

Local

Aging in place concept has been oversold, professor argues

By **Fredrick Kunkle** March 5

Aging-in-place may not be all it's cracked up to be.

That's the view of a University of Florida professor of gerontology, who argues that the popular notion that older people are better off remaining in their homes may be simplistic — a view summed up by the sentiment, “I’d rather rot in my own home.”

Yet professor Stephen M. Golant, whose academic career has balanced geography and aging, says in a new book that the concept of aging-in-place has become a mantra in recent years that might prevent older adults from seeking healthier, more holistic alternatives.

“It’s not an all-or-nothing situation, obviously,” Golant said in an interview about aging-in-place. “But I just wanted to point out the imperfections, and the weaknesses in some of the arguments. . . I want to point out that sometimes there’s too much hype.”

It’s the sort of hype that has surrounded what he calls the New Gerontology, a longrunning trend that sometimes seems to imply that if people follow certain regimens of diet, physical exercise, social activity and cognitive training, they might avoid aging altogether.

But other experts in geriatrics suggest he’s going against the tide when it comes to aging-in-place.

“Every survey we have says [that’s what people prefer](#) to do,” said Susan C. Reinhard, senior vice president at AARP and director of its Public Policy Institute. “That’s not to say it’s the right choice for everybody. And I don’t think AARP has ever said that.”

Reinhard said [the move toward aging-in-place](#) was itself a reaction to the assumption that older adults should spend their remaining years in nursing homes and other institutions. Surveys and data, such as Medicaid funding for in-home services, have shown that the number of people who choose aging-in-place has increased by about 1 to 2 percent a year for the past two decades or so. In recent years, [the “village”](#) model has sprung up in cities and suburbs as a way of providing extra community support to older people [who want to remain in their homes and](#)

[neighborhoods](#) as they grow old.

In “Aging in the Right Place,” Golant argues that that [aging-in-place model](#) has been oversold, particularly by home health-care providers, builders eager to capitalize on renovating homes for older people, and financial institutions who have popularized reverse mortgages. AARP, the media and [other stakeholders](#) have also pushed the idea too hard, Golant said. Aging-in-place, he argues, could really be nothing more than “residential inertia.”

“The inevitable conclusion is that proponents of aging in place groupthink are doing a great disservice to millions of older Americans now occupying inappropriate residential environments,” Golant writes.

Blinded by emotional factors such as the memories that attach to a beloved home, older people may hunker down in a house that is no longer physically easy to navigate, expensive to maintain, and inconveniently located to meet a person’s daily needs such as grocery shopping or doctors. The neighbors and friends who once made it an attractive home may also have moved away or died, leaving them isolated. They can feel incompetent and out-of-control – outside their “residential mastery zones,” Golant writes. These folks, he argues, might be better off moving someplace else.

“When older people express their strong preferences for aging in place to pollsters, they have not contemplated spending almost all their time in the confines of their dwelling,” Golant writes. “They do not envision scenarios in which they lack the energy or motivation to perform their most basic subsistence or homemaking tasks. They do not foresee a day when they cannot accomplish their everyday shopping activities or imagine they will be sick, alone, and with no one to call.”

The financial costs of aging-in-place also tend to be underestimated, he writes. In part, that’s because of trends that large numbers of older Americans today, unlike previous generations, are still paying off the mortgages on their homes.

Above all, he argues that [aging-in-place](#) often assumes that a family member will be on call nearby to serve as a caregiver. That assumption hides the toll on financial and emotional toll on caregivers, who in most cases tend to be women.

“There are many downsides to the aging-in-place experience for older people,” Golant said. “Obviously there’s a good side. I’d be irresponsible to say there are not a lot of positives. . . But older people are a really diverse lot. Their ability to count on family members is very variable. Their ability to cope with their declines and their losses in health and people is very variable. So to suggest indiscriminately that aging in place is good for everyone is also an irresponsible position to take.”

Both sides would agree on one thing. “People need better choices,” said Rodney Harrell, a housing expert at AARP’s

Public Policy Institute. Too many homes and communities were designed in ways that run counter to an older person's needs, particularly in suburbs that were designed around the automobile, he said. People of every age would benefit if public planners focused more on designing communities that combine walk-ability, accessibility to employment, grocery shopping, health care and other needs, and adequate housing at all price levels.

"We really need to work at meeting this wide range of needs," Harrell said.

Golant said the United States has so far failed to provide decent alternatives for older people to relocate. The middle class is especially affected, because they cannot qualify for assistance available for people with low incomes, such as Medicaid, and they can't afford many retirement communities.

"We know how to provide beautiful long-term care," Golant said. "What we don't know how to do is make that kind of product affordable to anyone but [those] in a higher income bracket."