

Home as an Instrument of Well-Being
in Older People

M. Powell Lawton

Philadelphia Geriatric Center

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Abstract

The residence is discussed in terms of its functions, or affordances, for older people. Higher-order affordances are discussed as attachment, cognitive control, behavioral competence, and identity. The home serves people's needs differently, but all such functions may be related to more distal outcomes such as mental health and psychological well-being. Adult stages of transaction between person and home are postulated to be phases of striving, shaping, coasting, accommodating, slipping, and restoring. Data from qualitative and quantitative research are cited to establish the importance of home and its meaning.

Author notes

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Requests for reprints should be directed to M. Powell Lawton, Philadelphia Geriatric Center, 5301 Old York Road, Philadelphia, PA, 19141, U.S.A.

Home as a node of person-environment transaction has received an appropriate share of attention from researchers in this area, notably, Altman and Gauvain (1981), Rapoport (1969) and the authors of chapters in an environmental series volume that dealt with home (Altman & Werner, 1985). In gerontology, major contributions to understanding the significance of home have been made by Rowles (1978; 1980; 1983) and Rubinstein (1989), whose approaches are largely ethnographic. The present contribution will draw heavily from the general psychological and ethnographic studies to provide a long-overdue psychological view of the function of home for older people.

In overview, this presentation will develop several arguments: First, the significance of home is reflected in a series of functions that the home provides for its residents. Second, these functions are instruments in the service of behavioral adjustment and psychological well-being. Third, although transactions between person and home are complex, it is convenient to focus on a linear pathway from personal need to environmental preferences to choices in terms of environmental accommodation versus assimilation to the functional home to psychological outcomes. Fourth, the system nature of the process requires study of the effects of personal competences, life stage, and environment on personal need and, in turn, the reciprocal relationships between home, on the one hand, and competence and personal needs, on the other. Finally, although older people negotiate comfortable mixes of autonomy and support in their housing in ways similar to those of people of all ages, the biologically and socially-determined press of old age

moderate these transactions.

A Conceptual Framework for the Study of Home

In discussing the meaning of home, Rapoport (1985) suggested that the appropriate level of inquiry was that of a "conceptual framework...[a means of helping] to think about phenomena" (p.256). Such an approach, rather than a developed model or theory, will be taken here, although this framework demands one aspect of a model, that is, an accounting for some of the dynamics of the framework. The model will be limited, however, to consideration primarily of aspects of the person-environment system that relate the person, home, and psychological outcomes.

Home as a system of affordances

The central feature of this conception is that home serves a multiplicity of functions for the person. "What does home do for the person?" is the appropriate question to be asked at the level of descriptive research. The instrumental functions of home are characterized as "affordances." Gibson (1979) defined an environmental affordance "...what it offers the animal, what it provides or furnishes, either for good or ill" (p.127). An essential quality of an affordance is that the property is located in the environment -- it has a use that can emerge under particular conditions. Thus the definition of home need be only a domicile, the location where someone lives. Home can, however, take on a variety of meanings and functions, which represent the variety inherent in the way the domicile lends itself to differing uses and conceptions; such variety depends, to be sure, on the user, but the user is bounded by properties of the

domicile in the functions possible to be served. Using the concept of affordance also makes clear that while variations are possible in the way people construe home subjectively, by no means is home presumed to afford the same functions for all people.

Before describing in detail some of the common functions served by home, implications of the conceptual structure of home in relation to other aspects of person and environment will be noted.

The teleological relationship of home to personal goals

The functions of home are given central position because each such function is asserted to be capable of influencing some personal outcome for better or for worse. I have suggested elsewhere (Lawton, 1983) that such outcomes may be called perceived quality of life, competent behavior, and psychological wellbeing. My viewpoint in discussing home is that while many characteristics of the domicile certainly may be comprehended and described in neutral terms, the terms "function" or "affordance" imply a process relevant to a personal goal. Thus every such affordance is capable of being evaluated in terms of whether it enhances or obstructs some psychological outcome.

Since anthropology has contributed so extensively to our understanding of home it is worth distinguishing some differences between our two perspectives. As I understand it, the goal of anthropological inquiry has been to comprehend the meanings that home assumes for individuals and how such meanings are affected by and contribute to the body of collective knowledge known as culture. In this view there is a teleology in meaning; meaning

is valued because it creates order. From my perspective, order in turn affords control and control increases the probability that desired behaviors and subjective states will result. Thus there would seem to be relatively little point in probing meaning for its own sake, exclusive of its implication for some current or longer-range psychological goal. The detailed discussion of affordance that follows will suggest the rationale by which such effects occur.

A conceptual framework to account for the relationship between home and psychological outcomes

The above reasoning thus implies a linear causal path from -----Figure 1 about here----- the affordances of home to the outcomes. The affordances themselves are affected by diverse personal and environmental factors. The primary causal path from the person begins with personal needs (other prior elements will be discussed later). Some basic needs, such as temperature regulation, may directly require a housing affordance (protection from weather). More frequently, needs result in preferences (either reactive in the service of need reduction or proactive in the service of need creation within an optimal range) that are expressed in making environmental choices or in proactively designing and creating residential environments with the desired affordances. This process of shaping one's environment has sometimes been referred to as assimilation, as contrasted with accommodation (or adaptation), where the person moderates her needs and preferences in deference to environmental constraints (Piaget & Inhelder,

1969; Whitbourne, 1987. See also primary control and secondary control, Rothbaum, Weisz, & Snyder, 1982.

It is not possible to detail every such pathway shown in Figure 1. Neither will any attempt be made to show all elements that are related to the basic components of competence, environment, need, and psychological well-being. This conception features the functions of home, so to speak. In elaborating the element of home, the lower-left element in Figure 1 depicts environmental contributions to the operation of affordances. Three aspects of environment (social, cultural, and physical) are depicted as having four routes of influence on affordance. One such route is a direct path from environment to affordance; this path simply indicates that affordances are sometimes intrinsic to environment. The next three are indirect. The second route associates environment with the mediators between need and affordance: Environment interacts with need in determining preference. The third acknowledges that environment affects preference directly. Fourth, environment affects choice directly. On the intrapersonal side (upper left portion of Figure 1), personal competence is a major determinant of personal need, as is stage in life cycle. I have attempted to depict the nonlinear, system nature of this conception by sketching reciprocal effects such as the ability of housing affordance to influence personal competence and need and therefore indirectly for all elements in the system to feed back to these person attributes.

Age specificity in the affordances of home

Thus far, little has been said that could not apply to

people of any age. As a great deal of gerontological research has told us, facile assertions about the uniqueness of old age in its effect on behavior or subjective states often have not withstood empirical test. We have as yet too few such age contrasts to allow firm conclusions about age differences in the relationships between people's homes and outcomes. This section will, however, note a few aspects of aging in our culture that could be associated with such differences.

The life cycle itself has clear implications for living arrangement. In fact, some models of residential mobility and household formation invoke the family life cycle -- family of origin, early marriage, child rearing, empty nest, and retirement -- as the central explanatory element (Rossi, 1980). Migration curves by age show perturbations at each of the average ages where such events occur (Yee & Van Arsdol, 1977). For the present purpose, however, it should be noted that migration rates in the United States begin to decline by age 30 and that retirement and widowhood notwithstanding, 12-month residential mobility for people 65-74 and over is only 6% and for the 75+ it is 5%, most of that being local, rather than long distance, moves. Living arrangements do reflect the family life cycle, but it is of interest to note the actual distribution of household types in old age and the direction of their age changes after age 65. Among all those 65 and over, 46% live as married couples with no others in the household, 31% alone, -- only 15% are estimated to actually live in the same household with an adult child in the latter's home (Congressional Budget Office, 1988,

computed from Tables 8 and 17). The age trend is steep in opposite directions for marital pairs (decreasing with age) and live-alones (increases with age), with little change with age in the proportion living in shared or multigenerational households (Congressional Budget Office, 1988). Although widowhood is an external loss event, rather than an intrinsic feature of the life cycle, it entails a radical change in household composition. The percentages cited above do not include the 5% of all 65+ who reside in institutions in the United States.

Such objective differences in the way older people live of course affect directly the style of their living but the extent to which variations in living arrangements affect behavioral or psychological outcomes is not well established.

A socially determined aspect of life cycle is retirement. For the retiree, it makes sense to believe that more time would be spent in the home thereafter, and also that a spouse homemaker would be sharing time and space in the home with the retiree in quite a different way from that experienced prior to retirement. I am not aware of any direct tests of change in within-home time allocations before and after retirement. Data are too sparse on ages in the very-old range to speak knowledgeably about late-age trends.

Some housing characteristics are related to the age of household. Data from the American Housing Survey (Office of Policy Development and Research, 1983) show that home ownership increases with age and that over 70% of the 65+ own their own homes (Lawton & Hoover, 1981). Tenure among older homeowners is, not surprisingly, longer than in any other age group. As of 1976,

95% of homeowners 65 and over had lived in that location more than two years, and 35% for 26 years or more (Annual Housing Survey of 1976, special run from public-use data tape, cited in Lawton, 1986). Even among the minority who rent, in 1976 14% had lived at their currently surveyed address for 6 or more years (Struyk & Soldo, 1980). Such length of residence in the same housing unit includes long tenure in the neighborhood and community. Since most moves are local, many long-term owners and renters have lived even longer in the same general environs than is indicated by housing tenure.

The final status known to show wide age variations is the one most relevant to transactions with the residence, that is, physical health. The National Health Interview Survey of 1984 (HIS, National Center for Health Statistics, 1987) found that 10% of those over 65 were receiving help with 1 or more of the basic activities of daily living and 22% with home management, or Instrumental Activities of Daily Living. When asked to assess whether they experienced any limitation in activity because of health, 40% had some such functional limitation. Viewed in terms of diagnosable illness, 80% of the aged are estimated to have one (or usually more than one) chronic illness (National Center for Health Statistics, 1971). Although most people function well in spite of such illnesses, there is probably a "grey zone" of frailty and fatiguability that increases the proportion who use their homes somewhat differently from the way they did in earlier life beyond the 10-20% indicated in the functional disability rate.

Such intrusions on health competence do not occur independently of other age-associated conditions. Up to a certain point, widowhood and living alone become more probable as physical vigor decreases, both being correlated with increasing age. Among older people living with a nonspouse relative, the percentage unable to carry on a major activity is more than double that of older people living alone. Thus living arrangements change in response to health changes (NCHS, 1983). Decreasing health also is associated with deferred home maintenance and measurably poorer housing quality (Newman, 1985).

Overall, then, older age is associated with several conditions relevant to the way one uses housing and thus potentially related causally to changes in housing affordances and their effect on psychological outcomes. Among these conditions only health is clearly an intrapersonal process, while the others are transactional in the sense of being externally-observable but subjectively controlled or appraised. None are intrinsic to chronological age itself, despite their greater probability of occurrence as age increases.

The next section will detail the affordances of home and review, where appropriate, evidence regarding the relationship of each to psychological outcomes.

The Varieties of Housing Affordance

A survey of the literature revealed a large number of specific functions that have been ascribed to home. These separate functions can be classified into a four-category conceptual framework that enhances our ability to comprehend them. These higher-order functions are attachment, cognitive

control of the environment, competence, and identity. Such functions, in turn, are located in four traditional domains studied by psychology: Affect, cognition, behavior, and the Self. Attachment

The home is capable of evoking many emotions, both positive and negative. The function of affective attachment is much more specific than such generalized evaluations, however. Attachment to home may be within temporal frameworks of past, present, or future. Much has been written about the home as a locus of association with earlier periods of life and the people who lived in the home. It is especially the re-evoked affects of such periods as the remembered comfort of childhood, the love of a new spouse, or enjoyable times with one's own children that continue to live in a long-occupied home. Similar expectations for the future may exist as one contemplates the comforts of home in later life. Attachment may have the self as the ultimate basis for attachment. Sometimes the attachment is very concrete, that is, the home is an object that the person has chosen, altered, nurtured, and put one's stamp on. Clearly also related to the identity theme, this investment of love in the physical object of home is for some people a true love affair. Such attachment may be strongly symbolic, where it is not so much what one has done to the house as what the house as it is conveys to the person about her or his achievement in life (also a matter of both behavioral competence and identity). Again, however, the symbolic home is gazed upon and savored as a love object that embodies the reflected, achieving self. In the present, the home

represents a source of stimulation, a vehicle for the positive affective experiences of interest, aesthetic enjoyment, challenge, and problem-solving. There is often simply more to do in one's own home and therefore a continuing state of mild arousal in the positive-affect zone.

All but the last type of affective affordance have long histories. The longer one lives in a domicile the greater opportunity there is to have experienced significant attachments, to have left more of one's imprint on the home, and to have completed one's task of achieving a personal housing goal. Therefore it is at least a reasonable hypothesis that the combination of age and housing tenure may increase attachment.

Two other factors moderate this assertion, however. First, not all affect associated with home is positive. Although I would agree with Zajonc (1968) that familiarity breeds at least some modicum of positive attachment, individual examples are not difficult to find of people who decide to move to get away from the negatively emotional associations of a house with a problem child, an unhappy marriage, or a personal failure. The second moderating consideration is that there are very wide individual differences in affective responsiveness to environment in general and to housing in particular. A great deal more research in what might be called "environmental personology" is needed to begin to understand why some people invest so much emotion in their homes while others do not. It is probable that frequent residential relocation is correlated with less affective attachment to home. As far as I know, however, this hypothesis has not been tested for older people making voluntary moves: Do retirement migrants

express fewer affective evaluations of the type discussed here in relation to the homes they are leaving? Are they more adventurous types in search of new experiences rather than contented people electing to continue to savor the rewards of attachment to the familiar?

In summary, for some people the home can be loved for its past, for the person's past, and for the person's present and future. Even if the love is ambivalent, sheer familiarity shades the feeling toward the positive side. Whether there are more older people than young with such attachments, or whether the strength of attachment increases with age, remain to be investigated.

Cognitive control of the environment

To know the world is a first step toward controlling it and moving toward the goal of psychological well-being. The home serves a central role in attaining such controllability of an important segment of the behavioral world. Since from 12 to 22 or so hours are normally spent by older people in their residences (Moss & Lawton, 1983), the cognitive task of establishing order in the environment is located importantly in the home. A stable home affords the opportunity to organize this near environment in a way that enables daily routines to proceed with minimum effort. "Familiarity" is often invoked as an explanation for older people's tenacity in remaining in their homes. Although familiarity has its affective aspects, familiarity also involves a complex set of schemata that orient the person to the living environment, form a template for daily

activities, and a basis on which new knowledge regarding the environment can be interpreted. That is, a large part of the activity in and around home is routine. Novel activity (for example, a stranger at the door, a leak in the roof, a change in land use on one's block) requires vigilance and the baseline cognitive order established regarding the home provides a frame of reference against which to assess the meaning and behavioral implications of new activity. The home also affords the opportunity to make environmental changes in accordance with changing needs. Order requires constant adjustment to maintain. The amount of control over the environment thus directly flows from having such a domain for oneself about which one knows the rules, customs, limitations, and potentialities. Finally, just as home offers stimulation for affective arousal, home offers learning possibilities consequent to adaptive tasks that can be performed there.

The core cognitive function of home is thus primarily protective and adaptive and secondarily motivating toward new knowledge. Whether age enhances cognitive affordances because of length of exposure to the home is debatable. Certainly the period of getting to know the domicile is important but such knowledge probably reaches an asymptote fairly early in the "acquaintance process." Age alone probably also does not affect cognitive affordances negatively. Nonetheless, biological decline may affect one's ability to maintain or add to one's cognitive schema of the home and its environs. If aging is accompanied by pathology that limits cognitive functioning, the home will grow in dysfunctionality. It is quite possible that

the aging of the local environment and its sometimes concomitant transformations, including either positive features (e.g. revitalization) or negative features may negatively affect the older occupant's motivation to maintain cognitive control. The feeling of "strangeness" associated with environmental change may erode the sense of cognitive control.

Behavioral Competence

Many affective and cognitive affordances of home become translated eventually into behavior. In a sense, some behaviors preceding the establishment of the domicile set the stage for later behavioral affordances. The choice of the dwelling in the first place is an act that on the whole enhances the ability of the home to lead to goal-achieving competent behaviors. Habitat selection under relatively free conditions where preferences may be exercised maximizes the congruence between personal need and the ability of the environment to fulfill such needs. One facet of such generalized congruence is the freedom to make other choices, as, for example, how one will manage the dialectic between privacy and sociality, as detailed by Altman and Gauvain (1981). Home, for example, can be chosen and altered to maximize its closed quality from the outside world, its openness to social engagement, or more likely, some mix of the two, including the zoning of private and public areas. Thus the regulation of social behavior is a major behavioral function of the home. Where such decisions are made by the occupant, the total rhythm of activity is regulated to one's taste: The types of behavior allowed to occur, their location, the times they occur, their

frequency, and their social context.

Habitat choice to attain congruity and freedom of choice of activity has another major facet, the maintenance of competent behavior. The knowledge of and familiarity with the domicile afford behaviors that are adaptive at one level and ego-enhancing at another. Highly practiced and competently-performed behaviors such as home maintenance, housekeeping, cooking, or gardening become even more expertly performed with long practice. Familiarity with the vagaries of a furnace, the local bus schedules, and the best places to shop nearby become skills that one risks losing by moving. A special case of optimized behavior is that of insuring security from intruders. It is well documented that behaviors designed to mark one's home territorially may actually harden the home as a target against intrusion (Patterson, 1978); proactive behavior designed to avert crime not only achieves this goal but by its simple enactment reduces anxiety about crime.

Finally, a very concrete behavioral affordance is the financial security represented by the home. Even in the case of a rental unit there is often a financial advantage to remaining in place, because of rent inflation. For a homeowner the financial advantage is major.

Major threats to well-being arise from incongruence between personal need and some behavioral affordances. Low income, minority status, and poor health are major barriers to the ability to select or maintain a positive habitat. Some large but unknown proportion of people are limited over their lifetimes in attaining such congruence. Some important negative affordances

are distance from life-maintaining resources, distance from amenities, high neighborhood crime rate, crowding, isolation, and poor-quality housing. Such negative features are negative because they limit behavioral competence. These attributes are not inevitably associated with negative subjective well-being, however, as shown in studies such as those dealing with "grieving for a lost home" (Fried & Gleicher, 1961) or "house as haven" (Rainwater, 1966).

The age-specific aspects of behavioral affordance can be both positive and negative. Viewed over the working lifespan, residential behavior consists of a series of decisions about where to live and what to do with the domicile. The result of a series of moves and alterations of the home for many people is the successive approximation of an ideal residence (see discussion of this hypothesis in Campbell, Converse, & Rodgers 1976, pp.15-123. This growth of positive affordance helps understand an important reason for the observed increase in housing satisfaction among older people (Campbell, Converse, & Rodgers, 1976). Age-related factors reducing congruence are, first, that the housing occupied by older people is older and tends to be located in older and sometimes declining neighborhoods (Struyk & Soldo, 1980). More importantly, where the person's health declines, some positive affordances are lost and negative features added. The interplay between health and home will be discussed at greater length later.

To summarize, the behavioral affordances of home are largely instrumental in their effect on longer-range personal goals, both

behavioral and subjective. Not all affordances are positive, the poor, racial minorities, and the health-impaired being at special risk for negatively-operating functions. Up to a point, person-domicile congruence is likely to increase over the lifespan but is perturbed by poor health and other factors correlated with chronological age.

Identity

The affordances that are related to the Self are more difficult to define than are the other varieties. The identity category may be tentatively thought of as a function of the home that contributes to the person's definition of her- or himself, including both uniquenesses and shared qualities. Above all else, home is a major medium for the expression of individuality. This imprinting was mentioned in the affective realm. There is general correspondence between the Self and the residential choice or the embellishments made on the home. An absence of embellishment or uniqueness may be just as consistent with the occupant's needs as positive occurrences. The stamp of Self may have an affective or behavioral outcome, but at the identity level, it is existential. One's identity as expressed in the home has been called "autobiographical insideness," by Rowles (1980) -- a state where the physical place is a repository for the history of the person and the person in turn has incorporated the place into the Self. The distinction between person and environment disappears at this level.

Nonetheless individual differences are evident in people's relationships with their homes. For some their aesthetic is what gets expressed in the home. For others, their ingenuity. For still

others it is sufficient to be different, even if the difference lies only in the color of their door among a sea of identical structures. Individuality is not the only form identity can take, however. What is shared collectively with others is just as often the expression of the identity theme. To have a home as much like that of others as possible expresses a person's need to share social values. A report on a retirement community in the New Yorker some years ago noted the extreme expectation from other residents that people would furnish their homes similarly, for example, two lamps on either side of a couch visible through the picture window. Shared norms of the larger society and indicators of one's class may be expressed through the face shown to the world, as in cleanliness or keeping the grass mowed, while cultural values are objectified by the display of religious or ethnic artifacts. All of these indicators of social integration contribute to the definition of who I am. The past as well as the present may be the focus for identity. One's personal history is recreated in microcosm through possessions. Conversely, a break with the past is highly achievable in a change of residence or possessions. Carp (1966) documented the willingness of poor elderly to impoverish themselves by buying new furniture as they embarked on a "new life" in public housing. On the other side, clinging to possessions from the past links oneself to one's origins and departed relatives, often at the same time expressing the continuity of self as cultural symbol bearer. In short, the housing function of identity can express a variation on the Altman dialectic, in the form of individuality

versus communality.

Inasmuch as the Self is constantly evolving around a core of stability, it is a reasonable idea that there is a continuing contribution of the home to the definition of Self. Whether one can conclude in addition that the home becomes increasingly important to identity as age increases is not self-evident, however; rather this assertion requires empirical testing.

Another major question is what are the implications for ultimate well-being of a low level of expression of individuality in the home or a disregard for elements of home that exemplify one's connectedness to society and culture? To say that personal identity derived from the home leads to favorable outcomes for many people does not suggest that such identity is necessary for well-being. Just as there are socially detached people, there are environmentally detached people whose other means of attaining well-being require understanding. Since there is a great variety of ways of marking identity, it may well be that the choice of housing, instead of some other medium, through which to express one's identity may be a stylistic choice rather than one intrinsically associated with well-being.

Home as a Feature of Adult Development

In this section a conceptual framework of the person's relationship with the domicile will be developed that will consider how the functions of home operate at different periods of life. The functions contribute differentially to the satisfaction of needs for autonomy and support. Autonomy is the personal need for independence, growth and self-realization. Privacy is an aspect of autonomy as is individuality, the

intrapersonal need to distinguish oneself from others. The need for support includes the behavioral manifestation of seeking the company of others, the intrapersonal need to establish communalities with other, and emotional or instrumental assistance from others. Both autonomy and support are needs of all people. Individual differences come in the relative importance accorded each need by different people, while developmental and shorter-term temporal variations occur in how the tension between the two is managed at any given time. Very often satisfaction of one need denies satisfaction of the other, necessitating a process of tradeoffs, which, if major and extended over a period of time, may alter either the environment or the person.

Applying the autonomy-support dialectic to the person in the home environment suggests a series of phases of what might be called "ecological development." These are meant to illustrate important shifts in the balance of autonomy and support, rather than stepwise stages. Beginning with the establishment of the adult's first home, the phases of ecological development may be conceptualized as periods of striving, shaping, reaping, accommodating, slipping, and reconstituting.

Autonomy with respect to one's family of origin is ascendent during the striving phase when the young adult establishes a first dwelling. Attachment to home is likely to be low, which is very congruent with the need to be mobile. Virtually unlimited control over the dwelling, its occupants, and activities is likely to be the rule, and total behavioral competence taken for

granted. Identity may be conferred in either an individualistic or communal manner, but in general, the dwelling is an instrument in the attainment of autonomy. Support is taken for granted in the shelter and security from intrusion provided by the dwelling unit.

The shaping phase brings the dwelling into greater salience for the overall need satisfaction of the person. This phase consists of a long period of housing adjustments characterized by either or both residential relocation and alterations to the home, where proactive behavior must be exercised in the tasks of shaping the dwelling to allow the person's major needs to be satisfied. In the model, housing preferences develop out of needs and direct the necessary choices and environmental design efforts. Autonomy continues to be served by the search for successively more congruent housing and by having both time, financial means, and expertise to put one's personal impression on the dwelling. As congruence increases, attachment is likely to grow, attachment also increasing with the family cycle that moves concurrently with ecological development. Another dialectic between adventurousness and attachment may be evident during this period, adventurousness being associated with shaping by residential moves, while attachment is associated with shaping in place, i.e., remodeling or decorating.

Clearly, total congruence is never achieved, nor do all people reach the phase of coasting, where the kind of housing one wishes to have has been approximated and one is free to enjoy it. People may attain this state as single individuals, as families, or as empty-nesters and couples. When present, however, this

phase is likely to be characterized by an excess of positive affordances, with a more stable balance between autonomy and support than was true in earlier phases. Attachment may have reached its height through the passage of family events and the investment of one's own labor. The home is likely to be known intimately and to be both a physical location and a social context where total control is possible. It is also more manageable and the tasks performed in the home by now overlearned. There is still opportunity for continued stimulation and ability to design and redesign. Identity has been invested in the physical home and its meaning for the person. In short, autonomy to one's own prescription is present, a state that is relatively unthreatened by the limitations on autonomy placed by the increased attachment. Attachment is by its nature supportive, but so also is the maximized physical quality of the home and its responsiveness to the management efforts of its occupants.

The phase of accommodation is most likely to begin with compromise of personal competence ranging from a mild degree up to the point of real disability. Diminished energy and endurance or symptomatic chronic illness may force the person to reduce her range of activity. Personal needs thus move in the direction of support. The affordances become rearranged to accommodate such needs. Although there is no reduction of the emotions of attachment that characterize the coasting phase, developmentally earlier associations of home with parental protectiveness are likely to re-emerge. In the present, of course, such feelings

appear as heightened feelings of comfort and security because of the home and reluctance to leave. In fact, control also endures explicitly because of the occupant's familiarity with the dwelling and the consequent feeling of relative competence in continuing to perform many well-practiced household behaviors. Because new behaviors are not so easily established, problem-solving in the home becomes more difficult and the more demanding activities must be relinquished. Needed maintenance tasks cannot be performed as well and the decline in housing quality further reduces some of the favorable housing affordances. This threat to competent behavior produces a compensatory reaction that reinforces the meaning of home as a symbol of personhood and competence. That is, the simple existence of the home at that point affirms the person's individuality despite the losses that are occurring.

Despite the ascendance of support needs, positive outcomes may be maintained during the accommodation phase by continued proactive effort of the older person to create a new environment in keeping with changed conditions. Such influence on the environment is depicted in Figure 1 through the accommodative processes of the choice/design element.

A basic change occurs during this phase in the spatial range of people's activities. Rowles (1980) has characterized the spatial range of his rural and small-town subjects as consisting of a series of zones, from the room, the home, the "surveillance zone" (the visual field accessible from some point in the home or property), and the vicinity, to the community. As the behavioral world constricts, many people reconstruct a new psychological

world whose purpose is to counteract erosions in autonomy.

Some of these dynamics are illustrated by qualitative observations of a group of highly disabled people living alone in Philadelphia, who were enabled to remain in their homes by the delivery of intensive in-home services (Saperstein, Moleski, & Lawton, 1985). Most of them were of limited mobility within the home and many were unable to negotiate the stairs. Almost all were firm in their wish to remain there. The major home rearrangement seemed designed to fortify cognitive control and behavioral competence. We inferred that the rearrangement began with the reluctant acceptance of a restricted sphere of activity and the countermeasure of increasing the quality of the restricted zone. Thus we saw many people who had moved to the ground floor. Some had deliberately moved some objects of attachment to this zone, such as a favored chair, or dresser, and especially family photographs. Those who were mobile on one floor often converted their dining room tables to a combination office, reading room, and pantry, piling the large surface high with the environmental props for these functions. A major compromise was required with privacy needs, since a bed and some toileting arrangement had to be added to the basic living-dining area. Those who could do so used a convertible or sofa-like bed, others placed a bed as much out of sight as possible. The usual toileting arrangement was a commode. Many were unable to shield the commode from view, but some had managed a folding screen or curtain hung from the ceiling to add to the privacy.

The most interesting subgroup were some of the least mobile

whose behavioral space had shrunk for most of the day to a chair in the living room. These people established a new mini-environment that we called a "control center" where cognitive and behavioral competence were facilitated by increased density of control. A sense of cognitive control was gained by maximizing incoming information. Their chair was placed to monitor both their front doors and as much of the porch, sidewalk, and near environment as could be accomplished in the surveillance zone. Knowledge that was both stimulating and competence-maintaining came from the outside world through television, radio, and telephone, all of which were within arm's reach. These channels also afforded continued social connectedness, as did piles of letters and photo albums, and objects and mementos to connect one's present and past. Some were able to preserve and practice eating, bathing, and grooming behaviors from their chairs or nearby.

The point is to emphasize first that diminished function does not automatically mean the end of autonomy. The second is that no matter how low the person's competence, there is room for initiative in determining the type of environment that will be most congruent with both remaining competence and personal needs.

In addition to the supportive character of the home, family, friends, neighbors, and formal services are important factors in enabling community residence to continue. For many people none of these supportive forces will be enough to forestall a slipping stage where true deprivation begins to occur. At this point attachment to the home and the identity conferred by the home may

be strong enough to keep the person in an otherwise unsupportive environment. However, as shown in research on nursing home applicants, it is more often than not the older person's, rather than another's, decision that leads to a change of residence.

Despite the research and policy interest in how older people remain in their homes, relatively little is known about the person-environment transactions of impaired people living alone who are also isolated from both informal and formal services. The National Channeling Demonstration Project (Kemper and associates, 1986) found that one-third of their high-risk population had no informal caregiver. Whatever future research shows the size of the truly isolated and impaired population to be, it is very likely that for them the slipping stage will entail major deprivation and risk of life. It is probable that there is a point beyond which some residential change will be necessary to forestall a disastrous physical or mental health outcome.

The restoration phase includes the time after residential relocation, when a major readjustment occurs among the person-environment transactions. Although ample qualitative evidence exists suggesting that there is often major stress experienced consequent to the disturbance of attachment, learned competence, perceived control, and identity by moving (Schulz & Brenner, 1977), such evidence does not support the idea that relocation is necessarily traumatic over the long term (Coffman, 1981; Tobin & Lieberman, 1976). In fact, practically all studies of moves to planned housing for the elderly (Carp, 1966; Lawton & Cohen,

1974) demonstrate positive effects. Talking to older people in the process of contemplating such moves is very informative in showing how aware they are of their changing competences, of the changes in environmental resources and demands, and the ensuing readjustment of their own needs to yield new preferences, choices, and housing affordances. The "push" aspects of moving (Lee, 1966) are often reformulated into pulls. For example, feeling unable to expend the energy to keep up one's grounds becomes conceived as a wish to "relax and have someone else do the work for a change," in moving to a place where grounds maintenance is provided.

Affective attachment and identity may well be the most difficult functions of home to renegotiate. A very hard tradeoff seems to occur. Relinquishing the emotional tie to the home and the equation of the personal domain with one's identity seems to involve substantial constriction of one's larger affective and cognitive responsiveness. Once they decide they must leave, do people monitor themselves so as to censor potential emotions regarding the home? Some people appear to be doing so, the result an apparent relinquishing of openness and responsivity in return for insulation against depression. Since such renegotiations occur primarily in response to basic biological decline associated with aging, however, we must recognize that the causal sequence could easily run in the opposite direction: Decline in competence affects not only everyday behavior but also inner process such as openness and affective responsiveness; a residence whose affordances are strongly in the supportive category thus is chosen as the option least likely to push the person into

continuing psychological decline.

The phase of restoration may vary widely in the balance of autonomy and support, of course. Most people making the relocation to Florida or to retirement communities manage in that process to rearrange housing affordances so that the new and more supportive understructure actually liberates some other opportunities for autonomous behavior. Warm weather makes outdoor recreation more possible. A large number of proximate age peers makes social interaction more likely. Receiving some meals in congregate dining facilities makes one less anxious about basic life maintenance and liberates motivational energy for trying new group activities.

Finally, however, no matter how lopsided the balance tips toward support, there never ceases to be some area within which autonomy may be constructively preserved. For community residents in the accommodation phase, the control center optimizes that small area. Proactivity continues to be evidenced even in the most supportive of institutional environments. People sit where they can see other people; some seem to wander for proactive reasons. Some years ago we did a small study of within-institution relocation of a number of very impaired nursing home residents (Lawton, Patnaik, & Kleban, 1976). Despite the very passive position in which these residents were placed by their illness and the fact of living in an institution and their probable anxiety at the time of their move, they adjusted their behavior to the demands of the new situation. As observed directly they limited their behavioral range greatly,

preferring instead to engage in proactive behaviors in their rooms such as caring for their own belongings, placing them and replacing them in drawers and closets. They sat in a chair placed by the door, or stood near the threshold of the door into the hallway, clearly taking an opportunity to learn actively what life in the new place would be like before venturing into full behavioral participation in the new life.

Conclusion

My intent has been to use bits of existing knowledge as a basis for proposing a conceptual framework that helps understand what the home does for the older person and how the psychological functions of home evolve over the adult life span. It has been easier to describe the positive affordances of home. There is a particular need for research on how people who are neutral regarding their home environments make residential decisions and whether there are life-stage-specific changes away from neutrality. We also need more data on the effects of negative affordances and the dissolution of positive affordances. It seems likely that achieving such goals will require considerably more creative, qualitative, investigation of the types reported by Rowles, Rubinstein, and others.

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PERSON

Personal
Competence

Life
stage

Personal
needs

Social
Cultural
Physical
Environment

Environ-
mental
preferences

Choice
Design or
Adaptation

Housing
Afford-
ances

Positive
and
negative
affect
Mental
health

PSYCHO-
LOGICAL
WELLBEING

ENVIRONMENT PERSON-ENVIRONMENT TRANSACTION

