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Exploring identity and aging: Auto-photography and narratives of low income older adults

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ABSTRACT

This study focused on meanings of health, housing, independence and aging among low-income adults age 55 and older who live in, or are on a waiting list for, publicly subsidized rental housing. The purpose was to learn how low-income older adults perceive their independence and health, and how their place of residence contributes to these perceptions, as well as related perceptions of self. Qualitative data were collected using in-person narrative interviews with 45 individuals and a second photo elicitation interview with 31 of these persons. Themes describe how disrupted identities influence subjective thoughts about the aging process, housing, health, and finances, the process of clinicalization, and place identities. These findings highlight the relationship between housing status, dignity, and shifting identities as older adults experience the aging process in a low-income context. This study expands the current scholarship on the relationship between environment and aging as well as our understanding of poverty among older persons. These topics are relevant for new policies and programs to support the aging in place of older persons in subsidized housing. Understanding the life worlds of those who live in or have applied to this form of housing will be instrumental in developing such strategies.

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Introduction

The purpose of this study was to learn how low-income older adults perceive their independence, health, and identity in relation to their place of residence. Participants included both current residents of publicly subsidized housing and individuals who had applied for and were on a waiting list for rental assistance. By exploring the relationship between independence, health, personal identity, and place identity in the context of low-income older adults, this study expands the current scholarship on the relationship between environment and identity and aging in place, especially as these concepts relate to older persons living in poverty. Traditional representations of aging in place are challenged when considering persons who are very low income and/or live in distressed urban neighborhoods (Byrnes, 2011). These topics have policy relevance, as housing providers, advocates, and policymakers seek strategies to support the aging in place of elderly subsidized housing residents (Golant, 2003; Harahan, Sanders, & Stone, 2006; Milbank Memorial Fund, 2006; Redfoot & Kochera, 2004; Spillman, Biess, & MacDonald, 2012).

Poverty, housing, and health of low-income older persons

Nearly 3.5 million persons age 65 or older were below the poverty level, with annual incomes no more than $10,830 in 2010; another 2.3 million were classified as "near-poor" with incomes between poverty and 125% of that level (Administration on Aging, 2011). These numbers represent about 15% of older persons. Older women had higher poverty rates than men (10.7 versus 6.7%), with those living alone three times as likely to be poor than those living with

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others (Administration on Aging, 2011). The median income of older persons was $25,704 for males and $15,072 for females (Administration on Aging, 2011). These statistics, however, offer only a partial profile of poverty among older persons.

Publicly-subsidized housing provides an important source of income stability for low-income seniors. In the United States, more than one-third of the approximately 5 million households receiving housing assistance from the Department of Housing and Urban Development (HUD) are headed by a person age 62 or older (Locke, Lam, Henry, & Brown, 2011). The majority of older, subsidized housing residents are women living alone with annual incomes between $5000 and $15,000 (Haley & Gray, 2008) and a median net worth of $500 (Parsons, Mezuk, Ratliff, & Lapane, 2011). The racial and ethnic makeup of this group of older women is primarily White (61%), but also includes Black (19%), Hispanic (13%), and other non-Hispanic racial groups (7%) (Haley & Gray, 2008).

Subsidized rental housing is intended for persons who can live independently. However, some older adult residents of subsidized housing have significant health and social needs. Most residents age 62 and older have at least one chronic health condition (Parton et al., 2011; Vladeck, Segel, Oberlink, & Gurson, 2010) and one-fourth have difficulty with instrumental activities of daily living (IADL) (Cotrell & Carder, 2010; Haley & Gray, 2008; Parton et al., 2011). These individuals have a hospital admission rate 2.3 times the rate among age peers, and 3.4 times the rate of all low-income persons (Gibler, 2003).

Nearly one-third of residents in HUD properties for seniors are age 80 or older and nearly 20% of new residents are age 80 or older (Haley & Gray, 2008). Over one-fourth of elderly persons who moved out between 2000 and 2008 were at least 85 years old (Locke et al., 2011). Thus, subsidized housing is important to persons who have very low incomes and are among the oldest old.

Most applicants for rental assistance face long waiting lists, despite meeting income eligibility requirements. A study of HUD properties designated for people age 62 and over found that properties in metropolitan areas had about 11 applicants per available unit; applicants typically wait over two years for an available unit (Haley & Gray, 2008). In reality, many U.S. cities have closed their public housing waiting lists, or open them only infrequently (Quigley, 2010). Information about older persons waitlisted for housing assistance is nearly absent from academic literature. Thus, this paper reveals the lived experiences of both current residents and those who have been waitlisted for subsidized housing.

Independence and place

Independence in the context of living environments is an enduring theme in gerontology. Research has been conducted on the socio-cultural meanings of independence for older persons in nursing facilities (Gubruim, 1993; Kapp, 2005; Smithers, 1990), assisted living residences (Ball et al., 2004; Carder, 2002; Morgan, Eckert, Piggee, & Frankowski, 2006), and the home environment (Cristoforetti, Gennai, & Rodeschini, 2011; Kahana, Lovegreen, Kahana, & Kahana, 2003; Kaufman, 1994; Rubinstein, 1989, 1990; Smith, Braunack-Mayer, Wittert, & Warin, 2007). In these and other studies, independence has been conceived as a basis for quality of life, autonomy, personal identity, and aging in place (Wiles, Leibing, Guberman, Reeve, & Allen, 2012).

Prior research, however, has not illuminated the meaning and experience of independence among low-income older persons.

Identity and place

Broadly speaking, identity refers to the individual's definition of who one is. The meanings and sources of personal identity have been explored in relation to aging (de Medeiros, 2005, 2009; Moss & Moss, 2007; Twigg, 2010), psychiatric illness (Estroff, 1989; Karp, 1997), and chronic disease (Carder, Vuckovic, & Green, 2003; Charmaz, 1995; Hayes-Bautista, 1976). The relational identity between individuals and their living environment, an important concept for gerontologists (Rowles, 1978; e.g., special issue of the *Journal of Aging Studies* edited by Moore & Ekerdt, 2011), is the focus here. Rubinstein (1990) introduced the concept of "environmental expression" to describe how key aspects of personal identity were expressed in environmental terms—essentially, the process by which the individual is both made by and makes their local environment, and how this is expressed in narrative form. This concept is important because it expanded on Lawton's (1986) notion of person–environment fit by considering the socio-cultural dimensions of person and place. More recently, Byrnes (2011) critiqued "aging in place" by showing how residents of a subsidized apartment building cultivated spaces within the building that substituted for those in their Detroit neighborhood that were either lacking or unsafe. She argues that gerontologists must recognize that some environments are not suitable for aging in place and that our normative notions of place attachment are based on middle class ideals. Similarly, Golant (2008) has cautioned against over-emphasizing the importance of aging in place.

Methods

Research design

This project integrated auto-photography with narrative interviews and photo elicitation with photographs taken by research participants. The study aimed to address two research questions: 1) How do low-income older adults living in, or on a waiting list for, subsidized housing perceive their health and independence? 2) How do low-income older adults describe the benefits and challenges associated with their current housing or surrounding neighborhood? A third research question emerged during analysis: How does living in or applying for subsidized housing affect older adults' identity and sense of self?

Many studies using visual research methods have highlighted the themes of self, identity, and place. Visual methods paired with individual narratives including auto-photography, photovoice, and digital storytelling have provided a unique platform for understanding the identification of self and the exploration of changing identities. The use of auto-photography with individual narratives has been instrumental in research related to identity among aging bodybuilders (Phoenix, 2010), hairdressers in their workplace (Shortt & Warren, 2012), adolescent Latina girls (Noland, 2006), and Indian women (Noland, 2006), among others. Pairing auto-photography and narratives has been used to understand experiences of homeless spaces (Johnsen, May, & Cloke, 2008) and the