

## **Social Support as Driver for Positive Aging and Warm Solidarity within the Context of Intragenerational Co-Housing of Elderly Persons (extended abstract)**

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### **Introduction**

Intragenerational cohabitation (IGC) of elderly persons carries the potential to combine care, support and independence in aging. It is a form of co-housing beyond the typical family relationships, making greater use of common areas than traditional forms of living. Within a context of IGC, autonomy and privacy can be combined with the benefits of communal living and social contact.

The increasing popularity of IGC among elderly persons is in line with the discourse that is committed to positive aging, in which the elderly are viewed from their strengths, and thus not (only) from their limitations or needs. In addition, IGC can reduce the pressure on formal or institutional care. The housing form tracks together with the return to a community-centered model of care-giving. It is also seen as a part of the answer to a number of societal challenges, such as the organization of sustainable care and support for the growing group of older adults, the severe shortage of qualified personnel, the affordability of care costs, and the large group of people who fall "alone" later in life (e.g. without partner or children or with a small family or friendship network). Next to decreased mobility, the latter is also a result of the increased individualization and complexity of life courses.

Communal living has great potential from the perspective of positive aging and as a counter-discourse for ageism. The socialization of care can be approached as a reevaluation of "warm solidarity," in which help and support is provided within a person's own environment. This "warm solidarity" is linked to informal, spontaneous and voluntary provision of care, and contrasts with so-called "cold" solidarity or support orchestrated on a formal basis with government intervention. Within the context of IGC of elderly adults, fellow residents can receive "warm solidarity" from the immediate social network by providing informal care to each other.

Since IGC of elderly persons is a relatively new phenomenon in Flanders, there is little to no empirical evidence on the experiences within this new form of living. This study therefore poses the question of how elderly persons experience mutual exchange and support within a context of IGC.

### **Intragenerational cohabitation**

There are various forms of communal living, the most well-known being kangaroo living, care living, house sharing, and co-housing. There are also many different ways of organizing, ranging from a large number of housing units to small groups of two to three households. Furthermore, co-residents can be either owners, tenants or shareholders of the community in which they live. A shared characteristic is that they are all forms of communal living with a mix of private and communal spaces that encourage spontaneous encounters and exchange of support between co-residents, in various intensities. The difference with co-residence in the context of traditional residential care centers is that the latter are organized and supervised by organizations or professionals, and that, within IGC, co-residents are (joint) responsible for the organization of their household. Within this study, we collectively label the different forms of communal living as intragenerational cohabitation (IGC) of elderly persons, excluding residential care centers.

Research shows that older adults' motivations for choosing IGC are very diverse, ranging from having limited financial resources, feelings of loneliness, a lack of a sense of community, the need for a sense of solidarity, for interacting with persons who share a vision for the afterlife and for a sense of security. The most important motivation however appears to be social contact. Older adults often do not want to live completely on their own and desire to have contact with their peers. The main benefits linked to IGC are therefore increased social contact and solidarity, experiencing practical and social support, and financial and environmental benefits.

## **Social support within the context of IGC**

An important delineation when studying social support is the distinction from providing care. Hoogendijk et al. (2015) use care to refer to physical care needs, e.g. depending on others to wash and dress oneself. Support, they say, refers to psychosocial needs such as relief from stress, loneliness, etc.. Kocalevent et al. (2018) interpret support as the presence of psychosocial resources in the context of interpersonal relationships and the personal social network.

Having a social network does not necessarily mean that support is exchanged, but a diverse social network does increase the likelihood of social support (Fiori et al., 2007). Within the context of IGC, a need for instrumental support can easily be met, for example, by shopping together or by explaining technological processes, e.g. with regard to online banking. In addition, communal living facilitates social contact between fellow residents, which can contribute significantly to alleviating feelings of loneliness present among many older adults. In turn, being able to build and rely on a social network among fellow residents is an important source of emotional support. Given the positive effects of social support on both mental and physical well-being, IGC can therefore be a key to independent and happy aging.

Communal living can also contribute to a personal and social sense of security. Safety is not only about 'objective' measures (such as a fire alarm or decreasing the risk to fall) but also about the subjective feeling of being safe. Creating a sense of community, with an emphasis on positive social contacts and helping each other, creates feelings of trust, which in turn promotes a feeling of safety. Social control, as a result of a close network within the IGC community, can also strengthen a sense of security. For example, if one of the co-residents no longer comes to the joint activities for a while, this will be noticed quickly and someone will be able to quickly check whether there is a problem.

An important condition within the exchange of social support is reciprocity. An increasing group of older adults want to live in a community where people can mutually support and help each other. In IGC communities, the existence of reciprocity in terms of help and trust can create a better sense of community, which in turn can lead to happier lives. The concept of "reciprocity" is defined by Trivers (1971) as an individual who voluntarily provides something (help, time, a gift, ...) to another individual in the expectation of benefiting from it later. In other words, the people involved in this exchange are mutually dependent on each other and both come under the expectation of something in return for the service given. This is usually not done explicitly. Violating (implicitly or explicitly) reciprocity norms can lead to feelings of dependency, shame, stress or inferiority (Chandola et al., 2007). A correct assessment of reciprocity expectations is therefore essential. Second, each party must have positive feelings and opinions about the other. Third, relational solidarity matters, which can be defined as the belief that the relationship between the parties participating in the exchange of support functions as one social unit whose members share a common purpose and interest. Finally, there must be a sense of fairness in the interaction, which is reflected in equal treatment of the parties involved. Having the feeling that one can equally claim support within the IGC community is important in that regard.

## **Data and Methods**

In-depth interviews were conducted with 28 respondents between the ages of 58 and 89 who live with at least one other person over 55 (who is not their spouse or partner). Respondents were questioned using a semi-structured questionnaire on four main topics: "aging", "intragenerational communal living", "social support, reciprocity and safety", and "socialization of care". The interview guide combined a pre-determined set of open questions with the opportunity for the interviewer to further explore particular themes or responses. The interview data were processed in three steps (open, axial and selective coding) according to the principles of the Grounded Theory approach. To monitor interpretation bias, the coding process was completed in parallel by four subgroups of coders.

## **Preliminary results**

### **IGC as a (re)source of social support**

Respondents indicated that it is nice to have people around all the time. Contact with fellow residents is also a way to maintain social contact despite the loss of former daily contacts, e.g. by retirement or passing away of the spouse. Respondents regularly mentioned how much support one receives from co-residents. This support refers not only to the company of fellow residents but also to the creation of a safe space in which one can speak openly and the presence of others when they go through a hard time. This is experienced very positively by many residents, especially by the co-residents who went through a difficult period. Respondents also conversely cite that they consider it normal that the co-residents can come to them.

*"... The social contact with the people is an important aspect of cohousing here. That you really know your neighbors and that you ask questions without hesitation. In the street where we lived, we also had neighbors and we knew them, but you didn't have the kind of contact with them that we have here. Also because we deliberately arrange some things together (Tina, a 64 year old woman who has been doing IGC for 6 months)"*

Next to social contact and somebody to talk to or listen to, fellow residents report to learn from each other. Respondents tell how much they enjoy connecting with people, preferably in a spontaneous and easy way as is made possible in the context of IGC. For example, Ludo (a man of 72 who has been doing IGC for 6 months) was previously active as gardener. That makes he likes to work in the shared garden of the IGC-context where he lives and that he knows a lot about gardening. He likes to share this knowledge in the garden group of the co-housing, for example about pruning the plants in a correct way. He himself indicates that people don't have to ask for this, he just likes to teach things to others in a spontaneous way and hopes that this is the same for them.

### **Reciprocity and balance are key**

In addition to the need for support and social contacts respondents are emphasizing the need for personal space. Living in an IGC project allows a balance between the need to maintain social contacts, to live independently and to maintain sufficient feelings of privacy. A person can set boundaries for themselves and for others both physically and mentally. For example, spatial boundaries can be agreed upon, such as agreeing that a certain space is private and that others are not allowed to enter just like that:

*"We don't just go into each other's rooms. That is actually respected" (Ann, 59-year-old woman who has been doing IGC for 4 years).*

There may also be boundaries that are not so much in the physical but rather in the personal and mental sphere. Respondents cite times when they do not want to be disturbed or when they need some time to themselves. Agreements can be made around these personal boundaries so that everyone is aware to avoid misunderstandings and frustrations between residents. Fellow residents are expected to respect each other's personal boundaries in this type of situation.

*"If I feel like giving a party game or for a chat, I just say, 'Do you feel like it? Like: Mieke, would you like to play a game of Rummikub?' and then she says yes, or she says no and then we do that [or not]. If I feel like watching several episodes on TV after one, I do. [...] By the way, we have crafted door hangers [...] 'not right now', why not? And if that's hanging on the door then that's 'not right now'. We know who is up early and who likes to sleep longer. With me they are not going to come before 9am and yes that is respected too" (Nathalie, woman of 69 who has been doing IGC for 3 years)*

Next to balancing between social support and personal space, reciprocal exchange is very valuable for the respondents. *"I think by doing a favor in return of you did that for me so I do that for you. That actually goes a bit spontaneously" (Rose, 67-year old woman who has been doing IGC for 4 years).* If both parties assess the reciprocity of the relationship positively, there is a greater chance that the

exchange of support will continue in the future as the desire and need for support is fulfilled for both parties.

Important to note is that most respondents indicated that they did not explicitly think so much about their relationships in terms of "giving" and "taking," but rather expect the exchange of social support to occur organically. This 'natural' flow of support is not evident in every IGC context. If the provision of support is unbalanced, the motivation to continue providing support will decrease. Respondents indicate that it is respected that people have preferences in taking up a particular task, but that importance is attached to everyone contributing to the whole: *"Everyone may have their own things of prefer not this or prefer not that, but we support each other in keeping the whole thing straight"* (Frans, 69-year-old man who has been doing IGC for 34 years).

Respondents do report understanding for the fact that it can become more difficult for particular cohabitants to provide support themselves, for example at a very old age or in case of major disabilities. Both the need for and possibility to offer social support might evolve with age, e.g. by decreased mobility. In those situations, the expectations regarding the mutual exchange of support are often adjusted. This might challenge the organization of tasks within the IGC-context, as the expectations towards the more active inhabitants might be experienced as unbalanced. This might especially be the case in the IGC-contexts that are not explicitly designed towards the needs of elderly persons, creating more challenges and less tools or facilities to deal with physical restrictions associated with aging. In this context, respondents mention adaptations such as the installation of a walk-in shower or a lift that increase the autonomy of respondents (and hence decreases the support needed by co-residents).

*" We did things with the Herring Smokehouse to make it easier for them, such as finding out whether a lift was possible or making a handhold against the wall so that they could pull themselves up, etc. (French, 69-year-old man who has been doing IGC for 34 years)*

### **Variation in support across relationships**

Finally, respondents report differences in the type of support according to their relationship with co-residents. With co-residents with who respondents have a strong affective bond, they report a high degree of both emotional and practical support. Especially the reported degree of emotional support is much lower with persons with who they have a less close relationship. With those co-residents, the exchange of mutual support is mainly practical and often limited to concrete tasks or support on demand. On the other hand, with co-residents with who they have a close relationship, the exchange of emotional and practical support is experienced as something 'natural':

*"We have already done all kinds of things. It all happens organically, actually. You have to really see that like good friends."* (Iris, 60-year-old woman who has been doing IGC for 4 months)

### **Preliminary conclusions**

Our findings are indicating that IGC creates a natural setting for having sufficient social contact and for the exchange of social support. People meet each other organically around daily tasks and can make a contribution to the whole based on their own interests and strengths. In that regard, IGC is a driver for processes of organic mutual exchange of support or warm solidarity. IGC might also act as a catalysator for positive aging, within which older people feel they can contribute to the community from their strengths and interests, and provide help, support, and experiences to those around them.

Reciprocity and balance between privacy and support is crucial within a context of IGC. They often both occur organically but need (re)negotiation in case of changing needs or expectations. Sometimes, adaptations to the infrastructure or supplemental external help are essential, e.g. in case the exchange of support becomes unbalanced for a (group of) inhabitant(s). The latter requires more adaptation in IGC settings that were not explicitly designed around the needs of aging people.