

WHY DO ELDERLY PEOPLE CHOOSE TO LIVE IN A COMMUNITY HOME? A STUDY AMONG FRENCH POPULATION

Liliane RIOUX¹

Abstract: *Considering the fact that most of the elderly people wish to rest in their home for as long as possible, we have asked ourselves why some choose to move in a retirement hostel at their free will. To answer this question, 32 semi-structured interviews were recorded among elderly people living in the region Centre, France. The cluster analysis of the obtained answers reveals four types of profiles corresponding to people for whom entering such an institution seems to be a stage in life for which one has to prepare and be able to keep control of.*

Key words: *elderly people, community home, well-being, motivation, choice.*

1. Introduction

The demographic aging is an unavoidable phenomenon which most of the occidental societies have to face. The growth of life expectancy associated with a decreased fecundity rate, alongside the arrival of the ‘baby-boomers’ at the age of retirement, are, indeed, unanimously acknowledged causes of the growth of the aged population in our industrialised societies, particularly in France.

Likewise, the percentage has grown from 8.5% people aged 65 and more in 1990, to 16.1% in 2001 and a growth of up to 21.1% is anticipated for 2020. The previsions for the 21st century confirm the belief according to which it is expected that the proportion of people aged 65 should be larger than that of those aged 20

or less, representing 25.5% of the total population.

Our occidental societies have to concentrate on the life conditions which they want to offer to this growing population, at the same time questioning themselves on the reception structures which are liable to facilitate its well-being, as well as a better quality of life. Facing this new social challenge is a stake which motivates health professionals and researchers alike. This is why, in the last two decades, researches on the well-being of the aged, specifically on the factors that influence it, have multiplied. In this research, we concentrate particularly on the elements determining the well-being of aged persons living in community homes.

¹ Université Paris Ouest Nanterre-La Défense, France.

2. Factors Determining the Well-Being of Aged People Living in Community Homes

Moving in a residence for aged people (home for old people, community home) entails parting with a dwelling which is familiar and 'feels at home'. This major and often brutal transition is frequently perceived as a stressful event by the one who experiences it, particularly because this community home constitutes the last dwelling place for that certain person. This event could cause physical, psychological and/or social problems [5], [18], [14].

Thus, Caouette [1] mentions a feeling of losing control over the environment, a break-up with the old life medium and a modification of the subjects' personal identity, coming as a result of their integration inside a group. The stress level varies according to the personal characteristics of the individual (health status, sex, age...), the more or less voluntary arrival in the community home, and, the quality of the expected services, especially those concerning security, neatness, calm and proximity [11], [6], [10].

Recent researches [15], [9], [20], [2] consider that the well-being of the aged person who has to make the transition between a private home and a collective life is, essentially, the result of the interaction between the person's psychological resources and the organizational and contextual characteristics of his old and/or new place of living. The research also stresses the importance of a social support which should be adapted to the capacities, needs and expectancies of the residents.

Nonetheless, entering a residence for aged people also involves integration in an institutional space, which entails living inside a community and respecting all its functioning rules and schedules.

Considering that the establishment functions as a total institutional space, in the sense that Goffman [4] attributes, all the activities of the residents are administered by the institution and every individual is, in a way, totally taken over, emerged in an universe where he is equally treated to all those who live with him. This type of total institutional space is incompatible with a private space, a place which feels 'at home'. The interaction with the environment becomes thus highly transformed and the community home can lose its attraction, becoming an annex of the institution [8], [16].

The well-being of aged people is, thus strongly related to the structure types which they have integrated. Consequently, in the residences which offer a high standard of sustaining services, the old tend to be less autonomous, demonstrating a lower degree of participation in collective or personal decision making, at the same time presenting a lower level of general well-being.

3. Research Topic

Most aged people want to rest in their home for as long as possible, [12], as it often proves to be a place where they have lived most of their life [7], a place filled with memories [13]. This is why they only enter community home when pressurised by events or entourage. Nevertheless, some choose to move into a community home at their own will, considering the fact that no health issue seems to force them in that direction. We have asked ourselves which motivation stands behind the decision of these people.

4. Methodology

We have met people who came to look for documentation in three community homes in an average city of the central region

(France). At their exit, 33 people were asked to attend an interview. One person had to be excluded from our sample, because she was not looking for information for herself, but for her mother. 29 people have immediately accepted to participate in our research, whereas 3 preferred individual discussions. All interviews have taken place in a room which has been given to our use in a social centre, or a nearing school, and lasted from 50 minutes to 1h20. The inquiry was the following: *'Could you tell me why you came to look for documentation at this community home?'* The question willingly gave the respondents a wide range of possible answers, so as to facilitate the recollection of reasons which the subjects had for entering the community home.

The Motivations of the Aged for Entering the Institution

A categorical thematic content analysis of the data collected from the interviews was made. The analysis reveals three types of motivation:

- (a) Being supported. There are people who think they may need help in case of precarious health condition.

'My neighbour went to a community home when she found out that she had health issues. She didn't wait for the situation to get worse. My eyes are no longer in such good condition, so I think I shall come here.'

'My health is not the same any longer. I can't really walk properly and I always fear falling. I would rather come here.'

'Needless to say, I am no longer so young. Sometimes I fear being sick and not being able to call for help. Consequently, it is time to do something, before the others decide for me.'

Others believe they may require support in daily activities

'I need help for shopping, paying my bills, for cleaning my house, eventually for all that everyday life entails. Here, I have nothing to

take care of and they shall help me if I need it. It's convenient.'

- (b) Being surrounded by others. There are people who suffer from loneliness and want to make friends or reconnect with old ones.

'It's been more than two years since my wife died and it's difficult for me to be alone. Here, I could make new friends. I was very outgoing before my mourning days.'

'My childhood friend is there. She told me that it's alright, unlike the morgues they talk about on television. So, I'll go there....this way I'll have company.'

There are also couples who do not want to be separated

'My husband and I want to live our last days together. Here we are taken care of when we get sick. This way we will stay together. I want to grow old next to my husband, rather than die all alone in a hospital room.'

- (c) Choosing their own place to live. These people want to stay close to their initial homes, where they have familiar environment

'I don't want to depend on my children, going to a house which would not be 'at home'. Therefore, I will certainly come here. It looks very nice and I shall be independent. My children will be able to live their lives, and I to live my own.'

'My children would like me to go live with them, but I don't want to, I know nobody in their neighbourhood, and they work. Here, I am 500 m away from my place, and I know everybody. In the community home there are even people whose children used to go to school with mine.'

or believe that they could create a new one
'In my life, I have often moved....the only difference is that now it shall be the last time'

'Of course I have a lot of memories which connect me to my house: my children, my husband. But I also have memories of my

parents' house, which we sold after their death. Thus it's not as if it were the first time that I separate from a house which brings back memories.'

But all respondents want to keep control of their life and reject the idea of others choosing for them

'When you feel that you will not be able to live alone any longer, it is necessary to make a decision. I want to decide for myself and not leave this to the others.

'You don't have to wait to get sick to choose a community home. Because there, you choose nothing anymore. They send you where there are spare places'.

The profile of the people entering community home

An analysis by automated classification was conducted. We have calculated the Euclidian distance between the objects by using the diameter method (or 'complete linkage'), method where the distances between classes are determined by the greatest distance existing between two objects pertaining to different classes. This analysis allows the distinction of four clusters:

- A first cluster reunites people of fragile health, most often women. More than three quarters of them lived at less than 5 km from the community home at the moment of yielding maintenance. They are of poor social condition and almost 50% of them were stay-at-home mothers for at least a few years.
- A second cluster contains people who face difficulties in dealing with everyday life. They are essentially men, older than 80, who had lost their wives less than 5 years ago.
- A third cluster gathers couples, where the age difference between the partners is greater than 10 years. Most often, the woman is the one who makes the arrangements, and both partners share a high socio-economic status.

- The last cluster groups women, most often relatively young (between 65 and 70). They have moved many times in the course of their lives and held senior management positions in their professional environment.

5. Conclusions

This exploratory research was based on a very small sample (32 people) that chose to move into community homes. We are therefore dealing with a very specific population of aged persons who attracted our attention over the fact that there are people who do not necessarily want to live in their own home for as long as possible, and for whom entering such an institution seems to be a stage in life for which one has to prepare and eventually take control of. But is this an isolated phenomenon, or, on the contrary, a social phenomenon which could develop at a larger scale in the future? Further research should be able to conclude this issue.

Other information may be obtained from the address: rioux@wanadoo.fr

References

1. Caouette, E.: *La relation au chez-soi des personnes âgées en résidences spécialisées et leur perception de l'image des centres d'accueil (Feeling at Home in A Specialized Residence. Aged People and Their Perception of Reception Centres)*, mémoire de maîtrise. Université de Laval. Ecole d'architecture, 1995.
2. Dzuka, J., Dalbert, C.: *Well-being as a psychological indicator of health in old age: a research agenda*. In: *Studia Psychologica* (2000) 42 (1-2), pp. 61-70.

3. Feinhold, E., Werby, E.: *Supporting the independence of elderly residents through control over their environment*. In: *Journal of Housing for the Elderly* (1990) Vol. 6 (1-2), pp. 25-32.
4. Goffman, E.: *Asiles, étude sur la condition sociale des malades mentaux (Asylums, Study on the Social Condition of the Mentally Ill)*. Paris. Editions de Minuit, 1968.
5. Grant, P. R.: *Who experiences the move into a nursing home as stressful?* In: *Canadian Journal of Aging* (1985) Vol 4(2), pp. 87-99.
6. Joiner, C-M., Freudiger, P. T.: *Male and female differences in nursing home adjustment and satisfaction*. In: *Journal of Gerontological Social Work* (1993) Vol. 20 (3-4), pp. 71-85.
7. Law, C. M., Warnes, A. M.: *The destination decision in retirement migration*. In: *Geographical Perspectives on the Elderly*, Warnes, A.M. (ed.). Wiley, London. 1982.
8. Lawton, M. P.: *The Philadelphia Geriatric Center Morale Scale: a revision*. In: *Journal of Gerontology* (1975) Vol. 30, pp. 85-89.
9. Maltais, D.: *Vivre en résidence pour aînés: le format est-il la formule?* In: *Santé Mentale au Québec (Living in Residence for elderly people: Does Shape Define Content? Mental Health in Quebec)* 1999 Vol. 24 (1), pp. 173-198.
10. Mirotznik, J., Theresa, G., Lombardi, R. N.: *The impact of intra-institutional relocation on mobility in an acute care setting*. In: *The Gerontologist* (1995) Vol. 35 (2), pp. 217-224.
11. Moos, R. H., Lemke, S.: *Group residences for older adults: physical features, policies and social climate*. New-York. Oxford University Press, 1994.
12. Oswald, F., Wahl, H.-W. et al.: *Ageing in place in rural areas: Similarities and differences of two settings in East and West Germany*. In: Conference "Housing in the 21st Century: Fragmentation and reorientation, Gävle. Sweden, 2000.
13. Pynoos, J., Regnier, V.: *Improving residential environments for frail elderly: Bridging the gap between theory and application*. In: *The concept and measurement of quality of life in the frail elderly*, Birren, J. E., Lubben, J. E., et al. (eds.). Academic Press, San Diego. 1991.
14. Redfoot, D.: *On the separation place: Social class and relocation among older women*. In: *Social Forces* (1987) Vol. 66 (2), pp. 486-501.
15. Smider, N. A., Essex, M. J., Ryff, C. D.: *Adaptation to Community Relocation: The Interactive Influence of Psychological Resources and Contextual Factors*. In: *Psychology and Aging* (1996) Vol. 11, No. 2, pp. 362-372.
16. Steinfeld, E.: *The place of old age: the meaning of housing of old people*. In: *Housing and Identity cross-cultural Perspectives*, Duncan, J.S. (ed.). Holmes and Meier, New-York. 1981, pp. 198-247.
17. Timko, C., Moos, R. H.: *A typology of social climate in group residential facilities for older people*. In: *Journal of Gerontology* (1991) Vol. 46, pp. 160-169.
18. Toyoma, T.: *Identity and milieu*. Stockholm. The Royal Institute of Technology, 1988.
19. Vallerand, R. J., O'Connor, B., Blais, M. R.: *Life satisfaction of elderly individuals in regular community housing, in low-cost community housing and high and low self-determination nursing homes*. In:

- International Journal of Aging and Human Development (1989) Vol. 28 (4), pp. 277-283.
20. Williams, A., Guendouzi, J.: *Adjusting to "the home": dialectical dilemmas and personal relationships in a retirement community*. In: Journal of Communication (2000) Vol. 3, pp. 65-83.
21. Vikko, A.: *The home as a meaning-making factor in autobiographies written by elderly men and women (Hemmet som meningsgivande faktor i självbiografier skrivna av äldre män och kvinnor)*. In: The 13th Scandinavian Gerontology Conference, Helsingfors, 1996.