

# Old Age :

## HELP TO THOSE FACING ITS PROBLEMS

Miss Joyce K. Stunt

Long life was one of the blessings promised to the righteous in the Old Testament, and all through the ages the recipe for long life has been earnestly sought. Yet Moses who lived to be one hundred and twenty years old stated that if by reason of strength one lived to eighty years, that strength brought labour and sorrow. Let us not be sentimental: labour and sorrow it is! There are happy old people, many of them, and rather than seeking a recipe for longevity perhaps it would be better to discover what makes a happy old person. There is no one answer: but, if we may generalise, their past lives have contributed greatly. If they have been outward-looking, useful, interested in the world around them, in youth, their neighbours, the sick and the afflicted, the probability is that these attributes will continue to the end. In fact, 'pure religion and undefiled', as St. James puts it, is the very greatest help to the practitioner at all stages of life. We may as well recognise that, if all our past history has been self-centred, it is no easy matter—perhaps it is impossible—to re-educate ourselves in old age.

What is old age? It is not necessarily a matter of years. An eighty-year-old can be younger than one of sixty, and it is not only an attitude of mind which determines the matter. The ageing process brings about the decline in activity of various glands, the weakening of muscles and the hardening of arteries. There are special enemies of the ageing, such as arthritis and strokes. All who study old age are only too familiar with the frightful hardships bodily infirmities inflict, not only on the sufferers but on those who are responsible for their care.

'To know how to grow old is the master work of wisdom and one of the most difficult chapters in the great art of living', wrote Amiel in his *Journal*, and it is the purpose of this article to consider in detail some of the difficulties besetting ordinary old people of the present day. (Not, let it be emphatically stated, that any old person is 'ordinary' in the strict sense of the word. With an individual life-story behind him, and his own particular temperament and personality, each is unique.)

### Retirement

Let us suppose you are coming up to retirement. You are not there yet but you see its shadow distinctly on the horizon and you feel compelled to plan for it. You must not let it overtake you when you are unprepared. Is your ideal a cottage in the country, to sit back and relax and let the world roll on without you? Will this satisfy you? Even supposing you are a passionate gardener, can get around in a car, and have congenial neigh-

bours, will this be enough once the novelty of relaxing has worn off? Lack of interest and the realization that one is no longer contributing to life is a certain way of ensuring premature old age. The country (or a quiet backwater) may be the answer for you, but for many it has proved disastrous. *It is far easier to get out of life than to get back into it again.* One of the greatest tragedies of old age is not the loss of physical strength but dragging out one's days in idleness, enjoying the benefits of life but contributing nothing in return.

The age of retirement is a great challenge. You know your resources, your interests, your gifts. Only you, with the wisdom of God, can decide how best to bring forth fruit in old age. But do not at this stage think of yourself as 'old'. You are still laying up for the future. But face the future. Don't just drift!

### **Housing**

Sooner or later a time will come when you begin to think: 'I am not as young as I was, I can't do as much as I did, and I had that nasty attack of bronchitis last winter. Everyone says I should be "getting my name down on a list".' Yes, perhaps you should. But this is another very complex matter and must be studied from all angles. To begin with, do you like being where you are? Is the place too big for your present needs? Are you finding there are too many stairs? Can you afford it? And is the rent likely to go up when your lease runs out?

If you decide that a move is indicated in the not so distant future you should consider the following points. You may be able to 'get your name down' on the local housing authority's list for elderly people's flats, if you are in reasonably good health and want to stay in the district. In fact, you would be well advised to see to this soon after your retirement, as it usually takes years to get to the top of the list. But in these flats you will have to reckon on looking after yourself, doing your own shopping etc. and this may necessitate another move at a later date. Very often there are wardens or caretakers living on the premises, but they cannot nurse or fetch and carry for you.

There are other flats, or flatlets, run by borough councils and benevolent societies and religious bodies, but the same applies and you must make arrangements in good time.

Various benevolent societies run excellent houses where you can furnish your own bed-sitter and do some of your own cooking, but these again will have long waiting lists and many rules governing eligibility: e.g. your age, sex, profession or trade. As they are subsidised your income will have to be below a certain level. In most of these places you are not likely to be accepted for the waiting list if you are over eighty years of age, and usually you will have to be able to manage stairs and stand firmly on your own two feet. If you decide that this is the sort of place where you would like to be then you should apply well before you need to get settled.

### **Rooms**

'I'll find myself a room and cater for myself'. This is the cry of many desperate elderly people forced to make a change. It sounds like the

answer but it rarely is. In the South of England, at any rate, and certainly in London, landlords are a dying race even for businessmen and students. They go out to work instead and don't want to be bothered with house-keeping; and, to put it bluntly, they don't want to be bothered either with people who are at home all day. (More than one elderly person has gone out systematically after breakfast five days a week to sit in the park or library so that his landlady should think he was still at work.) There is something to be said for the landlords' attitude, unkind though it may seem. If a landlady takes in elderly people she may well find she is left 'holding the baby', having to give care and attention, knowing very well that she is unlikely to get them into hospital and that there are long waiting lists for local authority Homes.

## **Hotels**

If you are in good health, do not want to be 'mothered', nor feel the need for constant companionship, why not consider a hotel? It is true that many hotels, besides being very expensive, will not take elderly people permanently, for the same reasons as the landlords. But some do, and there are comfortable reasonably priced hotels on the South Coast, for instance, where many old and elderly people have lived happily for years, some well on into their nineties. But this point must be made clear, in quite a few hotels it is necessary to move out for the summer months to make room for the holiday crowds. Is this such a hardship? It is possible to be looking round during the winter for some pleasant little hotel in a less popular area where holiday visitors are not catered for. And a change once a year is not such a bad thing.

## **Homes**

Now supposing you are not able to get a flatlet of any kind and do not feel you would like the impersonal atmosphere of a hotel, perhaps you would consider a Home. There are virtually three kinds of Home:

- (a) those run by the County Councils or local authorities,
- (b) voluntary Homes run by benevolent societies, and subsidised,
- (c) private Homes.

For the County Council Homes you would have to apply to the local Welfare Officer who would assess whether you would be suitable for one of the large 'Institutions', or one of the smaller (and usually very nice) up-to-date Homes, having maybe forty to sixty residents. But you would have to face up to the probability of sharing a room with perhaps two or three. In the large Homes, which are founded on the old workhouses, there is dormitory accommodation.

It may be necessary to share a room in the Voluntary Homes, though you might graduate to a single room in time, and in these Voluntary Homes, which are subsidised by benevolent societies or religious bodies, your income will be taken into consideration and you may well be refused if it is too high. Unfortunately there are comparatively few which cater for men.

For the people who have money to spend, there are the private Rest Homes. These are business concerns run for profit, but if properly run (which admittedly is a large IF) are none the worse for that—provided you can afford them over a long period. At the time of writing they are *from* about 9 gns. to 20 or 25 guineas per week and you would not be likely to find a single room for less than 12 to 14 guineas per week. It is not usually possible to furnish your own room in a private Rest Home. These prices seem high and indeed it is a great deal to pay over a long period, but when you consider the present cost of living—rent, food, heating, staff wages, repairs—they are not as ‘wicked’ as people like to think; especially as, unlike hotels, they expect to provide a certain amount of care and attention. Some private Homes give a very great deal of care to the elderly and infirm but they are not supposed to *nurse*.

Be careful about a private Home. When you are trying to assess it take a long, long look at the Matron and as far as you are able sniff out the atmosphere of the place. Be more concerned with whether there is a happy ‘feel’ about it, rather than whether it looks smart and there is no fluff under the bed.

### **Living with relatives**

Well—don’t! *Unless you are absolutely sure you can make a success of it!* It may work. But it may not. And it is far better to be friends apart than enemies together. How many marriages have been broken or strained to breaking point by friction brought about by the incompatible temperaments of in-laws, even where there is the best will in the world to get on together. Bear in mind too that you will have to live under the same roof with (in your view) uncontrolled small children or pop-loving teenagers. Having stressed the difficulties, however, there are occasions when it is the happiest arrangement; when, for instance, there is a ‘granny house’, or a room large enough, in which you can live to some extent apart and have a measure of independence. Experience has proved that it is rarely wise to attempt to live for three months with each member of the family in turn.

If you have a single or widowed daughter, it is more than likely that, accommodation permitting, she will want to have you living with her. In many instances this arrangement has worked happily on both sides, but today the daughter will no doubt have to work, and if so you cannot expect to have her undivided attention when she is at home. She must have some life of her own, friends in, evenings out, holidays, and leisure for her own pursuits.

It will have been noticed that so far nothing has been said about elderly married couples, the reason being that usually, though by no means always, while there are two together life is more easily coped with. The difficulty comes when one of the two becomes either ill or infirm or mentally confused, and then domiciliary helps come in useful. Sad to say, if the time comes when it seems necessary to give up the home where the

two of you have lived for years, there are comparatively few places, apart from flats, where a couple can live together. Sometimes, after long waiting, a double room can be found in a County Council Home—and then only if no nursing is required and there is no mental confusion. Some benevolent societies and private Rest Homes do take married couples, but the difficulty is finding two vacancies at once.

### **Illness and infirmity** (advice to relatives)

Illness and infirmity are without doubt a problem to the sufferers themselves, but in the majority of cases the chief burden falls on the relatives.

Old people often say (and honestly think they have settled their future satisfactorily), 'I shall go on as I am and when I am ill I shall go to hospital. I was very happy in Bart's . . . (or Thomas's—or the Westminster—)'. That is all very well, but the fact must be faced that even if the elderly patient is lucky enough to get into one of the big teaching hospitals he or she will not be able to stay there indefinitely, 'blocking a bed'. Directly the acute stage of the illness is over, in any general hospital, the doctors will be on to the medical social workers, and the m.s.w.'s will be on to you, the relatives, to make arrangements for the future. If more care and attention is needed than can be given at home or undertaken by the relatives then a geriatric unit may be the solution—if there is a vacant bed. If the patient is up and about but needs general care and help with dressing etc. his name may be put on the waiting list for a County Council Home. There are private Nursing Homes but we will consider these in a minute.

#### *(a) Domiciliary care*

If the patient goes home, or to your home, arrangements can be made, either through the doctor or the medical social worker, for the district nurse to attend regularly, and/or a home help. Or, of course, you yourself can arrange for a trained nurse through one of the nursing agencies. But trained nurses are vastly expensive. You might be fortunate enough to obtain the services of an unqualified kindly person to help you, but you would be one of the favoured few if you did so. People do not want that kind of job these days, and, sad to say, if they do they are rarely the kind of person you are looking for! Some districts are running a Good Neighbour service and you could enquire about this at your local Town Hall or Citizens' Advice Bureau. A good neighbour, even if not from an agency, who has already proved helpful, and will accept payment to pop in and out, can wonderfully ease a difficult situation. But a *business arrangement* is a good idea. People cannot keep up voluntary help indefinitely.

#### *(b) Private nursing homes*

A good private nursing home is not likely to have an immediate vacancy, and it is a long arduous job finding the right one at the time you want it. They are also very expensive owing to the cost of adequate nursing staff. You cannot judge a nursing home by its charges, however. It is only too

easy to pay high prices for loneliness, neglect and sheer misery. A simple, clean, warm little place, even with four or five in a room, may give better nursing care than a stylish expensive place. As with a Rest Home, look hard at the Matron! And try to judge, not only her attitude to the patients, but the patients' attitude to her and the nurses: the Matron and staff may play up to you when you call, but the patients certainly will not! It is only fair to bear in mind, though, that nursing homes for the chronic sick cannot in the nature of things always be very happy or cheerful places.

As to fees, the Ministry of Health definitely will not contribute a penny, even though the patient needs nursing and should be in hospital. The National Assistance Board can only contribute towards *maintenance*, not to the cost of nursing, and then only if the patient's income is below a certain level. But, mercifully, there are Benevolent Funds (often related to a particular profession or trade) which are able to help financially in certain circumstances. Some benevolent societies have their own nursing homes, but they will certainly have long waiting lists.

You find this depressing . . . it is, and it is no use disguising the fact. The National Health Service leaves much to be desired in the care of the chronic sick and elderly infirm.

Helpful advice on the varied and acute problems facing the elderly can very often be obtained from the following sources: Your local Welfare Officer, the local Old People's Welfare Committee, the Citizens' Advice Bureau. The Elderly Invalids' Fund (don't be misled by its name) can give you specialised advice about Homes and Nursing Homes of all kinds and will advise about possible financial help. Their address is: 34 King Street, London, E.C.2. Tel. MONarch 1778.

From your local reference library you should be able to obtain *The Annual Charities Digest*, published by the Family Welfare Association. The sections on Old People (Welfare and Homes) and Professional and Trade Benevolent Funds will be specially relevant.