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Meanings of ‘lifecycle robust neighbourhoods’: constructing *versus* attaching to places

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**ABSTRACT**

In Western welfare states, notions of age-friendly communities and ageing-in-place are increasingly important in new health policies. In the Netherlands, care reforms are modifying the former welfare state to be more participatory; local governments are seeking collaborative solutions. Municipalities and housing, care and welfare organisations in the southern part of the country developed the concept of ‘lifecycle robust neighbourhoods’, envisioned as places where older people can age-in-place. Although many scholars have used the concept ageing-in-place in their studies of neighbourhoods, we aim to unravel this concept further by exploring how this particular ageing policy plays out in practice. This paper explores what the development of ‘lifecycle robust neighbourhoods’ means in relation to notions of ageing-in-place and age-friendly communities. We used ethnography (interviews, observations and focus groups) to reveal how, on the one hand, the policy makers, housing, care and welfare directors and representatives of older people, as developers of ‘lifecycle robust neighbourhoods’ and, on the other hand, older people, give meaning to places to age-in-place. It becomes clear that ageing-in-place has a different meaning in policy discourses than in practice. While developers mainly considered place as something construable, older people emotionally attached to place through lived experiences.

**KEY WORDS**—ageing-in-place, age-friendly neighbourhoods, place attachment, older people, participation.
Introduction

Referring to ageing populations and associated public health-care expenditure, increasing numbers of Western welfare states shifted health responsibilities (partly) from the state to individuals (Bond et al. 2007). Simultaneously, care and welfare services have become decentralised (Hacker 2009; Kroneman, Cardol and Friele 2012; Nowak et al. 2015; Singh 2008). In the Netherlands, the Social Support Act (Wet maatschappelijke ondersteuning) is playing an important role in national reforms. Though the Act (2007) evolved due to several amendments, its aim remained to enable older people to live independently for longer periods of time. The Dutch act is in line with the aim of the World Health Organization (WHO 2007) to make the world more age-friendly, as was expressed in Global Age-friendly Cities: A Guide. This guide draws on the WHO’s active ageing framework, which defined active ageing as ‘a process of optimizing opportunities for health, participation and security in order to enhance quality of life as people age’ (WHO 2002: 12). In 2015, Zeitler and Buys added that encouraging the development of communities that enable people to remain engaged and participative was also central to the active ageing concept. In 1993, gerontologist Rowles already explained how ‘a belief [is] gradually being subsumed within public policy, that older people, particularly as they grow more frail, are able to remain more independent by, and benefit from, aging in environments to which they are accustomed’ (Rowles 1993: 65); Olsberg and Winters (2005) also argued that people increasingly wish to age-in-place. In this paper, we aim to unravel meanings of a Dutch policy to construct ageing-in-place, by exploring how this policy plays out in practice.

How meanings of ageing evolved in relation to ageing policies in the past decades becomes clear in the literature review of age-friendly communities in Western welfare states of Lui et al. (2009). They observe a counter-movement between 2005 and 2008, where ageing was no longer being interpreted as a social problem: it was considered a positive starting point. Notions of age-friendly places were used to promote the development and exploration of what age-friendly cities and communities meant (Lui et al. 2009). The concept of age-friendly communities has even been used as a governmental strategy (to make places age-friendly) (Menec et al. 2015), but different governmental strategies have different foci. Walton (2014), for instance, described a strategy aiming to develop ‘vital places’ nearby destinations that affect residents’ vitality and health. Other authors mention notions of belonging, identity, (in)dependence and use of space as
elements of ageing-in-place strategies (Peace, Holland and Kellaher 2011; Phillipson 2007; Sixsmith and Sixsmith 2008; Wiles et al. 2011). Furthermore, ageing-in-place is associated with concepts of healthy, successful, productive or active ageing (Boudiny 2013; Bülow and Söderqvist 2014; Lassen and Moreira 2014; Sixsmith et al. 2014; Walker 2008). In line with the heterogeneity of ageing, there are many definitions of successful ageing (Depp and Jeste 2006; Nosraty et al. 2015). Depp and Jeste (2006) concluded that it is too complicated to fit these ideas in one single theory or model.

While many studies have already explored the meanings older people give to place, we have not yet found discussion of a comparison between how ageing-in-place policies relate to older people’s lived experiences of ageing-in-place. In our study, we aimed to fill this gap by analysing different meanings of ageing-in-place within a public innovative care practice in the Netherlands called ‘Voor Elkaar in Parkstad’ (‘For Each Other in Parkstad’). In this practice, policy makers, directors of housing, care and welfare organisations (including a health-care insurer) and representatives of older people aimed to develop a policy to ‘make ageing-in-place’ (representatives are appointed by formal older adults’ organisations to represent older adults’ interests, for instance by participating in policy boards and panels). They introduced what they called ‘lifecycle robust neighbourhoods’ as places that enable ageing-in-place. These neighbourhoods can be considered as ‘ageing technologies’. In our study, we explored how both developers (the initiating policy makers, directors and representatives) and users (older adults) give meaning to neighbourhoods as places for ageing-in-place. The distinction between developers and users is introduced in literature aimed at understanding how new technologies are incorporated in everyday practices (Oudshoorn and Pinch 2003).

We first discuss the theoretical background of the study. Subsequently, we present the case we studied and explain the methodology used. We then present our analysis; discussing how developers (policy makers, directors and representatives of older people) and users (older people, inhabitants) experience the places that are an object of the ageing-in-place policy. Finally, we will reflect upon our analysis and discuss how it contributes to current ageing-in-place discourses.

**Defining ageing-in-place**

Ageing-in-place has become an important element within Western reform policies. In this section, we will examine theoretical notions of place and place attachment and ageing-in-place policies.
Place

To enhance our understanding of how places matter, we used the work of social constructivist Gieryn (2000). He explained that instead of using demographical, geographical and historical quantifiable characteristics, his task was ‘to reveal the riches of a place-sensitive sociology’ (Gieryn 2000: 464). He wanted to understand why and how places matter and are unique, even if they increasingly look alike. While ‘clones of places’ are built everywhere (e.g. similar shopping malls and office complexes), places remain meaningful and unique because of: (a) geographic location (a ‘unique spot in the universe’); (b) material form (‘the physicality of place’); and (c) investment with meaning and value (naming, identification or representation by ordinary people). These features resonate with those referred to in spatial sciences by Cresswell (2004: 7) as ‘location’, ‘locale’ and ‘sense of place’, and in gerontology by Rowles’ (1993) components of place attachment: (a) physical (e.g. repetitive routines of use); (b) social (e.g. shared habitation, being familiar with neighbours); and (c) autobiographical (e.g. the personal history built over time that helps to identify with a particular place). Gieryn argued that a combination of these three features make places meaningful as they construct the sensitivity of a place. Place in itself is not important he argued, but the way place mediates social life is; people emotionally attach to a place because of social relations and history associated with it.

Attachment to place is difficult to explain in words. When walking through the Dutch city Maastricht, Gieryn struggled to articulate differences and similarities to his hometown Bloomington, Indiana. Comparisons in terms of demographic characteristics or historical facts are not able to ‘capture the sociologically significant characteristics’ of both places (Gieryn 2000: 483). Only qualitative characteristics can help to understand why specific places matter to some people and not to others. Thrift (2008) and Trell and van Hoven (2010) also argued that places are constructions or reconstructions in people’s imaginations, memories, emotions and feelings, both positive and negative.

Although Gieryn demonstrated how places are constructed through meanings, he also demonstrated how places are agents themselves and influence the environment and social life (Gieryn 2000). For example, Jacobs’ ([1961] 1992) work The Death and Life of Great American Cities, illustrates how a location to create a safe environment, away from traffic, for children to play and for others to meet, simultaneously contributes to its dangerousness as the isolated location also attracts criminal behaviour.
Place attachment

To understand what place means in relation to age and how people attach to place, theories on the relation between ageing and place are helpful. Many different environmental factors contribute ageing-in-place. Gardner (2011) elaborated on the meaning of places for ageing when trying to understand the effect neighbourhoods have on places when people age, whilst exploring the public life of older people living independently. Social networks in neighbourhoods and the neighbourhoods themselves influenced the experience of ageing and wellbeing. Gardner distinguished three key places where older people make social connections and experience informal public life: near the home (first place), work (second place) and in several third places. Third places, Gardner explained, are places with a specific destination, such as the park, a community centre or a shop. She also distinguished thresholds, so-called ‘hybrid third places’, like driveways, backyards and elevators; and transitory zones, like places between places, such as streets and sidewalks. Gardner showed how these different places can affect people’s behaviour differently.

Apart from places, flexible transport options enable people to remain independent in later life, especially in remote and rural areas (Plouffe and Kalache 2010; Zeitler and Buys 2014). Additionally, Walton (2014) emphasised the importance of specific places to ensure vitality and health (like the availability of healthy food sources). Furthermore, influences on health in general (not specifically related to later life) can also depend on different socio-economic neighbourhood areas, neighbourliness (the ‘hi-factor’), greenness of environment and the proximity to Gardner’s ‘third places’ (Eriksson and Emmelin 2013).

Places matter, but why are people attached to specific places? Some authors point to a functional relationship with the personal environment (e.g. Lawton and Nahemow 1973), drawing on the idea that individuals’ competences enable them to make rational choices with respect to their environments (see also Rowles 1993; Peace, Holland and Kellaher 2011). Lawton and Nahemow (1973) argued that the more competent individuals are, the more proactively they will be able to deal with possible challenges in later life (mobility issues, for instance), and the less place-dependent they will be. Peace, Holland and Kellaher (2011) added the concept of ‘option recognition’, which basically means that it is not necessarily remaining in-place that is important, but the opportunity to independently select the best option where to age (or the only realistic one).

Other authors point to an experiential, affective relationship which is distinguished based on personal affections towards a place (Hillcoat-Nallétamby and Ogg 2014; Rubinstein and Parmelee 1992), for instance, because it
provides opportunities to keep the past alive and to build a shared identity as a community (Means and Evans 2012). Yet while communities can stimulate attachment to places, they can also stimulate withdrawing from their own neighbourhood (Gilleard and Higgs 2000; Means and Evans 2012).

In his work, Rowles (1993) criticised the notion of ageing-in-place for its romanticised associations. He argued that the choice to remain in-place is often based on pragmatic reasons (e.g. a mortgage that has to be paid, convenience), instead of on emotional and experiential attachments. In addition, generic places are also increasingly able to invoke a sense of ‘familiarity and identification’: an ordinary McDonald’s restaurant could evoke memories of a precious moment (e.g. a first kiss) that took place in another McDonald’s. Furthermore, older adults do use strategies to re-make place after a relocation, both physically (using the same furniture) and socially (developing tactics to connect with new neighbours) (Rowles 1983).

In a study exploring the meaning attributed to homes, neighbourhoods and communities when ageing-in-place, Wiles et al. (2011) argued that the latter can help to delay or even prevent the institutionalisation of older adults, as the home setting can offer a sense of connection, and feelings of security and familiarity. Even when their own environment changes, older adults are able to adapt to these changes (Lager 2015). Although many older adults might prefer to remain in-place, Keyes et al. (2014: 128) concluded in their study ‘lifelong community cannot be forced upon people; rather, it must be crafted with input and guidance from those whom it is intended to serve’.

Against the background of arguments that suggest that place attachment is increasingly less related to specific places, it is interesting to consider Gieryn’s (2000) place-sensitivity: What is it, in particular, that makes a place meaningful for people living and ageing there? Places reflect and constitute social relations, and they can simultaneously include and exclude individuals (Lamont and Molnár 2002). This is important when examining why and how places are regarded meaningful to older people (Gardner 2011; Joseph 2008; Joseph and Chalmers 1995; Lamont and Molnár 2002). In their work on growing old-in-place, located in rural New Zealand, Joseph and Chalmers (1995: 81) illustrated how some older people chose to age where they had a ‘lifetime of experience’ over what was considered the most suitable place to age in terms of healthy ageing or over what could be considered the rational chosen better option (Peace, Holland and Kellaher 2011).

**Ageing-in-place policies**

One of the underlying assumptions of new policies that promote age-friendly cities and communities is that they will provide the context to
enable or encourage active ageing: they are places ‘where policies, services, settings and structures support and enable people to age actively’ (WHO 2007: 5). The current changes in how old age and ageing-in-place are understood resonate with similar changes in notions of citizenship, independence and individual responsibility (Newman and Tonkens 2011). Menec et al. (2011) describe how most governments consider social participation to be pivotal when searching for strategies in dealing with the implications of ageing populations. Although the WHO started to promote the concept of age-friendly cities by focusing on urban areas (Plouffe and Kalache 2010), increased attention has now been given to rural and remote areas, as the highest proportion of their residents are older people (Buffel, Phillipson and Scharf 2013; Coleman and Kears 2015; Menec et al. 2015). According to Buffel et al. (2014), different communities need different approaches to become age-friendly, and a one-size-fits-all approach cannot be applied. They state that local needs and desires (e.g. fresh air, travel opportunities, health care, sports) have to be taken into account (see also Winterton and Warburton 2011).

In current social policies, one can observe a shift in responsibility from the state to individuals and their family and friends, and in that context the meaning of home has changed (Roberts and Mort 2009; Wiles et al. 2011). The home is reconstructed as a place of care. For instance, Milligan (2009: 71–2) observes ‘a continuous renegotiation of the meaning of home as a site of care and a place of social relations and personal life’.

However, while policy makers consider ageing-in-place mainly from the perspective of health and care, older adults might want other things (Milligan 2009; Roberts and Mort 2009). The number of older people who remain independent for longer is increasing, and it is important their views on where they want to age are heard (Dahlin-Ivanoff et al. 2007; Wiles et al. 2011) rather than to assume they are infirm (Heathcote 2011). Instead of focusing on opportunities for health and care provision, other elements are distinguished as important to enable ageing-in-place ‘regardless of age, income or ability level’ (Satario, Scharlach and Lindeman 2014: 1374). Several scholars mention the importance of living in a private home based on feelings of safety, independence (freedom) and comfort (Eriksson and Emmelin 2013; Satario, Scharlach and Lindeman 2014). Although ageing-in-place can be a choice for some, for others (especially low-income individuals) it can be the only option, as they are not able to choose (or buy) other options (Kohon and Carder 2014; Morenoff and Lynch 2004; WHO 2002). To enable independence in old age, communities (social networks) remain important in policy making as they are considered to be able to fulfil
informal care and welfare services (Means and Evans 2012). In short, these studies on ageing-in-place policies illuminate that a combination of physical and social capital is vital to enable ageing-in-place.

Methodology

In this paper, we explore concepts of ageing-in-place by unravelling meanings of so-called ‘lifecycle robust neighbourhoods’ in the case ‘Voor Elkaar in Parkstad’. Parkstad is located in the southern part of the Netherlands and in 2012 it had almost 250,000 inhabitants, spread over eight municipalities, which varied from rural places with fewer than 8,000 inhabitants to urban areas with almost 88,000 inhabitants. ‘Voor Elkaar in Parkstad’ was developed not only in response to the regional challenges of a shrinking, as well as ageing, population with associated increasing health-care expenditure, but also, as a care director stated: ‘to undo bureaucratic and other flaws in the system’ (i12).1 The idea, as discussed during meetings of the steering committee in 2011, was to develop ‘lifecycle robust neighbourhoods’ where people could live independently for longer. In this paper, we explore meanings of lifecycle robustness in relation to age and place by unravelling the way(s) in which actors who are involved in devising the ‘Voor Elkaar in Parkstad’ policy (developers) or affected by it (users) understand ageing-in-place.

In our qualitative study, we used ethnographic methods (Alvesson and Sköldberg 2009), as these enabled us to collect insightful in-depth data examining the different constructions of ‘lifecycle robust neighbourhoods’. Data collection took place within a broader study, which ran from July 2011 until September 2015 and explored constructions of, among others, ageing and lifecycle robustness. We did not only study the constructions of policy makers, housing, care and welfare directors, older people and their representatives, but also those of civil servants, as well as managers and professionals located in housing, care and welfare. This paper does not specifically discuss the constructions of ageing-in-place of these civil servants, managers and professionals, but it is important to understand how meanings given to place by developers and users are situated.

Firstly, we analysed documents, such as project plans and steering committee, project group and working group meeting minutes, to get an idea of the underlying principles of this innovative public care practice. Secondly, we conducted 76 interviews; 28 took place with developers (policy makers, directors and representatives of older people). To explore how older people understand their neighbourhood as users, we interviewed 28 older people who lived independently in 18 interviews (partners were
interviewed together). In the interviews, we asked the interviewees to share their experiences of and thoughts on ageing, their homes and their neighbourhoods. Each interview lasted between 20 and 150 minutes and all interviews were transcribed verbatim (except three in which only notes were taken due to practical and technical reasons). Thirdly, we observed all interviewees in 72 formal and informal meetings, including steering committee meetings, project group meetings, case management meetings, home-visits of care and welfare professionals, as well as at lunches, handicraft groups and bingo games. Field notes were taken during all observations and were then elaborated on extensively and promptly. Fourthly, we organised six focus groups to get feedback on our preliminary findings and explore further some topics. One focus group took place with policy makers, one with project members, two focus groups were held with housing, care and welfare professionals, and two focus groups were with older people. All focus groups were audio recorded and transcribed verbatim. In our analysis merely direct quotes from interviews are used. However, our findings were confirmed by the observations and focus groups.

All research activities were conducted in Dutch. We coded recurring topics in documents, interviews, observations and focus groups. Focus groups were used to verify preliminary findings, after which we refined our coding if needed, seeking the elements that made neighbourhoods suitable for ageing-in-place that participants considered important. We translated all quotes in this paper from Dutch to English: these were then checked by an English editor and the editing was subsequently checked by us to ensure the original meaning had been retained.

**Meanings given to lifecycle robustness**

Participants in our study gave different meanings to ageing-in-place. Below we illustrate how developers and older people (users) living in these places give meaning to ‘place’.

**Constructing enabling places**

As previously mentioned, to address the challenges of an ageing population, policy makers, directors of housing, care and welfare organisations and representatives of older people in Parkstad initiated a plan to develop (or re-construct) ‘lifecycle robust neighbourhoods’ that enable older adults to live independently and remain self-sufficient (Transition Plan Voor Elkaar in Parkstad 2011). In discussing this, they imagined what would be important for ageing-in-place and came up with different ideas and arguments.
Private homes were considered important facilitators of ageing-in-place. An alderman mentioned, for instance, the importance of ‘creating care homes’ (i15). In his view, when people face health problems, care should be provided in private homes. Representatives of older people elaborated on this when talking about wheelchair- and walker-friendly corridors and entrance access: ‘when building or renovating you need to consider that doors need to be wider for instance … when building, you need to consider whether there is a possibility to add a grip [rail in the] toilet’ (i13). Another representative of older people further elaborated on what a suitable home meant:

I would not say that we need to demolish everything and build only similar houses. But in construction work, it should be considered that within 25 years, half of our population will need a suitable home. (i7)

According to the views of developers, ‘lifecycle robust neighbourhoods’ should include houses that enable home care provision, including telecare. Places that can be described as convenient places. A housing director elaborated: ‘that is why it is important for us that good home care is possible in our houses’ (i17).

However, several directors we interviewed pointed out that feeling unsafe at home was an important barrier to remaining in-place.

As people age, their houses become fortresses. They become more afraid, six-double-locks, I don’t know, security systems, you cannot name it. Because they create a kind of cocoon of security inside their own home. (i4)

Here, the concept of ‘lifecycle robust neighbourhoods’ is strongly related to feeling secure, and according to another care director this started at home:

You cannot resolve that by sending someone by every day, for half an hour. You cannot resolve it with a security system either, because if you have a security system, you know that you are actually unsafe. Because otherwise you would not need that security system, it is an existential insecurity. For those people, and I have known plenty, in my work and in my private life, a caring home is a blessing. Not afraid of forgetting their pills. (i8)

Simultaneously, this director wondered:

I am curious whether there [is] … actually [not] that many … ‘lifecycle robust neighbourhoods’, little attention is actually paid to whether [they are] … actually … age-unfriendly. (i5)

In short, in their narratives, aldermen and representatives of older people mentioned the physical characteristics of a private home that can enable or disable ageing-in-place, while care directors are rather pessimistic about the opportunity to make people feel safe in their own homes.

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Feeling safe and happy in a place was not only related to the private home, but also to the neighbourhood in which people age. Public health service advisors, an insurance company and a regional consultancy agency mentioned how characteristics of neighbourhoods should be taken into account when developing an environment to age-in-place. For instance, an insurance company representative mentions the importance of social status:

There are, of course, different socio-economical status-scores, in this neighbourhood you have to organise completely different things [than in another], there are simply other needs in a luxury residential area. Or an area full of care institutions for older adults. In that sense, it is impossible to explain what a ‘lifecycle robust neighbourhood’ looks like. (i9)

Public health services point to other facilities:

Perhaps there [is a] need [for] … some characteristics [to be] in there later. There needs to be … minimum … facilities, or a minimum scale … number of inhabitants, or at least a … neighbourhood platform [structure] or whatever. But at least things that help to keep things going. (i20)

Other developers struggled with the assumed diversity of needs and desires amongst people and how hard it is to specify why some people want to live in one place and not in another. Some communities attracted people to remain in-place, but developers found it hard to specify exactly what makes these communities so appealing. When talking about this, a housing director described one specific neighbourhood:

[There] is … such an entrance [i.e. the respondent referred to the atmosphere you could immediately experience when visiting the neighbourhood], that I would almost say that the quality of the house is subordinate to that. This is not entirely the case. It is [attractive] for one … [group of residents], the other … does not even want to be found there when dead. (i17)

People do attach to neighbourhoods, even if a place no longer suits their needs. An alderman elaborated on the attitudes he experienced in a community where people were determined to stay-in-place:

People are extremely … determined to stay-in-place. Meaning people who are disabled, or [are] hardly able to move up and down the stairs … [are] very difficult to encourage … to move. They would, so to speak, rather go down the stairs while sitting on their bum, than they would move to a beautiful apartment, with an elevator and everything, which is not situated in their neighbourhood. But even if it is two streets away, for some people that would be an invincible obstruction. (i16)

Unique and often unidentifiable characteristics are considered to be important for people and make them postpone a decision to move out and to avoid thoughts about approaching the end-of-life stage:
Sometimes you see that people stay too long … that last step, people find it very difficult. Their perspective is often something like, this is our last step and then we will die … Sometimes, because of that, people stay, too often, too long, in-place. (i17)

Developers are convinced that elements of place attachment – important for ageing-in-place – are somehow embedded in communities. However, according to them, social cohesion was not only embedded in communities, but could also be constructed. They stressed the importance of neighbourliness and activity. A representative of older people explained: ‘it should be a neighbourhood where something happens … that needs to be a bit incentivised, try to create some ambiance, with neighbourhood parties and whatever else’ (i7). An alderman thought that neighbourliness is possibly already available:

The possibility exists that small communities have such a strong social cohesion, that they might actually be able, with minimal resources, to keep it viable and [enabling] … for the ageing population. (i18)

By referring to festivities, a representative of older people touched upon an often-expressed desire for neighbourly atmosphere, mainly described as neighbours helping each other with their needs. Other developers additionally talked about how they could facilitate this kind of social cohesion. A care director asked, for instance:

Can we … enable people to do as much as possible in their own neighbourhood, their own home?’ (i12)

This director interpreted ‘lifecycle robust neighbourhoods’ as:

The fact that you as a client, an older adult in the neighbourhood, are participating, taking part, [and] are doing things for the neighbourhood, for people, but that you also get something back, and that you are facilitated to [stay] … there. (i12)

However, not everybody thought neighbourliness can be organised, a care director (again more pessimistic) warned:

In those … ‘lifecycle robust neighbourhoods’, there is a certain social pressure not to turn your back on your neighbour. But we know, because we are all human, that in those neighbourhoods, it will always be the same people who help. (i4)

As mutual help in neighbourhoods will not always be realised, policy makers, directors and representatives identified a need for what they called a signalling function. This is a professionally organised function, embodied in a person, not a professional per se, who works or lives close to the older person, and notices when things go wrong. A care director explained:

The person who often first notices [such] things is a concierge. He sees the garbage is not taken away, a garden is no longer being kept, how someone starts to get more
difficulties walking with his walker and opens the door only once in a while to … [let] the dog out, unable to do it himself … It is possible to organise the signalling function in … chain[s] of care providers differently. (i11)

An insurance company representative envisioned a similar function:

Do you have a problem, and it can be very simple, but also, I need to do a request [for help] and I do not know where I need to be. I can no longer do my groceries because it is icy … we can organise that in one person. (i9)

While discussing the importance of having a signalling function to enable ageing-in-place, developers discussed how organisations could jointly facilitate residents’ participation, eventually resulting in residents taking over the signalling function. A welfare director explained: ‘eventually it is all related to participation and to the neighbourhood taking over tasks of the professional’ (i14). However, developers agreed that to achieve such a participative neighbourhood patience is needed. A care director added how structure, method and culture are important in creating an environment that enables ageing-in-place:

If we start to understand again that it is sensible to know whether my neighbour gets help from the home care or from family members, and if I have a signalling function there as well, if that becomes common practice, then all changes will be sustainable … the needs of an older adult will change, but … the environment can be flexible [i.e. the environment has to become able to fulfil people’s needs]. (i10)

‘Lifecycle robust neighbourhoods’ are constructed in different ways, but overall these neighbourhoods were considered by developers as places that can be constructed top down. Most of the developers were rather optimistic about the possibilities of realising ageing-in-place: ‘no formalising, no organising; only facilitating. You just know who needs a nail in the wall, and you know who is able and willing to do that’ (i24). Others described their aims as being idealistic. A care director explained this ambiguity:

If I look at lifecycle robustness, I suppose these are neighbourhoods where people can live from cradle to grave, but with the current movement of the next generation [where many people no longer remain in the same place for a lifetime], I would not put my money on this [lifecycle robustness] as a future development. (i4)

**Experiencing attachment to place**

While the developers’ narratives mainly considered neighbourhoods as places that can be constructed to enable ageing-in-place, older people had different narratives. Although they shared the idea that ageing-in-place is valuable, they did not consider place as something that could be made, but rather as something that just is. Many mentioned how they liked being in their own place. A woman aged 82 said: ‘I am fine here. By
now, [I] know everyone, this is anyhow a cosy place to live’ (io2). Others stressed that ‘you should not move an old tree’, which is a Dutch saying that implies things will go wrong if older people have to move. Among our interviewees there were people who have moved to what are considered to be age-friendly apartments, a couple that was considering moving because they thought a new place might be more age-friendly, and people living in homes they bought or even built decades ago and intended to remain living there. Although people expressed worries about the new social policy as it discouraged people from moving to care institutions, they also relied more or less on getting help if they really needed it.

From the narratives of older people it became clear that they experienced, rather than constructed their place. Similar to the developers, they liked practically convenient places, like homes that offered home-care opportunities and were located close to facilities and services, for instance a woman aged 76 said:

my general practitioner is there … the physiotherapist, I only say, there should be a pharmacy as well.

Her husband aged 77 then added:

…but that is also nearby … that is why we moved here … that we have everything, yes, we age a bit, we still drive a car, but if you no longer have a car, you do not need to go anywhere here, you are already there, you have everything you want in place. (io18)

Although older people liked to have facilities nearby, most people considered mobility and travel opportunities to be essential as well. Being able to drive a car, having good bus connections or neighbours/family members nearby who can assist with transport, helped older people to remain in-place. They worried about having no shops nearby, whilst simultaneously explaining how they would manage. Often there was a ‘hidden’, emotional attachment to the place where people lived, like having lived there with their partner for many years. By using the word ‘hidden’ we wish to illustrate that although it is considered to be very important by people themselves, they do not share these attachments explicitly with other people. It is an attachment that becomes visible when they start talking about their history and the meaning of their home and neighbourhood. A woman aged 88 explained that she decided not to move to another place, as she valued the time she spent there together with her late husband, although she could move to a place closer to facilities and her children:

Those circumstances, that moving out, my children cannot do everything and then I need to bother them and they work … I am fine here. I will not get such an apartment [as this one]. Those are all smaller with small windows and we have beautiful windows, everything here is big. (io10)
Another woman aged 89 explained: ‘I say, I will remain home as long as possible. My husband is buried at the cemetery here; I could not leave him’ (i1). An important reason why people eventually move is to remain independent. An older woman aged over 75 appraised the convenience of her new apartment and added there should be more houses like hers:

I think they have to build more. For the older people ... something like this is lacking ... most people are bunched upon each other and would love to have another home, an apartment, those are unavailable ... From the moment I lived here I felt at home, because I loved to live here ... the environment and the house itself, beautiful ... everything is nearby. (io3)

In line with the ideas of care directors, older people also stressed the importance of feeling safe in their neighbourhood. They mentioned, for example, how they valued being able to choose a safe and protected route to the supermarket (there are sometimes private pathways between the apartment buildings and facilities) or having a security system. For instance, one woman aged over 75 explained: ‘I do have a security system you know, to push. In the beginning I did not wear it that often, but after a while I became a bit anxious’ (io8/9). Others explained how they felt safe because there were people in their environment who watched out for them. A couple, both aged 83, discussed their neighbourhood’s safety: The man said ‘we are not easily frightened you know, not at all’. The woman added ‘[there is] just a bit of drug dealing here’, then the man said ‘and otherwise, we can call [name of cousin]’ (io13). Several people experienced some criminality in their neighbourhood, mostly drug dealing, vandalism or trouble caused by younger people. Some people felt their freedom was limited and were afraid to walk in certain area, e.g. a couple discussed their neighbourhood. The woman aged 76 said: ‘Currently, it is reasonably quiet in this neighbourhood, it has been really bad here, people did not dare to go out anymore’. Her husband aged 77 explained it was: ‘because of those young people...’ and the woman added that it was the ‘nuisance of young people ... also in the park. A man who lives here went there, letting his dog out ... he had his umbrella with him and almost hit them ... they did push him down’ (io18). Some older people thought the same as a man aged 86, who said: ‘many older adults do not remember they have been young’ (io14). He tried to explain the so-called ‘Soccer-act’ that was implemented in his neighbourhood. It placed a ban on public group meetings and aimed to keep younger people off the streets.

Whether older people felt safe was affected by another element that resonated with an earlier distinguished factor, social cohesion. People felt protected by their neighbours or by having someone in the neighbourhood
they could rely on, like the couple’s cousin. A woman aged 80 imagined it was possible to stay in her own home, because all her neighbours watched out for her, she added:

Also because of the whole neighbourhood, by chance a cousin lives there, the neighbours always watch whether I have the window open in the morning … he has got a key, because I have got an additional lock on the door now. They said … to me that I needed to lock the door. So now I am used to lock[ing] the door … but he cannot get in otherwise, if something is wrong. Here is a roller shutter, there, well, nobody can get in … I have a phone inside, so I can always … that is all taken care of, yes, they do watch over me. (io4)

It was important for the older adults we interviewed that someone noticed when they were absent for a day. A couple remarked this was different to their former residence. The woman aged 76 said:

Here it is really, you sit together, and if you have not seen someone for a day or so, you will ask … There [in our former place] I did not see them [neighbours] for 14 days, but here, if you have not seen someone then you go out to ask, how are you, what is wrong? And I like that. (io18)

Her husband aged 77 added: ‘Here we watch out for each other’ (io18). People also emphasise how they are helped by their neighbours when facing practical problems. A woman aged 89 said that she was still mad because a local journalist wrote in her neighbourhood there was a lack of solidarity. She explained that she actually experienced the opposite:

If I did not have such good neighbours, I would no longer live here … for some months ago I had a leak in my basement, because of the shower … the drain was clogged. Two neighbours, him and him, have made a brand new drain, I did not have to hire anyone. (io1)

The fact that social cohesion is valued also becomes clear when people talk about things they miss. Many older adults think that younger people in their neighbourhood have become strangers, because ‘they are busy all day with their work and they have their own lives’. Older adults share feelings of nostalgia about a lost sense of community and no longer being surrounded by contemporaries. A woman aged 89 said:

We don’t have that many genuinely old people. Yes, we have enough of them, in a village there are plenty of old people, but many are dead also. But many, the new people, yes, you do not [have children any] longer … at school. You no longer know them, you have no contacts anymore … yes, it is [not] … as nice as it used to be … The old people sat outside at their door, but now, everything is inside. (io1)

Male respondents specifically mentioned the companionship they experienced between miners. A man aged 85, in a couple, stated: ‘if you are together, in the same neighbourhood, the connection will endure forever … that will not go away. But, so many strangers have come here, now the connection is
vanishing a bit’. His wife aged 80 added: ‘Yes, and all people are on their own here’. The man said: ‘Yes, what has been will be no more’ (io17).

Neighbourliness was an important topic in many interviews, during meetings observed and in focus groups, either because people enjoyed it, or because people experienced a lack of it. An older man aged 86 explained how he had lived in the city centre for a few years, together with his now deceased wife. They moved there together because of her health condition. He explained how he felt out-of-place there, especially after she passed away: ‘I came into the isolation, you understand?’ (io14) and how he missed the neighbourliness he had always experienced when he was living in another part of the city (where he lives again now): ‘My wife had passed away six months earlier, then the woman [a neighbour] asked: ‘How is your wife?’ (io14). Although his apartment in the city centre was a ‘beautiful apartment’, he missed being acknowledged by neighbours, and moved back to his original neighbourhood: ‘When I leave my home I just walk and come across familiar faces. I sit outside, there are benches and I sit on a bench sometimes with the people, chatting’ (io14). Even though he thought his neighbourhood consisted of ‘too many stones’ (the man explained that he thought that his neighbourhood consisted of too many (large) buildings, while there were only a few green spaces), he planned to remain there: ‘I love to live here and I said it, I know so many people, and I would not want to leave’ (io14).

Neighbourliness was not just associated with knowing and helping each other, it was related to the ‘familiarity’ of strangers, as in being known and acknowledged by other community members via your neighbours. In this region, it was considered normal to not pay visits to neighbours. They visited friends at home, but friendly neighbours were preferably met at what we named ‘private–public meeting-places’ In some of the apartment buildings there were meeting-places, in the corridor or on the balcony, where residents met and drank coffee together in the evening, or celebrated festivities like Christmas. A woman aged 78 described the daily ceremony at her place:

If the weather is normal we sit there with say five, six people in the afternoon, and we drink a cup of coffee and talk a bit. And in the evening we sit there, sometimes with ten, 12 people. And there is always one woman, she lives closest by, she makes the coffee. (io11)

Public places sometimes enabled similar meetings for people, for example, the mention of the game pétanque recurs in several interviews in different places [pétanque is a ball game played outdoors, it is also known as boules or bowls]. People liked how they could watch the game and talk with neighbours. For instance, a woman aged 82 said:
It is nice to live here, during the summer, we all sit outside there, with the whole club … they have made a pétanque terrain there. And in the afternoon, I always wait until a woman goes there, and then I also go, no sooner. (io2)

However, not everybody liked to only meet in public places; a couple talked about how they found it difficult to connect with neighbours in their current living-place. They moved there some years ago and they think it is a pity that nobody has accepted their invitation for coffee at their place. The woman aged 80 said: ‘Listen, in this neighbourhood, we do not relate with anyone’. The man aged 85 added: ‘we talk with everybody’. The woman agreed: ‘we talk with everybody, but no one visits us, but we don’t go anywhere either … At the beginning I have invited them to come over for a cup of coffee, but they did not do that. My husband already told you’. The man reiterated, ‘yes, come by one time … but nothing’ (io17). Another woman (aged 80) missed her former place as well; she felt acknowledged and surrounded by friendly people there:

I live here [sic] now for three years in September. But the people here are not that … everybody says that you need to watch out for each other and help each other, but they all just shut the door behind them and that’s it. (io12)

The appreciation of private–public meeting-places versus people missing friendships revealed that people experience places and neighbourliness differently. Some valued their privacy, while others felt unacknowledged when invitations for coffee were ignored or when it seemed hard to find friendship.

Conclusion

In this paper, we explored meanings of ageing-in-place, as they are articulated by developers of ‘lifecycle robust neighbourhoods’, and by older people who live in these neighbourhoods. We investigated how this concept of lifecycle robustness relates to more widely known concepts such as ageing-in-place and age-friendly places. We found that developers tried to construct places and make them meaningful by listing ‘enabling’ and ‘disabling’ elements, while older people as users did not construct, but experienced places, while living and ageing there. They often appreciated the elements that developers thought were important, but did not necessarily consider places with these characteristics desirable to age in. Although we unpacked understandings of rural and more urban areas, the differences between them did not influence the overall findings.

The idea of ‘lifecycle robust neighbourhoods’ resonates with ideals of age-friendly places to enable ageing-in-place. All these concepts embed a
similar ideal, which is to encourage and enable older people to remain in-place as long as possible, by improving the age-friendliness of people’s environment. Although the developers in our study talked about ‘lifecycle robust neighbourhoods’, their policy and narratives mainly focused on older people and the role of the home and neighbourhood; they struggled to define lifecycle robustness clearly. When they talked about age-friendly places and ageing-in-place policies, they envisioned neighbourhoods as mediators for remaining in-place. This implied they expected that places could be constructed and could act as ageing technologies. They felt enabling elements, such as services, facilities and suitable homes, needed to be available in these places and the introduction of a signalling function could stimulate social control and cohesion.

A signalling function refers to a specific officer (volunteer or professional) who is appointed as a ‘signaller’ to provide preventive care and help people remain in-place. The signaller’s role is to notice things when they go wrong, so that organisations can react to situations immediately. They presumed older people needed to be activated as participative citizens who could help each other, for instance by volunteering as the signalling function. Although demographic characteristics of a place did play a role in their ideas of place (referring to the socio-economical status, for instance), in general most developers viewed lifecycle robustness as a malleable concept, a malleability they expected to encourage further by adding this signalling function.

Developers shared expectations of how a signalling function could help construct a more participative neighbourhood, as this was supposed to play a preventive role, as well as provide support. Although the narratives of older adults do reveal a desire for increased social cohesion, in general they also valued their privacy. This became particularly clear in the way many looked for social interactions outside the privacy of their homes, often in what we distinguished as private–public meeting-places. The importance of the home in social interactions is individually determined. Means and Evans (2012) refer to how Despres (1991) argues that homes do not only reflect individual values and help develop social interactions, but also offer ‘a refuge from the outside world’. An added, constructed signalling function does not guarantee an increased independency or interaction and each individual will respond differently. Making someone responsible for signalling possible problems may seem like a good idea based on the premise that this enables ageing-in-place, but this ignores heterogeneity among older adults. In practice, some older adults shared how they felt more secure and at home when they knew they were being watched by neighbours, friends or relatives, while others explained that they preferred their private space to remain private.
The existence of private–public meeting-places illustrated how people can experience new places as meaningful, because of the new opportunities they provide to attach. The buildings in which people lived and also places outside, such as, pétanque terrains, acted as agents in creating meeting-places (cf. Gieryn 2002), although the existence of such places did not automatically create these interactions. This resonates with ideas of inclusion and exclusion, which can be found, for instance, in the work of Lamont and Molnár (2002), which basically say that places include some people while simultaneously excluding others. Although according to Peace, Holland and Kellaher (2011) and Rowles (1993), the function or meaning of place is more important than a particular, unique place, our findings show that many older adults attach to particular places because of their unique meaning. In exploring the importance of communities and wondering whether communities of interest can substitute communities of place, Means and Evans (2012) argued that interests cannot simply replace place, but need to exist beside place. This argument is confirmed by the way older men in our study talked about how they missed the companionship they experienced when working in the mines, which lasted for years after the mines were closed, as their co-workers did initially continue to live in the neighbourhood they shared, showing the importance of place for these communities.

Places are meaningful because they create interactions, but these interactions depend on the availability of space and on the interpretation of this space as a possible enabler of interactions. Our study reveals how differently the same place can be experienced by different people, how expectations vary, and how expectations of places do not necessarily guarantee spaces will be used and become meaningful places for social interactions. The private–public meeting-places older people talked about all already existed, and some people only use a place if they know they will not be the first user (e.g. the woman who waits for other pétanque spectators to arrive). Others expect to be invited to participate, and some do not consider these places to be a valid substitute for social interactions in private.

Local characteristics played a role in how developers gave meaning to the role of place in ‘making ageing-in-place’, but did not seem to hinder their visions of lifecycle robust places. As users of these ‘lifecycle robust neighbourhoods under development’, older people expressed their ideas about their own places differently. They shared stories about how they experience places. Some older people talked about how there should be more suitable homes and convenient places (shops, care and welfare facilities) in the environment, but their narratives mainly revealed how personal their experiences of places are. Each older person attached to specific places but experienced his or her place in their own way.
Place attachment is based on a personal connection, such as friendly neighbours, relatives, a (deceased) partner, or because of treasured past memories, often related to personal relationships. Their stories revealed an emotional attachment to place, real connections made via connections with other people. While some users had ideas about improvements, they often also added ‘you need to adjust’, because places are the way they are. Some will choose to remain in-place even if there are places available that they consider more suitable for their health, for instance because they are located close to informal care-givers, stores and services. In a similar way to that described by Joseph and Chalmers (1995), some people prefer ‘a lifetime of experience’ over the best suitable place for care or over what might be better, or over what in pragmatic approaches might be considered better or more realistic options (cf. Peace, Holland and Kellaher 2011). Sometimes new places offer new experiences, when people are, as Rowles (1993) described, able to use strategies to connect with other people and make themselves at home, other times new places confirm feelings of loss (‘the good old days’).

In constructing ‘lifecycle robust neighbourhoods’, developers seemed to have forgotten to ask what place means for the older people who lived there, which is interesting when considering that Gieryn (2000) argued how places are constructed through people’s interpretations. Older people attach to place for individual reasons, and when relaying their experiences they all referred to the three features summarised by Gieryn (2000) that make places meaningful: the geographic location of home and ‘things’ in the neighbourhood, the physicality of the place and they attached to place through experiences that held meaning for them. This attachment is affected sometimes by Joseph and Chalmers ‘lifetime of experience’, other times by experiences of other places in the past as well. Each individual attached meaning in his or her own way, although they are often convinced that they just ‘need to adapt’.

Places gave people feelings of being acknowledged or ignored, but also helped to protect their privateness (offering opportunities for meetings in safe and private environments). In fact, people experienced Gardner’s (2011) ‘third places’ within their own private spaces and environments. By creating opportunities to feel at home in places, it excluded other people, who longed for the realisation of another ideal of neighbourliness. One person can interpret a place as age-friendly, while their neighbour thinks it is not. Gieryn (2002) mentioned buildings play an important role when interpreting places as being meaningful; they can affect the way people feel in or out of place. The things people experience as important make these places meaningful and enable older people’s positive experiences of ageing-in-place. They often concentrate on the ‘ability to
live in one’s own home and community safely, independently and comfortably’ (Satariano, Scharlach and Lindeman 2014: 1374). Older people attach to places, but also cherish opportunities to move if desired. Conceptions of ‘lifelong communities’ differ and are based on individual experience, which makes developers’ ideas of one definable place based on a building with a few basic elements challenging. We therefore argue that they should genuinely listen to the experiences of older people living in these places, as the success of a concept such as lifecycle robustness is related to the experiences of its users.

This study is obviously situated in a particular policy–practice setting that we chose to examine, but as it demonstrates that situatedness and ideas about an ideal environment for ageing-in-place are intermingled with cultural aspects (e.g. illuminated by the ideas on private–public meetings), we would expect similar experiences in other places. During interviews, in observations and during focus groups, we experienced how interviewees found it difficult to concretise a visual conceptualisation of ageing-in-place, often only emphasising particular elements. They mentioned points of improvement, but found it difficult to demonstrate what makes a place good. Methods from visual sociology might help to overcome this obstruction, and therefore we organised a photovoice project as a follow-up to this study (Wang and Burris 1997). We presume photovoice will help to facilitate a conversation about lifecycle robust conceptualisations between developers and users. This seems necessary because we experienced how older adults’ voices and experiences were not properly heard by policy makers, directors and representatives of older people when developing a new ageing-in-place policy.

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After each quote a code is mentioned, with which we refer to the particular interview source: codes start with an i (interviews with developers) or io (for interviews with older people).

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