Humanitas Foundation Rotterdam

Interview with Dr. Hans Becker

Interview by Sofia Widén and William Haseltine
ACCESS Health Sweden

October 2016
Our vision is that all people, no matter where they live, have a right to access high quality and affordable healthcare.
Background

The Humanitas Foundation is a long-established nongovernment organization in the Netherlands. The organization is based in Rotterdam. The Humanitas Foundation is internationally known for Apartments for Life. Apartments for Life is an innovative elder care housing model that started in the 1990s. Staff regards apartment occupants as residents. They do not regard apartment occupants as patients. There are now more than fifteen Apartments for Life complexes in Rotterdam today. The apartments house thousands of elderly residents.

The core care philosophy of the Apartments for Life model has four tenets. The first is to “be your own boss.” This attitude empowers the residents to make decisions for themselves. Residents are encouraged to rely on themselves. They are not forced to rely on others. The second tenet is “use it or lose it.” The elderly lose their life skills if they do not use them regularly. Once lost, physical or mental abilities are difficult to regain. The staff at the Apartments for Life encourage residents to use their abilities, to build on their strengths, to learn new skills, and to take up new hobbies.

The third tenet of the Apartments for Life model is the “extended family approach.” This approach eliminates the divide between the residents and the care providers. This concept combines the knowledge and expertise of both groups. Each resident has something to offer that can benefit others. Examples include the work experience of residents, their professional skills, and personal experiences. The goal is to improve the self-esteem and self-worth of residents. The residents feel useful and appreciated. These feelings contribute to their happiness. The fourth tenet is the Yes Culture. The Yes Culture means that the staff agrees to any new idea, proposal, or request the residents make. The staff explore possibilities to find a workable solution to any challenge that arises.

The Apartments for Life model focuses on social interactions and human happiness. The model has inspired organizations around the world. The Apartments for Life complex includes a zoo, internet café, a remembrance museum, and more than sixteen restaurants. The Apartments for Life concept provides its residents with healthcare and a normal life.
Dr. Hans Becker is chairman of the Managing Board of the Humanitas Foundation. He was a professor at the Erasmus School of Economics in Rotterdam for twenty five years before joining Humanitas in 1992. Dr. Becker’s “Apartments for Life” model and philosophy based on human happiness have revolutionized the social and commercial perception of nursing homes.
Interview

Sofia Widén (SW): Hello, Dr. Becker. Please tell me about your background.

Dr. Hans Becker (HB): I am an economist. I was a professor in the economics department at Erasmus University for twenty five years. I decided to change my career direction. I completed a dissertation in the care sector. I am now a professor of humanizing cure and care. Humanizing care focuses on the social dimension of care. This care model includes human interactions and happiness. This concept does not rely on just the medical and technical aspects of care.

Humanitas had twelve elder care homes in 1995. My father was eighty five years old. He said to me, “I am worried about the current state of elder care. Chronic illnesses cannot be cured, yet most elder homes focus only on the medical part. What can you do? How can you improve care?” He was skeptical about change. I realized we had to transform the core business of elder care. We had to focus on happiness. Diseases including Parkinson’s and Alzheimer’s have no cure. We cannot cure or prevent all illnesses or avoid death. Instead, we can empower people with a sense of happiness. This focus improves the quality of life for the elderly. That is the goal of the elder care homes at Humanitas.

SW: How did you transform the traditional elder care home model?

HB: People like to make their own decisions. They want to be in control of their lives. Nursing and elder homes do not permit that. You are given coffee only at 10 am. You cannot have it at 9:30 am. You are not allowed to drink every day. You are no longer in charge of your own life. You live in a room in an institute. The institute model is not humane. My first innovation was to make the elder care institution different from a hospital.

I named the Humanitas elder care apartments “Apartments for Life.” I wanted these apartments to provide a sense of normalcy. The Apartments for Life offer a shelter for the elderly. There, you can go to eat, to sit in the internet café, to change money, or to visit the supermarket. Anyone from outside the complex can visit. These apartments do not provide only medical and daily care. They also include restaurants, museums, and recreational activities.

I also introduced diversity in the apartments. The apartments are not just for those who are ill. We mix young and old, healthy and ill, rich and poor, homosexual and heterosexual. Forty percent of our staff are not Dutch. We have staff from forty one countries, including Morocco, Turkey, and Pakistan. The mixture of different people resembles regular life.

Finally, I wanted the residents to be in control of their own lives.
SW: Please explain.

HB: We have autonomy over daily decisions. The elderly should have autonomy as well. They do not have any in most nursing and elder care homes. The nurse or staff in charge determines which activity a patient can do. Meals and activities happen at fixed times. To drink or to eat beef is not allowed.

Autonomy gives the elderly a sense of power. Residents who have the mental capacity are entitled to make their own choices. Real autonomy comes from doing what they want even if the nurse and doctors do not agree. The elderly at Humanitas are free to live with minimum rules and restrictions. This goal is part of our core philosophy.

SW: Could you describe the philosophy behind Humanitas in more detail?

HB: We have four parts to our core philosophy: be your own boss, use it or lose it, the extended family approach, and the “Yes Culture.”

I just explained the first part of our philosophy. The second part, “use it or lose it,” encourages the residents to help themselves. The staff in most nursing and elder care homes assist you with
simple tasks. They help you to bathe, to cook, to clean, and to eat. They assist with these tasks because it is faster. To help an elderly man put on a shirt is faster than to let him do it himself. There is too much care in the Netherlands.

People perceive the elderly as helpless. They think the elderly need assistance in every activity. People do not use their strengths when they receive too much care. You will forget how to walk if you sit in a chair all day. You have to exercise your legs. Too much care is worse than not enough care. Residents will forget how to do daily tasks by themselves if you always assist them. The functions that define personal independence are taken over by others. The elderly lose their self worth. They become miserable.

The new slogan of Humanitas is, “You should not care for people.” This is a strange slogan for a care organization. The idea is that people care for themselves. You should assist only where necessary.

**SW:** How does this concept work?

**HB:** Our concept sounds simple. However, the elderly cannot do everything themselves. They cannot all cook for themselves. They cannot all clean their apartments without help. The elderly would become exhausted. They would not pursue other activities that make them happy. They would not have time to relax. They would not have energy to play cards with their friends. They would be tired from cooking meals. To determine which activities they should do themselves and which the nurses should help with is difficult. We need to determine who should make these decisions. People have different perspectives on how much care is necessary. A manager should determine the level of care each resident needs. These managers must combine care, perseverance, creativity, and empathy in their decisions.

We should provide for the basics needs of the elderly. We should support those who need help to bathe, to clean, and to prepare food. The elderly also need to stay active. They should have a daily plan. Doing some tasks by themselves improves the self esteem of the elderly. They have a sense of control. The residents also are encouraged to try new activities. They are given opportunities to learn new skills. We avoid any sense of limitations.

We also train our staff in the “Yes Culture.” This approach allows our residents to pursue different ideas.

**SW:** What is the Yes Culture?

**HB:** A Yes Culture means to say “Yes” to any request our residents make. This Yes Culture starts a dialogue. Staff members and clients start to look for solutions. For example, a lady requests to keep five cats with her at the facility. Five cats is difficult to accommodate. However, staff are not allowed to say “No.” We have a conversation. We ask her, “How old are your cats?
How long have you had them?” One of her cats was twenty four years old. We agreed it should stay with the woman’s daughter. One of the younger cats stayed with the woman. There were other residents in the facility who could and wanted to care for the cats. The rest of the cats were given to these residents. Now everybody is happy. That is the Yes Culture.

We do not have this Yes Culture in our society. We make recommendations to the government. If the government likes our plan, they approve it. If not, they reject it. The government does not allow for discussions. A Yes Culture starts a dialogue. Dialogues help implement ideas. They help us innovate. They help us adapt to the changing needs and values of the people.

Some people assume the Yes Culture misleads residents. I understand that not everything is possible. For example, you cannot build a swimming pool here even if the residents want one. There is no space. There is not enough money. You start with “Yes” to have a dialogue. The residents are aware of the Yes Culture. They feel empowered to make requests. The approach allows the residents to decide how to live their lives.

SW: Can you tell us about the fourth tenet of your core philosophy?

HB: The fourth tenet is the extended family approach. This approach views everyone in the facility as one big family. Each resident has their competencies, expertise, and experiences. We bridge the gap between the residents and care professionals. This connection allows everyone to share their experiences and knowledge. Shared knowledge can lead to improvements in care. We do not assume that care professionals know everything about a patient’s care requirements. A resident might have lived with an infection for years. Care professionals should listen to what a resident knows about his condition. The extended family approach acknowledges the residents’ experiences. This recognition improves the residents’ feelings of self worth, self esteem, and happiness.

SW: Please describe the biggest challenge the elderly face.

HB: Human beings are like other animals. They like to move in a herd or group. If your group is gone, you are not happy. The biggest challenge the elderly face is not the trembling hand. Their biggest challenge is loneliness. Loneliness spreads like a cancer. Groups disappear. The family is gone once you are ninety nine years old. You do not play hockey or soccer anymore. You may no longer be a member of the local country club. We need to encourage the elderly to form new groups.

SW: How do you encourage the elderly to interact and form new groups?

HB: We recognize the strong link between food and social interaction. A traditional nursing home focuses on the necessary intake of carbohydrates, vitamins, and minerals. The elderly eat their meals for sustenance. They do not eat because they like the food. What can you discuss if
you do not walk well, see well, hear well, and smell well? People have trouble once they lose
their physical and mental capabilities. They cannot interact with their environment. People can
always talk about food, even if their bodies are weak. I built sixteen restaurants. The residents
come and talk with each other over a delicious meal. We also provide simple meals for people
who cannot pay much. Even a poorer person can have lamb chops on his birthday.

The slogan of the care homes was, “The bucket filled with ice and peas is as important as the
nurse.” Another one was, “The small duck is as important as the doctor.” Enjoyment of food is as
important as medical attention. People tend to place more importance on the nurse than a tasty
meal. The tasty meal and the nurse are equally important. They each foster well-being and
happiness.

SW: What else did you introduce in Humanitas?

HB: I wanted to focus on wellness and happiness. Happiness is a broad term. The concept is too
abstract. I asked myself what freedom and happiness mean. I enjoy a glass of wine at the bar
every day. My clients should have that same option. That realization was my first concrete step
toward defining freedom and happiness. That is why I started the restaurant.

Then I focused on art. I allocated money to buy abstract art. The residents did not like it. We
bought more traditional paintings. We started to make the paintings ourselves. We now have five
art studios.

I also started a zoo. It has small belly pigs, a few goats, and rabbits. The zoo attracts children to
the care homes. The zoo encourages them to visit their grandparents. Visits from family make
the residents happy. I introduced the internet corner for the children, grandchildren, and
grandparents. I started the remembrance museum. The past works as a conversation piece.

SW: Which time periods does the remembrance museum cover?

HB: We start in the 1930s. The 1970s is the last period we cover. We should venture into the
1980s. The museum encourages a resident’s friends to visit. All the attractions bring more
visitors to our residents.

In the care homes, the residents complain about health issues. One quarter of the complaints are
not related to medical matters. The complaints are a cry for attention. People are lonely. Visits
from the nurse or the doctor are expensive. We want to attract the family to visit. Visitors make
the atmosphere happy. Seeing friends and family improves the residents’ health and happiness
without pills and injections.

SW: Do you see the requests for medications and visits to the nurse decrease?
HB: Yes. We also want to show medical professionals that too many pills poison people. Some medication is necessary. Some have side effects. We improve the residents’ happiness without the introduction of medicinal complications.

SW: Please tell me about the volunteers at Humanitas. What role do they play?

HB: The volunteers are a part of the extended family approach. We have a mix of volunteers. They are different ages. They have different backgrounds. One of our volunteers is eighty five years old. Volunteers assist the residents with various tasks. They help with grocery shopping, socialization, and basic care. We use everyone’s experiences to improve the happiness of our residents. We create a strong sense of community among the employees and volunteers. They support one other, provide feedback to one other, and create improvements to enhance working practices.

SW: Is there anything you would like to change or improve at Humanitas?

HB: I would like to have more swimming pools. Swimming is good for older people. I would like to add more remembrance museums, more restaurants, fewer nurses, and less care. Access to extra benefits is good as long as we do not overdo it.

SW: Would you consider introducing new technologies?

HB: We use some technology. However, I think the benefits of technology are overestimated. Happiness does not come from technology. Many older people do not know how to use it. Technology is important. Technology is not the most effective path to happiness.

SW: Is Humanitas in other countries?

HB: Yes.

SW: What factors should we consider if we want to introduce Humanitas in Sweden?

HB: You must have the money. You also must look at the context. You must insert the model in a way that suits Sweden. You can use our model anywhere. For example, our concept is popular in China. Our website has received half a million hits on the internet from China. One of my books was translated into Chinese. This country is interested more in my extended family philosophy. There are unique possibilities to modify the model. We can adapt it to different contexts.

SW: Where does China use the Humanitas model?

HB: China does not have the Humanitas model. They know about my model. They are making their own. I was invited to Beijing and Shanghai to speak about my model.
SW: Is there any interest in Humanitas from the United States or Latin America?

HB: I visited a university in Boston. Also I went to Tokyo. I have been to many places.

SW: What are the strengths and weaknesses in the Dutch elder care system?

HB: The core weakness is the elderly homes and the nursing homes. The nursing homes expect patients to be old and frail. They do not expect people to be active. They expect patients to need extensive care. These facilities function as if they are hospitals. They become housing for people with handicaps. This is the wrong approach. Elderly homes are not meant only for ill people. People must be sixty five years old to enter a nursing home. Many people arrive healthy.

SW: Let me be sure I understand. Do you suggest we treat a care home as a home rather than a care institution?

HB: Yes. It should not be a hotel. It should be your own apartment. That apartment should have the care you need. In Holland, you live in your own house until you need help completing tasks. Then they send you to a service apartment. They send you to a nursing home or to an elderly home when you need more help. The care takers in nursing homes have a patronizing attitude. You cannot do anything yourself. There are too many nursing homes.

SW: How do you feel about the Dutch elder care system?

HB: I am worried. I feel sad. This approach is ineffective and expensive. After twenty years, Holland now is changing their system. Their new approach is similar to mine.

SW: Are the politicians aware of the elder care situation?

HB: The politicians focus on technical and medical services. They think elderly care requires medicine. Their concept does not include a social component. The elderly should look for the solution in social media, activities, and conversation pieces. Apartments for Life show people the importance of a focus on human happiness.

SW: Where did the inspiration for the Apartments for Life originate?

HB: I saw that the elder care sector was full of misery when I began my career. Elder care was not beautiful or compassionate. I wanted to make elder care homes like a normal home. I did not like the patronizing attitude of the care providers.

Older people are not helpless animals. They should be allowed to do things themselves. There is too much care. Care looks comforting and helpful. In reality, it patronizes the elderly.

SW: Can you live in the Apartments for Life if you have severe dementia or an advanced disease?
HB: Yes. Initially, the Apartments for Life employed some traditional nurses. They were similar to those in elderly homes. I changed the model gradually. I made the model more social. I saw the morale of people with Alzheimer’s improve. However, patients with dementia cannot socialize all the time. We decided to shelter Alzheimer’s patients in groups of eight. We have a cook for each group.

SW: Do I understand that Alzheimer’s patients live in separate apartments within the complex?

HB: Yes.

SW: Thank you for showing me around. I enjoyed learning about your approach and your philosophies.

HB: Thank you, Sofia.