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The Social Location of Older New Zealanders' Housing Decisions

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Abstract

Older adults' housing decisions in later life are significant and complex. An older person's home can form a central part of their life, and has been shown to impact on health and wellbeing, and be connected to identity and sense of attachment. Housing decisions are complicated by the many factors requiring consideration, the reality that ageing is often accompanied by changes in health and physical ability, and the process being individualised to each person's unique life circumstances. Past literature, modelling the influencing factors on older adults' housing decisions, has assumed that decision-making has a clearly definable pathway and is both conscious and rational. These assumptions have been criticised, along with these models being deemed overly simplistic, by critics who call for an alternative approach to expand the understanding of housing decision-making. In response to this, the present study aimed to explore the social location of older New Zealanders' housing decisions by examining the socially available discursive resources that older adults draw on to construct their housing choices. Interviews were conducted in the homes of five individuals and two couples, aged over 65 years, who resided in a range of different housing situations. The interviews were audio recorded, typed verbatim and discursively analysed as guided by the phases outlined by Potter and Wetherell (1987). Five main interpretative repertoires used to talk about housing choices were identified, labelled 'Decline', 'Medical', 'Independence', 'Stability' and 'Familial', along with the subject positions provided by each of these discursive resources. There were a number of interactions between the repertoires that showed participants shifting back and forth between using the different repertoires, which provided a more nuanced understanding of how they constructed their housing decisions. The identified discursive resources came from outside of what is most commonly thought of as housing-related variables, demonstrating that these decisions are constructed using broader social resources. The study has implications for broadening the theoretical lens on the understanding of older adults' housing decisions, along with implications for housing decision-making and informing housing, health and ageing policies. Overall, the social location of participants' housing decisions highlighted that they are not fixed, causal, linear processes, but instead complex and dynamic, and located in people's broader social lives.

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