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Repercussions of Mortgage Foreclosure: Loss of Place Attachment, Adult Roles, and Trust

Sheri Pickover and Linda H. Slowik

Clients coping with mortgage foreclosure suffer from multiple losses, including the loss of placement attachment, neighborhood, and trust in organizations. These losses can result in depression, anxiety, suicidal ideation, and complicated grief. Counselors can enhance treatment by integrating organizational role and attachment theory.

The late-2000s U.S. recession has created many economic and social problems that continue to reverberate throughout society. Unique to this economic downturn is not just the loss of jobs and financial security but also forced home loss brought on by the dramatic increase in mortgage foreclosures. Few structures are as important to the safety and security of humans as the home (Rohe, Van Zandt, & McCarthy, 2002). Home ownership is related to both psychological and physical health; the benefits of homeownership are well documented and include increased access to opportunity, improved physical health, and improved child behavior (Rohe et al., 2002). Home ownership also contributes in a positive way to how families, neighborhoods, and communities view the future (Grinstein-Weiss et al., 2009).

For the past 100 years, home ownership has been a symbol of economic security, with families believing that a home would provide not only shelter but also long-term economic security. However, according to RealtyTrac (2010), one out of every 501 housing units in the United States is currently in mortgage foreclosure. This foreclosure wave has affected all members of the socioeconomic strata, but urban neighborhoods have borne the brunt of foreclosures to a greater extent than suburban and rural neighborhoods because the bulk of predatory subprime mortgage lending occurred in racial/ethnic minority and low-income neighborhoods (Gerardi & Willen, 2009; Pedersen & Delgadillo, 2007). For

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example, in urban areas such as Wayne County, Michigan, one out of every 196 housing units is in foreclosure, and in Los Angeles County, California, one out of every 264 housing units is in foreclosure (RealtyTrac, 2010). Logically, the impact of this home loss on individuals extends beyond simple financial stress. Forced home loss aggravates already complicated emotional stressors that are exacerbated by resource deprivation, resulting in increased physical ailments and mental health complaints (Cutrona, Wallace, & Wesner, 2006; Hobfall, Johnson, Ennis, & Jackson, 2003; Kushel, Gupta, Gee, & Haas, 2006). As we discuss in this article, these effects may be related to home loss because forced home loss negatively affects place attachment and breaches expectations of trustworthiness of organizations such as banks and mortgage lenders. The result could be depression and unresolved grief (Fried, 2000; Swenson, 1998; Taylor, Pevalin, & Todd, 2007). In fact, forced home loss is considered one of the most serious causes of psychological distress (Fried, 2000).

Our current literature review takes an interdisciplinary approach to understanding the consequences of forced home loss, using the perspectives of attachment, complicated grief, and organizational role theory to help frame the process and its effects on individuals, families, and communities. The goal is to provide mental health counselors with a framework that captures the affective dynamics of this process and the layers of concerns of individuals who have been forced to leave their homes.

PLACE ATTACHMENT

An important consequence of forced home loss is the loss of place stability, which is best understood in the context of place attachment. Place attachment refers to the affective ties humans develop with the material environment (Long & Perkins, 2007). Such ties play an integral role in people's emotional and physical health (Swenson, 1998), are necessary for the establishment of community and neighborhood bonds, and increase as financial and personal investment in the home increase (Long & Perkins, 2007).

Place attachment is grounded in Bowlby's (1973) attachment theory, which refers to the way a set of behaviors allows proximity to a caregiver and results in the meeting of physical and emotional needs. Namely, a child with a secure attachment system internalizes a model of other as responsive and caring and internalizes a model of self as worthy (Bowlby, 1980). However, the process of attachment does not occur in a vacuum; it occurs in places and, more specifically, in homes. Thus, humans develop attachments not only to attachment figures but also to the places where the attachments occur (Fried, 2000). Just as the securely attached child internalizes a model of other as responsive and caring, the child internalizes the attachment place as safe and secure. For children and, later, adults, these places become the depository for representations of people's attachments, where they develop their identities, accomplishments, distinctiveness, and self-control (Kleine, Kleine, & Allen, 1995).

Of particular relevance for adults, the longer they stay in these places, the more intense their emotional bond and the more the place becomes an extension of their personal identities (Knez, 2005). The home can become a symbol of self and a manifestation of inner reality (Swenson, 1998). Homes also signify status and help solidify group identity based on neighborhood (Fried, 2000). In fact, the attachment to home is stronger than the attachment to the larger neighborhood (Lewicka, 2010). Successfully maneuvering through the process of becoming a homeowner, therefore, has significance both to the individual with regard to developing and maintaining the sense of self and as a demonstration of the individual's capabilities as an effective member of society. To better understand how forced home loss contributes to stress, one can use adult role theory to understand the relationship between the individual and the financial institutions involved in the foreclosure process.

ORGANIZATIONAL ROLE THEORY AND FORCED HOME LOSS

Role theory can be used to frame the homeownership and mortgaging process and its unfolding over time. People seek to enhance their personal financial well-being and security, as well as to conform to societal norms, by purchasing or refinancing a home. This can be interpreted in the context of role theory (Katz & Kahn, 1978), as the individual enacts roles in the home mortgage process, such as customer, purchaser, and ultimately, mortgagee. According to role theory, an individual's behavior in any particular role is consistent with his or her expectations for that role. The individual is aware of these expectations because, over time, these expectations are communicated by family members, friends, colleagues, and institutional representatives, becoming an integrated set of beliefs and expectations. In enacting a role, the individual uses these expectations of appropriate behavior as he or she takes part in a script representing an understanding of the unfolding of the mortgaging process.

The mortgaging, foreclosure, and forced home-loss process unfolds over time, with different roles enacted by the individual at various stages of the process. The homeowner enters into the relationship with the lender first as a customer, then a mortgagee, and finally, sadly, as a victim of the foreclosure process. An important part of this dynamic concerns changes in affectivity over the course of time. Such changes have negative implications for future interactions with financial institutions, as we discuss later.

AN OVERVIEW OF ROLE EXPECTATIONS

A person first enters into the homeowner role as a mortgage customer, a complex role with legal as well as psychological dimensions that take the form of a psychological contract (Rousseau, 1995). The psychological contract includes unwritten, and sometimes implied, agreements between the parties. It captures

the implied and unspoken expectations that are subtly communicated in the mortgagee–lender relationship and can help explain why the mortgagee might expect the lender to be fair and trustworthy. In a legally complex transaction, it is typical for the mortgagee to trust the lender, which is an affective position the lender encourages through a professional demeanor, formal appearance, and tasteful office setting. Such cues encourage the mortgagee to develop institutional trust (Cowles, 1997), which is trust based on the idea that the institution is inherently trustworthy. For example, a person buying gas at a gas station does not question the accuracy of the total bill or the amount of gas received. Institutional trust is related to reputation, regulation, and professionalism (Cowles, 1997). Thus, in the mortgage acquisition script as it has traditionally been manifested in society, the mortgagee’s role includes having trust in the lender, which facilitates more specific behaviors such as the signing of myriad contracts at closing, as directed by the lender.

Subsequently, the mortgagee’s role is to pay according to the contract. This might not happen as planned for any number of reasons, including but not limited to the following: job loss, other unforeseen financial difficulties, a poorly understood and therefore unexpectedly high mortgage rate increase, or a strategic move to stop payments. In any case, the role of the mortgagee becomes ill defined during this time of financial difficulty because of the mortgagee’s failure to conform to the expectation that he or she would pay as agreed. In the context of continued failure to pay, the mortgagee’s role takes on clarity, in legal terms, as his or her home moves toward foreclosure. It is at this point that the psychological contract takes on more importance, in that the mortgagee may believe the contract was not upheld because expectations that the lender would be fair have not been fulfilled. The mortgagee may feel victimized by the lender and lose trust in the lender (Rousseau & Parks, 1993). Such perceptions can be expected to be magnified and reinforced to the extent that the mortgagee sees family members, friends, and neighbors experiencing similar circumstances.

Thus, the enactment of roles in the mortgaging process unfolds as the mortgagee is encouraged to enter into the legal contract, frequently without legal counsel or even reading the documents. This is because that is the mortgagee’s role, as supported by the psychological contract and institutional trust.

AFFECTIVE REACTIONS TO THE PROCESS

When a mortgagee fails to pay, this violation of the legal contract initiates a sequence of actions and events that can eventually end in foreclosure. The mortgagee’s experience of these events over the course of time can be better understood through the important concept of affectivity. In general, affectivity refers to positive or negative emotional responses (Brief, Burke, George, Robinson, & Webster, 1988; Watson & Tellegen, 1985). It is an important component that enhances one’s understanding of the implications of home

loss and loss of attachment, because it helps clarify the dynamic changes over time and the salience of grief as an end result of loss of home and attachment.

Affectivity varies over the course of the home acquisition–ownership–loss process. The loan initiation begins with identifying a potential lender; providing private information to the mortgage lender; legally signing off on a long, complex contract; and then making a series of comparatively large payments to the lender (see Figure 1). Failure to pay can result in foreclosure and forced movement from the home. As shown in Figure 1, there are a series of likely experiences of affectivity associated with these actions, beginning with high expectations, positive affect, a sense of self-efficacy, and trust in the lender. Depending on the reasons underlying the mortgagee’s failure to pay, negative affect related to stress replaces the positive affect. Logically, it can be expected that if the failure to pay is related to overwhelming life events such as job loss or unanticipated rate resetting, this stress will be that much greater. Foreclosure may require 5 to 8 months or longer to reach resolution, creating an ongoing source of stress and negative affect.

When the relationship is troubled by the mortgagee’s inability to pay, the mortgagee who once experienced a sense of self-efficacy from having made a good deal or purchased a fine house may now be stressed and experiencing negative affect such as worry and doubt. First, the mortgagee may find that the loan is sold, so the financial institution is not the one that initially wrote the loan (Morgenson & Martin, 2010). Second, when the mortgagee is in need of understanding and forbearance, rather than experiencing something he or she can work with, the mortgagee may find the institution bureaucratically complex, impersonal, and difficult (Cowles, 1997; Morgenson & Martin, 2010). This may compound the mortgagee’s extant stress from having financial difficulties.

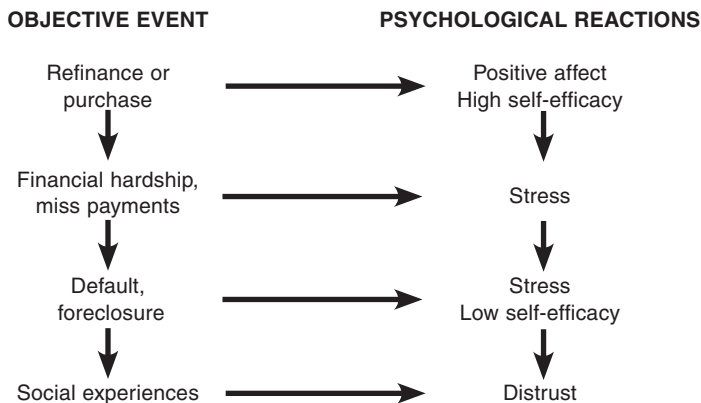


FIGURE 1

Objective Events and Expected Psychological Outcomes for Individuals During the Process of Mortgage Acquisition and Loss

Once the foreclosure process concludes with the mortgagee leaving the home, he or she is negatively affected with practical problems, such as resettling in a new location and having a lower credit rating, and may experience negative psychological consequences. Rumination on the failure of the home-owning experience may result in grief as a result of the loss of place attachment, as well as a loss of trust in financial institutions.

LOSS OF TRUST IN INSTITUTIONS

The literature on trust suggests that the lender may attempt to reduce the negative impact on the displaced homeowner. For example, more communication has been shown to facilitate forgiveness (Rousseau 1995, 1996). In addition, efforts on the part of the financial institution to engage empathetically with the mortgagee may facilitate recovery (Kim, Dirks, & Cooper, 2009).

In the absence or ineffectiveness of such strategies, the negative outcome could be that the displaced homeowner may perceive that the psychological contract with the financial institution was violated (Robinson, Kraatz, & Rousseau, 1994). The homeowner may be distrustful of future possible lenders (Cowles, 1997; Deery, Iverson, & Walsh, 2006; Williamson, 1993). The homeowner may have reduced self-efficacy in conducting similar agreements in the future, questioning his or her personal ability to effectively negotiate a new mortgage.

An interesting question is what might happen in the future for these individuals, their families, and their communities. Individuals who suffer unanticipated negative outcomes when dealing with financial institutions could be expected to avoid future interactions, which would reduce the quality and number of opportunities to improve their financial self-efficacy. This would further erode the potential for recovery. Moreover, as children observe their parents engaging in these negative activities dealing with the fallout of their household crisis, they could be expected to develop a similar sense of distrust and antipathy toward banks and financial institutions.

All these factors lead to chronic mental health concerns among individuals and families, especially those at higher risk for mortgage foreclosure, such as first-time home buyers and racial and ethnic minorities. First-time home buyers are at risk because they may underestimate needed costs to maintain a home, and racial and ethnic minorities are at risk because they may have lower incomes to support housing, less access to mortgage information because of language barriers, and transportation or education issues. As a result, these groups may be more susceptible to predatory lending (Delgadillo & Gallagher, 2006; Gerardi & Willen, 2009; Pedersen & Delgadillo, 2007).

MENTAL HEALTH IMPLICATIONS OF FORECLOSURE

When individuals suffer forced home loss and the resulting loss of adult roles and institutional trust, the consequences are disastrous for their emotional and

physical health and for the community's ability to rebuild (Saegert, Libman, & Fields, 2009). Adults at risk for foreclosure, such as racial and ethnic minorities, also face constant threats to their mental health because threats to their resources are so pervasive. Even when faced with a resource gain, such as governmental support, any subsequent resource loss compounds stress from previous losses and wipes out any benefit of the gain. In other words, while these adults may move one step forward, the next loss sends them three steps back. This stress is chronic and pervasive, because these families are surrounded by the constant threat of loss of resources (Hobfall et al., 2003; Matheson et al., 2006).

The emotional and physical impact of financial stress and home loss are well documented. Home loss causes threats to emotional and physical security, increases chronic stress, and increases risk of depression (Field, Orsini, Gavish, & Packman, 2009; Matheson et al., 2006). Losing a home results in feelings of instability in daily life (Ross & Squires, 2011), and experiencing a financial crisis can lead to increased risk of suicidal ideation (Meltzer et al., 2011). Findings from research show that the threat of foreclosure alone may lead to suicidal ideation and/or depression severe enough to affect daily living (Saegert et al., 2009). A person facing mortgage foreclosure might feel humiliation and shame, which would prevent him or her from seeking financial assistance. The result of failing to seek help often exacerbates the financial crisis, leading to an increased lack of resources; thus, the shame–resource loss relationship becomes cyclical (Meltzer et al., 2011). The loss of a home can also result in feeling exhausted or feeling an increased emotional burden (Schulz, Hebert, & Boerner, 2008). Normal responses include sadness, guilt, anger, crying, and existential concerns such as questioning the reason for the loss (Love, 2007).

Individuals facing mortgage foreclosure are more likely to suffer negative effects to their physical health, such as an increase in binge drinking or other substance abuse issues, and experience family disintegration and increased divorce rates (Gerardi & Willen, 2009; Pollack & Lynch, 2009; Ross & Squires, 2011). In fact, ill physical health may be a contributing factor in the financial crisis, which is then worsened by the impending loss of place stability.

Individuals living in lower income urban areas who are most likely to face foreclosure suffer from depression at higher rates than individuals in wealthier neighborhoods after an adverse event such as mortgage foreclosure. This depression becomes cyclical, with decreased neighborhood bonds leading to increased depression (Cutrona et al., 2006). As a result, racial and ethnic minorities who experience a home loss suffer more catastrophic concerns because of the lack of available social support, resources, and access to community (Hobfall et al., 2003).

Individuals respond to placement attachment loss, loss of adult role, and/or loss of organizational trust as they do with any other attachment loss, with grief. The subsequent grief may become paralyzing; therefore, mental health professionals will benefit from viewing forced home loss from a grief and mourning perspective (Fried, 2000). Loss results in anger and despair—anger from the desire to disbelieve the loss, and despair as a failure to prevent the

loss (Bowlby, 1973, 1980). Loss of any kind, but especially loss of attachment, is devastating. The distress and emotional disability are long lasting (Bowlby, 1980). Moreover, individuals with insecure attachment styles may experience further difficulty regulating emotions and may develop long-standing feelings of helplessness indicative of complicated grief (Field et al., 2009).

Whereas grief is a normal reaction to any loss, complicated grief occurs when the normal responses to loss persist beyond 14 months and there is a severe impact to daily functioning. The symptoms may include intrusive fantasies, withdrawal from social support systems, ongoing sleep disturbance, or loss of interest in daily activities (Kersting et al., 2007). Once faced with this grief, adults with depression or suicidal ideation may seek help but be reluctant to disclose the extent of their emotional anguish.

RECOMMENDATIONS FOR MENTAL HEALTH COUNSELORS

Our purpose in this article was to frame forced home loss in the context of place attachment, mental health concerns, and adult roles to improve the mental health counselors' understanding of the complexity of issues bombarding a client facing forced home loss. By elaborating on the various ways losses occur, we seek to help counselors unpack the difficulties related to the experience of forced home loss.

Our research suggests that mental health counselors approach clients who lose their home as victims suffering multiple losses that go beyond merely losing a home. These clients have lost the place where they started relationships, the neighborhood that had provided consistency and community, their role as a homeowner and competent member of society, and their trust in organizations. Our recommendations pertain to the assessment of possible problems as well as to interventions and approaches to take in facilitating recovery.

Assessment

Our research suggests that mental health counselors should routinely screen for depression and suicidal ideation when treating clients facing mortgage foreclosure. They should also assess for signs of complicated grief if the process has occurred more than a year ago. These signs may include ongoing impairment in clients' daily functioning, such as their inability to work or find enjoyment in recreational activities, reported feelings of emptiness, or ongoing severe emotional reactions to the foreclosure (Kersting et al., 2007). Because the home loss causes threats to emotional and physical security, successful adaptation may require helping the client mourn the loss of the home by discouraging ongoing contact with the home (Field, Gao, & Paderna, 2005; Field et al., 2009).

Interventions

With regard to interventions, the current analysis highlights reconstructing the adult role as an important point for client recovery and growth. A focus on coping and adaptation, as well as a focus on increasing the self-efficacy and empowerment of the client, may be helpful. Individuals who suffer multiple losses tend to demonstrate less resilience and therefore less ability to adapt to multiple events (Boerner & Jopp, 2010). Because home loss is so devastating in multiple ways, a primary mental health focus on coping and adaptation could be effective, particularly one that fosters resilience by increasing access to social support (Boerner & Jopp, 2010). Similarly, individuals who feel disempowered often benefit from increased access to information, which will allow them to exert more control over the situation and mitigate feelings of helplessness and depression (Spence, Lachlan, & Burke, 2007). Counselors can assist clients in accessing information regarding their legal rights or refer them to appropriate financial experts to increase autonomy. Ultimately, the counselor’s role remains to provide support and to help clients express their feelings, which will lead to decreased depression (Spence et al., 2007). By using the coping and information access approaches, the clients may be able to reconstruct and/or strengthen their adult role and thereby alleviate problems related to the loss of institutional trust. Framing the client’s adult role as the informed consumer may empower the client to develop new, effective relationships with financial institutions in the future. As counselors come to understand the nuances of the repercussions of forced home loss, they can systematically address the variety of losses to improve outcomes for clients who may not fully grasp the complexities of their situation.

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