Villages with Enhanced Care and Support

Final Report – Anonymised Version

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Section 1: Introduction

In keeping with the national impetus to develop housing that meets the population's requirements, an organisation in the North of England commissioned this study as part of its ongoing processes to assess current and future housing requirements.

The research commenced in April 2016. The report commences with an overview of the literature relating to retirement villages. The research methods are then presented, followed by the findings and discussion.

Background

In the context of increased life expectancy retirement can extend over a couple of decades and much of that extended period can be characterised by reasonable health and independent living. Croucher et al (2003 as cited by Pacione 2012) argues that housing needs for the older population can no longer be equated with a need for care and support. There is now a need for accommodation that is suitable for both fit and frail older people that provides socially supportive and stimulating environments, and settings that provide nursing and access to enhanced healthcare. In settings where there are different types of service provision tensions between residents with differing levels of frailty can occur (Croucher et al 2007). Population ageing, and a broad spectrum of need and aspiration has stimulated interest in ensuring that there are diverse housing options for a growing older population.

One significant trend has been the emergence of specialist housing for older people throughout the twentieth and twenty first centuries. This includes the development of retirement villages. The first UK retirement village was built in 1908, with the second established in 1955 (Pacione 2012). In contrast to this slow adoption in the UK, retirement villages are an inherent part of old age housing in America, Australia and New Zealand where on average 6% of those over the age of 65 live in a retirement villages compared to 0.5% in the UK. This is changing and there are now a growing number of UK retirement villages and providers. Nick Sanderson, Chief Executive of a retirement village provider and Chair of the Association of Retirement Village Operators UK, argues that they will become "the biggest thing in housing for the next 25 years" (Kolleew 2012). Whilst there is a lack of consensus with respect to defining 'retirement village' there is some agreement about the characteristics of such villages. Phillips et al (2001 as cited by Pacione 2012) suggests the following general characteristics:

- Residents are no longer in full time employment
- Age specific population living in the same geographic area
- Shared activities, interests and facilities are provided on-site
- Residents experience a sense of autonomy.

The decision about relocating to a retirement village involves a complex interplay between push and pull factors (Baumker et al, 2012). It is the balance between the attraction of the new living environment in contrast with the difficulties of the existing environment that is influential in relocation decisions (Bekhet, Zauszniewski and

Nakhla, 2009; Groger and Kinney, 2006; Crisp et al. 2013) Push/pull factors include optimising life opportunities such as developing social networks; inclusion in a community of 'like-minded' people; access to responsive healthcare, local and accessible amenities; quality of the living environment; location, and size of the complex; enhanced feeling of safety and security; and access to interest groups and activities. Housing and environment design and price range of the accommodation are also influencing factors in decisions to relocate. (Kupke 2000; Groger and Kinney, 2006; Bekhet, Zauszniewski and Nakhla; Grant-Savela, 2010; Neville and Henriskson, 2010; Finn et al., 2011; Crisp et al. 2013; Walker and McManara, 2013; Ewen et al., 2014).There is a complex interplay between push and pull factors. For example, the burden of ongoing responsibility for house maintenance in a situation of advancing age, deteriorating health can contribute to a very positive perception of retirement communities that offer high quality dwellings that are maintained by community staff, albeit for a service charge.

In recognition that health problems may increase as age advances, access to on-site health and care services is a strong pull factor (Bernard et al, 2004, 2007, 2012; Prawitz and Wozniak, 2005; Baumker et al 2012; McVeigh 2009; Longino, 2008; Evans, 2009; Liddle et al, 2014; Beach, 2015). Kingston et al (2001 cited by Baumker et al 2012) found that the health of some residents improved once they had moved to a retirement village, while Baumker et al (2012) suggests that some people plan their move to a retirement village once they perceive that there is a potential for decline in their health (Groger and Kinney, 2006; Walker and McManara, 2013). This could be considered to be an anticipatory move in advance of further decline in health and mobility. Equally moving from unsuitable housing to slow down physical deterioration, or moving to environments that can be adapted to individual need is an important pull factor (Baker 2002; Croucher et al, 2003; Krout et al 2002; Crisp et al, 2013). Such moves may moderate risks associated with continuing to live in the same house that may become increasingly inappropriate as age advances (Seaman et al, 2015).

Croucher et al (2003) and Gardner et al. (2005) identified that concerns about health was less of a motivating factor than the ability to manage the home or garden. Older people want to optimise their independence and for many not being burden on others is valued. Croucher et al (2003) argue that retirement villages offer positive choices to older people. This view is supported by Bernard et al (2004) who found that there were three explanations for people making a positive choice to live in a retirement village: optimising autonomy; experiencing security and enhancing sociability.

There is increasing evidence that retirement village residents experience a range of positive benefits of living in a supported community setting. Beach (2015) found that residents avoided the negative experiences of isolation and loneliness with nearly 82% of their survey respondents indicating that "they hardly ever or never feel isolated" and nearly 65% of respondents were classified as "not lonely at all." Although this survey only captured the views of those after their move, and didn't take into account change in their views, Beach concluded that those in retirement villages enjoyed a "higher degree of social engagement."

The retirement village's website (http://www.retirementvillages.com/benefits.html) highlights that there are a number of other positive benefits of living within a retirement village including:

- Assistance with living
- Assistance with maintaining your property
- Part of a social community and enhanced social relationships
- Range of activities
- Access to healthcare (including preventative healthcare, access to wellbeing programmes, intermediate care, end of life café, community health services)
- Living in a safe, secure environment
- Improved security both physically and in relation to future needs
- Beneficial to the local community in terms of jobs/investment.

These are positive changes to personal wellbeing, physical and mental health that have been identified in the literature. The wide scale development of retirement villages in the UK is relatively new, and the related UK research remains underdeveloped. Hence, caution should be exercised in applying what is known about retirement villages to the UK situation. A table of previous research into the push and pull factors influencing relocation into retirement communities is included in Appendix 1.

Study Aims

The aims of this study were:

- To explore the factors which influence local residents' decisions on moving into a village with care and support
- To explore participants' preferences with regard to the design of a village and the services and facilities it would provide.
- To explore the factors which influence local decisions on moving to a retirement village.

Section 2: Methodology and Methods

Approach and data collection

A mixed methods approach was adopted in this research. This approach combines qualitative and quantitative methods for the broad purposes of breadth and depth of understanding and collaboration (Johnson and Onwuegbuzie, 2004; Johnson et al. 2007). The specific methodology adopted was a Q methodology, based upon the work of Van Dijk et al. (2015).

Data collection through Q methodology comprises the completion of a Q sort by participants. A Q sort involves the ranking of a series of statements based on participants' strength of feeling toward them. This is commonly achieved through use of a forced-choice frequency distribution (Figure 2.1). Participants then engage in a discussion on their interpretation of the statements and the reasons for their choices. Analysis of Q sort data allows participants to be sorted into groups based on their overall view of a topic.

Watts and Stenner (2012) outline how Q sorts are usually completed by participants individually via the postal service, online or in person with a researcher. This study took a slightly different approach by asking participants to complete Q sorts in small groups comprised of two to eight people. The advantages of this approach meant that it allowed a potentially richer discussion to take place at the end of the sorting process. Whilst participants completed their own ranking of statements, this approach does risk the potential for those involved to make decisions for reasons of social approval within the group when discussion takes place. In order to mitigate this risk, participants were asked not to move any statements after the discursive element of the session had begun. In addition, it was generally the case that one researcher could begin recording the participants' rankings whilst the other facilitated the discussion, reducing the chances of recording the late changes of statements.

The statements for this research related to villages that offer enhanced care and support. The term "retirement village" was generally avoided because retirement villages do not necessarily offer care and support services to residents and the commissioning organisation was keen to stress that this was part of the concept that they were exploring to participants.

Figure 2.1 The Forced-Choice Frequency Distribution used in the Study

-6	-5	-4	-3	-2	-1	0	+1	+2	+3	+4	+5	+6

MOST UNATTRACTIVE ←   → MOST ATTRACTIVE
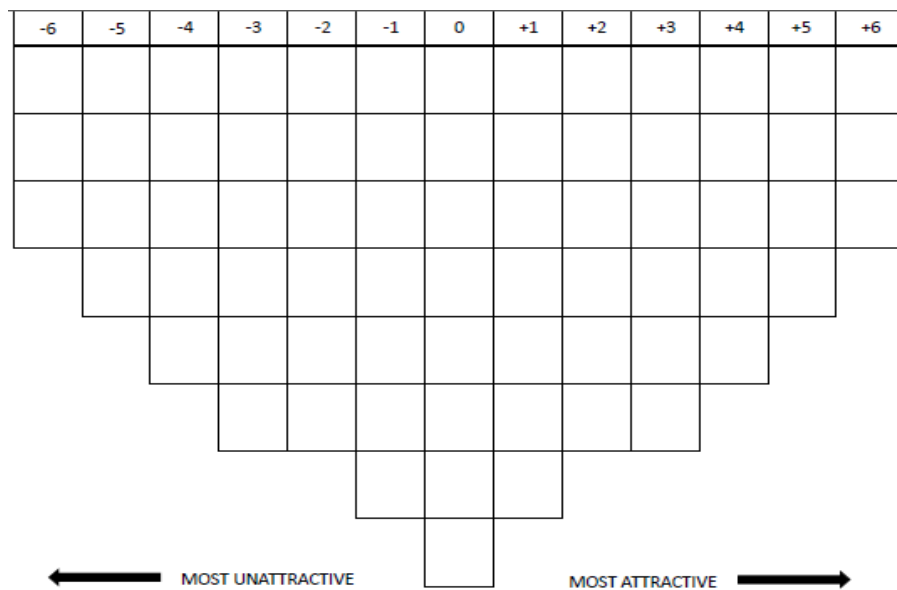
The statements were generated via a thematic approach (Watts and Stenner 2012). 11 themes were used to complete this process, developed from both the World Health Organisation's framework for age-friendly cities (Van Dijk et al. 2015) and Scotland's Place Standard tool (Architecture and Design Scotland et al. 2015):

- Outdoor spaces and buildings
- Transportation
- Housing
- Social participation
- Respect and social approval
- Civic participation
- Communication and information
- Community support and health services
- Amenities and facilities
- Work and local economy
- Identity

The 33 statements used by Van Dijk et al. (2015) provided a starting point for developing statements for many of the themes. These were altered, removed and added to through discussions with individuals within the commissioning organisation. The statements were developed in line with the recommendations of Watts and Stenner (2012): all consistently prefixed, in this case with "A village"; avoidance of inclusion of two clauses within one statement where potentially problematic; straight forward wording; and the avoidance of jargon.

77 statements were initially developed from the themes which were reduced down to 70 statements through further discussion, a number considered appropriate by Q methodologists (Watts and Stenner 2012). The statements were each printed on paper which was subsequently laminated to create a set of cards. Each was given a

randomly generated reference number so as not to group statements thematically (Watts and Stenner 2012).

Participants in the first focus group had a very clear view about the ambiguity of one statement which prompted a change of wording for the subsequent groups. The statement:

"A village where there are organisations I can visit for advice and support"

was changed to:

"A village where I can access support and advice day and night"

Following advice from a methodological expert the data from this focus group with four people was considered as a pilot for the purposes of the quantitative Q sort analysis and was excluded. However, the rankings made by the pilot participants and their discussions were included in the analysis.

Participants were asked to engage in the following:

- Completion of a short questionnaire which asked questions such as participants' date of birth; gender; housing tenure; and self-reported health
- Participation in the Q sort activity
- Discussion with the facilitator and other members of the group around the ranking decisions made during the Q sort.

Before the Q sort activity, one of the researchers provided context to the study by reading background material on our ageing society, increasing support and care needs and the development of alternative forms of housing. A village with enhanced care and support was defined as a village where residents could access care and support which was not ordinarily available to them in the wider community. The participants' attention was then drawn to the Condition of Instruction provided to them for the Q sort activity:

> Thinking about villages which offer enhanced care and support as a place for you to live, what features of such villages do you find most attractive and most unattractive? Please sort the provided items in order to best describe how attractive you find them.

The Q sort process then commenced with the participants making an initial categorisation of each of the 70 statements into one of three piles: attractive, unattractive, and no preference/unsure. These 'piles' were then considered in turn. The attractive statements were placed on the distribution grid, commencing with statements which they found most attractive at +6 and then moving sequentially to +5 then +4 and so on (Figure 2.1). They then considered the 'unattractive' pile and placed the statements on the grid commencing with -6, then -5, then- 4 and so on. The researchers noted the distribution of the attractive and unattractive statements on the grid. The final pile was then entered on the distribution commencing with the most

attractive until all 70 cards were placed on the grid. Participants then had the opportunity to move statements around based upon their own preference.

Participants were instructed to complete the Q sort from their own personal point of view. Though decisions were made individually there was occasional and sporadic discussion amongst some participants. All of the process was therefore audio-recorded.

When the distributing and sorting process was completed the focus group discussion commenced. The participants were asked to state their top three statements and discuss why they found these most attractive. Similarly, they were asked to discuss their three most unattractive statements. The next part of the discussion focused on whether participants would seriously consider relocating to such a village if the far right hand area of their grid, containing the statements ranked most attractive, were on offer. When this was complete all participants were asked whether they considered that there was any aspect about such a village which they would consider when moving which was not encapsulated within one of the statements.

Sampling strategy and sample

A purposive sampling strategy was adopted as it allowed for the invitation of individuals with the specific knowledge base and situational prerequisites that directly impacted on the research (Maxwell 1997). This approach allowed for diversity within the population so that breadth of experience of the phenomenon was maximised. There was an element of applied "researcher judgement" pertaining to who was recruited (Teddlie & Yu 2007). Participants were recruited from both existing consultation groups of the commissioning organisation and the wider community, to provide a mixed sample in relation to age, gender, health and housing tenure.

Gatekeepers were contacted and requested to assist in the recruitment process for the research. Gatekeepers then contacted potential participants by phone or letter and provided an overview of the research as well as details of their right to withdraw from the research at any point.

Recruitment progressed until 38 – 42 participants was reached, which is a suitable number of participants when using a Q methodology (Watts and Stenner 2012; Van Dijk et al. 2015). Four people (two male and two female; aged 62-85) participated in the pilot study. A total of 41 (15 male and 26 female; age range 53 to 89) participated in the main study.

Data collection

Those interested in participating in the research were asked if their contact details could be provided to a member of the research team and were invited to take part in one of the organised focus groups.

12 focus groups were conducted in which a total of 45 residents participated. The initial focus group of 4 participants was a pilot activity to test and refine the data collection tools. Data collection included the following:
- Demographic and housing information
- Distribution of the Q sort statements across the forced distribution map (see figure 2.1)
- Digitally recorded group discussions that occurred throughout the Q sort activity

Basic Data analysis

The Q-sort statements were initially placed in order of their score to create a table for the statements' overall rankings. This descriptive statistical analysis of the rankings provides a general overview of the most attractive and unattractive statements from the perspective of the participants. The top 10 and bottom 10 statements were then used as a framework for which to guide the analysis of the qualitative data. This involved the segmentation, categorisation and formation of links between aspects of data in order to interpret their meaning (Creswell 2013).

Whilst the quantitative analysis of the rankings provides a useful guide to participants' views, there are several caveats which should be borne in mind when interpreting these findings:

- The Q sort methodology and the symmetrical distribution ranking used is not intended to produce an overall ranking of the nature presented here, so should be treated with some caution.

- This data includes the pilot data

- As will be explained further in the next section, negative scores do not necessarily equate with unattractiveness.

- As with most other social research, the participants' views analysed and presented in this report are not necessarily representative of the views of the wider population. Findings should therefore be treated only as indicative.

Q Factor Analysis

Q factor analysis involves the comparison and contrasting of the Q sorts completed by different participants which allows shared orientations to be discerned (Stenner et al. 2000, cited in Watts and Stenner 2012). In this study the 41 Q sorts completed by non-pilot group participants were intercorrelated and subjected to by-person factor analysis using the computer software PQMethod (Schmolk 2002). In this process, the researcher chooses the number of factors, or shared patterns, to be extracted from the data. A "factor loading" is produced for each Q sort in relation to each factor, which communicates the extent to which the Q sort is typical of the pattern of that factor. A threshold is set for the factor loading to determine significant association of a Q sort with a factor.

A number of different factor solutions were explored. The analysis was originally run extracting seven, six and five factor solutions. It was noted that there was a relatively high degree of homogeneity in the data, demonstrated by a large number of "confounded" Q sorts, which significantly associate with more than one factor. As such, the significance level for the factor loading threshold was raised, as advised by Watts and Stenner (2012), from $p < 0.01$ to $p < 0.001$. Factor loadings of ±0.41 or above were significant at the $p < 0.001$ level. A four factor solution was eventually selected. This solution had at least three Q sorts significantly loading on each factor and passed "Humphrey's rule" (Brown 1980, cited in Watts and Stenner 2012). Four factors were rotated using varimax rotation. The factors explained 41% of the study variance. 28 of the 41 Q sorts loaded significantly on one or other of the four factors.

Table 2.1 depicts which Q sorts load significantly on which factor. The Q sorts within each factor share a similar sorting pattern, suggesting the participants who completed them share a similar view on villages offering enhanced care and support. The factor-exemplifying Q sorts for each factor are merged to produce an idealised Q sort for each shared viewpoint, which are known as factor arrays. This merged Q sort is an average of the factor-exemplifying Q sorts within it, with higher weighting given for those Q sorts which loaded more strongly on that factor.

Factor interpretation involves holistic inspection of each factor array. This study used the process advocated by Watts and Stenner (2012) where attention is given to those statements as +6 and -6 and the statements which are ranked higher or lower by one factor than any other, in addition to those statements which are significantly associated with a factor and hence labelled as "distinguishing" in the Q factor output.

Table 2.1

Factor Number	Q sort numbers	Total	Cumulative Total
1	2B, 2D, 3D, 4B, 4C, 5D, 10A	7	7
2	4E, 5A, 7E, 7H, 10B, 10C, 11B, 11C	8	15
3	11D, 5C, 6A, 7D, 8A, 9A, 9B, 9D,	8	23
4	2A, 7A, 7B, 7G, 11A	5	28
Confounded	3B, 4D, 6B, 7C, 10D	5	33
Non-significant	2E, 3A, 3C, 4A, 6D, 7F, 8B, 9C	8	41

Ethical considerations

Ethical approval to undertake this research was secured from the Department of Healthcare, Faculty of Health and Life Sciences, Northumbria University. In adherence to University policy and ethical requirements for research the rights of participants to informed consent and confidentiality have been upheld during recruitment and data collection processes. There were also some issues during data collection such as language and cognitive problems in engaging in the sorting activity. To address this, data collection involved two researchers to ensure that participants could be supported if necessary. Care was taken to ensure that participants were comfortable throughout. The researchers were aware of the need to continuously monitor and be flexible to participants' needs. Facilitators created and maintained a safe environment, promoted

participation, encouraged active listening and managed time effectively. Indeed, many participants indicated that they enjoyed the process. Storage of data was in compliance with data protection guidelines and in adherence to university policy.

Section 3: Findings from Overall Analysis

The participants generally found the process of completing the Q sort straight forward and required less support than expected. Whilst two participants found the process challenging and required significant assistance due to language issues and learning difficulties, the other participants were generally able to complete the tasks with minimal support. Several participants commented on how similar some of the statements were and that fewer statements would have made the process easier. The sorting process acted as a good tool to stimulate the group discussions which followed. Several participants commented that they had enjoyed the experience.

Participants valued different facilities, amenities and housing types when considering a move to a village with enhanced care and support. However, some dominant trends emerged from both the sorting process and from the focus group discussions which followed. These trends are explored in the subsections below. The first subsection provides a brief overview of the findings from the first sorting exercise. The second subsection details the top 10 and bottom 10 ranked items using their overall scores. The third subsection seeks to provide more detail on participants' interpretation of the statements and why they felt that some statements were more attractive to them than others. The fourth subsection explores other factors identified by participants which are important to them in relation to moving to a village. The final subsection considers discussions of whether participants would consider a move to a village which possessed the attributes which were more attractive to them.

Attractive and Unattractive Statements

The data on the number of statements categorised as "attractive" or "unattractive" by participants on their first sort demonstrates that the statements were generally viewed positively. The median column number down to which participants' attractive statements stretched when placed on the sorting grid moving from right to left was -1. In contrast the median column number to which participants' unattractive statements stretched when placed on the sorting grid moving from left to right was -5. Two participants sorted no statements at all as unattractive. Many participants commented on how there were very few of the statements which they strongly felt were unattractive. Some explained how even items they had sorted as unattractive and placed in the -6 column were not aspects of a village which would deter them from living there but for which they simply did not care.

It is therefore important that the figures reported below are interpreted with this finding in mind and are taken together with the qualitative findings reported below. Statements which were found to have an overall negative score should not necessarily be viewed as a statement which was generally seen as unattractive. Participants were indifferent or had mixed feelings towards many statements which they placed in a negative column and actually felt that some placed in negative columns were attractive features. The rankings should be used only as a general guide as to participants' views.

Statement Rankings

The top 10 and bottom 10 ranked statements based on overall scores from the 31 participants are provided in Tables 3.1 and 3.2 below, with their standard deviations.

Table 3.1 Top 10 Statements Ranked by Overall Scores

	Statement	TOTALS	SD	RANK
55	A village which is safe and secure	169	2.93	1
6	A village with well-connected public transport	146	3.03	2
27	A village with a GP surgery within walking distance	145	2.86	3
37	A village where the shops are within walking distance	119	2.84	4
12	A village with a pharmacy within walking distance	111	2.27	5
2	A village with regular public transport	103	2.52	6
48	A village which is clean and tidy	96	2.87	7
13	A village where people have respect for other people	84	3.42	8
35	A village with homes which are energy efficient	84	3.14	8
23	A village which has bungalows	72	3.03	10

Table 3.2 Bottom 10 Statements Ranked by Overall Scores

	Statement	TOTALS	SD	RANK
51	A village where people are of a similar background to me	-92	3.22	61
22	A village where there are pubs and bars within walking distance	-100	2.36	62
53	A village where people are of a similar age to me	-101	3.02	63
46	A village with homes which are available to part-rent, part-purchase	-117	2.62	64
28	A village where a service charge is paid to ensure the outdoor space and buildings are maintained	-124	2.88	65
24	A village which provides access to work opportunities	-125	2.29	66
68	A village which cannot be ordinarily accessed by people who do not live or work there	-125	2.96	66
39	A village with homes which are smaller than my current home	-135	3.12	68
38	A village which is connected to the local cycle network	-141	3.18	69
62	A village which has communal dustbins	-183	2.95	70

Exploring Resident Views

Guided by the rankings above, this section explores the dominant themes which emerged from the Q sort. It augments the findings from the rankings with analysis of the discussions which followed the sorting process.

Safety, Security and Access to the Village

"A village which is safe and secure" was the most attractive feature for participants overall. 14 participants placed this statement within the +6 column and a further seven placed it within the +5 column. Participants were generally concerned about feeling safe and secure in relation to anti-social behaviour, vandalism, burglary and confidence scams. One participant commented on how important it was to them that "you know that no-one is going to bop you round the head, or you're going to have all your money or whatever stole or…your wheelchair stolen or anything like that". Some participants had been burgled in the past, making security a central concern. Participants drew attention to how such concerns are especially important for older people due to their increased susceptibility to confidence tricksters and/or their loss of physical strength.

Despite the perceived attractiveness of safety and security, participants did not generally favour limiting access to the village, however. "A village which cannot be ordinarily accessed by people who do not live or work there" was the second most unattractive statement as ranked by participants overall. For some participants this related to concern as to how family and friends would be able to visit residents within the village. One participant commented:

> It's very annoying – I don't know if you do leaflet deliveries and that sort of thing – you can't get in the bloody thing to put leaflets… I mean, people have no letterboxes…A friend has got married, and I thought, oh, I was going to put a card through the door…You couldn't get in the gate to…their house, where you could put a card through the door.
>
> (Participant 4D)

Several linked the statement to the principles of openness and diversity, with one participant stating, "I'd like wherever I live to be accessible to anybody and everybody". Another commented that "You don't want to be like these posh private estates…where they do have security people. You don't want it quite like that. You know, that's over the top. Or barriers."

There was a mix of views on how safety and security might be achieved in such a village. Some spoke of "chains on the door" and ensuring that the house and everything within it was secure. Others spoke of the importance of residents within the village knowing one another and all participating in a neighbourhood watch scheme:

People interact with each other within the village and they know each other. It is important. That's more important than I thought. It's almost like a Crimewatch type of thing, but locally…It happens on our street…If somebody goes on holiday and you know, you just keep an eye on that street… On that house for them…It's simple. It's interaction with people.

(Participant 4C)

One participant recounted how the strong relationships between residents in her current community can ensure greater safety and security:

I took ill at Christmas and was in hospital. And the lad across the road…he looked after my house…He didn't know I was coming out…So he saw somebody in the house and he thought, oh, someone's in [the] house. You know, so he rang…He hadn't been told I was coming home…And he thought there was a stranger in the house…He looked after me, you see.

(Participant 4B)

The potential for a police officer or similar individual to provide the residents with information and advice regarding safety and security was also raised.

Access to Health Services, Local Shops, Work Opportunities and Pubs

The ability to walk to a GP, pharmacy and local shops was viewed as some of the most attractive potential features of a village by participants. Participants were keen for surgeries and pharmacies to be considered in the planning stages of a village's development with the prospect of integrating GP surgeries with pharmacies also considered a positive feature by some. The difficulty older and disabled people sometimes face in travelling to surgeries was also discussed.

In relation to access to shops, for one participant his priority was convenience:

Well I want the shops as close as possible…shopping to me is a complete waste of time and energy because we have so little though we can't order it…we get our shopping every day so we get little bits but it takes a chunk out of our day, so we nip to the shop first thing in the morning so we can walk off somewhere…so shops as close as possible 'cause I think that is a complete wasted exercise apart from the fact that we've got to eat to live

(Participant 1A)

Another resident discussed the proximity of local shops in conjunction with his enjoyment of walking.

Proximity to pubs and bars, however, had the ninth lowest score of the 70 statements. For some participants their feelings toward pubs was based on their lack of interest in drinking stating that it did not appeal or that they did not drink at all. One commented that it would not put them off moving to a village but would prefer it not to be there. For other participants anti-social behaviour and the negative externalities of drinking establishments was the reason for not wanting to live nearby to them. Several commented on the potential noise, whilst one was concerned about "drunks and vomit". Accessibility of work opportunities was ranked in the bottom 10 statements overall, owing to the fact that 36 of the 45 participants were retired.

Housing: Types, Sizes, Tenures and Features

Bungalows were seen as relatively attractive by participants overall, with the statement placed 10th in the ranking. Several participants drew attention to their advantage for people as they aged and experienced reduced mobility whilst another suggested they should be present as part of a "mixed, diverse stock, which means that you can get a whole range of different kinds of people in". Flats were seen as an unattractive housing offer by participants, with the statement ranked 60th out of the 70 items. Several participants took issue with flats because of their potential to be located on the ground floor raising security issues, whilst others were concerned about accessibility issues if the property was on a higher level. One participant commented "I wouldn't go away on holiday in a ground floor flat". Some linked higher level flats to maintenance issues and anti-social behaviour:

> Well, you don't have stairs to climb, yeah. And you don't have lifts. And it encourages all sorts of social problems. Lifts and, you know, lots of stairs. And somebody has got to look after the stairs, and people don't look after the stairs, do they?
> (Participant 7B)

Others discussed a stigma surrounding flats for older people:

> Well I think just because somebody's getting older it doesn't say you've got to club them all in a sheltered housing like in a building, like you're old and you live over there, it's stigmatising. I mean the whole idea of a village of like older people I think it's quite discriminating to tell you the truth
> (Participant 5A)

Similarly, another commented on how some sheltered housing schemes can have "an old smell" in them. Some participants discussed issues with noise, with one commenting on how their sleep had been disturbed when they previously lived in a flat and another raised privacy issues with the potential to "hear in the corridors what's said in the flats".

The prospect of downsizing was not generally viewed as an attractive opportunity. "A village with homes which are smaller than my current home" was ranked within the

bottom 10 statements overall. Several participants commented on how they currently had a one or two bedroom property and would not want to have less space. One participant stated,

> You don't want to move into something smaller than…two bedrooms . Every place they're going to build now should be two bedrooms. I had a big operation last year and [Name] is my carer and…16 weeks he wouldn't sleep with me. If these are built with one bedroom, and you need somebody to look after you – what happens?
>
> (Participant 7F)

Renting from a local authority or housing associations was by far the most highly ranked statement on the tenure of homes. There was far less appetite for a village with homes available for private purchase, private rent and shared ownership, with the latter ranked within the bottom 10. Some participants approached this from the perspective of what tenure they would find attractive for their own home whilst others thought about the tenure of properties which would surround them. Some participants commented on how they would not want to own a property at their age because they were concerned about the responsibility of taking out a mortgage or successfully maintaining it. One participant drew attention to how owner occupiers can make changes to their property which could detract from the village. They also commented on how sale properties meant a lack of control over new arrivals. Another commented:

> If I was going to go it would be [council] rent. I only want where it's rented and everybody's the same where it's all rent 'cause I think if you get people [where] they own and you rent or part own and part rent…I think you get to a certain extent…a bit of bad feeling.
>
> (Participant 3B)

"A village with homes which are energy efficient" was ranked as the joint eighth most attractive statement overall. One participant commented on how a warm home was essential and another explained their ranking of this statement in the +6 column for financial reasons.

Transport

Transport emerged as a key theme for participants. The two statements on public transport were both ranked within the top 10. Overall, public transport regularity and connectivity were viewed as more attractive than connectivity to the local road network and reserved parking spaces. Several participants commented on how public transport would prevent isolation, allow people to meet other people in the wider area and was good for exercise and "fresh air". There was no particular preference between trains and buses, although some participants discussed accessibility issues of some train stations for wheelchair users and how motorised wheelchairs are not currently

allowed on all trains. The need for appropriate seating for older people at stations was also discussed.

"A village which is connected to the local cycle network" was ranked second to bottom. Some participants had very negative views about the existing cycle networks arguing that they were underused and a waste of money. Some residents commented on how young people on bicycles might be a hazard for older people with others commenting on how cyclists can be inconsiderate and be obstructive to cars and pedestrians. Other residents did not think that access to the cycle network was an unattractive feature but stated that they were unlikely to use it because they did not, or could not, cycle.

Maintenance, Cleanliness and Waste

A clean and tidy village was seen as very attractive by participants generally, with the statement ranked within the top 10 overall, but was only ranked in the +6 column once and the +5 column twice. However, paying for the upkeep of the outdoor areas and buildings within the village was generally considered to be unattractive by residents. Many participants stated that the payments in rent or council tax should be enough to cover the upkeep without extra charges. Even one participant who was sympathetic to the principle of a service charge said that it should be included in the rent:

> …if a charge wasn't made, nobody would do it...and it would be tatty. So I can understand them having to have some sort of charge. But I would rather pay and make sure it was nice than not pay and just rely on the good will of… Or not good will of the local authority…But that – as you said – could be taken in with your rent or whatever.
>
> (Participant 6A)

Participants were attracted to one's rent covering all the charges which need to be paid.

"A village which has communal dustbins" was the statement ranked as most unattractive overall and tended to stir strong feelings in the participants. Several mentioned that communal dustbins would smell, encourage mess and attract rats, with some drawing on personal experience:

> …my daughter…had a flat just outside of Leeds, it was in a complex, they are all 3 stories 40 or 50 flats with communal bins and they were quite close to the carpark, so you park the car walk towards the front door and the smell wooph so that's a definite no -no for me
>
> (Participant 3A)

Some participants spoke of how people would put the wrong things in the bin or fly-tip, with one commenting on how "it goes down to at least the lowest common

denominator. So whoever creates the mess, starts to reduce the standard.". One participant made an interesting comment which related directly to residents who have care-needs:

> I have my own dustbin because I'm in a bungalow, but in the flats at the tenants' meetings it's a subject that comes up every time. And people…not nurses, but carers, put unmentionable things in the dustbins that everybody else has to go into. And they're sort of little dustbin balls – so that's quite revolting, yeah.
> (Participant 6D)

The same participant also spoke of potential arguments for some older people if they use communal bins:

> You can get rows going on about people who don't fold up cardboard when they put it in their bin. Well, if you're got arthritic hands you can't…
> (Participant 6D)

Other participants did not feel as strongly and ranked it low down because it was not an attractive feature.

Resident Mix

Living in a village with people who are a similar background or a similar age to participants was generally considered unattractive, with both statements appearing in the bottom 10 of the overall rankings. A strong preference for diversity and variety emerged in most of the discussions with participants. One commented that they did not want the village to be like "Stepford Wives", whereas another participant was very passionate about diversity:

> You want to meet different people of…different areas, different backgrounds. That's what living is about. It's meeting new people, new backgrounds, new experiences…You don't want to just sit in your own little box and your…Everybody the same. Being different is what makes the world a better place…all the different people and different ideas.
> (Participant 2E)

Some participants commented on the practical difficulties of residing within or managing a village which has people with similar ages and backgrounds:

> …if you imagine you build a village today and everybody that moves in…they're all similar age, they're all similar background…and it's a gated community then as that group move through life it's going to be very difficult to anticipate others coming

into it because they'll be the wrong age, the wrong profession or the wrong whatever, so actually it will become a very isolated community just by the way it was designed and built. Whereas if you have a much more varied community both in terms of age and background then [there is] the opportunity for that to be constantly regenerating itself as well as offering opportunities…

(Participant 3D)

The participant went on to comment on how he would be open to the opportunity to offer babysitting to families in the village, echoing what some other participants stated about their enjoyment of being around younger people. However, the same resident also went on to connect the resident mix to learning and physically disabled residents and suggested balance was critical, "I'd look at almost any age group but it all depends on scale, you wouldn't want ideally to have any particular group having a preponderance". Another participant, who had ranked the "similar age" item in the -3 column, commented on how the presence of children within the village would put them off. Similarly, another resident stated that they wanted a village which is "student-free" because they would be "coming in when you're going to bed". This suggests that for the participants who seek diversity there are still limits to the mix of residents they desire.

Another participant spoke of how older residents with greater needs can create a challenge for their more able neighbours who offer them help. The participant spoke of how they had no problem helping other residents at a former sheltered housing scheme but that it had become an issue for him and his wife:

So you get 90 [year] olds knocking on the door 11 o'clock at night saying "oh me light's not on, I don't know what to do" I'm "okay I'm coming along". It's not a problem, we don't go to bed early but the move has also helped us get away from all that because it was getting my wife down a bit in the end, the intrusive calls getting up at half ten at night. If these people would just wait till morning it's something you'd quite happily [do]…I think that's what they want everybody to be, to be each other's carer.

(Participant 1A)

The participant linked this issue with the lack of a housing officer or other support available outside of working hours.

Living alongside residents who were respectful of one another was also attractive, ranking in the top ten. One participant explained how they interpreted this as referring to noise, parties and people playing music too loudly. Another went into more detail about tolerance:

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> Well I think people just have to look for the good in people and respect the different ways of doing things and how different beliefs and different cultures, and different ways that they've been brought up…you shouldn't just assume that just because someone does something differently that they're a lesser human being than yourself. I think respect is just a key word, if you don't respect your fellow people you shouldn't be going to live somewhere like this, you should just live on your own
>
> (Participant 11A)

Other Factors

Toward the end of the focus group discussions participants were asked if there was anything missing from the set of statements provided to them in relation to the factors which make a village with enhanced care and support more attractive or unattractive to them. In addition participants also raised other issues during the sessions. These are briefly set out below:

- Resident influence in design: some participants drew attention to how some homes are not designed with older people in mind, with sockets close to the floor and sinks in front of windows, making them difficult to clean. It was suggested that older people should be involved in the design of the homes in the village. One participant suggested that prototype show rooms like those in IKEA could be used to help gather resident views of what would work better for older people.

- Location: several residents said that the location of the village would still be important as they would still not want to make long journeys on public transport to visit other parts of the local area. One participant explained that whether the village was located in the countryside on an estate or elsewhere would be an important factor for them.

- Nearby shops and prices: one resident explained how a complex he was aware of had made the mistake of allowing shops which were too expensive for residents nearby.

- Larger houses for multigenerational housing: one participant raised the prospect of the village comprising some larger properties which could accommodate several generations from the same family.

- Self-build: one participant discussed their interest in the village allowing prospective residents to engage in the custom development of dwellings.

- Public toilets: some participants discussed the lack of accessible public toilets in the area and the value they placed upon them having longer opening times.

- Public benches: some participants discussed how public benches can be especially important for older people who want to walk around their area. The issue of how other people can argue that such benches attract "youths" was discussed.

- Responsibility for maintenance: participants discussed the attractiveness of not having to worry about the maintenance of one's property and the potential for a handyman to assist people within the village.

- Walkability: one participant raised the issue of how many new housing developments are designed with cars in mind with just one road entrance into estates. The participant argued that this makes it restrictive for walkers who have to take circuitous routes to nearby amenities.

- Naming and eligibility: one participant raised the issue of how the village was named and linked this to whether only people with existing care needs would be eligible to live in the village. They suggested that the wrong name could make prospective residents feel "incapable".

- Trial period: one participant suggested that prospective residents are given a trial period of several months living in the village to see if they like it. Another participant raised practical challenges with the proposal.

- Cost: some participants commented on how none of the cards had specifically dealt with cost which would be a factor.

- Right to buy: one participant raised the issue of whether social housing tenants within the village would have access to the Right to Buy scheme.

- Communal hall: one participant suggested that it would be good for there to be a communal hall, where people could go "down [to] on a night time if you're lonely on your own"

- Lifts: one participant drew attention to the importance of lifts, explaining how they currently live on a middle floor flat and predicted that "there will come a time when I'll probably struggle to get up the stairs"

Moving to a Village with Enhance Care and Support

After discussing some of their rankings, participants were asked whether they would seriously consider moving into a village with enhanced care and support if offered the chance tomorrow, if it possessed the attributes which they had ranked as more attractive. 44 of the 45 participants whose data has been analysed for this report answered this question, with one leaving before the end of the session. Of the 44 who answered the question:

- 16 answered yes
- Four answered yes with extra qualifications

- Nine answered no
- Ten answered no with qualifications
- Five were unsure

It is important to remember that participants were asked the question based on the village comprising the features they had considered to be most attractive, which would be very challenging to achieve for all residents. Some of the points raised by participants are discussed below.

Yes

For many residents the extra benefits of living in the village they had constructed from their rankings outweighed the process of moving and leaving behind their current property. One participant commented that he was currently looking to move and thought he might have found a development which offered "security with freedom…security in the home [and] the ability…to venture outside the home and have facilities that I'm quite happy with". One participant commented that they had recently moved into a bungalow near older people which had suddenly made her feel old. The participant sought the social interaction of the village environment which was not currently offered in her own neighbourhood. Others were attracted by the potential nearby amenities, accessibility, neighbourly respect and resident offers to help one another.

Yes with Qualifications

Two participants answered yes but stated that this was dependent upon the location of the village. One stated that they would move in tomorrow but not "if it was up…on one of those new development sites 'cause it's too far away from family…I would want it more central". The other similarly commented, "I quite like the idea of it but I wouldn't want it to be isolated or on the edge of somewhere…and I don't see how they can be anywhere else really". Another participant said yes but with two other qualifications: costs and whether her disabled daughter would also be able to gain a place. The final participant said that he would consider it if "he was getting to that stage, it's a bit of an effort now" but was keen for the village to not "have an atmosphere of it being a care home, I'd want to be individual, to do my own thing in my own house".

No

Participants who said that they would not consider moving tended to raise the fact that they were happy with their current neighbours and the amenities to which they currently had access. One participant also said that

> I don't like too much interaction with other people that I don't know….I think you would end up having somebody who thought they were the king of the castle in organising everybody. That wouldn't suit me

> at all…I just don't like to be organised.   I'm an
> organiser.
>
> <div align="right">(Participant 2D)</div>

No with Qualifications

Several participants who answered no qualified it by stating that they would consider such a move in the future. Several stated that they currently "feel too young". One participant commented:

> I would be frightened that that would be me till the end
> of my days, I would think that I'd moved into God's
> waiting room…I wouldn't want to move on something
> like that…unless I was less mobile, maybe I had
> health issues perhaps felt that I needed some sort of
> access to care…but hopefully not
>
> <div align="right">(Participant 1C)</div>

Several other participants commented on how they felt becoming older and decreasing health could change their decision. Another participant commented that if he was to lose his wife and his current property was too difficult for him to maintain then he would seek to make a move into a village with enhanced care and support. Participants mentioned the amenities they currently had access to, the memories associated with their home, the space inside their current property and good relationships with neighbours as reasons for their current reluctance to move. One participant spoke of how they would need to "see it first". This individual spoke of how they had learned of the experiences of a current resident of a building they had been interested in previously and how this had changed their perception of them. This participant also emphasised how it would also depend heavily on the cost of the property including its upkeep.

Unsure

Five participants gave mixed responses to the question. Generally these participants liked the idea but then discussed how they felt that there was probably little to gain:

> Yes and no, yes because it's very close to what I've
> already got with the exception of the energy efficient
> bit because I'm very close to public transport…I own
> my home, it's a house, I've got fast internet access,
> we don't smoke, so in that sense…6 of my top 7 I've
> already got
>
> <div align="right">(Participant 3D)</div>

This participant also questioned the principle of a village with enhanced care and support:

> the only issue then is the concept of the village being
> a defined group of properties rather than just part of

the general suburbia or whatever else and whether the care package or the care issues could be bolted onto society as a whole rather than, "well we've got to build 50 units of accommodation over here in order to be able to do that"

<div align="right">(Participant 3D)</div>

Section 4: Findings from Q Factor Analysis

This section presents the findings from the Q factor analysis, which revealed four distinct viewpoints or "factors". 28 of the 41 participants were significantly associated (p<0.001) with one of the factors. Five participants were "confounded", exhibiting statistically significant associations with more than one factor. Eight participants were not significantly associated with any of the four factors. The four factors and the similarities between them are explored in the subsections below. The terms provided in brackets in this section refer to the statement number and its ranking within the idealised Q sort being discussed. For example, (55: +4) refers to statement 55 being ranked within the +4 column. These rankings are for each of the four viewpoints. Whilst Section 3 provided overall rankings for individual statements, this section explores the rankings that would be made by a person who perfectly exemplifies each of the four viewpoints.

Factor 1: Adaptation and Care Seekers

Factor 1 has an eigenvalue of 4.1 and explains 10% of the study variance. Seven participants are significantly (p<0.001) associated with this factor. They are four females and three males, with a median age of 69. Five own their homes outright, one owns with a mortgage and one rents from a local authority. The median length of time living in their current home is 37 years. Five live with their spouse and the other two live alone. The group is mixed with regard the number of bedrooms in their property. Four do not drive while the other three drive daily. All but one of the group is retired, who is employed on a part time basis. The median health rating from the group out of 100 was 70. Three rated their health as poor or fair, two as good and two as very good or excellent. Three of the group reported that their health had worsened in the last year, three that it had remained the same and one that it had improved. The group was mixed regarding their desire to move into a village with enhanced care and support: one said yes; one said yes with qualifications; one said no; two said no with qualifications; and two were unsure.

This viewpoint prioritises both the provision of care and the availability of properties which are adapted to meet the needs of the residents within a village offering enhanced care and support. Adaptation and care seekers are attracted by a village with properties for people with both physical (65: +6) and learning disabilities (20: +3) and with both homes and buildings which are easily accessible to wheelchair and mobility scooter users (65: +6; 58: +5). One participant associated with this viewpoint stated:

> There's no point picking a few [properties]. They all have to have that accessibility, I think. Because, well, if somebody moves out you're having to look for somebody else that's got a wheelchair to find it. So that's silly.
>
> (Participant 2D)

Bungalows are the most attractive property type (23: +3), although flats are also relatively appealing compared to the other viewpoints (54: -1). Properties which require lower maintenance (52: +2) and are smaller (39: 0) than their current homes are desirable. The group finds homes for sale (57: +1) and social rent (21: +1) appealing and this viewpoint also ranks shared ownership higher than the other factors (46: -2). Privacy of homes (4: 0) and their gardens are not priorities (8: -3) and properties which allow pets are unattractive (36: -4).

This perspective is notable for prioritising the provision of dementia care (41: +1), end of life care (56: +1) and short term home care for acute illnesses (50: +4). Long term home-care provision (26: +3) and an environment where carers collaborate and keep each other informed (17: 0) are also relatively attractive features compared to the other viewpoints. Adaptation and care seekers are attracted to a village which has both shops (37: +6) and a GP surgery (27: +5) nearby and which is generally easy to walk around (43: +3). This perspective finds a clean and tidy village attractive (48: +4) and also ranked payment of a service charge to maintain outdoor space and buildings higher than the other viewpoints (28: -2).

Whilst the adaptation and care seeker viewpoint is attracted to a respectful environment amongst residents (13: +4), a village where people help each other (3: -1) and keep each other updated on issues (60: -2) is less appealing. Similarly, this perspective ranks space for informal daily interaction (5: -1) and opportunities to access organised social activities (31: -3), training courses (18: -4), work (24: -5), a library (7: 0) and food growing (11: -4) as low priorities. The group are also less concerned with whether the village is viewed positively by others (19: -4). Despite the particular properties and care provision preferred within a village, this viewpoint does not want the environment to be distinctive in other ways. This group is not attracted to a village which is quiet (44: -3) or traffic free (9: -5) and is repelled by an environment where there is similarity of age (53: -6) or background (68: -6) of the residents or where access to it is controlled (68: -6).

Factor 2: Care-Indifferent Luxurians

Factor 2 has an eigenvalue of 4.1 and explains 10% of the study variance. Eight participants are significantly (p<0.001) associated with this factor. This group consists of five females and three males with a median age of 63. One rents from a private landlord, one rents from a local authority, three own with a mortgage and three own their home outright. The median length of time living at their current address is 10 years. Five live with their spouse or partner and three live alone. Three live in a two bedroom property, four in a three bedroom property and one in a four bedroom home. Seven of the eight drive daily with one driving weekly. Four are retired, with two in employment, one full time and one part time, one is long term sick/disabled and one is looking after family/home. The two individuals in employment worked in intermediate managerial, administrative or professional jobs. The median health rating for this group out of 100 is 80. Four of the eight rated their health as poor or fair, two as good and two as very good or excellent. The group is mixed in relation to the reporting of their health over the last year: three stated that it has worsened, three that it has improved and two that it has remained the same. The group is also mixed in relation to their desire to move into a village with

enhanced care and support: two answered yes; one said yes with qualifications; two said no; one said no with qualifications; two were unsure.

This viewpoint prioritises a number of more luxurious features whilst ranking adapted properties and the provision of care notably lower than other groups. This group prioritise attractively designed homes (25: +6), which offer privacy (4: +3) with private gardens (8: +6) and fast internet access (10: +3). The perspective encompasses attraction to a village which is located close to friends and family (59: +6), cafes (14: +4), restaurants (34: +3) and useable green areas (45: +5). Proximity to a library (7: +1), a gym (32: 0) and pubs and bars (22: 0) and the provision of reserved parking spaces (16: +1) and food growing opportunities (11: 0) is also more attractive to this group than others. Care-indifferent luxurians are attracted to a village with a good reputation (19: +3), where people are respectful (13:+4) and where there are opportunities to participate in organised social activities (31:+5). Whilst not ranked highly, this group are also more attracted to the opportunity to become involved in the management of the village (69: 0).

Bungalows are prioritised (23: +5) and houses are very appealing (61: +2) when compared to the other viewpoints. Flats are a lot less attractive (54: -5), as are communal dustbins (62: -6). Tenure is less of a priority for this group with private rent (41: -2), social rent (21: -2) and private purchase (57: -2) housing all ranked the same but with private rented properties more desirable and social rent less desirable for this viewpoint when compared to others. The energy efficiency of homes is not a priority (25: 0) and this perspective also prioritises properties which allow pets (36: +4).

Care-indifferent luxurians are notable for the low rankings of features related to care, adaptations and specialist housing. Accessibility of both housing (1: -3) and buildings (58: -1) to wheelchair and mobility users are not priorities, which is also the case for homes for people with physical (65: -2) and learning (20: -3) disabilities. Long term (26: -1) and short term (50: -1) care and collaboration between carers (17: -2) is not appealing and nor is the provision of support and advice (40: -1). The provision of dementia (42: -4) and end of life care (56: -5) are unattractive features for this viewpoint. One participant associated with the viewpoint stated:

> I've been in a village where end of life care is available and that would really put me off…I've been there, I've done that and it pulls other people down…I'm not saying put them away in segregated areas, but it pulls people down and it puts a low thing on other people. If you feel like that other people's going to take that [feeling from] you so no
>
> (Participant 11C)

Whilst the proximity of a GP surgery is quite highly ranked (27: +3), this feature is less appealing for this viewpoint than others.

This perspective does not prioritise shared outdoor areas (30: -3) and environments which prohibit smoking (29: -5) and find the payment of a service charge to maintain outdoor space and buildings unattractive (28: -6). Whilst this group are not attracted

to a village where residents keep each other updated with local news (60: -2), they find the prospect of a gated community unattractive (68: -6). Whilst the provision of well-connected public transport is quite highly ranked (6: +3), it is less of a priority for this group than others.

Factor 3: Connected Separatists

Factor 3 has an eigenvalue of 5.33 and explains 13% of the study variance. Eight participants are statistically significantly (p<0.001) associated with this factor. Six are female, two are male and they have a median age of 71. Five rent their home from a local authority, one owns with a mortgage and one owns their property outright. Their median length of time living at their current address is nine years. Five live with their spouse or partner and three live alone. Half the group have one bedroom, one lives in a two bedroom property, two in a three bedroom and one in a four bedroom. Six do not drive and two drive daily. All eight are retired. The median health rating out of 100 was 80 (n=7). Four rated their health as fair, one as good and three as very good. Three reported that their health had declined in the last year whilst five stated that it had remained the same. The participants were mixed regarding their willingness to move to a village with enhanced care and support: three said yes; one answered yes with qualifications; three said no; and one said no with qualifications.

This viewpoint is notable for its attraction to an environment which is different to the regular community setting, in terms of its design, service provision and resident mix but with less emphasis on "luxury" features and with good public transport connections. This viewpoint encapsulates a desire to live close to people who are of a similar age (53: +3) and background (51: +1) and where access to the village is controlled (68: +1). One participant associated with this viewpoint explained their preference for residents being a similar age to one another:

> Well I think you mix in better…No I don't think it would [work with mixed ages]…You're more comfortable with people your own age…I mean the young ones can be a bit cheeky and…[they] think the old people are daft
>
> (Participant 9B)

This participant stated that their preference would be to live in an environment where people were within 10 years of their age. This group are attracted to a village which is safe and secure (55: +6), is traffic-free (9: +1), is quiet (44: +4) and has wide pavements and safe crossings (66: +4). However, connected separatists also place a lot of weight on the ability to travel to and from a village via regular (2: +6) and well-connected (6: +6) public transport. Whilst not a priority, shared outdoor areas are more appealing than for other perspectives (30: -1).

The provision of 24 hour support and advice (40: +5) and long-term home care (26: +4) are attractive features, as is collaboration amongst carers (17: 0) when compared to other perspectives. This group also prioritise close proximity of GP (27:

+5) and pharmacy services (12: +5) but are not attracted to a village with properties for people with learning disabilities (20: -3).

Bungalows are the most highly ranked property type (10: +2), with houses given a relatively low weighting (61: -3) and flats (54: -1) a higher priority when compared to the other viewpoints. Communal dustbins are similarly ranked higher amongst this group than others (62: -3). Social rent was the most attractive tenure for this viewpoint (21: +1), with private purchase (57: -5), private rent (41: -5) and shared ownership (46: -5) all unattractive options and ranked lower than for other groups. Properties with technologies to support independence (63: -2), which make the most of renewable energy (33: -1) and which are smaller than their current homes (39: -6) are less attractive to this group, as is the quality of their design (25: -1). This perspective also deprioritises a number of the more luxurious features such as fast internet access (10: -2), gyms (32: -4), physical activity opportunities (67: -2), restaurants (34: -2), usable green space (45: 0), pubs and bars (22: -6) and local cycle networks (38: -6). This viewpoint also encompasses less attraction towards villages which offer training courses (18: -4), opportunities to engage in voluntary work (49: -3) and the ability to be involved in its management (69: -4).

Factor 4: Independent Engagers

Factor 4 has an eigenvalue of 3.28 and explains 8% of the study variance. Five participants were statistically significantly (p<0.001) associated with this factor. They consist of four females and one male, with a median age of 69. Two rent their homes from a local authority and the other three own their properties outright. The median length of time living at their current address is three years. All five participants live alone and are retired. Two live in a one bedroom property, two in a two bedroom and one in a three bedroom. Two participants in this group do not drive, one drives daily and two drive weekly. The median health rating out of 100 for this group is 90 (n=3). Two reported their health as fair, one as good and two as very good. Three stated that their health had worsened in the last year, one reported it as being the same and one that it had improved. The participants were mixed regarding their willingness to move into a village with enhanced care and support: two said yes; one answered yes with qualifications; two said no with qualifications.

This viewpoint prioritises interaction with other residents, engagement with social opportunities within a village and also communicates a sense of independence. The group is attracted to a village where people know one another (47: +2) and are willing to help (3: +6) and update each other (60: +1). One participant associated with this factor stated, "the people who live there are [more] important than the amenities and the amenities can be affected by the people who live there". Space for informal daily interaction (5: +3) and opportunities to engage in organised social activities (31: +5), voluntary work (49: +4), training courses (18: +2) and physical activity (67: +5) are also attractive for this viewpoint. Whilst not priorities, proximity to the local cycle network (38: -3) and opportunities to engage in the management of a village (69: 0) are also more attractive to this group than others.

Despite this concern with social interaction, this viewpoint also encompasses an attraction toward homes which offer privacy (4: +3) and where there are technologies

which support independence (63: +6). Homes which require less maintenance are not attractive (52: -4) and safety and security (55: +4), whilst still attractive, is ranked higher by other viewpoints. Proximity to friends and family (59: -4) holds considerably less appeal for this group in comparison to others and wide pavements and safe crossings are relatively unattractive (66: 0), as is the provision of long term home care (26: -1).

Bungalows are the more attractive property type (23: +3), with houses ranked lower (61: -2) and flats ranked lower than for other perspectives (54: -5). Similarly, communal dustbins are considered an unattractive feature (62: -6). Social rent is the more attractive tenure (21: +2) and is ranked highest by this viewpoint. The independent engager perspective rates properties which are attractively designed (25: +6) and both energy efficient (35: +5) and green (33: +5) as attractive. Properties which are smaller than the group's current home are considered unattractive (39: -6) and private gardens are not a priority for this group (8: -3).

Proximity to a library (7: -1), cafes (14: 0), restaurants (34: -2) and shops (37:0) are not priorities for this viewpoint and, when compared to other groups, neither are public transport (2: 0; 6: +3) and reserved parking spaces (16: -2). The viewpoint is keener than others on environments which prohibit smoking (29: 0) and finds a service charge to maintain outdoor space and buildings unattractive (28: -6).

Consensus Statements

The Q factor analysis also determines which statements exhibited a high degree of consensus, the rankings for which do not distinguish between any two of the four factors. Respect for other people (13) was ranked at either +4 or +3 by the factors and views of green areas (15) was ranked at either +1 or +2. A village which is clean and tidy (48) was ranked between +2 and +4 and connections to the local road network (70) was ranked at +2 by all four factors. A village with homes where my mortgage or rent payments are lower than I currently pay (64) is consistently less attractive across the factors, being ranked at -3 or -4.

Correlations between Viewpoints

Despite the Q factor analysis highlighting distinguishing statements for each factor, it also demonstrates intercorrelation between factors (Table 4.1). This suggests that the sample was relatively homogeneous when it came to the completion of Q sorts. The highest correlation was between factors 1,3 and 4, with factor 2 slightly more distinctive, potentially owing to its prioritisation of more luxurious features and lower ranking of care, specialist housing and adapted properties.

Table 4.1

Factors	1	2	3	4
1	1	0.4261	0.5361	0.5551
2	0.4261	1	0.3862	0.496
3	0.5361	0.3862	1	0.5061
4	0.5551	0.496	0.5061	1

Section 5: Discussion

A notable feature of all the discussions about a village with care and support was the value that the participants placed on their dwelling. This was a place where they could be themselves supporting interaction with those of significance, and a place that represented their personal biography. They were clearly in agreement with this, yet these individuals had very different backgrounds, lifestyles and aspirations.

Whilst their personal dwelling may be located in a particular locality, they argued that their idea of home extended well beyond the boundary of the physical perimeter of their house. Home, included the space that they could see from their house, and the connections that they had to their local community. For many individuals 'connections' were associated with, not only the buildings they occupied but also their personal experiences that buildings represented.. These ideas echo what Rowles (1978, 1981) described as a 'surveillance zone:' home is the dwelling and the people/territory that residents can see from within their home, and beyond to the local community that they frequent. Hence the idea of a village, as presented in this research, represented all aspects of what the participants considered home – their connections, their dwelling, the immediate and more distant space beyond that building.

The participants were also keen to stress that as they aged the majority had given consideration to their future housing needs. Indeed, they had discussed this with family and neighbours. Often these considerations and discussions had been pre-empted by a change in their circumstances; including loss of a partner, a burglary, illness or deteriorating abilities. These circumstances, particularly a break-in, or deteriorating health had undermined their sense of safety and security. Previous research, including Bekhet et al (2009) has highlighted that optimising a sense of security was a strong push factor for moving to a retirement village. Individuals who move to sheltered housing in the UK have highlighted safety and sense of security as significant factors that influenced their decisions to relocate from their home (Pannell & Blood, 2012)..

Another common feature of their discussions was their desire to maintain lifestyles through housing that could adapt as their needs change. Some of the participants were currently living in what had been their family home. In consideration of their future needs, a few participants had explored the housing market that they might enter to sell their property in order to purchase old age accommodation. Such individuals were seeking to live in a home that was a haven, that continued to have status and offered them autonomy. These were the key psychosocial benefits of home that Kearns et al. (2000) identified.

There are clearly a huge range of considerations that influence individuals in their decisions about future housing requirements and needs. The following attempts to draw out the generic and significant issues that planning and decision-makers might take into consideration.

Push/Pull factors motivating a move to a Village with care and support

There are a variety of push and pull factors which can influence relocation in later life (Baumker et al., 2012). Overall participants were attracted to villages which are safe and secure with good public transport and with close proximity to amenities such as shops, a GP surgery and a pharmacy. Participants prioritised the cleanliness and tidiness of the village over other features and attached significance to the respect village residents possess for one another. Bungalows and energy efficient homes were also attractively rated features for villages. Participants were not generally attracted to a village where they would live alongside residents of a similar background and age to them and restricting access to a village was also relatively unattractive. Access to pubs, work opportunities and the local cycle network were all deprioritised by participants overall and the prospect of downsizing was not found to be attractive. Communal dustbins, service charges and shared ownership tenure homes were also ranked very low by participants.

Despite the inclusion of 70 statements about villages with enhanced care and support, participants collectively generated a list of 15 more features which could potentially be important to them. These included a mix of very specific characteristics, such as costs and location, and more innovative ideas not previously considered such as multi-generational housing, trial periods, and self-build and resident-led design opportunities.

The participants were divided on whether they would currently consider moving into a village which was built around their most valued preferences. 20 of the 44 answered positively, 19 answered negatively and five were unsure. There was more equivocation amongst those who suggested that they would not currently consider the prospect with several suggesting they could come back to the idea at a later point in their lives. The fact that approximately half the participants would not currently consider moving to a village even if they were guaranteed the features they had ranked as more desirable demonstrates the importance of push factors in relocation in addition to the pull factors explored in this study. If people do not feel that they need to move and would potentially risk losing attractive features of their current housing or environment, such as good neighbours, then even the most attractive features of a village may not prompt relocation.

The Q factor analysis allowed a more nuanced view of participants' views to be teased out. Four viewpoints were extracted which accounted for 28 of the participants: adaptation and care seekers; care-indifferent luxurians; connected separatists; and independent engagers. More factors could have been extracted which could have accounted for more of the study variance but these viewpoints would only have been associated with one or two participants each. The main differences between the groups were: the extent to which they found accessible, adapted properties and the provision of care attractive; their prioritisation of more luxurious features such as private gardens, fast internet access and attractively designed properties; their attraction to an environment which is notably different to the wider community in terms of its design, service provision and resident mix; and how much they desire the opportunity to engage in social opportunities and remain independent. However, it should be noted that despite these differences between

the four viewpoints extracted from the data there was substantial correlation between them and none of the perspectives were very distinct from the others.

Limitations and Future Considerations

The limitations of the research need to be acknowledged. Whilst this study can be considered exploratory, the statements were developed and selected by the researchers and officers. Therefore the Q sort can only be considered a partial snapshot of the features which are likely to be considered attractive and unattractive by older people, which is supported by the additional suggestions the participants made for what could influence their decision on relocation. Secondly, the 45 participants of the study are unlikely to be fully representative of older people across all localities and therefore the findings cannot be generalised more widely and should be treated as indicative. Thirdly, the study did not include participants with dementia, a group for whom the commissioning organisation is currently considering specialist accommodation as part of the prospective new development.

The study points towards some clear areas for future consideration for those making decisions about future housing options. Whilst the provision of high quality care may be a key objective of the prospective new development, it is important to recognise that for many older people this will not be the most important concern when considering relocation, with many other features ranked as more attractive. Chief among these is safety and security. This feature in particular will require further consideration on how it is best achieved. There are also groups of residents who may be more concerned about what might be considered luxury features or the potential for social interaction. It is therefore important that housing developers reflect not only on the purpose of any future development from its own perspective but on how potential residents may perceive such housing and the features which could be influential in their relocation. .

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Appendix 1: Push and Pull Factor Literature

Authors	Year	Title	Country	Methodology	Factors Influencing Moves	Notes
Beach	2015	Village Life: Independence, Loneliness and Quality of Life in Retirement Villages with Extra care	UK	Survey questionnaires distributed to 7 different residences	Nearer to family, maintain an active lifestyle, independence, downsizing, future care needs and not considered typical care	Report also looked at loneliness and social exclusion in terms reduction of these in a community based care setting
Bekhet, Zauszniewski and Nakhla	2009	Reasons for relocation to retirement communities - a qualitative study	US	Qualitative data from 104 relocate elders aged 65+.	Pushing: Own or spouse's failing health Getting rid of responsibilities Unavailability of help Facility closed Loneliness Pulling: Location Familiarity and reputation of the facility Security Joining friends Overlapping factors: e.g. loneliness and joining friends	The authors defined three groups: pushing (coercing, pressing, repelling); pulling (attracting); and overlapping (a combination). The discuss the voluntary-involuntary tension of moves.

Bernard et al	2007	Housing and care for older people: life in an English purpose built retirement village	UK	Framed by 4 primary research questions 3 year multi method participative action research design including ethnography, diary keeping, participation groups, annual conferences, individual & group interviews, structured questionnaires and self completion questionnaires	Push: Health, Partners health, previous house/garden too big, security, social opportunities, death of a spouse, Pull: care & support provided on site	
Crisp et al	2013	Considering relocation to a retirement village - predictors from a community sample	Australia	Survey method with 517 community-living residents aged 55 to 94	Factors associated with previous consideration of future relocation to a retirement village/complex included: Being retired Being aged 55-64 Sufficient financial resources Poorer physical health Poorer current neighbourhood cohesion	
Crisp et al	2013	What are older adults seeking? Factors encouraging or discouraging retirement village living	Australia	Survey method with 517 community-living residents aged 55 to 94	The factors reported by the greatest proportion of respondents as being likely to influence a decision to relocate to a retirement village were: Assistance in the case of declining health Family doesn't have to look after you	The findings contain further data on the age breakdown for the results and how the results differ for people who have previously considered relocation.

				Convenient location to facilities Less strongly endorsed as factors likely to influence relocation decisions were: Opportunities for keeping active Being around people your own age Greater social life Factors reported by the greatest proportion of respondents as likely to discourage relocation were: A loss of independence A lack of privacy Less frequently reported as discouraging relocation were: Not wanting to lose neighbours Perceptions that RVs are just for older people	
Ewen et al	2014	Aging in place and relocation - plans of community-dwelling older adults	US	Survey with 416 individuals aged 60+	Factors statistically significantly associated with likelihood of relocating to a retirement community in the future were: Education Financial adequacy (negative) Currently considering moving In addition, structural equation modelling demonstrated that the following predicted moving plans, which in turn predicted relocation to a retirement community:	

					Greater education Greater financial adequacy Less contact with children	
Finn et al	2011	Financial Planning for Retirement Village Living: A Qualitative Exploration	Australia	Interviews with a stratified sample of 52 retirement village residents, 55-89	Financial factors considered in decisions about moving to a retirement village need to sell the family home to facilitate the move having enough money left over to secure a financially comfortable retirement affordability of retirement village living monthly maintenance costs/ annual increases in management costs deferred management fees	The authors argue that moving to a retirement village is complex and that there are several competing financial considerations for retirees to contemplate. Significantly, these considerations have implications at each stage of the tenure process (before, during, and after moving into a retirement village) and decisions relating to stages 'during' and 'after moving' are made before the move, whether retirees know it or not.
Gardner et al	2005	Accommodation options in later life: retirement village or community living?	Australia	A cross-sectional survey derived from Lawton's quality of life of three groups: 121 residents of independent living units of two retirement villages and a group of older people who considered moving but decided to remain living in the community.	Pull factors Social life and community activities Secure housing Affordable housing Manageable dwellings and garden Health support	Village respondents reported higher levels of improvement than the community group on all measures of quality of life since moving or considering a move to a village. following. The social life and activity in the village, secure and affordable housing, a more manageable dwelling and garden, and the health support, community activities and the physical aspects of the village were the most frequent reasons given by village respondents for the positive change in their life.

Grant-Savela	2010	The Influence of Self-Selection on Older Adults' Active Living in a Naturally Occurring Retirement Community	USA	A mixed-methods study that included an environmental of inventory, direct observation of park and recreation areas, physical activity diaries/ 396 residents 60 year+ and in the NORC returned the survey.	Pull factors Active lifestyle supported Activity level of peers Social support Attractive activites	A key finding of the study is that in-migrants self-selected into the NORC under study because of its physical opportunities for outdoor recreation, to engage in specific recreational activities, and/or to pursue a more active lifestyle.
Groger and Kinney	2006	CCRC Here We Come! Reasons for Moving to a Continuing Care Retirement Community	USA	Qualitative interviews with 20 elders who were planning on moving into a CCR facility within six months of the interview.	Pull factors Attachment to the community in which the CCRC is located Geographic proximity to relatives Desire to effect the move while still in good health Fear and uncertainty about the future Push factors Desire to plan while able to do so Optimal timing or readiness for change Fear of burdening family Difficulties of home and yard maintenance Own or spouse's failing health Environmental barriers Noisy neighborhood A desire to downsize Negative examples of friends or relatives who had failed to plan ahead and who had to be	Moves to CCRC were influenced by assurance of continuity as well as the promise of change in their lifestyle.

					institutionalized precipitously by others	
Krout	2001	Reasons for relocation to continuing care retirement and community	UK	Qualitative interview s	Continuing care, Upkeep and maintenance, Did not want to be a burden, Size of residence, Ability to get around, Respondent's illness, Spouse's illness, Same-age setting, Spouse wanted to move, Did not want to live alone, Less isolated location, Crime, Near family, Family encouraged move, Death of spouse Pull: Continuing care, Medical services on-site, Near relatives and friends, Independence, Reputation, Maintenance free, Cultural activities, Size, design, or choice of units, Compatible people, Well managed, On-site services, Location, Decent place to live, Climate, Kitchen facilities, Cost, Bring own furniture, Transportation, Security system, Religious affiliation	
Kupke	2000	Relocating for Retirement or what makes a happy Retirement	Australia	Postal Survey of 380 Households in retirement village	Push: Forward planning, Dwelling size, loss/death of spouse, loss of own health, available housing and availability of affordable housing Pull: company, safety, help and closeness to family	

Neville and Henrickson	2010	'Lavender retirement': A questionnaire survey of lesbian, gay and bisexual people's accommodation plans for old age	New Zealand	A web-questionnaire survey completed by 2269 LGB targeted participants	Pull factor unable to remain at home or with family and friends LGB-friendly retirement facility	
Prawitz and Wozniak	2005	Selection of a continuing care retirement community: does extent of search help predict resident satisfaction?	USA	Factor analysis used to create multidimensional constructs	Pull factors Care aspects (Services and costs, availability of medical services, staff, nursing home, and services to remain independent; entrance fee, monthly maintenance fees, and additional fees if nursing home care was needed). Atmosphere, social climate and physical appearance (friendliness of staff and residents, home-like atmosphere, and appearance of grounds and living quarters).	In addition to examining the factors considered in the selection of a retirement community, there was also exploration of information sources, extent of the search and satisfaction post occupation.
Seaman et al	2015	Selection of a continuing care retirement community: does extent of search help predict resident satisfaction?	USA	46 older adults (23 independent living and 23 retirement community) completed 30 experimental trial of a Balloon Analog Risk Task.	Pull factors Risk aversion	A relationship between residential choice and risk-taking behaviour was identified in this study exists but the directionality of this relationship is unknown. It is possible that risk-averse individuals choose to live in senior living communities.

Walker and McNamara	2013	Relocating to retirement living: An occupational perspective on successful transitions	Australia	Sixteen semi-structured, in-depth interviews were conducted with participants, 65+, recruited from retirement living facilities across three stages of relocation; 'Decision', 'Early Days', and 'Established'.	Pull factors New facilities Increased support Closeness of services Decreased responsibilities Pleasant locations Opportunity to engage in new routines/activities Push factors Declining physical ability Home maintenance Finances	Participants who experienced positive post-relocation adjustments had the ability to facilitate optimal person-environment and occupational fit throughout the relocation process.