

Moving in very old age

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Context

- Increasing numbers of older people either choose or are compelled to move in later life : those living with dementia, frailty, inadequate care provision.
- Shortfall of age appropriate housing : many older people live in homes with health hazards (falls, heating, damp).



Who moved?

- 26 (59%) of 42 participants moved
- 18 (41%) moved into a care home.
- Three moved in with family.
- Five moved into sheltered housing.
- One was in hospital.



- Of those who had already moved eight (29%) later moved again.

Demographic attributes of those who moved

- 1 man, 25 women.
- 55% were manual workers, 45% white collar workers,
- 2/3rds left school aged 14.
- 23 widows, 2 single, 1 divorced.
- 22 disabled, 2 not disabled, 2 only IADL disability.
- The majority (n=22) were assessed as having some level of cognitive impairment.
 - 11 were identified as having severe impairment.
 - 9 had moderate impairment.
 - 2 had mild cognitive impairment.
 - 4 were cognitively intact.

Types of move and the triggers for moving

Reactive : Majority (20) people moved into residential care after a health or social care crisis:

- a fall and hospitalisation was a key trigger
- also bereavement
- and risk due to increased cognitive impairment

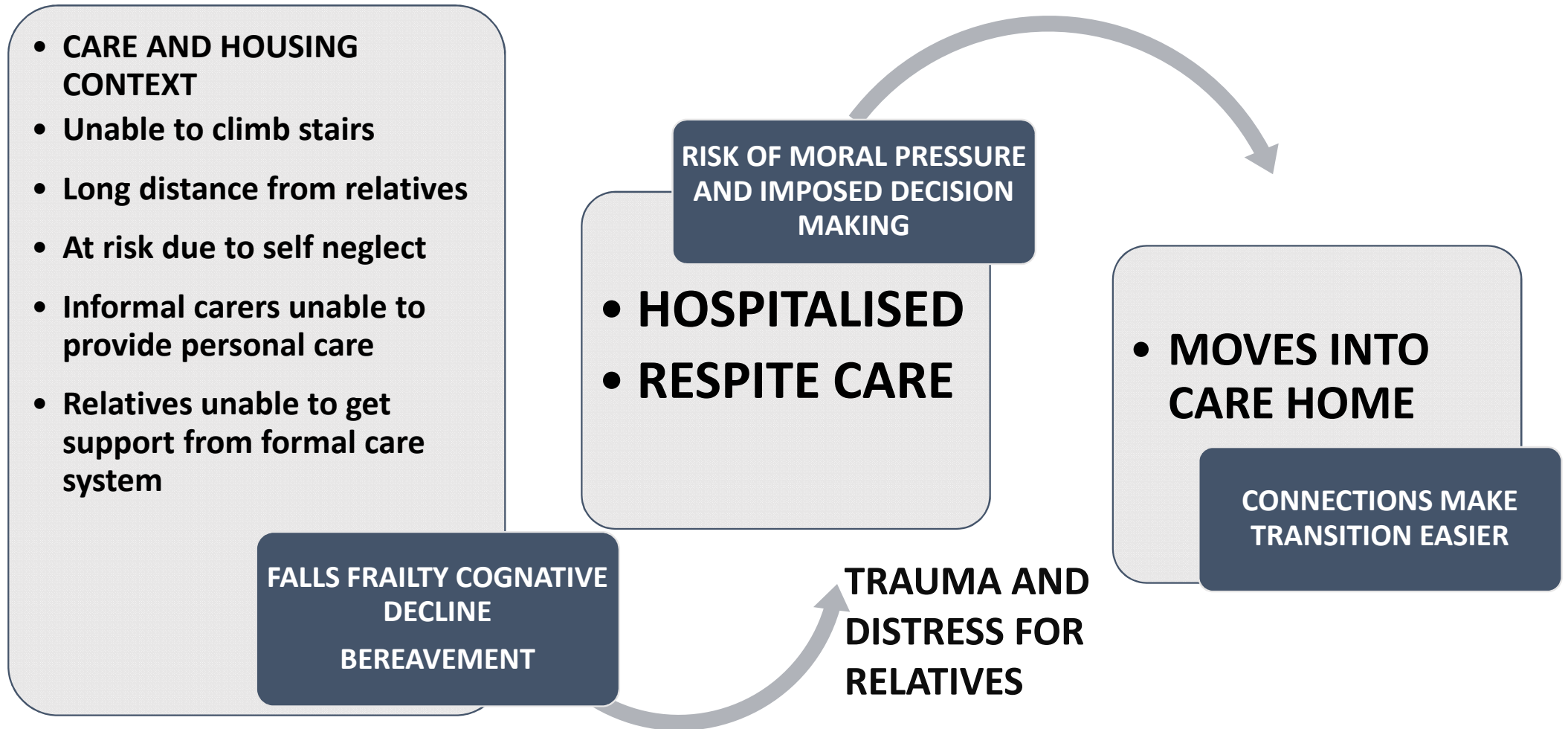


Proactive: two people made a planned move either in with family or to a smaller house

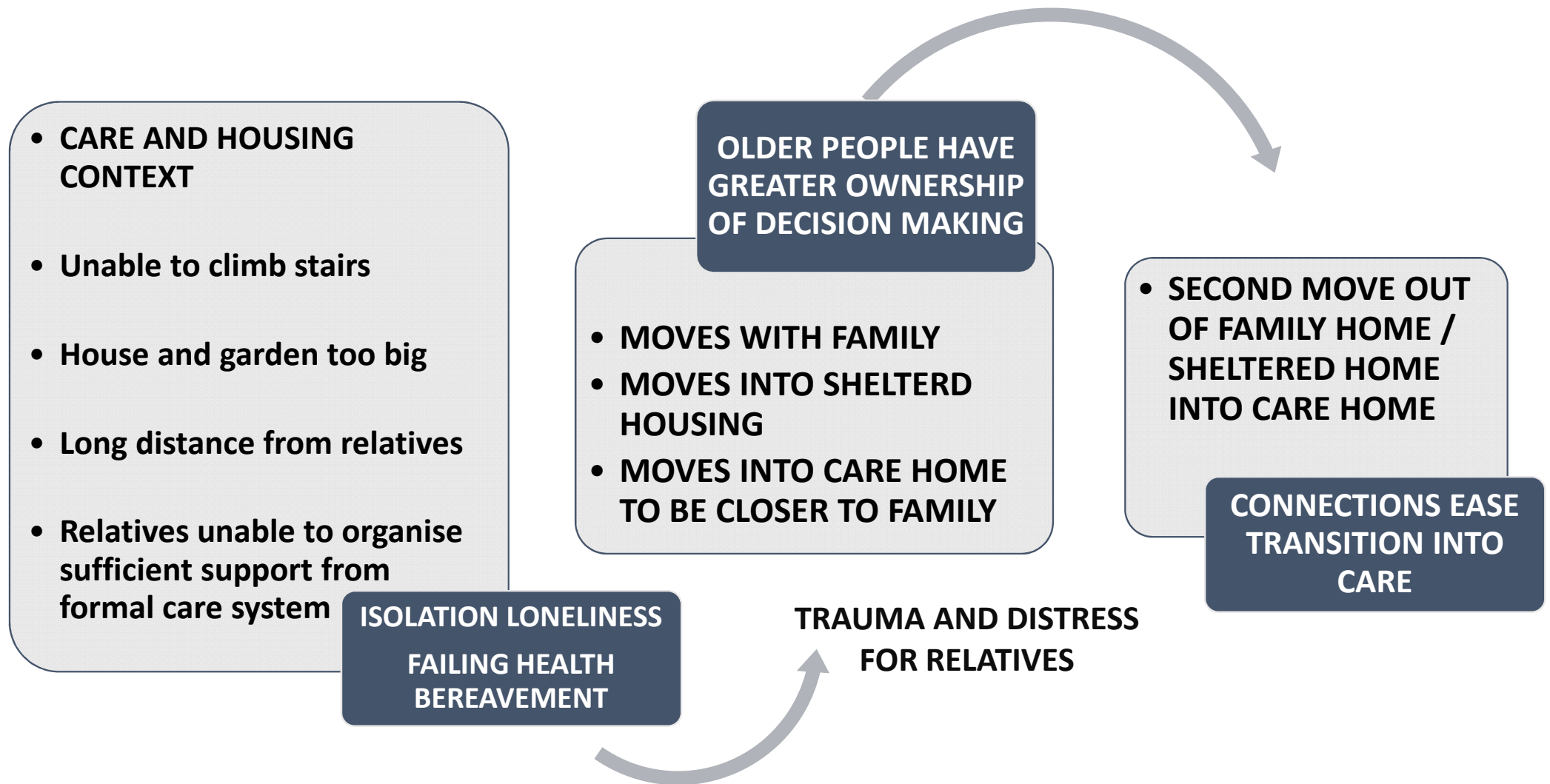
Complex: four people moved in situations where they experienced a crisis such as bereavement and then decided to move closer to family or move in with family

This finding is consistent with US studies. G Pope, N., D, and B. Kang (2010). "Residential Relocation in Later Life : A Comparison of Proactive and Reactive Moves." Journal of Housing for the Elderly **242**: 193-207.

Process of reactive moves into care home



Process of proactive and complex moves



How was decision to move made?

Figure 1: Ownership of decision making in reactive, complex and proactive moves

High Ownership	Shared ownership		Contested	No ownership	
Self-Motivated	Agreed	Negotiated	Protracted	Dependent	Imposed
<i>Proactive moves where older person plans ahead</i>	<i>Complex and Reactive moves in with family or into care.</i>	<i>Reactive moves into care where family suggest the move, the older person is initially hesitant but comes to see a benefit for all family not just themselves</i>	<i>Reactive moves into care involving resistance on the part of the older person and moral pressure from family or neighbours who invoke Social Services or a psychiatric geriatrician to make a formal referral into care</i>	<i>Reactive moves into care where older person lacks capacity to make decision</i>	<i>Reactive moves into care where family makes the decision without consulting older person</i>

Protracted decision linked with moral pressure

Daughter of Fanny Jeffries (97 year old woman with severe cognitive impairment who moved into care):

'Highview (care home) has been a bone of contention, she has resisted most forcefully. (...) Several of Mum's neighbours have, (..) been contacting Age Concern etc.,...but recently (I am) having telephone calls direct.The tone of these calls has been slightly critical in nature(..). They all say she needs residential care (..)

I have spoken to Social Services regarding (..) a permanent placement in residential care. In case Mum is still resistant I would appreciate you arranging for the psychiatric geriatric consultant to visit Mum while she is in respite care (to make a referral).

Note: All names are pseudonyms

Imposed decisions for a move into care

Floss Selwyn: (a 95 year old woman with moderate cognitive impairment) moved into care after fall:

'They wouldn't let me come back here, no, they wouldn't let me go back to my bungalow, I mean. Because they were saying "Oh, you should go, mum", [...] Perhaps they were right. But there's no getting out of it when you've made that decision.'

Son of Violet Benbow (a 97 year old woman with moderate cognitive impairment) moved into care:

'She was going downhill rapidly even at that stage. And one day she came round here and she messed herself. So that was a nice little how do you do and after that I thought to myself 'Well, I can't contend with this.' I cleaned her up as best I could but I couldn't really contend with this and that was when we decided she had to go into a home.'

Figure 2 **Eight experiences associated with moving in very old age**

Reactive and Complex moves into care	Proactive moves into sheltered housing	Complex moves in with family
<p>Increased isolation</p> <p>Regret and loss</p> <p>Dissatisfaction and resentment</p> <p>Acceptance and resignation</p>	<p>No regrets</p>	<p>Gratitude and appreciation</p>
<p>Reduced loneliness for older old across all moves</p>		
<p>Trauma and distress for relatives across all moves</p>		

Gratitude and appreciation – in with family moves

Laura Riddle (98, moderate impairment, only IADL disabled) moved in with daughter:

'I'm a pampered old pussycat. And I have most of my faculties, or enough of them to be getting on with. As I said before, well, I'm appreciative I hope'.

Marjory Boreham (96, Severe cognitive impairment, disabled) moved in with daughter:

'Oh, I was very grateful that they (family) would take me here because it was very lonely on my own in a... quite a... you know, a 4-bedroomed house. Yeah. The neighbours were very kind. But there's a limit to what people can do. It's marvellous [...] knowing... They're running the house and I don't have to worry about what's... you know, how things are. Oh, very fortunate. Extremely so'.



Acceptance / resignation- care home moves

Edith Perkins (100, severe cognitive impairment, disabled)

‘Well, it was a very difficult situation really, because I didn’t want to give up my independence, which to a certain extent you’ve got to. But you’ve got to think about it in the right sort of way. Because if I was to go on like that, there might be a time when it would cause trouble. And that wouldn’t be very nice for a start. So that’s the way I look at it.’



Regret and loss: conversation, objects,



Innes Wycliffe (97, moderate impairment, disabled) moved into care home:

Well, [...] No one speaks to any extent... And I just sit at a table with someone who's completely silent. And someone who nods... head is nodding all the time.

Edie Wooster (98 severe cognitive impairment, disabled) moved into care home:

I meet the same old faces. They don't speak. There's no conversation. [...] They've always been like it. As long as I know, one's been looking at the programme ever since I've been here. The same old thing. [...] That was a nice place (my previous home) [...] And my weights went right the way down to half an ounce. They were worth something. They went.'

Regret and loss: freedom, privacy, home, walks.

Fanny Jeffries (97, widowed, severe cognitive impairment, disabled) moved to care home

'Well, I don't like being here, to be honest. I'd rather have my freedom. [...] Well, (it has been hard) giving up my old life. [...] (I had) Lots of friends in Cambridge. [...] Well, (living here) you're never... got much time to yourself. There's always somebody bustling round you. [...] you don't have much privacy. [...] The ladies who look after us are alright. But it's... it's being shut away like. [...] I don't think you're allowed to go very far. [...] Yes, if it's only a small walk. [...] I am having to be in lodgings which is a... This is nowhere near... like the comfort of your home.'

Laurie Whiteley (100, widowed, cognitively intact) moved to care home

'To a degree there's no privacy, to a degree. Well at some times, you see it's not really convenient you see. If you're washing or in the toilet, at home the door was locked wasn't it? You see to a degree, to a degree for me it's like a hotel, your bed is prepared, clean, made up each morning, your breakfast is prepared, about breakfast time I think somebody's getting my breakfast whereas at home I have to do it.'

Regret and loss: friendship (moves into care)

Ada Chaplin (98, Severe cognitive impairment, disabled) moved into residential care home near family:

'Cos it was a damn silly thing I did to come here from Cambridge.[....] And so, I mean, what with losing these friends, I mean, people I'd worked with... well, lived with, if you like. [pause] Yeah. I thought 'Well, I might as well go and... yeah, make a do of it altogether'. So there we go. So that was one thing that decided me to come, but that weekend (when my two friends died) was terrible.'

Feelings of increased social isolation - moves into care

Ada Chaplin (98, Severe cognitive impairment, disabled) moved into residential care home:
'Well, (I have) nothing to... live for (my daughter and her family) they've got their own lives to live and she's busy. She doesn't often come,.... I look out there and I wonder if the squirrels are going up,My daughter would say I wasn't trying. But I look out there and wonder if the squirrels are going up the tree. It amuses me if I'm lucky enough to see a squirrel, you know, with their tails wagging.'

Feeling happier with increased company in care (n=11)

Interviewer: 'What is good about living here?'

Mary Mayfield: '[...]to go to the lounge and see some people on television with all the others. I know I've got my own here, but it's not the same as when you're near others. [.....] I've got on very well with them. And they've been very nice to me.'

Interviewer: 'So what's it like living here at the moment?'

Violet Benbow: 'Quite nice. [..] I like being here because there's company. And living alone it is miserable. [...] About eleven years I've been here. Better than staying alone in the house'.

Ros Stephens: 'I like being here because there's company. And living alone it was miserable'.



Connections as a facilitator to moving

Moving locally or having respite care allowed older person to maintain existing connections and make new relationships in the care home prior to permanent move

Glynnis Gough (moved in to sheltered housing in local area):

‘But when I came here (to sheltered housing) I knew quite a few people. One, for the fact that I used to live across the road years ago I knew people from then. And I used to work at the post office up here. I worked there for 14 years and I knew a lot of people here knew me.’

Daughter of Edith Perkins – (who moved into care home she had respite stays with):

‘She settled in quite well. Yes. Oh yes, no problems at all. (She had been in respite at the home, so) At least she knew where she was going and she knew a lot of the people, the staff.’

Relatives experiences of oldest old moving

- The dominant experience for relatives was one of trauma and distress:
- This was true across all types of moves –
 - Into care
 - Into a smaller home
 - In with family
- The older person's narratives did not voice this.



Trauma arose in all moving pathways

Glynnis Gough's Daughter: 'It was traumatic ..She actually I mean her face was totally black It was a big fall.'

Nora Tenby's Son: 'She..{is} due another continuing care assessment but I am going to argue against moving her {again} it will finish her off.'

Laura Riddle's Daughter: 'It was very traumatic really, emotional.'

Edie Wooster's Daughter: 'The next crisis was she fell out of bed [..] Two people came out and picked her up. And they wanted her to go to hospital and she said 'No! don't ask me that'

Enid Alton's Daughter: 'Oh she wasn't happy [...] we were told by the people in the home not to go and see her for two or three weeks. And she wasn't happy at all.'

Trauma could be ongoing following a move into care

Katie Anderson's Daughter:

'But you see really she would rather be in her own flat, and you know, this is it. I went in the other day and the first thing she said to me ... have you come to take me home?'

Lily Webster's Daughter:

She'd get her coat so every time I went she'd want to come... you know, 'Why can't I?' She got out of the home two or three times and they were worried for her safety.

Vera Galagher's Daughter:

She's always sort of saying to me "help me, help me, take me with you", you know, "don't go without me" [...] she'll say "what have you done to me, you've done this terrible thing, you have..." Yes, her phrase when she actually first went in there was "you've done for me".



Key observations

- Connections to place and people act as a facilitator for moving into care: older people were happier to move to a care home or sheltered housing where they had friends, knew staff or a relative worked there.
- Older people experienced regret and loss when they did not feel they owned the decision to move.
- In this study a move into care reduced isolation more often than it increased isolation.
- Having a serious fall late in life is closely associated with a move into care.
- Older people feel that care homes are like hotels and do not like the busy, noisy work focused environment.

Reflections on the CC75C qualitative study findings

1. Demonstrates value of falls prevention interventions.
2. Older people need support to make housing decisions prior to crisis.
3. Highlights value of 'buddy' systems used in some care homes as a means to support older people new to the home.
4. Day care centres and schemes provide an important stepping stone allowing older people to build connections in care homes in their locality.
5. Can care homes develop more personalised interiors, to create 'homely feel' and move away from the current fashion for impersonal corporate hotel like interior?
6. Can care homes make an effort to cultivate 'home paced time' where schedules are less routinized and older people can engage in more homely activities : older people in this study did not like 'existing in care'. Need to enable older people to 'live in care' .