Community and Health: Immigrant Senior Cohousing in the Netherlands

By Dorit Fromm and Els de Jong





Top image: Two apartments per floor were made available to Santosa group members, who also share a meeting room. The service provider, Laurens, is located on the ground floor of the seniors-only building. Above: The group members of Santosa on an excursion to view other cohousing projects during the development of their community.

Opposite page left: The common house at Anand Joti, located on the ground floor, left, is available to be rented out. Apartments are located above. Middle: The future residents of Anand Joti participated in the development process. Right: Andre Bhola received training in checking blood pressure and blood sugar levels and he staffs the clinic at Anand Joti once a week.

hen cohousing was initially transplanted to the US from Europe (starting with a community built near the state capitol in Sacramento in 1991), Californians commented that of course the model worked in Europe-its countries didn't have diversity issues like California. In cohousing, residents own private homes, and share common spaces which they manage and maintain together. Now, 18 years later, it's clear that the concept works in the US, with over 100 current cohousing communities-and that what binds them together are not homogeneous residents but a shared interest in creating community and the willingness to work through challenges.

Still, cohousing communities in the US are not particularly diverse. People sharing similar viewpoints do often seem to feel most comfortable with each other; and unlike their European counterparts, American communities usually develop without the help of nonprofits or welcoming municipalities, so they are limited to offering mostly market-rate housing.

For those reasons—and counter to American assessments of homogeneity a much wider diversity of residents lives in cohousing in a country like the Netherlands than in the US.

Amsterdam, the capital of the Netherlands, holds a rich mix of cultures with more than a third of residents first or second generation immigrants. In their traditions, many generations typically live under one roof. But the same cannot be said for the Dutch, at least since the 1950s. Most modern Dutch housing units are apartments for the nuclear family, with little room for extended families.

As for Dutch service flats which provide assisted living for seniors, they have never been freely chosen by ethnic immigrants. Living in this kind of an institution forces them to adapt to Dutch culture and food to a much greater extent than they were used to previously. Quite the opposite has shown to be their inclination. As they age, these elders have less interest in integration and a preference for reminiscing back to their roots-talking about their youth and speaking their mother tongue. Their children, therefore, feel a sense of shame in having their aging parents cared for by others and in an institution.

The dilemma of living alone when

needing more support and supervision, especially in an environment where the language, beliefs, and religion are not one's own, led to the

idea of cohousing projects designed specifically for aging immigrants. Rental cohousing, developed by nonprofit organizations, presented a viable alternative to standard senior housing: elders can live together and support each other. In this way they often live for a longer period of time without professional care.

Surinamese Cohousing

Anand Joti means "peace and light" in Hindustani. As we sit in the little outdoor patio next to Andre and Betty Bhola's apartment door, overlooking the quiet, well-kept common garden, it seems to us a fitting description for this ethnic senior cohousing community. Andre Bhola is the project's spokesman.

He successfully bridges the three worlds of Surinam, the Netherlands, and Hindu culture, as does this development that he helped to instigate.

The residents of this 24-unit housing development originally came from Surinam in South America. This ethnically diverse former colony of Dutch Guinea became independent in 1975, and many Surinamese immigrated at that time to the Netherlands. In Amsterdam, Anand Joti (founded in the late 1980s) helps Hindustani Surinamese, who make up about 10 percent of the city's population. The foundation, mostly run by volunteers, has developed housing, day care, and other services, and has a special focus on health

times the risk level as Europeans for diabetes. Aside from genetic predisposition, eating unhealthy foods, not exercising, and stress greatly increase the chances of becoming diabetic and having complications, such as cardiovascular illnesses.

About half the residents of Anand Ioti have diabetes, and the weekly activities organized in the common house include exercise classes geared to interest the seniors. There's a yoga class three times a week, and a Bollywood dance class, taught by volunteers. Residents stroll to the common house for classes and a handful also buddy-up for more Nordic exercises, like walking.

A small health office—a mini-clinic—

is in the common issues. André

house. By its door, a prominent display offers literature on diabetes and other health

received training in checking blood pressure and blood sugar levels and he staffs the clinic once a week, explaining how to use the medicine provided by health practitioners.

The common house is used every day, contributing to a strong sense of community, as well as social and mental health. Twice a week residents meet for tea or coffee, Wednesday nights feature Hindi singing, Thursdays a reading group, and on Friday nights residents play cards and discuss Hindu history. A highlight, once a month, is watching Bollywood movies together.

Other common activities include resident participation in management, governance, and maintenance, including

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> education. For example, they've developed dramas and sketches in Hindustani around the subjects of obesity, heart disease, poverty, and other elder issues. The foundation helped to create Anand Joti cohousing, which opened in 1997.

Healthy Day-to-Day Life

At the once-a-week afternoon tea gathering for residents in the common space, Indian music plays as residents sip and talk. Traditionally, a pot of the dark Indian tea (chai), is spiced with cardamom, cinnamon, and cloves and mixed with milk and a number of heaping teaspoons of sugar. For the residents at Anand Joti, sugar is one of the ingredients best left out.

South Asians are estimated to have five







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taking care of the garden and cleaning the common house. The residents observe Hindu festivals, and celebrate the New Year and Christmas. They get together for an excursion twice a year, and have taken courses on managing together as a community. A Hindustani organization gives courses on aging, with an emphasis on managing income.

Residents also lend a helping hand to each other, for example shopping for each other. When someone falls ill, residents help them out by taking them to the doctor and cooking for them.

The community has encountered some economic difficulties in recent years. As the residents age, they need more help and services but their elderly pension is limited. Also, rents are rising, as is the extra fee for use of the common facilities that each household pays.

Development

For those coming from a foreign country who may not speak the language, navigating the process of development becomes extremely difficult. At Anand Joti, Andre acted as the liaison between the nascent group and the many organizations whose cooperation and funding pushed the project forward. An intermediary who speaks the language and understands the culture has the trust of the forming group, and can help them articulate their needs and desires. Whether it's somone in the group working for a cultural organization, or someone knowledgeable about the development process working with a motivated potential resident, at least one person is needed who can communicate the requirements and constraints of the development process.

An ideal time to bring in the theme of health is when the group is forming. The culture of caring about health and the group's needs requires nurturing and development along with the physical form. At Anand Joti, Andre engaged the group in discussing difficult issues, such as social problems, disease and health, conflict among residents, and other issues that are not typically discussed. For senior collaborative living, it is very important that the group think about the care they want to give to each other, and so make their limits clear. Residents cannot take the place of nursing support but they can provide social support, subtle monitoring (to the extent that they know who is up and about daily), and some short-term help when a resident is not seriously ill.

Santosa

Unlike Anand Joti, where residents moved into a tailor-made building, Santosa is an example of a "speckled" co-housing community, where Javanese (Indonesian) Surinamese households are "speckled" throughout a non-cohousing apartment building. Nico van den Dool, a cohousing consultant, contacted the nonprofit housing owner, Laurens, about the renovation of their large 235-unit senior complex, located in Rotterdam. With one wing of their phased upgrade completed, they discovered that about 10 percent of the displaced residents were not returning, freeing up apartments.

These service flats, located in a suburb, offered a number of advantages. Aside from a relatively quiet neighborhood, the seniors-only building amenities include a restaurant, a hairdresser, pedicure, laundry, billiards room, library, and several guestrooms. An organization providing professional home care services has an office in the building and can provide needed care.

Working with a local organization, the Spirit Foundation for Surinamese, Nico began forming a group in 1999. Members at first expressed reluctance to move out of their downtown neighborhood, but the expense and difficulty of finding appropriate housing persuaded them to look elsewhere. Thanks to the fact that they can live among other people of similar origin and ethnicity, these Surinam seniors were willing to take the bold step of moving to this apartment building in a "white" neighborhood. They saw the nearby shopping center and proximity to transit as strong advantages.

The group members all live in tworoom apartments, grouped two to a floor, and they share a group common room for meetings. Typically, speckled cohousing groups have an "agreement of cooperation" set up with the owner. When a suitable apartment becomes available the owner informs the group. The group has created a preferred profile describing their group and the type of people they feel would comfortably fit in. They contact people on their waiting list, and then prepare a proposal with their preferred person. When the group doesn't have a candidate, the owner rents the apartment in the typical way. For Santosa, which began with less than 10 households, the model has allowed the group to grow. The number of group members is contractually limited to 18 by the owner.

Social Interchange and Care in Santosa

Ethnic minority elders, in general, are comfortable with being socially connected to each other. They often meet and talk. When someone has the flu, a neighbor brings a bowl of soup. The people in the cohousing project look after each other, and call in a doctor for another member when necessary. They care about each other, but they can't do nursing tasks. Living in a senior cohousing group can in some way extend the time that a person lives independently, but if someone really needs nursing, professional home care is necessary. In this type of collaborative housing, seniors of the same ethnic minority live near each other, allowing the provision of culturally adapted professional care.

Usually, the members meet together twice a week in the community room. A volunteer from the group's cultural organization, who also assisted with the start of the project, joins them in the community room to talk, to make coffee and tea, and to answer questions or give a helping hand when needed. Besides this set meeting, the group members see one another informally daily. They meet each other in their shared common room but also in their own apartments, or after dinner in the lobby. Some of the comments from residents:

"We know each other very well. Like family. If we cook a meal, we say 'come over and have dinner with me' just like a family."

"We see each other every day. And if we miss someone, we make a phone call."

"I can't see very well anymore, so it is difficult for me to go out to shop or the market. But I still can go to this communal room and meet other people."

The Santosa members are older than the typical residents of the building; the youngest member is in her 60s, the oldest over 85. The cultural organization acts as the intermediary between them and the Dutch health care system. When someone becomes ill, often other group members contact Spirit Foundation, and they in turn call the sick person, find out what's wrong, and contact appropriate care. A doctor, dentist, or other professional then pays a visit.

Several of the Santosa residents receive professional home care. When the caregivers see a problem, they also make contact with the cultural organization, which contacts not only the seniors, but also their adult children. The children will be informed, for example, that their mother, having ignored her diet, is now not doing well. This is especially helpful when the children are not living nearby.

Minority Seniors Increasing

The number of seniors belonging to an ethnic minority in Holland will be increasing in the coming years and will rise almost 700 percent by 2050. In that year, one out of six non-western immigrants will be over 65 years old. So far, at least five ethnic groups have cohousing developments in Holland. Aside from Anand Joti, there are other senior cohousing developments for Hindustanis, and also for Chinese, Moroccans, Turks and other ethnic groups.

As far as the speckled variety, they "number at least 10" according to Peter Bakker of the FGW (Federation Gemeenschappelijk Wonen), the Dutch umbrella organization for cohousing. A relatively new model, it also works for native Dutch elders, who grapple with similar needs of affordable, timely, and supportive housing.

The US will also see a rise in seniors who are immigrants, many of them minorities. As American seniors become more diverse, housing and care aimed at specific cultures will be in demand. The social and health benefits make this a useful model to explore.

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¹An ongoing discussion with r FGW: should the speckled model be called cohousing? The question arises because of the ease of joining and leaving, and also because different community models that we would group under the term cohousing (centraal wonen)—for example, senior cohousing—also have different names in Dutch.

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