



Rapid literature review to inform WYHP's Right Sizing Campaign

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1. Introduction

West Yorkshire Housing Association Partnership (WYHP) sits within the West Yorkshire Health and Care Partnership and was created in 2020 to support social housing policy and delivery in the West Yorkshire region. One of its aims is to empower older people to be able to choose healthy housing options that enable them to live independently and well at home.

WYHP has commissioned Magpie to develop an insight informed campaign which can raise awareness and influence perceptions of housing with support and get people thinking about it as a possible option earlier, rather than later on in life. The campaign also seeks to promote that there may be more options available in local communities than people think.

Part of the campaign development includes gathering local behavioural insights and reviewing the literature in this area to better understand the factors which may influence older people's choice to right size, or find healthy housing options.

This report summarises the results of a rapid review of behavioural insights literature relevant to healthy housing choices in older people, including those living in social housing.

2. Background

2.1 Housing needs for older adults

The majority of England's housing stock was built before the 1990s, with 35% being built before 1945. Houses in England are therefore relatively old, and it is anticipated that 80% of current dwellings will still be in use in 2050, based on an annual replacement rate of 0.5%. (Boardman et al, 2005). However, as the population ages, -with the greatest rise predicted in those aged 85 years and above- there will be an increasing need to ensure that housing remains suitable, safe and resilient to health challenges such as climate change.

2.2 Housing quality

According to a recent English Housing Survey, it is estimated that 4.1 million homes in the UK do not meet the basic minimum in the Decent Homes Standard, and almost half of these homes are lived in by people aged over 55 years (MHCLG, 2019). Poor homes can be damaging to physical and mental health, causing issues such as falls, injuries, or illness related to cold and damp conditions. The Centre for Ageing Better's Good Homes Inquiry (2021) highlighted



that poor quality housing was most prevalence in owner occupied homes, followed by the private rented sector. On the whole, conditions in the social housing sector are better, related to higher levels of regulation and enforcement.

2.3 What makes a good home?

A good home is a prerequisite for health, and research indicates that the public consider a good home to be somewhere comfortable, safe, secure, easy to warm or cool with good accessibility and connections to communities, and somewhere that does not risk injury or harm to those living or visiting it. Furthermore, good homes are places associated with families and friendships (Centre for Ageing Better, 2021).

Many people are emotionally attached to their home, despite encountering difficulties or issues that may impact upon their health. Most people want to stay in the homes they are attached to, but may be unable to make improvements to their standard of living. Others might want to move but are prevented by a lack of suitable options (Centre for Ageing Better, 2021).

2.4 Right Sizing

Rightsizing is a term used to describe *'an older person's active, positive choice to move home as a means of improving their quality of life'* (Hammond, Walsh and White, 2018, p3). This term was proposed as an alternative to the concept of 'down sizing', given research that has indicated the majority of older people (50+) who do move (across all tenure types) are not downsizing (despite variation within the older population as a whole). Older people are motivated to move home by a range of factors similar to people of other ages, such as wanting to live in nice areas, have access to green space, and more room for guests. However factors such as failing health, changing socioeconomic circumstances and difficulty coping may also influence the decision to move, and for a proportion of older adults that are driven to move, the change does involve a reduction in the size of their home. Older renters are the group that is most likely to move in later life.

Right sizing is therefore a more holistic term to discuss access to housing choices which are suitable for a range of circumstances and needs in later life, and which are proactively chosen to improve quality of life. This is in contrast to the term 'crisis move'- which is usually a forced move in response to acute changes in health or financial circumstances. When discussing older people and housing choices, it should be remembered that this is a diverse group, covering a wide range of ages and different needs.

3. Methods

Google scholar was primarily used to search for relevant literature. Search terms included 'perceptions of right sizing in older adults'; 'factors influencing right sizing in older adults' ; 'factors influencing healthy housing in older adults'. Papers and reports were prioritised for inclusion if they had relevance to the UK population (for example, research that was drawn from higher income countries). Additional references were followed up if they had particular relevance to the topic.



4. Results

Due to the research available to support this review, the majority of the findings relate to older people as a general group, typically from age 50 years and older. Some studies look specifically at very old populations, and some identify results that vary by income level, including a small number of findings related to people in social housing. Where findings specifically relate to older adults on low income, or in social housing this has been highlighted.

All findings have been included to provide flexibility with development of the campaign (it is unknown whether the target group is only those currently in social housing or a wider group of older adults that may require a right size move into accessible social housing or supported living).

Results should be interpreted with this in mind- some findings may be more relevant to a social housing population than others.

4.1 Key Findings

Older people do not move often, and few move into specialist accommodation

- Despite desires for good homes remaining throughout life, older people are less likely to move than younger groups. Only 3.4% of over 50 year olds move each year- half as many moves as the rest of the population (Hammond, Walsh and White, 2018).
- A relatively small proportion of older populations live in specialist accommodation such as retirement, sheltered and extra-care housing. Around 95% of over 50 year olds have general housing needs and live in mixed communities (Centre for Ageing Better, 2021).
- Moving into specialist housing is more common in the 70+ age group, but even then only accounts for 24.4% of moves (Hammond, Walsh and White, 2018).
- The vast majority of older individuals live in their own homes, and have no intention of changing that.
- People *will not* move somewhere offering a *worse quality of life* unless forced to do so by factors such as health or financial reasons. These are not 'right sizing decisions' but are known as crisis moves and account for many of the moves made in older age (Hammond, Walsh and White, 2018).

Housing options are limited and there is a lack of awareness

- The limited options (in terms of accommodation meeting accessibility standards) mean that few people are able to identify the types of properties in the market (across all tenures) that they feel will improve their quality of life (Hammond, Walsh and White, 2018).



Numerous factors can influence moving, including health and wellbeing needs, psychosocial factors, environmental and economic circumstances- it can be complex

- A wealth of factors were found to influence housing decisions among older adults. However, very few of them have been studied extensively (Roy, 2018).
- Homes can have strong emotional attachments for older people, and ageing at home surrounded by familiarity has been associated with greater feelings of control, independence and self-identity. The sense of loss of control (if housing choice is taken away) has been linked to depression and other negative emotions (Stones and Gullifer, 2016).
- For older people, the decision to move can involve a complex assessment of factors in order to determine whether the move will improve their quality of life (both factual and perceived factors). **The process of decision making- or being able to weigh up the pros and cons of moving- is central to being able to actually right size.**
- However, for many, particularly those driven more by ‘push factors’ – their move is driven by crisis rather than intention or desire.
- Lack of available and accessible housing options are common barriers that inhibit older adults from right sizing. **However, accessibility of supported living options has been shown to be higher for people in social housing than rented or home ownership- which may be useful to highlight in this campaign.** (Hammond, Walsh and White, 2018).
- Accessibility means actually being able to obtain the home- financial factors may influence this, as may any eligibility criteria based on personal factors (such as requiring a certain level of health need to access certain specialist housing for social tenants) (Hammond, Walsh and White, 2018).
- Right sizing is possible when there are available options that can support improved quality of life for older adults, and they can be accessed by the individuals that need them.

4.2 Summary of barriers and facilitators that influence older people’s housing choices, based on the COM-B framework (see Appendix for further details and references).

Capability barriers	Capability facilitators (physical and psychological)
- Misperceptions around poor quality of existing homes inhibiting action? (this applies to making home improvements,	-Ability to assess how quality of life might be improved through making a move. -Decisions tend to be made based on how they think their environment and personal circumstances might change rather than on the person’s current home and circumstances.

<p>unclear whether this applies to moving)</p>	<ul style="list-style-type: none"> -Knowledge of housing options available to them -Feeling of control over decision and environment
<p>Motivation barriers</p> <ul style="list-style-type: none"> -Emotional attachments to existing homes- typically greater attachment for those that have lived in that home for longer periods. 	<p>Motivational facilitators (some of these may be classed as external factors that influence the older person's decision to move).</p> <ul style="list-style-type: none"> - Accessibility of options to meet their changing needs - 'Push factors'- eviction, unemployment, widowed, health needs, physical limitations in existing home (more likely in older adults and those in social and private rented accommodation) - Other factors influencing decision making; feeling of comfort and familiarity with (new) accommodation, feelings of independence. - Proximity to social networks and communities - Social activities - Financial benefits vs costs of moving - Cheaper energy costs - Available support for moving - Better access to services (especially for women, widows and those in poor health) - 'Pull factors'- desire for better quality home, closer to family (more likely for younger groups, couples and owner occupiers). - Building type and dwelling size.
<p>Opportunity barriers</p> <ul style="list-style-type: none"> - The majority of older adults are in a 'right sizing gap', where properties to improve their quality of life are neither available or accessible to them. 	<p>Opportunity facilitators</p> <ul style="list-style-type: none"> -See above (eg accessibility of properties, support available) -The ability to right size is dependent on both the availability and accessibility of housing options that people feel would improve their quality of life. <p>-Social tenants are the most likely to be able to access specialist accommodation when moving and those who have moved are more likely to remain in a similar area (eg 3 mile radius), seemingly due to their landlord's</p>

	support in finding suitable accommodation. This is a positive aspect to promote if it applies locally.
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5. Implications for the campaign based on the literature (see also further information in the appendix)

5.1 General areas to consider in campaign development

- Promotion of choice and empowerment to access housing that is right for their needs now and in the future (eg through increasing knowledge of options and ability to access support).
- Sharing information about housing options and associated support.
- Gathering further information about the potential benefits of local housing options (eg cost? Energy efficiency?, proximity to services) and how this might influence motivation to move in social housing tenants.
- Maintaining sensitivity regarding individual's needs, the emotional attachment that people feel to their homes, and the complexity of factors influencing a move.

5.2 Specific insights with relevance for campaign development

1. *Target group*

- Typically more moves occur in the 50-60 year old age group and the 80+ age group- although different factors may be behind these moves. It is unclear what the best target age group is for this population, as the campaign needs to be relevant (eg interest those with current or future right sizing needs), but recognise that additional factors will influence moving decisions (eg poor health and financial status). Further discussion with WYHP will be useful here, and ideally, the campaign would evaluate the impact and relevance of the campaign against factors such as age and health status to inform future work.

2. *Addressing capability factors*

Knowledge of local housing options

- Lack of knowledge of available accommodation choices may hinder right size decision making. The campaign could therefore support older adults to better understand the range of accommodation options, how these could suit their lifestyles and what support is available to help people move.
 - Raising awareness of options that are close to their existing communities could be particularly beneficial- due to the desire to maintain social networks and sense of identity.
 - Identifying local perceptions (and misperceptions) of right sizing, and then challenging those misperceptions could be another approach (NB- not demonstrated in this literature).



Quality of life assessment

- As well as knowing what is available, older adults need to be able to assess whether these options will improve their overall quality of life, as this has been demonstrated to influence the decision to move. Some may require support in being able to make that assessment (especially if there is a desire to plan for earlier rather than crisis moves).
 - Are there any effective local services or decision making tools available that could assist with this, and that the campaign could raise awareness of?
 - Evaluation of the campaign could be measured by uptake of this type of service (if available) as an intermediate step towards right sizing.

3. *Addressing motivational factors*

- **Promotion of choice and autonomy** in right sizing will likely be important aspect to incorporate into the campaign, (if there genuinely is choice).
 - To maintain an open and honest conversation it may be helpful consider the full range of choices- for example, staying in their own homes and making adaptations, vs the option of moving into more supported or accessible accommodation.
 - Sharing lived experiences from others may be an approach to consider, if this can help to demonstrate the potential challenges, benefits and transition period in an honest and relatable way (NB not evidenced in literature, but an interpretation).
- Gathering and sharing information on **the potential benefits of local right sizing options** could be useful in influencing motivation to move. The campaign could test a range of different factors to see whether perceptions of moving and intentions to move were influenced (e.g by overall cost, energy efficiency, social support available, adaptations for health needs, connections to community etc).
- Demonstrating that **support is available** to help make the decision, and that alternative properties are **available and accessible to social housing tenants** are factors that are thought to influence to decision to move.
- Emotional attachments to existing homes are likely to be significant consideration for older adults when contemplating a house move, and a potentially upsetting aspect. It may be useful to test different messaging approaches to this, from recognition to avoidance.

Addressing opportunity factors

- Availability and accessibility of alternative, suitable housing options have been shown to be key factors that influence the decision to move.
- Identifying which specific options are available, who can access them, who they are suitable for and where they are located will be important additional information to share when people are considering their housing options.
- If there are accessibility barriers for local social housing tenants, could these be explored and overcome? For example, is there any financial



support available to assist with moving? Or eligibility criteria for certain properties that could be highlighted?

Possible theoretical frameworks to build upon (see appendix for further details)

- 'Continuity theory' may be useful to explore further for this campaign development. Can alternative housing options enable continuity of psychological and social factors associated with healthy ageing? (Atchley 1999, within Stone and Gullifer).
- Migration theory was referred to a few times, although not specific to housing (Wiseman, 1980 within Roy et al, 2018).
- Older people's decisions to move (or not move) can be described as a process of 'option recognition' (Peace, Holland, & Kellaheer, 2011).
- Despre and Lord's framework looks at older adults' housing decisions through the concept of home. They suggest six main dimensions that best account for the meanings and experiences of home (Despre and Lord 2005, within Roy et al, 2018).

6. Appendix:

Details from selected literature to help identify evidence in these areas;

1. What are older people's perceptions of right sizing?
 - a. What do they think, understand and feel about this concept?

Stone and Gullifer, 2016. At home it's just so much easier to be yourself: older adults' perceptions of ageing in place. Ageing and Society.

Qualitative study of 23 older adults (85 years +) living independently in rural Australia to understand their thoughts and feelings about ageing in place at home. Findings below are from a literature review within the paper as well as the qualitative study itself. 4/23 experienced financial hardship. 16/23 required personal care at home. 19/23 female.

- Variation in housing needs dependent on age and health- eg 60/70 years typically healthy and independent, 80 year olds more frail.
- Regardless of degree of physical decline, older people have a desire to remain in own homes and negative perceptions of institutional care.
- There can be an enduring attachment to living independently for older people.
- Homes provide older people with a sense of autonomy, independence, control over daily events, their body and social status.
- Research supports living in familiar surroundings with a greater sense of contentedness and satisfaction. Continuity within a familiar environment linked to wanting to stay at home. Loss of continuation associated with volatility in life.
- A sense of personal control appears crucial to psychological wellbeing for older individuals going through experiences like environmental change, stress and loss. Lack of perceived choice over living environment is associated with feelings of depression and withdrawal.
- *"For these individuals, residential care is their 'choice of last resort' (McAuley and Blieszner Reference McAuley and Blieszner1985) or worse, an 'an evil to be avoided at all costs' (Wilson Reference Wilson2000)", p450.*
- **"Continuity theory:** interprets ageing in place as an adaptive strategy employed to support 'inner psychological continuity as well as outward continuity of social behaviour (Atchley 1989). This theory offers a useful description of the ways adults draw on their past to conceive of their future and respond to the changes of normal ageing (Atchley 1993)", p452- Stone and Gullifer).
- Home offers feelings of self -reliance, independence, ability to exercise control (autonomy) gives purpose to life. Freedom to do as they like, privacy, and free of feelings of obligation (compared to residential care). Home preserved memories, objects, activities that maintain one's self identity- both past and present. The longer someone has lived in a particular home and community- the greater the attachment.

"At home it's just so much easier to be yourself. In fact, home is like part of who you are" (p462).

2. What do we know about barriers and facilitators that influence older people's ability to access healthy housing options that are right for them?

Hammond, Walsh and White, 2018. RIGHTSIZING: Reframing the housing offer for older people. Greater Manchester Combined Authority.
NB- this report considers all older people over 50 years plus- not all content applicable to older people in social housing.

Previous studies of the individual factors which influence the decisions of older people to move or 'age in place' outline a large number of interrelated causal factors showing that the picture is complex.

Personal factors

Moving is more likely at both the younger (50-60) and older (80+) ends of the age spectrum.

Older people who report **having very poor health are more likely to move**, with a significant increase in moves made by younger (50-69) men and older (80+) women in poor health (Evandrou et al., 2010, p. 88).

Driving factors behind moving (motivational factors)

- Older movers can be divided into two distinct groups – those driven by **availability of better options** and those driven **by accessibility of better options**.
- **Availability driven:** Based mostly on aspiration, dependent on the (limited) availability of options that allow them to meet these aspirations. More likely to be younger, couples, and owner occupiers (of the 50 + cohort). Mainly 'pull factors' such as wanting a better quality home, to be closer to family, wanting a change.
- **Accessibility driven:** Based mostly on problems, dependent on the (limited) accessibility of options that allow them to solve these issues. ► More likely to have experienced lifestyle change, and need support to make better options accessible to them. Generally older groups, more likely to be social or private renters. 'Push factors'- including eviction from rented property, unemployment, poor housing conditions, problems with home design, need for health support, moving away from crime. Social tenants that have moved are more likely to stay within a three mile radius of existing property- may imply this option is available to them.
- Housing factors that are desirable to older people are similar to other age groups, such as a good location, space for guests to stay, access to high-quality outdoor space and cheap energy costs (Pannell et al., 2012, p. 32)
- The most common reason for moving in a Belgian study was a desire to move to a more attractive environment, predominantly cited by older people with high income, homeowners and people in good health (Smetcoren et al., 2017)

- Another common environmental factor was a desire for better access to services, with people citing this factor more likely to be women, widows and those with poor health (Smetcoren et al., 2017, p. 97–99).

Capability factors

- For those who do choose to move, their decisions involved assessing the potential to improve their quality of life.
- Assessing whether an option is better than a current home is not limited to a 'bricks and mortar' comparison between two properties – decisions are based on issues including: emotional attachment/proximity to social networks/financial benefits and costs of moving/available support for moving.
- Possible financial barriers for older people with low levels of savings or income, including struggling to afford removal services, stamp duty, survey, legal fees or rental deposits (Pannell et al., 2012, p. 44).
- Complex assessments are made by individual movers weighing pragmatic, felt and imagined factors when considering their available and accessible options. ▶ Decisions tend to be based on how they think their environment and personal circumstances might change rather than on the person's current personal circumstances and current home.
- Older people's decisions to move (or not move) can be described as a process of 'option recognition' (Peace, Holland, & Kellaher, 2011). 'Option recognition' describes how people tend to make an assessment of the appropriateness of their current environment in relation to their personal situation (health, social connections, aspiration), and whether other options would suit them better. This process takes into account logistical challenges involved with moving including cost (taxation, professional fees, removal services), effort, and available help (either family, friends or policy driven support).

Other capability factors

- Wealthier groups are shown to be able to move further to satisfy their housing needs.
- As much as 60% of the population of older people have little opportunity to move from their current home, regardless of its suitability. Park and Zeigler (2016) suggest that only the wealthiest 10% and least wealthy 30% of older people (supported by the social housing sector) have adequate rightsizing options.

Opportunity factors

- While those in social rented accommodation are on the whole more likely to have accessible specialist accommodation options, this may be more the case for those with higher needs, and less so for people seeking to make proactive midlife moves in social rented accommodation.

Roy, N et al. Choosing between staying at home or moving: A systematic review of factors influencing housing decisions among frail older adults. PLoS ONE 13(1): e0189266. <https://doi.org/10.1371/journal.pone.0189266>

Systematic review-2018 factors influencing the housing decisions among older adults over 65 years old without cognitive disabilities. Primary research from any study design reported after 1990 in a peer-reviewed journal. 86 studies included- 74 from peer reviewed journals, $\frac{3}{4}$ in USA and Canada. 7 studies considered subsidized housing. 59/86= high quality.

- Discarding the 19 factors with discrepancies between study methods, 52 factors of influence identified remain as having an effect on the older adults' housing decision in at least 60% of the studies assessing them.
- Huge range of factors categorised into several areas;
 - a) Socioeconomic and health dimension eg health status and income
 - b) Psychological and psychosocial dimension eg knowledge of options, feelings of comfort, familiarity, control, independence, identity, status and social roles.
 - c) Social dimension- preservation of social networks and activities, proximity of siblings and friends, help and support available.
 - d) Built and natural environment dimension- building type and size, location, services and accessibility to the neighbourhood, public transport.
 - e) Economic dimension- housing value, relocation costs, tenure status.
- Most of the factors showing an effect belonged to the dimensions of the meanings and experience of home that were not related to older adults' socioeconomic profile or health status.
- Diversity of factors, complexity of the issue- not just down to health status.

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