



YOUR MONEY | RETIRING

Retirees Turn to Virtual Villages for Mutual Support

By CONSTANCE GUSTKE NOV. 28, 2014

RICK CLOUD, 68, knew that he wanted to stay in his home in Austin, Tex., as he aged. But Mr. Cloud, who is divorced, was not sure how he could do that without relying on his two daughters.

Then he ran across the idea of virtual retirement villages, whose members pay a yearly fee to gain access to resources and social connections that help them age in place. Sold on the concept, Mr. Cloud joined with some friends to start Capital City Village four years ago.

“Our virtual village can connect me with people my own age so I can do more things,” said Mr. Cloud, a retired technology consultant. “I worry about being single and getting older.”

Now, Mr. Cloud has all the support he needs. He can tap into Capital City Village’s network of more than 100 service companies referred by members. Dozens of volunteers will walk his dog or do yard work. When he wants to meet people, Mr. Cloud can attend house concerts in a member’s home, go to happy hour at the local Mexican restaurant or hear a champion storyteller give a talk. He has also made over 40 village friends.

An offshoot of the sharing economy, virtual villages are popping up all over the country. Currently, there are 140 villages in 40 states, according to Village to Village Network, which helps establish and manage the villages. Another 120 virtual villages are on the drawing boards, as baby boomers like Mr. Cloud begin gravitating to them.

These villages are low-cost ways to age in place and delay going to costly assisted-living facilities, say experts. Yearly membership dues average about \$450 nationally, and most villages offer subsidies for people who cannot afford membership costs. Armies of volunteers, who help run many villages, also help

lower member costs by doing yard work, picking up prescriptions or taking members shopping or to the airport.

At the core of these villages is concierge-like service referrals for members, said Judy Willett, national director of the Village to Village Network. Members can find household repair services, and sometimes even personal trainers, chefs or practitioners of Reiki, the Japanese healing technique. Most important, the villages foster social connections through activities like potlucks, happy hours and group trips.

This socializing gives people a greater sense of purpose and increases well-being, said Dr. Marc Agronin, a geriatric psychiatrist in Miami and author of “How We Age.”

“As people get older, they face the major dilemma of isolation,” Dr. Agronin said. “Having a local network of people to engage with opens up whole new worlds. It’s about discovering your strengths and the joy of living.”

Virtual village members stay in touch through village websites and email, or by calling local village offices. Many villages also turn to social media sites like Facebook, Twitter and YouTube to stay in touch, Ms. Willett added.

A desire to age in place surrounded by friends was the impetus behind the nation’s first virtual village, Beacon Hill Village, started in Boston in 2002. It now has nearly 400 members and has served as a blueprint for other villages nationally, including Capital City Village.

For Susan McWhinney-Morse, who helped to found the village, staying on Beacon Hill was a no-brainer. She loved the community, her neighbors and her elegant rowhouse there. “So we looked at community resources, such as transportation and health care, and asked ourselves, ‘How can we access them in an orderly way?’ ” she said. The answer was that virtual retirement villages could address crucial aging issues.

People who passionately believe in controlling their lives are best suited to the villages, said Ms. McWhinney-Morse, now 81. “This is not a social service model,” she said. “This is how we take care of ourselves. You need time and energy to devote to it.”

The village, she added, “gives you a sense of worth and accomplishment.”

Preliminary studies show that virtual villages are indeed working. They increase confidence that a person will be able to stay at home and reduce possible

falls, said Andrew Scharlach, Kleiner professor of aging at the University of California, Berkeley.

“The whole idea is being engaged and helping one another,” said Mr. Scharlach, who has studied nine retirement villages in California. “They’re not just services, they’re designed to be communities.” He added that 90 percent of adults wanted to stay in their own homes as they aged, anyway. “So there’s a lot of promise in virtual villages,” he said.

In the future, baby boomers will push virtual villages into mass acceptance, Mr. Scharlach said. “They don’t want to be dependent on families or the government,” he said. “And the idea of consumers calling their own shots is taking off.”

One lure is that virtual villages can be tweaked to fit any environment — including the country. Monadnock at Home, which serves eight towns in New Hampshire, has 130 members. It has a database of over 100 vendor contacts for help with stacking wood, shoveling snow or transporting members.

The village has only about a dozen social events a year, such as maple sugaring parties, though. “We’re a bunch of loners up here,” said Frank Harnden, chairman of Monadnock at Home. “So we’re more focused on services, since it’s harder to get together. The municipalities don’t have services in place.”

Mr. Harnden, 69 and married, was hooked on virtual villages after hearing about them. Like Mr. Cloud in Texas, he was worried about aging. His parents had gone through difficult final years with serious illnesses.

A former boy scout, Mr. Harnden also likes lending people a helping hand, and has driven two hours to help a member by doing a 10-minute task. “I like doing a good turn daily,” he said.

For all their good works, virtual villages usually are not equipped to handle serious illnesses. A few villages, however, are experimenting with health care-related innovations.

Newton at Home, in West Newton, Mass., lets members participate in a collaborative program with a local hospital to prevent readmissions. Volunteers check in daily with sick members, take trash to the street or do grocery shopping. “Not being readmitted to the hospital saves money,” said Maureen Grannan, executive director of Newton at Home. Volunteers, who do 97 percent of the services, also help stretch member dollars, she added.

Avenidas Village in Palo Alto, Calif., which has partnerships with two local hospitals, even puts member health information on a flash drive that can be attached to a key chain. The village also connects members with end-of-life preplanning services, including for pets. Neighborhood clusters within Avenidas keep village connections strong through buddy systems and daily social phone calls.

“Economically, virtual villages are a great deal,” said Frank McAleer, director of retirement solutions at Raymond James, the financial services company. “You can retain equity in your home, your biggest investment.”

Mr. McAleer said that the villages, a fairly new concept, might not last forever, though. “They could die if the funding isn’t there,” he said. “Then you’re left in a house without a village.”

Why? Virtual villages are essentially nonprofits, and many are only partly supported by member dues. Dues account for over half of funding, Ms. Willett of the Village to Village Network said, and the rest comes from foundations and donations. Already, 15 have closed because of finances, she said. Ms. McWhinney-Morse acknowledged that Beacon Hill Village was “constantly fund-raising.”

For Mr. Cloud, though, virtual villages offer advantages similar to life insurance, which is bought before it is needed. “They help baby boomers stay in their homes,” he said, “and not spend all their money on living expenses.”

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