



Housing Voices: Using theatre and film to engage people in later life housing and health conversations

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1 Housing Voices: Using theatre and film to engage people in later life housing and health
2 conversations
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6 **Abstract**
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9 **Aim:** Quality, accessible and appropriate housing is key to older people's ability to live
10 independently. Our research seeks to understand older people's housing aspirations and
11 whether these are currently being met. Evidence suggests one in five households occupied
12 by older people in England do not meet the standard of a decent home. The Building
13 Research Establishment has calculated that poor housing costs the English National Health
14 Service £1,4bn annually (Roys et al., 2016).
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23 **Method:** This article reports on the findings of a participatory theatre approach to engaging
24 with those not often heard from –notably, those ageing without children and older people
25 with primary responsibility for ageing relatives – about planning for housing decisions in
26 later life. The project was led by an older people's forum, X Council Newcastle, with X Arts
27 organisation and Northumbria University, in the North east of England.
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36 **Results:** Findings suggest there is an urgent need to listen to and engage with people about
37 their later life housing aspirations. There is also a need to use this evidence to inform
38 housing, health and social care policy makers, practitioners, service commissioners and
39 providers and product and service designers, to encourage older people to become
40 informed and plan ahead.
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48 **Conclusion:** Use of a participatory theatre approach facilitated people to explore their own
49 decision-making and identify the types of information and support they need to make
50 critical decisions about their housing in later life. Such insights can generate evidence for
51 future housing, social care and health needs. Findings endorse the recent Communities and
52 Local Government (CLG) Select Committee Inquiry and report on Housing for Older People
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3 (Department Communities and Local Government, 2018) and the need for a national
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5 strategy for older people's housing. Although this call is evidenced through an English
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7 national case study, from within the context of global population ageing, it has international
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9 relevance.
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Housing, Care and Support

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3 **Introduction**

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6 In England, population ageing, a lack of suitable 'moving on' housing options and a social
7 care sector in crisis has prompted a policy move towards integrated health and social care.
8
9 NHS England (National Health Service England, 2018) recently provided a guide to a joined-
10 up, place-based approach to local housing, health and social care service delivery. A multi-
11 stakeholder, 'Memorandum of Understanding', gave renewed commitment to joint action
12 across government, health, social care and housing sectors, to improving health through the
13 home (Public Health England, 2018).
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26 Yet evidence suggests that large numbers of older people are living in under-occupied
27 homes and one in five households occupied by older people in England do not meet the
28 standard of a decent home (Department Communities and Local Government, 2017). A
29 'decent home' is a minimum standard council (social housing) and housing association
30 home, that should be free from serious health and safety hazards, be in good state of repair,
31 have efficient heating and insulation and have reasonably modern facilities. Very few homes
32 of any type (including privately owned, privately rented and social housing) are accessible.
33 Just 7% (1.7 million) of the current English housing stock has all four accessibility features
34 that make them 'visitable' by most people (Department Communities and Local
35 Government, 2017). Visitability means that anyone who uses a wheelchair or other mobility
36 device should be able to visit. 'Housing stock' is a comprehensive term, referring to the
37 total number of houses and flats in an area, and is used in the annual English Housing
38 Survey, which includes analysis of age, size and type of home. The recent World Health
39 Organisation's (WHO) (2018) 'Housing and Health Guidelines', note that in the context of
40 global population ageing, non-accessible homes may lead to falls and injuries, as well as
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3 restricting social participation. In turn, this may decrease quality of life and place extra
4
5 burden on carers and formal services (World Health Organisation, 2018).
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10 The Building Research Establishment, a world leading multi-disciplinary building science
11 centre, has calculated that poor housing costs the English National Health Service £1.4bn
12 annually (Roys et al., 2016) and that excessively cold home homes and falls are common
13 reasons for needing medical intervention, hospitalisation and follow up treatment. For
14 example, in terms of morbidity, cold temperatures increase risks of respiratory problems for
15 older people, such as asthma and bronchitis; strokes and circulatory problems; hospital
16 admissions and recovery issues following hospital discharge and also impacts on dexterity
17 and lower strength, that can increase the likelihood of falls and accidental injury (Public
18 Health England, 2014, Rudge and Gilchrist, 2005).
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35 Despite high levels of home ownership, it has also been estimated that 67 per cent (1.1 m
36 people) of older people living in poverty, are owner occupiers (Pannell et al., 2012). This
37 may be partly due to the 1980s UK Thatcher Government's affordable 'right to buy' council
38 home schemes. Age UK contends that in more deprived areas, such home owners have
39 little or no equity available to exercise housing choice (Age UK, 2014). A recent English
40 Housing Survey (EHS) also identifies a rise in older private 'renters', with this likely to
41 increase, as currently, there are three times the number of middle-aged private renters
42 aged 45-64 than there were in 1996/97 (English Housing Survey, 2018). Private tenants pay
43 more than 40% of their household income on rent, compared to less than 30% for social
44 renters aged 75+ (Bibby, 2018).
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3 Where and how we live as we grow older is not something that many of us think about until
4
5 we find ourselves in difficulties and wishing we had planned ahead (Department
6
7 Communities and Local Government, 2018). Whilst there is a wealth of information
8
9 available nationally and locally on housing options, these tend to be very proscribed and
10
11 limited. Similarly, there is little one-to-one advice and opportunity to make sense of the
12
13 (limited) choices available.
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20 The term older people also conceals a diversity of voices and experiences. For instance,
21
22 research shows that individuals ageing without children, many of whom will not have
23
24 support from immediate family, often feel invisible and excluded from discussions about
25
26 ageing (The Beth Johnson Foundation / Ageing Without Children, 2016). Findings from the
27
28 Institute of Public Policy Research state that, in 2012, there were 1.2 million people aged
29
30 over 65 without adult children, and estimates suggest that by 2030 this will rise to 2 million
31
32 people. Yet, little work has been undertaken on the specific experiences, needs and
33
34 aspirations of older people in this position (McNeil, 2014). Census figures also identify that
35
36 1.3 million older people have primary responsibility for their ill partners or relatives (Carers
37
38 UK, 2013). This represents a dramatic increase of 35% in the last 10 years (Carers UK, 2013),
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40 and poor or unsuitable housing, and a lack of appropriate support is likely to place an
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42 additional burden on those in this position.
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51 There is an urgent need to listen to and engage with people about their later life housing
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53 aspirations, and generate evidence for policy makers, practitioners, providers, architects,
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55 town planners, commissioners and product and service designers, on how individuals and
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57 families can best be supported to consider their future housing needs. Below we introduce
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3 our partnership and the development of our participatory theatre approach, our
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5 methodology.
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13 **Methodology**

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15 Our participatory theatre approach fits with Handler's outline of 'small scale action' that
16 works with older people as active change agents who can and do make positive changes to
17 their lives and those of others (Handler, 2014). We have also been made aware of the value
18 and utility of performative social science (Gergen and Gergen, 2011, Jones, 2012). Gergen
19 and Gergen (2011: 1) define this methodology as "a dramaturgical approach that
20 encompasses value-laden, emotionally charged topics and presentations" and further,
21 suggest that it "invites productive collaborations among various disciplinary fields and
22 between the sciences and arts". This gets to the heart of our collaboration (social science,
23 arts organisation and older people's forum) that works with older people not only in a way
24 that listens to their stories and lived experiences from their perspective, but also ensures
25 that the context of such experience is not reduced to a linear, academic, textual 'telling' or
26 narrative on a flat page. Rather, through collaboration with artists, and using performative
27 tools such as theatre, photography, animation, drawing, poetry, dance, mime, film (within
28 our partnership, we have used a wide range of these tools), we can together create and
29 share a "synthesis that can break down old boundaries, open up channels of communication
30 and empower communities through engagement" (Jones, 2012: 1).
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56 As the voluntary older people's forum, the X Council works with agencies, organisations and
57 individuals to ensure the views of the over-50s are taken into account by decision-makers in
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3 Newcastle, England. In 2014, a long held understanding of the value of creative encounters
4
5 led the X Council to engage with Northumbria University, Newcastle University and a
6
7 Newcastle based, multi-disciplinary arts organisation (<http://url> here), to facilitate public
8
9 conversations about growing older in homes and neighbourhoods. The aim was to gain a
10
11 better understanding, from an older person's perspective, of how older people support
12
13 themselves and others in local neighbourhoods, the range of wider activity and support
14
15 available. It also aimed to raise important issues for those working in housing, care and
16
17 health in later life, about what needs to happen in the future to support ageing well in
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19 place.
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28 Northumbria University led the eight month project consultation and the X Council set up a
29
30 steering group with representation from project partners and their Housing and Health
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32 interest group. Ethical approval was obtained from Northumbria University.
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34

35 X Council recruited 22 diverse older people from two adjoining neighbourhoods, where they
36
37 had considerable networks and contacts and expended a lot of footfall recruiting people
38
39 from different cultures, socio-economic backgrounds and living with a range of health
40
41 issues. Some of our twenty two participants had rarely joined such groups, or through a
42
43 critical incident, such as an injurious fall or becoming widowed, had become quite isolated.
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45 Their trust in this voluntary older people's forum, our X Council, facilitated their recruitment.
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47 We explored participants' experiences of growing older in their homes and neighbourhoods
48
49 (XXXXX, 2018). This was realised through a series of 'world café' workshops and a week
50
51 long, arts residency; our participatory theatre approach. We held open conversations with
52
53 simple prompts (World Café) (Brown et al., 2005) and led by X Arts organisation, used
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55 artistic interventions such as storytelling and song and choreographic writing. Participants
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3 were able to explore their own and others' narratives about what they needed to stay put
4 and to stay well in their homes and communities.
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10 One of the outputs was 'Doorbells', a theatre production developed with participants to
11 fictionalise their shared health, social and housing issues, their coping strategies and
12 challenges. This was publicly performed twice, to all ages and in two local venues and a
13 second version, focusing particularly on one of the original characters, toured the 2015
14 Edinburgh Fringe Festival, with this including seven public performances.
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25 In 2018, X Council was approached by Care & Repair England (a national charity that seeks
26 to improve the homes and living conditions of older people), to consider being part of a
27 national initiative: 'Ideas in action – older people shaping policy and practice in housing'.
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32 With support from the Esmée Fairbairn Foundation (an independent grant maker that aims
33 to build an inclusive, creative and sustainable society), 'Ideas in Action' sought to fund local
34 older people's groups and organizations, to find ways to initiate housing conversations and
35 potentially influence housing strategies and deliver peer led, housing support (Care & Repair
36 England, 2019).
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47 From our previous two theatre productions of 'Doorbells' and cumulated audience
48 feedback, we were aware that those ageing without children can feel left out of relevant
49 conversations, such as those on future housing needs, and we were also aware of the
50 growing number of older people who have primary responsibility for their ageing relatives.
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55 We thus agreed a further version of the 'Doorbells' theatre production, a solo, with one
56 main character: "Doorbells - Dreaming for the Future'. This was created by X Arts
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3 organisation. The production was planned to be publicly performed to a targeted audience,
4
5 with post-performance, facilitated group discussions. To stimulate a shared, national and
6
7 potentially international conversation, a freely available film on location was also produced
8
9 (see: ADD post review), with an accessible 'post-card' resource pack to guide post
10
11 performance and post film viewing feedback and evaluation, and to capture ongoing
12
13 impacts. Ethical permissions were sought and granted from Northumbria University, Health
14
15 and Life Sciences, Ethics Committee.
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23 **The Audience**

24
25 For the premiere public performance, we targeted (as far as possible) those who are ageing
26
27 without children, generations younger than those aged 55+, and through X Council
28
29 networks, those who have primary responsibility for ageing relatives. Efforts to recruit these
30
31 groups included: making the target audience clear on event flyers; holding an evening
32
33 performance at a central location in Newcastle upon Tyne to enable those who work during
34
35 the day to attend; and disseminating the event through the organisation Ageing Without
36
37 Children's social media pages, mailing list and via 'word of mouth'. An audience of 33 was
38
39 achieved for this first performance. We were successful in reaching across all age groups,
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41 both men and women, and achieving representation from across postcode districts in
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43 Newcastle upon Tyne that vary by level of deprivation.
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52 **The Performance**

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54 'Doorbells - Dreaming for the Future', explores the multi-faceted experiences of home (as a
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56 castle, a container, a prison) and centres on a key question: how do we imagine the future
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58 of where and how we will live? The production follows the character of Kathleen who,
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3 behind her own doorbell, navigates the challenges we all face as we grow older – including,
4 what type of home will she live in, who will she live with, what she will be able to afford, and
5 how her social life will change. Original songs and live soundscapes were developed to be
6 playful and imaginative; the audience sees Kathleen escape from reality into a world of
7 books and stories and explores some of the decisions Kathleen faces in her life in a
8 humorous and sensitive way. At the same time, the performance prompts the audience to
9 think and talk more about the challenges we all confront as we age.
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23 **Post show discussion and feedback**

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25 Of 33 audience members, 18 participated in three facilitated, post-performance discussion
26 groups. Table 1 shows the questions used to guide discussion. Each discussion group had a
27 facilitator and a note taker. These were researchers from Northumbria University and
28 members of X Council. Informed written consent was obtained before the facilitated
29 discussion. We did not ask to audio-record the discussion as this was not a traditional focus
30 group and we wished to capture ‘natural conversation’. Comprehensive notes including
31 some verbatim quotations were hand written by facilitators and note takers.
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45 **TABLE ONE here: Post performance discussion questions**

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49 We also invited all audience members to complete a feedback post-card. Postcards asked
50 for free-text responses to the following question: “How, if at all, has the performance
51 prompted you to think more about where and how you might be living as you grow older?”
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55 We received thirteen postcard responses and Figure 1 gives an example. Finally, people
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3 were offered the opportunity to add comments to displayed flip-chart paper, using Post-it
4 notes.
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10 **FIGURE ONE HERE (Postcard)**
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14 **Data Analysis**

15 Notes from each discussion, post-card feedback and comments collected from post-it notes
16 were transcribed and read by the three researchers involved. Inductive thematic analysis
17 (Fereday and Muir-Cochrane, 2006) guided the analytical process. Firstly, the data within
18 and across all written material collected was grouped under similar codes. Codes were then
19 compared, each to the other and the collapsing or further grouping of the codes into larger
20 categories, denoted further analysis. Categories were grouped into themes and sub-themes
21 grounded in the data (Tobin and Begley, 2004).
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38 **Findings**

39 At the start of each discussion group and in order to capture a sense of the immediate
40 impact of the performance, each participant was asked to offer one word/phrase summing
41 up their reaction to the production. This we captured in a Wordle, which is presented in
42 Figure Two below:
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52 **Figure Two here (WORDLE)**
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57 We wish to highlight the use of the words 'worried' and 'confusion' by participants as issues
58 underpinning the discussion. That people enter later life in a state of worry or confusion
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3 about their future needs and options is likely to be detrimental to their quality of life, with
4
5 this in turn pointing to the need for trusted and low cost resources to guide them through
6
7 housing options and decisions in later life.
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13 Key themes that emerged from the data analysis were: *planning ahead; home and housing;*
14
15 *sources of information; and performance triggered reflections.* These and their sub-themes
16
17 are presented below.
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25 **Planning Ahead**

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28 From post-card reflections and discussion notes t This was the most common theme raised.
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30 Participants suggested that unpredictable and unexpected life changes (to family
31
32 circumstances, financial position, health, and neighbourhoods for example) make it hard to
33
34 plan ahead:
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37 Many options, no easy answer. Not always easy to plan ahead as life changes
38 sometimes suddenly [Postcard reflection]

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40
41 Sometimes we think the world used to be like 'this' and now it's like 'that', but
42 there's no universal experience, you have to plan from what you have [Discussant]

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46 Across the inter-generational audience and discussion groups, there was agreement that
47
48 planning ahead is about needing to take some control now, as change was harder to accept
49
50 when forced:
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53 I've never really thought about it before. Maybe it is a result of being under 30, but I
54 look pretty short term. I do know I would like the idea of being able to stay in my
55 own home but be able to live somewhere that has a strong community feel, with
56 event and a green space. I suppose this film has prompted me to look at life within a
57 social arena. [Postcard reflection]
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3 Make choices when you think you still have some control; change is much harder
4 when forced through circumstances. [Discussant]
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8 Participants described the sense of comfort gained from the familiar, and suggested that
9
10 experiencing and accepting change was beneficial to planning ahead:
11

12
13 There is a need to avoid 'hanging onto home' and being surrounded by clutter as a
14 reminder. [Discussant]
15

16
17 People who have experienced little or no change and who have lived in the same
18 place all their lives, may find change harder. [Discussant]
19

20
21 Taking control in relation to home requires a sense of adventure and an acceptance
22 of change. [Discussant]
23

24 While retirement was seen as a trigger for the need to plan ahead, people were seen as
25
26 having unrealistic expectations for what this stage of life will entail, and some felt that
27
28 waiting until retirement to plan is too late:
29

30
31 Some people can't afford to retire. [Discussant]
32

33
34 We don't address life changing decisions (wills, power of attorney, housing choices)
35 until it is too late. [Discussant]
36

37 This led to a discussion about intergenerational planning and the need for greater
38
39 opportunities for cross-generational dialogue, to raise awareness of the need to plan:
40

41
42 Young people are far too busy getting on with 'life', careers, family; work to be
43 considering their old age! [Discussant]
44

45
46 Need to encourage children and young people to spend time with older people
47 [Discussant]
48
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50
51 Keeping healthy was also considered as a good planning ahead strategy and participants
52
53 suggested ways to do this that included paid or voluntary work, and maintaining a
54
55 physically active lifestyle:
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58 Good work keeps people active. [Discussant]
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3 We need healthy ageing awareness early on – you age or you die young; we know
4 some people in their 30s/40s are not as fit as some in their 60s and over.
5 There is too much sitting at screens/desks all day [Discussant]
6
7

8 Taking control was also about knowing whom you can call upon for support:
9

10 In times of crisis you need to ‘know your convoy’ – if living alone, have honest
11 conversations with people (the convoy) about what they are prepared to do; support
12 needs to be reciprocal – so the convoy has to be able to do a U turn! [Discussant]
13
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16 However, there was also some agreement that even with good resources to hand,
17 challenges might arise:
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20 Loneliness can be common in later life; you can’t always predict its likelihood.
21 [Discussant]
22
23

24 Depression may be common in later life even when resources, housing, facilities,
25 family and friends are plentiful. [Discussant]
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33 ***Home and Housing***

34 Much of the discussion and reflections on home and housing focused on what might be
35 deemed suitable housing for later life. What might be desired was considered against the
36 reality of later life housing options and finances. While some people value the security
37 provided through owning their home, or raise concerns about leaving inheritance,
38 participants acknowledged that the sale of a privately owned home does not always bring
39 the income expected. Others suggest that having a small financial threshold beyond which
40 you have to pay for your own residential care, if needed, is not an incentive to save for
41 inevitable costs. Renting was sometimes considered favourable as it meant no responsibility
42 for repairs. However, retirement places and associated upkeep costs were considered
43 expensive.
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3 Often people wanted to plan ahead for their future housing but were hindered by the
4
5 limited choices in available housing options:
6
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8 Sometimes you don't want the types of home offered e.g. sheltered housing – what
9 are we being sheltered from? Is it life? This is patronising. [Discussant]

10
11 We're all very good at denial – it works and it's cheaper than therapy! But I realise
12 that I must face this deadline in life and how to deal with increasing decrepitude (I'm
13 72) though what I want (a 2 bedroom flat so family can stay), a garden, view of the
14 sunset, are not options available to me in social housing. [Postcard reflection]
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20 A desire for intergenerational living was reflected in both the discussion groups and
21
22 postcard submissions:
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24

25 It's good for older people to live amongst younger people. [Discussant]

26
27 Yes – something like student halls for 80 somethings. Surrounded by folk and able to
28 shut your own front door. Communal areas, guest bedrooms, great wifi and fitness
29 suites. City centre, good views out of window, plenty of daylight, no pollution. Work
30 with architects on this please. [Postcard reflection]
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35 Participants stressed that specialist housing should be joined to rather than separated from
36
37 the community (through shared spaces such as cafés or hairdressers for instance) that
38
39 create opportunities for connections:
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41

42 Within supported housing, it is important that people can mix and be part of the
43 community. There is a need to blend suitable housing into the community rather than
44 parachute this in. [Discussant]
45
46
47

48 Participants acknowledged that housing needs often changed, depending on changes in
49 personal and family structures:
50

51 Houses and homes change with dynamics of what goes on in the society/families (if
52 you have one). Does the house space still fit when things change – old age, divorce,
53 change financial circumstances [Discussant]
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55
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57 However, challenges to moving in order to secure a suitable home were also considered:
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60 Moving to a new district might mean losing friends and familiar facilities. [Discussant]

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3 Two people in a relationship might have different views about relocation.
4 [Discussant]
5
6
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8 As the main character within this performance was ageing without children the particular
9 challenges this group experiences in relation to home and housing later life options were
10 also considered:
11
12

13 Having no children to pass possessions on to, items don't mean anything to anyone
14 else. This may make relocation more difficult. [Discussant]
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17 Difficulty of receiving care from strangers. [Discussant]
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23 However, there were also comments suggesting that for those without children and also
24 living alone, they may be more used to making their own decisions and thus likely to be more
25 resilient:
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28 Those living as part of a couple get too used to having a 'security blanket', which
29 makes loss very difficult. [Discussant]
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38 ***Sources of Information***

39 There was general agreement that lots of people don't know what information or support is
40 available. Information was discussed in terms of its accessibility, appropriateness and
41 timeliness:
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45 Everyone is an individual with different needs and it is not always clear where the
46 best sources of information are to be found. [Discussant]
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50 Online' sources of information assume that most people are able to access such
51 resources. [Discussant]
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54 Often need is triggered by a crisis when it might be very challenging to find and use
55 such information. [Discussant]
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1 Housing Voices: Using theatre and film to engage people in later life housing and health
2 conversations

3 It was acknowledged that serendipity can play its part: ‘happening upon’ a resource for
4
5 example, as opposed to information being provided in a systematic way.
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12 ***Performance Triggered reflections***

13 Performance triggered reflections, particularly those related to the central character

14
15 ‘Kathleen’ raised a number of issues. In terms of Kathleen’s circumstances, being widowed
16
17 in her 60s and unexpectedly, living with an arthritic knee in a first floor flat without a lift,
18
19 expressing loneliness and being on the cusp of considering alternative housing:
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24
25 Kathleen is widowed, no children, part time work, sense of loneliness seeded but
26 might get bigger upon retirement – a clear message that we need to future proof!
27 [Discussant]
28

29
30 Kathleen’s resilience and creativity means she would work it all out in the end,
31 although advice would be needed. [Discussant]
32
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35
36 Some participants suggested that the film and discussion had prompted them to think more
37
38 about their own future housing options:
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41
42 As a 36 year old single woman, it certainly helped bring housing to the front of my
43 mind. If I do stay single, I know I wouldn’t want to live alone. I probably couldn’t
44 afford it and I already feel quite lonely as it is! [Postcard reflection]
45

46
47 It has certainly made me think “again” about if and when I need to move. However, I
48 feel in the same quandary as the woman in the play. Partly because of the lack of
49 good quality affordable housing. [Postcard reflection]
50

51
52 That the story may have unfolded differently depending on the class of the person,
53
54 differences in income stream or personality was also acknowledged:
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56

57 Men’s groups tend to be stereotyped (Men in Sheds); we need a male counterpart to
58 Kathleen – what would his story be like? [Discussant]
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3 Film is good. Would make a collection of films though to represent society, e.g. BAME
4 communities, Student.
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9 Kathleen's reflections on suitable housing as we age, triggered reflections on moving into a
10 care home including a discussion around how hard it is for men to consider moving to a care
11 home, with some disagreement on this point:
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16 Care homes now actively pursue 'doing activities' (e.g. gardening) that might appeal
17 to men. [Discussant]
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21 There was concern about a lack of attention to cultural needs, and openness to diversity,
22 but also recognition that internationally, there are some positive care home models
23 including locating children's nurseries next to, or within care homes (Netherlands) and
24 students living in care homes. There was, however, a general agreement that there is
25 insufficient choice of alternative living models such as co-housing.
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33 Discussion

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36 Our intergenerational discussion, prompted by collectively engaging in a theatre
37 performance, generated key findings that have policy and practice implications. Critically,
38 we found that: i) people feel unprepared for making housing decisions for later life; ii) that
39 younger people do not think about what they might need as they get older, partly because
40 of dealing with current insecure housing; and iii) that people wish to take control of
41 decisions about their future homes, but a lack of appropriate and accessible information, as
42 well as a shortage of appropriate housing, undermines their attempts to prepare.
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57 The success of our participatory theatre engagement suggests that people welcome
58 opportunities for conversation that enables them to explore options with others and in a
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1 Housing Voices: Using theatre and film to engage people in later life housing and health
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3 'safe' environment. The Care Act (2014) stipulates the need for Local Authorities (LA) to
4 provide information, advice and advocacy (IAA), and this is a priority of 'Think Local Act
5 Personal' (TLAP) partnerships. However, continued and significant cuts to local authority
6 budgets, withdrawal of funding to the charitable and voluntary sector and a UK government
7 policy that since 2010, assumes a digital delivery of government services, all appear to be
8 leading to greater online delivery of IAA.
9

10
11 Whilst our findings add to the evidence that there is still a need for face to face or telephone
12 advice and support, we took this further by using creative engagement as a safe way for
13 those who may already feel excluded from policy conversations, to collectively share their
14 perceived housing challenges and solutions. As we noted in our methodology section, this
15 engagement reflects both Handler's 'small scale action' with people as active change agents
16 who can and do make positive changes to their lives and those of others (Handler, 2014)
17 and also, that of performative social science "that can break down old boundaries, open up
18 channels of communication and empower communities through engagement" (Jones,
19 2012:1). Further, collectively sharing perceived housing challenges and solutions included
20 successive iterations that developed through 'audience feedback' and a commission
21 stemming from our creative dissemination of research findings. Sharing personal stories can
22 lead to effective collective action.
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52 To effect such change, we need individual and collective responsibility for preparing for
53 older age, and this echoes findings from our original 'Doorbells' consultation (XXXXX, 2018).
54 Growing older and planning for future need is not a common topic of conversation. We also
55 need to ensure pathways to policy. Collectively and inter-generationally, there needs to be
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3 consultation with planners, designers, service commissioners, providers, architects, and the
4 public that may encourage a range of accessible and affordable housing choices and local
5 facilities. Our ageing demographic is changing and will continue to change the makeup of
6 our communities and we need to be ready for ageing (House of Lords, 2013).
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15 The success of the initial performance has demonstrated the potential of using theatre as an
16 effective tool for engagement. Dahlberg suggests that creative engagement is not just about
17 an arts related activity, but also fosters an ability to see and think in new ways (Dahlberg,
18 2007). There is a growing interest in the impacts of arts and creative participation on health
19 outcomes for older people. In a recent systematic review, the authors distinguish between
20 art therapies, often delivered in clinical settings by health professionals, and therapeutic use
21 of the arts, the latter encompassing professional artists designing and managing, creative or
22 performing arts programmes in community settings and with the potential to reach wide
23 populations (Castora-Binkley et al., 2010). An All-Party Parliamentary Group on Arts, Health
24 and Wellbeing (APPGAHW) was formed in 2014 and aims to improve awareness of the
25 benefits that the arts can bring to health and wellbeing (All-Party Parliamentary Group on
26 Arts, 2017). The UK Cultural Commissioning Programme (CCP) is funded by Arts Council
27 England, to bring together public services and the arts and cultural sector, to deliver better
28 health and quality of life outcomes and is endorsed by Public Health England (New
29 Economics Foundation, 2016: 6).
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54 Our commissioner, Care & Repair England has made freely available our accompanying film
55 on location, with an accessible 'post-card' resource pack to capture post performance
56 feedback and evaluation for ongoing impacts, this to stimulate a shared, national
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1 Housing Voices: Using theatre and film to engage people in later life housing and health
2 conversations

3 conversation. Resources are hosted by 'Older People and Housing Action' national group

4 (<https://add> post review). Such feedback may endorse the recent English Communities and
5

6 Local Government (CLG) Select Committee Inquiry and report on Housing for Older People,
7

8 highlighting the need for a national strategy for older people's housing (Department
9

10 Communities and Local Government, 2018). Our participatory theatre approach to
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12 stimulating public engagement with future housing, social care and health needs and
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14 including all generations and reaching out to the 'seldom heard from', has international
15

16 significance. As the WHO (2018: vii) global housing and health report notes and as briefly
17

18 outlined in the introduction section, "housing is [. . .] a major entry point for inter-sectoral
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20 public health programmes and primary prevention." The report also reminds us that:
21

22 "Ensuring everyone lives in healthy and safe dwellings has implications for national, regional
23

24 and local governments, which set overall standards and determine the legal context for
25

26 housing construction and renovation." (World Health Organisation, 2018: vii).
27

28 Our partnership has also delivered an evening performance of the film, with free entry to
29

30 the public. This was to a mixed audience with an open question and answer post film
31

32 discussion. Audience members shared both verbal discussion and completed postcards. Two
33

34 members declared that in their twenties and thirties, they were already dealing with lack of
35

36 affordable and appropriate housing, with limited options that included unregulated and
37

38 insecure private renting. Dealing with such issues now makes it very hard to consider future
39

40 planning, although there was strong audience consensus that such future planning for a
41

42 good quality of later life, should be encouraged. Echoing the WHO (2018) guidelines, there
43

44 was also some discussion on 'whose responsibility', a consideration that there needs to be
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46 both individual responsibility and government regulatory, legal and fiscal support. There
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1 Housing Voices: Using theatre and film to engage people in later life housing and health
2 conversations

3 was also strong agreement that being vulnerable at a young age, with few resources can
4 lead to quite a fragile older age. Recommendations were to consider student housing
5 schemes' for older people and for housing planners to consult much more with the public.
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14 Finally, to further develop and share the issues and themes identified with wider audiences,
15 including key decision and policy makers, the partnership is seeking funding to potentially
16 plan a tour of the live performance and extensive dissemination of the film version, along
17 with a resource pack to facilitate ongoing conversations about housing options in later life.
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22 In this way, creative participatory engagement can help to translate public conversations
23 into public policy and practice.
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31 **Limitations**

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36 Our participatory theatre approach may be limited by not capturing and sharing verbatim
37 feedback from our participants. However we felt strongly that post performance collective
38 discussion that did not audio-record the 'conversation', more freely enabled participants to
39 both share the immediate impacts of being immersed in the performance and collectively
40 consider challenges and coping strategies. This should be particularly considered when
41 inviting people who may already feel 'left out' of the discussion. Content of the initial
42 performance was co-developed with participants, then adapted to focus particularly on
43 those who are ageing without children and those with primary responsibility for their ageing
44 relatives, which in turn, was presented to an audience that included this demographic, in
45 addition to younger people.
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6 It was also challenging to target the aforementioned particular groups, for whilst we
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8 approached the national organisation, 'Ageing without Children' for support with marketing
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10 the event, we were mindful of not wishing to narrowly define someone by focusing on one
11
12 aspect of who they are.
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20 **Conclusion**

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22 This article has reported on the findings of a participatory theatre approach, to engaging the
23
24 public with conversations about planning for future housing and health needs. Such an
25
26 approach can and should include all ages and reach out to those who, because of personal
27
28 circumstances, may feel excluded from such conversations. Whilst our study presents an
29
30 English case study, we have argued that both our focus (health and housing in later life) and
31
32 our participatory theatre approach, have international relevance. Our key findings are that
33
34 people feel unprepared for making housing decisions for later life; that younger people do
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36 not think about what they might need as they get older, partly because of dealing with
37
38 current insecure housing; and that people wish to take control of decisions about their
39
40 future homes, but a lack of appropriate and accessible information, as well as a shortage of
41
42 appropriate housing, undermines their attempts to prepare. From within the context of
43
44 global ageing populations, we need to recognise that getting housing 'right', across the life
45
46 course is also critical to putting in place effective life enhancing, public health programmes
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48 and primary care. The starting point needs to be inclusive conversations with the public. The
49
50 end goal is to achieve healthy housing and optimum health and well-being for all.
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Figure One – Example of Post-card feedback

“It has certainly made me think ‘again’ about if and when I need to move. However, I feel in the same quandary as the woman in the play. Partly because of the lack of good quality affordable housing”

e and Support

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Housing Voices: Using theatre and film to engage people in later life housing and health conversations



Figure Two – Wordle from Audience word feedback

Housing, Care and Support

Housing Voices: Using theatre and film to engage people in later life housing and health conversations

Table One - Post performance discussion questions

| Focus | Content |
|----------------------------|--|
| Kathleen, the character | 1. Thinking about the character (as well as your own experiences), how much do we think about our future selves/homes throughout our lives? <ul style="list-style-type: none"> o What kinds of homes do we imagine we'll live in at different times throughout our lives? Why is this the case? o What kind of neighbourhoods – rural/urban? And why? o How important are connections in the community? In what ways and why? |
| Family structure | 1. How might plans for our future homes be affected by our family structure, for example: <ul style="list-style-type: none"> o People ageing without children o People who are caring for relatives as they age themselves |
| Sources of Support | 2. What sources of support do you think might be available/helpful for the character and others in her circumstances? |
| Aspirations versus reality | 3. How often do you feel there is a gap between aspirations and reality when we're thinking about our future homes? E.g. between what we want versus what is available/affordable. [RELATE TO EXAMPLE FROM PLAY] |
| Planning for our future | 4. What's needed to help us better plan for and manage our housing needs and decisions as we grow older? (E.g. more accessible information etc.) |