The myth of independence for older Americans living alone in the Bay Area of San Francisco: a critical reflection

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ABSTRACT

Remaining at home in older age is generally considered a sign of independence and therefore an important achievement. More than five million Americans aged over 75 years live alone, a number that is destined to increase thanks to advances in longevity. Living alone can allow the expression of one's preferences, but it can also bring out hardships hardly visible to outsiders, especially in an individualistic society such as the United States of America that rewards self-sufficiency. According to the sociologist Rose, in neo-liberal societies citizens have a duty to be free, self-reliant and independent. In this paper, Rose's theory and the political economy perspective serve as frameworks by which to examine how discourses around independence are translated in the experiences of 22 older adults aged over 75 living at home alone in the Bay Area of San Francisco. Participant observation and 41 in-depth interviews from 2006 to 2010 illustrate how being independent can be an essential component of individual identities. The informants' narratives shed light on the impact of policies that facilitate or regulate the moral imperative of independence. The findings underline the need to assess how discourses around independence are translated in minority populations, to promote studies and initiatives on interdependence, and to encourage international comparisons on living alone in older age.

KEY WORDS – independence, interdependence, living alone, neo-liberal political rationality, individualism.

Introduction

An increasing number of older Americans will be living alone at home (Klinenberg 2008; Kramarow 1995). In the United States of America (USA), the number of one-person households jumped from seven million in 1960 to 30 million in 2006 (Klinenberg 2008). In the San Francisco area, 41 per cent of households are occupied by one person, while the US

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average is 26 per cent (Bureau of the Census 2006). This trend is replicated and even amplified in other countries: Norway, Finland and Denmark have around 40 per cent of residents living alone (United Nations Economic Commission for Europe 2006), and in Japan the figure is 30 per cent (Ronald 2009). Many older Americans live alone: in 2006, more than five million Americans aged 75 or more years lived on their own, 34 per cent of the age group. Thanks to the 'longevity revolution' and to the desire to live at home (AARP 2009; Butler 2008), the share of adults living alone is destined to increase. Several factors can justify this living arrangement: death of a co-living partner, the desire not to be a burden, distance from the family of origin, attachment to a location, and lack of close kin.

Living at home in older age is the goal of the majority of older Americans (Gibson 2000; Moore and Stratton 2002; Rubinstein, Kilbride and Nagy 1992). Remaining home is often perceived as a better alternative than moving into a nursing home. Living home alone is a sign of independence and may be viewed as an important achievement (Becker 1994; Mack *et al.* 1997; Rowles 1993). Independence is a deeply-rooted value in the USA (Bellah 1996 [1985]; Fineman 2004; Triandis, Bontempo and Villareal 1988). Living at home alone is often associated with the ideal of doing 'what you want with no one to tell you, "you can't"' (Rubinstein, Lubben and Mintzer 1994: 70). While dependence is associated with helplessness, need, incompetence and functional incapacity (Agich 2003; Cordingley and Webb 1997; Gignac, Cott and Badley 2000), independence is usually perceived as one of the necessary conditions to enjoy life. The ability to function independently is often a marker of physical health (Kaufman and Becker 1986). Feeling independent may enhance the quality of life by increasing a perception of being in control and not intruding on others (Plath 2007).

In the USA, the promotion and support of independent living is an essential component of health and social policies geared towards older adults. Experts, case managers and seminars enrich the discourse around independence. As a result, independence has been institutionalised. Institutions parade the word 'independence' next to their names, as with The Scan Foundation: Advancing Senior Care and Independence and the Center for Elders' Independence. The mission statements of many social agencies emphasise living independently and take independence to indicate, 'the cultural sanctification of the individual through the ability to control one's personal affairs, legal rights, and moral responsibilities' (Rubinstein 1986: 3). But living solo in older age can be difficult and marked by depression, isolation, poverty and distress. Living alone in societies that laud independent behaviour (Katz and Laliberte-Rudman 2005) – which Rose (1999: 89) labelled 'regimes of autonomy' – may

create significant strains among people lacking informal and the many forms of intangible assistance from a co-habitant, that face deterioration of mental and physical skills, and lack meaningful social roles (Estes, Biggs and Phillipson 2004). Living alone may also facilitate a withdrawal from social interaction and a gradual invisibility (Plath 2007).

This paper illustrates how discourses around independence emerge from the experiences of 22 older adults aged 75 or more years who lived at home alone in the Bay Area of San Francisco. While the small sample does not allow sweeping generalisations, this ethnographic study reflects on the importance of living independently and hints at the need to problematise the pressures associated with the promotion of independence. As the literature review will demonstrate, only a few studies have been devoted to the lived experience of older adults that live alone, and none have reflected exclusively on the consequences of promoting independence among adults over 75 living solo. The findings also call for more emphasis on the promotion and study of interdependent living. Thanks to its emphasis on 'inter' connections, the notion of interdependence holds the potential for meeting the needs of individuals gradually losing their idea of independence.

Literature review

This review begins with the literature on the experience of living alone and the idea of independence, two notions rarely analysed in concert. It then shifts its focus towards the political economy perspective and a sociological theory of the powers of freedom. These two theoretical strands will frame the investigation into the multiple ways that discourses around independence are translated by older adults living solo.

Independence and living alone: an odd couple

While critical gerontologists have dissected the concept of dependence (Townsend 1981; Walker 1981), they have only partially attempted a reflection on how the emphasis on independent living placed by programmes and institutions affects older adults. Studies of independence have been generally aligned with the prevalent discourse of the relevance of 'ageing independently'. The literature mostly deals with the adaptation of behaviours and environments to facilitate the idea of living independently outside and inside the home (Schaie *et al.* 2003) and in community and institutional settings (Cordingley and Webb 1997; Gignac, Cott and Badley 2000; Secker *et al.* 2003; Sixsmith 1986). Some authors have

reflected on the meanings attached to the idea of independence. Cordingley and Webb (1997) showed that the idea of functional independence is connected to adulthood, and that dependence is associated with childhood, senescence or being a woman. Sixsmith's (1986) investigation of the semantics of independence among older adults led to the discovery of a rich array of subjective definitions, ranging from self-management to lack of reliance on others. All these attributes contribute to a meaningful and fulfilling life (Gignac, Cott and Badley 2000). On a related note, New Zealand researchers illustrated that an ability to reciprocate may foster a feeling of independence among older adults who receive help (Breheny and Stephens 2009). A Canadian study assessed how 39 older adults living alone focused on different features related to their independence according to the gender of the interviewer. Informants were more inclined to talk about work with a man and about relationships with a woman (Stephenson, Wolfe and Coughlan 1999). In the United Kingdom, Secker *et al.* (2003) illustrated the multiple nuances and ambiguities of the notion. It is possible to feel independent while relying on others for help, or to feel dependent while not relying on anyone. For example, one may be immobilised from the neck down and feel independent because she decided to have a coffee although someone is helping by holding the cup for her. Conversely, an able-bodied individual may feel dependent on his addiction to caffeine.

Several academic publications suggest that the high valuation of self-reliance in the USA is historically and geographically specific. The multi-sited ethnography of senility undertaken by Cohen (1998) underlined the cultural specificity of being independent. This desire is not universal or innate. In India, to maintain independence through living in a home for older people is a stigmatising attribute among older adults. Conversely, the ability to be dependent on family and friends is a sign of a higher status. The Western feminist literature underlines the cultural connotations of independent living and the impracticality of relying exclusively on one's own forces (Fraser 1989; Fraser and Gordon 1994). Within social gerontology, the positive impact of an ethos of independence was recently questioned. Plath (2007) explored the link between social exclusion and independence among Australians aged 65 or more years, the great majority of whom were Caucasian and women, either living alone or with others. The informants' voices shed some light on the negative experiences associated with living independently, such as isolation and loneliness, illustrating that this is a subject worth further investigation. In a related vein, Smith *et al.* (2007) elucidated the ways in which the moral imperative of independence rules the lives of Australian men aged over 55 in different living arrangements. One subject decided to remain lying down on the

floor rather than ask his wife for help. Another equated the loss of his driving licence to a death sentence. A third, after losing the use of his legs, rediscovered meaning in life once he started riding a scooter.

The literature on older adults living alone has barely touched upon the pressures of living independently. Rubinstein (1986) pioneered the first ethnography of older Americans living alone in Philadelphia. In *Singular Paths: Old Men Living Alone*, he uncovered the experiences of living solo among men, a gender harder to reach and less inclined to 'join in'. Rubinstein underlined how independence is an important attribute of the experience of living alone. In a later study, Rubinstein, Kilbride and Nagy began with the assumption that people want to be as independent as possible: 'No one wants to be a burden to others' (1992: 54). Only towards the end do the authors adopt a critical stance towards the lack of resources available to assist older adults living in the community and on the strains of a system emphasising individual initiative, but they do not expand the argument any further.

An indication of the hardships of living solo emerged from research conducted in San Francisco in 1993 (Gurley *et al.* 1996). The investigators screened all the calls made to the emergency-medical-services departments of the city hospitals and found that elderly San Franciscans living alone were very likely to be found dead or helpless in their homes. The authors estimated that out of 1,000 men aged 85 or more years, 123 will be found either dead or helpless in one year, many after only several days. Klinenberg (2002) raised further issues with his 'social autopsy' of the reasons why in Chicago in 1995 more than 500 people (the majority over 65 and living alone) died during a two-and-a-half-day heat wave. He cited social breakdown, passive government and poorly-funded public services as possible causes. Klinenberg mentioned the constraints posed – especially upon men – by a cultural system that rewards independent behaviours and stigmatises dependence, but his analysis did not thoroughly investigate the consequences of such an idealisation. The role of the media, the degradation of the urban environment, and the fear of crime were prominent influences in his analysis. His reflection on the agency of older adults living alone was only partially developed since it was tangential to the analysis. Finally, a study from the Policy Institute at the University of California in Los Angeles has investigated the financial hardship of living alone in older age. In the report *Half a Million Older Californians Living Alone Unable to Make Ends Meet* (Wallace and Smith 2009), San Francisco stands out for its high percentage (61.3%) of older adults aged over 65 that are living alone in poverty.

In a study of older widows and widowers living alone in the United Kingdom, Davidson (2002) stressed the loneliness of older widowers.

Widows, on the other hand, leaned more towards experiencing relief from marital obligations. The social networks of older adults living alone were also investigated in another British study (Ogg 2003), while McCarthy and Thomas's (2004) report on the loneliness and social isolation of housebound Britons emphasised individual initiative. More recently, a quantitative study assessed the social exclusion of more than 10,000 Britons over 50 living alone (Demakakos 2008). Its main findings point to the high prevalence of feelings of loneliness among men aged 80 or more years.

Theoretical frameworks

The argument of this paper is that social gerontology should expand its scope to reflect critically on the impact of discourses promoting independence in the lives of older adults living alone. Two theoretical frameworks assist this inquiry: the political economy perspective and the sociological theory on the powers of freedom. The latter holds an original perspective around the idea of freedom, with independence being a part of that construct. The political economy perspective grounds the inquiry with its emphasis on disparities among informants deriving from differences in income, gender, ethno-racial group or sexual orientation. The sociological theory of the powers of freedom developed by Rose reflects on the way the emphasis on independent living is translated in individual experiences and in government strategies (Rabinow and Rose 1994; Rose 1999). Rose drew on Foucault (1980, 1988) to reflect on the paradoxical dynamics of power generated by the idealisation of a 'free-society' populated by self-reliant individuals. He argued that freedom or 'the power to do as one likes' has become an ingrained part of our identity (Rose 1999: 62). A spontaneous desire to be free is a chimera: 'modern individuals are not merely free to choose but *obliged to be free*' (1999: 87, author's italics). The interplay of power and freedom produces distinct individual techniques of self-regulation, on the one hand, and governmental strategies on the other one.

At the individual level, people act on desires that feel instinctive like the yearning for independence. Rather than being innate, however, this desire is the offspring of techniques of self-regulation generated by the environment. These techniques translate into practices through which people act for themselves. On the other hand, institutions limit their intrusiveness and solicitude to foster a sense of one being in control of one's destiny; they become 'enabling institutions'. To protect and assure an ideology of freedom, governments deploy a sophisticated array of disciplinary and monitoring techniques. Institutions feel entitled to intervene on the basis of

the degree of independence of each one of us. Fineman (2004) expanded this perspective by stressing the idea that, especially in the USA, institutions have the duty to provide access, but it is up to individual initiative to seize the offered opportunity.

The theory of the power of freedom does not treat disparities in the distribution of benefits and privileges according to age or other physical attributes. The political economy of ageing perspective fills this lacuna in conceptualisation by shedding light on the mechanisms which create economic inequalities over the lifecourse (Dannefer 2003; Lennox Kail, Quadagno and Reid Keene 2009). This framework has been instrumental in lifting the attention from the micro or personal realm to the influence of ideologies and economic, political and social processes in individual behaviours. Since the late 1970s, its scholars have demonstrated how dependency in old age is socially constructed by the interplay of ageism, consumerism and individualism (Estes 1979; Minkler and Estes 1984, 1991; Townsend 1981; Walker 1981). Their work has catalysed other contributions that have assessed the impact of neo-liberalism in social policies directed towards older citizens and that illuminate the inequities in the distribution of benefits based on the conjunction of age with income level, gender, sexual orientation and ethno-racial group (Phillipson 1982, 1999; Rudman 2006). In this paper, the political economy perspective is instrumental in highlighting the adversities of low-income informants. In the data collection it became clear that financial constraints hamper the individuals' ability to feel independent. Therefore, low-income participants deserved particular attention.

Methods

The study assesses how discourses around independence are translated in the experience of older adults living alone. The study used a method of inquiry which allowed the prolonged observation of behavioural patterns and facilitated the expression of deeply ingrained and intimate beliefs and emotions. The ethnographic method of inquiry meets these requirements. The ethnographer is free to adapt her behaviour according to circumstances and to create a dialogue with her informants. Through the mutual exchange of experiences and the engagement of the researcher in the informants' life, findings become richer. Repressed thoughts are more likely to surface. Rather than mechanically asking a series of questions, the ethnographer engages with the informants through disparate activities spontaneously chosen. During this study, for example, I sung with one informant, and did yoga and meditated with another. With other

informants, I went shopping as well as to the movies, watched soap operas, attended their karaoke contests, visited them at the hospital, and enjoyed meals and beers in their company. Ethnography is the '*the indispensable tool* … to capture the lived relations and meanings that are constitutive of the everyday reality of the marginal city-dweller' (Wacquant 2008: 9, author's italics). Only by immersing oneself in the field is it possible for the researcher to allow for the articulation of unexpressed reflections and emotions (Sassen 2000; Wacquant 2008).

The participants

Forty-one interviews with 23 respondents made up the sample. Of the 23, two were adult children of parents aged 75 or more years who lived alone, and the remaining 21 were themselves aged 75 plus and living alone. Only in one instance were two people informants for the same case: an elderly mother and her adult daughter. This paper consolidates findings from two studies. In the first project, started in 2006, I recruited older adults participating in an adult day centre where the social workers fostered and gave advice about independent living. This study led to the recruitment of two informants over 75 living alone and one adult child that I met 14 times over three years. The gradual unravelling of the struggles of these two informants narrated by them and the adult child led me to move my attention from best practices in deinstitutionalisation towards the translation of discourses around independence in older adults living alone. The second study started in 2008 and was broader in scope. I recruited informants living alone and aged over 75 by placing flyers online, on the streets and in public buildings, senior centres and newsletters, and through word of mouth and snowballing. I also made presentations at meal sites and senior centres, and sought the assistance of social workers and home-care workers. This study led to 20 informants, whom I met 27 times. I recruited six participants through flyers, three through word of mouth, two through snowballing, two through advertisements in newsletters and one after a presentation at a meal site. Two participants were referred by social workers, three by an ageing organisation, and one by a home-care worker. The aim of the recruitment process was to use different avenues and techniques to aggregate a sample as diverse as possible.

While most informants were met only once, one agreed to meet me once a month and we met six times, and I met two others twice. Of these two, one was initially uncomfortable allowing me in his space, so we met once outside and a second time at his apartment, and the other forgot that she had agreed to be interviewed, so she called me again after one month to set up another meeting. Of the 22 older adults over 75 either met

in person or through the words of their adult children, two were Asian, two African American, one Hispanic, and the rest (17) Caucasian. Sixteen informants were females and six males. Ten struggled financially, while three were wealthy. Eight never married, five were widowed, and nine were divorced and widowed. All participants, with the exceptions of one gay man, one lesbian and one bisexual woman, declared themselves heterosexual. The interviews were undertaken in San Francisco and the Inner East Bay (across the Bay Bridge and comprising Oakland, Berkeley, Richmond and other cities).

Data collection

During the recruitment I always explained to the participants that they were in control of the process. While they knew that the criterion for entry into the study was age and living arrangement, my interest in their perspective on independence was never mentioned. Four informants requested meeting outside their homes; all the others allowed me to step into their premises. The interviews were semi-structured with questions around four main topics: (1) likes and dislikes about living alone; (2) crises, worries and anxieties; (3) what matters to live the best life one can; and (4) personal definitions of independence. To allow for the expression of usually unexpressed thoughts and emotions, I used silence and empathic listening, and sometimes remarked about my experience as an adult living alone for 15 years. Following key tenets of the in-depth interview method (Rubinstein 1987), I observed the appearance and behaviour of informants, as well as change in tone of voice, eye contact, and body language. I also took note of surroundings, neighbourhoods and interaction with acquaintances. A meticulous description of each encounter was recollected in field notes compiled immediately afterwards. These interviews were supplemented with consultations with public officials such as officers in the Department of Aging in San Francisco, in the In-Home Supportive Services Public Authority of San Francisco, and community organisations. Ethical approval for this project was gained from the Committee on Human Research at the University of California San Francisco. The names were changed to protect the informants' anonymity.

Data analysis

The field notes and transcripts were read several times to develop my understanding of the data. The transcripts were entered into Atlas-ti, a software program for qualitative analysis, and the interviews coded line-by-line. Initially, different codes were created to elaborate on the four

main area of inquiry: (1) likes and dislikes about living alone; (2) crises, worries and anxieties; (3) what matters to live the best life one can; and (4) personal definitions of independence. At the same time, memos were written with my reflections on the emerging themes and to begin the dialogue with theory. At the second stage, codes were put in relation with Rose's theory on the power of freedom and with the political economy perspective as they were confirming, expanding, rejecting or finding lacunae in these theoretical frameworks (Coffey and Atkinson 1996).

Limitations of the evidence

Rather than drawing generalisable inferences, the intention of this research is to raise understanding of the lived experience of living alone by means of 'thick description' (Denzin 1989; Geertz 1973). The narratives contained in the findings reflect ordinary stories. They may seem unconventional because they differ from pre-conceived images of living alone in older age or because many of the stories are about seldom-voiced struggles. Multiple recruitment techniques allowed the gathering of respondents from different backgrounds which facilitated an understanding of the variation in experiences (Denzin and Lincoln 1998; Patton 2002). Despite this effort, I have not been successful in capturing the full diversity. Non-white older adults and the lesbian, gay, bisexual and transgender communities were under-represented. Finally, isolated and hard-to-reach informants may have been under-represented because of the absence of targeted recruitment. Contacting neighbourhood associations and local physicians are examples of these strategies. The findings may provide the basis for future research aimed specifically at identifying the prevalence of problems potentially associated with independent living among a large sample that is representative of all older Americans.

Findings

Discourses around independence can be approached from multiple angles. The next section of the paper deals with subjective interpretations. It will illustrate how personal analyses filter the ethic of self-reliance and how everyday circumstances have the potential to erode this idea of independence. The following section exemplifies the way discourses around independence proceed from institutions and are integrated by the informants and shows that the institutional emphasis on seizing the opportunity to access available services (when they are available) shifts the responsibility from the collective enterprise to the individual initiative.

The succeeding section illustrates how poverty can affect the translation of discourses around independence, and finally the notion of interdependence is discussed. Where do informants draw the line between interdependence and independence? Answering this question will sharpen subjective interpretations of independence and will detect areas where the dependence with the 'other' is more acceptable.

Individual discernment

According to Rose, individual identity relies upon the extensive exercise of freedom, and individual conduct is shaped by the 'success or failure acquiring the skills and making the choices to actualize oneself' (1999: 87). On an individual level, we become dependent on our own freedom, on our own potential to fulfil ourselves. This pull may translate in stoic behaviour of different kinds. For example, Mary – a thin and stooped 85-year-old woman, who endured a stroke, a heart attack, stomach and cataracts surgery, lived alone and was unstable walking – adamantly refused help to carry groceries up the 16 steps leading to her flat. Mary explained to me how every time someone helped her she feels that her 'life force' – to use her words – gets drained out of her. This attitude is so embedded in her psyche that even the idea of using a medical alert device is dismissed: 'I don't feel like I have an ongoing problem that I might need something like that'. All the informants valued being independent and stressed different features of the concept. Some emphasised the ability to act without interference; others stressed the fear of depending on others. Both reasons mattered to Judith, a 76-year-old former executive living alone in a cottage in an upscale neighbourhood. Judith treasured her 'own absolute independence':

I don't want or usually need to rely on anybody else to do something for me. There is virtually nothing I cannot do if I choose to do it, and I like that feeling of being very independent. … I look around and contrast how I live as a single person with other people who have to negotiate some of the essential simple things of life. I get up when I want. I go to bed when I want. I can please myself and some people may say that is a very selfish way of living, so be it, it may be, but I earned the right to do it.

Judith dreaded depending on others for help. She even claimed that she may take her life if she could not rely on herself consistently. For Judith, not depending on others and being free to make her own decisions are parts of the same equation. Being independent for her is like driving a 'standard shift car' that allows for better control:

That's what independence is: making one's own mind up about things, and doing things for oneself and stay with it, not being persuaded out of it. … I like the fact

that if I want to take off all my clothes and walk naked I can do it now. It's my call, it is my choice. I like that sense of being in control, just as I drive a standard shift car.

The feeling of being independent can be satisfying. Both Sue and Sarah felt that they were living a good life. When I met Sue, she was 92 years old and had never married. Her extensive travels in the past, her good health and her relationship with an intimate friend next door make her life meaningful. Sarah was 85 and a widow. Even though she missed her husband, the last years of his life had been exhausting. Now Sarah is free to do what she enjoys the most, like attend church and courses on science, enjoy the company of friends, and volunteer at a meal site.

Lack of independence, on the other hand, may imply a feeling of being at the mercy of others. Beth said, 'I wish I was independent. I'm not; I'm at the mercy of a lot of people just to exist'. For her being independent translates in the ability to go to different places on her own. But now she cannot walk any longer; she weighed over 200 pounds, and she required a home aid every day before and after she returned from an adult day centre. Learning to use her new electric wheelchair has become her priority. For 92-year-old Mark, being independent 'is natural' but sustaining this 'natural' feeling given everyday hardships was taxing. 'I feel like an animal in a cage', he said of his daily struggles with his lack of energy and curiosity to get out of bed, and increasing reliance on neighbours and doctors. His reliance was exacerbated after the death of his closest friends, his falls, and pacemaker surgery. This feeling of being caged and left with no choice is an example of everyday violence. Anthropologists use the term 'violence of the everyday' to denounce forms of violence so enmeshed into daily routines that they become unquestionable and invisible (Daas *et al.* 2000; Kleinman 2000; Scheper-Hughes 1992). Reflecting on different facets of the 'regime of autonomy' brings to the surface sufferings and hardships that would be otherwise considered an inevitable part of the everyday.

The idea of independence is sufficiently malleable to allow for an individual feeling of independence despite increasing dependence on others (Secker *et al.* 2003). Independence can mean being able to decide where to be institutionalised. In this case, Rose's theory on the power of freedom took an unexpected twist. Lori felt she was 'on cloud nine' once she finally heard about her admission to her favourite nursing home. I met her the day after she received the news. Without close friends who had passed away, and with being divorced and having osteoarthritis and knees that 'are just bones', Lori dreaded depending on her only son who lived in another state (of the USA). Independence is 'very important' to her. A few years ago, while she was planning for her future, Lori became a volunteer

inspector of the quality of nursing homes. As soon as she found one that met her expectations, she started volunteering there to increase her chances of admission. She is now thrilled: once she moves, she knows she will meet people like her and she will finally be able to stop cooking and buying groceries. Being able to 'have someone to hold my hand' has become increasingly valuable to her.

Ordinary events escalated the suffering of James, an 85-year-old man who has always been independent. Divorced, with a son overseas, a daughter and a partner living in different towns, he spent most of his time alone in a big suburban complex where he lived side-by-side with 100 other tenants. Despite his charm at social gatherings, in his mind company rhymed with 'frivolity'. Losing his driving licence triggered a major crisis. James gradually became more aloof. He refused medical alert devices or external assistance such as Meals-on-Wheels. His son explained that James just let himself pass away; he stopped drinking in order not to stain his trousers, the thought of using pads being probably too unbearable. He was found half-dead in his flat, after lying on the floor for three days, dehydrated. Once in the hospital he refused subcutaneous fluid since he just wanted to die.

Even though an extreme case, especially considering the thousands of homebound clients of Meals-on-Wheels, James's trajectory is nevertheless significant when reflecting on the high percentage of American men that commit suicide in older age (McKeown, Cuffe and Schulz 2006). James's story illustrates how a life spent in the pursuit of independence could be compromised by the anonymity of living in a high-rise building (Phillipson 2010), by a disregard for social interactions, and by the loss of a driving licence. The intersection of ordinary features can potentially lead to a fatal failure to adjust to new circumstances.

These anecdotes reveal that the idea of being independent is often intrinsic to the core of one's being and is highly subjective. Each person has a different idea of what it means to be independent. Independence often feels innate, instinctual and unquestionable. The feeling is so entrenched that a different reality seems inconceivable. This embeddedness may hamper the adoption of devices such as medical alert appliances, especially if they are perceived to be disruptive of the subjective idea of an 'independent self'. At the same time, since individual interpretations dictate what facilitates and hampers independence, the perspective on medical alert appliances may change markedly in the eye of the beholder. In one case, one may feel dependent on these devices, in another case, one may feel more emancipated thanks to them. For example Mary (the first case) refused the medical alert appliance, while Mark (the man who feels caged) gladly wears it around his neck, as a pendant. Programmes catering

to older adults need to be aware of these unconscious convictions and of the meanings assigned to assisting devices.

At the same time, these convictions are not set in stone, they may change over time. External circumstances may affect them. Some attitudes or experiences may facilitate the adoption of new perspectives. Lori (the woman eager to move into a nursing home), for instance, changed residence several times, so she did not feel attached to her apartment and was glad to move into an institution. Beth (the woman who feels at the mercy of others) had to adapt to her increased dependency on many others, especially after the death of her husband. Her image of an 'independent self' had translated to being able to go places, alone and with others. The key for her is not lying in bed or on the couch in the living room, or just passing time at the adult day centre. The success of interventions may rely on the ability to detect these turning points that may contribute to the idea of a complete self. Based on these findings, I propose that institutions need to increase their sensitivity to the meaning of independence for their clients and to behaviours deriving from subjective interpretations. According to the Director of Services of the Institute of Aging (that provides medical and social services to older San Franciscans), programmes mostly target critical cases of home-bound individuals requiring round-the-clock care. She lamented the lack of resources available to serve those more independent (personal communication).

Enabling and constraining institutions

Institutions serving older persons are mostly concerned with allowing their clients to remain in their communities. For example the acclaimed national Program for All Inclusive Care for the Elderly (PACE), pioneered in the 1980s in San Francisco, offers in their adult day centres a vast array of services to foster wellbeing and independence. Clients can also receive home care if they qualify for that. A team with a physician, nurse, social worker, nutritionist, van driver and home-care worker monitors each participant. Anne, Beth and Ellen enjoyed attending these programmes. Anne and Beth liked the company of the people they met at the centre. Beth particularly enjoyed the conversations with the van driver. Ellen appreciated the food, for her interactions with people around were seldom easy. Unless prompted, the respondents seldom voiced their views on the role of the institutions. For Paula, individuals should be held accountable for their own freedom and institutions should simply offer access to services: 'as long as you take responsibility for what you are doing you should have access to what is available'. The consequence of this perspective is that when older adults are financially, physically or emotionally

deprived, they may blame themselves and feel like 'failed citizens' (Rudman 2006: 196).

In the case of Michelle and Ellen, access to services was not easy because of norms and practicalities. Michelle, a 78-year-old woman living alone in San Francisco in a one-bedroom flat crammed with boxes and relying on Meals-on-Wheels, feared that her landlord might have developed a terminal illness. She dreaded eviction and she did not know where to turn. Accidentally, she shared these fears with me the same day I attended a seminar on affordable housing for seniors organised by an agency located in downtown San Francisco. During the event, 20 attendees (mostly in their late fifties and early sixties) and I were flooded with ways to find housing that required a detailed range of demanding tactics such as physically travelling to different offices, following up with officers, joining email lists, and promptly replying to emails or letters. These strategies overwhelmed Michelle, who forgot where she wrote my telephone number, did not use a computer, and when we went out for a walk needed to stop after five minutes for a rest against the wall. Ellen, on the other hand, during her intake process in an adult health centre was deemed ineligible for home-care services because of her hoarding behaviour. In one ironic situation, she was refused access to services because she was expected to remove the clutter on her own:

[My house] is overstuffed with material that had been in storage. I had to move it out of storage because I couldn't afford the rent on the storage. And the plan was to regularly dispose of some things but my health doesn't allow me to do that … you have to have a certain amount of body strength to do those things. I'm exhausted now so we'll just have to take this up next time and who knows when next time is going to be. There's nobody I can turn over that task to.

Another situation can arise when someone who is proactive and strong enough to look for opportunities cannot easily access the services. It was not easy for Anne to move away from an apartment shared with an alcoholic housemate:

I was hunting all over the Bay Area with housing and it was discouraging because the people on the telephone that were supposed to help me with housing said they couldn't. There were too many seniors looking for housing and they did not see how they could help me, which was very discouraging. But I had a girlfriend: she saw a piece in the paper about this place being built, so I waited and paid what I had to pay to wait till I could get in here. So I put up with a lot and I am not sorry. I am glad to be here.

Thanks to her initiative, Anne moved into a 'supportive living' facility hosted in a building traditionally considered one of the best national practices in geriatric care. The same building hosts two agencies supporting

older adults. The implications of living there emerged when Anne's daughter had to negotiate with Californian regulations stating that the so-called 'supportive' housing buildings can only host tenants that are not a danger to themselves or to others. One of the biggest fears of the administrators is that a tenant may inadvertently create a fire while cooking. This is a practical application of Rose's (1999) contention that freedom epitomised by self-reliant people who do as they like is conditional upon the creation of norms, surveillance and meticulous knowledge about people's conduct. Institutions leverage on regulation, surveillance and knowledge to shape an ethos of independence. As a tenant, Anne was constantly screened by the administrators. In December 2007, she fell in the bathroom and was hospitalised. Her daughter told me how the administrator of the building tried to make her leave on the grounds that she was a danger to herself. She was allowed to return only after a strenuous negotiation by her daughter and a nurse.

This section reflects on the incorporation of the prevalent ethic of self-reliance in institutions and individuals. Their behaviours seem aligned. Individuals may feel so responsible towards their own wellbeing to accept difficulties in accessing services. Institutions may enable individual initiative as long as it conforms to norms on orderly behaviour. Some of these stories are useful to promote studies and initiatives promoting paradigms alternative to the promotion of independence. If interdependence, instead of independence, were the target of institutions and programmes, would stories like these exist? What would happen to the moral imperative of independence if the connection with others and inter-generational exchanges gained top priority in public policies? Their lack of initiative often explains the inability to access services. These findings suggest that institutions catering to the needs of older adults may need to increase their sensitivity to the unexpressed desires and fears since this ethic of self-reliance may deter sharing what one should better fix alone.

Independence in poverty

The recession and the California State budget crisis exacerbated the condition of living alone with limited means. Cuts to home-care services were made in July 2009, MediCal (the free health care system for low-income Californians) stopped providing access to incontinence pads, eye care, dental care, foot care, speech therapists and psychologists. In Beth's words:

Oh … he [California Governor Schwarzenegger] cut a lot, he cut. You can't have anything to do with your teeth anymore, you can't go to the dentist, you

can't go to the podiatrist, you can get your eyes examined but you can't get glasses, and my glasses, my last pair of glasses, has this thing is about to come off, I wanna see if it can be repaired.

Many of the informants struggled to reconcile a feeling of independence with a meagre bank account. They often resorted to friends or family to survive financially. Beth borrowed money from friends, and received funds from her son. Others relied on their own initiative. For example upon retirement, Anne started accumulating debt with four credit cards to supplement her social security check. One day she confronted all the agencies, and then she changed her phone number:

I just cancelled my debts, saying to the credit-card companies I don't have any money and they'll to have to quit asking for money. For the most part it worked except for one bank; I don't know how they got my number because I changed my phone number, but [sigh] I just hang up when they call and apparently it is working because this has been going on for months and if they were going to try arrest me or something like that, they would have done it by now.

Ellen, on the other hand, could not cancel her credit-card payments because she relied on the credit mainly to purchase food and was afraid of being unable to open new credit-card accounts. So every month she made the minimum payment. She is so zealous that she rented a car during a hospitalisation to go to the bank to pay her dues. Apart from her social worker, she has no one to ask for help. She does not have friends and she cut contact with her few family members. Missing a monthly payment in January 2009 during the same hospitalisation catapulted the annual percentage interest rate to 30 per cent and distressed her profoundly. To make matters even worse, in the same period her reverse mortgage defaulted because she did not have enough money to afford the repairs on the ceiling that the lender required. Ellen did not talk about these issues with her social worker. She told me that these problems were too complicated to explain.

Christine, another informant, never married and had no family or friends on which to rely. Since the 1950s she had been living in one of the poorest neighbourhoods in San Francisco. She worked as receptionist and secretary, and was very well organised. Independence has been her credo for more than 60 years. As she said, 'It [independence] is the most important thing there is. I have been independent since I was 14. I don't know how to depend. That is the main problem put straight at me, "You are too independent"'. Christine precisely planned her day: 'I run on a daily schedule from 5 am to 5 pm'. She knew where to get discounted or free offerings at any given hour. She volunteered at a local women's organisation where she shared her knowledge on how to make ends meet with a tight budget. Gathering food occupied most of her energies. She

used a walker, got tired easily, and had few resources to spare. As she explained:

Social Security is so low I can only afford to pay my rent, that's all. They cut me over $250. I used to get $907. Now, starting from April [2009], it is $760, enough for my rent and $100 spending money: $645 rent, $120 pocket money, I have to live all the month. How hard it is even for a single person! I have to go through special things, two for one, coupon sales. I mostly go to organisations, they give things away.

The same budget was enough for Rebekah, an 88-year-old Belarusian widow who spoke only Russian. Rebekah moved to San Francisco in 1996 to stay close to her only daughter who died of cancer in 2001. Rebekah also had a history of cancer; she eagerly showed me her scarred breasts. Thanks to her daughter, she managed to get an apartment with a sub-sidised rent and she paid $250; her other expenditure was $60 for the TV channels in Russian and $150 for food. She had a home-care aid and taxi vouchers for her doctor's visits. In the same building she interacted with 40 Russian-speaking residents. She was glad not to be in Belarus. As she reckoned:

America gave me the independence. They didn't send me to live with my daughter; they gave me my own place and they gave me my independence. So I am happy they didn't force me to live with someone else and not depend on someone, and just live on my own and be independent – it's very important.

Rebekah and Christine both lived in San Francisco, but their experiences were quite different. The comparison illustrates how social interventions and the presence of family members can make a difference in the experience of living independently for low-income older adults. The ability to afford a place to live is often the basis for a feeling of independence. In the absence of co-habitants to share the expenses, this there is greater financial strain for a person living solo. Since housing is usually the main item in the budget (Wallace and Smith 2009), subsidised housing is a crucial policy in high-rent areas such as the Bay Area of San Francisco and large areas of cities such as London, Tokyo, New York and Rome. To substantiate this claim, researchers need to compare older adults living solo and rent-ing in subsidised housing (like Rebekah), and those paying a full rent like Christine.

Ellen and Christine's negotiations with their credit-card companies also point to the value of studying credit and loans. Credit cards can tempor-arily increase financial resources and support autonomy. Struggles with very high interest rates, fees and credit-card debt are often kept hidden from strangers. Researchers may need to meet informants several times to create trust before stories like these emerge. Based on these findings,

social-services programmes need to be on the alert for these ordeals, and provide more advice about how credit-card companies may allow the sharing of anxieties related to the management of money. Institutions can exploit the multiple nuances of the word 'independence' to encourage people to ask for help. The Department of Veteran Affairs took a move in that direction through a massive marketing campaign with an advertisement headlined: 'It takes the courage and strength of a warrior to ask for help: if you or someone you know is in an emotional crisis call 1-800-273 Talk'. Similarly, Marie Jobling, a community activist in San Francisco, promotes independence among old San Franciscans as 'the ability to ask for help' (personal communication). Seeking help can be more acceptable and appealing if adopted by role models. As Maggie Kuhn (1986), the founder of the Gray Panthers, one of the first social movements that advocated the rights of older adults, said, 'I have learned not to feel diminished by asking for help'.

The context of interdependence

The relevance of the notion of interdependence is evident in many narratives. The connection with others and the sense of empowerment deriving from social interactions are the main connotations of interdependence (Raeff 2006). Independence and interdependence are complementary: one can feel a sense of independence while being connected with others. Adult and adolescent studies have indicated that balancing autonomy and interdependence is a sign of maturity and adulthood (Baltes 1996). The dynamic balance or 'homeostasis' of the needs and aspirations of the members of a community facilitates adaptations to the environment (Loewy 1993). Bringing to the forefront the fact that we live in a constant and often invisible interdependence with one another – with institutions, family, friends, strangers and adult day centres – adds a significant layer to discussions about independence (*cf.* Bellah 1996 [1985]; Loewy 1993; Robertson 1997). Observing where independence ends and interdependence begins is useful to mark the boundaries of a subjective independent-self. Where do informants draw the line between interdependence and independence? Answering this question allows us to circumscribe the pull towards living independently and to identify areas of openness towards the 'other'.

For Michelle (the woman concerned about her landlord), 'others' were a distraction and interference, a faceless entity that demanded most of her energies. Unless – and this is the catch – she felt strong enough to chant religious hymns, when she needed other people. She did not enjoy chanting on her own, being in a group mattered. Michelle enjoyed

conviviality very much for limited amounts of time, until she started feeling tired. Judith (the former executive) drew a line around the amount of help for which she asked. While she was uncomfortable with asking for help with essential tasks, like being fed or kept alive, she took pleasure from the fact that her neighbour dealt with her garbage when she was away. She was also taking care of a neighbour older than her; she did her laundry and kept her company. For Mark, the man who felt caged, a feeling of reciprocity enabled him to accept the assistance of the administrator of his building. This lady will inherit all his assets and she was already receiving a stipend from him. The ability to pay back allows for interdependencies. Reciprocity may narrow the quantity of help one may receive since it requires the capability of giving something in exchange (Breheny and Stephens 2009).

In some cases the walls of the apartment are the line between the independent and the interdependent self. For example, no one is allowed to step into Christine's apartment. Christine is the woman on a tight daily schedule. She struggled with the idea of having a home-care worker who may not do things 'in a particular way'. Once she stepped outside, Christine engaged in interdependent relations. She took pleasure in volunteering at the meal site, she willingly helped me (outside her home), and she provided advice at a women's shelter. In a related vein, 80-year-old Kathy, a therapist, used her calendar to show me how she managed the line between independence and interdependence, a concept that she redefined as 'enjoying communicating with other people'. The boxes of the days when she prefers being alone in her house were crossed with a black crayon. The others were left to advocate for social justice and to spend time with friends and her adult children.

Tina (T), an 80-year-old academic, was well aware of her embeddedness in a social network. Her identity was defined by her membership of the LGBT community. Seven years ago she moved with most of her close friends into the same building. Her connection with her community went so deep as to narrow the space devoted to cultivating her independent self. For her it was important to sleep alone (rather than with her partner), to have the quiet to write essays, and to tend her garden, but being independent was not sufficient:

T: I am not just living alone, I am living in community. … I am not isolated here; my dearest people are just here in the building so that makes a huge difference … these people are the closest to my heart. It does not get any better than that. They are nearby but we do not have to deal with the habits of each other that we don't like. … Independent in this country may mean living alone, be the self-made man or woman, but that's not enough, because

there is always somebody helping that person and we all need help and I believe that you can be independent and also part of the social world, that you need to be part of the social world and have friends and lovers, if you want to have lovers, to have that network of friends.

I: So that means interdependence?

T: Yes, that's the word.

I: Is it more important to be independent or interdependent?

T: Interdependent.

Tina was the only informant to question the moral imperative of being independent. Her words speak of a different paradigm. Along the same lines, political economist Robertson used the banner 'moral economy of interdependence' to advocate for 'an alternative language of need' (1997: 432). Robertson advocates for a language alternative to the therapeutic model based on the patient–therapist dyad and to the rights-based language based on clashes among rights of multiple social segments. A moral economy of interdependence is built around the idea that everyone needs to be interconnected to succeed, and that individuals are fundamentally and inevitably dependent on each other. This paradigm encompasses and moves beyond the idea of reciprocity which usually requires an exchange of money, as in the case of Mark, the man who felt caged. What would a moral economy of interdependence look like? Robertson answers by underlining the importance of empowering the community and bringing decision-making processes closer to the recipient of services. According to Condeluci (1995), in the 'the interdependent paradigm' the capacity and potential of individuals (rather than their deficiencies) are contrasted to the ability of the environment to support their expression. Gaps in supporting community members are tackled within the entire system, not in isolation. Inclusion, acceptance, involvement and the cultivation of relationships are the pillars of this paradigm. Condeluci is mostly concerned with people with disabilities. It would be interesting to expand his perspective to incorporate the role of the state (Fine and Glendinning 2005), and to apply it to older adults living alone in the tradition of an 'emancipatory gerontology' which identifies issues of social transformation at the core of its work (Phillipson 2008: 168).

Conclusions

The findings underline the need to dedicate more attention to the subjective meaning of independence for older adults living alone. A one-size-fits-all approach to living independently is misguided. The narratives also hint at the complexity and variety of experiences behind this

living condition which would benefit from further investigations. Reflecting about the future of old age in the United Kingdom, Davidson cast a rosy outlook on the image of 'flying solo' later in life, a phase which will be 'facilitated by better health, financial security, and choice to live independently: a *liberating* rather than a debilitating state' (2009: 179, italics added). Based on my ethnographic study, Davidson's claim may pertain to many older adults. While this may be an ideal worth pursuing, my findings paint an intricate picture. Several informants did not experience living alone as liberating or energising. For most of them living independently was not a choice, but a natural part of their identity, or something inevitable. Davidson's image of a 'liberating state' was also obfuscated by Rose's reflection on the weights attached to the idea of freedom (1999). Following a political economy perspective, future research needs to compare and contrast informants belonging to opposite genders, to diverse generations, social classes and ethno-racial backgrounds, and (in English-speaking countries) to those who do not speak English. Researchers should examine how many people struggle to keep up with the moral imperative of independence, and whether there are systematic relationships with gender, ethnicity, health, and social capital in this regard.

These juxtapositions will allow the emergence of novel perspectives on independent living in older age. It is also critical to compare previously married older adults with those that have never married since the allocation of benefits is different in the USA. Furthermore, light needs to be shed on the way sexual minorities translate predominant discourses around independence since social segments that have experienced discrimination may be particularly reluctant to ask for help (Deevey 1990; Jensen 2006; Kehoe 1986). Funding should be available to study paradigms which are alternative or complimentary to the traditional ethos of hard-core independence. The notion of interdependence and its relation to independence needs further investigation. The term 'interdependence' does not even appear in the Merriam-Webster dictionary (Mish 2003). Social gerontology has only partially embraced studies on the meaning and value of interdependence, which has mostly been mentioned in relation to dependence (Fine and Glendinning 2005; Minkler and Estes 1999; Munnichs and van den Heuvel 1976; Phillipson, Bernard and Strang 1986) and in studies that emphasise the role of social bonds and of reciprocity in older age (Breheny and Stephens 2009; Peterson and Quadagno 1985). A more organised and interdisciplinary effort is required to link discourses on interdependence to disparities, to the role of the state and ideology, and to prioritise policies leveraging on our fundamental interdependence with one another.

Acknowledgements

References

AARP 2009. *Providing More Long-term Support and Services at Home: Why it's Critical for Health Care Reform*. Fact Sheet, AARP Public Policy Institute, Washington DC.

Agich, G. J. 2003. *Dependence and Autonomy in Old Age: An Ethical Framework for Long-term Care*. Cambridge University Press, Cambridge.

Baltes, M. M. 1996. *The Many Faces of Dependency in Old Age*. Cambridge University Press, Cambridge.

Becker, G. 1994. The oldest old: autonomy in the face of frailty. *Journal of Aging Studies*, **8**, 1, 59–76.

Bellah, R. 1996 [1985]. *The Habits of the Heart*. University of California Press, Berkeley, California.

Breheny, M. and Stephens, C. 2009. 'I sort of pay back in my own little way': managing independence and social connectedness through reciprocity. *Ageing and Society*, **29**, 8, 1295–313.

Bureau of the Census 2006. *American Community Survey 2006*. Bureau of the Census, Department of Commerce, Washington DC.

Butler, R. N. 2008. *The Longevity Revolution*. Public Affairs, New York.

Coffey, A. and Atkinson, P. 1996. *Making Sense of Qualitative Data: Complementary Research Strategies*. Sage, Thousand Oaks, California.

Cohen, L. 1998. *No Aging in India*. University of California Press, Berkeley, California.

Condeluci, A. 1995. *Interdependence: The Route to Community*. St. Lucie Press, Boca Raton, Florida.

Cordingley, L. and Webb, C. 1997. Independence and aging. *Reviews in Clinical Gerontology*, **7**, 2, 137–46.

Daas, V., Kleinman, A., Ramphele, M. and Reynolds, P. (eds) 2000. *Violence and Subjectivity*. University of California Press, Berkeley, California.

Dannefer, D. 2003. Cumulative advantage/disadvantage and the life course: cross-fertilizing age and social science theory. *Journal of Gerontology*, **58B**, 6, S327–37.

Davidson, K. 2002. Gender differences in new partnership choices and constraints for older widows and widowers. *Ageing International*, **27**, 4, 43–60.

Davidson, K. 2009. Flying solo in old age. In Vincent, J., Phillipson, C. and Downs, M. (eds), *The Futures of Old Age*. Sage, London, 172–9.

Deevey, S. 1990. Older lesbian women: an invisible minority. *Journal of Gerontological Nursing*, **16**, 5, 35–9.

Demakakos, P. 2008. *Being Socially Excluded and Living Alone in Old Age: Findings from the English Longitudinal Studies of Aging*. Age Concern Policy Unit, London.

Denzin, N. 1989. *Interpretive Interactionism*. Sage, Newbury Park, California.

Denzin, N. and Lincoln, Y. S. (eds) 1998. *Strategies of Qualitative Inquiry*. Sage, Thousand Oaks, California.

Estes, C. L. 1979. *The Aging Enterprise*. Jossey-Bass, San Francisco.

Estes, C., Biggs, S. and Phillipson, C. 2004. *Social Theory, Social Policy and Ageing*. Open University Press, London.

Fine, M. and Glendinning, C. 2005. Dependence, independence or inter-dependence? Revisiting the concept of 'care' and 'dependency'. *Ageing & Society*, **25**, 4, 601–21.

Fineman, M. A. 2004. *The Autonomy Myth: A Theory of Dependency*. New Press, New York.

Foucault, M. 1980. *Power/Knowledge: Selected Interviews and Other Writings*. Pantheon, New York.

Foucault, M. 1988. Technologies of the self. In Martin, L., Gutman, H. and Hutton, P. (eds), *Technologies of the Self*. University of Massachusetts Press, Amherst, Massachusetts, 16–49.

Fraser, N. 1989. *Unruly Practices: Power, Discourse and Gender in Contemporary Social Theory*. Polity, Cambridge.

Fraser, N. and Gordon, L. 1994. 'Dependency' demystified: inscriptions of power in a keyword of the welfare state. *Social Politics*, Spring, 4–31.

Geertz, C. 1973. *The Interpretation of Cultures*. Basic, New York.

Gibson, H. 2000. *Loneliness in Later Life*. St. Martin's, New York.

Gignac, M. A. M., Cott, C. and Badley, E. M. 2000. Adaptation to chronic illness and disability and its relationship to perceptions of independence and dependence. *Journals of Gerontology: Psychological Sciences and Social Sciences*, **55B**, 6, 362–72.

Gurley, J., Lum, N., Sande, M., Lo, B. and Katz, M. 1996. Persons found in their homes helpless or dead. *New England Journal of Medicine*, **334**, 26, 1710–16.

Jensen, D. 2006. *Community Needs Assessment*. Department of Aging and Adult Services, San Francisco Human Services Agency Planning Unit, San Francisco, California.

Katz, S. and Laliberte-Rudman, D. 2005. Exemplars of retirement: identity and agency between lifestyle and social movement. In Katz, S. (ed.), *Cultural Aging*. Broadview, Peterborough, Ontario, 140–60.

Kaufman, S. and Becker, G. 1986. Stroke: healthcare on the periphery. *Social Science and Medicine*, **22**, 9, 983–9.

Kehoe, M. 1986. Lesbians over 65: a triply invisible minority. *Journal of Homosexuality*, **12**, 3, 139–52.

Kleinman, A. 2000. The violence of everyday life: the multiple forms and dynamics of social violence. In Das, V., Kleinman, A., Ramphele, M. and Reynolds, P. (eds), *Violence and Subjectivity*. University of California Press, Berkeley, California, 226–41.

Klinenberg, E. 2002. *Heat Wave: A Social Autopsy of Disaster in Chicago*. Chicago University Press, Chicago.

Klinenberg, E. 2008. Going solo: living alone in America. In *Colloquium at Stanford University, Center for Advanced Studies in the Behavioral Sciences*. Palo Alto, California.

Kramarow, E. 1995. The elderly who live alone in the United States: historical perspectives on household change. *Demography*, **32**, 3, 335–52.

Kuhn, M. 1986. Social and political goals for an ageing society. In Phillipson, C., Bernard, M. and Strang, P. (eds), *Dependency and Interdependency in Old Age*. Croom Helm, London, viii–ix.

Lennox Kail, B., Quadagno, J. and Reid Keene, J. 2009. The political economy perspective on aging. In Bengtson, V. L., Silverstein, M., Putney, N. and Gans, D. (eds), *Handbook of Theories of Aging*. Springer Publishing Company, New York, 555–71.

Loewy, E. H. 1993. *Freedom and Community: The Ethics of Interdependence*. State University of New York Press, New York.

Mack, R., Salmoni, A., Viverais-Dressler, G., Porter, E. and Garg, R. 1997. Perceived risk to independent living: the views of older community-dwelling adults. *The Gerontologist*, **37**, 6, 729–36.

McCarthy, H. and Thomas, G. 2004. *Home Alone: Combating Isolation with Older Housebound People*. Demos, London.

McKeown, R., Cuffe, S. and Schulz, R. 2006. US suicide rates by age group, 1970–2002: an examination of recent trends. *American Journal of Public Health*, **96**, 10, 1744–51.

Minkler, M. and Estes, C. L. (eds) 1984. *Readings in the Political Economy of Aging*. Baywood, Farmingdale, New York.

Minkler, M. and Estes, C. L. (eds) 1991. *Critical Perspectives on Aging: The Political and Moral Economy of Growing Old*. Baywood, Amityville, New York.

Minkler, M. and Estes, C. L. 1999. *Critical Gerontology: Perspectives from Political and Moral Economy*. Baywood, Amityville, New York.

Mish, F. C. 2003. *Merriam-Webster's Collegiate Dictionary*. Merriam-Webster, Springfield, Massachusetts.

Moore, A. and Stratton, D. 2002. *Resilient Widowers*. Springer Publishing Company, New York.

Munnichs, J. M. A. and van den Heuvel, W. J. A. (eds) 1976. *Dependency or Interdependency in Old Age*. Martinus Nijhoff, The Hague.

Ogg, J. 2003. *Living Alone in Later Life*. Institute of Community Studies, London.

Patton, M. Q. 2002. *Qualitative Research and Evaluation Methods*. Sage, Thousand Oaks, California.

Peterson, W. A. and Quadagno, J. (eds) 1985. *Social Bonds in Later Life: Aging and Interdependence*. Sage, Beverly Hills, California.

Phillipson, C. 1982. *Capitalism and the Construction of Old Age*. Macmillan, London.

Phillipson, C. 1999. The social construction of retirement. In Minkler, M. and Estes, C. L. (eds), *Critical Gerontology: Perspectives from Political and Moral Economy*. Baywood, Amityville, New York, 315–25.

Phillipson, C. 2008. Authoring aging: personal and social constructions. *Journal of Aging Studies*, **22**, 2, 163–8.

Phillipson, C. 2010. Ageing and urban society: growing old in the 'century of the city'. In Dannefer, D. and Phillipson, C. (eds), *Handbook of Social Gerontology*. Sage, London, 597–606.

Phillipson, C., Bernard, M. and Strang, P. (eds) 1986. *Dependency and Interdependency in Old Age*. Croom Helm, London.

Plath, D. 2007. Independence in old age: the route to social exclusion? *British Journal of Social Work*, **38**, 7, 1–17.

Rabinow, P. and Rose, N. (eds) 1994. *The Essential Foucault: Selections from the Essential Works of Foucault 1954–1984*. New Press, New York.

Raeff, C. 2006. *Always Separate, Always Connected*. Lawrence Erlbaum, London.

Robertson, A. 1997. Beyond apocalyptic demography: towards a moral economy of interdependence. *Ageing & Society*, **17**, 4, 425–46.

Ronald, R. 2009. Home alone: the individualization of young, urban Japanese singles. *Environment and Planning* **41**, 12, 2836–54.

Rose, N. 1999. *Powers of Freedom*. Cambridge University Press, Cambridge.

Rowles, G. 1993. Evolving images of place in aging and 'aging in place'. *Generations*, **17**, 2, 65–70.

Rubinstein, R. 1986. *Singular Paths: Old Men Living Alone*. Columbia University Press, New York.

Rubinstein, R. (ed.) 1987. *In-depth Interviewing and the Structure of its Insights*. Springer Publishing Company, New York.

Rubinstein, R., Kilbride, J. and Nagy, S. 1992. *Elders Living Alone: Frailty and the Perception of Choice*. Aldine De Gruyer, New York.

Rubinstein, R., Lubben, J. and Mintzer, J. 1994. Social isolation and social support: an applied perspective. *Journal of Applied Gerontology*, **13**, 1, 58–72.

Rudman, D. L. 2006. Shaping the active, autonomous, and responsible modern retiree: an analysis of discursive technologies and their links with neo-liberal political rationality. *Ageing & Society*, **26**, 2, 181–201.

Sassen, S. 2000. New frontiers facing urban sociology at the millennium. *British Journal of Sociology*, **51**, 1, 143–59.

Schaie, K. W., Wahl, H.-W., Mollenkopf, H. and Oswald, F. 2003. *Aging Independently: Living Arrangements and Mobility*. Springer Publishing Company, New York.

Scheper-Hughes, N. 1992. *Death Without Weeping*. California University Press, Berkeley.

Secker, J., Hill, R., Villeneau, L. and Parkman, S. 2003. Promoting independence: but promoting what and how? *Ageing & Society*, **23**, 3, 375–91.

Sixsmith, A. 1986. Independence and home in later life. In Phillipson, C. (ed.), *Dependency and Interdependency in Old Age*. Croom Helm, London, 338–47.

Smith, J., Braunack-Mayer, A., Wittert, G. and Warin, M. 2007. 'I've been independent for so damn long!' Independence, masculinity and aging in a help seeking context. *Journal of Aging Studies*, **21**, 4, 325–35.

Stephenson, P., Wolfe, N. and Coughlan, R. 1999. A methodological discourse on gender, independence, and frailty: applied dimensions of identity construction in old age. *Journal of Aging Studies*, **13**, 4, 391–401.

Townsend, P. 1981. The structured dependency of the elderly: a creation of social policy in the twentieth century. *Ageing & Society*, **1**, 1, 5–28.

Triandis, H. C., Bontempo, R. and Villareal, M. J. 1988. Individualism and collectivism: cross-cultural perspectives on self-ingroup relationships. *Journal of Personality and Social Psychology*, **54**, 2, 323–38.

United Nations Economic Commission for Europe (UNECE) 2006. *Bulletin of Housing Statistics for Europe and North America 2006*. UNECE, Geneva.

Wacquant, L. 2008. *Urban Outcasts*. Polity, Cambridge.

Walker, A. 1981. Towards a political economy of old age. *Ageing & Society*, **1**, 1, 73–94.

Wallace, S. P. and Smith, S. 2009. *Half a Million Older Californians Living Alone Unable to Make Ends Meet*. Center for Health Policy Research Los Angeles, Los Angeles, California.

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