

**Bâtir un nouveau nid :  
l'expérience des femmes qui aménagent dans  
une maison à logements pour personnes âgées**

**Suzanne M. Dupuis-Blanchard**

Bien que l'expérience du relogement ait fait l'objet de recherches depuis 30 ans, peu d'études se sont penchées sur l'expérience d'emménagement dans un lieu de logement collectif pour aînés. Cette étude qualitative fondée sur une théorie à base empirique a pour objectif de décrire les expériences que vivent les femmes qui aménagent dans une maison à logements pour personnes âgées et les facteurs qui influencent l'expérience de relogement. Pour les 11 femmes interviewées, la principale problématique avec laquelle elles doivent composer dans le processus de relogement est celle du rétablissement du soi – un défi imposé par les changements physiques et psychosociaux inhérents à la reconstruction d'un espace de vie soutenant et esthétiquement agréable, et le maintien d'un sentiment de bien-être. Dans le cadre de l'étude, un processus social de base a été identifié, celui de bâtir un nouveau nid. Il s'agit d'un processus non linéaire qui comporte trois phases. Les résultats issus de cette recherche offrent de nouvelles pistes de réflexions portant sur un aspect du relogement rarement exploré par la recherche en sciences infirmières.

Mots clés : relogement, logement

# Building a New Nest: The Experience of Women Relocating to a Seniors-Designated Apartment Building

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Although relocation has been a subject of research for the last 30 years, few studies have described the experience of relocating to congregated housing for the elderly. The purpose of this qualitative grounded theory study was to describe women's experiences of relocating to an apartment building for seniors and the factors that influence relocation. The 11 women interviewed identified the central issue in relocation as *re-establishing the self*: the physical and psychosocial changes entailed in constructing a supportive and aesthetically pleasing living space while maintaining a sense of well-being. The basic social process that emerged was *building a new nest*, a non-linear process comprising 3 phases. The findings offer new insights into an aspect of relocation that is rarely explored in nursing research.

Keywords: Relocation, transition, older women, housing, community living

## Introduction

The word *home* is symbolic of family, warmth, love, and safety (Wait & Hughes, 1999). Home is a place where we gather to celebrate life events such as birthdays, anniversaries, or the arrival of a new baby in the family. It is the locus of critical social roles such as spouse, parent, and grandparent and also neighbour and community member (Wait & Hughes). The nostalgic associations of home with family life are important to elderly persons (Dupuis & Thorns, 1996). The meaning of home is a combination of the physical building, family, affection, and dwelling in time and space. Home also includes everything in the dwelling and immediately surrounding it (Swenson, 1998). For every individual, the concept of home has a very personal meaning that encompasses many feelings.

Although the choice to move from one's home in old age may be motivated by a crisis, physical decline, or simply a desire to live in a smaller dwelling that requires less maintenance (Glassman, 1998), the transition is not usually associated with positive feelings or celebration (Silver, 1998). In fact, relocation in old age is often considered a crisis by the senior as well as by family and friends (Kao, Travis, & Acton, 2004;

Oleson & Shadick, 1993; Tracy & DeYoung, 2004). Since approximately 30% of adults over the age of 65 will change residences in the next 5 years (Croghan, 1993) and only 7% of all seniors live in institutions (Statistics Canada, 2005), it is predicted that apartments for those 65 or over will become a popular alternative to the family home for Canadian seniors (National Advisory Council on Aging, 1999; Statistics Canada). Statistics Canada reports that 29% of all Canadian seniors reside in apartments and that by the age of 85 the figure jumps to 41%.

The purpose of this study was to describe the experiences of older women in relocating from the family home to a seniors-designated apartment. The research questions were: *What is the process for older women relocating to a seniors-designated apartment? What are the factors influencing the relocation process?*

### Literature Review

Relocation is a life transition that occurs frequently among seniors (Armer, 1996). In fact, older adults reveal two peak periods of relocation: at retirement, and in later life, especially during widowhood (Davidhizar & Dowd, 1997). Relocation in old age can be very stressful and even harmful, particularly if preceded by another transition such as the death of a spouse, retirement, or loss of the ability to care for oneself or to maintain the family home (Armer, 1993; Cotter, Meyer, & Roberts, 1998). Following relocation to a seniors-designated apartment, elderly persons tend either to adapt fairly quickly or to socially isolate themselves. Relocation can, therefore, affect the well-being of an elderly person, especially if no adequate support system is in place (Armer, 1996; Lawrence & Schiller Schigelone, 2002; Nay, 1995; Peace, Holland, & Kellaher, 2005).

Relocation is not a new concept. It has been the subject of research for the last 30 years. Previous studies have primarily concentrated on outcomes rather than the process of relocation or the meaning of relocation for the older adult (Nay, 1995). They have also focused on relocation to a nursing home. There has been little research on relocation to a seniors-designated apartment.

Relocation is often viewed as stressful for older adults (Armer, 1993). Elderly persons seem to be particularly affected by changes in physical location, in daily routines, and in social support (Lee, 1999). The loss of home and possessions can cause them to experience feelings of insecurity and loss of control over their lives, to feel cut off from their memories, and perhaps even to lose their sense of identity (Morgan, Reed, & Palmer, 1997). This response to relocation results from seniors' tendency to become attached to their environment — to places, animals,

belongings, and their living space (Cookman, 1996; Tracy & DeYoung, 2004). Remaining in one's home also represents continued independence and a denial of the negative changes that accompany advancing age.

Research on relocation to a nursing home has revealed that the experience can result in feelings of loss, a devaluing of self, or sensing that one is a burden (Nay, 1995) and that it can produce a range of emotional reactions, including fear and a decline in cognitive status and affect (Cotter, Meyer, & Roberts, 1998; Krichbaum et al., 1999; Lee, 1999). Iwasiw, Goldenberg, MacMaster, McCuthcheon, and Bol (1996) investigated the perceptions of nursing home residents during their first 2 weeks in the facility. The participants identified three conditions as important to relocation: their degree of involvement in planning for the move, the meaning attached to the experience, and their emotional state.

Iwasiw et al. (1996) identify four categories of response to relocation to a nursing home: emotional reaction, transition activities, reflection on the situation, and connection with a personal philosophy. Wilson (1997) describes relocation to a nursing home as comprising three phases: the overwhelmed phase, the adjustment phase, and the initial acceptance phase. Though admitting that the sample was notably homogeneous, Wilson reports that, for the sake of their families, participants tried to hide their feelings and maintain a façade of normality by not assuming the devalued role of nursing home resident.

While relocation has been characterized as a significant life event, not all research on nursing home relocation supports negative outcomes. A descriptive study by Holzapfel, Schoch, Dodman, and Grant (1992) with 49 nursing home residents found that the only physical change associated with relocation was in blood pressure. Similarly, Danemark, Ekström, and Bodin (1996) conclude that relocation and mortality are unrelated, while Johnson (1996) concludes that relocation has a positive relationship with mortality. A quantitative study conducted 2 decades ago also found that the mental status and functional health of nursing home residents were stable 4 days after relocation (Engle, 1985). In a study with 106 nursing home residents, no consistent evidence was found to indicate that relocation inevitably results in dependency, confusion, depression, or withdrawal (Mallick & Whipple, 2000).

Although research on the concept of relocation has produced significant findings, the literature is limited to quantitative studies investigating particular phenomena associated with the relocation experience. A number of findings are vague about the consequences of moving to a nursing home. Moreover, the findings lack clarity on the experience of older adults who relocate. Furthermore, the profiles of seniors who move to a nursing home are very different from those of seniors who move to designated housing, thus rendering the relocation process a different

experience for the two groups. In addition, more seniors move to apartments than to nursing homes. All of these factors pointed to the need for a qualitative study of the experiences of women who relocate to a seniors-designated apartment. Moreover, given the trend towards “aging-in-place” more and more seniors will remain in the community (Cannuscio, Block, & Kawachi, 2003; Cutchin, 2003; Flesner, 2004; Gitlin, 2003) and apartment buildings that cater to older adults will gain in popularity. Nurses must be kept informed about seniors’ experience of such relocation in order to promote healthy aging.

### **Method**

Grounded theory was used in this qualitative investigation of women’s experiences relocating to a seniors-designated apartment. Grounded theory was chosen because of its usefulness for understanding complex situations and human behaviours (Morse & Field, 1995). The aim of this approach is to examine the processes at play in a social setting. Grounded theory assumes that reality is multiple, subjective, and mentally constructed by the individual (Polit & Hungler, 1999). The use of existing conceptual frameworks (Hutchinson, 1993) was avoided; knowledge was obtained through narrative information and emerging interpretations grounded in the participants’ experiences (Polit & Hungler).

### ***Participants***

Because the initial sample was chosen so as to examine the phenomenon where it was found to exist (Chenitz & Swanson, 1986), the primary participants were women residing in a large seniors-designated apartment building. The building contained 300 units and was located in an urban area with easy access to a variety of support services such as in-house cafeteria, banking, a hairstylist, and public transportation.

Women aged 65 and older were recruited through a variety of strategies, including the assistance of a community health nurse, letters describing the study and inviting those interested in participating to contact the researcher, announcements on bulletin boards, and word of mouth (snowballing). All recruitment strategies were structured with a view to minimizing any feeling of coercion among potential participants.

Eight women were interviewed individually and then another three were interviewed in a focus group setting to validate the findings. Participants had to consent to be interviewed, be 65 or older (with the exception of one woman who was 62), and be able to fully recount their experiences. Most of the women were widowed. The women had been living in the building between 1 and 25 years. Because residents of a seniors-designated apartment building are considered capable of recounting

their experiences, the number of years living in the building was not a selection criterion.

### ***Data Collection and Analysis***

In grounded theory, data collection and data analysis take place concurrently. Eight women were interviewed in their apartments. The interviews lasted approximately 1 hour and were audiotaped. Guiding questions consisted of such probes as *Tell me how you came to live here. What was it like preparing to move here? How have things changed for you since you moved here? What advice would you give to other women considering a move to such an apartment building?* Neutral probes such as *Tell me more about that* and *How did that seem to you?* were used to elicit further description. Towards the end of the study, a focus group consisting of three additional women was conducted in order to confirm the findings of the analysis. The group discussion took place in a private lounge in a smaller seniors-designated apartment building.

Consistent with the constant comparative method of data analysis, whereby codes are compared for similarities and differences, the transcripts were analyzed line by line and coded according to clusters of data using the words of the participants (Morse & Field, 1995). In grounded theory, open coding, or first-level coding, reflects what was said and is then used to compare findings through constant comparison (Chenitz & Swanson, 1986). This comparison enabled the discovery of similarities and differences in the data. Continued data collection was guided by the theory or by the process resulting from the use of constant comparison and as the researcher generated informal hypotheses about themes and their relationships (Chenitz & Swanson).

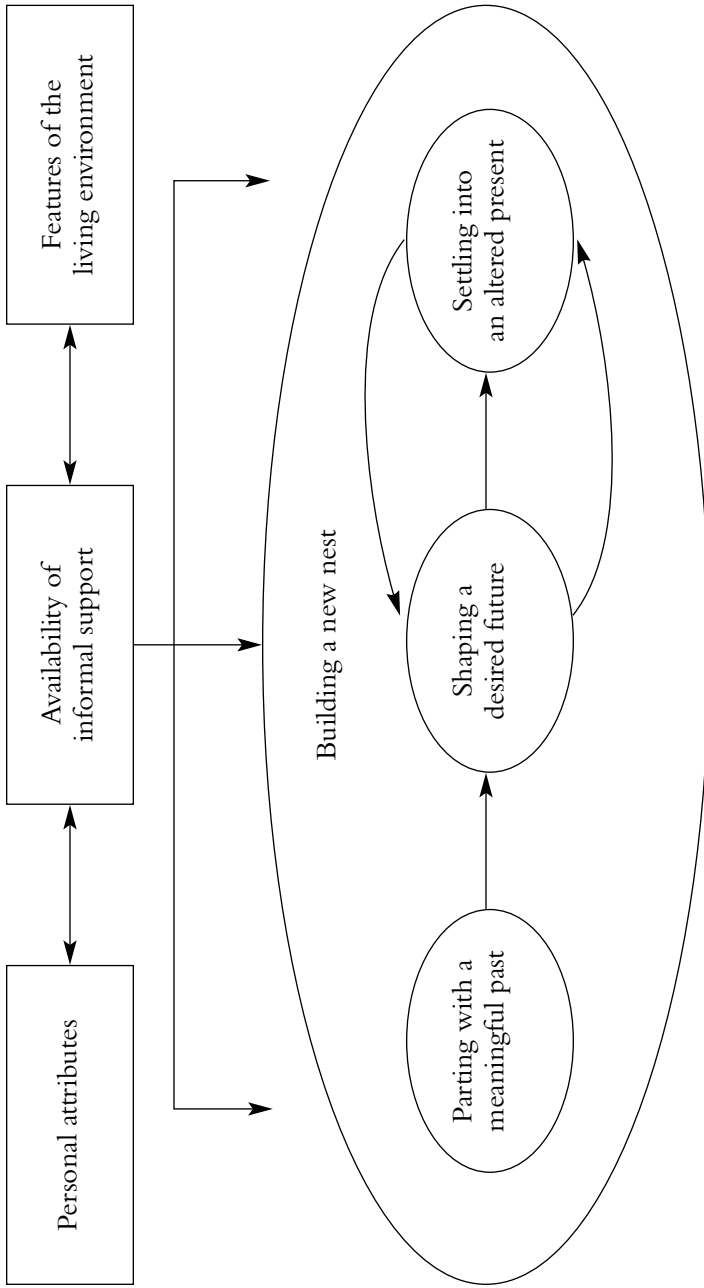
As analysis progressed, codes were categorized under themes (Chenitz & Swanson, 1986). These themes explained a larger process that became a construct for the social process, as demonstrated by the following excerpt:

*In a sentimental way, it was a bigger thing [to give up cherished memories], and physically to move, to empty a house you lived in for 20 years. It was the emotional ups and downs we had, and all the happiness, and so that was a heartbreak and you leave a bit of yourself there. It's only a structure, but what we did in those walls meant a lot to me.*

This excerpt was first coded as *leaving oneself behind*, which then became the common theme of *weaning* and the construct of *parting with a meaningful past*. Data collection continued until no new concepts emerged (saturation of categories).

The participants described the experience of relocation. However, because data collection was guided by the emerging theory, theoretical

Figure 1 *The Process of Building a New Nest*



sampling — a type of sampling that produces the full range of variation in the phenomenon under study — was needed in order to fully examine the relationships among data. Evidence that certain older women may experience a very different type of relocation was emerging. Therefore, residents of a smaller urban seniors-designated apartment building and women with chronic conditions, particularly hearing or visual impairments, were sought for the purpose of explaining certain variations in the process.

The final phase of data analysis entailed the identification of a core explanatory construct, *building a new nest*, a long-term process encompassing various conditions. Throughout data collection and analysis, field-notes and memos were written in order to capture ideas and recurrent themes (Chenitz & Swanson, 1986). Rigour was ensured by following Glaser's (1978) four criteria: the construct must be memorable (it must have "grab"), be reflective of the data, be descriptive, and be modifiable. In addition, the use of a focus group served as a means of "member checking," a technique for validating the researcher's interpretations of the data (Sandelowski, 1993). Members of the focus group also confirmed that the theory had "grab": "Being in an altered present is truly how I felt."

## **Findings**

The process of leaving the family home was a difficult one for the participants. It reflected the loss of memories and sense of belonging. In addition, upon relocating to a new and unfamiliar environment, the women were often faced with a lack of support and the need to build a new community:

*I lived over here on [name of street] and I knew all my neighbours, and while we didn't run back and forth all the time, there was a friendliness there... When I started looking for another place...I ended up where I didn't know anybody from that area and it got very lonely.*

For the women, relocating was mainly a process of *re-establishing the self*, both physically and psychosocially. They responded to this threat to their sense of well-being by *building a new nest* (Figure 1), a social process that was experienced by all of the participants.

### ***Building a New Nest***

The grounded theory method enabled the researcher to explore the process of relocation. Labelled *building a new nest*, this was a non-linear process consisting of three phases, as described by the participants: *parting with a meaningful past*, *shaping a desired future*, and *settling into an altered present*.



**Phase 1: Parting from a meaningful past** represented the women's gradual decision to leave the family home and the actions, both physical and psychosocial, necessary to relocate.

This phase began when a combination of factors resulted in difficulty maintaining the family home. The women described an increasing awareness of their loss of self-reliance, often due to widowhood, declining health, and increasing loneliness and sense of isolation. Accompanying this awareness was a gradual acceptance of the need to relocate.

While differing in length for each woman, this initial phase of *building a new nest* was gradual, as the women attempted to assert their independence and cope with household maintenance tasks. Only over time did they begin to accept the fact that their family home was no longer appropriate for their needs.

Having accepted the need to relocate, the women decided to seek housing in a seniors-designated apartment building because of their loneliness, isolation, and lack of social interaction. The decision was the logical outcome of a desire for more social interaction, an increasing sense of security, and a desire to remain independent. The women described the decision as a solution to the problems they encountered by remaining in the family home and the sense of relief they experienced once the decision was made. Thus they embarked on the processes of *weaning from the old home* and *locating a desirable new home*.

*Weaning from the old home* began with the decision to relocate. It included the physical tasks of disposing of personal belongings and putting the home up for sale and the psychosocial tasks of letting go of cherished memories and preparing to move forward. One woman described the process well:

*I had a lot of things in bags that I didn't know what to do with, and I had a friend who delivers things to poor families, so I'd say to [daughter], "This bag is for [friend] and this one is for a garage sale..." I'd just lie on the bed crying and tell her what to do.*

Essential to *parting with a meaningful past* was *locating a desirable new home*, a place where the woman would be content and where independence would be promoted. *Locating a desirable home* entailed multiple visits to apartment buildings and/or putting one's name on the wait list of an apartment building. One woman reflected on her experience:

*This was a very appealing place but it's not easy to get in here. You have to have your name on the wait list quite a long time, and you have to be interviewed and they have to screen you. But it's like everything else: If you don't bug them, they don't hear from you. You have to keep on calling and you have to sell yourself... And so I did... It took 2 years.*

Due to the frequently long wait list for seniors-designated apartments, waiting for a unit to become available was difficult. Some of the women described it as being “in limbo.” The women had to relocate to temporary housing during this period, and some did not make living arrangements before putting the family home on the market.

**Phase 2: *Shaping a desired future*** took place when the women moved into a temporary apartment while waiting for a unit to become available in the chosen building. Interestingly, all of the participants experienced this temporary living arrangement. *Shaping a desired future* necessitated both physical and psychosocial actions in response to the challenge of *re-establishing the self*.

This second phase began when the woman sold the family home and, because of the wait list for the desired seniors-designated building, moved to a regular apartment building. The women’s stay there varied from a few months to 5 years.

Throughout their stay in the temporary apartment, the women waited impatiently for a unit to become available in the chosen building. Since they had no idea when the second relocation would take place, the women found *shaping a desired future* to be the most unsettling phase in the process of *building a new nest*.

While accepting the loneliness and lack of social contact, the women kept in touch with their old friends. They also made frequent inquiries to accelerate the process of moving into the desired building. The loneliness, lack of services, and dearth of social contacts were motivating factors for them to continue the process of *building a new nest*. The actions inherent in *shaping a desired future* were *reconciling in-between arrangements*, *maintaining past social activities*, and *working to get in*.

The women described *reconciling in-between arrangements* as adapting to the temporary situation while waiting for an apartment to become available. The time frame for this action varied, with some participants waiting as long as 5 years. *Reconciling in-between arrangements* necessitated the renting of an apartment in a regular building whose residents were at all stages of social development and were usually younger, noisier, and employed. These buildings provided scant opportunity for socializing and the women quickly realized that the setting was inappropriate for them:

*I felt I was alone in those apartments. You just go in, you go out, there’s no [contact]. You have to make your own entertainment and your own activities. I felt very isolated, just the four walls.*

The realization that the temporary arrangements were less than desirable had a psychosocial effect on the women. They became even more determined to move into a seniors-designated building.

*Shaping a desired future* also involved continued socialization with friends and groups from the original community. This *maintaining past social activities* was a result of scarce opportunities to socialize in the temporary situation but was dependent on the women's maintaining social contacts in the original community.

The last action of *shaping a desired future* was *working to get in*: the woman's efforts to accelerate the process of securing an apartment in the chosen building. Because waiting for an apartment could take up to 5 years, those women who were unhappy with their temporary arrangements worked particularly hard to get into a seniors-designated building:

*It's like everything else: If you don't bug them, they don't hear from you. You have to keep on calling.... It's this thing you need [the apartment], and so you have to sell yourself. I didn't have any contacts and I didn't get in here because somebody spoke for me. ...I would come every month and I would sit there, the next time and the next time, and then they figured it was time.*

**Phase 3: *Settling into an altered present*** took place when the woman finally moved into the desired building and began adjusting to her new environment. Physically, the woman was setting up her apartment and adapting her possessions to a smaller space. Psychosocially, she was joining in, socializing with other seniors in the building while also maintaining her increasingly limited external social connections. In this third phase, the woman went back and forth between the two concurrent actions of *setting up* and *joining in*. The outcome of the two actions was appreciation: contentment in the new home.

*Setting up* refers to the physical part of moving, which included becoming accustomed to a new environment, a smaller living space, and a different lifestyle. Once the women received notification that an apartment was available, they moved quickly, often to avoid having to pay rent for two apartments. The move took place within a month and sometimes even within a few days, especially if the notification was received towards the end of the month.

As soon as the woman moved her belongings into the new apartment, she began *setting up*. Boxes were unpacked and personal possessions put in place. Participants often realized that they had too much furniture for the new apartment and had to divest themselves of more belongings. After a while, some women had a desire to further personalize their apartments, to create a more individualized home.

The second part of *settling into an altered present* was *joining in*, or making an effort to establish a sense of belonging by socializing with other seniors. *Joining in* occurred concomitantly with *setting up* and was a significant part of settling into the new apartment. The women were

emphatic about their need for social contact. The action of *joining in* explicitly demonstrated their participation in organized activities such as card games, bingo, or dances. During this action the women were challenged by such factors as a hearing or visual impairment. All the participants managed, at some level, to join in. The women also socialized by sitting in the building's common lounge and talking with other tenants. Not all participants, however, felt welcome:

*When I first came in here I thought there was a little clique, and I guess it was me more than they. And I thought I'd never get into that inner circle. But gradually...I think now I'm one of them, but it took a while.*

The result of *setting up* and *joining in* was *appreciating*: feeling fortunate, happy, and at peace with one's living situation. *Appreciating* was a direct result of the woman's successful adjustment to her new environment and *re-establishing of the self*. *Appreciating* was gradually developed by the woman, who eventually referred to her new apartment as home. Home had a different meaning for each woman but was usually associated with a place where she felt comfortable and secure. While the process of *building a new nest* seemed to resolve any difficulties encountered with *re-establishing the self*, the women clung to the memory of their former home: "I wouldn't want to have to do it all over again. No, I'd still want my own home. But that's not possible so you just do with what you have."

### **Factors Contributing to Variation**

While *building a new nest* was a shared process, variation was evident in the influence of three major conditions: *personal attributes*, *informal support*, and *features of the living environment*.

**Personal attributes** were distinctive, individual characteristics identified as influencing the process of *building a new nest*. They included a feeling of anxiety, a spirit of self-determination, ease with group membership, physical ability (including health status, vision, and hearing), and previous relocation experience.

Ease with group membership, specifically the ability to participate in organized social activities, was often a result of lifelong patterns of behaviour. Some of the women welcomed opportunities for new social activities while others were uncomfortable taking part in organized activities. One participant said:

*I went to the social clubs, the seniors, and unfortunately I had never played cards. I don't know why. My husband and I never played cards and our friends didn't either, and then try in your sixties to learn to play cards with people who have been playing all their lives — they got so impatient.*

*I tried different groups and came home with such a headache that I thought: It's not worth it.*

*Previous relocation experience* was described as a life history of moves within the same community or beyond. Attachment to the memories infusing the family home and difficulty parting with cherished belongings were especially evident among women who had no *previous relocation experience*:

*Well, what made it so difficult was closing up. I had four bedrooms, and there was vacancy there...to empty a house you lived in for 20 years. It was the emotional ups and downs we had, and all the happiness, and so that was a heartbreak and you leave a bit of yourself there. It's only a structure, but what we did in those walls meant a lot to me.*

**Informal support**, the availability of encouragement and assistance from family and friends, was identified as influential in all three phases of *building a new nest*. All of the participants identified the importance of knowing that significant others were interested in their well-being and available to assist them with *building a new nest*. Women who perceived the availability of support before and during the move from the family home were likely to experience less difficulty with relocation. The main sources of support were family members, especially daughters and sons. While wishing to maintain their independence and not be a burden to their family, the women valued informal support in the form of approval and assistance. Daily telephone calls and weekly visits from family members served to ease their anxiety following the move and to confirm the family's approval of the decision to relocate.

A second source of informal support influencing the process of *building a new nest* was the presence of friends or acquaintances already residing in the building. Women who knew someone already living there had the advantage of being introduced to people and activities. These contacts constituted a built-in social network. A participant who had a friend already living in her building explained:

*She took me to hymn sing on Sunday night and she took me to the senior citizens' club and she also took me to some of the sales, and each time I went I got to know other people, and I try to participate in activities and not be an onlooker, and they always want somebody to serve food or brew coffee.*

Those women who did not have acquaintances in the building had to initiate new friendships. Depending on the woman's *ease with group membership* and her health status, this could be demanding and difficult. For example, women with hearing problems were reluctant to participate

in group activities because they could not always understand what was being said.

**Features of the living environment.** The women's physical environment was a major influence in all three phases of *building a new nest*. For example, the characteristics of the family home, typically a large single-family dwelling, greatly influenced the women's decision to relocate. Routine maintenance of a family home, including structural repairs and landscaping, can be a significant burden for an older woman. "My husband was a gardener," said one participant, "and he had a lot of fruit trees in the backyard, and I couldn't take care of them because I had no idea how to." Unable to find help with maintaining the property, and not wishing to depend on family members, the women saw relocation as the only solution: "I was going to get out of that great big monstrosity." Had the women's independence not been compromised by their environment, they likely would not have opted to relocate.

The process of *building a new nest* was also influenced by the number of tenants in the new living environment. "We get very close to each other without interfering," said one participant, "and we have a wonderful library, the bank, the post office, a cafeteria, a hair salon — it's like a village." Some women expressed a preference for a building with fewer than 75 tenants. A small number of residents was seen as promoting a sense of community and mutual concern: "If you're not feeling well, people are concerned about you. They'll have little goodies tied to your doorknob. I think I appreciate a place where you have someone around you."

## Discussion

The process that emerged from the research data, *building a new nest*, contributes to our understanding of women's experiences with relocating to a seniors-designated apartment. This study was limited by the small size of the sample (11). Moreover, the participants were a homogeneous group of English-speaking city-dwellers reporting no financial problems. Other characteristics of the sample and the environment in which the study was conducted could also be considered limitations. Specifically, the women who agreed to take part in the study may have been particularly outgoing or may have had unusual difficulties with relocation. Also, regardless of the length of time they had lived in the seniors-designated building, the participants had experienced all three phases of *building a new nest*. Despite these limitations, the results of this qualitative study enhance our understanding of relocation to a seniors-designated apartment, a common experience among older women. The findings also illu-

minate variation in the experiences of elderly women as well as variation in their psychosocial and other needs.

In particular, the process describes a preliminary model of relocation among older adults. While previous studies on relocation have focused on relocation to an institution, the present study describes the experiences of 11 independent women. The findings add to our understanding of the emotional and physical process of relocating seldom discussed in the literature. In particular, the temporary housing phase (*shaping a desired future*) is not covered in the literature. Also, this study provides some insight into the early days after relocation, a period that is not explored elsewhere. Theoretically, this work explains some of the variations in the concept of relocation. Practically, it provides guidelines for supporting seniors undergoing this type of transition.

The participants in the study relocated as a result of the death of a spouse or loss of the ability to maintain a family home (Armer, 1993; Cotter et al., 1998). Consistent with the results reported by Morgan et al. (1997), the women felt as if they were leaving memories behind. The present findings do not confirm the cognitive and physical decline found in studies on relocation to long-term-care institutions (Cotter et al.; Krichbaum et al., 1999; Nay, 1995). A qualitative study by Wilson (1997) found that relocation to a nursing home occurred in three phases — the overwhelmed phase, the adjustment phase, and the initial acceptance phase. The present study describes in more detail the actions entailed in each of these phases. Moreover, the second phase identified in the present study, *shaping a desired future*, is not explored elsewhere.

Of relevance to health professionals, the findings suggest that women who are relocating to a seniors-designated apartment and who exhibit certain characteristics should be closely monitored, as they may be at high risk for difficulty *re-establishing the self*. They include women who have lived in the family home for a long time, have difficulty making friends, have a hearing or visual impairment, have a negative attitude, have a moderate or high level of anxiety, have no family in the immediate area, and are moving to a building where they have no acquaintances. Health professionals need to assess for such risks and intervene to prevent difficulties during the transition. Interventions should focus on both emotional and physical well-being.

Nurses should also familiarize themselves with the woman's perception of the relocation experience and assess her level of anxiety. A variety of therapeutic interventions are available to reduce anxiety. Since support is important throughout the process of *building a new nest*, professionals must not overlook the need for informal support when women are undergoing relocation. Professionals should assess the support networks of older women and make referrals to community agencies for those

who do not have family in the area.

Seniors tend not to plan for their future housing needs (Yesner, 1998), yet the amount of planning invested in a transition can influence the outcome (Schumacher & Meleis, 1994). As evidenced by the experience of the participants in this study, once the decision to relocate is made, other difficult decisions must also be made. These concern the disposal of belongings, the search for an apartment, and whether or how to socialize in the new environment. The findings suggest that professionals could intervene effectively by educating seniors and their families about housing options and the relocation process. This would provide a basis for seniors and their families to discuss future housing needs and facilitate decision-making when the time to relocate draws near.

Future research could focus on generalizing the findings to other populations such as elderly men and rural seniors. The experience of settling into a new environment or community could also be examined. A longitudinal study would elicit more details on each phase of the process. The concept of relocation by independent seniors needs to be further explored, especially considering the current trend towards aging-in-place.

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