## Program 04

## Life on Mars

The challenges for older men living in retirement accommodation

Continuing the theme of transitions from the previous program, we begin with some thoughts on what the Americans often refer to as "an encore career", be it setting up a new small business, or finding a role as a marriage celebrant or mediator. After a short exploration of some financial matters – including dealing with the inheritance expectations of offspring and raising awareness of possible financial abuse – we then take a close look at some of the realities for older men living in residential aged care communities, and how these facilities might come to a better understanding of the needs of older men.

### Interviewees

Dr John Ashfield Dr Briony Dow Dr Joanne Earl Dr Don Edgar

#### **Discussion Starter**

For some older men who have chronic health issues or a degree of frailty making independent living quite difficult, moving into a supported form of residential care may be an inevitability. For others who still have some capacity for independence, but are looking to spend less time maintaining a suburban lifestyle: mowing lawns, cleaning gutters and never ending home maintenance, the prospect of moving into a retirement village can be made to sound quite congenial; and there is no shortage of developers and retirement living companies eager to promote the message of: 'a new lease on life' and comfort available in their facilities.

Such facilities often deliver much less than they promise – particularly for men, because they are little accommodating of men's real needs, tend to operate contrary to instead of building on men's familiar lived experience, and, far from providing men with quality of life and a health promoting lifestyle, may even serve to diminish their health and wellbeing.

Seductive promises of lifestyle, men's own recognition of some of their own physical limitations, the subtle duress of 'concerned' family, and the absence of any obvious alternative, may collude in 'shoehorning' some men into environments that are as unfamiliar and uninhabitable as a desolate planet. And though some village and supported care institutions do stage some ostensibly 'blokey' activities for men, they are often tokenistic, patronising, and plain silly. Because women occupy the majority of places in such facilities, naturally they need to be catered for.

The problem is, men are rarely catered for and must accommodate themselves to a largely feminised environment – one that runs quite contrary to their needs. The fact is, men and women function and experience their lives in quite different social and cultural contexts. Work and occupational meaning, social interaction and group behaviour, leisure activities, relationship to natural and built environments, the need for privacy and confidentiality, help seeking and health care, and many other issues tend to be gender specific in their importance and character for men and women.

To ignore or not to cater for the way people have lived their lives – their lived experience, is to alienate them from what has meaning for them. Such alienation has real and negative consequences for physical and mental health.

Men need to be treated as men, and any built environment and 'devised' community (such as a retirement village or supported accommodation) should reflect a clear understanding of what men need to experience to sustain them, to give them meaning, and to keep them socially, mentally, and occupationally engaged. And whilst the reality may be that most quality places of accommodation and care for older men will be provided by private investors and companies,

and that women must equally be catered for, there is absolutely no reason why these providers can't get it right.

In fact, imagine how profitable it might turn out to be if providers created environments where men found a 'home away from home', where the facilities and lifestyle were in continuity with their needs and lived experience instead of being contrary to them.

#### Questions

- 1. Using examples of the lives of older men you know, in what ways could particular features of their lives and lived experience be catered for by an innovative retirement village or residential care facility?
- 2. What might be some of the significant incompatibilities for men who are living in residential care environments that cater for predominantly female residents?
- 3. Imagine you are contemplating moving into a retirement village or a residential care facility; what would you see as essential to you being able to live your life with dignity, quality, and meaning?

# **Project Consultant**

Dr John Ashfield