

PRIME TIME LIVING

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Cohousing in Baltimore

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COMMUNITY

Cohousing comes to Baltimore

A unique approach to retirement living

By Margit B. Weisgal, Contributing Writer



Depending on your age, your health and how forward thinking you are, one concern as we get older is housing. Those of us living in multi-floor residences have to decide whether we stay or go. If we go, where to? And what options are available? One alternative that you might not be familiar with is a cohousing community.

Years ago, some friends imagined they would find some land, build small houses so they'd have privacy, and have a central house where they could get together. They envisioned sharing meals, sharing responsibilities, being company for one another. It was a nice dream.

Now, Lorraine Faris is making that vision come true for those interested in this concept to join her. With Cohousing of Greater Baltimore (www.cohousingofgreaterbaltimore.org), she is putting together participants for a new cohousing community for 55+ active adults.

The template of cohousing – defined as housing with common spaces and shared facilities – has been around since

the dawn of man. Tribes or families formed groups for mutual benefits, such as safety, protection, community and mutual responsibilities. Cohousing does the same thing. Barry Shenker, author of *Intentional Communities: Ideology and Alienation in Communal Societies*, calls them Intentional Communities, “a relatively small group of people who have created a whole way of life for the attainment of a certain set of goals.”

“I first heard about cohousing about 30 years ago,” Faris recalls. “The idea was always interesting to me, so to learn more, I made it a point to visit those communities within 30 to 60 minutes of me. I’ve also toured the four in Madison,

Wisconsin when I attended the National Cohousing Conference there in 2022. I want to live in a place with friends where I can knock on a door and say, ‘Let’s go.’”

Faris discovered that there are quite a few cohousing communities on the east coast. They all tend to be somewhat similar; however, with those that are for seniors 55 and up only, she notices different features that appeal to her and makes notes. It will be up to those who want to live in the one she’s working on to consider the options.

“This design is vastly different from what I see in most American cities,” Faris describes. “Real estate developers have no interest in creating a community. They build these behemoths, houses with thousands of square footage and never consider the impact those constructions will have on the environment. And given the footprint, it will be difficult to meet a neighbor half a mile away to borrow a cup of sugar.

“Instead, the buyers who want to join the community will contribute their thoughts on what we may need and, together, we will build the neighborhood we want. Maybe we will start a trend: customer driven, custom designed neighborhoods versus a stand-alone custom designed house.”

Faris pointed out that AARP has written about cohousing, saying it responds to problems we already see: smaller families, more of us living alone, more spread out. “We need new models on how to live, a combination of autonomy while being part of a community,” Faris states. “We’re just looking for good neighbors. And we all do better when we collaborate!”

The layout for a cohousing community has some basic ingredients: fully equipped individual homes, usually attached and environmentally friendly; common areas for recreation; and a common house with a luxury kitchen,

space for visiting guests, and common amenities determined by the community. Everyone finds different ways to contribute. From a monetary perspective, think of homeowners' associations.

"Because we generally start with a smaller core group of buyers," Faris says, "and grow the buyers' group through the whole development process, the residents are involved from the start; there's a feeling of coming home when we move in."

A community that opened last year has this description on its website: "Residents are involved early in the design and development phases so that the community reflects their priorities. Residents live in a close-knit neighborhood that seeks a healthy blend of privacy and community."

Although not multi-generational, the benefits are equally positive: improved health reduces the need for senior services, nurtures rewarding relationships, and makes life more affordable and fun. More? More accessible, more energy efficient (similar to row or town houses),

and more likely to share common interests.

Cohousing of Greater Baltimore is working with Kathryn (Katie) McCamant, an architect, a full-service cohousing consultant, a leading expert for new cohousing communities, and co-author with Charles Durett of *Cohousing: A Contemporary Approach to Housing Ourselves*, originally published in 1988. The third edition was published in 2011. McCamant has lived in cohousing for the last 35 years, first in Doyle Street Cohousing and now at Nevada City Cohousing, both in California.

McCamant observed that so often, "We live closer and closer together but, at the same time, we're more isolated, less likely to know those around us." When she first observed cohousing communities in the early 1980s in Denmark, she figured everyone knew about them because they made so much sense. She then learned that no one in the U.S. was at all familiar with them.

While in Denmark, McCamant studied under Jan Gudmand-Høyer, the man

who started cohousing there, and therefore the man who started cohousing. After a year in Denmark, she returned to the U.S. and she and Durett wrote their book. It was then shared, passed on by one individual to another. "If you combine community and sustainability, you have a winning combination, something people want to be involved with. It starts with the infrastructure; then the community evolves on its own. Like a village, it will grow over time. It's about living a better life in a more sustainable way, sharing a variety of resources and services. It simulates an old-world village where neighbors care for one another and share many aspects of life together. It yields an improvement in happiness, mental health, and overall well-being," McCamant says.

Grace H. Kim, FAIA, Schemata Workshop (www.schemataworkshop.com), is an internationally recognized expert in cohousing. In her TED talk,

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“How cohousing can make us happier (and live longer),” she opens with a single word: Loneliness. She goes on to say, “It’s not a function of being alone, but rather a function of how socially connected you are to those around you.” Cohousing, she extols, is a solution, an intentional neighborhood where people know each other and care about each other because they want to. “In cohousing, people live independently and interdependently.”

Intentional Housing

The Cohousing Association of the US (CohoUS), the national nonprofit umbrella organization promoting this way of living, says “Seniors-only communities follow all the same norms as other cohousing communities, including shared management and maintenance of the property, common meals, several common areas and smaller individual homes, supplemented by several shared spaces and amenities.

“It’s a lifestyle choice where living in a close-knit, intentional community improves health, reduces the need for senior services, fosters rewarding relationships, and makes life more affordable and fun. And like intergenerational cohousing, senior cohousing is a solution to today’s social and environmental challenges.”

Cohousing doesn’t cut you off from the neighborhoods around you. You are still a part of them. But now you are surrounded by caring collaborative neighbors who use less of the earth’s resources while living an abundant life.

Over the centuries and around the world, different versions of cohousing have evolved. This modern version started in Denmark in the 1960s when the term “cohousing” was coined. They are formed for various purposes. In this case, Cohousing of Greater Baltimore is creating a way for adults to age in place in a neighborhood with like-minded people who band together and serve each other. It’s an idea whose time has come.

For more information:

Boomers Do It Differently: Creating Your Own 55+ Cohousing Community

A presentation by cohousing expert Katie McCamant

Wednesday, February 28
7 PM ET, Free

Stony Run Friends Meeting
5116 N Charles St.
Baltimore, MD 21210
www.cohousingofgreaterbaltimore.org/events

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An interview with Lois Privor-Dumm

By Margit B. Weisgal, Contributing Writer

Lois Privor-Dumm, MBA, works to expand access to vaccines, trains advocates to speak on the value of immunization and evaluates the use of policy to protect communities. Now at Johns Hopkins University, her teaching focuses on vaccine policy and advocacy and she has trained hundreds of country-level professionals.

We talked about the disparities in access to vaccinations. Privor-Dumm oversaw Baltimore City Vaccine Peer Ambassadors (VPAs), teams that went into neighborhoods to promote health, build trust and recommend vaccinations.

Privor-Dumm’s Insight as Shared in the Interview

There are lots of reasons why people don’t get vaccinated. The population we targeted is not homogenous and we tend to lump people together whether they should be or not. Some who resisted vaccinations did have commonalities: a lack of trust, prior mistreatment by a medical professional, they live in a care desert, and/or the quality of care may be questionable.

This is why we worked with the Baltimore City Health Department (BCHD) to create the VPAs, community members who can respond to different issues. This started during the pandemic when vaccinations provided protection for a very vulnerable population. We trained them on the various vaccines so they could communicate with vaccine-hesitant people. Hesitant people, including some that got the vaccine, perceived risks associated with the vaccine product or mistrusted the infrastructure that led to rapid vaccine development and the push for vaccination. The community often had other priorities, which to them were more important than the vaccine. The learning between community and the program was often mutual.

With the goal of ensuring people have the health care they need, we learned that they have to be respected and have their questions answered, something providers didn’t always address, and we had to listen to them. It’s important to hear people through, not to dismiss them. At the end of the day, they may not agree; they have to decide for themselves.

We also discovered that the resistance is not always about the vaccination. Sometimes, their lives got in the way, and a vaccination is the last thing they think about.

When we created the VPA program, we brought in people from the communities we were trying to reach to help us develop our messaging, to make it relevant to them. Questions we discussed included:

- How do we get the information across to others so they can make an informed decision?
- How do we talk about decision(s) that may put others at risk?
- What does the community want to know?

In some cases, the vaccination was the least of the problems. Their responsibilities were far more important and if, for some reason, there was a reaction to the shot, it would cause other problems – the inability to put food on the table, for instance, or to take care of the family. This was particularly true during the pandemic when it was life or death.

In the end, our program was pretty successful. BCHD ran vaccine clinics where people lived and worked with people that were trusted so hesitant compliers were more willing to get the vaccination. Given how virulent COVID-19 was during the pandemic, convincing this vulnerable group saved lives.