



Needs assessment and feasibility study
Assisted living houses for the elderly, Nepal

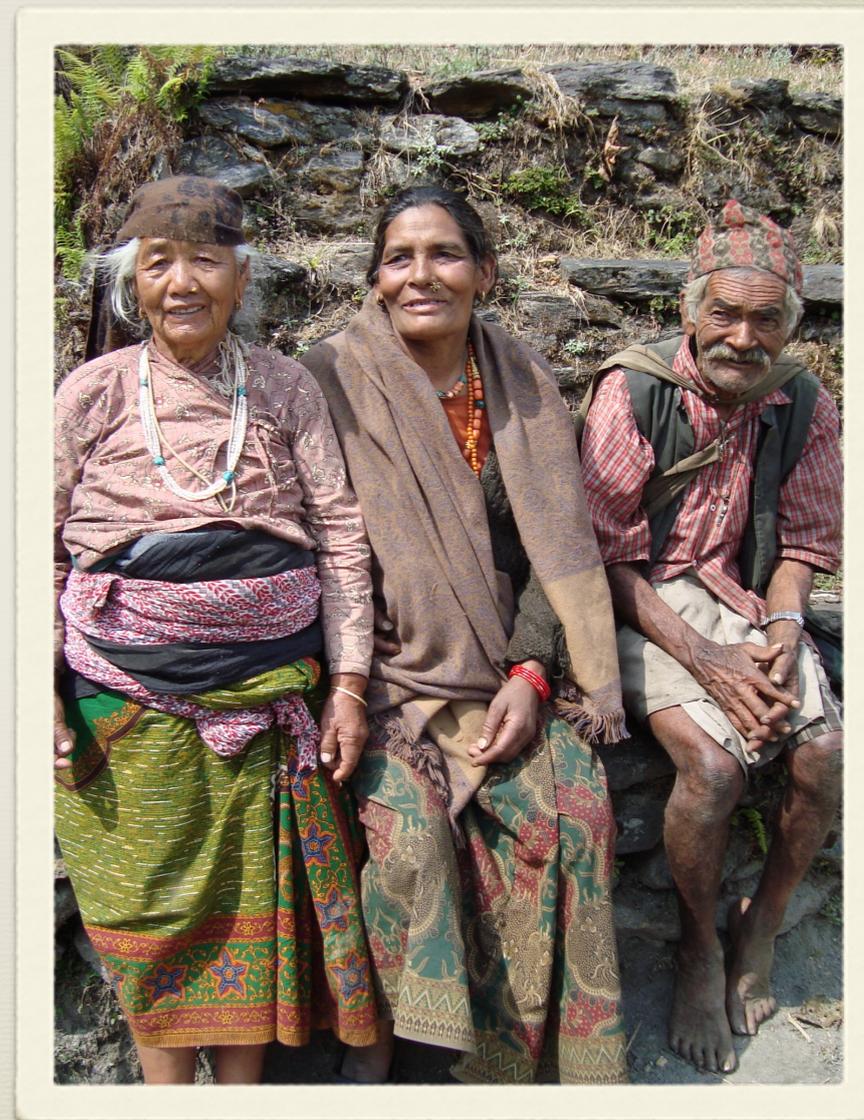
Bruce Anderson

- * Former Director
Grampian Health
Board, Scotland, UK
- * Lead in Joint Strategy for
Older People in NE
Scotland 2003
- * Adviser to Ageing Nepal



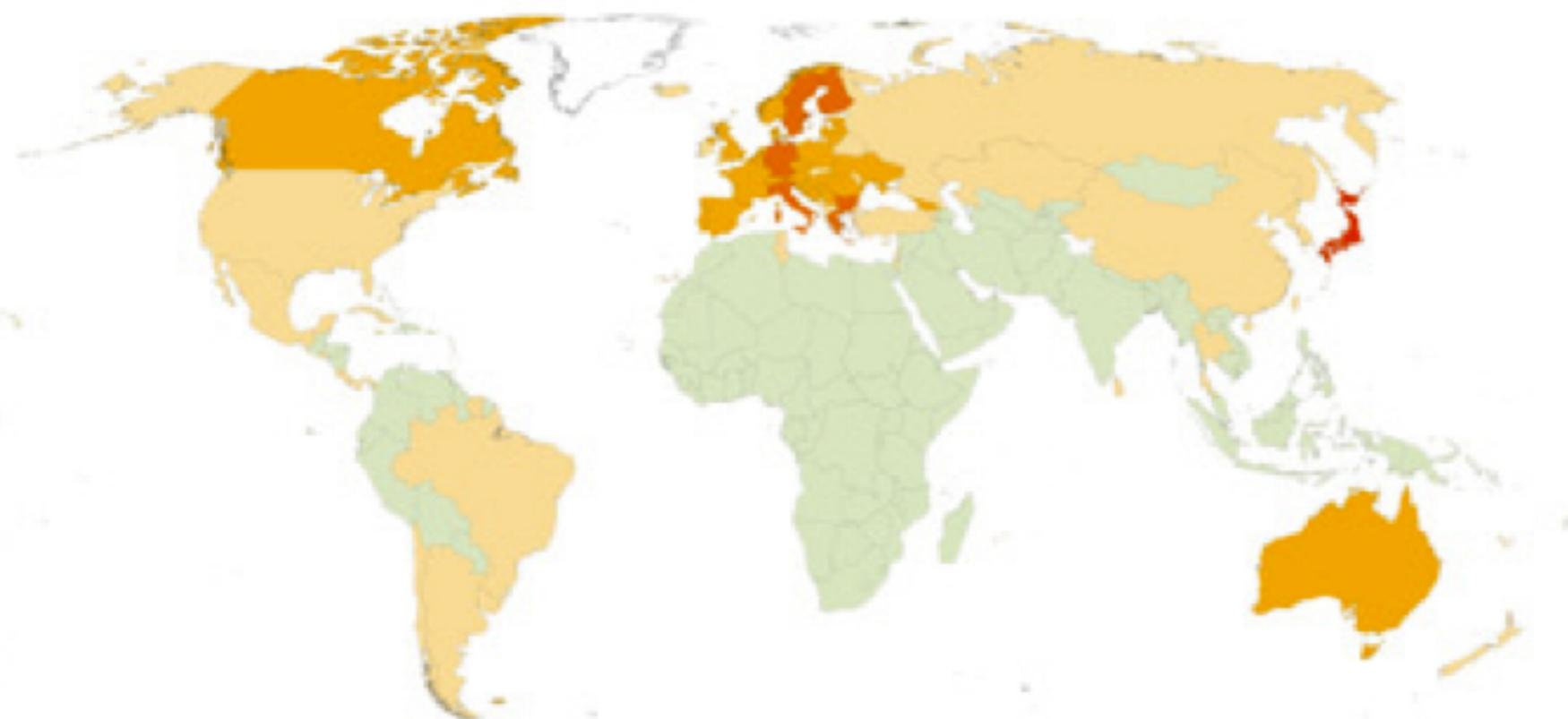
Previous studies and workshops in Nepal

- * Health Needs Assessment, Bhaktapur
- * Dementia study
- * Study of care homes
- * Needs Assessment in Pharping
- * Government Workshop in 2011

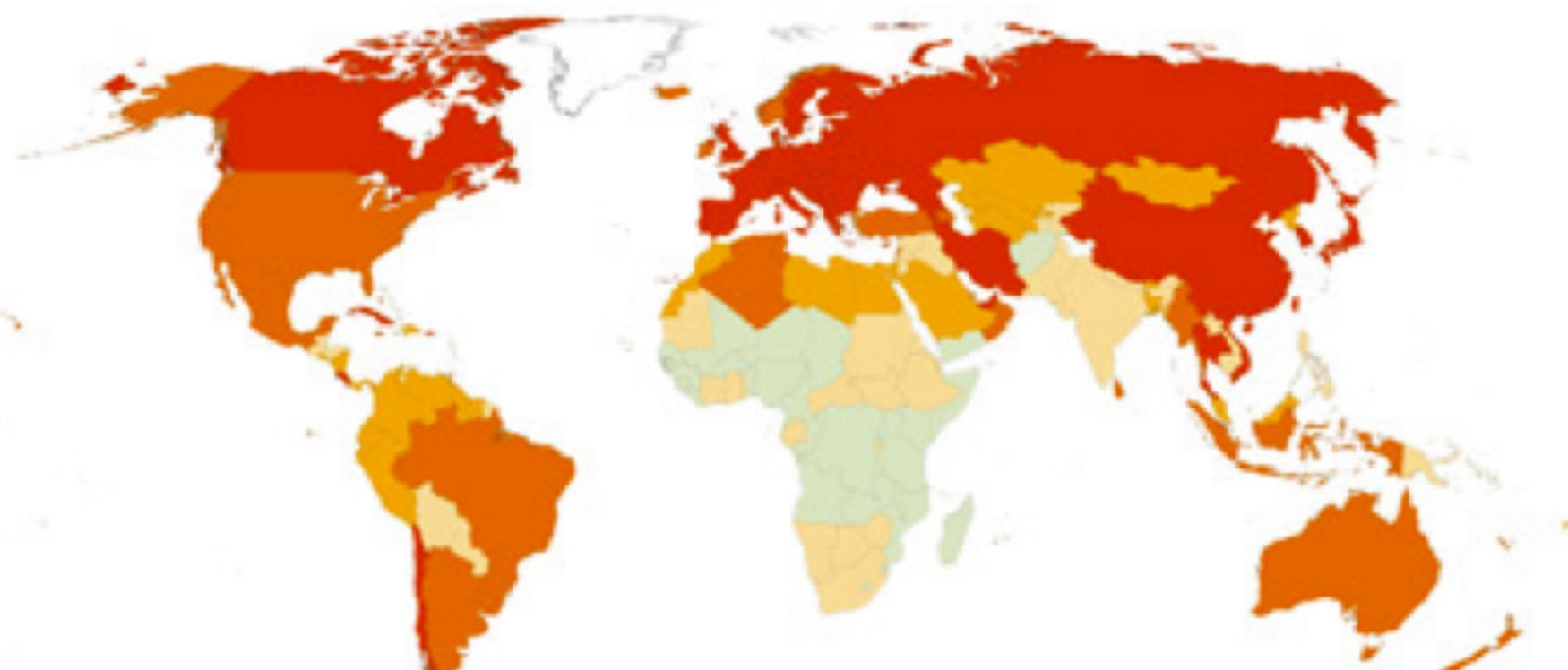
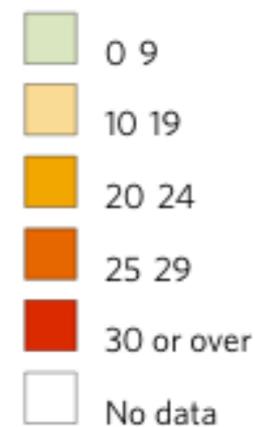




Map 1: Proportion of population aged 60 or over in 2012 and 2050



Percentage aged 60 years or over,
2012



Percentage aged 60 years or over,
2050



Nepal - the national position

- * 10% of pop now over 60
- * Will be more than 20% by 2050
- * Number of children per family 2.7
- * Huge migration of young people to urban areas and abroad (3m)
- * Women increasingly part of workforce
- * Weakening of once strong family structures



Nepal - the national position

- * UN study in 2010 - 6% of over 60's unsupported
- * Drifting into poor quality residential accommodation
- * Often dependancy levels inappropriate and costs high
- * Scope for developing a range of sheltered housing for those unable to stay at home



Needs assessment and feasibility study undertaken by-

- * Sirjana Devkota, Nepali nurse working with the elderly in Scotland and recently completed a Masters in Public Health
- * Supported by Shova Khannel formerly no 2 in Ageing Nepal
- * Supervised by Prof Phyo Myint and Dr Roy Soiza, Medicine of Old Age, Aberdeen University, Scotland, UK

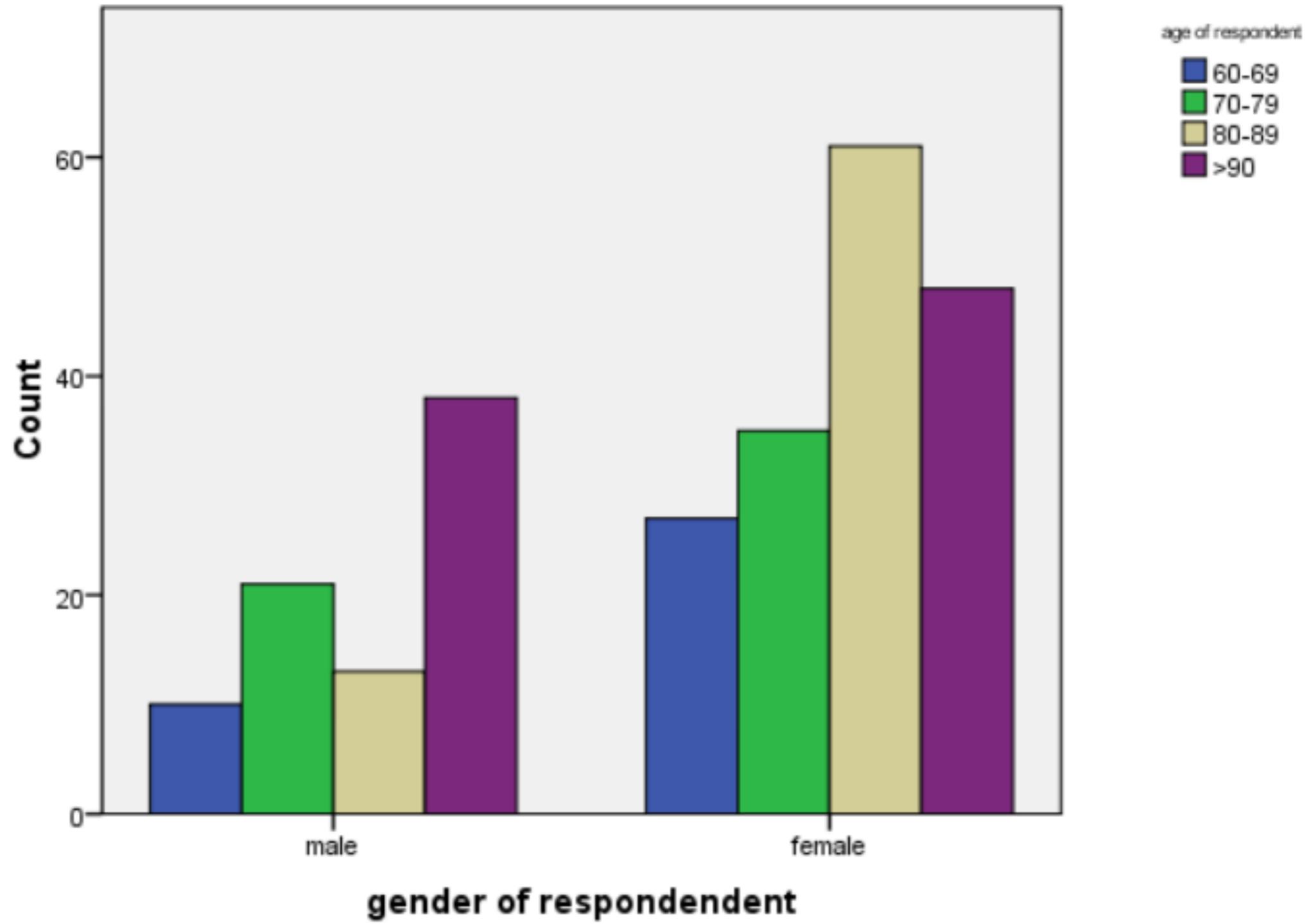


Needs assessment and feasibility study

- * Funded by the Gurkha Welfare Trust responsible for the welfare of 9,000 pensioners across Nepal
- * 253 interviewed in Ghorkha District in March 2014
- * Also included focus groups
- * Follow up workshops planned in UK and Nepal
- * Still very much "work in progress"



Bar Chart

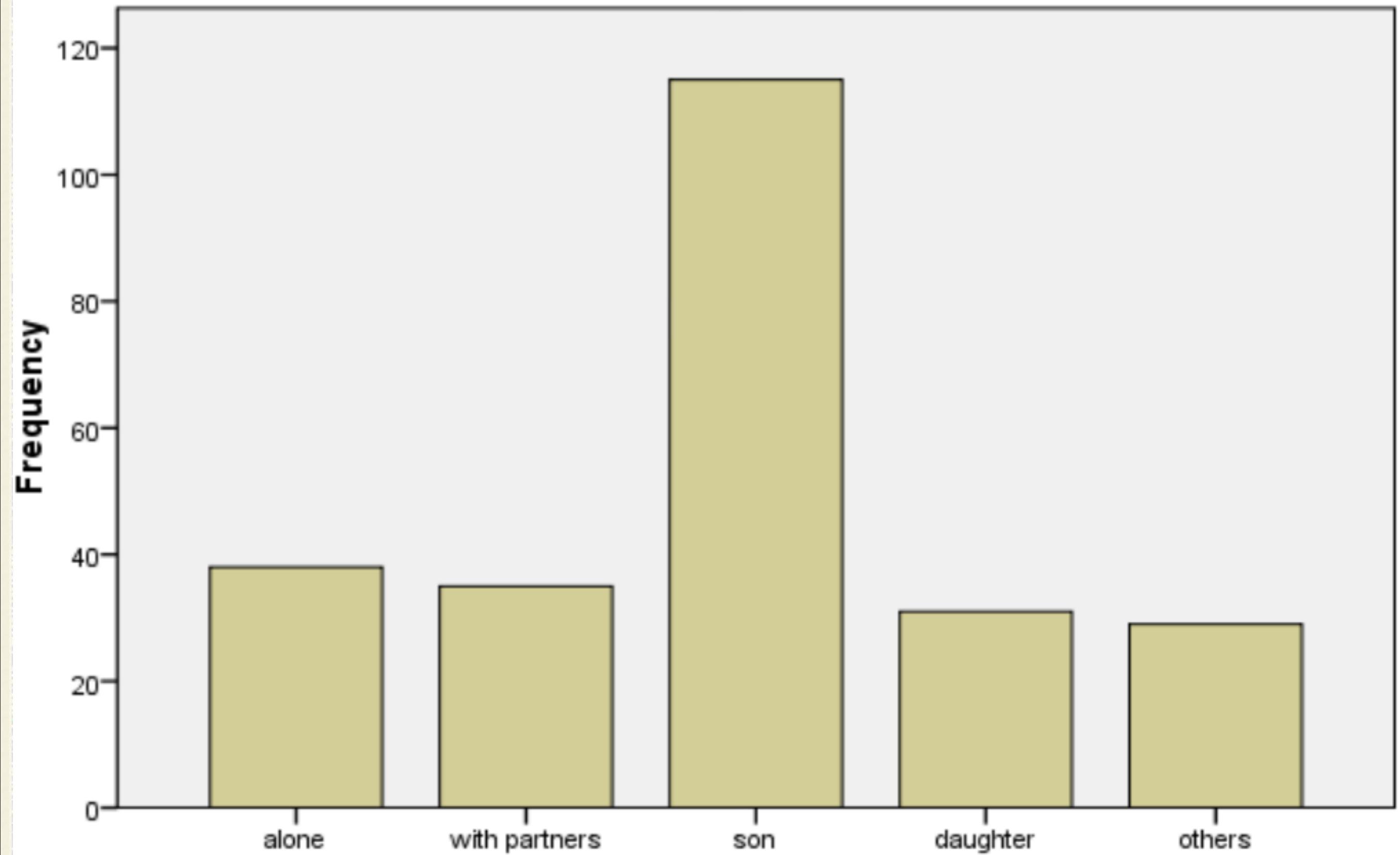


Preliminary results

- * 38 out of 253 or 15% live alone
- * 4% unsupported



living arrangement



Physical health - top 6

- * Sight 77%
- * Hearing 77%
- * Gastro Intestinal 54%
- * Osteoporosis/Gout/Pain 50%
- * Cardiovascular 40%
- * Breathing (COPD) 38%



Mental health issues

- * Insomnia /sleep disturbance 85%
- * Anxiety 80%
- * Forgetfulness 76%
- * Isolation/loneliness 64%
- * Feel low/depressed 64%

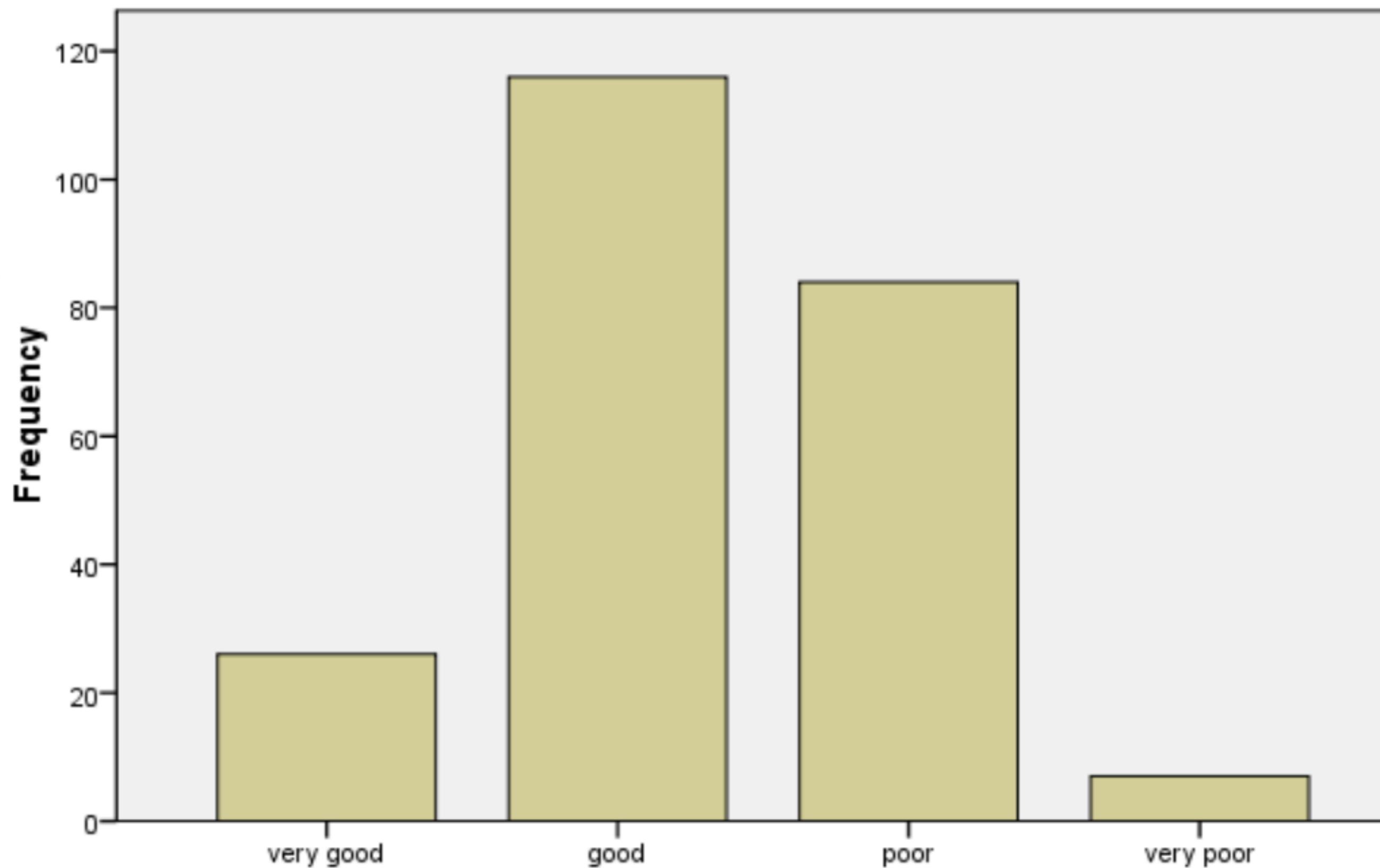


How did they rate their health

- * Poor 85 or 34%
- * Very poor 8 or 3%



how do you rate your health

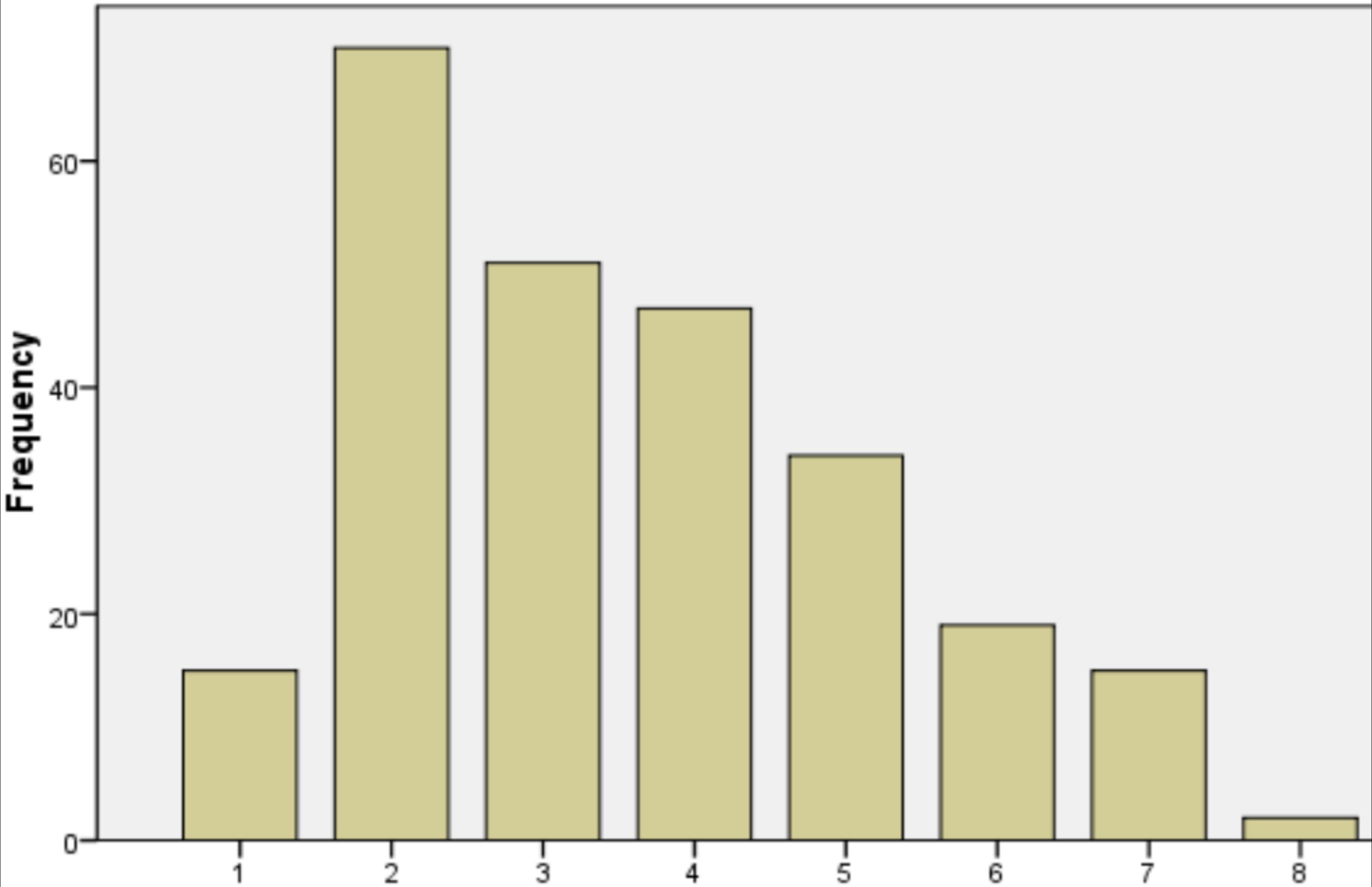


Clinical frailty score

- * Mildly frail 35 or 14%
- * Moderately frail 20 or 8%
- * Total 55 or 22%

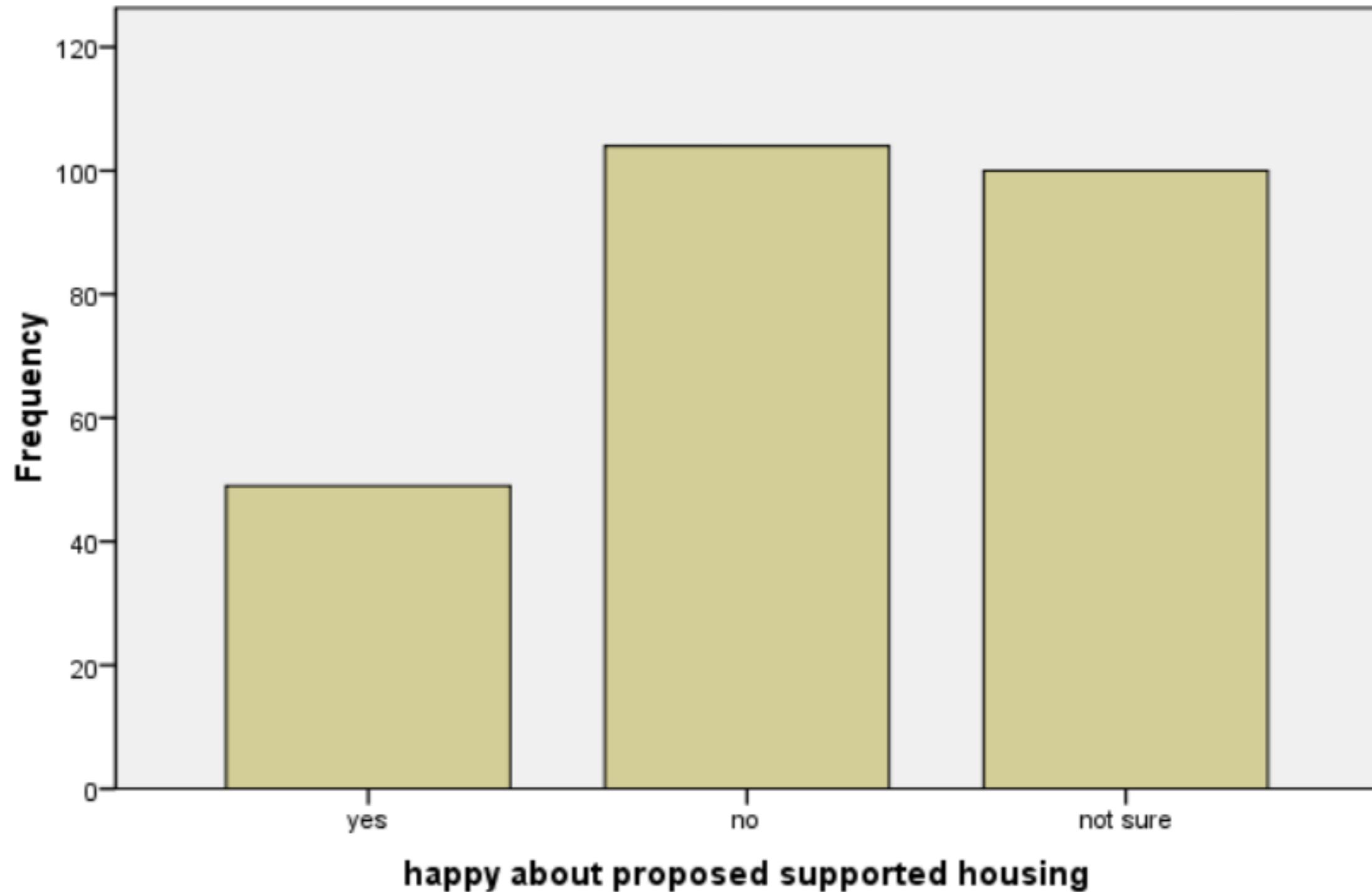


clinical frailty score (rockwood's +CHSA)

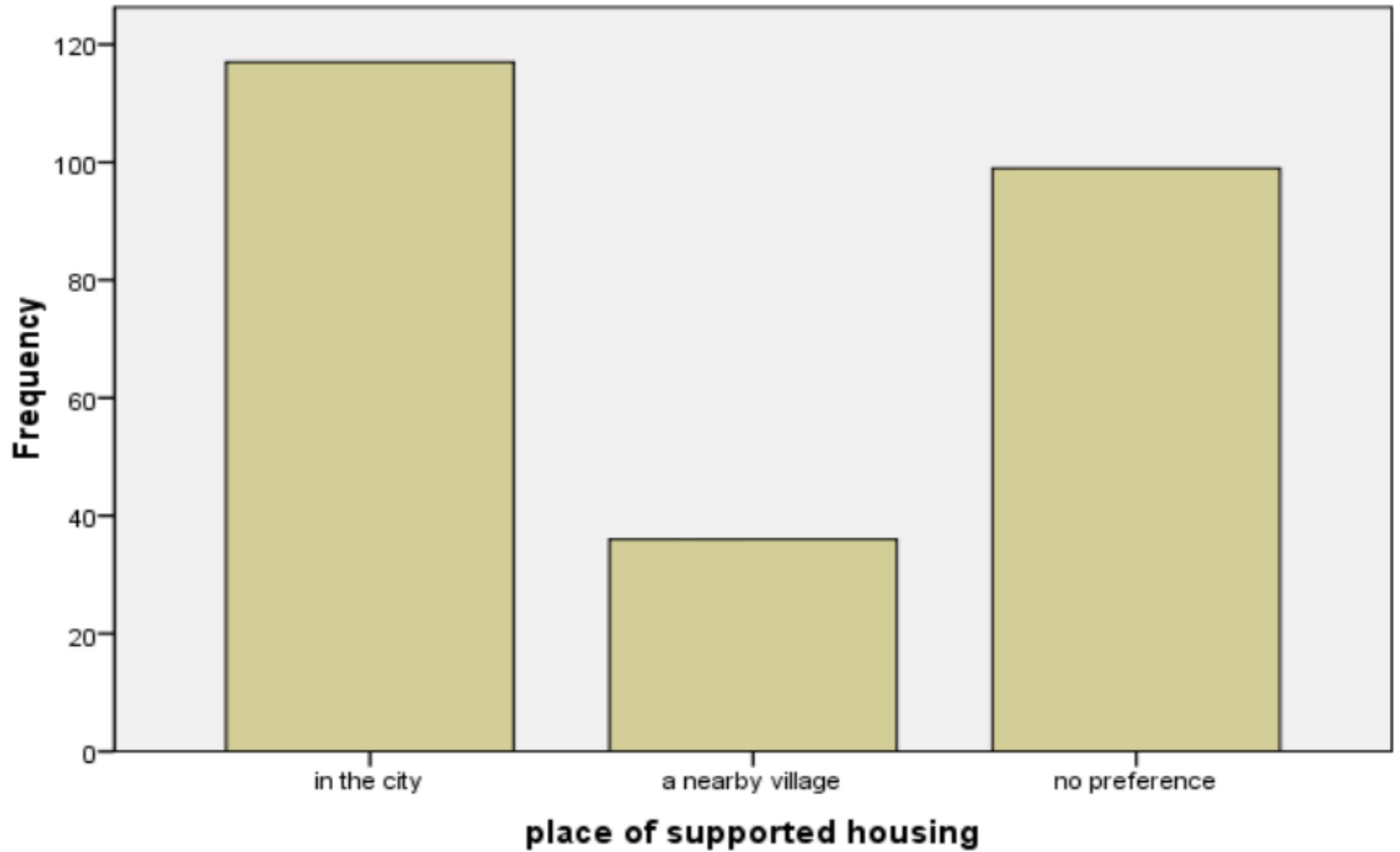


Views regarding purposed housing

happy about proposed supported housing



place of supported housing



The positives attributed to assisted living houses in focus groups

- * Greater freedoms with meal times/ visitors
- * Ability to live together with spouse
- * Greater autonomy in community
- * Not institutionalised
- * No age restrictions
- * Located in own community



Next steps

- * Workshop in UK with range of players/stakeholders - "what makes sheltered housing work"
- * Workshop in Nepal with range of interests and importantly potential users and relatives
- * Service design and architectural drawings - involving potential users
- * Identify housing provider

