



## *Location, location, location:* **You are where you live**

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**I** have been in a women's group for years. In our 60s we talked about children, in-laws, husbands, careers. When we turned 70, we discussed when to retire and what to do in retirement. Now, in our 80s we talk about where to live. Do we move into a retirement community? Do we make our homes user-friendly and safe? Do we move closer to our children? The talk is all about location, location, location.

In his book "Outliers: The Story of Success," Malcolm Gladwell tells a story of a small town in the hills of eastern Pennsylvania where there were few heart attacks, "no suicide, no alcoholism, no drug addition, and very little crime." In a study, physician Stewart Wolf and sociologist John Bruhn compared the town, Roseto, to nearby towns with similar demographics. In Roseto, there was a "powerful, protective social structure." People shared a similar culture, talked to each other and often had three generations living under one roof. Wolf and his colleagues were convinced that the place and the culture in which you live has a powerful effect on your health and the quality of your life.

In "Shock of Gray," Ted Fishman compares Rockford, Ill., with Sarasota, Fla. In Rockford, people feel and act old when they are 50. People leave Rockford while people from everywhere come to Sarasota. "In Sarasota, the sixty-year-olds are the kids, while in Rockford, the fifty-year-olds ... are getting on."

In a March report in the business section of The New York Times, the writer compared Fairfax County, Va., where the median household income is \$107,000 with McDowell County, West Virginia, where the income is about 1/5th of that. One is a town of haves and the other of have-nots. Not unexpectedly, the life expectancy is affected: In Fairfax County, it is 82 for men and 85 for women; in McDowell County, it is 64 for men and 73 for women.

### **What do these vignettes tell us?**

They tell us that where you live makes an enormous difference in your life. If you live in a Boston suburb or in Sarasota, you might be happier than if you live in Rockford. If you live in a retirement community that is filled with activities rather than in a single family home alone, you might be happier. I suggest changing our newest mantra of "aging in place" to that of "age in the location that will promote fun, friends and well-being."

### **To that end, here are some tips to help:**

**1. Evaluate your resources.** The question becomes: How do you make the decision about where to live? I return to the Transition Model, which provides guidelines for evaluating any transition. For example: If you are debating whether to age in place or move to a continuing care community, look at your resources for coping with either scenario. Your potential resources include your "Situation," your "Supports," your "Self," and your coping "Strategies"



Nancy K. Schlossberg Photo by Rod Millington

— what I call your 4 S's. What is your Situation in terms of health and/or finances? Are you able to take care of the matters of daily living? Do you need assistance? Which setting would help the most? Ask yourself in which setting would you have the most Support?

## 2. Project the future.

Identify a neutral professional or professionals to help you think through your options. A good person to use for this is your financial adviser. One couple consulted their adviser about possibly downsizing from a large home to a retirement community. The financial planner ran the numbers, which showed them when they would outlive their income with each scenario and the difference in the cost of each scenario. Then they consulted a transition company, which helps individuals figure out the steps of any move. Also consult with family and friends. A couple about to put a deposit on a downtown condo that would be built in two to three years were warned off by their adult children who convinced them to rethink their plan as that was too long a time period. Think options through with a counselor or therapist. One woman was debating a major move and talked with her therapist. This allowed her to think through her ambivalence and finally make a decision to stay put.

## 3. Implementing the move.

Recruit your transition team once you make a decision. When Molly moved into the nursing home part of the continuing care community, her son and granddaughter came for two weeks to help with the move, her close friend was involved every step of the way, and her decorator was there for her helping her decide on the color of her room, which artwork to hang, which chairs to include. The team was with her from start to finish and she went from being despondent in her apartment to upbeat and optimistic in her room. Hire a moving or transition expert to help with downsizing.

## In conclusion:

Choosing the right location is a personal decision. But if you treat it as one more transition and if you can bolster your resources for coping with it, you will have begun mastering transitions in general.

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