Applying a Multidimensional Intersectionality Analysis: Perspectives of Sense of
Place from Low-Income Seniors at the Intersections of Multiple Oppressions,
Positionalities and Identities

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Introduction

Aging in place refers to the "ability to live in one's own home and community safely, independently, and comfortably regardless of age, income, or ability level" (Centers for Disease Control and Prevention, 2013). Here home and community (for many people) are often imbued with positive constructions implying that they are important to identity, sense of purpose and the living of a meaningful life. For example, research on the meaning of home suggests a place of personal and symbolic meaningfulness which provides security, safety, privacy, independence and choice (Sixsmith, 1986). Home, however, is not always and consistently experienced in such positive ways and can be experienced as a prison, a burden and a worrisome environment (Sixsmith and Sixsmith, 1992). Similarly, belonging to community can give rise to both positive and negative feelings and experiences (Boneham and Sixsmith, 2001). It is in this complex psychosocial and environmental context that the policy drive towards aging in place should be understood.

The aging in place agenda within policy has concentrated predominantly on modifying the physical environment and has assumed positive social and health outcomes. Furthermore, the concept of 'aging in place' has been scrutinized in gerontology particularly with respect to 'staying put' at home (Sixsmith and Sixsmith (2008) as well as transitions into multilevel senior housing, as older adults age since they are gradually and continuously transitioning into housing that require higher levels of support or care (Morgan et al., 2011). Paradoxically, older people tend to desire aging in one place as opposed to many places. Often, their personal preferences emphasise residing in one place or home for as long as possible (Klein, 1994, Mutschler, 1992). In consideration of these preferences, it is important for policy responses to incorporate varied experiences of 'aging in places' particularly for individuals situated in positions where they are less able to access resources and navigate systems to age well in place. Aging in place is often seen as a panacea for good quality of life and improved wellbeing as people get older. This is not always the case, as Sixsmith and Sixsmith (2008) argue, sometimes aging in place can be a negative experience when the older persons housing is substandard and services in the community do not cater for their specific lifestyles.

Where environmental, socio-psychological and financial context are supportive of high quality of life, and wellbeing, aging in place can be very successful. It has been well documented that older people residing in affordable, adequate housing accommodations are far more likely to report 'leading a life which they value.' (Morris, 2009); yet, in recent years, changing economies across nations have created social and financial divisions between groups of older people. This can impact on some people's ability to access resources and opportunities that dictate housing circumstances and sense of wellbeing, leaving some older people with minimum capacity to control and enjoy their everyday lives (Clapham, 2002, 2003; Phillipson, 2007). When financial resources are not sufficient to remain in the family home or when urban regeneration dictates, forced

relocation can mean that older people's lives are substantially disrupted. Often, forced relocations contributes to poor health and wellbeing inducing feelings of anxiety, fear, dread, uncertainty (Hrybyk et al., 2012); leading to negative outcomes of social isolation (Ayalon & Green, 2012); displacement [Ref], sudden and rapid declines health [Ref] and early death (ref).

For recent ethno-cultural immigrants to Canada, access to adequate housing continues to be a key challenge, particularly for those that have limited financial resources as well as social and cultural capital (Carter, 2005). For older adults, this challenge is further complicated by vulnerabilities associated with getting older (such as difficulty navigating systems, frailty, long-term health conditions, mobility etc.); making them more susceptible to living in poor or substandard housing as well as shared accommodation with strangers of similar ethnic backgrounds (Teixeira, 2014). According to Teixeira (2014), for newcomers living in the Vancouve neighbourhoods of Surrey and Richmond, more than half of their monthly household income was used for rent, making them more at risk for food insecurity and homelessness.

Developing age-friendly communities require careful consideration of how individuals connect and interact with physical environments and (equally important) the social characteristics of the surrounding neighbourhood spaces (Greenfield, 2015). Barriers to aging well in place subsequent to relocation are associated with limited finances, complex health and social care resources, lack of social and cultural capital as well as language barriers (particularly for newcomers); unfamiliarity with and lack of availability of community supports and services (Greenfield, 2015). Such problems are shaped as much by organisational and policy constraints as well as individual contexts

and circumstances including their positionalit(ies), idenit(ies) and the various oppression(s) they may experience throughout the life-course. By focusing on the intersections between the person and the organisational and policy context, such 'wicked' problems (reference) can be more comprehensively understood and addressed.

This chapter aims to problematize dominant, positive policy discourses about aging in place using a multidimensional intersectionality framework. This framework identifies the person's position(s) in society, identit(ies) which they assume (or are imposed upon them) and the oppression(s) that they experience based on the dominant community, organisational and policy context as well as their interlocking locations in time and space ('place'). In this paper, a complex intersectional study of older people and aging in place was undertaken to inform new policy directives for enabling older people to age well in place.

Theoretical Framework

An intersectional lens was used to guide the study exploring the experiences of aging in place of older, low-income women and men of diverse cultural and historical backgrounds transitioning from an existing outdated apartment complex into new build affordable housing in the same location. An intersectional framework is particularly well suited to address the aims of this study as it takes into account interlocking social and cultural drivers of inequity such as ethnicity, gender, age and socioeconomic status,

¹ Intersectionality describes an analytic perspective and framework that understands individuals as situated in multiple social categories that interact to cumulatively shape their social identities, life experiences and opportunities (Crenshaw, 1995; Hankivsky & Cormier, 2011; Yuval-Davis, 2006).

which shape experiences of wellbeing. Another key principle of intersectionality crucial for this study concerns the prioritization of minoritised experiential perspectives through the concept of 'centring in the margins' whereby people's experience of marginalisation is forefronted. This requires an intensive engagement with older people who are experiencing the housing transition process, focusing on the ways in which they see themselves (their identities), their locations within broader society and the difficulties they face (ie oppressions) when negotiating the organisational and policy landscape.

In relation to identity, Cohon & Carter (2014), suggest 'identity' in simplistic terms represents who a person is. Identity has been construed as both a personal and a social construction formulated by subjective individual experiences and shaped by experience; creating a lens in through which people perceive themselves in association with where and how they are situated within society (Yep, 2002). Such experiences can shape a person's behavior, mannerism and ultimately their role in the social world (Yep, 2002). Identity can be further understood as an amalgamation of personal and social interpretations emphasizing distinct characteristics and traits which distinguish oneself from others as well as identities within relationships; all of which involve some form of ascribed attributes reinforced by societal norms and expectations (Andersen & Chen, 2002; Ashmore, Deaux, & McLaughlin-Volpe, 2004; Brewer & Gardiner, 1996; Sedikides & Brewer, 2001). Here, identity is not seen as a solely personal and singular construction, rather people personify and express a multitude of identities. They can hold simultaneous multiple identities such as mother, sister, professor and carer. Some forms of identities are held in higher esteem than others (1980; Stryker & Statham, 1985). Identities can be characterized as multiplicative and shaped by political and

historical contexts (Brah & Phoenix, 2004). Some categories of identity capture an individual's race, age, class, religious identity amongst others (Yep, 2002). Societies, however, experience paradigm shifts across time and thus the embodiment of various identities and how they are expressed will also traverse time and changes in social, political and economic contexts (Deaux & Major, 1987; Deaux & Martin, 2003; Ethier & Deaux, 1994; Ellemers, Spears, & Doosje, 2002).

Concerning social positionality, research posits that 'positionality' is a way of 'being' or 'knowing' that is influenced by fluctuating social, political as well as economic structures and institutional contexts (Allen, 2013). According to tenets and assumptions of intersectionality, an individual's locale or position in society is situated through the interweaving of multiple positions such as a person's gendered position, financial position etc. (Anthias, 2012). Unique facets of positionality are consolidated by an individual's pronounced or assigned identit(ies) which can include (but are not limited to) race, gender, age, occupation and family role and others (Anthias, 2012). Consequently, an individual's position (and where they are situated on the social hierarchy) is often reinforced by their subjective experience and shaped by interlocking identit(ies) in association with the physical and psychosocial environment (Collins 1991; hooks 1984; Ioris 2011; Pulido and Pena 1998). Ultimately, varied positionalities in society establish inequitable social divisions between groups enabling some people to be in elevated positions of power compared to others. Such inequities linked to both identity and positionality can contribute to poor health and wellbeing outcomes. It is in this context that the current research unpacks the intertwined notions of identity and positionality to

reveal the underlying problems that spring from an uncritical application of aging in place policy.

The notion of disadvantage is conceptualised in the context of oppressive social structures and practices. Oppression has been previously referred to as "the systematic abbreviation of possibilities of mastery of most or all facets of life for a specifiable group (Adam, 1978, p. 8)"; highlighting how social and health inequities are spawned through a system reinforced by stratification of groups, ultimately creating social wedges of 'us' and 'them.' (White, 1994). Social constructions which distinguish 'sameness' from 'the other' are characterized by markers such as race, sexual orientation, age, gender and ability (White, 1994). Oppression has also been described as a force that is imposed on a person or persons consisting of unwanted experiences, unexpected circumstances and undesired living conditions that detract from wellbeing (Hanna et al., 2000). Facets of oppression can include but are not limited to exploitation, marginalization, deprivation, persecution, powerlessness, cultural imperialism, and various forms of violence (Young, 1990). Watt (1999) posits that, consistently, oppressor(s) embody a sense of entitlement fueled by social privilege; and it is when privilege is left unquestioned and unchallenged that the oppression of some groups becomes pervasive and normalized in society. Young (1990) reinforces this claim by arguing that some groups are subjected to oppression not through explicit or blatant acts but rather through 'the everyday practices of a wellintentioned liberal society (p. 41)". It is through such pernicious exploitation of some by many that the continuation of the status quo should be challenged. In the current research, the status quo of housing for disadvantaged older people is challenged.

For the purpose of this paper, the perspectives of older people are analysed to identify the ways in which aging in place policy can be informed by a multidimensional intersectional analysis of their experiences of housing transitions in relation to identity, social positionality and oppression.

Methods

Taking the need to understand this complex transitional issue at the macro, meso and micro level (Bronfenbrenner, 1977; Bronfenbrenner and Morris, 1998) into account, to engender a sense of engagement and to ground the research in the lived experiences of older, low- income women and men of diverse backgrounds, a multiple-methods, community-based participatory research (CBPR) approach was adopted. The multiplemethods research design generated deeper, individual (in relation to community and societal level) understandings of older people's sense-of-place and identified the barriers and challenges they experienced in the relocation process through in-depth interviews, storytelling and photo-tours. In addition, the perspectives of housing officials, housing management companies and local resource providers were documented through knowledge cafes, perspectives workshops and focus groups.

Aligned with the tenets and assumptions of intersectionality, this community based participatory research (CBPR) approach was underpinned by principles of equity, empowerment, inclusion, and partnership working with older, low-income women and men of diverse backgrounds. In general, CBPR operates against oppressive practices and promotes: the mutual transfer of knowledge and expertise; inclusive participation; power sharing and equity; and data ownership across all partners (Jones & Wells, 2007). CBPR recognizes that traditional approaches to research may not be appropriate or generate the necessary insights into how older, low-income women and men of diverse backgrounds transition within the context of their social, cultural and built environment.

Research Design

The study design was selected to provide participants with the 'space' and platform to voice their perspectives and to articulate their lived experiences so that professionals within the housing and social care context—with decision-making powers can co-constructed dialogues and use such dialogues as a catalyst for action. The focus of such action would be to ensure that enforced housing transitions can enhance the experience of aging in place rather than create stress and anxiety detrimental to older people's health and wellbeing. CBPR recognizes that 'expert knowledge' resides in people's everyday experiences and communities; knowledge which can be mobilized to bring about new understandings and work towards equitable social change. To articulate the ways in which 'sense-of-place' in the context of aging in place is experienced by older, low-income women and men of diverse backgrounds transitioning into a purpose built affordable housing complex, a multiple-methods study design was employed. Primary methods were:

- in-depth semi-structured in-home pre move interviews (n=25) (lasting on average 45 minutes) and
- visual photo tours around the home and local community (n=16; approximately
 1-2 hours in length).

with older local residents Together these comprised a series of case studies. In line with participatory research processes, residents engaged in the co-analysis of the data in individual sessions with the researcher. This process will be repeated post-transition into the new build affordable housing complex. In addition, it is planned to conduct community mapping workshops in order to identify how community services and resources can best be marshalled to support and improve the wellbeing and quality of life of residents.

Participants

A total number of 25 residents transitioning into affordable housing have been involved in the research to date. The resident sample reflected both existing residents (those temporarily relocated from the old development) and new residents. Residents were identified through community stakeholders and organizational leaders and invited to participate in the research. Informed consent was obtained from all participants in writing, and the research was conducted in accordance with the British Psychological Society's (2010) ethical guidelines whereby issues of confidentiality, privacy, anonymity, protection from harm, support and capacity to withdrawn from the research were all attended to. In addition, the protection of the researchers As the research will progress into a second stage post move stage, longitudinal ethical consent will be gained.

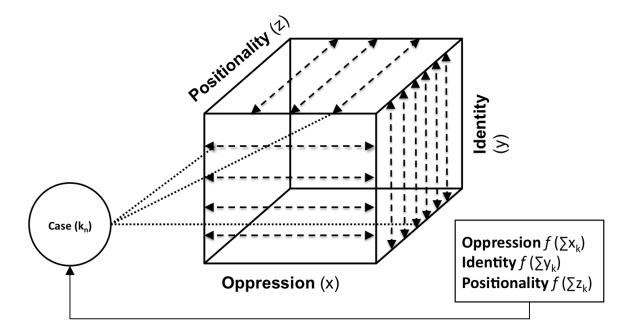
Data Analysis

Data was analysed in collaboration with local residents to ensure rich capture of local residents experiences of sense of place. In-depth interviews and data was analysed thematically (Braun & Clarke, 2006) in NVIVO 10 using a structured Thematic Framework approach (Gale et al., 2014). Key issues guiding this were derived from initial interview data. Visual data was co-analysed with residents in order to explore the different understandings of sense-of-place through the prioritisation of the voices of older, low-income women and men of diverse backgrounds transitioning into affordable housing. The relationships between interview and visual imagery and other knowledge (via resident community mapping and professional stakeholder perspectives) will be triangulated to enrich 'different ways of knowing (Pink, 2013, p. 144).' The current analysis was guided by questions concerning an intersectional analysis as follows:

- What are the key experiences of aging in place and how do these personal experiences relate to social and structural locations and processes (e.g., gender, ethnicity, socio-economic status, age; patriarchy) in this policy area?
- How does the transitional process of aging in place differentially impact the older residents?
- How do identity, social positioning and disadvantage impact the experience of transition, such that existant inequalities can be identified and subsequently frame policy, guiding positive ageing in place experiences.

The analysis assumes a multidimensional perspective in which the different identities, social positions and oppressions experienced by older people in the process of housing transition are considered together. The concept of 'n-dimensional space' is invoked here such that a person's experiences can be understood in relation to the multiple identities they inhabit alongside the multiple social positions they occupy and the multiple socio-structural oppressions they face. This is expressed in figure 1 below where any individual person's experiences are simultaneously understood within a matrix of identity, positionality and oppression.

Figure 1: Framework for a Multidimensional Intersectionality Analysis



The remainder of this paper will explore the case of one person drawn from the study data in order to exemplify the intersections between identity, positionality and oppressions which shape older people's experience of housing transitions. The implications of this analysis for aging in place policy are then discussed in order to

generate policy and practice recommendations and guidelines to inform future planning and housing development projects for older people.

Applying MIF: Case Example

Mr Zhao (pseudonym) was 72 years of age when he took part in the research and had lived in an apartment in the low rise Kiwanis Court for approximately 16 years. He saw himself as an older person, as a male provider and the family patriarch of two children who emigrated to Canada. Mr Zhao and his wife, like many other immigrant grandparents, were sponsored to move to Canada from China to care for his grandchildren in 1998. When Kiwanis Court was demolished and all residents were forced to relocate, Mr Zhao and his wife separated and subsequently divorced. The move acted as a catalyst for separation amongst other factors including persistent rowing and shifting personalities over time as the aging process progressed:

I have been in Canada for 16 years. I came here with my wife but we divorced. It is not a big problem. When people grow old, we have our own odd personalities. It is hard to have commonalities. We were tired in arguing with each other so decided to live alone. There is limited time (to stay in the world). She is two years older than me. If we continue to stay with each other, we may feel sick (unhappy). We separated since moving out (from the previous place).

Mr Zhao moved into a privately owned 'family hotel' because of the low rent which is all he could afford. The owner rents out rooms/parts of rooms illegally (at 400CAD per month per person, netting 4800CAD per month) and the whole property is over capacitated where rooms are divided by bedsheets affording little privacy, comfort or

basic hygiene. He finds it difficult to negotiate better living conditions with the owner because he

- lacks ability to communicate with proficiency in English
- fears being thrown out and becoming homeless
- is financially constrained and cannot find another affordable housing solution
- lacks understanding of his rights as a tenant and resident in Canada.

His identity as an older Chinese immigrant confers to him little status and power in Canada and his positionality in poverty, as a non English speaker and inability to navigate social structures combine to exacerbate his housing situation. Despite this, Mr Zhao prefers to remain in the family hotel rather than relocate to the new build Kiwanis Towers. He explains this in terms of his fear of losing well established social connections with his roommates which he considers as family as well as increase rent which he can ill afford:

I have a good relationship with my roommates. Because all of us come from mainland China, we consider each other as family members. Here is far from our hometown. If someone here has any difficulty, we of course will do a favor. We are a big family. [Laugh]. We didn't know each other before moving in. I have been here for about three years. I moved here from the Kiwanis Court. I will move back there soon, in March next year. I signed the contract but haven't decided to move. ... In August this year, we (the previous residents) were informed to move back in March 2015. Why I don't want to move back? The rental increases. The rent there was \$400 before but will increase to \$710. And the electronic fees are excluded. We have to pay the electricity to cook and heat.

Besides, we have to pay the telecom and internet. It will be almost \$1,000. My pension is \$1,040. I know we can apply the subsidy from the government but I have no idea how much I can receive.

Mr Zhao is in a difficult housing situation because his age militates against finding employment:

I am older now and hard to find a well-paid job. I survive depending on my pension almost and have to save the cost. ,,,Of course, the environment of the new building would be great. The roof in my room now is leaking when it is rainy.

Mr Zhao is 'othered' by a bureaucratic system which requires service users to speak English well, to have an adequate education enabling them to complete complex forms and understand their rights. Without sufficient social supports (Mr Zhao lives alone and is divorced) he has little social capital to draw on.

Table 1. The case of Mr. Zhao.

Positionality	Identity	Oppression
Poor	72 years of age	Employment
Non-English speaking	Male	Housing
Inability to navigate structures and systems	Chinese	Lack of recognized Canadian education
Divorced	Immigrant	Loss of social networks
Living alone	Grandparent	'Othering'

Concluding Remarks

The forgoing analysis shows how individual experiences of aging in place are highly complex and require in-depth understanding of the various identities, positionalities and oppressions. Age in itself tells us little about the challenges and disadvantages older people face in their housing situations. It is only when age is placed in relation to other identities such as immigration status and being a Chinese person that the deficiencies in the policy are evident. The application of an aging in place policy would not serve to improve Mr. Zhao's situation. Alongside aging in place, Mr. Zhao requires support with language and navigating welfare and housing services, an advocate to assist with difficult and unjust rental systems as well as the opportunity to live in a community where he is valued not only as an immigrant but as a Chinese person. Current policy on aging in does not recognize or provide directions for empowering people like Mr. Zhao as housing priorities predominantly focus on the physical environment rather than engaging with socio-psychological realities of everyday life. As demonstrated in the analysis, the multidimensional intersectionality framework has shown to be a useful tool for future policy analyses. However, it is important to note that the tool is most effective when applied to multiple cases creating a storyboard of shared experiences to inform place based policy development.

Key Messages:

- Aging in place policy assumes positive wellbeing outcomes yet aging in place for some can be a negative experience.
- 2. Current urban regeneration initiatives concentrate primarily on transforming the physical space whilst negating the psycho-social and cultural realities of everyday life.
- 3. The multidimensional intersectionality framework is a resource that helps contextualize everyday aging in place experiences to inform place-based policy development.