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Policy Brief

Quality of Life for All Ages, By Design

A Conversation with Patricia Moore

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Patricia Moore is an internationally-renowned gerontologist and designer. She holds undergraduate degrees in Industrial, Environmental, and Communication Design from the Rochester Institute of Technology. She also completed a degree in Advanced Studies in Biomechanics at New York University's Medical School and Rush Institute of Rehabilitation Medicine, and holds graduate degrees in Psychology and Counseling, and in Human Development, with an emphasis in Social Gerontology, from Columbia University. Patricia Moore is President of MooreDesign, Associates, LLC in Phoenix, Arizona.

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Credit: Helen Marcus NYC

Patricia Moore is an internationally-renowned gerontologist and designer. During her career, Moore has worked with a wide range of clients, including AT&T, Boeing, Citibank, General Electric, Johnson & Johnson, Kaiser Permanente, Kraft, NASA, Pfizer and Sarel Laboratories. She is a frequent international lecturer and media guest. In addition to her 1985 book, *Disguised: A True Story*, she recently published a book entitled *The Business of Aging*. She has received numerous awards from various organizations, including being named by a consortium of news editors and organizations in 2000 as one of the 100 most important women in America and being featured on ABC World News as one of 50 Americans defining the new millenium.

On November 3, 2011, Patricia Moore presented the Syracuse Seminar on Aging to a packed audience of over 250 faculty, students, and community members. She delivered an engaging lecture on "Quality of life for all ages, by design". Afterwards Janet Wilmoth, Director of the Syracuse University Aging Studies Institute, and Patricia Moore had a chance to sit down and talk about her path-breaking career, ability-based design, and aging in America.

Janet: *You originally trained as an Industrial Designer. What led you to Gerontology?*

Pattie: I grew up in Buffalo, New York, in a home that included my two sisters, parents and grandmother. Our neighborhood consisted primarily of elders, the majority widows. In essence, my sisters and I had more "grandparents" than anyone could ever hope! It was wonderful to have "sitters" who had the gift of patience and a life full of remarkable experiences, for "story time". The precious hours I spent with these incredible individuals filled me with a deep love and respect for my elders.

So even though my undergraduate training was for the realm of product and environmental design, an acceptance and awareness of the various needs and wishes of my elders was always key in my work as a designer. When I began my career in New York City at Loewy International, in 1974, I convinced Mr. Loewy, (1893-1986), who is credited as the father of American product design, that attending medical school [New York University], would better prepare me to create solutions for consumers of all ages and abilities. As he was in his eighties, the plan resonated with him.

It wasn't too much later that the education I received in medicine made me aware that I needed to pursue training in social science, if I were to be truly effective as a designer, so I attended Columbia

University where I completed coursework in Psychology and Gerontology. My fellow designers thought I was absolutely mad, to be wasting so much effort on advanced studies, outside of design. But I am pleased to note that now every major design consultancy in the world employs social scientists to provide the best outcomes.

Janet: *What inspired you to conceive of your Empathic Model?*

Pattie: I learned about graceful aging mostly from my grandmother, Margaret Mary Moore. When Grandma would wake in the morning, my sisters and I were allowed to go into her room and sit on the huge brass feather bed that she brought with her from Ireland. We would take our places and watch enthralled as she went through her morning toilette. She had a beautiful dressing table and a collection of all of a lady's essential implements, lovely brushes and combs, with stunningly elaborate silver handles. She methodically went through a routine of making herself ready for the new day. When she finished, she would turn around, smile at us broadly and say, so convincingly, "There! An ever-changing work of art!" And, so she was, a beautiful work of art.

Imagine my disappointment when I went to New York City to start practicing as an industrial designer and found that people were not as happy about growing older as my beloved grandmother. If anything, most women appeared terrified by the eventuality. Everywhere, I saw evidence that to be an elder was not a desirable goal and that to be older was enormously feared. I learned quickly the prejudice and power of ageism in affecting quality of life, because I found it in my workplace. I found it in architecture and design.

Whenever we met to discuss a design brief, consumer age and level of ability was never discussed or encouraged as a concern. We were told that ideally we were designing for people under

the age of 35, Caucasian, male, living on Long Island with 2.3 children, probably a big dog, and a large mortgage. We were told that only younger people were ideal consumers. And we were told it was our job to satisfy them.

I was the only female in an office of 350 architects, designers and engineers, and so, it was with more than a little bit of timidity that I would raise my hand at those meetings and ask, "But, what about people like my grandmother?" Then I would hear the groans of disagreement. Eyes would roll, heads would hit the table and my colleagues would chastise, "Pattie, we don't design for *those people*!"

Those people? It haunted me. It made no sense. If the world's largest and most renowned design firm was not considering "those people", then who was? What chance did any of us have for aging grace if elders and people of all ability levels were not part of the formula of business and design? That was 1974.

I knew I had to do something to change our course, but I had no idea how until I met NBC make-up designer Barbara Kelly in 1979. She was responsible for creating some of Saturday Night Live's most iconic characters for Chevy Chase, John Belushi, and Gilda Radner. After I learned about her work, I innocently asked if she could make me look like an elder and she said it would be no problem!

I was less convinced, but after hours of face casts and preparation the day came when I looked into the mirror and saw my beloved grandmother. But actually it was me.

Credit: Bruce Byers NYC

Janet: *After nearly four years of living as elder women, what did you learn?*

Pattie: It might be easier to address what I didn't learn in my life as an elder. In character, I traveled to 116 cities, in 14 states and 2 Canadian Provinces, from May 1979 until October of 1982. Every

minute of every day was filled with the same activities and actions, challenges and chores that any of us accomplish and confront, at any age.

I rode every form of mass transit, including a hydrofoil, ate in modest coffee shops and in grand restaurants. I went to movies and the theater. I made friends. I lost friends, to illness and death. I laughed. I cried. I was treated kindly and very cruelly. I was short-changed by unscrupulous clerks and over-changed by caring cab drivers.

When I was in the character of a wealthy matron, I was treated with exceptional deference, even while I was rude and outrageously demanding. When I lived as a homeless bag lady, I was frequently denied the dignity of utilizing a café's toilet and made to urinate in the relative privacy of park bushes.

Credit: Bruce Byers NYC

I don't believe that my apparent age was the driver with these two social extremes, but rather it was the presence or absence of wealth that determined how people interacted with me. This is a sad, but true indictment on our society's values.

When I was dressed in the guise of a middle-income woman, someone who resembled my grandmother, I experienced the truest reactions to my apparent age and level of ability. Sometimes people were very kind and gracious, assisting me in shops, helping me board a bus safely, or exchanging pleasantries on a street. But just as often, people ignored my quiet requests for help and treated me rudely, if they engaged with me at all.

On two occasions I was mugged, while in the middle-income persona. One of those episodes also involved a savage beating, by a gang of boys, which nearly cost me my life and did rob me of the capacity to bare a child. Nightmares of that attack still plague me and I now understand the ferocity of elder abuse, in a way that is all but impossible for most younger people.

Regardless of the pain and the disillusionment I suffered, I remain very enthusiastic and positive about the experience of a long life. I am equally aware of the ever more complex requirements for support and understanding as we age. While great strides are being made for graceful, healthy aging in the U.S. and throughout the world, the burgeoning number of elders presents a need for constant creativity and dedication to the goal of a quality life for all ages.

I think this is a particularly important time for students pursuing their educations for careers in design, healthcare, and the social sciences. There is so much need and so much opportunity. I have every faith in their desire and passion to provide for the elders of today, and for me, when once again I am eighty-five.

Janet: *You promote a careful use of language when discussing aging. Why do you feel so strongly about labels?*

Pattie: Let me give you my mantras. First and foremost, no one is disabled. No one is handicapped, unless you're a golfer or racing a horse. We all of us have unique capacity. We, all of us, have some level of ability. But we've fallen into a very bad habit of labeling people on the basis of our prejudicial view of what some feel is "normal". We fail to focus on what a person can do and instead relegate them on the basis of what they can't do.

As designers, we don't design for what someone isn't capable of doing. Rather, we design on the basis of what a person needs and wants and is able to manage. By focusing on ability levels and not chronologic age, we are addressing the actual situation and not insinuating a message or meaning.

When we insist on labeling a person as "old and crippled" we are failing to see that person as an individual deserving of goods, services and respect. The appraisals we assign with pejorative terms create and perpetuate the inequity of "them" and "us".

Likewise, the use of disparaging and separatist terms like "old lady" and growing "old", instead of "elder" and "growing older", strike me in the same way. We all have an age. Some of us have more years than others. The only way to accurately call someone "young" or "old" is to use a median age.

It's much easier and in my thinking, much more proper, to speak as plainly as possible about an individual and people, unless of course, we are specifically referring to cohorts and age groups in our work. A patient presents as "elderly", but a person in late life is an elder. The distinction is important to the maintenance of autonomy and self-esteem.

Many years ago, I was part of a group who assisted with the alteration of the standard for reporting a person's age in the *NY Times*. Instead of stating "Patricia Moore, 59 years old", the new forms are either "Patricia Moore, age 59" or "Patricia Moore, 59". A subtle, but important change in our language can encourage significant alterations in attitudes towards age and aging.

Janet: *You advocate for an enhanced "Consumer Model for Aging"? Why?*

Pattie: I believe that the reason the corporate community hasn't necessarily viewed elders or late life consumer issues and needs as "their" business is in great part because of a misguided assumption that people become "patients" at a certain age, the responsibility of the medical community, and thereby, no longer valued consumers. This "Medical Model" of aging is one that has resulted in a dirth of consumer-oriented solutions for elders and their families.

None of us deserves to come to a point in time where we can't do things we want to do, wish to do, dream to do because products and environments fail to meet our cognitive and physical abilities. But because research and design doesn't always include the needs of late life, when we need compensatory solutions the most, the accommodations are often lacking. A consumer model for aging challenges us to rethink aging as a consumer concern, as a challenge we can meet, and an opportunity that is ours to define by design. Remember always, people are very innovative. We might make a thing a certain way for a certain purpose and they are going to do something else. Our role as designers is to provide pathways, in addressing the needs of individuals. Consumers can learn all sorts of new tricks and compensations and manage their lives and maintain their lifestyle, if we give them the appropriate tools, if we design. Each day should be filled with the quality of design

that makes no one feel any less at any one time. Some of us will come to a point in the lifespan where we'll find our mere survival, our ability to thrive compromised, not just by design, but by poor health, by acute situations. And let us remember, most of all, that none of us deserves to feel forgotten. None of us deserves to have anything less than the best of design.

Janet: *How does design focused on "ability" better serve consumers across the course of their lives?*

Pattie: We woke this morning, either with the sun or a nasty machine that gently chirped or blared, rousing us out of slumber. We made our way from our bed to the bathroom, or perhaps to the kitchen, to start the coffee before our shower. We picked out an outfit, dressed, and styled our hair.

We made our way to school, or work, or to a volunteer assignment. We all traveled by some conveyance, maybe by foot, maybe with wheels. Some of us flew to work. We prepared or were served food. We cleaned our home and maintained a garden. We communicated telephonically, via computer, or chatted with a neighbor when we walked our dog. We watched TV, saw a movie, or read a best seller before turning out the light and ending another day.

Regardless of how we define our lives, we are surrounded by design. We are reliant on design. We are at the mercy of design.

In late life, self-determination, by design, becomes more complex and difficult if we can no longer manage our daily activities in the way or with the means that we had when we were younger, or more well. If products and services aren't available to assist us in compensating for skills lost to chronic conditions or illness, then our quality of life is impacted.

Far too many of the devices and products that are currently being offered to elders and their care-givers are prosthetics and not consumer goods. Durable "medical equipment" for food preparation, mobility, toileting and all of our tasks of everyday living reinforces an attitude and belief that we are patients and not valued consumers who have distinct requirements for independent lifestyles. Properly designed, our homes and communities provide for equality, universal solutions for every citizen and consumer.

Design at its best should create situations of thriving, of success, not mere survival. Design at its best enables us, empowers us, embraces us and tells us how very important we are. Just like snowflakes, no two of us are alike. And in that uniqueness, we're all the same in our desire and in our right to live a life bolstered by appropriate design.

Raymond Loewy always said "Never leave well enough alone." I hope that all of us associated with the creation and development of environments, products and services, for every stage of life, take that challenge to heart. I believe that this mission is especially vital for our dear students, who are facing the enormous global responsibility of meeting the needs of the largest number of elders ever experienced.

The Boomer cohort is demanding the opportunity to be able to select and maintain the "nest" of their choice, for all of their years. With the agenda of "aging in place", people are asking of us to provide a safe home, a home that meets all of their physical and emotional needs, their monetary level, and their social realm. The message is clear. Give me something that I can call my own. It might be a flat, where I live by myself. Or a house, where I live with someone else, or it might be a congregate care setting. But, let it be my home, first and foremost.

Janet: *How do you think baby boomers are redefining aging?*

Pattie: Lifestyles are changing. Right now, many baby boomers are caring for aging parents. Many are moving into much smaller homes, back to the city centers, and taking an efficiency apartment, a one-bedroom, and just delighting in the fact that they're spending what time and money they do have on going to the theater, on enjoying new foods, and socializing with friends. They are recognizing that real wealth comes in your friends and your relationships and the quality of your life and your work.

The boomers are more accustomed to technologies. They're more proficient. They're more willing and they're more able to utilize devices, gizmos, and gadgets than their parents. And that will be a big help to us, by design. And then of course, younger cohorts will be insistent on answers from technology. But we can never give up the human factor. And we certainly can't negate the importance of the relationships with which we live and thrive.

Janet: *Relationships figure prominently in your research and design efforts. What other factors do you view as being important for successful aging?*

Pattie: In order for us to be successful in meeting the growing needs of a global population of elders we have to look at changing the medical model of aging. It's broken. It's not working. And if we insist on defining people as patients instead of reveling in their capacity as persons, none of us can anticipate a future full of quality and joy.

Perhaps the most important relationship any of us experiences in our lifespan is that balance of the "consumer" and "patient"

aspects. The "them" and "us" divisiveness that we face when we are separated from the whole, due to our age, our health, or our wealth is particularly cruel and immoral.

I'm very proud to have been part of the team that put into place the Americans with Disabilities Act, although I was quite sad that we couldn't call it the Americans Abilities Act. The law actually reinforces the unfortunate separation that defines so many lives.

By being labeled as disabled, a person is viewed as abnormal, injured, or less than whole. If we can manage to view all individuals as equal, it becomes less difficult to support the eradication of the existence of "haves" and "have-nots". We have to manage and maintain a careful balance of the differences and distinctions that define us. Whenever a hierarchy is in operation, someone will suffer.

Janet: *The importance of developing lifelong support networks is one of the most vital business opportunities in your work. Can you share some examples?*

Pattie: Our charter is one for the lifespan, from day one to day none. By providing for and bolstering the most natural and traditional relationships: Parent/Child, Child/Grandparent, Family/ Friends, businesses and governments create the best foundation for healthy and happy lifespans. Empowering citizens and consumers presents us with the best opportunity for successful cultures, worldwide.

What we encourage companies to embrace is research and development that focuses on the "use-ability" level of products and services. This philosophy pushes beyond the basic offering of "accessibility" and recognizes that being able to access an offering is only part of consumer requirements. Just because we can make

our way and access a product or place doesn't mean that we can manage, or utilize it.

Computers and telecommunication equipment are vital features in the developed world. If you can afford these goods, you are only half way to the effectiveness of them. We learn this every time a company launches software or hardware that hasn't been developed with the needs of consumers of all ability levels.

The "bells and whistles" that have been added to basic telephone design, for example, often serve to confound, and not comfort, far too many consumers who simply want to be able to make a call and speak with someone. The pendulum has swung very far to the one side just now and I believe that the growing awareness that companies are acquiring about the need for inclusivity in all design will soon move us to a more centered approach.

We are close to living in a time without cash for transactions, postal mail for communication, and printed formats for news and entertainment. But until we have accounted for consumers of all ability levels, including financial means, we can't assume that the only way to communicate, read and shop is by a "smart" phone or screen.

Janet: *If you could wave a magic wand, what would you change about the current course of Aging in America?*

Pattie: I'd like every politician and every corporation to recognize that it is good business to empower every individual with appropriate goods and services for the entirety of their lifespan. Not only is that goal good governance, it is good business.

We need to understand the importance and power of the fact that the formula for success involves addressing and meeting the needs of both sides of the coin. One is the role and requirements of

the "Primary Purchaser", the individual who makes choices and decisions and pays for them. The other is the "Primary User", the person who benefits from the selections of the purchaser. We have to recognize that primary purchasers come in all shapes, sizes, and ages. The primary purchaser is essential, but is often not the primary user. We need to consider the needs and desires of both.

It strikes me that companies are very eager to provide for us at the beginning of our lives. When a couple learns of a precious bundle on the way, there is joyous planning and preparation. Baby showers are held, rooms are readied, and every creature comfort we can provide is put in place for the new little one. The infant is adored. Dirty diapers are no real problem. Sleepless nights, while not desirable, are met with warm bottles and floor walking. There isn't anything we wouldn't do for our child.

But that same enthusiasm is often lacking at the opposite end of the life cycle, when it is an elder who needs assistance with feeding, bathing and the most basic of daily needs. If we could encourage the same enthusiasm for late life consumer needs as we have put into play for the beginning of life, everyone would benefit.

While commerce is driven by the two-sided coin of the "Primary Purchaser" and the "Primary User", consumers can define the quality of their lives by assessing and balancing the level and number of choices that they have each day. Without choice, there is very little opportunity or hope for "control" of our lifestyle. If you don't have choice, you can't have control.

Janet: *How do you feel about becoming 85, again?*

Pattie: I hope that I am given the opportunity! Both of my parents are eighty-four and my mother's father lived till ninety-five, so it would appear that I have heredity on my side.

I openly admit to feeling anxious about how I will manage without adult children as care-givers, considering how much time and effort my sisters and I currently dedicate to the well-being of our mother and father.

Addressing and meeting the challenges of "aging in place" are currently among my most earnest areas of effort, so I have to trust that adequate options will be in place when I look in the mirror and see someone very familiar again.

Credit: Bruce Byers NYC

Janet: *When you reflect on all of the incredible experiences you have had in your career, what vision do you have for the future?*

Pattie: I believe that we will see a much more integrated, community-based array of housing options in place, within the next twenty years. The rapid development of "Naturally Occurring Retirement Communities" [NORCs] are revitalizing towns hit hard by the housing crisis and it is has become a win-win for areas with vacant real estate that can be repurposed and support the need for community-based assisted living opportunities.

I also trust that mass transit solutions will include more "door-to-door" services and that automotive engineering will support safer and more utilitarian designs that can be utilized well into late life and address the needs of people who cannot access other modes of transport.

I think architects, designers and engineers will continue to develop lifespan concepts that meet the needs of individuals, as well as extended families, and their communities, providing for a high quality of life, with ample choices and options for all levels of health and wealth.

We are already witnessing a more accepting and natural view of aging, thanks in great part to what I like to call the "Betty White Effect". It is remarkable that one actress has had such a significant impact on the view of positive aging. With more and more of these examples, I hope that we will eventually reduce or stop our current level of "nipping, tucking, and lipo-sucking" and embrace natural aging as acceptable and beautiful. While I am grateful that we have medical interventions that can restore our faces after catastrophic injuries, I find it quite disturbing that we are encouraged to cut up our bodies into someone else's view of beauty.

It is certainly time for all of these considerations and more, for us to listen not just to our heads, but to our hearts, as we design and build for the future, today. Using inclusivity as our mantra and our mandate, I am certain that we can create opportunities and solutions for all people, as equals.

There is no person who deserves to come to life's end without joy, without the knowledge that they've made a difference, and that they count. I know that it is by design, with each of us providing not only for ourselves, but for each other, that we can achieve what today might appear as a utopian dream. I am that much of a "Pollyanna"!

Janet: *Any final thoughts?*

Pattie: My sister, Colleen plays the traditional Irish Harp in hospitals and hospices. This harp has an amazing capacity of soothing pain, reducing labored breathing and allowing for the reduction of medications that would otherwise render a person unable to communicate with loved ones. Often, she is invited to play at the funeral or memorial, after a person has passed.

Recently, she shared a letter that a little boy read at the funeral of his beloved grandfather. It is a beautiful example of the love between a child and an elder and a message that reminds me why our work on behalf of our elders is so very essential.

He titled it, "Me and My Grandpa":

> "The best thing about my Grandpa was how he always gave me a great big hug when I got to see him. Whenever I did see him, a hug was guaranteed. When he got sick, the hugs got more gentle. And then one day, it was my job to do the hugging. Before Grandpa died, he gave me a very special

> gift. He gave me Venus. He told me Venus would always be there for me and that I could always see Venus because it was the brightest planet in the sky. So now when I see Venus I know that my Grandpa is telling me he loves me more than the universe."

I dream of a day when all of our elders are provided with the same deep love and respect that child had for his grandfather. I hope for a day when all of us can happily look forward to the future, without fear for what will become of us. And I believe that with our dedicated efforts, that time will come.