Personal Health

How to Age Well and Stay in Your Home



By Jane E. Brody

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Barbara Ehrenreich, popular author and self-described mythbuster, has written about how, having reached her mid-70s, she has lived long enough and now forgoes regular medical exams. And Dr. Ezekiel Emanuel, a 60-year-old oncologist and bioethicist, argues that we might all be better off, himself included, if he dies at 75. But many who have reached that age — yours truly included — may prefer to think our lives are but three-quarters over.

We may hope to see grandchildren graduate from college, then perhaps marry and have families of their own. We may have projects to fulfill and a "bucket list" of places to visit. And we'd like to continue to live independently — albeit with hired help on occasion for overly challenging tasks — as long as possible.

Which raises the inevitable question: What will it take to age well *in place*, in the surroundings we've long cherished that bring us physical, social and emotional comfort? What adaptations are

needed to assure our safety and comfort and relieve our children's legitimate concerns for our welfare?

Of course, aging in place is not for everyone. Some seniors may prefer to leave the dwelling long shared with a now-gone partner. Some may want the security of knowing that physical and medical assistance is but a bell-ring away. Others may simply be fed up with having to care for a home. But for those of us who relish the familiarity of the status quo and perhaps cannot afford the \$50,000 a year or more that assisted living would cost, our current homes may require some adjustments to postpone — and perhaps obviate — any need to move to safer if not more pleasurable dwellings.

Much has been written by organizations like AARP, and many volunteer and nonprofit services now exist, to help people like me age in place. But too often, the needed adaptations don't happen until there's an accident that may shorten or even end the life in question. Meanwhile, friends and relatives fret, wheedle and cajole — often to no avail — to get their aging loved ones to adopt important modifications to make their homes safer.

I recall how upset I was with a dear friend, then in her early 80s and 14 years my senior, who refused to replace, secure or remove throw rugs in her kitchen and hallway that were a serious trip hazard even for me.

So, for those of you with similar concerns about aging family members and friends, I recommend a very helpful, comprehensive yet not overwhelming book, "Age in Place: A Guide to Modifying, Organizing, and Decluttering Mom and Dad's Home," by Lynda G. Shrager, an occupational therapist for the last 37 years who has worked with seniors in their homes for more than 13 years. Ms. Shrager has good reasons to believe that addressing the challenges of independent living can help keep seniors safe and their kids sane.

"It's cheaper to stay in your home, even if you have to make some renovations and get an aide a few days a week to help," Ms. Shrager said in an interview. "It's money well spent and a lot cheaper than assisted living. But it's important not to wait until there's a crisis — a parent falls and breaks her hip."

She knows that the most common response of aging parents to their children's concerns is, "I'm fine" when they insist, "You're not fine." She's found that things usually can work out if the parties are willing to meet in the middle. "Spend a few days in the house with your parents, watch how they get around and identify changes that can make things safer and easier," Ms. Shrager suggests. "It's a win-win situation to make the home safe and parents can stay there. Then everyone's happy."

Her book navigates the aging person's dwelling room by room, starting with how the home is entered and ending with the basement, and for each offers many tips on issues that often put seniors at risk and how to orchestrate the needed adjustments.

Ms. Shrager, who lives in Slingerlands, N.Y., outside of Albany, is well aware of weather-related hazards like snow and ice, which may make it difficult to pick up the mail or get to the street for

a ride. The entryway, for example, may need a resurfaced path to reduce trip hazards, improved lighting, railings on the stairs, or a ramp and wider doorway for a wheelchair.

Once inside, is the furniture designed and situated to accommodate someone with mobility issues? Identify trip hazards like wires on the floor or furniture legs that protrude, even pets with a habit of lying on the stairs or in the middle of the floor. Get rid of items long unused, piles of magazines and other forms of clutter, a problem I desperately need to tackle myself. Clutter collects dust, creates stress, and takes up space better used, say, to place a phone or a hot pot.

I plan to use Ms. Shrager's approach: "Categorize items into five groups: (1) keep, (2) give away, (3) sell or garage sale potential, (4) charitable donations, and of course (5) the all-important throwaway pile." There is no "maybe" pile, no postponing a decision for any item. To avoid feeling overwhelmed by this task, tackle it piecemeal, a room, closet, shelf, drawer at a time.

Kitchens are a special challenge for seniors with physical issues. When mine was built 50 years ago, I was nearly three inches taller and my husband (now deceased) was a foot taller than I. We wisely had cabinets built with pullout drawers. I store most-used items on lower shelves, but now reaching even the bottom shelf of some cabinets is a challenge for me. I often use a grabber, but sometimes I need a stool. Ms. Shrager suggests one with wide steps and treads and perhaps even a safety bar handrail. "Avoid folding stools that have the potential to collapse," she warns.

She also suggests that cooking in a toaster oven or microwave can be a lot safer than using the stove for many seniors.

The bathroom, however, is probably the most dangerous room in the home. Here, safety changes like installing grab bars and easy access in and out of the tub or shower are critical. Grab bars don't have to look institutional; many brick-and-mortar and online stores sell attractive ones.

You get the idea. "Don't avoid the conversation," Ms. Shrager urges. "Tell Mom, 'We're really concerned. Please let's talk about it. We want this to work so you can live your life and be safe and we can stop worrying.""