

THE UNIVERSITY OF MANITOBA

A STUDY OF PREFERRED LIVING
ARRANGEMENTS OF THE AGED ON SOCIAL
ALLOWANCE IN METROPOLITAN WINNIPEG

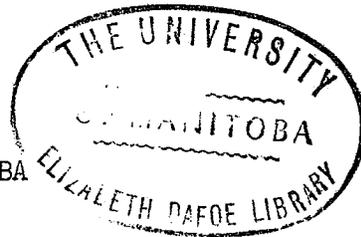
BEING A THESIS SUBMITTED IN
PARTIAL FULFILMENT OF THE REQUIREMENTS
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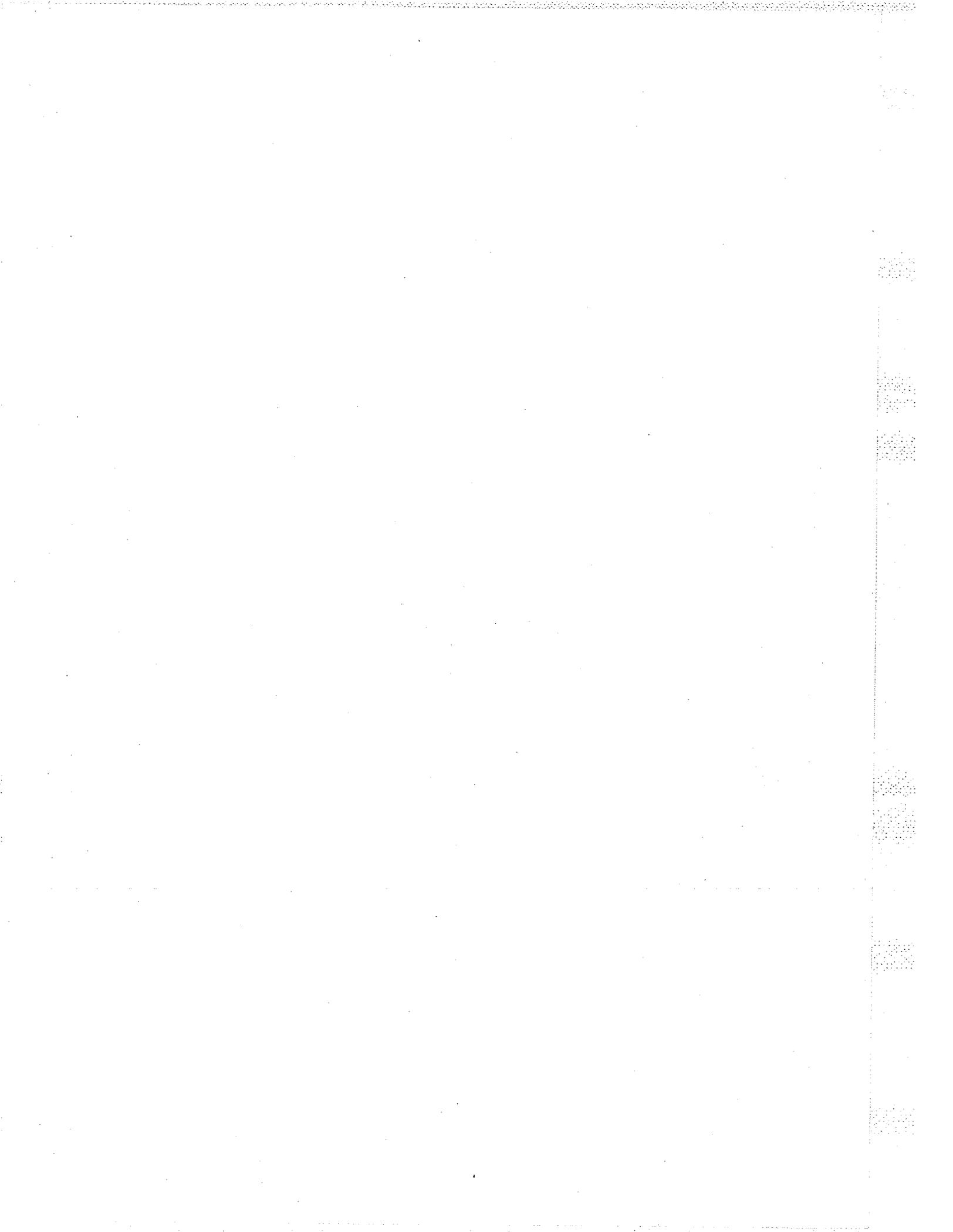
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ABSTRACT

This thesis was designed to ascertain the preferences of a specific group of older citizens with regard to their living arrangements.

The study was based on data obtained from face to face interviews with a sample group of ninety-five senior citizens on Social Allowance residing in Metropolitan Winnipeg. In addition to their preference for a particular living arrangement certain personal characteristics, age, marital status, sex, health and ethnic origin, and certain external circumstances, available housing and previous way of life were identified as they were associated with the preferences.

The findings revealed that a large proportion (81%) of the sample group desired to live in the normal mixed community. This was true for most of those who were above and below the mean age (which was found to be seventy-five for this sample group), who were married and single, male and female, and in good and poor health. These findings held true also irrespective of their ethnic background, their knowledge of available housing projects and their previous way of life.

Similarly our findings showed that a considerable proportion (64%) of the sample group preferred to live independently. This led to the conclusion that the older people in our sample group prefer to retain their independence but if circumstances necessitate increased dependency they still prefer to remain in the normal, mixed community.

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CHAPTER I

INTRODUCTION

Much of the current literature written on problems of the older citizens emphasizes the need to provide better housing and accommodation for them. It has been generally recognized that elderly people, in particular, have very diverse housing arrangements. They are living in single family houses, in apartment blocks, in furnished rooms, in residential hotels, in nursing homes and doubled up in the houses of relatives. Is this diversity of living arrangements what the elderly want and what they need? Would most of those now living with relatives prefer separate apartments or houses? Would hotel and rooming house residents rather live in housing projects especially designed for older people?

In this study, carried out by six students in their Masters' Year at the School of Social Work at the University of Manitoba, it was hoped to determine the older people's preferences for particular living arrangements and some of the personal characteristics associated with their preferences.

The proportion of aged persons in the community has been progressively increasing due to extended life expectancy made possible by scientific advances. In addition, industrialization, urbanization, increased mobility and the resulting nuclear family have contributed to the leaving behind and neglect of the aged. As a result of these

developments it has become necessary for society to assume greater responsibility in taking care of the older people - a function formerly carried out by the family unit. However, in a society where the emphasis was and still is on youth, health, achievement and production, where death and dying are taboo subjects, the efforts made have been very scanty and slow in coming. Eventually, the fact of an ever-increasing aged population and the change of attitude in public thinking have led to some definite efforts to improve the lot of our senior citizens. Both government and private agencies are now developing programs that do take into account older people's right for happiness and security.

Prior to embarking on the research project, we heard a discussion by representatives of the Social Allowance Division and the Age and Opportunity Bureau of Winnipeg, all of whom are familiar with the problems facing many of the older people in our community. As the Social Allowance program is comparatively new and is designed to meet the needs of the people, the representatives of these agencies expressed particular interest in a project which would help distinguish the wishes and needs of the older people using their services. Out of this discussion came further discussion by the members of our research group and since we all have some older people, either in our immediate families or among other relatives or friends many thoughts, ideas and concerns came forth. It was during this discussion that we felt the problem of "living arrangements" was one of the greatest problems older people have to

face. While the majority of us felt we would be willing to care for the older members of our families we all agreed that this feeling was not always shared by the older people themselves. As social workers we are aware of the fact that there is more to the problem of living arrangements than having a sound roof over one's head. There are, for example, psychological and emotional factors, to say nothing of the whole train of aspects of human relations of the older people's status. As we looked at various articles, studies and other literature concerning older people, we invariably found that a great stress was placed on independent living for the older person for as long as possible.

Age and Opportunity, a report published by the Welfare Council of Greater Winnipeg in 1956, states that independent living was favored by the older persons at that time but because of the limited suitable housing, home care and related services, the extent to which people would find it possible and desirable could not be answered.

A great emphasis today is placed on the need for special housing projects and developments to allow for independent living for older people. However, several reports on independent living for the aged from other places and countries such as the United Kingdom and Europe indicate a greater stress on keeping the older persons in their own homes or, if this is not possible, on helping them to remain in their own neighborhood where everything is familiar to them and where they are integrated in the community. Our research group, therefore, became interested in finding out if this way of life

is what our old people need and wish. Therefore, the focus of our study was on the living arrangements preferred by the older people in our community.

With the introduction of the new legislation in Manitoba, namely the Social Allowance Act of 1960, it is now possible to provide for an extra rental allowance in special situations so that the needs and wishes of the senior citizens are more adequately met. In our study we included those people over 65 years of age who either have no income other than that provided for in the way of Social Allowance or have an insufficient income with which to maintain themselves and are dependent on additional income through Social Allowance. Also included, of course, are those over 70 years of age who are receiving Old Age Security but who are also dependent on additional income or such assistance as medical care through Social Allowance. The Social Allowance Program is designed to take into account the person's current needs and current income. The current needs include shelter or living arrangements. To a limited extent, in terms of cost, the program allows for the person's preferred way of living. This group is not representative of all the older people in our community but does represent the lower income group. The preferences of this particular group do not necessarily correspond to those of the higher income group.

From the foregoing discussion the following hypothesis emerged: The preference of people 65 years of age and older with inadequate financial means is for accommodation which provides an independent and

an integrated way of life.

Inadequate financial means was determined by the older person's eligibility for Social Allowance. The term independent way of life was used to refer to living arrangements that involve a separate and private dwelling where a person cares for himself, prepares his own meals and is free from control and influence by others; the opposite of independent is a dependent way of life which refers to living in a setting where the person is at the disposal of another person and/or unable to sustain himself without the aid of someone else. The term integrated living was used to refer to a way of life or living arrangements where the individual continues to be part of the normal, mixed community and where his home is undistinguishable from the rest of the community; the opposite of integrated is segregated living which refers to a way of life or living arrangements where the individual is set apart from the normal, mixed community; where he is removed from the presence of his family, former friends and former community activities and where he is living together with a number of elderly persons.

People who are accustomed to living in a particular way will wish to continue living in this manner providing conditions are practicable for them to do so. There are a variety of conditions which are likely to affect the possibility of continuing in their previous way of life. As people get older there is the possibility that they may become less able to care for themselves and therefore age and physical health will influence their desire to change their

all
initial

way of living. As long as the couple remains together a family unit still exists to some extent and we are likely to find this group showing preference for an independent and integrated way of life. In former years the female partner usually managed the home and it seems likely women will want to remain in this capacity in their own home whereas men will likely want to be dependent. Whether or not our older people wish to live in accommodation specifically designed for older people depends on whether they can afford this type of accommodation and if this type of accommodation is known and available to them. Value and attitudes develop in part from our ethnic origin and this has an effect on certain groups of people in their choice of living accommodation. We assumed that people of similar ethnic origins have similar cultural values. It is recognized, therefore, that the preference of older people may vary according to these and other personal characteristics and existing factors. In the time available it was impossible to consider all the relevant factors, consequently, in this study preferences were described and compared with respect to age, marital status, sex, health, ethnic groups, available housing and previous way of life. Out of this the following sub-hypotheses were formulated:

1. A greater proportion of the people below the mean age prefer an independent and an integrated way of life while a greater proportion of those above the mean age prefer a dependent or a segregated way of life.

2. A greater proportion of the married persons prefer an independent and an integrated way of life while a greater proportion of the single persons prefer a dependent or a segregated way of life.
3. A greater proportion of the women prefer an independent and an integrated way of life while a greater proportion of the men prefer a dependent or a segregated way of life.
4. A greater proportion of the people in good health prefer an independent and an integrated way of life while a greater proportion of those in poor health prefer either a dependent or a segregated way of life.
5. The preference for an independent or an integrated way of life varies among different ethnic groups.
6. Irrespective of knowledge of availability of housing projects specifically designed for older people, the proportion preferring not to live in housing projects will be similar to the proportion preferring integrated living.
7. Older persons prefer a way of life which is the same as, or similar to, that to which they were accustomed in previous years.

Previous way of life refers to the type of housing and living arrangements to which the individual has been accustomed prior to reaching the age of 65 years. Mean age refers to the average age of the group being studied. Housing projects are dwellings or houses

must support us by future research.

provided by private organizations or interested groups with the assistance of subsidized grants from the government. As they exist in this area they are all of the self-contained motel type and apartment type where the older person provides for his own care but building maintenance is provided through a caretaker.

ass. As there is no way of assessing the difference between expressed need and the felt need these were assumed to be one and the same. *can valid* Casework services of the agency no doubt play a part in the manner in which our senior citizens are living and prefer to live but as our study could not assess service we assumed this service to have no influence on the older person's preference. The assumptions we have made here are possibilities for future studies and research.

The method of our study was to interview a sample of elderly persons in receipt of Social Allowance to determine their needs and wishes with respect to living accommodations. In order to determine the individual's preference specific information was required with regard to present living arrangements and satisfaction or dissatisfaction about these. Further detailed information as to age, marital status, sex, health, ethnic group, available housing and previous way of life was needed in considering these characteristics. A schedule was designed in order to obtain the specific information. The study group was aware that there might be problems in interviewing due to senility and language barrier. *(* It was expected that old people with these handicaps would be unable to express their needs and wishes and therefore they were excluded from the study. *ass.*

The expressed preferences of older people for a certain way of life were classified into four major groups, namely: Independent-integrated, dependent-integrated, independent-segregated and dependent-segregated. These major preference groups were in turn cross classified with each of the seven characteristics which we selected for the purposes of description and comparison, namely: Age, marital status, sex, health, ethnic origin, location and type of available housing and previous way of life.

We hope that the findings of our research group will stimulate further research in the area of our aging population and will be useful as a guide to those who are particularly concerned about the welfare of our senior citizens in connection with the latter's living arrangements.

CHAPTER II

BACKGROUND AND OTHER STUDIES

1. BACKGROUND

A review of the literature reveals an increasing awareness in Western society of community responsibility with regard to the housing of the aged. Donahue cites a number of sociological factors which have contributed to this development.¹

The first factor which serves to focus attention upon the special housing needs of older people is the change in the population structure. A significant demographic trend observed in most of the western countries during the first half of this century has been towards an increase in both the absolute number of old people and the proportionate size of this group. According to the Dominion Bureau of Statistics there were at the time of the census in 1901 271,201 persons sixty-five years of age and over living in Canada. The 1951 census disclosed that there were 1,086,273.² The total population during this period increased from 5,371,315 to 14,009,429.³ The percentage of those sixty-five years of age and

¹Wilma Donahue, "Housing and Community Services", Aging in Western Societies, ed. Ernest W. Burgess (Chicago: The University of Chicago Press, 1960), pp. 110-111.

²Canada, Dominion Bureau of Statistics, Ninth Census of Canada, 1951, (Ottawa: Queen's Printer, 1956), Table 19-1.

³Canada, Dominion Bureau of Statistics, The Canada Year Book, (Ottawa; Queen's Printer, 1956), p. 149.

over compared with the total population therefore rose from 5.07 in 1901 to 7.76 in 1951.¹

The factors affecting the change in the age structure of a population, according to Lundberg, include fertility, mortality, emigration and immigration.² The crude death rate in Canada has shown a steady decline since the beginning of the century largely as a result of medical advances. This is reflected in the increased life expectancy at birth from sixty years for men and 62.10 years for women in 1930 to 66.33 and 70.83 years respectively in 1950. The crude birth rate on the other hand showed a decline during the 1930's followed by a sharp increase during the 1940's until by 1950 it was approximately the same as in 1920.³ Migration, unfortunately, is a demographic variable more difficult to measure and available data is scarce and incomplete. In general, however, the evidence is that the effects of migration on the aging of a population are relatively unimportant as compared with the effects of declining fertility or mortality.

¹United Nations, The Aging of Populations and Its Economic and Social Implications, (New York: United Nations, 1956), No. 26.

²G. A. Lundberg, Sociology, (New York: Harper and Brothers, 1954), p. 81.

³Ernest W. Burgess, "Aging in Western Culture", Aging in Western Societies, (Chicago: The University of Chicago Press, 1960), pp. 41-43.

In Manitoba the increasing proportion of the aged has been even more apparent. The total population in 1901 was 255,000 of which 2.40% were sixty-five and over. However, in 1951, of a total population of 776,000 8.4% were sixty-five and over.¹ In 1956 when the Age and Opportunity Report was published it was estimated that one person in eleven in Greater Winnipeg was sixty-five years of age or older and that by 1961 there would be 40,000 aged persons in the metropolitan area.² This survey also revealed that the sex distribution among the aged has shifted in favor of women and that there was a definite preponderance of women who were widowed; 9,400 as against 3,500 men.³ When those who were divorced, separated or never married were included there were approximately 11,000 single women and 5,000 single men in Greater Winnipeg. This represented 60% of all the aged women and a third of the aged men.⁴ A further demographic feature noted in the Report of Proceedings of the First Manitoba Conference on Aging held in 1958 was that a high proportion of aged persons from rural areas move to the city. This movement is particularly heavy among aged females.

¹First Manitoba Conference on Aging, Report of Proceedings, (Winnipeg, Man., 1958), p. 51.

²The Welfare Council of Greater Winnipeg, Age and Opportunity, A Report on our Older Citizens by The Committee on Services for the Aged (Winnipeg, Manitoba, 1956), p. 1.

³Ibid., p. 3.

⁴Loc. cit.

A second factor which has contributed to the concern for the housing of the aged is the breakdown of the extended kinship family. The rural community of the past provided a favorable environment for the rise and persistence of this type of family structure which tended to be a socially self-sufficient unit. The effects of economic and social trends in the past hundred years, however, has been to decrease the economic function of the extended family and at the same time change the role and status of older persons. As a result the nuclear family unit, consisting of one or both parents and their unmarried children living in one household, has emerged as the dominant family pattern in the more highly industrialized and urban countries.

H. D. Sheldon reports that in the United States 72% of all persons sixty-five and over maintain their own households and only 20% live as relatives of the head of the household. In the latter instance the relationship is predominantly that of parent.¹ Of 203 aged persons in Bethnal Green, a borough of London, Townsend states that 25% lived alone in the household, 29% in married pairs, 38% with unmarried or married children and 8% with others, mostly relatives.² The Wolverhampton study, as cited by Donahue, showed that only 12%

¹Henry D. Sheldon, "Who are the Aged", Housing the Aging, ed. Wilma Donahue (Ann Arbor: University of Michigan Press, 1954), p. 9.

²Peter Townsend, The Family Life of Old People, (Glencoe, The Free Press, 1957), p. 21.

of older people live with children and of these the largest proportion is among the very old and widowed.¹

This style of life is the result of many factors, among them urbanization, greater national mobility and cultural values that emphasize independent living for the older person.

Despite this trend toward the autonomous nuclear family Townsend, in his study of Bethnal Green, found that most older people, although living apart from their children, tended to dwell in the same districts and to maintain frequent contacts.² Sussman, based upon a study made in Cleveland, likewise found that the nuclear family is not atomistic but closely integrated within a network of mutual assistance.³

At the same time there has been some relaxation in the statutory and moral demands on children for the care of indigent parents. The United Kingdom has in fact abolished legislation requiring adult children to support aging parents. The existence of the Old Age Security and Old Age Assistance programs in Canada also seems to call into question the earlier assumption of the universal and complete

¹Wilma Donahue, op. cit., p. 114.

²Peter Townsend, op. cit., p. 32.

³Marvin Sussman, "The Isolated Nuclear Family", Social Problems, Vol. VI, No. 4, pp. 333-9.

responsibility of adult children for the support of indigent parents.

A third factor influencing the development of special housing for older people is their economic status. The economic status of the present aged group has been seriously affected by two circumstances which occurred during the last half century. The first of these was the Great Depression. When the depression struck in the 1930's many of these people were at the very time of life when they might have been providing for their old age by accumulating assets. The second special feature is the increasing cost of living. Many people who did manage to accumulate assets have found the value of these have declined sharply because the price level has gone up.

These features together with the increasing practice of enforced retirement at the age of sixty-five have placed the aged in a very disadvantageous position.

The Age and Opportunity Report revealed that 47% of aged couples between the ages of sixty-five and sixty-nine had an income of less than \$2,000, 30% had an income of between \$2,000 and \$3,000 and 23% had an income of \$3,000 or more. The percentage in the lower income bracket increased with age until 81% of those eighty years of age and older were in this category.¹ This survey also disclosed that in 1954 Old Age Assistance and Old Age Security were the primary sources of income for thirty-three out of 100 elderly

¹The Welfare Council of Greater Winnipeg, op. cit., p. 18.

couples. Furthermore Old Age Assistance and Old Age Security play a much bigger role as a primary source of income for single men and single women, the figure being fifty-eight out of 100 for the former and sixty-three out of 100 for the latter.¹

The economic status of the aged naturally has serious consequences with regard to their ability to secure suitable housing. Donahue records that The Rowntree Committee study of housing of old people in seven areas in England in 1947 indicated that the aged generally lived in substandard dwellings although the aged person was probably housed no worse than the average individual of his class.² A study in Philadelphia indicated that 18,000 households with heads over sixty-five lived in housing that was dilapidated or lacking in essential sanitary facilities.³

The Report of a Housing Survey of the Central Area of Winnipeg (1955) revealed that 1,066 persons sixty-five years of age and over (out of a total population of 7,855) lived in this particular area in which there was found to be a high incidence of health and social problems. The Report stated that many of the

¹Ibid., pp. 9-11.

²Wilma Donahue, op. cit., p. 111.

³Committee on Housing for Older People, Toward Independent Living for Older People: A Report on Our Older Citizens, (Philadelphia, Penn., 1958), Appendix A., p. 2.

senior citizens have gravitated to this area because of the relatively low rents and that many of them occupy single rooms in relatively run down rooming houses.¹

A fourth factor which has drawn attention to the special housing needs of the aged is the general housing shortage. The devastation resulting from World War II presented many European countries with an acute housing shortage. In their rebuilding program many of these countries have given special recognition to the housing needs of the aged. In the past the conception of housing for older people was, for the most part, limited to public institutions which were regarded as a place of last resort. Burgess states that a major concept which has characterized postwar planning in Europe has been that of the residential cycle.² The residential cycle emphasizes the sequence of types of housing to meet the changing needs of older persons at particular stages of health and economic status in the later years. As a result there exists a wide diversity of housing for older people, such as: row houses, retirement towns, flats and apartments and independent living in bungalows. Despite this diversity of design one central criterion is dominant,

¹William Courage, Report of a Housing Survey of the Central Area of Winnipeg, (Winnipeg: City of Winnipeg Emergency Housing Department, 1955), p. 78.

²Ernest W. Burgess, op. cit., p. 23.