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“Everyone called me grandma”: Public housing demolition and relocation among older adults in Atlanta

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Abstract

Over the last few decades public and political dissatisfaction with public housing projects and an increasing emphasis on poverty deconcentration has led to the demolition of public housing in cities across the country. A significant body of literature has examined experiences of relocation from public housing and their implications for the well-being of individuals and communities. While much of this literature has focused on young or middle-aged adults and children, older adults have also been affected by demolition and relocation. The displacement of older adults raises a new set of age and life-course specific concerns for the well-being of this population. In this paper, we analyze the relocation narratives of 25 former public housing residents in Atlanta, Georgia. Our analysis focuses on the loss of geographically rooted communities of kinship, support and belonging that many participants, particularly those who have aged in place, attribute to their former developments. Participants describe many material and psychosocial benefits associated with living in communities that were “like families” and where they often held important roles as respected elders. While some were satisfied with their moves, others describe the dispersal of these “families” as a deeply felt loss. While some were able to draw on support from children and grandchildren in their new homes, others describe experiences of profound isolation after relocation.

Introduction

Over the last few decades, public and political dissatisfaction with public housing projects and an increasing emphasis on poverty deconcentration has resulted in widespread demolition of public housing and a large-scale relocation of public housing residents. Relocation from public housing is widely presumed to benefit the well-being of low-income families, by providing an escape from distressed neighborhoods and housing conditions. However, current research suggests that relocated public housing residents are often unable to access neighborhoods and dwellings that are significantly better than those that they left behind (Oakley and Burchfield 2009; Goetz 2010). Furthermore, relocation may disrupt geographically rooted social ties that are often critical sources of psychosocial and material support for public housing residents (Greenbaum, Hathaway et al. 2008; Keene and Geronimus 2011).

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A significant body of literature has examined experiences of relocation from public housing (Clampet-Lundquist 2004; Popkin, Katz et al. 2004; Greenbaum, Hathaway et al. 2008). While most of this literature has focused on young or middle-aged adults and children, older adults have also been affected by demolition. Demolished family public housing developments were often home to multigenerational families that included senior citizens (Smith and Ferryman 2006). Additionally, a few senior public housing developments, which house elderly and disabled residents, have recently been demolished (Oakley, Ruel et al. 2008). The displacement of older adults raises age and life-course specific concerns for the well-being of this population. We respond to this gap in the literature by presenting a qualitative analysis of the relocation narratives of older adults. These narratives were collected through in-depth interviews with 25 former residents of both family and senior developments in Atlanta, Georgia.

A significant body of research suggests that relocation presents challenges for older adults. Older adults are healthier when they age in place (Masotti and Flick 2006; Black 2008). Moving older adults to new areas is stressful, increases their sense of vulnerability (Lipman 1991), decreases their service utilization, and ultimately diminishes the size of their home territory (Simon and Walsh 1992). Moving may also disrupt geographically localized social networks that are likely to be particularly significant for the well-being of older adults who often spend more time in their immediate neighborhood, experience constraints on their ability to access geographically diffuse social ties, and in the context of declining health, may be particularly reliant on social support (Klinenberg 2001; Gardner 2011). Access to such social support resources is strongly associated with positive physical and mental health outcomes among both older and younger adults (House, Umberson et al. 1988; Berkman, Glass et al. 2000). Additionally, evidence suggests that among marginalized populations such as public housing residents, geographically rooted social networks play an important role in mitigating structural disadvantage and its health consequences (Stack 1974; James 1993; Mullings and Wali 1999; Geronimus 2000).

Although largely absent from popular images of public housing, a significant body of ethnographic research describes social networks and strong communities that provide many forms of material and psychosocial support for public housing residents (Briggs 1998; Venkatesh 2000; Greenbaum, Hathaway et al. 2008). The structure of public housing may be particularly conducive to the development of these social resources. For example, HUD regulations require tenant associations in all public housing developments (The Right to the City Alliance 2010). Although there is variation in how active these associations are, they provide a unique structure that may facilitate the development of community dialogue and serve as an important source of collective power (Williams 2004). Additionally, public housing developments often contain community centers and other common spaces that allow for interaction among project residents (Bennett and Reed 1999). Finally, the relative stability of subsidized housing has allowed many public housing residents to age in place, contributing to the development of social ties and strong community attachments (Kleit and Manzo 2006).

Existing studies of public housing demolition find that the loss of geographically rooted social ties can contribute to social isolation among relocated residents (Clampet-Lundquist 2004; Greenbaum, Hathaway et al. 2008). Additionally, research finds that relocation to an unfamiliar community, even one that is objectively safer, can contribute to increased feelings of vulnerability when social ties that once provided a sense of security are lost (Clampet-Lundquist 2010). Among older adults, research suggests that such feelings of vulnerability can contribute to self-imposed social isolation (Klinenberg 2001). In general, research finds that it is often challenging for relocated public housing residents to reestablish networks of support in their new environments (Briggs 1998; Clampet-Lundquist 2004;

Keene and Padilla 2010). Among older adults, feelings of vulnerability, limited mobility and poor health are likely to compound these challenges.

In this paper, we discuss the sense of belonging and kinship that some older adults attribute to living in public housing communities that were “like families” and where they often held important roles as respected elders. We also discuss the challenges that they contend with as these networks are scattered through demolition and relocation. While some participants were satisfied with their moves, others, particularly those who had aged in place, describe relocation as a deeply felt loss.

Setting and Methods

The Atlanta Housing Authority (AHA) has been at the forefront of a national shift away from federally owned subsidized housing. In 2007, it announced plans to demolish all remaining family public housing projects and two senior developments with no plans to construct replacement units. By 2010, the demolitions were completed, and the vast majority of residents had been relocated to the private market with housing vouchers (Ruel, Oakley et al. 2010). In 2008, a research team at Georgia State University launched a longitudinal study to investigate the impacts of demolition. The team surveyed 382 residents of 7 public housing communities: 4 family and 2 senior developments that were recently demolished and one ‘control’ senior development that was not demolished. Respondents were surveyed before they moved, and again at 6 months following relocation (Ruel, Oakley et al. 2010). In 2010, we conducted 40 in-depth interviews with a sub-sample of survey respondents 8 to 13 months following relocation. These interviews provided an opportunity for participants to narrate their own relocation story.

Sample

Interviewees were selected at random from 4 categories of survey participants that were stratified by age (> or < 60) and length of residence in public housing (> or < 8 years). In this paper we draw on the 25 interviews with adults who were over age 55. Our review of the data suggested that this younger cut-off was more appropriate for capturing the age and life-course specific experiences of “older adults” in our sample. For example, we found that many middle-aged adults in our study experienced health concerns that are typically associated with older ages.

Table 1 describes the characteristics of our sample. Average length of residence was 28 years for long-term residents and 5 years for short-term residents. Nineteen of the participants were women, 24 were African American and one was Caribbean. Participants’ average age was 65 and only one participant was married. Prior to relocation, 7 short-term residents and 2 long-term residents resided in senior developments. Prior to relocation, 15 participants reported that they were somewhat or very satisfied with their neighborhoods and that their homes were in good or excellent condition.

After relocation, 11 participants moved to multi-generational households, most often living with adult children. Seven moved to private high-rise facilities for senior citizens. The neighborhoods that participants moved to varied widely. A few lived near the center of Atlanta in relatively well-off neighborhoods, while others moved to apartment complexes in poorer neighborhoods on the outskirts of the city. Findings from the larger survey sample indicate that the majority of participants remained in poor neighborhoods after relocation (Oakley, Ruel et al. 2010).

Data collection and Analysis

Data were collected in the form of semi-structured interviews. Because a central objective of this study was to allow participants to tell their own stories of relocation, interview questions were framed in an open-ended manner. Interviews were conducted by the first author (Keene) and two GSU graduate students. They took place in participants' homes and respondents were compensated \$40 for their time. Interviews lasted an average of 70 minutes and were all audio-recorded and transcribed.

Analysis followed a modified grounded theory approach, starting with broad questions about the experience of relocation and reading transcripts closely for emergent themes (Corbin and Strauss 1998). Following an initial 'open-coding' process, we constructed a detailed codebook of themes and categories. Keene coded all transcripts (using Atlas-TI) according to this codebook. We then analyzed the data through repeated readings of thematically organized quotations, making comparisons across cases. The sections that structure this paper emerged from this analytic process.

Results

The results presented below are organized into three sections. The first describes participants' articulations of kinship, belonging, security and support within their public housing developments. The second section describes the dissolution of these resources following demolition. The final section describes sources of resilience, and also the challenges of isolation as participants attempt to rebuild their lives in their new homes. In the presentation of this data, participants' names and the names of their housing developments have been changed.

Section I. "Like a family": Social ties and social support among older public housing residents

Sixty-seven year old Ruby Johnson had lived in Linden Court for 31 years before moving to her current home in a sprawling and somewhat run down privately-owned apartment complex on the outskirts of Atlanta. She says that she likes her new place, but she would have preferred to stay in Linden Court, which she describes as a close-knit and stable community. She says, "It was like one big family. Because everybody knew everybody over there because they had been over there so long". This sense of kinship was common among the participants who had aged in place, often raising children and grandchildren in the same community and alongside familiar neighbors. For example, 76 year-old Irene Thompson, who had lived in Hillside Court for over 35 years, says,

Everybody, right, they like kinfolk. Everybody looked out for one another, helped one another and everything at Hillside Court. See, Hillside Court is same as home for all of us because we stayed there so many years and everybody know one another out there.

Or as 62 year-old Roberta Shepard says of her 28 years in Meadowbrook Village, "Everybody treated everybody good. Like a big family, in other words." While these experiences of kinship were almost exclusively attributed to familiarity that ensues over many years, 71 year-old Gwen Warren uses similar terms to describe Magnolia House, a senior development where she had only spent 5 years. She says, "Cause the peoples at Magnolia House, they just, I don't know, they just was a family." And when asked what made Magnolia House like a family, she says, "Everybody knew one another, everybody tried to help one another".

As older residents of multigenerational communities, several participants describe holding important roles as respected elders. Several long-term participants describe caring for neighborhood children who they continue to have close relationships with as adults. Others were widely known throughout the community as ‘Mama’ or ‘Grandma’. For example, 67 year-old Selena Carter explains, “I enjoyed [Oakwood Homes]. Never had any problems, you know. And everybody called me ‘Mama’ and ‘Grand Mama’ in Oakwood Homes.” Fifty-eight year-old Helen Young explains, “Well, I got along pretty well ‘cause I was older, and then I got respect as the mom. As a matter of fact, they all called me ‘Momma Helen’.”

Several long-term residents seemed to derive important meaning from their roles as respected elders in their public housing ‘families’. For example, during her 28 years in Oakwood Homes, 65 year-old Jocelyn Smith served as a mentor for younger members of her community. As a member of the tenants’ council, she organized activities for parents and their children. She also served as a mediator between residents and the management and was able to help several residents avoid eviction. When asked what she liked most about living in Oakwood, she says, “That I was able to help a lot of peoples, and I got involved in a lot of people’s lives. And I got where folks just want to come to me and sit down and talk to me about problems....And you know, I just, I’m so touched by so many of them lives”.

Likewise, although she had only lived there for 5 years, 75 year-old Constance Germain, saw herself as an advocate for young people in Linden Court. She had served on the tenants’ councils in other public housing developments and used her experience to provide frequent advice to her younger neighbors.

As well-known and often well-respected elders in their communities, participants also describe having had access to a range of social support resources. For example, Ruby explains that neighbors looked out for each other and were “real concerned” for one another. She says,.. “[if] you cooking and you didn’t have what you needed, you could always go to your neighbors. It was like one big family. ...And if you didn’t have no car, you had somebody in the neighborhood take you to the store or wherever you got to go and bring you back”.

When asked what made Locust Homes like family, 55 year-old Sarah Harris says, “We could talk with each other and discuss, you know, different problems. We could. We looked out for each other’s kids. I remember that.” Participants also describe looking out for their older and more frail neighbors. Jocelyn says, “They got sick, we had, you know, go out, knock on the door. Ask ‘em, ‘how they doing?’” In this way, close-knit communities seemed to mitigate some of the vulnerability associated with older age and poor health.

While several participants seemed to cherish their communities and the relationships that they contained, they also acknowledged violence and crime that have been well-documented in studies of public housing (Popkin, Gwiasda et al. 2000). For example, 59 year-old Donald Bell says, “You know there were certain people there who really got tired of Oakwood Homes...Old folks was scared to stay out there. They was scared to go to the store. They was scared to sit on their porch with folks shooting at night”. However, several explain that problems of crime, drugs and violence in their communities were overstated and when they did exist, were brought in by outsiders. Defending her former community in Meadowbrook Village, Roberta explains, “Like some people say...the project was infected with drugs, but that wasn’t so, that wasn’t so. Not in every housing project, it wasn’t true.”

Others say that despite the presence of crime, they felt secure within a community where people knew them. For example, Helen says,

And out of all the crime and violence there, it's just a thing where they, they look out for you. They knew [my son and I] were there by ourselves, and I could leave my house and not worry that they were going to break in. I didn't ever have a break-in because of the respect I guess I had on the block I lived.

Similarly, 61 year-old Sheila James who had spent 30 years in Oakwood Homes explains, "We would leave our door wide open and go way down to the grocery store". Selena explains that when she would come home from playing Bingo at 2 am, boys from Oakwood would escort her home, making sure that she was safe. She says, "That's the way we was we in Oakwood Homes. Everybody looked out for each other. We was just one big happy family. Now see, now we just scattered".

II. "Now we just scattered"

When public housing developments are demolished, residents are typically given two options: a voucher to subsidize a private-market rental or relocation to another public housing development. As a result of this second option, a few participants had actually experienced demolition multiple times. For example, Irene moved to Meadowbrook Village in 2005, after being relocated from the demolished Hillside Court. When Hillside was demolished, Irene says that much of her community was transplanted to Meadowbrook. However, with the demolition of Atlanta's last remaining family developments, virtually all residents have moved to private-market housing. While many moved near to friends or family, their larger communities of informal ties were, as several participants note, "scattered". Irene explains, "After they cut down Meadowbrook, they scattered us then. We can't do but call one another now because we ain't close to one another."

Not only were participants dispersed, but their former communities vanished with demolition. Without these geographic anchors, some describe completely losing touch with their former neighbors. As 60 year-old Earl Williams states, "They all disappeared into the woodwork". Selena says, "I don't know where half of the senior citizens is, that I used to be with. I don't know where they is." Likewise, Roberta says, "I miss a lot of my friends. Some, I know where they are, some I don't."

Even when participants knew where their friends were, lack of transportation and health limitations often created obstacles to visiting one another. The majority of participants were reliant on public transportation, which was often hard to access. For example, 67 year-old James Morly says, "I'm more isolated. That's because, not even having a car because I couldn't, I was having problems walking back and forth, down [to] the bus stop." Several participants describe the phone as their primary means of connecting with former neighbors and friends after relocation. For example, Gwen says that she talks to a few of her friends 2 to 3 times a week, but sees them less than once a month when her son can give her a ride. Irene says that she talks to friends from Hillside and Meadowbrook on the phone every day, but in the 8 months since she moved, hasn't been able to visit them once. Eighty-two year old Gladys Cullen says that this separation doesn't bother her because these friends were not close, "buddy-buddy" friends, but for others, the frequency of phone calls suggests that relocation has inserted geographic distance into significant and meaningful social relationships.

Indeed, several participants describe the scattering of social ties as a deeply felt loss. As 78 year-old Thomas Roberts says, "It was kind of a hurting thing". Ruby says, "It's just like losing somebody in your family, you been in their family 31 years and y'all go separate ways." When asked what she misses most about Oakwood Homes, Sheila says, "I miss the people. I miss the people."

The sadness and loss associated with demolition may have been particularly salient among older adults who had aged in place. Several participants expressed concern about their more elderly neighbors. For example, Jocelyn says,

We done had some neighbors, older neighbors, you know, they tell you start moving the old people around, they pass ... They uproot the old peoples and they have died. I'm serious. They [say], 'we don't want to go. We don't want to.' They got their flowers, their plants.... They got all their little pictures of the children and everything. They feel secure because people knew them.

Selena attributes the death of several elderly acquaintances to grief associated with the move. She says, "I think it was grief. Because we had said that anyway. That when they move them peoples, you know, were going to sit up grieving and they were going to grieve themselves to death, because they didn't want to move."

III. Making a new home: resiliency and isolation after relocation

In the context of the losses described above, continuity of pre-demolition relationships seems to be an important source of resilience. Some participants describe maintaining involvement with activities that they had begun in public housing. Gwen still attends the same church. Rosalyn has continued the GED course that she began prior to relocation. Selena continues to meet with her bible study group and says that she can always rely on them for support.

Kinship ties, and in particular ties to adult children, were also important sources of support after relocation. Many lived in multigenerational households, and others lived in close proximity to children or grandchildren. Participants describe relying on their younger family members for rides to the store and the doctors, help paying the bills, and various other household tasks. For example, when Ruby was afraid to sleep alone in her new apartment, her adult grandchildren came to stay with her until she "got used to it". Sixty-two year-old Virginia Willis says that even though she doesn't know anyone in her new building, visits with her adoring grandsons prevent her from getting too lonely

However, for the handful of participants who didn't live near family or who weren't able to maintain involvement with pre-relocation activities, the loss of their public housing "families" seems to have had profound implications for their access to social support. For example, Irene explains that her new apartment isn't as centrally located as Meadowbrook Village and for this reason, she is reluctant to ask her busy grandchildren to come help her the way that they used to. She also says that while she had no trouble finding rides to the doctor and the store at Meadowbrook, where everybody knew her, she can't rely on her new neighbors in the same way. She says, "It's hard to get somebody to do something for you when you don't know nothing about 'em... You don't know nothing about these people down here."

For older adults like Irene who have multiple health problems, this isolation can be particularly challenging and anxiety provoking. For example, Gwen, who recently had a stroke, worries about something happening to her without anyone knowing. She says, "They don't check on you like they did at Magnolia House." Seventy-one year-old Evelyn Lewis is also concerned about not knowing anyone in her new building. She says, "I could be up in here and [if] I fell and I can't get up, and nobody don't know, you know, who I am and all of that."

Without the wide networks of neighbors that often existed in public housing, even some participants who lived near family describe being more isolated in their new homes. A common phrase that participants use when describing their new neighbors is "we speak,"

indicating what seems to be a cordial distance. As Sheila explains, “The neighbors around here, when I see them, you know...they’ll speak and stuff. And you speak back. And I don’t go visit nobody around here like I did, you know, in Oakwood.”

In their new homes, some participants also describe missing the roles that they played in the networks of reciprocal exchange that had existed in public housing. For example, Jocelyn explains that the private rental market does not contain the same opportunities for leadership and organizing that existed in public housing. She misses the community work that she used to do and worries about how the younger members of her former community are getting by without the support of elders like herself. The loss of these roles can also have material implications. For example, Thomas says that he has lost his role as a handyman and the income that this provided. He says, “I know more people in Oakwood and I can try to make a dollar. You know, I can help folks around there do something because I’ve been in the community so long”

It is possible that the isolation participants describe is a temporary phenomenon. However, there are also reasons to expect that the previously described public housing ‘families’ will not be recreated in participants’ new environments. For long-term public housing residents, relationships with neighbors developed over many years, in the context of relatively stable communities. Their new communities are often described as more transient places, where people are, “always moving out.” Participants themselves may also move around more than they did in public housing. In the larger survey sample of 382 respondents, 12 percent had moved a second time within 6 months of relocation.

Additionally, some participants describe their new homes as places that aren’t conducive to the kind of community building that occurred in public housing. They describe a more private ethos, where people don’t spend much time outside and interact with each other infrequently. As Constance says, “You don’t see nobody knockin’ on each other’s door over here”. Gwen explains that her new apartment lacks the organized activities (trips, bingo, bible-study) that had allowed her to make many close friends at the Magnolia House. Additionally, she explains that in Magnolia House, there was a community room and a patio where residents gathered to play cards and barbeque, but these spaces do not exist in her new, privately-owned complex. Thomas describes a similar lack of communal space in his new complex. He says, “They need a big place, you know, where community can get to know each other, instead of 2 or 3 at a time. See in Oakwood it be 50 or 60 of them at one little party?” Additionally, some participants explain that their new apartment complexes have prohibitions against gathering on front stoops and thus limit opportunities for socializing.

One important exception to this seems to exist among participants who moved to a privately owned senior high-rise called the Towers which contains a library, a gym, a computer room, indoor communal spaces and numerous organized activities for its residents. When asked if she has made new friends at the Towers, 73 year-old Dorris Martin says with a chuckle, “Too many” and elaborates, “We havin’ different activities here. And I will go out, and you know, just sit and talk with everybody. And yes, now it’s sixteen of us, we’re in a card club”. She describes a supportive community where her neighbors look out for her and where she often provides assistance to those who are less able than she is.

However, it is important to note that due to space constraints, not all residents who wanted to move to the Towers were able to. Additionally, some participants preferred living in multi-generational communities and did not want to move to a senior building. Finally, for some of the Towers’ residents, age-related health limitations create barriers to involvement in this new community. For example, Gladys says that she does not take part in activities at

the Towers because, at age 82, she is “getting old” and her “nerves is bad”. She says, “No, I don’t take no classes. If I were young, I would. I don’t take no computer classes. Don’t take no knitting classes and no jewelry class. I don’t do that because my nerves is not like they used to be.”

Age and health limitations may also contribute to feelings of vulnerability among older adults, making them more cautious about forming new ties that have the potential to be sources of strain. For example, when asked why she hasn’t made friends in her new neighborhood, Gwen says, “I don’t know how to explain. Down through my years, I be know people stabs you in back and all that stuff and I don’t want to get involved with that. So I already know the people, call ‘em on the phone, go see them [that] I knew at Magnolia”. It is interesting that Gwen felt comfortable reaching out to other residents during her 5 years at Magnolia House, but feels differently in her new home. One contributing factor may be the dramatic change in her health that she experienced when she had a stroke shortly after moving.

Whereas in public housing, social ties are often described as a source of protection, after relocation, they often seem to represent risk. For example, when asked whether she feels safe in her new home, Irene says, “Well, yeah, in a way because you know why, I don’t associate with these people”. Fear of stigmatization may exacerbate these feelings of vulnerability. For example Jocelyn explains, that she hasn’t gotten involved with any neighborhood organizations because, “They find out I’m from Oakwood. You know, they’re probably looking down on me”. In the context of these barriers to integration, the post-relocation isolation that some participants describe may not be a temporary phenomenon.

Discussion

Participants in this study describe many benefits associated with living in communities that were “like families” and where they often held important roles as respected elders. While some participants were quite satisfied with their moves, others describe the dispersal of these “families” as a deeply felt loss. Social networks were scattered in the relocation process, and the buildings that served as geographic anchors for these social ties were demolished. While some were able to maintain connections with members of their public housing “families” and drew on support from younger kin in their new homes, others describe experiences of profound isolation after the move. Given the well-established importance of social support for health and well-being (Berkman, Glass et al. 2000), this loss of social ties may be an unintended consequence of public housing demolition that has profound health implications for relocated older adults. Not only did participants lose access to sources of support and assistance, but some also lost important roles in networks of exchange. Research suggests that for older adults, the ability to give, as well as receive support, is centrally important to well-being (Cahill, Lewis et al. 2009).

While it is possible that networks of support will be recreated over time, participants’ narratives suggest that feelings of aging-related vulnerability and health-related limitations often create barriers to re-establishing social ties after relocation. Additionally, public housing communities may be particularly conducive to the development of the social support resources that participants describe. Keene and Geronimus (2011) find that public housing residents are significantly more likely than other rent-assisted households to report that people in their neighborhood count on each other and watch each other’s children. This may partly reflect the design of public housing sites, which often include communal indoor and outdoor space. Indeed, participants describe a lack of communal space in their privately owned developments. They also describe a lack of opportunities for the collective organizing and interaction that had existed in tenants’ organizations and activities. The

Towers, a privately-owned senior building did contain communal space and activities for its residents. However, it lacked the multigenerational nature that some participants valued. For some older residents of multigenerational communities, social relationships were strengthened over the years through processes of collective childrearing.

Participants also describe social support resources that developed in the context of relatively stable communities where, “everyone had been there so long”. Indeed, HUD data indicate that voucher holders move more frequently than residents of housing projects (HUD 2000). This longer length of residence may in part reflect the constrained choices of public housing residents who receive rental assistance that is not portable. However, it may also reflect access to stability that is not available to private-market renters in the context of frequent evictions, gentrification, the failure of landlords to maintain the eligibility of their units and a variety of market forces (Goetz 2003; Newman and Wyly 2006).

The potential consequences of demolition for health-protective social resources are largely absent from public and political conversations about public housing that have typically emphasized crime, violence and dilapidation. This is not to say that the conditions in and around many urban public housing developments are acceptable. Indeed, these developments and the neighborhood that surround that have suffered greatly from reduced public investment, rampant unemployment, reductions in social services and a proliferation of drugs and violence. However, existing research suggests that many voucher holders reside in neighborhoods that are still poor and segregated (Popkin, Katz et al. 2004; Oakley and Burchfield 2009). As illustrated narratives presented above, some relocated residents may be negotiating the stresses of these neighborhoods without the support that they relied on in public housing.

The narratives presented above point to a need for strategies of urban redevelopment that recognize the existence and importance of geographically rooted social ties for low-income populations. While current policy has emphasized the scattering of public housing communities, our findings point to a need for relocation strategies that help residents move with their friends and family members. Additionally, our findings caution against the wholesale demolition of public housing that has occurred in Atlanta. While the expansion of the voucher program may provide more housing options to some rent-assisted families, the private market may not adequately serve all relocated residents. Even proponents of public housing demolition have suggested that the most vulnerable of public housing families (including senior citizens) are likely to face challenges with relocation and may be better served by “hard units” in housing developments (Popkin, Cunningham et al. 2000). Additionally, the narratives presented here suggest unique opportunities for social support, role statuses, and collective life in public housing, in particular for older adults, that may not be recreated in the private market.

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Highlights

- We use in-depth interviews to examine experiences of public housing demolition among older adults
- For some participants, the dissolution of social networks is experienced as a deeply felt loss.
- Some participants experience challenges to rebuilding social ties in their new environments.

Table 1

	Long-Term	Short-Term	Full Sample
Total N	12	13	25
Mean Age	64 years	65 years	65 years
Mean Length of Residence	10 years	5 years	7.4 years
Resided in Senior Development (N)	2	7	9
Married (N)	1	0	1
African American (N)	11	13	24
Somewhat or very satisfied with neighborhood (N)	8	7	15