

Housing Satisfaction, Life Satisfaction, And Disability

Kathleen Sampson Eastman

The housing satisfaction of households with and without disabled members was investigated based on a survey of 1267 Iowa households. Households with disabled members were more likely to want to make additions or alterations, but there was no significant difference in housing satisfaction between households with and without disabled members. Households with disabled members had lower life satisfaction, but this relationship seemed to be due to the lower average income of these households. The relationship between housing satisfaction and life satisfaction was stronger for households with disabled members than for those without disabled members.

The disabled have special housing needs. These housing needs do not come about because of differences in housing norms, but by non-normative housing deficits—deficits that arise from the nature of the disability itself (Morris and Winter, 1978).

Kathleen Sampson Eastman is a part-time instructor at New Mexico State University, Las Cruces, New Mexico. She wrote this paper under the direction of Earl W. Morris, Iowa State University.

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When the housing of disabled persons does not meet needs, the resulting problem is more than a physical inconvenience. Because of architectural barriers and physiological constraints, the disabled person tends to lead a more narrow existence—tending to interact less with the larger environment and more with the home environment. Because the disabled person is in the home environment more it may take on increased importance.

Restrictive housing results in fewer persons with whom to socially interact. A situation of reduced social interaction magnifies feelings of alienation, isolation, and differentness (Hanson, 1970). Furthermore, the disabled person lives in a society that places a high value on personal independence, self-reliance, and achievement—values that may be difficult to obtain. Because the

individual may not be able to meet these cultural expectations he or she may feel a severe loss of self-esteem (Thomas, E. J., 1966).

According to Wright (1960), inadequate functioning in one domain often is interpreted by others as inadequate functioning in all domains. To be unable to negotiate stairs, hallways, and small rooms enhances feelings of dependency and inadequacy. These feelings must be resolved to effectively cope with the home environment, let alone cope with the larger societal environment. The inability to have freedom of movement can make a decided impact on feelings of self-worth and personal independence. And so in a very real way life satisfaction may be affected by housing satisfaction.

This paper will examine the relationship between housing satisfaction and life satisfaction of families with and without a disabled person. It is hypothesized that housing satisfaction bears a greater relationship to life satisfaction of households with disabled members than households without disabled members.

Background On The Disabled

The disabled in the United States are a highly diverse but significant minority. As a group, they are heterogeneous and differ markedly in type and severity of disability. Regardless of the type and severity of the disability, the impairment, by definition, restricts the individual's physical functioning and may affect psychological and social functioning.

Whether a person has muscular dystrophy, cerebral palsy, or retrolental fibroplasia, he or she is defined by society as being disabled and thus deviant from the norm. The deviant status affects feelings of adequacy as a functioning human being. The psychological and social effects of disability upon the individual may be as great, if not greater, than the physical aspects of disability (Garrett and Levine, 1962).

The relationship between physical disability and psychological behavior is, however, not a clear, direct relationship (Wright, 1960). A person with a disability has a physiological problem that

may have psychological impact. That impact depends on how the individual defines, perceives and thus experiences the disability. The disabled person's self concept is often a result of the perception of other's attitudes toward the individual. The disabled may feel that they are negatively evaluated by others and consequently feel shame, guilt, hostility, and anger. The result often is withdrawal from contact with others (Schoenberg and Carr, 1970).

Numerous studies indicate that disabled persons may have difficulty in realistically assessing their limitations and capabilities (McAndrew, 1948; Harway, 1962; Deacon and Firebaugh, 1975). In a study of the goal-setting behavior of the physically handicapped (Harway, 1962), it was shown physically handicapped children were less sure of themselves in assessing their limitations and their capabilities than were children without physical handicaps. They also were more influenced by external evaluation as to their worth in that both their successes and failures took on greater importance than did the successes and failures of those without disability. Likewise, Deacon and Firebaugh (1975) found that homemakers with health problems were less realistic than homemakers in good health in both standards for household tasks and sequencing of those tasks. Like the handicapped children studied by Harway, they too had difficulty in realistically assessing their capabilities and limitations. Thus, they would be more likely to experience failure in their endeavors, leading to further stress due to the disability.

Influence on Family Members

When the disabled family member experiences stress, the entire family may experience stress (Kaplan, 1973). Family members are not isolated entities and, therefore, the feelings of one family member affects other family members. Driscoll and Lubin (1972) found that parents of children with cystic fibrosis experienced painful feelings of isolation, anger, guilt, and frustration. Thus, isolation is not only a part of a disabled person's life but also of the lives of parents of disabled children.

Families of children with disabilities feel increased uncertainty regarding the future. Parents often feel a tremendous sense of responsibility and yet at the same time feel helpless in the face of the obstacles produced by the disability. Families with a disabled member face a dual crisis, the crisis of the tragedy and the crisis of roles (Farber, 1962). In the crisis of roles the family is called upon to adapt to the requirements and demands placed upon them by the nature of the disability (Hill, 1958). The family is called upon to develop a workable system of roles (Farber, 1962). Although illness and disability provide a considerable threat to the family's functioning, many families are able to reallocate roles successfully and to deal with the personal tragedy inherent in the situation. When the family is able to function adequately, it may offer the best means to meet the needs of the disabled member (Kaplan, 1973).

Families with a disabled member are faced with expensive medical care. With overwhelming medical expenses other needs, such as housing adjustments, may go unmet.

Housing of the Disabled

The disabled are seeking integration into, not segregation from, all sectors of American society. One means of achieving this integration is through increased access to housing and public buildings. Architectural barriers remain a problem of great magnitude in the lives of disabled persons.

In a study supported by the National Paraplegia Foundation it was found that the unmet need for major housing modifications adversely affected resettlement of paraplegic and quadriplegic individuals back into their home communities. Results of another study indicated that architectural barriers in housing interfere with meeting the needs of paraplegics and quadriplegics. The primary reason these modifications were not made was the lack of adequate financial resources. In another study involving 1230 disabled adults, 40 percent of the homes involved needed residential adaptation, primarily in the form of entrance ramps and widened bathrooms (Van Vechten and Pless, 1976).

In a housing survey in Philadelphia it was found that the disabled of all age groups, except the young, preferred to live in housing designated primarily for the nondisabled (Columbus and Fogel, 1971). It was also found that the majority of disabled persons were living in their own homes.

Many strides have been made, particularly in the area of federal legislation, to encourage a less restrictive environment for the disabled. In 1964 the needs of the disabled were included in the Federal Housing Act. In 1973 the Bill of Rights for Disabled Persons called for a barrier-free environment and nondiscrimination in dealing with the handicapped (LaVor and Duncan, 1976). Section 504 of the 1974 Rehabilitation Act requires that buildings constructed with federal monies must allow for access by handicapped persons. HUD has complied by requiring that ten percent of the units in projects built for the elderly to be adapted for the handicapped (Lindamood and Hanna, 1979).

Methodology

The purpose of the present research is to compare the housing satisfaction to life satisfaction of households with and without disabled members to discover the extent to which housing satisfaction is a component of life satisfaction. In addition, the need for additions or alterations to the house, and the consideration of moving for households with a disabled member and households without a disabled member, were examined.

The data is from an Iowa Rural Development Project in which 1267 households were interviewed, of which 125 had a disabled member. All interviews were conducted in 1975-1976. The respondent was an adult member of the household, primarily either the wife of the head of the household or the female head of household.

An extensive questionnaire was administered by trained interviewers. To determine if a household had a disabled member, the question "Is there anyone in your household who is handicapped or disabled?" was asked. No medical diagnosis or other objective measure was used for this

study. Information was obtained concerning the structure of the dwelling, satisfaction with the structure, presence of a wheelchair entrance-exit, and ownership or rental status. Housing satisfaction was measured by the question, "In general, how satisfied or dissatisfied are you with your housing?". Life satisfaction was assessed by the question, "On the whole, how satisfied or dissatisfied would you say you are with your way of life today?".

Data was analyzed first by means of cross tabulations and chi-square analysis to determine whether significant differences exist between households with and without disabled members. The second stage of the analysis involved three-variable cross tabulations. The purpose of this further analysis was to test whether life satisfaction was significantly different between households with and without a disabled member when income was allowed to vary. Another three-variable cross tabulation was done to determine if housing satisfaction affected life satisfaction differentially for households with and without a disabled member. For this second stage of analysis, gamma was used. Gamma is a statistic that indicates the strength of the relationship between variables, and, therefore, serves a useful function in analyzing three-variable cross tabulations (Freeman, 1965).

Findings

Tenure and Structure. The data show that there is no significant difference in homeownership rates and structure type between households with a disabled member and households without a disabled member (Table 1). (Households with middle-aged or elderly heads were more likely to contain a disabled person than households with a young head.)

Table 1. Tenure and Structure of Households With and Without Disabled Persons.

A. Tenure	Disabled Member	No Disabled Member
	percent	
Own	81.6	77.1
Rent or use free	18.4	22.9
Total	100.0	100.0
	(N = 125)	(N = 1140)

$\chi^2=1.40$ (p=0.50)

B. Structure	Disabled Member	No Disabled Member
	percent	
Conventional Single-family- Detached	86.4	83.6
Other	13.6	16.4
Total	100.0	100.0
	(N = 125)	(N = 1140)

$\chi^2=3.27$ (p=0.35)

Housing Satisfaction. Households that have a disabled member have special housing needs that are created by the nature of the disability itself. According to Morris and Winter (1978), "These special needs, nevertheless, produce dissatisfaction and in turn may produce residential mobility and alteration" (p. 200). It has been theorized that households with disabled members are less satisfied with their housing than households without disabled members, due to their special housing needs and possible deficits caused by the disability (Morris and Winter, 1978). This study indicates no significant difference exists in housing satisfaction between households with and without disabled members. Both were basically satisfied with their housing (Table 2). The households with disabled members may have different personal norms, or have altered their housing to meet their special needs.

Table 2. Housing Satisfaction of Households With and Without Disabled Persons

	Disabled Member	No Disabled Member
	percent	
Very satisfied	32.0	32.6
Satisfied	57.6	58.9
Dissatisfied	5.6	5.0
Very dissatisfied	4.8	3.5
Total	100.0 (N=125)	100.0 (N=1139)

Gamma=-0.03

Additions or Alterations. Evidence produced in this study supports Morris and Winter's contention that these special needs may produce a need for housing alterations. This study indicated that there was a significant difference between households with and without a disabled member as to the need for additions and alterations to the dwelling, with the households with a disabled member having a greater need for alterations and additions (Table 3).

Table 3. Perceived Need for Additions and Alterations of Households With and Without Disabled Persons. (Asked only of Fort Dodge sample households.)

	Disabled Member	No Disabled Member
	percent	
Need for alt.	54.5	29.4
No need for alt.	45.5	70.6
Total	100.0 (N=44)	100.0 (N=371)

$\chi^2=10.31$ ($p=0.00$)

When the need for housing additions or alterations was not met, the primary constraint for households both with and without a disabled member was a lack of financial resources. Parti-

nent to this discussion is the fact that in this study households with a disabled member had a lower income than households without a disabled member. It is not clear whether the greater need for additions and alterations in households with a disabled member is due to their special needs or to their lower ability to pay. Other constraints operating to prevent needed housing additions and alterations include the lack of time, energy, ability, and skills to make needed alterations.

Consideration of Moving. In this study households with a disabled member did not think of moving any more than did the nondisabled households. The data show that this is not due to any feeling of being unable to cope with moving. They feel capable of moving but choose not to do so. A partial explanation of this reluctance to move is that 81.6 percent of the households with a disabled member own their own home. It is possible to conjecture that adjustments by mobility have already been made.

Table 4. Mobility Expectations of Households With and Without Disabled Members.

	Disabled Member	No Disabled Member
	percent	
Expect to move	30.5	29.9
Expect not to move	69.5	70.1
Total	100.0 (N=118)	100.0 (N=1052)

$\chi^2=0.0004$ ($p=0.98$)

Life Satisfaction. The data show that life satisfaction is significantly lower for households with a disabled member than for households without a disabled member. Respondents in disabled households also felt trapped more frequently by problems. Further analysis indicated that age did not affect life satisfaction but income did. If a household with a disabled member had a middle-

or upper-level income, life satisfaction was not significantly different from households without a disabled member. However, if a household with a disabled member had a low income, life satisfaction was adversely affected. For the household with a disabled member that had a low income there was a significant difference in life satisfaction. To be poor and disabled magnified the dissatisfaction one felt for life.

Housing Satisfaction and Life Satisfaction. The relationship between housing satisfaction and life satisfaction was stronger between households with a disabled member than for households without a disabled member. The data indicates

Table 5. Life Satisfaction of Households With and Without a Disabled Member, With and Without Controls for Income.

A. Life Satisfaction		
	Disabled Member	No Disabled Member
	percent	
Not satisfied	8.0	2.8
Fairly satisfied	46.4	35.8
Very satisfied	45.6	61.4
Total	100.0 (N=125)	100.0 (N=1140)

$\chi^2=17.29$ (p=0.00)

B. Life Satisfaction, Controlling for Income.

	Low Income		Middle Income		High Income	
	Disabled Member	No Disabled Member	Disabled Member	No Disabled Member	Disabled Member	No Disabled Member
	percent		percent			
Not Satisfied	15.2	3.8	3.3	2.9	7.4	3.0
Fairly Satisfied	58.7	45.6	46.7	37.7	22.2	28.1
Very Satisfied	26.1	50.6	50.0	59.4	70.4	68.9
Total	100.0 (N=46)	100.0 (N=261)	100.0 (N=30)	100.0 (N=350)	100.0 (N=27)	100.0 (N=299)

that housing satisfaction is a more important component of life satisfaction for households with a disabled member. This supports the idea that housing is especially important to the well-being of disabled individuals (Table 6).

Conclusions and Policy Recommendations

Previous studies have indicated that residential adaptation is a major need for the disabled. This study found that it is a major concern. This study also found a strong relationship between housing satisfaction and life satisfaction, with housing satisfaction being more important to households with a disabled member than to households without a disabled member. This supports the contention that housing plays a more significant role in the disabled's life than in the life of the nondisabled.

Income seems to be a strong determinant of satisfaction, and the primary reason additions and alterations were not made was the lack of financial resources. Households that had both a disabled member and were also low income households had lower life satisfaction.

The level of life satisfaction of the households with disability was less than the life satisfaction of households without disability. This tends to support the belief that one's attitude toward life may be adversely affected by disability.

The households with a disabled member reported that they were satisfied with their housing

Table 6. Housing Satisfaction and Life Satisfaction of Households With and Without Disabled Persons.

A. Housing Satisfaction and Life Satisfaction of Households With Disabled Persons.

	Housing Satisfaction			
	Very Low	Low	High	Very High
Life Satisfaction				
Not Satisfied	33.3	28.6	6.9	2.5
Fairly Satisfied	16.7	71.4	62.5	17.5
Very Satisfied	50.0	0.0	30.6	80.0
Total	100.0	100.0	100.0	100.0
	(N=6)	(N=7)	(N=72)	(N=40)

Gamma = .68

B. Housing Satisfaction and Life Satisfaction of Households Without a Disabled Member.

	Housing Satisfaction			
	Very Low	Low	High	Very High
Life Satisfaction				
Not Satisfied	7.5	10.5	2.5	1.6
Fairly Satisfied	17.5	54.4	43.1	21.6
Very Satisfied	75.0	35.1	54.4	76.8
Total	100.0	100.0	100.0	100.0
	(N=40)	(N=57)	(N=671)	(N=371)

Gamma = .38

even though their housing was of poorer quality than the housing of households without a disabled member.

As housing satisfaction does affect life satisfaction, attention needs to be given to housing when considering the rehabilitation of disabled persons and their integration into society. As the psychological impact of the handicap is determined to a large part by the individual's perception of the handicap, housing could reduce the impact by increasing the ability of the person to function independently, and thus improving the perception of the self. Future housing and rehabilitation policies as well as research efforts need to assess the situation of the disabled and address policy alternatives that would help to diminish the effects of the disability. Housing seems

to be an important means to this goal of improving the life of the disabled.

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