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To cite this article: Kim McKee, Vikki McCall, Dianne Theakstone, Kate Wilson, Louise Reid, Rose Gilroy, David Manley, Anna Pearce, Lisa Davison, Julia Lawrence & Alasdair Pemble (11 Nov 2024): Understanding the intersectional stigma of ageing, disability, and place: a systematic literature mapping review, *Housing Studies*, DOI: [10.1080/02673037.2024.2421844](https://doi.org/10.1080/02673037.2024.2421844)

To link to this article: <https://doi.org/10.1080/02673037.2024.2421844>



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Published online: 11 Nov 2024.



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Understanding the intersectional stigma of ageing, disability, and place: a systematic literature mapping review

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ABSTRACT

Stigma is a key concept for social scientists interested in how certain groups in society are judged and treated negatively. Within housing studies this scholarship reflects longstanding interests within the discipline regarding the spatial impacts of social and urban policies on both people, and the places in which they live. We augment these debates by advocating for a more intersectional understanding of how stigma is shaped by identity. It presents findings from a systematic literature mapping review of research that has a combined focus on ageing, disability, place, and stigma across OECD countries. Given global trends around ageing populations and the impacts for health, this is an important, but often neglected aspect to stigma research. Our review highlights the advantages of combining a spatial approach to stigma with intersectional insights foregrounded in age and disability. This includes the further development of stigma as a concept from the perspective of under-represented groups: older and disabled people.

ARTICLE HISTORY

Received 22 November 2023

Accepted 22 October 2024

KEYWORDS

Intersectionality; discrimination; home; neighbourhoods; ageism; ableism

Introduction

Stigma is a key concept for social scientists interested in how certain groups in society are judged and treated negatively, including being deliberately discriminated against, due to perceived differences. It is a multi-faceted and inter-disciplinary concept often traced back to the Sociologist Erving Goffman's (1963) classic book, *'Stigma: notes on the management of spoiled identity'*. Whilst stigma has been mobilized and developed by researchers across the social sciences to help them better understand structural inequalities and their impacts, it has been deployed in a specific way within the field

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of housing studies. There has been a tendency to focus on low-income neighbourhoods, which reflects an interest in the spatial impacts of processes and policies on certain groups of people and the areas in which they live (Johnston & Mooney, 2007). In some national contexts, including the UK, this focus is interwoven with housing tenure, which is frequently used as a proxy for class and economic status – with homeownership valorized as a symbol of success and aspiration, and state-provided housing simultaneously denigrated as the ‘tenure of last resort’ for the poor and vulnerable (Gurney, 1999; Ronald, 2008). Beyond tenure, the dwelling (or home) has also been central to our understanding of stigma (Horgan, 2020). The aesthetic dimensions of a building, including technologies designed to promote more sustainable and inclusive living have long been highlighted as important (Brickell *et al.*, 2023; Imrie, 2007; Kusenbach, 2009). Additionally, care and assisted living provided within the home are recognized within the gerontology literature as having potentially stigmatizing effects, with specialist housing and home adaptations acting as symbolic markers of difference (Bailey *et al.*, 2019). Accordingly, trends around the shift away from institutional settings towards community care for older and disabled people in recent years therefore opens-up the potential for further stigmatization (Phillipson & Scharf, 2004). This however remains in tension with government policies geared towards enabling citizens to live independently at home and ‘age in place’ (Pani-Harreman *et al.*, 2021).

Crucially, whilst existing housing scholarship on place-based stigma can tell us much about the intersections with class and income, and even race (Flint & Powell, 2019), the experiences of other vulnerable and marginalized groups such as older and disabled people remain comparatively under-explored. This is a critical gap given current trends surrounding the ageing population and the sizeable impacts this demographic shift has for global housing and health agendas (United Nations, 2020). The likelihood of having a disability increases with age; yet research highlights both a lack of accessible homes and inclusive public spaces (Satsangi *et al.*, 2018; Scotts *et al.*, 2007). Not only are households struggling to access housing that meets their needs, but they are also having to navigate built environments and public spaces that are exclusionary, whilst potentially enduring additional impacts on their life chances from living in stigmatized (and often disadvantaged) areas.

This gap is where our paper seeks to make its contribution and give insight to the question: can exploring ageing, disability and place *in combination* help housing scholars move towards an intersectional understanding of stigma? If stigma as a concept is to capture the full diversity of experience, then it needs to engage more directly with the lived experience of older and disabled people and the spaces and places they inhabit. Yet as we highlight through a systematic literature mapping review (n=41 papers), a combined focus on these dimensions is limited in current research. Through reviewing the international literature that does exist, we seek to encourage housing scholars to conceptualise stigma in all its diverse forms, by thinking about other aspects of identity such as age and disability and embracing a more intersectional approach.

The next section will introduce the theoretical foundations of stigma before we turn to discuss our methodological approach followed by a review of the sources. Crucially, our aim is not to replicate previous literature or systematic reviews that consider stigma, housing, place, ageing, and disability in isolation; rather, we seek

to explore and advocate for the study of all these facets in combination. Our thinking is influenced not only by the seminal work of Crenshaw (1989) and others on intersectionality, but also scholarship on stigma interested in difference, exclusion, and othering within and beyond housing studies (Flint & Rowlands, 2003; Johnston & Mooney, 2007; Rowlands & Gurney, 2000; Sibley, 1995; Tyler, 2020). This paper aims to review literature on stigma that relates to three key (and often overlooked) intersectional dimensions, including disability, age and place to better inform housing scholars about how these concepts link and overlap. We feel that intersectionality has much to offer housing scholarship concerned with inequality, injustice and lived experience, and this is where we seek to make our novel contribution to the place-based stigma literature. Moreover, literature mapping reviews have been shown to be valuable precursors to new empirical research in housing (see for example, Soaita *et al.*, 2020) allowing researchers not only to map trends and illuminate gaps, but also to suggest new areas for exploration.

Stigma: the theoretical foundations

Key thinkers on stigma

Imogen Tyler's (2020) book *Stigma: the machinery of inequality* offers valuable insights into the evolution of stigma as a key concept in the social sciences. She illuminates how stigma is an inscriptive form of power that describes the 'degrading marks that are affixed to particular bodies, people, conditions, and places with humiliating social interactions' (2020, p. 8). It not only erodes well-being and sense of self but is also a form of symbolic violence that 'marks people out' whether that be through physical scars or reputational damage (2020, p. 15). Tyler highlights stigma to be an ancient practice visible throughout history, with its more contemporary usage credited to the influence of the Sociologist Erving Goffman (1963). His approach is rooted in understanding social identities through social interaction, focusing on those who deviated from societal norms, standards, and ideals. For Goffman, stigma is concerned with 'the situation of the individual who is disqualified from full social acceptance' usually due to an 'attribute that is deeply discrediting' (1963, p. 9–13) and a 'spoiled' social identity with the potential for discrimination (1963, p. 13–15).

Despite his interest in social relations, Goffman neglects to 'discuss power either at the micro or structural level' and pays scant attention to those actively doing the stigmatizing (Tyler 2020, p. 97). This is problematic for it's a concept imbued with power. His focus on 'the social' also meant little attention was given to stigma's spatial dimensions, which scholars in housing and urban studies have long highlighted as important. A key recent influence on stigma scholarship is the work of sociologist Loïc Wacquant, particularly his 2008 book *Urban Outcasts: a comparative sociology of advanced marginality*. Here, he draws attention to the 'hierarchical system of places' in the post-industrial city and the concept of 'territorial stigmatization' (2008, p. 232–240) - a degrading mark arising because of locational attributes rather than solely personal ones. This additional form of stigma, Wacquant argues, emerges during the current neo-liberal period of advanced marginality:

In every metropolis of the First World, one or more towns, districts or clumps of public housing are publicly known and recognized as those urban hellholes in which violence, vice and dereliction are the order of things [...] Whether or not these areas are in fact dilapidated and dangerous, and their population composed essentially of poor people, minorities and foreigners, matters little in the end [...] [the locale] stains the image they have of themselves (2008, p. 238–239).

Wacquant's focus on spatial taint blends Bourdieu's idea of symbolic power with Goffman's spoiled identity (see also, Wacquant *et al.*, 2014). Whilst this brings a welcome focus to the place-based dimensions of stigma and how processes of stigmatization are imbued with power, this spatial lens is not entirely new. It has been a longstanding interest of housing and urban studies scholars on both sides of the Atlantic (Butler-Warke, 2019). Engel's (1844/1969) book on the *Condition of the Working Class in England* offered a commentary on such matters, whilst Sociologists and Geographers have long investigated these themes, ranging from classic texts on geographies of difference (see for example, Sibley, 1995) to more contemporary works (see for example, Besbris *et al.*, 2018; Link & Phelan, 2011; Tyler & Slater, 2018). Within the British housing studies tradition such themes are also evident in the important works of Damer (1989), Hanley (2007), Hastings (2004), Johnston & Mooney (2007), and Rowlands & Gurney (2000) – all of whom have written about how public (or social) housing has been problematized and stigmatized in the UK. A key element of their argument is how it has become denigrated as the 'tenure of last resort' (Forrest and Murie, 1988), whilst homeownership, by contrast, has been encouraged by governments as desirable, aspirational and the default normalized act of housing consumption (Flint & Rowlands, 2003; McIntyre & McKee, 2012). As Butler-Warke (2019) identifies, stigma in this context operates to smear the poor and marginalized and the places in which they live – or as Mooney & Johnston describe, identifies problem people and 'problem places' in need of state intervention (2007, p. 126). A key aspect here is the identification and exaggeration of cultural differences within these defamed and notorious places. This resonates with the earlier writings of geographer David Sibley (1995, p. 3–4), who notes how, 'feelings about others, people marked as different, may also be associated with places'. The social and spatial then, are inherently interconnected.

Impacts of stigma

Crucially, research shows stigma not only to be an explicit governmental strategy but very much an internalized process that can generate negative self-perceptions and feelings of shame (Paton *et al.*, 2017). These debates are also present in other national contexts, with numerous standalone publications (see for example, Vassenden & Lie, 2013) and edited volumes highlighting how these ideas of housing-related stigma play out in different places in different ways (see for example edited volumes by, Flint & Powell, 2019; Kusenbach & Smets, 2020; Wacquant *et al.*, 2014). Outside of the UK, housing tenure is often less important in framing these debates as public (or social) housing sectors have traditionally been smaller. There is therefore less of a direct link between poverty and social housing. In these contexts, the focus is more explicitly on the neighbourhood with the language of these debates couched in terms of

low-income, deprived or poverty neighbourhoods. A site of significant work here links back to the US based ethnographic work of Wilson (1987) which connected changing employment structures with the concentration not only of poverty but crucially also race (see also Massey (1990) for a quantitative exploration of this).

What these papers gave rise to, indirectly, was a substantial literature of neighbourhood effects – a means through which the stigma of place can influence individual trajectories. Within quantitative research there has been a long focus on how stigma impacts income, educational achievement, as well as on attitudes and norms. Much is focused on the US, but evidence has been developed across Europe (Netherlands: Pinkster, 2014; Germany: Howell, 2019; Sweden: Hedman *et al.*, 2019); and Australia (Arthurson, 2013). A key focus has been on the specific impacts on earnings – stigma as a means to reduce earning potential, or employment outcomes, although health has also been an emerging area of interest. Indeed, health researchers have long been concerned with the additional impacts arising from living in stigmatized places (Pearce, 2012; Tabuchi *et al.*, 2012). It is worth noting that the neighbourhood effects literature is heavily focused towards the impact of a ‘lack of’ resources rather than inequalities caused by abundance, thereby squarely connecting it to stigma.

Challenges around intersectionality

Whilst stigma clearly offers important conceptual insights for housing scholars there remains a lack of intersectionality to these debates. Most studies have tended to focus on class, poverty and low-income, with tenure sometimes used as a proxy for economic status (see for example, Paton *et al.*, 2017). The way in which these interact with race, ethnicity and migration status has also been a significant area of focus. Glasze *et al.* for example highlight how large European public housing estates have emerged as places not only of social marginalisation and decline, but also of the ‘ethnic other’ (Glasze *et al.*, 2013, p. 1203); such dimensions also featured heavily in Wacquant’s (2008) own work. There has been much less attention to other aspects of social identity and how these intersect with poverty and place, overlooking additional insights a more intersectional approach might offer.

Often credited to Crenshaw’s (1989) article on racial and sex discrimination, intersectionality describes how different aspects of social identity intersect and overlap with each other to create and compound multi-dimensional structural inequalities. Grounded in feminist and anti-racist approaches it has been advocated as the ‘gold standard’ for analyzing lived experiences of multiple identities and oppression (McCall, 2005, p. 1771). Nash has however questioned intersectionality’s ‘theoretical reliance on black women’s experiences’, hinting at the value of broadening its reach ‘to theorize and array of subject experiences(s)’ (Nash, 2008, p. 8-10). Regardless of how it is deployed intersectionality represents a key analytical tool for ‘understanding and explaining complexity in the world, in people, and in human experiences’ (Collins & Bilge, 2020, p. 2). It offers nuanced insights for researchers interested in social inequality, social justice, power relations, relationality and the messiness and diversity of social context and lived experience (Collins & Bilge, 2020). This makes it a particularly useful approach to further enhance our understanding of stigma as a concept.

Within housing research on place-based stigma there has been limited attention to issues pertaining to disability and ageing. Yet there is much to be learned from other disciplines and the work that has been developed there regarding the social model of disability and ageism in society. Both encourage us to think about stigma and place in different ways to that which tends to predominate in housing studies. Whilst ageism denotes the systematic stereotyping that can lead to prejudice and active discrimination against people due to older age (Butler, 1969), the social model of disability centralises the role of society in creating barriers that exclude disabled people from full and active participation in society (Oliver, 1990; Hunt, 1966).

Focusing solely on poverty and place intersections therefore potentially misses not only how symbolic power operates in different socio-spatial contexts, but also how stigma's effects are further compounded for older and disabled people. Equally, examining ageing and disability in isolation may overlook the ways in which people are multiply marginalized and their oppression and disadvantage interconnected. This is where combining spatial and intersectional approaches can offer potential insights. The paper therefore explores the small amount of literatures that overlaps place, age and disability while showing how important it is to take an intersectional approach to place-based stigma in housing studies and urban policy. We outline how we have approached this in the methodology section followed by a discussion of our findings and conclusions.

Methodology

The aim of our overarching project is to explore and understand how the stigma attached to where people live can intersect with experiences of disability and ageing. To address this, we conducted a systematic literature mapping review (Soaita *et al.*, 2020). This is an approach designed 'to make *rapid* sense of a vast scholarship', but in a way that allows for reporting the emergent 'spatial, temporal, conceptual and thematic trends' (p322). Systematic and other types of evidence reviews have grown in popularity in housing studies (see for example, Gurney, 2023; Rolfe *et al.* 2023; Wallace *et al.*, 2006). This reflects a recognition of the value to be gained from such approaches as stand-alone exercises, but also a desire to provide greater transparency when selecting literature for review. Whilst Gough *et al.*, (2012) note that there is a continuum of approaches to reviewing that can be adopted, Soaita *et al* (2020) advocate in favour of systematic literature mapping reviews as a more pragmatic approach to achieving rigour in a shorter timeframe. Not least because as, 'a self-contained project, it unravels research gaps, highlights where rich evidence already exists, and indicates changing conceptual approaches' (Soaita *et al.*, 2020, p. 320).

The sub-section that follows outlines the process we adopted, and the boundaries and limitations of it. Our aim was to both facilitate cross-disciplinary learning and to provide a foundation for further research into place-based stigma as it relates to age and disability. Our review is an initial strand of work from a larger funded project (*Intersectional Stigma of Place-based Ageing*), which also involves secondary quantitative data analysis, and primary and secondary qualitative data: (www.housinglin.org.uk/Topics/browse/Design-building/InclusiveDesign/ISPA).

Search strategy

To operationalize our over-arching research question, we began our review by searching the two largest bibliographic databases: Scopus and Web of Science. Our key objective was to explore the different ways in which concern about place-based stigma featured in literature addressing the intersectionality of disability and ageing. A search string was developed to capture outputs that combined a focus on stigma and place, with ageing *and* disability (see [Appendix A](#)). It was piloted and refined to improve efficacy and specificity. Following removal of duplicates, papers were then filtered for relevance based on title and abstract, this was followed by further refined filtering based on geography, language, and source type as per our inclusion criteria set out in [Table 1](#).

The final filtered list of 29 papers was reviewed to check whether any expected outputs were missing. It was then augmented by additional suggestions from the research team, with a further twelve sources added that provided significant additional insights. This extra step reflects the limitations of database searches; what is returned is heavily contingent on the authors framing of their papers within their original abstract, titles, and keywords. This framing can vary across disciplines and geographies, and this is why having a multi-disciplinary research team is advantageous to a literature mapping review exercise. Additions of this kind informed by topic-expertise is not an unusual step within literature mapping/review exercises (see for example, Fink, 2020; Hanneke *et al.*, 2017). A total of 41 sources were included in the final sample. After Gurney (2023), and as advocated by Page *et al.* (2021), the selection and review processes are described in detail in [Figure 1](#): PRISMA (Preferred Reporting Items for Systematic Reviews and Meta-Analyses).

Analysis

Analysis was a two-stage process. Firstly, we recorded basic publication details. This enabled an examination of, for instance, when sources exploring specific

Table 1. Inclusion criteria.

Aspect of review	Decision	Rationale
Language	English	We focused only on English language publications. Time and resources available prevented the use of foreign-language resources.
Time-period	Post-2010	The Equality Act (2010) came into force in the UK, which brought together existing anti-discrimination legislation under one Act. With the overarching project's UK focus on disability and age, materials that were contemporary with this legislation were the most relevant. This also allowed us to focus on the most-recent research being published. It does mean however older 'classic' sources published prior to 2010 are excluded.
Geography	OECD	We included international sources to understand how policies, practice and lived experience varies geographically. Given that national contexts for social care and welfare systems to meet the needs of older and disabled people vary cross-culturally we took this into consideration by excluding low and middle-income countries.
Type of Publication	Peer-reviewed articles only	We excluded material which has not been peer-reviewed to ensure quality, while also excluding books and book-chapters, for reasons of time, resources, and access.

intersectionalities were published and whether any relationships or trends were evident. Secondly, we captured which of the key themes each source touched upon, and the nature and extent of the themes' use. To collate this level of information for all 41 sources, a proforma was used to ensure consistency across reviewers. This approach enabled any queries concerning the thematic coding of sources to be shared and discussed among those team members who had an in-depth knowledge of the original sources they reviewed.

Key characteristics of sources

All 41 sources were journal articles. A variety of inter-disciplinary journals hosted these publications. Interestingly, no housing/urban studies titles featured, with the source list dominated by ageing, disability, and health journals. Of the 41 sources, only 10 were based solely on research conducted in the UK. The small number of sources meeting our inclusion criteria were also heavily weighted towards a 2016 and 2023 publication period – the more recent end of the time-period we searched. This may indicate a growing recognition amongst researchers of the significance in grounding a topic in the broader sense of contextual relationships. Of the 41 sources, 24 used qualitative research methods as their primary methodology. Indeed, one of the potential limitations of this review concerns the dominance of qualitative sources. Heller *et al.* (2023) point out, for instance, that some concepts such as wellbeing are difficult to standardise across empirical works. Equally, there is more limited data from randomized controlled trials or longitudinal studies (Heller *et al.*, 2023). Additionally, there are geographical limitations due to our filtering process. Residents from low to middle income countries may of course have different experiences to those we reviewed due to spatial variations in both housing systems and welfare regimes. Having now outlined our methodological approach, we now return to consider the key thematic findings emerging from the review.

Thematic findings from the review

Conceptualising 'the other' – problematizing older and disabled bodies

From our review exercise we can see that housing plays a key role in self-identity for both older and disabled people, moreover, that stigma is interwoven with negative societal attitudes towards ageing and disability (Kahana *et al.*, 2019). Disabled people are not a homogenous group, but there is some overlap here between these two categories as the likelihood of disability increases with age. Equally, disabled people may experience the ageing process earlier in their lives, or experience it differently, due to their impairments or chronic health conditions (Astell *et al.*, 2020). With these caveats in mind there were nonetheless strong narratives of healthy and/or successful ageing throughout the literature we reviewed that was typically contrasted with narratives of frailty, decline and dependence. As Astell *et al.* (2020, p. 1569) note this reflects a 'strong desire (amongst individuals) to preserve and portray an identity associated with self-reliance, competence and independence', with the ageing process often negatively perceived as a 'symbol and reminder of a loss of independence' (Astell *et al.*,

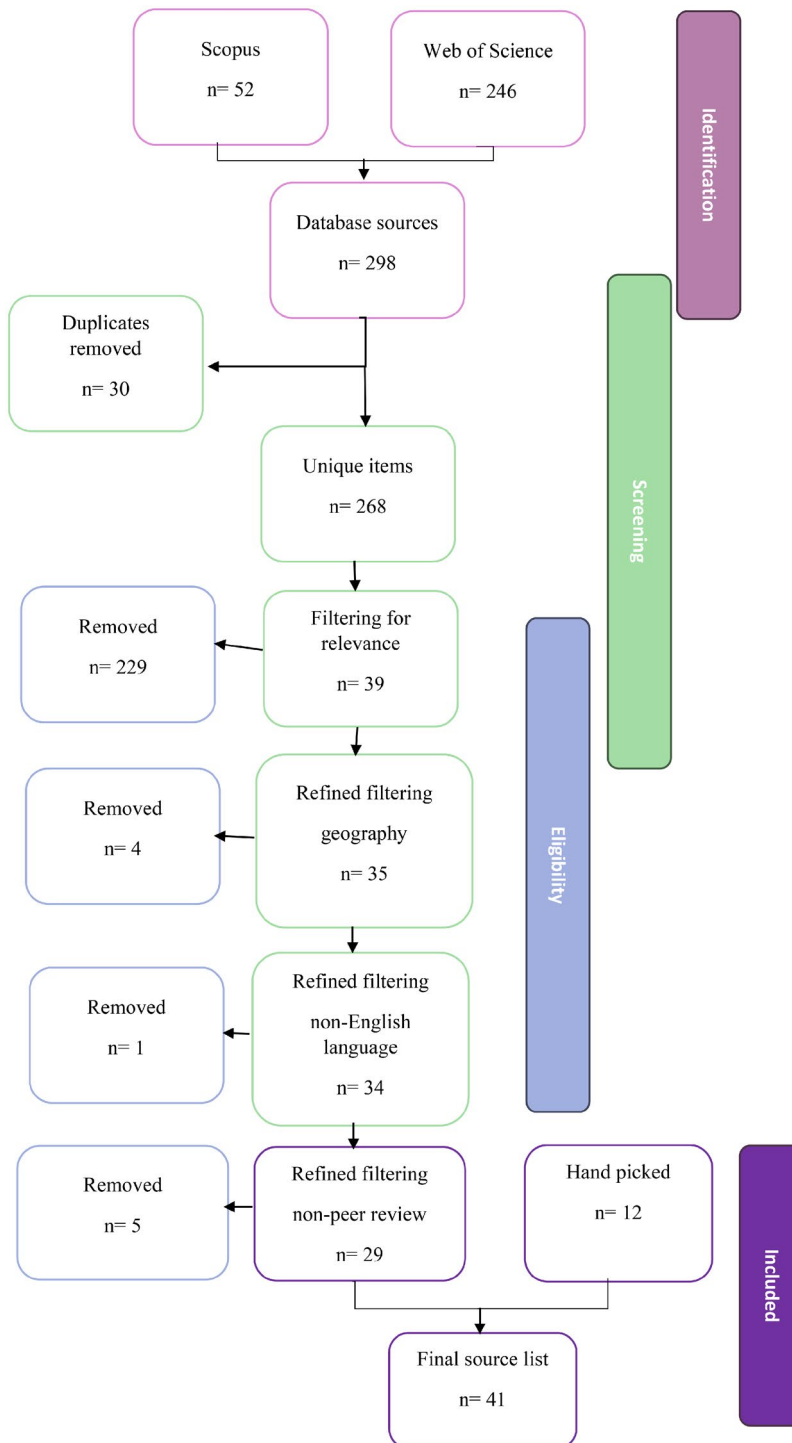


Figure 1. PRISMA flow diagram.

2020, p. 1563; see also Anderson *et al.*'s, 2022 work on identity construction in the very old; Perkins *et al.*'s 2012 work on care settings; and Warmoth *et al.*'s 2016 work on frailty). As Day & Hitchings (2011, p. 886) note, in this context not only are ageing (and disabled) bodies problematized, because they are seen to embody 'undesirable' characteristics, but the sanctity of the home itself can also become compromised through the provision of care and the installation of aids and adaptations which are often perceived as unattractive and/or medicalized (see also, Astell *et al.*, 2020; Bailey *et al.*, 2019; Becker *et al.*, 2020; Warmoth *et al.*, 2016).

Against this backdrop the home emerges as a 'site of potentially problematic infrastructures and practices' (Day & Hitchings 2011, p. 887). Linked to this, the desire to reject identities associated with decline and dependence can also become a strong driver for internalized stigma. For Anderson *et al.*'s. (2022) participants, the internalized stigma of ill-health was resisted and remodelled. Their work, and that of Bailey *et al.* (2019), reported participants not asking for help for fear of signalling being old or disabled, which were both seen as in tension with 'successful ageing' (Kahana *et al.*, 2019, p. 1). Together, these studies demonstrate the anticipation (and/or internalization) of stigma (from disability and/or ageing) was a real and common worry. In turn, this may explain what Becker *et al.*, (2020) describe as the inherent tension between citizens expressing a preference to grow older in their own homes and their simultaneous reluctance to install assistance devices such as grab-rails, which would make it easier for them to live independently for longer. This also extends to the exterior of the property, with Orellano-Colón *et al.*'s (2022) work highlighting self-stigmatization of assistive technologies through participants' reluctance to use a gardening seat to aid them in weeding their garden. Combined these examples underscore how the aesthetics of the home clearly connects to stigmatized and aspirational identities – operating as a symbolic marker of difference that serves to 'other' older and disabled people. In policy-terms it also emphasizes the importance of designing-out-stigma by building accessibility and inclusivity into all homes as standard (Becker *et al.*, 2020).

Beyond the boundaries of the home, place-based stigma also occurred frequently in the literature in terms of the wider built environment and the ways in which older and disabled people were discriminated against and/or excluded from certain spaces. Labbe *et al.* (2018) evidence how ageing users of powered wheelchair experience ableism and stigma directly through the built environment – including their wider neighbourhoods, local businesses, and other public spaces. Their findings highlight that for disabled adults, engagement with the built environment was also an interaction with the assumptions and attitudes of other individuals, who determine accessibility. These environmental and attitudinal barriers undermine powered wheelchair users' ability to fully belong and contribute to their community. Similar findings have been echoed in other studies concerned with the stigmatization of visibly disabled/older persons when moving around and using public transport (Bulk *et al.*, 2020). As Labbe *et al.* (2018, p. 639) reflect, 'when the public has a negative view of disability, or a privileged view of ability, they exclude people living with disabilities from public spaces.' Sometimes this also fuels self-exclusion. For example, research by Thoreau (2019, p. 734) on mobility scooters highlighted a reluctance amongst older, disabled adults to use them due to perceived tensions in sharing

space with pedestrians, but also because their use was regarded by some as symbolic of having ‘given up’ on their bodies’ physical capabilities. The use of language by participants in the research reviewed further demonstrated social signifiers of internal stigma. For example, one participant, Juan, stated that, ‘some labels have negative connotations [...] vision loss, blindness, it emphasizes what you’re not able to do [...] I just like the term impairment because it is something that can be overcome, it’s the challenge more than an obstacle’ (Bulk *et al.*, 2020, p. 278). Again, this underscores how perceived markers of difference, linked to a range of elements including physical, aesthetic, perception and language used, can hinder feelings of independence. Stigma is entangled with both narratives of decline and failure and understood in contrast to narratives of ageing well or healthy bodies. This results in older and disabled people feeling excluded from certain spaces, but it can also drive processes of self-exclusion. Different types of places can therefore reduce or increase stigma for certain groups. As the work of Bulk *et al.* (2020) and Anderson *et al.* (2022) emphasize it is therefore vital to consider social-spatial identity and its role in stigmatization beyond the home.

Our review papers explore this wider built environment, including transport, amenities, and green space. Key issues that arose from several sources surrounded the general lack of accessible recreational spaces, poor public transport links, inaccessible elevators, or escalators, as well as the hazardous conditions of pavements alongside challenges in navigating other pedestrians (Kelaher *et al.*, 2010; Labbe *et al.*, 2018; Thoreau, 2019). Positive perceptions of the neighbourhood were highlighted to be higher in urban settings due to the prevalence of more amenities (Townley *et al.*, 2017). Some studies highlighted how a lack of these amenities specifically impacts upon older and disabled people, especially their ability to leave the home independently (Anderson *et al.*, 2022). Other sources emphasized specific concerns around falls and how this impacted mobility inside as well as outside the home (Govercin *et al.*, 2010). This is significant given the emphasis within the literature on the importance of leisure opportunities to ageing well. Raymond (2019, p. 9) for example, noted the ‘symbolic and environmental exclusion’ facing older people with impairments when they tried to access recreational and leisure spaces. This connects back to stigma and how it is mobilized to make some groups feel unwelcome in particular spaces. For those on low-incomes or living in disadvantaged areas, accessing these wider amenities may be even more challenging due to poorer services in their locality and/or a lack of disposable household income. More research is needed to better understand these complexities, and to disentangle the specific additional impacts of ageism and ableism experienced within disadvantaged communities of place (see for example, Gonzales *et al.*, 2018). Context is important not just in terms of place, but also with regards to populations, for older people and disabled people are not homogenous groups – they embody a diversity of experiences and subjectivities. Indeed, UK (Ali *et al.*, 2016) and international studies (Kelaher *et al.* 2010; Park *et al.* 2020) found that, among older residents in neighbourhoods, those who were disabled were more likely to experience stigma. This suggests that the negative impact of stigma is augmented when linked with growing older. However, this aspect is not well explored within the literature in a systematic way, with more empirical work needed to nuance our understanding.

As this section has summarized the challenges encountered by older and disabled people in the spaces that they navigate daily are clearly interwoven with wider societal attitudes surrounding ageing and disability, but also exacerbated by poverty. Some of these themes will be returned to and developed further in the next sub-section.

The 'blemish of place' for older and disabled people

A key trend across advanced economies has been the concentration of low-income and vulnerable households within the social (or public) housing sector. Known as residualization, this process captures how social housing is now a *residual service* – with the majority meeting their housing needs via the market. In the UK, according to the 2021 Census for England and Wales, 52% of households in the social renting sector had at least one member identifying as living in a household 'deprived in health or disability domain' compared with 29% in owner occupation (ONS, 2023). This trend leads not only to 'spatial concentration of household disadvantage' (Kelaher *et al.*, 2010, p. 381), but also the othering of those perceived to be dependent on the state for support, because they are unable to access suitable housing through the market (Paton *et al.*, 2017). As previous housing scholarship highlights this creates a symbolic divide between those who can realize aspirational or idealized societal goals, and those 'flawed consumers' that cannot (Rowlands & Gurney, 2000, p. 123). As Tyler & Slater (2018) assert these moralistic and divisive narratives demonstrate how discourses of dependence are used to punish the poor, as well as secure public consent for cuts to the welfare safety-net. Additionally, these authors' highlight how government austerity measures have not only disproportionately impacted disabled people – to the detriment of their health – but that these governmental strategies actively incorporate stigma and use it as a weapon to marginalize vulnerable groups through shame and humiliation (2018, p. 721). In a similar vein to Wacquant (2008), they advocate going beyond Goffman's focus on micro-relations to capture the wider structural conditions that shape 'the relationship between self and society' (2018, p. 731). In this context, stigma represents a form of 'cultural and political economy' (2018, p. 721).

Despite the wealth of scholarship concerned with welfare reform, stigma and place, those authors that have considered the specific experiences of older and disabled households within our reviewed sample is limited. There are however a few exceptions. This includes for example, authors who highlight older and disabled household's heightened risk of poverty due to higher living costs (including energy costs), barriers to employment, and the stigma of receiving social security benefits (Day & Hitchings, 2011; Snell *et al.*, 2015). What is clear from this body of work is that processes of stigmatization not only discredit and devalue certain groups of people, but also particular places, for these stigmatizing narratives are often targeted towards areas where poverty and inequality are heavily concentrated, and levels of state support and intervention already high. This brings us back to Wacquant's powerful idea of the 'blemish of place' and the additional impacts facing those living in areas with 'tarnished' and 'defamed reputations' (Wacquant *et al.*, 2014, p. 1270-1271). These geographies of difference and exclusion have also long interested geographers such as Sibley (1995) who noted how, 'the human landscape can be read as a landscape of exclusion' (no page number).

By emphasizing ‘space as a distinctive anchor of social discredit’ Wacquant draws attention to the structures and institutions that drive stigma, in a way that Goffman’s micro-level approach cannot (Wacquant *et al.*, 2014, p. 1272). Whilst research applying this lens with a combined spatial, ageing and disability focus has not been well developed in the literature, what does exist suggests there are specific implications for older and disabled households. For example, writing in the Australian context Morris (2015, p. 156) notes how residualization is transforming public housing complexes into much ‘less age-friendly environments’ due to rising anti-social behaviour, vandalism, and littering, all of which serve to undermine ‘a sense of feeling at home’. By contrast, Tai *et al.* (2023) draw attention to how older adults in deprived neighbourhoods adapt and respond to these problems of crime and anti-social behaviour, thereby stressing the importance of not stereotyping older residents as vulnerable and lacking in agency. Despite differences in emphasis both sources highlight the additional impacts of living in area of disadvantage, which typically also experience negative and ‘defamed’ reputations. Linked to this, other studies have drawn attention to how place-based disadvantage can inhibit access to valued amenities in such places, due to lack of investment. For example, Kelaher *et al.*’s (2010) study found that an area with high levels of reported stigma was associated by some participants with failing public services, such as poor bus services, whilst other studies highlighted barriers to accessing leisure facilities (Raymond, 2019). These sources encourage us to consider the additional effects facing stigmatized populations who also live in stigmatized places, such as poorer and reduced services. This is important for these wider amenities coupled with the accessibility of public space have implications for older and disabled peoples’ ability to live independently.

Wacquant’s powerful ideas on the blemish of place also have relevance for policy and practice, not least the importance of creating homes and communities that meet peoples’ needs and aspirations. The ageing population – and the health and social care implications of this global trend – is a particularly pressing issue for the UK given it has one of the oldest housing stocks in Europe and was not built to meet modern accessibility standards (Bailey *et al.*, 2019; Reber *et al.*, 2022). As people live longer, the numbers of us living with impairments in unsuitable homes is expected to rise; whilst there are of course younger people with disabilities, many people first experience disability in older age (Kahana *et al.*, 2019, p. 3). As noted in the previous section, living independently at home is often preferable for older and disabled people and is usually less expensive and stigmatizing than living in a nursing home or residential care setting. Additionally, by not moving people into unfamiliar environments and institutions, individuals can maintain vital social connections and continued access to key local facilities (e.g. GP surgery, local community buildings). These neighbourhood attributes offer real benefits for social inclusion, wellbeing and quality of life for older and disabled people (Lezzioni, 2022; Murzin *et al.*, 2022; Overmars-Marx *et al.*, 2018). The accessibility of existing homes and wider environments is therefore critical, and this key theme is reverberated across the papers reviewed. The places and spaces we inhabit have the potential to mediate stigma, from the aesthetics of the brickwork to SMART and assistive technologies (Becker *et al.*, 2020). Not least as it is also important to ‘age in the right place’ within neighbourhoods that are inclusive and supportive (see for example, Bigonnesse

& Chaudhury, 2021; Salime *et al.*, 2022); these wider networks and institutions of support may however be less available in communities decimated by funding cuts and experiencing stigmatization. This is where further research is needed to systematically explore the ways in which multiple and overlapping oppressions compound older, disabled adults' experiences of place-based stigma.

Such understandings are vital as they can be harnessed to improve, for instance, government and third sector interventions. Paton *et al.*'s (2017, p. 586-587) research on Glasgow demonstrated how stigma attached to place made the mechanisms of exclusion, gentrification, and regeneration easier for the state to apply. It resulted in certain groups, including local women with disabled adult children, paying the price of welfare and service cuts, and losing their place-based support and local amenities. Snell *et al.* (2015) paper also touches on this agenda of welfare state retrenchment by highlighting how working age people with disabilities in the UK have been doubly impacted by welfare reform, whilst Savin *et al.* (2021) writing in the North American context, highlights how state assistance is inadequate to meet the needs of older adults with disabilities. A key thread emerging from some of the literature reviewed is that austerity politics – and the further rolling back of the state welfare-safety net this entails – has been felt more acutely in our most disadvantaged communities. This underscores the key role of the state as a protector of the most vulnerable (Whittle *et al.*, 2020).

Material resources are therefore a key facet to consider. As Day & Hitchings note, avoiding stigma (in the context of ageing) is 'easier with more resources ... [because] one has more options, and also money and material possessions confer a higher status in society that goes some way to offsetting the lowered status of old age' (2011, p. 892). In a similar note, Perkins *et al.* (2012) highlight how material resources are central to shaping choice and autonomy for those in Assisted Living settings, whilst Labbe *et al.* (2018) highlight how the costs of adaptations in the home can be a significant barrier to households on low incomes. Continuing with this theme, Murzin *et al.*, (2022) and Wright *et al.* (2022) highlight how subsidized and stable housing alleviates the stress of affording market rents and the risk of homelessness for older adults with HIV (amongst other low-income and vulnerable groups). We can see then a recurring theme around the importance of material resources to mediating place-based stigma. This further underscores the insights a more intersectional approach can offer, for stigmatized age and disability is overlain with other forms of oppression such as class/low-income. Personal experiences may therefore vary within and between older, disabled adults depending on their socio-economic background. This is a further dimension where more research is merited.

Conclusion

Following an evidence review of the contemporary international literature we argue for the need to combine a traditional spatial focus (on home, housing, and neighbourhood) with an intersectional one that is foregrounded in age *and* disability. This allows us to combine the strengths of the housing studies literature – with its longstanding focus on how social-spatial identity is connected to stigma – with insights from other disciplines, including gerontology and disability studies on the othering of older and disabled people due to negative societal attitudes.

Doing so brings many benefits for housing scholars. Firstly, it highlights that even within apparently homogenous areas, place-based stigma disproportionately impacts certain groups of people, including older and disabled people. Additionally, these experiences fall unevenly even within these groups, with emerging evidence that older disabled adults are more exposed to this stigma than older people whose impairments come with age (as opposed to predating it). Secondly, it underscores the importance of tenure, location, and aesthetics to designing out stigma. This issue of aesthetics applies to the inside of the dwelling in terms of the value of aids, adaptations and other home modifications as governments encourage their citizens to ‘age in place’ and live independently outwith institutional settings. But it also draws attention to the importance of considering the wider built environment (beyond the home) to ensure neighbourhoods remain accessible, inclusive, and all citizens can access the services and public spaces that they require. Finally, our findings highlight the need for government policies centred on health, social care, housing, and place-based regeneration to be joined up and working in complementary ways, which is not always the case. All too often different policy sectors, and indeed academic disciplines, are talking across each other due to different terminology or because they are in competition for limited resources. This is despite often having shared concerns about how certain environments (and in turn the people residing there) are stigmatized. Moving beyond these silos is critical.

There are of course limitations to our review. Time and resource constraints dictate that boundaries must be chosen in terms of the search strategy and inclusion criteria. Yet it remains clear that there is a gap with regards to contemporary research that combines a focus on stigma, place, ageing and disability. Our aim is not only to draw attention to, and begin to address this gap, but to also provide a foundation for other researchers to build on. Ultimately, those experiencing stigma because of where they live may have this experience compounded not only because of their older age or disability, but also because of – and in addition to – their gender, sexuality, minority background, or citizenship status. Additionally, even within the categories of age and disability there is much variability of experience, and more research is needed to unpack and fully understand this. For example, how do experiences vary amongst disabled people due to different types of impairment – sensory, cognitive, functional? The sources we reviewed do not yet allow us to fully answer these questions, but they are nonetheless important points to reflect on when moving these internationally relevant debates forward. This is where literature mapping reviews can add value – methodologically they highlight research gaps and emerging trends (both empirical and conceptual) meriting further exploration, investigation, and development. They are a valuable and important precursor to empirical research.

Finally, our paper also reinforces that intersectionality is not only a rich concept that has much to offer housing research, but one that is also highly versatile and can be developed and deployed in a multitude of different ways (Collins & Bilge, 2020). It allows us not only to learn from other disciplines, but also facilitates the further conceptual development of place-based stigma as a key idea within the field of housing studies. Intersectionality has been relatively under-utilized by housing scholars to date and this paper is also a call to mobilize and develop this idea further within housing-related research more generally. The global, ageing population highlights that research on housing, ageing and disability must come to the fore if

governments are to adopt evidence-based approaches to transforming housing, health, and social care systems to meet the changing needs of their citizens.

Acknowledgements

This work was supported by the Economic and Social Research Council under the Inclusive Ageing call, grant number: ES/W012677/1 (Intersectional Stigma of Place-based Ageing project). Thank you to the journal's editors and referees for their comments on earlier versions of this paper.

Disclosure statement

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

Data access statement

This is a review article. Data sharing is not applicable to this article as no new data were created or analyzed in this study.

Funding

This work was supported by the Economic and Social Research Council under the Inclusive Ageing call, grant number: ES/W012677/1.

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Appendix A. String searches

Scopus

TITLE-ABS-KEY (“stigma*”) AND TITLE-ABS-KEY (“disab*”) AND TITLE-ABS-KEY(“ageing” OR “older” OR “elderly”) AND TITLE-ABS-KEY(“place*” OR “home” OR “housing” OR “neighbourhood”) AND PUBYEAR > 2009

Web of Science

Topic = stigma*

AND topic = ageing or older or elderly

AND topic = disab*

AND topic = place* OR home OR housing OR neighbourhood

AND publication date from 2010-01-01 to 2023-08-01