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Article:
Mattocks, C., Blank, L. and Buckner, S. (2022) Older social housing tenants' experiences of rehousing programs: a systematic scoping review. Journal of Aging and Environment, 38 (1). pp. 76-95. ISSN: 2689-2618

https://doi.org/10.1080/26892618.2022.2140375

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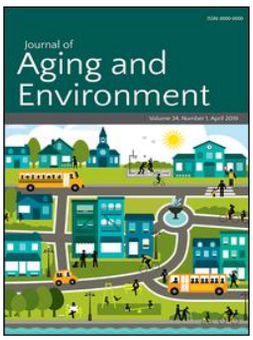

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Journal of Aging and Environment

ISSN: (Print) (Online) Journal homepage: https://www.tandfonline.com/loi/wjhe21

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To cite this article: Calum Mattocks, Lindsay Blank & Stefanie Buckner (2022): Older Social Housing Tenants' Experiences of Rehousing Programs: A Systematic Scoping Review, Journal of Aging and Environment, DOI: 10.1080/26892618.2022.2140375

To link to this article: https://doi.org/10.1080/26892618.2022.2140375

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JOURNAL OF AGING AND ENVIRONMENT
https://doi.org/10.1080/26892618.2022.2140375

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Older Social Housing Tenants' Experiences of Rehousing Programs: A Systematic Scoping Review

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ABSTRACT

This review examines the experiences of older social housing tenants who move home through rehousing schemes. These can be either elective, in the case of downsizing or rightsizing, or nonelective in the case of urban regeneration where, typically, houses are demolished and new ones built. Searches of both peer-reviewed and gray literature were carried out using appropriate databases. After screening, two peer-reviewed papers and eight gray literature reports were included in the review. Although limited, the evidence presented here provides some important guidance for providers of social housing. Organizations that provide social housing for older adults should involve older people in decision making in the conception, planning, and delivery of rehousing programs. Particular attention should be given to maintaining social connections in new homes and communities to avoid a serious loss of community involvement and the resulting increased levels of loneliness. The lack of published evidence highlighted by this review, particularly from academia, indicates that greater efforts from researchers and funders should be made to conduct studies that will give social housing providers the evidence they need to improve rehousing programs for older tenants.

KEYWORDS

Downsizing; housing; older people; regeneration; rehousing; rightsizing

Background

The world's population of over-65s in 2020 stands at 727 million. This is expected to more than double to 1.5 billion by 2050. This represents an increase from 9.3% to 16% of the world's population (United Nations Department of Economic & Social Affairs & Population Division, 2020). In the UK, the population is similarly aging. In 1999, around one in six people were 65 years and over (15.8%); this increased to one in every five people in 2019 (18.5%) and is projected to reach around one in every four

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people (23.9%) by 2039 (ONS, 2021). This changing demographic represents both a benefit and a challenge to society. Older people have accrued knowledge and skills over a lifetime that can benefit society (Carstensen et al., 2016), often act as unpaid caregivers (Kanji, 2018), and often have significant purchasing power with concomitant economic benefits to society (Götmark et al., 2018). By contrast, older people are more likely to experience more health problems, including multiple morbidities requiring more health and social care resources (Beard et al., 2016).

A key aspect to a healthy and fulfilling life is adequate housing. What makes for adequate housing changes as people age, and their needs and priorities change (Centre for Ageing Better, 2020). Internationally, there are cultural variations in housing for older people who often live with their adult children, for example, on university campuses in India (Bhattacharyya et al., 2020). Rehousing programs are an important means to support social housing tenants to move to a home that better meets these changing needs. In this article, social housing tenants are defined as tenants who rent their homes from a social housing provider—in the case of the UK, local government or not-for-profit housing associations. A distinction can be made between rehousing schemes designed to facilitate elective moves, where tenants opt to relocate, and nonelective moves, where tenants do not have a choice about relocating per se (although they may well be offered choices regarding the home they will move into).

Electives schemes might support downsizing or rightsizing, where tenants are seeking to move to properties whose size suits their requirements better. This is often presented as a positive option, providing older people with more suitable housing while freeing up larger homes for bigger households. Similarly, elective schemes might support older and perhaps retired adults to move from areas of high housing demand to areas with less pressure on housing. Despite being fundamentally about tenant choice, rehousing through elective schemes is a complex issue that can be limited by financial constraints and often the desire to stay in the familiar surroundings of one's home and neighborhood of many years (Burgess & Quinio, 2021).

Nonelective rehousing commonly occurs through regeneration schemes, which are designed to address issues around inadequate housing and urban decay. Houses, housing blocks, or entire estates and the surrounding area are either refurbished to a higher standard or completely demolished and replaced by new building projects. Neighborhoods are landscaped and efforts are made to bring in investment and local businesses. These are often combined public and private partnerships, and the new housing is usually a mix of private and social housing (Tyler et al., 2013). There is an expectation that regeneration brings about benefits to society through improved health and employment prospects, although the evidence for this is not clear cut

(McCartney et al., 2017). Old homes being demolished to make way for new ones can be a source of disruption and distress for residents who may have lived in the area for many years and have built up a social and support network that includes friends and family (Gosling, 2008).

The purpose of this review is to examine the evidence around the health-related processes and outcomes linked to older social housing tenants moving home through rehousing schemes. It was carried out as part of a larger research project that examines different rehousing schemes for older social housing tenants in the London Borough of Hackney in England.

Methods

The review comprises evidence from peer-reviewed studies and gray literature reports that examine the experiences and attitudes of older social housing tenants who have moved their home as a result of a rehousing scheme, in either an elected or unelected move. Also included were consultation exercises where tenants may not yet have moved but where their opinions on designing rehousing programs were sought.

A structured PICO approach was used: population, interventions, comparators, and outcome.

Population

Studies with a focus on adults aged 55 years and above, living in social housing, were included in the review. Studies with mixed age groups where the older age group had been disaggregated for subgroup analyses, or where the sample comprised overwhelmingly older people were also included

Interventions

Any interventions where residents moved voluntarily or involuntarily through rehousing programs were considered for inclusion.

Comparators

The comparators for the interventions were absence of the intervention, however defined by studies under consideration for inclusion. Studies with no comparator group were also included.

Outcome

The outcomes were moving the home (including tenants who had moved or were considering a move) via rehousing schemes by social housing providers.

Table 1. Keywords used in search strategy of bibliographic databases.

(1) Outcome	(2)	(3) Population
downsizing OR rehous* OR regeneration OR regenerat* OR down-size* OR re-hous* OR re-generat*	housing OR "social hous*" OR "council hous*" OR "supported hous*" OR "sheltered hous*" OR "under occ*"	"older people" OR elder* OR age OR aged OR retir* OR ageing OR aging OR elder* OR senior OR pension* OR geriatr* OR longevity OR "later life"
(1) AND (2) AND (3)		

*Wild card.

Search strategy for peer-reviewed studies

Systematic searches of bibliographic databases, namely, MEDLINE, EMBASE, Scopus, CINAHL, and PsychINFO, were conducted using predefined keywords (Table 1).

Potentially relevant academic studies from the searches were entered into an Endnote database and duplicates were removed. Two reviewers (CM, LB) systematically filtered the titles and abstracts of the saved references according to the inclusion criteria. These were social housing tenants, aged 55 plus, English language, and interventions where residents were rehoused through rehousing programs.

Papers selected for full text review were appraised independently by two reviewers (CM, LB), any discrepancies were resolved through discussion with a third reviewer (SB).

Papers were appraised for quality using the Joanna Briggs Institute Critical Appraisal Checklist for Qualitative Research (Lockwood et al., 2015). There were no quantitative peer-reviewed papers included in the review.

Search strategy for gray literature reports

Gray literature was searched using Google and the Web pages of relevant organizations (Table 2). The focus was on identifying reports, primarily produced by local government or not-for-profit organizations. Two Google searches, each with a different filter, were conducted in order to more precisely target relevant reports. The first filter limited results to only sites that ended in .gov.uk (site: .gov.uk "downsizing or regeneration or rehousing and ageing") and pdf files only (filetype: .pdf "downsizing or regeneration or rehousing and ageing"). Searches were limited to the first 100 results. One researcher (CM) conducted the initial searches and compiled a database of the resulting promising reports. Two researchers (CM, LB) then screened the reports independently, and any discrepancies were resolved through discussion with a third reviewer (SB). In addition, the webpages of relevant organizations, such as Housing LIN, NHS Evidence, and Open Grey, were also searched using the same search terms (Table 2).

Table 2. Results of specific organizations searched for gray literature reports.

Organization	Number of reports downloaded for potential inclusion
Housing LIN	7
Shelter	0
National Housing Federation	0
Chartered Institute of Housing	0
London Councils	0
Local Government Association	2
Joseph Rowntree Foundation	0
HACT	0
AARP	0
Age UK	1
Alzheimer's Society	0
Beth Johnson Foundation	0
British Library	0
Carers UK	0
Center for Ageing Better	0
E-Print Network	0
Grey Literature Report	2
Health Evidence Canada	0
International Longevity Centre	0
Lenus	0
NHS Evidence	7
OIAster	0
Open Grey	0
Public Heath Europe	0
SCIE	2
RAND Health	0
WHO	0

Data extraction and evidence synthesis

Data from each study were extracted using a pro forma based on the Prisma 2009 checklist (see Tables 3 and 4). Due to the small number of included studies, each one was summarized individually.

Information extracted included:

1. Contextual information about the study (author, year of publication, location and setting for the research), the primary aim of the study, and a brief description of the methods).
2. Details about the rehousing intervention.
3. Details about the population studied.
4. Main results (narrative summary).

Results

Peer-reviewed literature

In total, 5,215 potentially relevant references were identified through initial searches of the bibliographic databases (Figure 1). After removal of duplicates, filtering on titles (removal of $n = 4{,}303$) and on abstracts, and full

Table 3. Summary of peer-reviewed literature.

First author (year)	Location	Population	Study design	Intervention details	Main results
Baker & Arthurson (2007, p. 13)	Australia	Pre-relocation interviews were undertaken with $n = 72$ households between October 1999 and April 2000. Follow-up interviews were conducted at an average of 18 months post relocation ($n = 38$). Tenancies from 2 to 49 years. Median age 57 years for male and 61 years for female household heads. Half of respondent household heads were aged over 65 years and just 14% were aged less than 30 years. Ten households contained children, 19.5% full-time employed.	Interviews—longitudinal (before/after) In-depth pre- and post-relocation interviews with respondents from public tenant households. Face-to-face interviews. Randomly selected sample of households (purposive sample).	Involuntary relocation for urban regeneration purposes. Tenants were interviewed before and after relocation from Ferryden Park in South Australia as part of The Parks Urban Regeneration Project (at the time, Australia's largest regeneration project).	The study found that in determining the self-perceived success of relocation the quality of the post-relocation housing was the most important factor. The three most important things in determining a good outcome for tenants reflect characteristics of the location, housing, social networks and contacts, and, for a small number of respondents, lack of choice. The characteristics of the house were important in just under half of all nominated elements (higher than anticipated); the importance of social networks and contacts was lower than the literature would predict. The short relocation distances associated with The Parks regeneration project reflect, in part, tenant preferences. However, very few households received housing in their suburb of first choice. Despite this, the relatively short relocation distances seem to have allowed many existing important social contacts to have been maintained.

Morris (2017, p. 14)	Australia	Six public housing tenants who are still residents in the area (refused to move) and 13 who have moved. Those who had moved: 7 female, 6 male; 3 under 50; 3 between 50 and 64; 4 between 65 and 70; and 3 older than 85 years. Ten lived in single-person households; 2 were partnered; 1 household had dependent children. Those who remained: female (age 63–89) and in single-person households.	Qualitative (in-depth interviews), cross sectional design.	Gentrification of Miller's Point public housing area in Sydney, Australia, and displacement of residents to alternative public housing placements (mostly within 10 km)—some after three or four generations of family residency.	The place attachment of most of the interviewees was profound. The removal announcement and the actual move were devastating. Interviewees spoke of deep sadness and anxiety at the thought of leaving what they considered a unique and genuine community. Residents who had moved told of their isolation and melancholy at having lost their local social network. Place attachment was especially so in the case of interviewees whose association with Millers Point went back three or even four generations. Age was also a major factor—older, more attached (due to strong social contacts and neighbor assistance). The key consequences of displacement were anxiety, depression, loneliness, and a profound sadness at the loss of community

review (removal of $n = 44$), two papers were selected for inclusion in the review. Reasons for rejection of studies based on filtering (titles, abstract and full review) included, for example, studies not including older people or not including social housing tenants.

Gray literature

The initial search of gray literature on Google and individual databases (Table 2) returned 221 potentially relevant references. Filtering on titles (removal of $n = 198$) and on abstracts and full review (removal of $n = 15$), eight papers were selected for inclusion in the review. Reasons for rejection were similar to that of the peer-reviewed papers.

Table 3 summarizes each included paper from the peer-reviewed literature, while Table 4 summarizes the gray literature reports.

Quality appraisal of literature

Both peer-reviewed papers were of generally good quality, according to the Joanna Briggs Society checklist (Lockwood et al., 2015). See Appendix for more detail.

Gray literature was appraised using the ACCODS checklist, which comprises six domains: Authority, Accuracy, Coverage, Objectivity, Date, and Significance. Each domain is scored as either Yes or No, where one point is given for Yes and zero points for No. Therefore, the maximum score is six (high quality), and the minimum is zero (low quality) (Tyndall, 2010). Table 5 contains the results of the quality appraisal.

Discussion

This review found only two peer-reviewed studies that examined the experiences of older social housing tenants who had moved their home through regeneration schemes and none who moved through downsizing schemes.

Peer-reviewed literature

The two peer-reviewed studies concerned regeneration and interviewed tenants before and after a move, and tenants who had moved and those who had not. Morris (2017) interviewed tenants who were yet to move and tenants who had moved and reported that tenants were deeply affected by both the announcement of the regeneration and subsequent requirement to move. There was a profound sense of regret at the loss of what was perceived by tenants before and after the move as a close-knit and supportive community, and this tended to be more pronounced in the older residents

Table 4. Summary of gray literature.

First author (year)	Location	Population	Study design	Intervention details	Main results
Lawson and Kearns (2017, p. 15)	Glasgow, UK	Seven of 11 households had members aged over 60 years. Age range 26–85. Data from only those over 55 were identifiable.	Qualitative, cross-sectional, post-move interviews. How residents have fared since moving and the extent to which different elements of their residential environment support better health and well-being. To understand the use and experience of housing and neighborhoods by occupants of newly built housing provided as part of Glasgow's ongoing regeneration program. To identify what aspects of their new housing and neighborhoods occupants particularly value and what support and assistance they require in order to make the most of their new situation.	Regeneration of two areas of Glasgow, ongoing since 2005: Pollokshaws and Sighthill. Demolition of existing social housing stock, which often comprised mass housing estates in poor physical condition, and its replacement with lower density housing of mixed tenure, i.e., large proportions of both social housing and owner occupation and a lesser proportion of other "affordable" options, including midmarket renting and shared ownership.	Residents expressed appreciation of having secure entrances, light and bright dwellings with large windows, warmth and cheaper energy, and larger kitchen/dining rooms. The main drawback of the dwellings was a lack of storage space and small-sized bedrooms. The benefits of having a spare bedroom were particularly noticeable for the older residents in Pollokshaws. Occupants derived psychosocial benefits of pride, self-esteem, and the stability of being settled and wanting to create a long-term home in their new house. This was often in contrast to not feeling the same about their previous homes in the high-rise blocks, and was facilitated by using disturbance payments to invest in new furniture and furnishings. As a result both of how people felt about their new homes and of the design of the dwellings, several behavioral changes were reported by participants, including eating family meals together, cooking in their new kitchen and eating at the dining table; improved social and family relations as a result of inviting friends over and having wider family members to stay; ceasing smoking indoors, and in some cases reducing their level of smoking. Some participants with health conditions reported being

(*continued*)

Table 4. Continued.

First author (year)	Location	Population	Study design	Intervention details	Main results
					better able to cope with their conditions in their new homes, which were warmer, more comfortable, and easier to live in than their previous homes. In both locations, participants talked of friendly, cohesive, safe and supportive communities, more so than they had experienced previously in the high-rise apartments. Where new-building occupants knew their neighbors from the estate previously, this aided their sense of community. Not everyone experienced all these benefits from their new homes. There were participants who felt lonely, including some with physical and mental health issues and others who wanted employment, and as a result some people lacked the means, ability, or confidence to go out and/or to make social connections with others. Both locations benefited from having nearby supermarkets or main shopping streets, but both also lacked facilities in the immediate vicinity such as cafés, local shops, a post office, and children's play areas; these absences were inconvenient, but were also noticed by residents because they reduced opportunities for casual social interaction within the community.

Riseborough and Jenkins (2004, p. 16)	UK	Older citizens (age not defined): "The report refers to distinctions as they are used in policy and programmes to deliver policy. It does not endorse any particular definition" (Age UK report).	Qualitative. Telephone interviews using a prepared topic guide and some limited face-to-face visits and interviews.	Overview and documentary analyses from regeneration projects across the UK. No quotes from interviews with older people included.	Today older people are achieving a growing prominence in regeneration and in related policy areas on housing, support services, care, and health. Older people's groups have worked hard to create good relationships with local authorities and local regeneration partnerships. Many local authorities have responded positively to older people's organizations and community led projects. However, older people are less evident in policies that shape local economies, towns and city centers, and wider infrastructure, including transport. Furthermore, the contribution older people make to the local economy, their spending power and economic activity and their use of city and town center spaces, is not always understood or explored. There is growing recognition that older people's forums and panels work constructively with local democracy and make a difference to local policies, planning, and service delivery. However, there is a lack of "joining up" across departments and agencies, and involving and engaging older people is not practiced by all. There is a growing body of evidence about good practice on engaging with older people. However, an awareness of what exists and the good practice lessons that result from it can fall into the cracks between departments and agencies.

(*continued*)

Table 4. Continued.

First author (year)	Location	Population	Study design	Intervention details	Main results
					There is still a deeply entrenched tendency for policymakers and service providers to lump all older people together.
Woolrych et al. (2019, p. 17)	Manchester, Edinburgh, and Glasgow	Older adults living in nine neighborhoods across three cities in the UK.	To explore how older adults experience aging across diverse urban, social and cultural contexts and identified implications for the delivery of Age-Friendly Cities and Communities. 270 questionnaires, 90 semistructured interviews, 60 walking interviews, and 30 photo diaries, 18 community mapping.	Regeneration projects across the UK. Interviews were with people who had and had not moved through regeneration but there was no way of easily distinguishing between these.	While common themes emerged from the work, the interpretation of those themes, together with specific priorities, often differed across the neighborhoods, revealing the relationship between aging and the urban environment to be nuanced and complex. Understanding these experiences is important to developing interventions and solutions at national, city, and community levels.
			Workshops, exhibitions in each of the case study neighborhoods. Although some areas had undergone regeneration, the primary aim was not to assess how well people's moves had gone.		
Age UK (p. 18)	UK	Retired people (no age range given)	Downsizing to retirement homes. The report is designed to encourage wider policy engagement with older residents on the management and future delivery of sheltered and retirement housing in England.	Downsizing—retirement housing	The inquiry shows the complexity of the retirement housing sector and the difficulty of suggesting changes that benefit both existing and future residents. Despite this, throughout the inquiry, we have highlighted many common themes and principles that deserve further consideration. Who should have access to sheltered and retirement housing? How can we guarantee the delivery of affordable and integrated housing support? What can we do to promote "transparency" in the sector, both before and after moving into a scheme? How can we protect the rights of isolated and vulnerable older

					residents and prevent them from being exploited? If housing advice is so important to older people making the right choices about their housing and care, how can we guarantee access to good independent services nationwide?
Titherington (2021, p. 19)	UK	Aged 65 and over.	Downsizing—the provision of older persons' housing. The purpose of this guide is to draw on the vast experience of Housing Forum members who procure, design, make, build, and maintain homes across the UK to inform the direction of older persons housing provision at both a local and national level.	Downsizing—the provision of older persons housing.	Results are presented as a series of prompts to help housing associations, councils, or private companies understand at a glance the complex series of interlinked decisions that need to be made in the early stages of involvement: PEOPLE: What are the needs and aspirations of those in the area? Consider: Demography, health and well-being, tenure, predicted future demands. HOMES: Making the most of existing stock. Consider: existing assets, location, asset management strategy, proposed solutions. MONEY: Is the scheme viable? Consider: land and site, planning class, capital investment, revenue. DESIGN: Getting the brief right. Consider: conceptual drivers, site and design, community, proposal. DELIVERY: Turning concept into reality. Consider: partnerships, procurement and construction, management, review.
Copeman and LGA (2017, p. 20)	Birmingham, Bedfordshire, Essex, Mansfield, Newcastle, Bristol, Bath, Worcestershire, UK	Older people, aged 65 and over. Council, housing association and privately owned although mostly the former two.	Case studies involving downsizing moves. Older people's impressions of the new housing. Primary research from only two locations.	Downsizing	**Birmingham City Council:** Research with older people identified the following requirements: two bedrooms: either through household need or quality-of-life requirements; decent space standards and storage;

(*continued*)

Table 4. Continued.

First author (year)	Location	Population	Study design	Intervention details	Main results
					economic to run and easy to maintain; flexible to cater to changing needs; manageable outside space; rightsizing needs to be an aspirational move. **Birmingham Municipal Housing Trust:** built 16 dormer bungalows across two sites with more being planned. Outcomes: When asked what were the best features of the properties, the answers given were "the amount of natural light and accessibility around the home," "the look of the property from the outside," "the way the patio doors open onto the back garden," "the properties are spacious, light, and in an excellent location." **Newcastle City Council:** feedback from qualitative research with residents and their families has been very positive, specifically: Tenants welcomed living in an environment designed to ensure they are able to live safely and securely; they can live more independently and avoid a "crisis" move into institutional care; quality of life had improved in terms of being more able to pursue interests and activities and combatting social isolation.

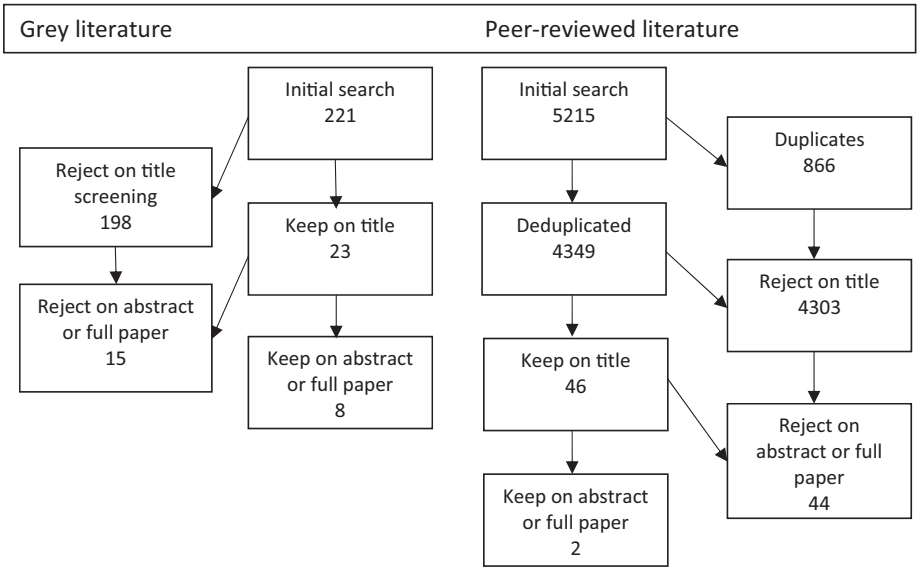

Figure 1. Flowchart outlining the filtering of peer-reviewed and gray literature.

Table 5. AACODS score for gray literature.

Report	AACODS score
Lawson and Kearns (15)	3
Riseborough and Jenkins (16)	4
Woolrych et al. (17)	5
Age UK (18)	3
Titherington et al. (19)	4
Copeman and Porteus (20)	6
Kavanagh et al. (21)	6
Waters and Massey (22)	3

(Morris, 2017). Baker & Arthurson (2007) interviewed tenants before and after relocation and reported that what determined good outcomes for tenants were characteristics of the location, the housing itself, and maintaining social networks and contacts. It was also reported that the importance of characteristics of the new housing was higher than anticipated, while the importance of social networks was lower than anticipated (Baker & Arthurson, 2007). Neither paper discussed the process of moving in detail and what support was offered to residents, so it is difficult to make firm conclusions about what processes and program designs work for older tenants moving through regeneration schemes. However, it is clear that the disruption of social networks is a major source of stress for residents, which needs to be considered by local authorities and housing associations who are involved in the noelective relocation of tenants.

Gray literature

The searches of the gray literature found a small number of reports, divided equally between downsizing and regeneration. These reports were

produced by either local authorities or third sector organizations. The quality of the reports was varied although, in general, it was of moderate to good quality. The reports also demonstrated heterogeneity in research questions, methodology, and reporting of outcomes, and in some cases the research questions were not explicit. The research methods varied and often lacked detail. Similarly, the level of detail and depth of discussion of outcomes also varied. Some of the reports were based on consultation exercises with older participants who might not have moved via a rehousing program, where the exercises were designed to shape guidelines and policy recommendations (Age UK, 2012; Kavanagh et al., 2020; Riseborough & Jenkins, 2004; Titherington & Turner, 2021), rather than interviews with older people who had moved (Copeman & Porteus, 2017; Lawson & Kearns, 2017; Waters & Massey, 2017). Although this makes synthesizing the findings of the reports difficult, some general themes are apparent.

Some residents who had moved through regeneration reported feeling a sense of pride in their new homes, particularly in comparison to their old homes. This facilitated some changes in health behaviors and outcomes, such as eating family meals together and stopping smoking indoors, and even reducing overall levels of smoking (Lawson & Kearns, 2017). By contrast, other residents, particularly those with health issues, reported feelings of isolation and loneliness after moving and this had the added effect of further reducing their desire to go outdoors (Lawson & Kearns, 2017). Another report indicates that the design of housing for older people may be important in helping to successfully combat feelings of isolation and loneliness when moving to new housing (Waters & Massey, 2017). A number of the reports of consultation exercises emphasized the complex nature of urban regeneration (Woolrych et al., 2019) and the advantages of working with older people, and related the successes where partnerships between older people, local authorities, and regeneration partnerships had been established. There was, however, concern that older people were not being consulted on decisions relating to the local economy or larger infrastructure and transport projects (Riseborough & Jenkins, 2004). These reports suggest that the key to successful regeneration projects for older people must include consultation throughout the whole process in conjunction with careful thought being given to the design of housing, neighborhoods, and any plans for economic regeneration.

The reports on downsizing represent a series of consultation exercises and interviews intended to inform local authorities and housing associations on how design, access to housing, and protecting the rights of vulnerable older people could all help in tenants' decision-making process when considering a downsizing move (Age UK, 2012). Working in partnerships to help people cope with the inherent complexity in decision making was

considered key. Local aspirations, making use of existing housing stock, and community involvement are some of the important factors in designing downsizing projects (Titherington & Turner, 2021). Finally, specific features of the houses and local environment, such as a spare bedroom for visiting family, the aesthetics of the home, manageable gardens, and the fact that "rightsizing" needs to be an aspirational move for older people to consider such a move, were important (Copeman & Porteus, 2017).

Conclusions

The lack of literature in this area demonstrates a gap in the knowledge around the rehousing experiences of older people living in social housing. Much of the gray literature, while of good quality, was written with the aims of the report's authors in mind and, as such, could often be narrow in their examination of the issues affecting older people. The potential learning from the experiences of older people who undergo such moves in later life is vital in providing social housing providers with the information to better shape their house moving programs in order to optimize the experiences of older residents. Given the impact of housing on health, further and scientifically robust studies that examine the effects of rehousing on the mental and physical health and well-being of older people, and on how well the process of moving works, are urgently needed. It is therefore recommended that greater efforts should be made by the academic community and funders to conduct and support research into the experiences of older social housing tenants in order to better characterize their needs and preferences, motivations for moving, experiences of the process of moving, and health outcomes. By understanding these, local authorities and housing associations will be able to implement policies and programs that will give older tenants the confidence and support to consider moving to a home that better suits their needs and that will give support for tenants in nonelective moves. This will help foster improved health outcomes to allow them to remain independent in their own homes for longer (Oldman, 2014).

Disclosure statement

No potential conflict of interest was reported by the author(s).

Funding

This study is funded by the National Institute for Health and Care Research (NIHR) School for Public Health Research (SPHR) Public Health Practice Evaluation Scheme (SPHR-PHPES030-DHS). The views expressed are those of the author(s) and not necessarily those of the NIHR or the Department of Health and Social Care.

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Appendix

JBI critical appraisal checklist for qualitative research

Reviewer **CM,** Date **5th November 2021**
Author **Morris et al.,** Year **2007**

		Yes	No	Unclear	Not applicable
1.	Is there congruity between the stated philosophical perspective and the research methodology?	□	□	x	□
2.	Is there congruity between the research methodology and the research question or objectives?	X	□	□	□
3.	Is there congruity between the research methodology and the methods used to collect data?	X	□	□	□
4.	Is there congruity between the research methodology and the representation and analysis of data?	X	□	□	□
5.	Is there congruity between the research methodology and the interpretation of results?	X	□	□	□
6.	Is there a statement locating the researcher culturally or theoretically?	□	□	x	□
7.	Is the influence of the researcher on the research, and vice versa, addressed?	□	x	□	□
8.	Are participants, and their voices, adequately represented?	X	□	□	□
9.	Is the research ethical according to current criteria or, for recent studies, is there evidence of ethical approval by an appropriate body?	X	□	□	□
10.	Do the conclusions drawn in the research report flow from the analysis, or interpretation, of the data?	X	□	□	□

Overall appraisal: Include x Exclude □ Seek further info
Comments (Including reason for exclusion)

JBI critical appraisal checklist for qualitative research

Reviewer **CM,** Date **6th November 2021**
Author **Baker et al.,** Year **2007**

	Yes	No	Unclear	Not applicable
1. Is there congruity between the stated philosophical perspective and the research methodology?	□	□	x	□
2. Is there congruity between the research methodology and the research question or objectives?	X	□	□	□
3. Is there congruity between the research methodology and the methods used to collect data?	X	□	□	□
4. Is there congruity between the research methodology and the representation and analysis of data?	X	□	□	□
5. Is there congruity between the research methodology and the interpretation of results?	X	□	□	□
6. Is there a statement locating the researcher culturally or theoretically?	□	x	□	□
7. Is the influence of the researcher on the research, and vice versa, addressed?	□	x	□	□
8. Are participants, and their voices, adequately represented?	x	□	□	□
9. Is the research ethical according to current criteria or, for recent studies, is there evidence of ethical approval by an appropriate body?	□	x	□	□
10. Do the conclusions drawn in the research report flow from the analysis, or interpretation, of the data?	x	□	□	□

Overall appraisal: Include X Exclude □ Seek further info □
Comments (Including reason for exclusion)