 15 years in a retirement village in Remuera. She moved from Remuera because her involvement as a residents’ representative on the board of the village had resulted in her being a fundamental member of a group which took the management of the village to court, and won.

These three women had obviously led very active lives and I was privileged that they allowed me to interview them. It is easy to assume that these women, having led fascinating lives, would wish to be actively involved in the organisation and running of village activities. This however was not the case for any of them. Mabel makes use of the facilities provided in her village but is not as actively involved in activities within the village as Derek, her husband, is. Mabel prefers to continue her involvement in activities outside of the village environment and even claims that when she first moved into the village she hated the stifling atmosphere of it. As indicated above, Zara prefers to keep to herself and has set her apartment up so that she can keep to herself if she wants to. With her entertainment system and access to and thorough knowledge of the internet, she is able to live happily on her own with very little contact with others:

I’ve got things so well organised, my days are taken up, if anyone interrupts my routine I feel quite annoyed.

(Zara, pers. comm., 4 July 2005)

Karen is older and much less mobile than either of the other two women. She was the only one who gave the impression that she might be slightly lonely. She openly stated that she does not go out very much at all and that she moved to West Auckland to live closer to her son who has since passed away. However, when asked if she had made many friends in the village she replied:

No, that wasn’t one of the focuses to get to know everybody. I’ve got lots of acquaintances but they wouldn’t come into the apartment. That’s my own doing, I can’t think of anything worse than people constantly trooping in.

(Karen, pers. comm., 1 June 2005)

Karen is obviously different from the other two women in the sense that she entered her current retirement village with a full awareness of what retirement village living was like and was able to decide from the outset whether or not she wanted to be involved. It seemed that
she had decided that the level of involvement she had at her first retirement village was enough for her and that she was content to sit in her apartment and watch the world go by.

Despite their obvious intellect and organisational abilities, these three women had chosen not to get involved in the day-to-day running and activities of their villages. This is itself is understandable. One can easily imagine wanting a restful retirement after such active working lives. However, what was more interesting was that several of the other women I spoke to who had not led such active working lives had chosen to be heavily involved in village activities, as had many of the men, regardless of their working lives.

Many of the residents, both male and female, who were actively involved in the activities of the village, spoke of their involvement as if they were doing the management of the retirement village a favour. Penny, a resident of a village in Auckland City, spoke of her husband trimming a tree and hedge directly in front of their unit and how this was saving the management a chore, even though by trimming the communal garden they are actually going against the wishes of the management:

"They don’t allow you to cut trees but we have because we’ve got a million dollar view just there and that hedge, well, that hedge was basically twice the size of that, right up, right up high so Bruce [her husband] didn’t like it and I didn’t like it. It was terrible, you pay your money to get in here and we’re prepared to keep it down like we have, it’s not burden to us. And then there’s this big tree here that’s in front of us, we cut that down like we have … and in the wind it blows when they keep it up like that. And they haven’t got enough gardeners in the place for all the people that they want to please. So Bruce cuts it and trims the hedge like that just to keep it the way we want it. And we’re keeping it nice for them."

(Penny, pers. comm., 15 June 2005)

Penny seemed to believe that the management should have been grateful to her and her husband for trimming the trees, even though the management had told her husband on several occasions that he should not have cut the trees and that it should have been left to the maintenance staff. She spoke of how residents are supposed to have the permission of management staff before altering the gardens or their units in any way but how she and her husband usually did not bother to get permission because they regarded their unit and the surrounding garden area as their home and therefore they should have the right to make changes as they see fit.
This brings up an interesting issue regarding retirement villages and their residents. Most retirement villages market themselves as providing a home for their residents. It is not uncommon to find references to home on the websites of retirement villages. For example, on the Frequently Asked Questions page on the Waiheke Retirement Village website the answer to the question ‘Can my friends and family stay with me?’ is:

Yes. Your house is your home and naturally you can have visitors at any time and your guests may use any of the villages [sic] fine facilities, however permanent live in guests are not allowed.

(Waiheke Retirement Village, 2005)

This is an interesting point because although the management of many retirement villages are careful to encourage residents to treat the village like their home, they are not willing for residents to make it their home as they would in a house in the general community. While it is understandable that the management would have to place some boundaries on what residents can and cannot do to their units and the surrounding area, this seems to often be a cause of misunderstanding between the residents and the management. Residents have usually moved into a retirement village from their own home and are therefore used to being able to make changes when and where they please. Residents tend to either be scared of the management and not willing to make any changes or defiant of the management and will make the changes they want, regardless of the opinions and wishes of the management.

Some people I spoke to were very involved in life inside the retirement village but not involved at all in activities outside of the village. Reg and Jean live in a retirement village on Auckland’s North Shore. Both had led active working lives, Reg had been an officer in the New Zealand Navy while Jean had raised their children almost single-handed, as many military wives found they had to. Reg and Jean are independent people who enjoy their space. Initially they thought any dwelling in a retirement village facility would be too small for their needs. However, they enquired about living in a particular retirement village prior to the village being completed and found that the management were open to them requesting some changes in the size and look of their particular villa. This was instrumental in them making a decision to move into a retirement village. When I spoke to Reg and Jean, they had lived in the village for nearly five years and stated that there was only one activity outside of the village that they were still involved in. This is not to say that they lead boring lives at all, they were both very involved in village life, serving on various committees and making the most of
the facilities provided in the village. Penny was another resident who made full use of the facilities in the village and chose not to continue with activities outside of the village:

… the swimming pool, eating, indoor bowls, outdoor bowls, as much as I can fit in I’ll do. And I go to a stroke club on a Thursday morning which is very good and we go to Mass on Tuesday morning and you meet different people at each thing and you see them only once a week and it’s nice to get down there and have a chit-chat and it’s really good. Hopefully I can be involved for a long time.

(Penny, pers. comm., 15 June 2005)

Penny was particularly interesting as she is the (self-proclaimed) youngest person in her particular retirement village. There has been some talk in the literature of younger residents not mixing with older residents. For example, Burgess (1991) found that many younger residents believed the older residents were too old and frail to participate in the village activities. This did come up in my discussion with Penny but Penny’s main concern with the older residents was one of space. She said that the communal area was not large enough to accommodate the walking frames and walking sticks used by the older residents of the village. She also mentioned that she finds some of the older residents have a negative attitude towards village life and finds that the older residents are often miserable and difficult to socialise with. This however was a secondary concern compared to the space issue.

Daisy and Larry live in a large village in Mount Maunganui and, like Penny, are among the youngest residents in their village. When asked how this suits them, they replied that they did not find it to be a problem at all. Prior to moving into a retirement village Daisy and Larry had played indoor bowls for many years and thus were used to associating with people older than themselves. They definitely did not consider being the youngest in the village as being an issue at all and, as Daisy pointed out:

Someone’s got to be younger, don’t they?

(Daisy, pers. comm., 10 August 2005)

Daisy and Larry were unique among the residents interviewed for this research in the sense that they have achieved a balance between activities inside the village and activities outside the village. When they showed me around the village they seemed to know a relatively large number of people and were able to point out where the activities they are involved in take place. However, they both still play indoor and outdoor bowls competitively at a national level and usually play bowls at a club outside of the retirement village. Larry mentioned that
he believes it is important for people living in retirement villages to maintain links outside of the village:

We spend as much time out of the village as we do in it. We both play indoor bowls, we play a lot of indoor bowls and in summer I’m playing outdoor. You know I play quite a bit of outdoor so we’ve got activities outside the village and you’ve got to keep that up whilst you’re able.

(Larry, pers. comm., 10 August 2005)

Daisy and Larry are the only people I spoke to who had moved a great distance to live in the village they were in. Originally from South Auckland, Daisy and Larry had moved to Mount Maunganui in the Bay of Plenty for their retirement. Most retirement village operators interviewed for this research indicated that their catchment zone is primarily a ten kilometre radius around the village. This is supported in the literature by Mansvelt (2002) who states that most residents move into retirement villages in their local area. It is possible that retirement villages in the Bay of Plenty are the exception to this rule as the Bay of Plenty region has a reputation for being the home to a large number of retirement villages and older people. The median age in the Bay of Plenty region is slightly older than the national median age and there is a higher proportion of couple-only households in the Bay of Plenty than in the rest of New Zealand as a result of the slightly older population (Cook, 1999).

Retirement villages in New Zealand are often clustered and are located surprisingly close to one another. This means that even if potential residents know the area that they wish to retire in, they still have a choice regarding which village they will live in. The reasons given for choosing a particular village and for moving into a retirement village in the first place are as varied as the residents themselves.

6.3 Why move into a retirement village?

The reasons given for moving into retirement villages are many and varied. However, the reasons given by the interviewees in this research did not differ much from the reasons cited in the literature. Mansvelt (2003) conducted a study involving four retirement villages and asking residents about their reasons for moving into the retirement village.
6.3.1 It’s time to move

One of the most common reasons given for moving into a retirement village were changes in circumstances and a ‘time to move’ mentality. Many people, especially women, move into retirement villages soon after their partner has passed away as a means of staying independent within a perceived ‘safe’ environment (Mansvelt, 2003). Daisy, Larry and Penny, all among the youngest residents in their respective retirement villages, all warned against this. They all believe that it is better for older couples to move into retirement villages together and make friends and networks together, so that if one passes away the support network is already there. This was a view echoed by at least one retirement village operator interviewed for this thesis. Keith is involved in the operation of a trust owned complex in South Auckland with retirement village, rest home and hospital facilities. Keith believes that making a permanent move soon after the death of a spouse will not help the remaining spouse to move through the grieving process and says that he would encourage people who have recently experienced the death of a spouse to wait a while before making such a potentially harmful decision. This is a view supported by Barrie Flint (2001), an ex-manager of a retirement village and author of a guide to retirement villages as an accommodation option:

\[
\text{The decision over whether to move into a retirement village or not is a personal one. It should, however, be made in consolation with relevant professionals – doctors, lawyers, financial advisors – and family. Most importantly, it should not be made in a rush, especially at a time of emotional stress such as a recent bereavement.} \\
\text{(Flint, 2001: 23)}
\]

The idea of moving into a retirement village after the death of a spouse was interesting as it tends to conflict with the advertising and marketing methods used by many villages. As in the USA, retirement village advertising is usually based around the image of the ‘active retiree’ (Mansvelt, 2005). Figure 5, taken from the website of Auckland retirement village, Eastcliffe on Orakei, shows this. This image shows a young old couple enjoying their retirement completely. This image is typical of many images used to promote retirement villages. However, when questioned, the residents do not often acknowledge the ‘leisured lifestyle’ supposedly gained from retirement village living. Nor do they mention that they moved into a retirement village to resist ageing (Mansvelt, 2005). Instead, many residents of retirement
villages chose this lifestyle as a means of adapting to the ageing process, rather than resisting it:

Purchase of and living in retirement village dwellings were seen as means of adaptation and coping rather than resistance to their embodiment as old. As one resident stated, ‘The only trouble is we’re all old. Everybody’s old.’ Living in a retirement village was for the majority not about the resort or the leisured lifestyle promoted in advertisements. (Mansvelt, 2005: 88)

I found this to be the case with most of the interviewees in this research. Although many of the retirement villages visited have plenty of facilities to allow residents to lead an extremely active retirement, none of the residents mentioned this when interviewed. Most had moved into the retirement village for far less tangible reasons such as security and a feeling of community spirit within the village. Another interesting point to be made here is the use of the facilities. I visited the villages at various times of the day, depending on when the particular resident or operator was available to talk to me. Many of the villages I visited had large indoor heated swimming pools, bowling greens and large common spaces, among numerous other facilities. Not once did I see anyone using a swimming pool. Only once did I see people using a bowling green (one of my interviewees had to rush off to bowls) and I only ever saw small groups of people utilising the common spaces.

6.3.2 Lifestyle

Retirement village living appears to be similar to life on holiday and several of the residents claimed that this is indeed the case:

… it’s just like being on holiday. (Penny, pers. comm., 15 June 2005)

However, although many residents expressed similar views to Penny, they then went on to described lives which would not be at all described as holiday lives. Many people described working in part-time employment, either paid or voluntary. Voluntary work undertaken by the residents of retirement villages was not necessarily charitable work. Many residents were involved in voluntary work within the village, such as serving on committees, working in the bar during happy hour or helping with gardening. It appears that many residents are unable or unwilling to let go of their working lives and they feel active and healthy by working, not by pursuing leisure activities all day. In one retirement village in Tauranga, I had an appointment with the manager at 9am. Within two minutes of having met the manager, his pager sounded
and he was required to assist a resident who had pushed their emergency call button. He asked me to sit in the common lounge area of the main building in the village to wait for him. This area had a view over the common outdoor area of the village which included gardens and outdoor seating spaces. This village was designed as a square shaped block of apartments with the common outdoor space located in the centre which was overlooked by all apartment balconies. From where I was sitting I was able to see anyone using the common space or on their balconies. In the short time I was waiting for the manager, I observed two elderly women on their balconies. This seemed strange; it was 9am on an August morning and although it was sunny, it was definitely not warm. I would have been surprised to see anyone outside at that time, let alone two elderly women. As I watched, one started to clean her windows while the other swept cobwebs away from the doorway. This was interesting as these women would almost definitely have qualified for some sort of home help to assist them with these types of tasks. It appears that many older people are capable of carrying out simple home maintenance and cleaning tasks and require company and companionship rather than practical assistance in the home. It appears that many residents are kept active by a certain amount of housework and that they move into retirement villages for less tangible reasons than maintenance requirements. It was also interesting that they chose to undertake these cleaning tasks at such an early hour. It seems to indicate that although they can live a holiday lifestyle, many residents of retirement villages choose not to.

It was quite common to visit a retirement village during the day and not see anyone outside of their own dwellings. I found this unusual as it is easy to create an image of retirement villages being overly social spaces and one tends to expect to see people around all of the time. Apparently, my experience in this case is not unique:

> Driving through Sun City, however, can create an image of an abandoned place. There are people on golf courses but they are often the only visible characters on the landscape. All the other activity is hidden from view in the private compounds of the crafts villages, the recreation center or the bowling green tucked in behind these areas.  

(Laws, 1995: 270)

While Laws (1995) is talking about much bigger retirement communities than any that exist in New Zealand, this was true in several retirement villages I visited in the course of this research. One particular village in Mairangi Bay on Auckland’s North Shore had a particularly empty feeling when I visited. I was reminded of the odd occasions upon which I have walked through a school during the weekend. Although this surprised me initially, it is
of course unreasonable to expect older people to be active in village activities all of the time. Retirement villages promote themselves as providing facilities and resources for older people to lead full and independent lives. They also allow for residents to be involved in activities and lead generally active lives, if they wish to. However, the residents are under no obligation to partake in any activities if they do not wish to. While I did meet some residents of retirement villages who participated in as many activities as possible, most were selective about which activities they were involved in. This seems to indicate that most residents are keen or slow down the pace of their pre-retirement lives.

Derek and Mabel, both of whom are significantly older than Daisy, Larry and Penny, found the move to a retirement village difficult and Mabel even admits that she hated the retirement village when she first moved in. However, they have no family and felt it was best to move into a retirement village while they were both still reasonably healthy and independent:

> It was better for us to make that sort of break while we’re still ticking over and still able to do things rather than having to be forced into doing it for your health or something.

(Derek, pers. comm., 8 August 2005)

Mabel mentioned that she does not like being alone. It was also mentioned in the conversation that Derek has been diagnosed with a form of cancer and it was implied that one reason for moving into a retirement village was to prevent Mabel being alone if Derek was to pass away.

Many move because they want to be independent and do not wish to become a burden for their children and grandchildren (Mansvelt, 2003). Surveillance was an important point here and many people experience a feeling of safety in numbers, they feel safe because they know there are people around all of the time. In these cases, retirement villages with rest home and hospital facilities are particularly popular because older people and their families do not have continuing care worries:

Many participants described an intangible feeling of ‘just knowing’ it was time to consider moving from their present dwelling, and many mentioned the retirement village was an attractive proposition and they would only have to move once. The freedom to choose while still capable was vocalised by all groups and adjustment to a new environment earlier rather than before they were ‘too old’ appeared to be part of this rationale.

(Mansvelt, 2003: 220-221)
This final point was something mentioned in an interview with Karen, a resident at a relatively large retirement village in West Auckland. Karen said that often people living in retirement villages did not feel it was their decision to enter the retirement village and therefore did not enjoy living there. Karen said that the children of many older people make the decision to sell the house after the death of one parent and assist the other parent to enter a retirement village. However, because of the close time proximity between the death of the spouse and moving and because the older person did not feel it was their decision to enter the retirement village, they often do not settle into the retirement village lifestyle as well as they could have.

Many older people are attracted to retirement villages by the lifestyle promised by the villages. There is a public perception that retirement village living is relaxed and stress free. Many are also attracted by the fact that they will be able to live active independent lives in a supportive environment with other older adults (Mansvelt, 2003). Many residents of retirement villages are keen to free the villages and themselves from the image of rest homes or nursing homes and to accentuate the active environment of the retirement village:

> Even if the village offered ongoing care and hospital facilities, a sharp distinction was made in terms of coming to a village (a place to live) and going to a rest home (a place to exist before death).

> (Mansvelt, 2003: 221)

While the characteristics of and facilities offered by retirement villages are definitely considered when choosing a village, most residents describe an intangible feeling of being ‘at home’ in the village when first visiting. (Mansvelt, 2003). Financial issues were also important when choosing a village but it was the less tangible aspects of retirement villages which provided the main attractions:

> Quality of environment and dwelling were important (nice landscaping, not feeling closed in, not looking directly into your neighbour’s home), but it was a sense of ‘fitting in’ and ‘being at home’ in place which appeared to be of greater significance.

> (Mansvelt, 2003: 221)
For many, it was the obvious convivial environment provided by the village which was most attractive (Mansvelt, 2002). However, Grant (2003) claims that the conviviality of the village was very much dependent on the residents of the village:

As for any community, the residents are dependent on the spirit and energy of self and others who live there to ensure cohesion and a good quality of life for all.

(Grant, 2003: 138)

Mansvelt (2003) discusses how for many older people, it was a need for companionship which spurred them into purchasing a unit in a retirement village. Many older people, especially those who have been widowed want to live again in an environment where there are people around during the day and there are people to talk to. This situation often no longer exists in suburban areas where most adults go to work every day and most children go to school. This is something found not only by academics. Greg Tomlinson, owner of Qualcare, a trust which early in 2005 purchased twelve rest homes previously owned by Presbyterian Support, found this out before he got into the aged care industry. In the 1980s he built townhouses and found that many elderly buyers would phone him sometime later asking him to assist with a small maintenance problem:

“More often than not it was a cup of tea and a gin with them,’ he says. “It was more of a companionship thing.” He realised that older people needed somewhere that provided that companionship, and became a pioneer of the retirement village with rest home attached. His first resident was his own grandmother.

(Collins, 2005c)

However, it was common for residents to say that people are friendly and companionable but not intrusive at all. Most of the residents interviewed found this to be the biggest benefit of retirement village living. Graham and Tuffin (2004) also found this to be true. They found that the most commonly cited reasons for moving into a retirement village were needs for companionship, privacy and security (Graham & Tuffin, 2004).

The Abbeyfield Society originated in England in the 1950s under very similar circumstances. Richard Carr-Gomm realised in his work as a voluntary home helper that for many of the older people he visited he was their only visitor and that they were often more desperate for someone to talk to than the help he was actually there to offer. He then purchased a home and invited a few older people to live in it with him with the arrangement that they would all contribute to the costs of the house and Carr-Gomm would undertake tasks such as shopping.
Climate can be an important issue when potential residents are considering moving to a retirement village a great distance from their home. Daisy and Larry are the only people in this research who moved a significant distance to move into a retirement village. Moving from Papatoetoe in South Auckland to Mount Maunganui in the Bay of Plenty, they admitted that this was not an easy decision to make. Daisy’s mother is still living in Auckland and this made it difficult to move away but in the end they felt they had to make a move. Larry was originally from the Bay of Plenty and still has siblings in the area as well as having good friends in the area. Daisy and Larry also mentioned an attraction to the area because of the climate. Because of the small size of New Zealand, moving in retirement for climate is not something we see often. It is not unusual to move to so-called therapeutic landscapes in retirement, such as coastal areas:

In this sense the coastal landscape is ‘therapeutic’ not just in terms of its physical or climatic character, but also through its imputed social characteristics, and historical layerings as a healthy place.

(Kearns & Andrews, 2005: 20)

However, this is usually close to where the person lived originally. In larger countries such as Australia and the USA, moving to warmer climates for retirement is not uncommon at all and there are many retirement villages located in areas such as Queensland in Australia and the Sunbelt states of the USA. However, the Bay of Plenty region, and Mount Maunganui especially, does have a record of having more hours of sunshine per year than most of the rest of New Zealand (Meteorological Service of New Zealand, 2005) thus contributing to this area becoming particularly popular for retirees.

While it is easy to be logical and sensible when considerable moving into a retirement village, none of the interviewees (with the exception of Karen) really had any realistic idea of what retirement village living would actually be like. They were taking a huge risk by selling their homes, knowing that they would definitely lose money if they decided that the lifestyle did not suit them. Fortunately most of the residents had positive experiences and opinions to share about retirement village living.
6.4 Experiences of retirement village living

…it was the best move we ever made.  
(Reg, pers. comm., 8 June 2005)

Many of the residents interviewed for the purpose of this thesis expressed similar sentiments when asked if they were happy living in a retirement village. Most were happy they made the decision to move into a retirement village and were enjoying life. The people interviewed for this research could only be described as an eclectic group of individuals. They had led very different working lives to each other and were enjoying their retirement in different ways.

Many of the residents I spoke to for this research were leading very active lives in retirement and were often involved in various activities both within the retirement village and outside of the village. When making appointments to meet with these people it was often difficult to find a time that suited both of us, made even more difficult if I was interviewing a couple. However, FitzGerald (1986) suggests that while many residents of retirement villages are ‘active’ very few of them are actually ‘busy’:

And there are a great many people who, while active, are not really very busy. When a golf cart breaks down in some public place, a dozen men will collect around it to kick the tires and trade theories about the electrical connections.  
(FitzGerald, 1986: 227)

I found this particularly interesting because retirement villages market themselves on providing an accommodation option for older people which will allow them to be as active as possible in their old age, yet FitzGerald (1986) appears to be insinuating that leading an ‘active’ life is somehow negative. It seems that FitzGerald is somehow missing the point of the lifestyle provided by retirement communities. Retirement communities exist to allow older people to age positively and to help them feel that they are still contributing to society. Many retirement villages provide workshop spaces in which residents (usually men) are able to undertake any manual tasks they wish to. Many men of the generation currently occupying retirement villages would have been brought up to be able to complete manual tasks with ease and many will wish to continue this into old age. FitzGerald (1986) suggests that the men in Sun City communities are bored and spend their time waiting for an opportunity show off their skills and knowledge. While this may well be true, FitzGerald (1986) does not seem to consider the possibility that the men may be genuinely interested in the mechanical workings of the golf cart. She also seems to intimate that because the residents of retirement
communities are not leading what she would describe as ‘busy’ lifestyles, this is somehow a negative thing. Much of the focus in policy and society today is to allow older people to age positively and to engage in the activities they enjoy in older age. Many of the men interviewed for this research indicated that they still enjoy being able to partake in a range of physical activities. For example, when Reg and Jean purchased their unit the retirement village was still being built so they were able to make some changes in the size and composition of their unit. One of the changes they made was to extend the garage to incorporate a workshop space for Reg. Derek stated that he carries out some maintenance, even though he is not required to:

I do the gardens around here but I do them by choice, I don’t have to.

(Derek, pers. comm., 8 August 2005)

Several of the residents enjoyed gardening and said that one of the best aspects of the village was the freedom to involve themselves in the maintenance of the gardens if they wished but knowing that if they were not able to, the gardens would be maintained anyway. When asked about the benefits of living in a retirement village, many people mentioned that they are happy to be relieved of the responsibility of home and garden maintenance but still chose to be involved in gardening activities. Many of the villages provided communal garden areas where residents could choose to have an allotment in which to create their own garden. It appeared that the one thing that residents of retirement villages gain most from village life is a release from the maintenance tasks that they do not enjoy or are unable to do while still able to do the tasks that they enjoy and are able to.

Most of the residents interviewed for this research enjoyed living in a retirement village and many claimed it was the best move they had ever made. However, I know from the experience of a family member that the retirement village lifestyle does not work for everyone. Some people move into retirement villages too soon after the death of a spouse or they simply find that the retirement village lifestyle is not for them. Mabel lives in a retirement village owned by a large company on the outskirts of Hamilton City. Mabel and her husband Derek have lived in this retirement village for 2½ years and although Mabel is now used to the village, she says she hated it initially:

I couldn’t stand it but I’m getting used to it. I had to weigh up what were the pros and cons of this place and sort of work out from there and a pro is the protection. We have security people that come up every hour every night, and I’ve watched them. At about 7pm they start and they go around the
windows. … I know you’ve got to explain to the elderly, I was a nurse … for years and I know you’ve got to explain to the elderly and be patient with them and that sort of thing but I feel that there’s too much of that.

(Mabel, pers. comm., 8 August 2005)

One of Mabel’s primary issues was that she felt that members of the management staff of her particular village were patronising towards older people and she felt that they were sometimes treated like children. However, she was also careful to make the point that how older people are treated in the community and in the village depends very much on the behaviour of the person. In Mabel’s opinion, young older people who appear to be dependent and old will be treated as if they are helpless while very old people who are fit and active will be treated accordingly. Mabel is not alone in this opinion. Karen was in her eighties when I spoke to her and finds it difficult to move around without a walking frame. However, she believes that older people who use walking frames in the community will be treated as if they have lost their mental as well as physical capability:

… especially with the walker … they think your brains are gone. No-one takes any notice because they think you’ve gone completely.

(Karen, pers. comm., 1 June 2005)

Despite Mabel and Karen’s opinions about the treatment of elderly people, most of the interviewees were extremely positive about their experiences living in a retirement village and were generally positive about their interactions with the management. Many residents cited an occasion when they approached the management about making a change of some description and found that management staff were generally receptive to any suggestions and would usually grant reasonable requests. For example, Mabel talked about nurses taking blood samples from residents who needed blood tests. When Mabel first moved into the village this took place in a common space. However, Mabel thought that this should have been done in a private space and said so at a village meeting, resulting in the creation of a pathology lab within the village.

Reg and Jean were particularly fortunate when it comes to management making changes. They first investigated the possibility of moving into a retirement village when the village they currently live in was first being built. Upon telling the management that they thought the houses in the village would be too small for them, the management suggested enlarging the unit to suit them:
If you buy into a village that’s existing you take what’s there. You usually aren’t able to alter too much inside. We added all that in, that extra sunroom, and pushed the walls out, resized the garage, made one garage into a study, had an extra bedroom put in and an extra bathroom so that that bedroom’s got its own en suite, so you know, these are all things which we felt we needed to be comfortable and at home. And normally you don’t get any of that, you just take what’s there.

(Reg, pers. comm., 8 June 2005)

Reg and Jean were lucky, firstly to have approached the management of the village early enough to be able to make changes and secondly to have found the management open to suggestions for change. This is a highly unusual case, although Penny spoke about having the management make some changes to the unit before she and Bruce committed to the village. However, Penny gave the impression that the management did not make changes so much as simply refurnish the unit after the previous owner had left to bring it up to the standard required for resale.

Many of the residents spoke about having the option of ongoing care, if they needed it. Most of the villages visited in the course of this research provided continued care of some description. However, the residents spoke of the ongoing care facilities as if they were glad it was there but did not wish to dwell on its existence. Mabel and Derek described their village as providing three stages of accommodation: the independent townhouse (where they lived), the serviced apartment and then the rest home. However, of the rest home facility Derek had this to say:

You’re on ‘skid row’ once you go over there.

(Derek, pers. comm., 8 August 2005)

Reg and Jean’s village did not provide continuing care of any kind and they accepted the fact that they would have to move out if they found they were not able to care for themselves. It was interesting that they were so accepting of this because many of the other residents expressed relief in the knowledge that moving into a retirement village would be their final move.

Most of the residents interviewed for this research were generally positive about their experiences of retirement village living. Even those who had problems and issues with their
village or the management had concluded that they believe that the advantages of retirement village living outweigh the disadvantages.

6.5 Conclusions

As has been clearly shown, older people do not lose their identities when they age. They often lead very busy lives and are still aware of the world around them and have valid opinions. This is something that younger generations need to remember if young and old are going to continue to live together harmoniously. This is an issue which is becoming more and more prevalent as the population continues to age and before long the elderly population will include our parents, relatives, friends and, eventually, ourselves. It is important for us to remember the contribution that retirees made to society as working people and the contributions they continue to make as part-time workers, volunteers, parents, grandparents and friends. Residents of retirement villages are no exception to this. I have found them to be, for the most part, highly intelligent and personable people. They tend to be well educated people with well-formulated opinions. It was a privilege to be invited into the homes of these people and have the opportunity to talk to them about their experiences and opinions.

All of the residents interviewed for this thesis entered into the retirement village that they live in with an open mind. They thoroughly researched the accommodation options available to them and were well informed when they made the decision to enter a retirement village. Many spoke of Flint’s 2001 book, *Lifestyle Retirement – A New Zealand Guide to the Retirement Village Option*. This book gives potential residents of retirement villages a step-by-step guide to choosing a retirement village and all the issues that surround retirement village living and is written from the perspective of an ex-manager and current resident of a retirement village (Flint, 2001). As a result of making an informed and educated decision regarding their living situation, most of the residents interviewed for this research reported that they had experienced a positive lifestyle in the retirement village setting and had never regretted making the move. Those who had experienced problems with retirement village living reported that these problems were generally minor teething or adjustment issues or small administration problems which were easily dealt with.
Financially, the retirement village lifestyle is not a living option open to all older New Zealanders.

You’ve got to have some money to come in here and if we hadn’t sold our house and got what we wanted for it we would never have been here and just luck would have it that when we sold our house … it went just like that. But there’re lots of people who would like to come in here but they can’t afford to come in here.

(Penny, pers. comm., 15 June 2005)

Penny is probably correct, there are probably people who would like to enter retirement villages but simply cannot afford to. There are also probably people who would benefit greatly from the convivial environment of a retirement village. However, the majority of older New Zealanders own their own home freehold. If they so desired, they could sell their home and would be in a good position financially to purchase a unit in a retirement village. Therefore, it would be wrong to conclude that retirement village living is an elite accommodation option for older New Zealanders and that is why the proportion of older people living in retirement villages is not increasing. We are forced to conclude that the retirement village lifestyle is a financially accessible option for many older New Zealanders. It appears, quite simply, that the retirement village lifestyle does not suit all older New Zealanders and many choose to ‘age in place’ by staying in their own homes.
Chapter Seven
Conclusion

Somehow signing on the dotted line to live in community with a whole bunch of other oldies is admitting you too are old, that you can’t manage out in the big wide world anymore, that you have entered an inevitable one-way journey.

(Phare, 1995: 23)

7.1 Introduction

This thesis has examined the role of retirement villages in New Zealand’s ageing society and has discussed how this role has changed in recent times and how it may continue to change into the future. Retirement villages are without a doubt a significant housing option for older people in New Zealand but they are definitely not the most significant or popular option, nor do they need to be. This chapter will begin by briefly revisiting the aims of this thesis and provide a brief summary of the thesis findings. This will be followed by a section of comment on the future of the retirement village industry before offering some suggestions for the future for the industry, policy makers and the literature. I then make some suggestions for further research in this field before making a brief concluding statement.

7.2 Aims and summary

In this thesis I set out to do three things. Firstly, I aimed to analyse the role of retirement villages in providing accommodation for New Zealand’s ageing population. Secondly, I investigated whether or not retirement villages need to be a more accessible housing option for older New Zealanders. Thirdly, I looked at the regulatory issues facing retirement villages, their operators and residents.
7.2.1 The role of retirement villages

It is widely known that there are many housing options available to older New Zealanders. Most older New Zealanders choose to stay in their own homes and this is supported by the New Zealand government’s policy of ‘ageing in place’. However, ‘ageing in place’, while it is by far the most popular and financially accessible option for older New Zealanders, has its own problems. Many people find themselves lonely living on their own. They find that the once bustling suburbs are now practically empty during the days now that more women go out to work. They also find that they are lonely and scared at nights and older people, especially those who no longer drive, find themselves isolated and unable to access services and resources needed to ‘age in place’ positively.

Some older New Zealanders find that moving in with family members or close friends can alleviate these problems. However, this can sometimes involve moving away from an area they know well and moving away from services and networks they rely on such as their own doctor, the local bank or their church community. Many older people who move in with family feel that they are a burden or they find that they are unable to cope with the constant noise and activity associated with living with young people.

Abbeyfield housing can provide a semi-supportive yet independent environment in which residents have support and companionship when needed but allows the older person to be as independent as they wish to be. However, the Abbeyfield Society is small and currently there are only four Abbeyfield houses operating in New Zealand. While the Abbeyfield concept has potential it needs to be expanded considerably to become a significant housing option for older New Zealanders.

Full time residential care is another option available to older New Zealanders. However, many people aged over the age of 65 are relatively fit and active people and are not yet ready for full time care. Many require companionship only and find that full time residential care does not suit them.
The retirement village option provides independent living within an age-segregated village situation. Retirement villages pride themselves on offering their residents a supportive environment in which they can be completely independent but can access care and support if and when they need it. Age-segregated communities such as retirement villages have been criticised for preventing older people from interacting with younger generations and alienating older people from the wider community. However, they have also been praised for providing security, support and independence to people who would be vulnerable in the community.

Retirement villages are a highly visible accommodation option for older New Zealanders. They are often attractive looking developments which physically take up a lot of space. However, only about five percent of New Zealanders aged 65 and over live in retirement villages. As a proportion this figure is not increasing. The retirement village industry continues to grow because the sheer number of people aged over 65 is growing but the proportion of older New Zealanders choosing to live in retirement village accommodation is not increasing:

They’re a very small part of the accommodation options for older people but what they offer for those people is very positive.

(P. Turner, pers. comm., 23 June 2005)

7.2.2 A more accessible option?

Traditionally retirement villages have been seen as very elite spaces as it is often necessary for intending residents to make a considerable financial investment into the retirement village facility. It can be argued that if an older person has owned their own home then they should be able to afford to move into a retirement village. While some retirement villages have luxury accommodation available which costs upwards of $1 million to buy into, this is the exception rather than the rule and most retirement village units are priced significantly lower than this. For example, the Private Life Care New Zealand group (which owns Hibiscus Coast Village, Hillsborough Heights and Longford Park Village and was recently taken over) prices their most expensive units at just over $300,000, a price which is certainly not unrealistic in Auckland’s current housing market (Private Life Care New Zealand Ltd, 2005).
While none of the interviewees in this research felt that retirement village living was entirely accessible to all older New Zealanders, none of them felt that it needed to be. While some definitely wanted to retain the image of retirement village living as an elite living option, many felt simply that not everyone wished to live in retirement village facilities and that the retirement village lifestyle is as accessible as it needs to be. There was also a view that retirement village living will inevitably become more accessible as the population continues to age. Petrina Turner from the Retirement Villages Association stated that although the religious sector seems to be opting out of the aged care industry, there will still be a need for cheaper accommodation options for older people.

Accessibility did not appear to be a major issue for the interviewees in this research. It was generally believed that those who wanted to live in a retirement village were able to access this living option. While the interviewees agreed that moving into a retirement village is not cheap, more than one resident pointed out that as long as the older person owns their own home prior to moving into a retirement village (most older New Zealanders do own their own homes) it is definitely possible to live on government superannuation while living in the village. It is possible that retirement village living will become more accessible as the Selwyn Foundation continues to expand its empire.

7.2.3 Regulatory issues

As New Zealand’s population continues to age, legislation directly influencing issues relating to older people is becoming more important. The government has implemented strategies such as the New Zealand Positive Ageing Strategy and the Health of Older People Strategy, both of which have direct impacts on the ageing society. These strategies both emphasise the concept of ‘ageing in place’. This concept aims to provide easy access to resources and services in the community, allowing older people to remain in their own homes for as long as possible. Other strategies such as Building the Future: The New Zealand Housing Strategy have effects for the ageing population but not as directly as the other two.

The Retirement Villages Act 2003 is the one piece of legislation particularly relevant for the purposes of this research. The Retirement Villages Act provides protections for residents and intending residents of retirement villages and provides guidelines and requirements for retirement village operators. The Retirement Villages Act sets out a definition of a retirement
Chapter 7: Conclusion

village, thus removing any confusion that may have existed regarding which facilities the regulations apply to.

7.2.4 Findings

The findings for this thesis have been divided roughly into three sections – findings from the policy, findings from the operators and findings from the residents themselves. The policy analysis carried out for this research focused primarily on the implementation of the Retirement Villages Act and the effects that this will have on the industry. Analysis of the strategies directly affecting the lives of older New Zealanders revealed a governmental policy of ‘ageing in place’, a policy which is not restricted to the New Zealand government but has been taken on by other organisations as well, both in New Zealand and overseas.

The operators interviewed for this research were all adamant that the Retirement Villages Act would have little or no effect on the operation of their particular village, although all were convinced that it would have major effects on the operations of other villages. Many of the operators believed that there were enough aged care facilities already existing in their area and did not feel that the industry needed to be expanded at all. Most employ a screening process of potential residents. While this is sometimes a social screening process (looking for people who ‘fit in’) they usually focus on health, looking particularly to exclude people who have dementia and for whom living independently would be a challenge.

Most of the residents believed that they had made a good decision in moving into a retirement village and many cited issues such as loneliness, fear of crime and declining health as reasons for choosing the retirement village lifestyle. Many believed that their lives were busier and fuller in the retirement village than they were before they moved in and many stated that they are no longer involved in activities outside of the village. All the residents seemed well informed about the operation of the village and any legislation which would affect the village, its operation or the residents. The option of retirement village living was not seen to be a completely accessible accommodation option for older New Zealanders but this was not seen to be a problem.
7.3 The future

There can be no argument that as New Zealand’s population continues to age, facilities serving the ageing population are going to become more crucial. Housing is no exception to this. Older people will need places to live and retirement villages will continue to play an important role in providing housing for some older New Zealanders. However, the industry will continue to change in terms of the ownership of the villages and the operation of many of the villages.

It has been suggested that the industry will continue to consolidate as churches and charities continue to exit the village, with their operations being purchased by existing operators. The Retirement Villages Act 2003 makes it nearly impossible for a retirement village operator to sell a retirement village as anything other than a going concern. It therefore makes sense that most of the organisations purchasing already established retirement villages will already be active in the aged care industry. There have been suggestions that the aged care industry in New Zealand will continue to be taken over by overseas companies, particularly Australian owned operators. The fact that Australian operators continue to be active in purchasing New Zealand retirement villages indicates that the New Zealand retirement village industry is seen to be a good investment by overseas investors. However, I believe that the suggestion that by early 2006 all retirement villages in New Zealand will be owned by Australian companies may not come completely true. I agree that all the private and listed companies currently operating in New Zealand may come under Australian ownership, and the charitable villages may continue to be sold to overseas companies. However, I believe that the Selwyn Foundation will continue to be active in the New Zealand retirement village industry and will continue to purchase struggling aged care facilities around New Zealand. I do not believe the Selwyn Foundation will be taken over by anyone, Australian or otherwise, in the near future. They are a significant player in the aged care industry in New Zealand and are focused on providing care and love to their residents rather than providing shareholders with a profit. This makes the Selwyn Foundation unique in the aged care industry because they are able to concentrate on their work with older people and do not have the overarching hassle of providing a return to their shareholders. The Selwyn Foundation may end up being the only New Zealand owned and operated player in the retirement village industry and indeed in the aged care industry as a whole, thus making them an organisation to watch carefully into the future.
The retirement village industry is likely to continue to change dramatically. The exit of the charitable operators from the industry has meant that the prices in some villages have risen dramatically, particularly those previously run by charitable groups which have been taken over by private companies. However, the fact remains that retirement village housing is still not overly popular as a housing option for older New Zealanders and raising the costs associated with retirement village housing will make it seem even less attractive. The industry is going to have to be creative in providing options to older New Zealanders in the middle income bracket. While there is definitely a demand for high-end luxury retirement accommodation, most New Zealanders simply cannot afford to pay upwards of $600,000 for a retirement unit and some simply do not want to. This is the case particularly for the young old age group who still have perhaps two or three decades during which they have to support themselves and will probably wish to spend some of their time and money on travel. Retirement village operators are going to have to come up with more payment options for their residents, along the lines of the equity release scheme.

7.4 Suggestions for the future

The retirement village industry is currently in a state of flux and has experienced a great deal of change in recent times. The industry itself needs to adapt their operations to continue to attract older New Zealanders to the retirement village lifestyle. The residents interviewed for this research were asked why they moved in a retirement village and why they chose the particular retirement village that they were living in. Not one of them mentioned the facilities provided by the village such as the swimming pool, bowling greens or gym. These were things they liked about the village but were not deciding factors when the residents were settling on where to live during their retirement. Residents were generally more concerned with issues such as security and continuing care. Peace of mind was of utmost importance, particularly for those still living with a spouse or partner. These people often found comfort in the knowledge that if one person needed continuing care then they would be able to access it on site, making visiting easier for the other person. Many also liked being in the village environment because it meant that if one partner passed away then the other partner would be in a supportive environment and would still have the network of friends and neighbours in the village that they had built up as a couple. Many retirement villages are beginning to move towards a lifestyle village plan, without providing continuing care facilities – an idea that may
put some people off if they know that they will have to move again before death. However, ElderLiving is starting to build continuing care facilities in their villages which will be accessible to existing residents only. In other words, all residents of continuing care facilities at ElderLiving villages will have previously lived in independent units or serviced apartments at the same ElderLiving village. This appears to be a more popular option for retirement village operators wanting to take advantage of the demand for continuing care facilities but not wishing to make this the focus of their operations. However, operators must exercise caution when implementing this type of arrangement. Ralph, the representative of ElderLiving, stated that the ElderLiving village in Remuera, Auckland, will have two beds in its continuing care facility (Ralph, pers. comm., 27 September 2005). While economically it of course does not make sense to have empty beds in a rest home facility, it is also does not make sense to have residents leaving the village altogether because they require continuing care and both the beds in the rest home facility are occupied. It is obviously not healthy for residents to continue to live independently when they can no longer cope simply because they are waiting, to put it crudely, for someone to die. Buys (2000) suggests that retirement village management could assist with provision of in-home care to combat this problem:

… in order to maintain independent living for this older group of people, it is recommended that retirement village management consider providing or organizing in-home, short and long term formal care-giving assistance as a part of their service provision.

(Buys, 2000: 150-151)

When the Retirement Villages Act 2003 is fully implemented, the policy relating to older New Zealanders living in retirement villages will be comprehensive and adequate. The Retirement Villages Act provides protections for residents and establishes firm guidelines under which owners and managers of retirement villages must operate. The implementation of the Retirement Villages Act was seen to be a positive step by both residents and operators of retirement villages. It is of course too soon to tell what impacts the Retirement Villages Act will have on the everyday operations of retirement villages and, more importantly, what impacts it will have on the residents. Thus, it is really too soon to suggest any future amendments to the Retirement Villages Act or to any other legislation relating to retirement villages.
The *New Zealand Positive Ageing Strategy* and the *Health of Older People Strategy* both take well rounded, holistic approaches to issues affecting older New Zealanders and both concentrate on the concept of ‘ageing in place’. ‘Ageing in place’ is an economically and socially sensible idea but does not help to deal with the loneliness felt by many older New Zealanders when they are living alone. Davey (2004) investigates the implications of not having transport for older New Zealanders and found that many older New Zealanders were stranded at home after they stopped driving. Davey et al (2004) pointed out that ‘ageing in place’ does not equate with ageing positively. Policy makers need to continue to attempt to provide older New Zealanders with access to services and resources in their own homes. A key step in providing this access will lie in expanding public transport facilities. Many older people find that they lose their ability to drive and thus rely on public transport and the generosity of friends, family and neighbours to access the services they need to age positively and independently in place. For many, losing the ability to drive means they are no longer active in clubs that may have formed a fundamental part of their lives, such as church, RSA or sports clubs. These organisations often provide older people with vital contact with both people of their own age and people of younger generations and give the older person something to look forward to, contributing to them ageing positively. Public transport needs to be developed in order for older people to keep up the networks formed in their younger days. Failing this, older people should be able to access reduced taxi fares in order to access services and resources in the community. It is not only older people living in the wider community who face transport issues. Davey (2004) found that older people living in retirement village facilities often had difficulties in accessing services also. Despite the fact that many people move to retirement villages for easier access to services, it was found that some residents of retirement villages still lead isolated lives because of transport difficulties (Davey, 2004).

The literature relating to ageing and to the retirement village industry in New Zealand and internationally is generally very extensive. My only suggestion regarding the literature would be for more geographers and planners to become involved in this topic. The ageing population is obviously a very wide topic which will have direct or indirect impacts on everybody living in an ageing society. The New Zealand government has taken a multi-departmental approach to creating strategies and legislation relating to the ageing population and this needs to be mirrored in the research sector. While some geographers such as Juliana Mansvelt and Robin Kearns have conducted research into ageing populations and issues affecting older people,
this is a topic dominated by sociology. I believe that human geography and planning have a lot to offer to research on ageing populations.

7.5 Where to now?

The population will continue to age, there can be no disputing this. In order to provide adequate services and resources to our ageing population, research in this sector needs to continue. There are several paths along which this research could continue.

7.5.1 Alternative housing

Retirement villages are definitely not the only or the most popular housing option for older New Zealanders. Retirement villages provide an important option for older New Zealanders but the reality is that very few people choose this option. The ideal housing situation would be for as many older New Zealanders to live independently in their own homes for as long as possible. Economically, this makes perfect sense. However, this can be detrimental to the health and wellbeing of the older person, especially if they are living alone with little or no access to resources in the general community. Alternative housing options for older people need to be investigated. I would particularly suggest an investigation into the feasibility of a non-charitable version of Abbeyfield housing. I think many older people would be interested in a less institutional form of communal housing. This is definitely something which should be investigated as a viable housing option for the future.

7.5.2 Retirement villages as exclusive spaces

As was touched upon in this thesis, retirement villages have an image of being exclusive and elite spaces. This exclusivity can occur by ethnicity, class and income. Further research could investigate more in depth whether or not retirement villages are completely exclusive spaces and whether this needs to be changed to include more people. This research would focus particularly on the living options available to older Māori and Pacific peoples and would involve interviewing these people specifically about where they are living in their retirement and where they would like to live. It is widely known that many older Māori and Pacific people live with extended family during their retirement. It would be interesting to research this more in depth to establish whether this living solution is a result of choice or necessity.
This research would involve talking to the older people and their families about their living situations and what they perceive to be their ideal living situation.

7.5.3 Retirement villages as social spaces

There is potential for interesting work in the fields of geography and sociology to research the social networks which exist in retirement villages. Some of the interviewees for this research were not involved in activities outside of the village they lived in while others believed that it was necessary to keep up activities outside of the village environment for as long as possible. An interesting topic of research would be to look at retirement villages purely as social spaces (disregarding the accommodation aspect of the village) and investigate how important the retirement village environment is in the social networks of the villagers.

7.5.4 A review of the policy

The Retirement Villages Act 2003 is still being implemented and residents, operators and observers can only guess at the impact the Retirement Villages Act will have on the everyday operation of retirement villages. I would suggest a review of the Retirement Villages Act in about five years time, when it has been fully implemented for some time. This research would involve interviewing residents and operators about any differences the Retirement Villages Act has made to the everyday operations of the retirement village industry. This research could also review the ‘ageing in place’ policy and evaluate how effective this has been in helping older New Zealanders to age positively.

7.6 Concluding remarks

New Zealand has an ageing population, resulting from many factors, including our world class health system and our role as a member of the developed world. An ageing population is something to be proud of and it is something we should see as an opportunity rather than a problem. We can learn a lot from the experiences of older people and we should make the most of this while we still can. However, a large population cohort of any age will produce obstacles with regard to housing, health and other services. With careful and quick planning these problems can be successfully dealt with and New Zealand’s ageing population can be an opportunity for young and old alike. The sooner we stop looking at the problems of an ageing society and start to consider the opportunities it brings, the better the future of New Zealand looks for us all.
Appendix 1
Residents

1.1 Poster

Hi.

My name is Sally Greenbrook and I am a Masters student in the School of Geography and Environmental Science at the University of Auckland. I am currently researching issues of accessibility to retirement villages, the role that retirement villages play in New Zealand society today and how that role will change as New Zealand’s population continues to age.

I will be conducting a series of interviews with residents of retirement villages in Auckland, Bay of Plenty and Waikato in order to gain a resident’s perspective on the issues facing retirement villages. If you would like to share your knowledge and opinions I would love to hear from you. You can contact me by phone (093737599 ext 89581 or 0211547019), email (sgre067@ec.auckland.ac.nz) or post (c/- School of Geography and Environmental Science, University of Auckland, Private Bag 92019, Auckland).

Yours sincerely,
Sally.

This research was approved by the University of Auckland Human Participants Ethics Committee on May 18 2005 for a period of three years, ref: 2005/122. My supervisors are Dr Gordon Winder and Dr Ward Friesen. Please feel free to contact me (0211547019) or either of my supervisors (Gordon: 093737599 ext 86605, Ward: 093737599 ext 88612) with any questions about the research.
1.2 Participant Information Sheet

Dear Participant,

The role of retirement villages in New Zealand’s ageing society.

My name is Sally Greenbrook. I am a student at The University of Auckland conducting research, for a Master of Arts degree, in the School of Geography and Environmental Science. I am conducting this research for the purpose of my thesis, on the relating to regulation of retirement villages, the process of entering a retirement village and the roles that retirement villages play in New Zealand society.

You are invited to participate in my research and I would appreciate any assistance you can offer me. As part of my thesis I am conducting a series of interviews of people residing in and operating several retirement villages in the Auckland, Waikato and Bay of Plenty regions. While I would greatly appreciate your assistance in this research, participation is entirely voluntary.

I would like to interview you about your views on retirement villages and the role that you see retirement villages playing in New Zealand’s ageing society. Interviews would take about an hour and would be at a time and place convenient to you. I would prefer to audio-tape the interview but this would only be done with your consent and could be turned off at any time, or you can withdraw information any time up to 30 November 2005. The interview can be stopped at any time and you may decline to answer any questions if you wish. All information you provide will be stored in a locked cabinet on university premises until six years after the completion of this project. After this time all information will be destroyed. Audio tapes will be burnt and paper data will be shredded.

If you do wish to be interviewed please let me know by filling in a Consent Form and sending it to me. All information you provide in an interview is treated in an anonymous way and your name will not be used, unless you have expressly indicated that you wish to have information attributed to you.

At the completion of the study a copy of the summary of findings of this research will be made available to you if you would like one. Thank you very much for your time and help in making this study possible.

If you have any queries or wish to know more please phone me at the number given below or write to me at:

School of Geography and Environmental Science
The University of Auckland
Private Bag 92019, Auckland
Tel. 021 1547019
e-mail sgre067@ec.auckland.ac.nz

My supervisors are: Dr Gordon Winder and Dr Ward Friesen
School of Geography and Environmental Science
The University of Auckland
Private Bag 92019
Auckland. Tel. 373-7599
The Director of the School is: Dr Willie Smith
School of Geography and Environmental Science
The University of Auckland
Private Bag 92019
Auckland. Tel. 373-7599 extn 85923

For any queries regarding ethical concerns please contact: The Chair, The University of Auckland Human Participants Ethics Committee, The University of Auckland, Research Office - Office of the Vice Chancellor, Private Bag 92019, Auckland. Tel. 373-7599 extn 87830

APPROVED BY THE UNIVERSITY OF AUCKLAND HUMAN PARTICIPANTS ETHICS COMMITTEE on 18 May 2005 for a period of three years, from 18/05/2005 Reference 2005 / 122
1.3 Consent Form

THIS CONSENT FORM WILL BE HELD FOR A PERIOD OF SIX YEARS

Title: Village People: The Changing Role of Retirement Villages in New Zealand’s Ageing Society.

Researcher: Sally Greenbrook

I have been given and have understood an explanation of this research project. I have had an opportunity to ask questions and have them answered.

I understand that I may withdraw myself or any information traceable to me, at any time up to 30 November 2005, without giving a reason.

- I agree to be interviewed for the purposes of this research.
- I agree/ do not agree that the interview will be audio-taped.
- I understand that my name will be treated in an anonymous way unless I give permission for it to be used.
  - I wish for my identity to be treated in an anonymous way. Yes/ No

Signed:

Name:
(please print clearly)

Date:

APPROVED BY THE UNIVERSITY OF AUCKLAND HUMAN PARTICIPANTS ETHICS COMMITTEE on 18 May 2005 for a period of three years, from 18/05/2005 Reference 2005 / 122
1.4 Questions

1. Are you enjoying living here? What do you like most about living here?
2. How long have you lived here?
3. Where did you live before? Why did you move?
4. Why did you choose this retirement village?
5. Did you find the process of applying to enter the retirement village difficult at all?
6. Did you go through an interview process in order to enter the retirement village? Did you feel that the process and the questions you were asked were fair? Were there any questions that you felt were unnecessary or too private?
7. Do you think the rules and regulations of the village are fair and justified?
8. Do you feel that all older New Zealanders have an equal opportunity to enter a retirement village if they wish to do so?
9. Based on your experience, would you recommend that other people move to retirement villages?
10. Do you use the facilities the village offers? Which ones? Do you feel that by using the facilities in the village you are more included in village life?
11. Do you feel that the services provided are worth the amount that you paid for your unit and continue paying in maintenance?
12. Do you feel that you have made a good investment by moving into a retirement village?
13. Have you noticed any changes in the way the village is operated and run in the time that you’ve lived here?
14. Do you think elderly people are respected?
15. New Zealand has an ageing society. Do you feel that retirement villages are going to play an important role in New Zealand’s ageing population?
16. Do you think that the government regulation of retirement villages is adequate?
17. Is there anything you wish to ask me about my research?
Appendix 2

Operators

2.1 Participant Information Sheet

To the Manager,

The role of retirement villages in New Zealand’s ageing society.

My name is Sally Greenbrook. I am a student at The University of Auckland conducting research, for a Master of Arts Degree, in the School of Geography and Environmental Science. I am conducting this research for the purpose of my thesis, on the issues of accessibility to retirement villages and the roles that retirement villages play and will continue to play in New Zealand’s ageing society.

You are invited to participate in my research and I would appreciate any assistance you can offer me. As part of my thesis I am conducting a series of interviews, of people operating retirement villages in the Auckland, Waikato and Bay of Plenty regions. While I would greatly appreciate your assistance in this research, participation is entirely voluntary.

I would like to interview you or a key staff member about the design and procedures of the village that you operate and the role that you see retirement villages, and your retirement village in particular playing in the future. Interviews would take about an hour and would be at a time convenient to you. I would prefer to audio-tape the interview but this would only be done with the participant’s consent and could be turned off at any time, or information can be withdrawn any time up to November 2005. The interview can be stopped at any time and you may decline to answer any questions if you wish. All information you provide will be stored in a locked cabinet on university premises until six years after the completion of this project. After this time all information will be destroyed. Audio tapes will be burnt and paper data will be shredded.

If you do wish to nominate a person to be interviewed please let me know by filling in a Consent Form and sending it to me or phoning me on Tel: 0211547019. All information provided in an interview is treated in an anonymous way and the participant’s name will not be used, unless they have expressly indicated that they wish to have information attributed to them.

I would also like, with your permission, to interview several residents of the village you operate in order to gain a resident’s perspective of the issues facing retirement villages. I have enclosed copies of posters advertising my research and asking participants to become involved. I would be most appreciative if you would display these posters in common areas of your village. The interviews with residents will be much the same as the interview with the staff member and the above information regarding tape-recording and anonymity applies.
At the completion of the study a copy of the summary of findings of this research will be made available to your organisation if you would like one. Thank you very much for your time and help in making this study possible.

If you have any queries or wish to know more please phone me at the number given below or write to me at:

School of Geography and Environmental Science
The University of Auckland
Private Bag 92019, Auckland
Tel. 0211547019
e-mail sgre067@ec.auckland.ac.nz

My supervisors are:
Dr Gordon Winder and Dr Ward Friesen
School of Geography and Environmental Science
The University of Auckland
Private Bag 92019
Auckland. Tel. 373-7599
Extns. Gordon: 86605
Ward: 88612

The Director of the School is:
Dr Willie Smith
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Private Bag 92019
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For any queries regarding ethical concerns please contact: The Chair, The University of Auckland Human Participants Ethics Committee, The University of Auckland, Research Office - Office of the Vice Chancellor, Private Bag 92019, Auckland. Tel. 373-7599 extn 87830

APPROVED BY THE UNIVERSITY OF AUCKLAND HUMAN PARTICIPANTS ETHICS COMMITTEE on 18 May 2005 for a period of three years, from 18/05/2005 Reference 2005 / 122
2.2 Consent Form

THIS CONSENT FORM WILL BE HELD FOR A PERIOD OF SIX YEARS

Title: Village People: The Changing Role of Retirement Villages in New Zealand’s Ageing Society.

Researcher: Sally Greenbrook

I have been given and have understood an explanation of this research project. I have had an opportunity to ask questions and have them answered.

I understand that the participant may withdraw themselves or any information traceable to them, at any time up to November 2005, without giving a reason.

• I agree to be interviewed or allow a member of staff to be interviewed for the purposes of this research.

• I understand that the participant’s name will be treated in an anonymous way unless they give permission for it to be used.
  o I wish for my identity / the identity of the staff member to be treated in an anonymous way. Yes/ No

• I agree/ do not agree that the interview will be audio-taped.

Signed:

Name: (please print clearly)

Date:

APPROVED BY THE UNIVERSITY OF AUCKLAND HUMAN PARTICIPANTS ETHICS COMMITTEE on 18 May 2005 for a period of three years, from 18/05/2005 Reference 2005 / 122
2.3 Questions

1. How long have you been involved in the aged care industry?
2. How long have you been operating this particular village?
3. What type of retirement village is this?
4. How long has this village been operating?
5. Does this village have a mission statement or a philosophy that the village is based upon?
6. What kind of environment do you feel you provide for residents living here?
7. How many residents/units do you have?
9. Could you describe the ownership and management of this village? Has this changed in recent times?
10. Does this village have links with any other retirement villages?
11. Why is this village placed where it is? What is it about this area that made the developers build a village here?
12. Can you explain the layout of the village? Why are certain facilities placed where they are?
13. Does this retirement village have affiliations with any religious or societal group? Does this influence who the residents are?
14. Do you have a screening procedure used when interviewing potential residents?
15. What facilities are provided for residents to use? How are residents encouraged to use the facilities? Which facilities/activities are the most popular?
16. Does this village provide the opportunity for residents to move into a more full-time care arrangement? What is the procedure involved in this shift?
17. What happens if a resident gets seriously ill?
18. What advantages do you think residents gain from living in retirement villages?
19. Are there any common problems residents have with adjusting to life in the retirement villages? What steps are taken to overcome these problems?
20. Are units in this village in high demand? I.E., is there a waiting list?
21. What kind of marketing methods are used to promote this village? Do you find any particular method better or more effective than others?
22. Are there any plans for this village to expand in the near future?
23. What are your opinions of the aged care industry in this area? Do you think the market is saturated or is there still room for more organisations to move in?
24. Does the village maintain any links with organisations for older people outside of the village? (For instance, RSAs, Senior Citizens, ProBus, Rotary, etc). Are residents encouraged to maintain links with these organisations once they enter the retirement village?

25. Can you tell me about staffing? What kind of people work at this village? (eg, male/female, old/young). Do you have any staffing problems?

26. Is there anything you’d like to ask me about my research?
Appendix 3
Policy Makers

3.1 Participant Information Sheet

To Government Officials,

The role of retirement villages in New Zealand’s ageing society.

My name is Sally Greenbrook. I am a student at The University of Auckland conducting research, for a Master of Arts Degree, in the School of Geography and Environmental Science. I am conducting this research for the purpose of my thesis, on the issues of accessibility to retirement villages and the roles that retirement villages play and will continue to play in New Zealand’s ageing society.

You are invited to participate in my research and I would appreciate any assistance you can offer me. As part of my thesis I am conducting a series of interviews, of people operating retirement villages in the Auckland, Waikato and Bay of Plenty regions. While I would greatly appreciate your assistance in this research, participation is entirely voluntary.

I would like to interview you or a key staff member about retirement villages in your region and public policy relating to retirement villages and the role that you see retirement villages playing in the future. Interviews would take about an hour and would be at a time convenient to you. I would prefer to audio-tape the interview but this would only be done with the participant’s consent and could be turned off at any time, or information can be withdrawn any time up to November 2005. The interview can be stopped at any time and you may decline to answer any questions if you wish. All information you provide will be stored in a locked cabinet on university premises until six years after the completion of this project. After this time all information will be destroyed. Audio tapes will be burnt and paper data will be shredded.

If you do wish to be interviewed or to nominate a person to be interviewed please let me know by filling in a Consent Form and sending it to me or phoning me on Tel: 0211547019. All information provided in an interview is treated in an anonymous way and the participant’s name will not be used, unless they have expressly indicated that they wish to have information attributed to them.

At the completion of the study a copy of the summary of findings of this research will be made available to the organisation if you would like one. Thank you very much for your time and help in making this study possible.

If you have any queries or wish to know more please phone me at the number given below or write to me at:

School of Geography and Environmental Science
The University of Auckland
My supervisors are: Dr Gordon Winder and Dr Ward Friesen
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APPROVED BY THE UNIVERSITY OF AUCKLAND HUMAN PARTICIPANTS ETHICS COMMITTEE on 18 May 2005 for a period of three years, from 18/05/2005 Reference 2005 / 122
3.2 Consent Form

THIS CONSENT FORM WILL BE HELD FOR A PERIOD OF SIX YEARS

Title: Village People: The Changing Role of Retirement Villages in New Zealand’s Ageing Society.

Researcher: Sally Greenbrook

I have been given and have understood an explanation of this research project. I have had an opportunity to ask questions and have them answered.

I understand that the participant may withdraw themselves or any information traceable to them, at any time up to November 2005, without giving a reason.

- I agree to be interviewed or to allow a member of staff to be interviewed for the purposes of this research.
- I understand that the participant’s name will be treated in an anonymous way unless they give permission for it to be used.
  - I wish for my identity / the identity of the staff member to be treated in an anonymous way. Yes/ No
- I agree/ do not agree that the interview will be audio-taped.

Signed:

Name: (please print clearly)

Date:

APPROVED BY THE UNIVERSITY OF AUCKLAND HUMAN PARTICIPANTS ETHICS COMMITTEE on 18 May 2005 for a period of three years, from 18/05/2005 Reference 2005 / 122
3.3 Questions

1. What is the role of your organisation?
2. What is your role?
3. Do you think retirement villages play an important role in New Zealand’s ageing populations?
4. Do you work with any other organisations involved in providing for the ageing population?
5. Did you have a role in drafting the Retirement Villages Act?
6. What effect do you see the Retirement Villages Act having on the retirement village industry and the future of housing for the aged in the future?
7. Recently some of the trust owned villages have chosen to exit the industry. Do you have any opinions on why this might be?
8. Do you think that retirement village living is an accessible accommodation option for all older New Zealanders?
9. Do you think it needs to be made a more accessible accommodation option?
10. Where do you see housing for older New Zealanders going in the future?
11. Would you personally consider retirement village living in your future?


Age Concern New Zealand Incorporated. (2002). *Challenging the future, a society for all ages: policies and aims of Age Concern New Zealand: a summary*. Wellington [N.Z.]: Age Concern New Zealand Incorporated.


References


References


References


References


Personal Communications

Personal communications were undertaken with 28 people, including residents and managers of retirement villages as well as people involved in the governance of retirement villages. Many of these people have asked not to be named and therefore I have chosen not to name any of them here. With the exceptions of Petrina Turner from the Retirement Villages Association and Duncan Macdonald from the Selwyn Foundation, both of whom agreed for their names to be used, pseudonyms have been used for all interviewees throughout the text.