



## **Connectivity in the Elderly Years**

*A qualitative study on shopping centres as social meeting places for independently living elderly experiencing feelings of loneliness in the municipalities of Heusden and 's-Hertogenbosch.*

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## Preface

With pride and satisfaction, I present this master's thesis, the result of intensive study, research, and reflection. This thesis serves as the culmination of my master's program and embodies the conclusion of my 6.5 years of studying in 's-Hertogenbosch and Nijmegen.

The research, titled "**Connectivity in the Elderly Years: A Qualitative Study on Shopping Centres as Social Meeting Places for independently living elderly experiencing feelings of loneliness in the municipalities of Heusden and 's-Hertogenbosch,**" has emerged from deep curiosity and a growing awareness of the complexity of social interactions for the elderly in our society.

I am grateful for the guidance and support of my supervisor, Rianne van Melik, whose expertise and insights have been valuable throughout the entire research process. Additionally, I would like to express my thanks to Jeanne-Marie Cantineau and Alexander van Weert, who facilitated the collaboration and played an essential role in identifying suitable respondents for the interviews. I also want to thank the Trimbos Institute for enabling a rewarding internship period. Finally, I want to express my appreciation to my friends and family who have encouraged and supported me throughout this academic adventure.

Conducting this research with independently living elderly has not only opened new perspectives but has also contributed to a reduction in feelings of loneliness among the respondents during the interviews. I keep in touch with one respondent through volunteer work. Through this research, an additional dimension has emerged, emphasizing the relevance and urgency of this study. It is my sincere hope that I can continue to contribute to society in the ongoing fight against loneliness. Loneliness is a significant problem that we can all address together. May this research and my dedication contribute to awareness and action for a more inclusive society.

With sincere gratitude and much reading pleasure,

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## Abstract

### English

This study investigates the role of shopping centres as crucial meeting places for independently living elderly individuals experiencing feelings of loneliness in the vicinity of the municipalities of Heusden and 's-Hertogenbosch. The literature emphasizes the emerging societal importance of 'Ageing-in-Place,' where the goal is to promote independence and quality of life for the elderly while simultaneously reducing pressure on healthcare institutions. This underscores the significance and added value of this research on the complex relationships between social isolation, public spaces, and ageing. The results of ten narrative interviews with independently living elderly experiencing loneliness, selected in collaboration with the 'Alles voor Mekaar' foundation, indicate that shopping centres are valuable locations for informal conversations and social contacts. However, mobility issues prove to be a significant barrier for the elderly, resulting in a limitation of the universality of these spaces as meeting points. The findings emphasize the complexity of emotional loneliness, especially after the loss of life partners, and suggest that public spaces may not universally meet the intrinsic needs of a diverse group of the elderly. Additionally, mental health proves to play a crucial role in social engagement and well-being. Elderly with a positive mindset and a sense of humour show more willingness to engage in social contact, contributing to a decrease in loneliness. This research makes a significant contribution by providing insight into the value of mental health over physical health in the willingness of the elderly to participate in public spaces. Furthermore, the limitations include a difference in spatial context, recommending consideration of local contexts and cultural variations when interpreting findings. The recommendations advocate for policy changes for municipalities, focusing on proximity to assistance, neighbourhood inclusion, and mobility improvement through initiatives such as 'Alles voor Mekaar' and mobility programs. Digital platforms can be used to strengthen social ties and combat loneliness. It is recommended to focus on more studies on concrete interventions that have a positive impact on mental health, explore the effectiveness of neighbourhood inclusion, and identify potential barriers in organizations combating loneliness in the elderly. The goal is to take concrete steps towards a more inclusive and supportive environment, with a central focus on the mental health of the elderly and the reduction of loneliness in this demographic.

### Nederlands

Deze studie onderzoekt de rol van winkelcentra als cruciale ontmoetingsplaatsen voor zelfstandig wonende ouderen die gevoelens van eenzaamheid ervaren in de omgeving van de gemeente Heusden en 's-Hertogenbosch. De literatuur benadrukt het opkomende maatschappelijke belang van 'Ageing-in-Place', waarbij het streven is om de zelfstandigheid en de levenskwaliteit van leven voor ouderen te bevorderen, terwijl tegelijkertijd de druk op zorginstellingen wordt verminderd. Dit onderstreept het belang en de meerwaarde van dit onderzoek over de complexe relaties tussen sociaal isolement, openbare ruimten en veroudering. De resultaten van tien narratieve interviews met zelfstandig wonende ouderen met eenzaamheidsgevoelens, die in samenwerking met de stichting 'Alles voor Mekaar' zijn geselecteerd, geven aan dat winkelcentra waardevolle locaties zijn voor informele gesprekken en sociale contacten. Echter, mobiliteitsproblemen blijken een aanzienlijke barrière te vormen voor ouderen, wat resulteert in een beperking van de universaliteit van deze ruimtes als ontmoetingspunten. De bevindingen benadrukken de complexiteit van emotionele eenzaamheid, vooral na het verlies van levenspartners, en suggereren dat openbare ruimten mogelijk niet universeel voldoen aan de intrinsieke behoeften van een diverse groep ouderen. Daarnaast blijkt mentale gezondheid een cruciale rol te spelen bij sociale betrokkenheid en welzijn. Ouderen met een positieve mindset en gevoel voor humor tonen meer bereidheid tot sociaal contact, wat bijdraagt aan een afname van eenzaamheid. Dit onderzoek levert een belangrijke bijdrage door inzicht te bieden in de waarde van mentale gezondheid boven fysieke gezondheid bij de bereidheid van ouderen om deel te nemen aan openbare ruimten. Verder omvatten de beperkingen een verschil in ruimtelijke context, waarbij wordt aangeraden om de lokale contexten en culturele variaties in overweging te nemen bij het interpreteren van bevindingen. De aanbevelingen pleiten voor beleidswijzingen voor gemeenten,

gericht op de nabijheid van hulp, buurtinclusie en mobiliteitsverbetering door initiatieven als 'Alles voor Mekaar' en mobiliteitsprogramma's. Digitale platforms kunnen worden gebruikt om sociale banden te versterken en eenzaamheid tegen te gaan. Aanbevolen wordt om meer studies te richten op concrete interventies die een positieve invloed hebben op de mentale gezondheid, de effectiviteit van buurtinclusie te verkennen en potentiële barrières in organisaties die eenzaamheid bij ouderen bestrijden te identificeren. Het doel is om concrete stappen te zetten naar een inclusievere en ondersteunende omgeving, waarbij de mentale gezondheid van ouderen centraal staat en gevoelens van eenzaamheid in deze demografie worden verminderd.

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*"It's not easy, being so alone."* Gerard (88)

## Chapter 1. Introduction

*The introduction chapter will describe the problem of loneliness among the elderly to explain the importance of the study. In addition, the social relevance of the research, including the problems of ageing and the increasing number of people with feelings of loneliness, will be explained in detail. The scientific relevance of the research will also be explored, highlighting the importance of science and the knowledge gap.*

### 1.1 Loneliness in the Netherlands

Everyone feels lonely from time to time, but for most people, this is a temporary feeling. Unfortunately, for some people, loneliness is a long-term or permanent feeling. Loneliness is one of the biggest problems among the elderly. More than half of the Dutch population older than 65 say they feel lonely sometimes (CBS, 2022). However, although loneliness and social isolation are problems for all age groups, loneliness continues to increase the most within this population group due to the increasing ageing population in the Netherlands (Vonk et al., 2018). Loneliness can be defined as an emotional response that occurs when persons feel that their current social relationships do not meet their needs (Bower et al., 2023). Loneliness is a subjective and personal experience in which the person is not satisfied with existing relationships. This experience may stem from a lack of quality in certain social relationships or dissatisfaction with the amount of contact (Van Tilburg et al., 2007). Loneliness can be divided into three different forms: emotional loneliness, social loneliness, and existential loneliness. While emotional loneliness revolves around the lack of intimacy and a confident or emotionally close relationship, social loneliness revolves around the lack of various quality relationships and Existential loneliness occurs when there is a sense of abandonment or exclusion (Vonk et al., 2018). In general, a person always experiences a combination of these three variants of loneliness (Vonk et al., 2018)

Several factors contribute to increased loneliness levels among elderly people. Limited mobility, a shrinking social network, and a decline in physical and mental functioning influence this. Specifically, health loss and partner loss have a significant effect on increasing loneliness among the elderly (Van den Berg, 2017). Prolonged feelings of loneliness can have serious consequences, including depression, cognitive decline, and early death (Bower et al., 2023; Vonk et al., 2018). The impact of loneliness on the individual extends to social aspects, where it leads to reduced participation in society and a lower quality of life (Vonk et al., 2018). Social participation and inclusion are important for older people to remain healthy as they age (Kemperman et al., 2019). With an increasingly ageing population, policymakers strive to keep the elderly living independently at home for as long as possible, also known as ageing-in-place. Ageing-in-Place is commonly defined in the literature as a person's ability to continue living independently at home as they age, further referred to in this study as AIP (Fausset et al., 2011). In the pursuit of AIP, the dependence on the social network of the elderly grows (Kemperman et al., 2019). However, the threshold to participate in social activities may increase when loneliness is experienced. Lonely people often attribute the cause of being lonely to themselves and experience shame, which can lead to the idea that they are the only ones with these feelings (Hupkens & Reep, 2021).

The COVID-19 pandemic has underscored the prevalence of loneliness and the need for attention and contact among people of all ages. Research from the Central Bureau of Statistics (CBS) indicated that this crisis and its associated measures had significant consequences for the well-being of the elderly. During this period, 44% of individuals aged 65 and older reported feeling lonelier than before the pandemic (Hupkens & Reep, 2021). The social nature of the shopping centre became evident during this time. The supermarket not only served as a source of groceries but also as a meeting place for many, especially in these uncertain times. People could no longer meet elsewhere (Ministerie van Algemene Zaken, 2021). Even after the COVID-19 pandemic, the social aspect of the shopping centre remains crucial. Research by Van Melik and Pijpers (2017) has shown that older adults prefer meeting places that are not specifically designated for the elderly, such as nursing homes or care

landscapes. They seek diversity in interactions and age groups, avoiding being surrounded only by peers (Van Melik and Pijpers, 2017).

Social isolation due to loneliness brings with it serious harmful consequences, often resulting in a negative spiral in which the individual withdraws even further and thus becomes even more lonely (Vonk et al., 2018). Timely management of loneliness is crucial to prevent problems from accumulating and requiring more intensive care. This research aims to identify and emphasize the importance of valuable public meeting places for elderly people with feelings of loneliness, with specific attention to the shopping centre. It aims to contribute to a better understanding of the specific needs and preferences of elderly people with feelings of loneliness regarding meeting places, to alleviate the level of loneliness among the elderly.

## 1.2 Societal Relevance

The ageing population has a major impact on public health and healthcare. With the growth of the elderly, loneliness remains an increasing and persistent issue within this population. Widows are more vulnerable to social withdrawal and loneliness (Klinenberg, 2016). For AIP (Ageing-in-Place) to be successful, social participation and integration are crucial. This way, AIP can be ensured. In the Netherlands, AIP has become a central theme in healthcare policy. By 2040, it is expected that one in four Dutch citizens will be older than 65 years.

Partly because of this, de Wet Langdurige Zorg (WLZ) [long-term care act] has been passed since 2015, which states that people may only move into a retirement home if it is no longer possible to care for themselves and there is no possibility that this will change in the future (Ministerie van Algemene Zaken, 2023). The growing group of 65+ will demand a lot from the budgets, of the Netherlands as a social welfare state. Whereby AIP has become a mandatory concept in the Netherlands. An important part of 'successful' AIP is maintaining and securing one's independence for as long as possible (Fausset et al., 2011). The shift to new spaces of care reflects a broader societal trend where the emphasis is shifting from institutional care to more person-centred and community-based approaches. These policies are supported by several initiatives, including the development of accessible public spaces and the encouragement of social participation, for example by the foundation named 'Alles voor Mekaar'. This is a foundation in the Netherlands that works to promote involvement in society (personal communication, April 18, 2023). Through supporters [volunteers] people can meet or (again) find a place in society. The foundation aims to promote social cohesion on the one hand and social participation on the other (personal communication, April 18, 2023).

Nevertheless, efforts to promote independent living in old age remain an important pillar of Dutch care policy, focusing on creating a living environment that enables older people to lead active and good quality lives in their familiar surroundings. Environments play a crucial role in determining both our physical and mental capabilities throughout our lives. Optimizing the environments in which the elderly live not only provides physical support but also helps promote healthy adaptation to change and maintain their well-being (Kemperman et al., 2019). Social interactions and civic engagement are related to life satisfaction. Concerning the elderly, the presence of opportunities for social interaction in public spaces has been shown to have a positive impact on their life satisfaction. To effectively implement the concept of AIP, neighbourhoods must facilitate amenities that promote social interactions within so-called third places (Fausset et al., 2011). The concept of a 'third place' is generally defined as places where people from diverse backgrounds of age, gender, ethnicity, and class can come together, interact and learn from each other (Oldenburg, 2001). Third places can be considered as intermediary spaces between the first (the residential environment) and second places (the work environment) (Oldenburg, 1999). Optimizing social interactions within these third places can improve the quality of social interaction.

This study is of social relevance because the shopping centre serves as a potential third place to reduce the risk of isolation and feelings of loneliness among the elderly. Shopping centres can help promote social participation, respect, social inclusion, and communication and information among the elderly (Vonk et al., 2018). Because these areas are frequented by diverse audiences with different

backgrounds and interests, the likelihood of social interaction increases. The emotional well-being of the elderly can be boosted by the contacts made while visiting the shopping centre. A striking example of this is illustrated by the daily ritual of an elderly person leaving home at a set time to go shopping. This provides an opportunity to encounter familiar faces, which in turn creates opportunities for joyful interactions (Adams, 2021). The cashier at the grocery store becomes a consistent social contact that can reduce loneliness simply by showing interest in his daily life. These regular moments of interaction can create a sense of connection and value even in seemingly mundane encounters, even though they might appear as small, seemingly insignificant moments in time. This highlights the potential of such initiatives as valuable tools in promoting social well-being and combating loneliness, especially among the elderly. Municipalities should take a more active role in combating loneliness. By promoting interactions within public spaces, municipalities can exert significant influence. Therefore, this research will provide policy recommendations to municipalities, focusing on optimizing meeting places in the public space to combat loneliness. Finally, the study contributes to increasing social awareness about the problem of loneliness among the elderly and contributes to reducing the stigma that is still associated with loneliness.

### 1.3 Scientific Relevance

According to Klinenberg (2016), social infrastructures are necessary to strengthen public life. In addition, social infrastructures are also important for addressing some of the most pressing problems of contemporary urban life, preventing social isolation and creating places for all. When social infrastructure is optimal, social interaction in a neighbourhood and social activities are promoted. This helps reduce feelings of loneliness (Klinenberg, 2016). The social infrastructure in the city is formed by public spaces, where various facilities with social functions can be found, such as libraries and markets. In addition to being important facilities that people use, these are also places where people can meet and interact (Latham & Layton, 2019). These are places that are publicly accessible and therefore places where people meet (Latham & Layton, 2019). Social infrastructure in the city contributes to social interaction among older people.

A positive effect on the social support network of older people through public space has also been shown in a study by Lee and Tan (2019), so-called third places. Third place is a term coined by sociologist Ray Oldenburg and refers to places where people spend time between home ('first' place) and work ('second' place) (Oldenburg, 1999). 'Third places' are places where people exchange ideas, have fun, and build relationships. The shopping centre can be seen as a third place. Shopping is a leisure activity for many people, taking advantage of the functional character of the shopping centre. In addition to its functional character, the shopping also has a social character. The shopping centre serves as a meeting place for the neighbourhood and thus can play a role in improving neighbourhood inclusion and reducing loneliness (Agten, 2022)

Subsequently, third places can develop into 'safe havens'. Safe havens are spaces where people feel welcome and free to be themselves (Power & Bartlett, 2015). A safe haven can be filled differently by everyone; they are often unique and personally created spaces. Giving meaning and value to a space can make a person feel comfortable and less lonely. Increasing the number of social interactions can increase the likelihood of improving one's social network, thereby reducing feelings of loneliness. Loneliness occurs due to a lack of contact or when the quality of contact is less than desired. A safe haven can contribute positively to this.

In this chapter, substantial knowledge is presented regarding interactions in public spaces and the crucial role of social infrastructure. Furthermore, extensive research has been conducted on the contribution and effects of public spaces and social infrastructure on loneliness. However, limited attention has been given to the shopping centre as a specific form of meeting space for older individuals experiencing loneliness. While information is available regarding the shopping centre as a meeting place, existing literature primarily focuses on the American mall. The literature describes shopping centres as multipurpose centres with important public amenities for the elderly, including climate control, rest areas, minimum distance between functions and barrier-free design (Graham et

al., 1991). Hereby there is less emphasis on the outdoor shopping centre. Therefore, this research provides scientific relevance by examining the combination of these concepts: the shopping centre as a meeting place and the experiences of older individuals with feelings of loneliness.

#### 1.4 Research Question and Structure of the Thesis

The added value of this research on meaningful meeting places for the lonely elderly is multifaceted. Firstly, this study can help raise societal awareness about the issue of loneliness among the elderly and contribute to reducing the stigma still associated with loneliness. By giving a voice to the elderly experiencing loneliness, making their perspectives and experiences visible. Secondly, the research can contribute to the development of interventions that better align with the needs of the elderly. Lastly, the research can involve the elderly in the research process, promoting a sense of connection and empowerment. This can help reduce feelings of isolation and loneliness, ultimately improving the mental health of the elderly.

Loneliness among the elderly is a growing societal problem, and this research seeks to contribute by providing insights into social interactions within public spaces. Shopping centre areas can be utilized to facilitate social interactions among the elderly, potentially influencing the reduction of feelings of loneliness. This research aims to survey social interactions among elderly people in shopping centre areas to feelings of loneliness among elderly people, with the research question:

*To what extent does **the shopping centre serve as an essential meeting place** for independently living elderly people with **feelings of loneliness**, in the municipality of 's-Hertogenbosch and the municipality of Heusden?*

Within this study, the description of a shopping centre is defined as *a centre consisting of stores, usually set up to provide surrounding residential areas with convenience stores (Guy, 1998). These centres often include a supermarket, hypermarket, and some small retail units, and are known as local centres or neighbourhood centres.*

Through qualitative research, the main question is answered. Based on ten narrative interviews with elderly people living independently with feelings of loneliness, the main question is answered. The respondents were selected in cooperation with the foundation 'Alles voor Mekaar'. This foundation aims to promote social cohesion on the one hand and social participation on the other (personal communication, April 18, 2023).

The answering of the research question will take place through the exploration of the four consecutive chapters of this study. In the following chapter, Chapter 2, an in-depth analysis will be conducted on the existing literature and relevant concepts to support the research question. Subsequently, in Chapter 3, the methodology of this study will be further elucidated. The findings of the research will be presented in Chapter 4. Finally, in Chapter 5, the conclusions, limitations, and recommendations for praxis and further research will be discussed.

*"On the inside, I am completely broken, I'm living second by second."* William (59)

## Chapter 2. Theorizing Informal Contact Among Lonely Elderly

*In this chapter, relevant theoretical perspectives are discussed concerning the various concepts central to the research. The discussion of the theory is oriented toward the research question: To what extent does **the shopping centre serve as an essential meeting place** for independently living elderly people with **feelings of loneliness**, in the municipality of 's-Hertogenbosch and the municipality of Heusden? Firstly, in section 2.1, a detailed explanation of **feelings of loneliness** is provided, establishing the significance of loneliness within the context of this research. Subsequently, in section 2.2, the concept of **the shopping centre as a meeting place** is elucidated, encompassing the various forms of social interactions that can take place in the public space. Additionally, the importance of mobility among the elderly is highlighted in section 2.3. Finally, the conceptual framework is established based on the theoretical framework in section 2.4.*

### 2.1 Feelings of Loneliness

Loneliness is a common feeling that can affect anyone and is part of life (Machielse, 2011). It represents a personal and subjective feeling that can be expressed differently (Fokkema & Van Tilburg, 2006). Since the 1990s, the Netherlands has employed the 'De Jong Gierveld scale' to quantify loneliness and is therefore used in this research. The 'De Jong Gierveld scale' defines loneliness as "*the consequence of the perceived deficit in the relational functions of social contacts*" (Machielse np, 2011), denoting an individual's subjective sense of insufficient social connectedness. It is crucial to distinguish loneliness from mere solitude; individuals can be alone without experiencing loneliness if their existing relationships fulfil their social needs (Coyle & Dugan, 2012). Conversely, a substantial social network does not guarantee immunity to loneliness, as the quality of relationships may not meet individuals' needs (Cotterell et al., 2018). Thus, socialisation does not necessarily preclude loneliness, and vice versa (Cotterell et al., 2018). Three types of loneliness can be distinguished.

- **Emotional loneliness:** Emotional loneliness results from the absence of an intimate attachment relationship, for example, with parents, a partner, or a close friend. Because other relationships cannot compensate for this lack, a person with many social contacts may still experience emotional loneliness (Cotterell et al, 2018; Machielse, 2011).
- **Social loneliness:** Social loneliness occurs due to a lack of social integration or involvement in a wider network with friends, neighbours, and colleagues. The presence of a partner or other intimate relationship cannot eliminate this feeling (Cotterell et al, 2018; Machielse, 2011).
- **Existential loneliness:** Existential loneliness can occur when the life that a person has led up to that point is threatened, for example, by a serious illness, or by circumstances that cause a person to be thrown back on themselves. It is the experience of being fundamentally separated from others, or alienated from oneself because connection to one's deepest core has been disrupted. Existential loneliness can also be a feeling of abandonment or exclusion that runs like a thread through a person's life (Cotterell et al, 2018; Machielse, 2011).

At the core of loneliness lies a deficiency in connectedness and relationships. When this deficit becomes chronic, permeating an individual's life, it contributes to physical and mental health issues and a sense of meaninglessness (Machielse, 2011). Loneliness is also associated with an elevated risk of depression, anxiety, dementia, and other health complications. Additionally, it can result in diminished cognitive abilities and a compromised immune system (Cotterell et al., 2018).

Social isolation is a term closely related to loneliness and refers to an objective situation in which meaningful relationships and interactions with family members, friends or the broader community are absent (Coyle & Dugan, 2012). Therefore, the degree of social isolation can be assessed using data on the frequency and duration of such contacts (Cotterell et al., 2018).

### 2.1.1 Ageing in Place and Loneliness Among the Elderly

As discussed in Chapter 1, due to double ageing, there is a growing demand for care and support for the elderly. Double ageing refers to the increasing growth of the elderly population, which also reaches a higher average age than in previous generations (Uitvoeringsinstituut Werknemersverzekeringen [(UWV)], 2023). AIP (Ageing-in-Place) is seen to reduce the burden on long-term care facilities, such as nursing homes and assisted living facilities, and improve access to care and support for the elderly (Fausset et al., 2011). AIP is becoming an increasingly popular approach to promote independence and improve the quality of life for the elderly.

Studies indicate that AIP can have dual implications as both a remedy and a contributor to loneliness in the elderly (Kemperman et al., 2019; Jing et al., 2016; Sixsmith et al., 2014). On one hand, AIP serves as a means for the elderly to sustain their social connections and support networks within their communities, thereby mitigating the risk of loneliness and social isolation. The sense of accomplishment derived from maintaining good health and staying in their own homes acts as a motivating factor for the elderly (Sixsmith et al., 2014). By residing in familiar environments, the elderly can actively participate in social activities, engage with neighbours and friends, and adhere to established routines (Sixsmith et al., 2014).

On the other hand, ageing in one's own home may lead to an increased sense of loneliness and social isolation. This could be attributed to limitations in mobility or a lack of access to social relationships and support services (Cotterell et al., 2018). As individuals age, a reduction in the size of their social network becomes a natural part of life, with various life course changes having notable consequences for the elderly's social connections (Vonk et al., 2018). The responsibility for maintaining social networks lies increasingly on the elderly, presenting challenges in their later years (Vonk et al., 2018).

An ideal living situation for the elderly extends beyond the physical confines of their homes, emphasizing the importance of the neighbourhood, environment, city, and beyond. General social contact and interactions within the community play a crucial role in the health and well-being of the elderly (Douma et al., 2015). It is imperative to ensure that the adoption of AIP is accompanied by robust support services and resources. These should be designed to aid the elderly in sustaining their social relationships, preventing loneliness, and fostering overall health and well-being. Considering this, this research aims to underscore the relevance and value of public spaces, including overlooked areas like shopping centres, in addressing the needs of lonely elderly individuals.

## 2.2 The Shopping Centre as an Essential Meeting Place

The significance of public spaces in addressing elderly loneliness is underscored by research emphasizing the complex connections between social isolation, public spaces, ageing, and the necessity for effective strategies to promote social connections and well-being (Bergefurt et al., 2019; Bower et al., 2023; Kemperman et al., 2019). Notably, public spaces can contribute to social engagement and connection, particularly for elderly individuals living alone or with limited social networks. Parks, community centres, markets, and libraries have been identified as spaces offering opportunities for social interaction, physical activity, and cultural engagement, thereby reducing feelings of loneliness and enhancing the well-being of the elderly (Van Melik & Pijpers, 2017; Jing et al., 2019; Watson, 2009; Douma et al., 2015; Sturge et al., 2020; Van den Berg et al., 2016; Weijs-Perrée et al., 2015; Lane et al., 2020).

Nevertheless, certain spaces, notably shopping centres, have garnered comparatively less attention from policymakers. Despite their evident social function, shopping centres remain undervalued. Research into shopping behaviour among the elderly has illuminated the substantial social dimension of shopping for the retired elderly, often characterized in the literature as 'malingering' (Mason & Smith, 1974; Brown et al., 1986; Aceska & Heer, 2019; Graham et al., 1991; Watson, 2009; Kim et al., 2005; Noon & Ayalon, 2018).

Besides the utilitarian purpose of acquiring goods, shopping centres play a crucial role in enhancing emotional satisfaction among the elderly (Mason & Smith, 1974). Retired or single elderly

individuals actively use shopping centres as a leisure activity, providing a space to meet others and engage in active socialization (Graham et al., 1991). Retired and home-dwelling elderly constitute a significant portion of shopping centre visitors, particularly widows, never-married, and divorced elderly, with a preference for weekends and mornings (Graham et al., 1991). Limited financial resources for leisure activities among the elderly make shopping centres an ideal choice for spending time, as proposed by Graham et al. (1991).

Brown et al. (1986) confirm that shopping is a significant social activity for the retired elderly. Various forms of shopping activities, including visiting shops, enjoying coffee, and socializing, offer opportunities for engaging with society (Sturge et al., 2021). Shopping provides avenues for social interaction and connection, involving engagement with store personnel and fellow shoppers, fostering a sense of community (Sturge et al., 2021). These small, spontaneous interactions are an essential part of the shopping centre experience (Aceska & Heer, 2019). Shared interests, particularly in the context of shopping, give rise to social encounters among shoppers, creating spaces for brief but meaningful connections enriched with short verbal exchanges (Aceska & Heer, 2019).

From research by Kim et al. (2005) findings, four dimensions of shopping motivation can be distinguished as to why shopping serves as a suitable leisure activity for the elderly. Firstly, the elderly derive satisfaction from the aesthetic aspects of the shopping centre and engage in consumption driven by experiential factors. Secondly, the shopping centre serves as a means of escaping routine and alleviating boredom for older consumers. Thirdly, it functions as a venue for the exploration of novel products or stores. Lastly, the shopping centre facilitates social connectedness through communication and social interaction with others. This can be summarized as service motivation, distraction motivation, economic motivation, and social motivation.

These findings suggest that shopping as a leisure activity among the elderly refers to shopping for pleasure and enjoyment, not just out of necessity (Mason & Smith, 1974). Furthermore, these findings also indicate that this demographic is not only focused on consuming goods or services but also on obtaining emotional satisfaction, such as enjoying the atmosphere, outdoor social interaction, and people-watching (Kim et al., 2005; Watson, 2009). Also, the elderly value quiet and dining areas in the shopping centre. Furthermore, older consumers tend to spend more money when visiting shopping centres for consumption purposes, whether for food or the purchase of goods and/or services (Kim et al., 2005). The preference for shopping centre branches for purchasing or consuming services, rather than individual stores or branches, aligns with the tendency of older consumers to interact more with store staff or other consumers to alleviate feelings of loneliness (Kim et al., 2005).

Research by Lane et al. (2020) confirms that the visit frequency of the elderly to service-oriented facilities is higher than that of other visitors. The elderly visit the market more often to establish social contacts with other visitors or sellers. Like shopping centres, marketplaces can be described as places in the 'heart of the community' with a social function for the elderly. Additionally, the shopping centre does not label the elderly based on age, unlike care institutions where age associations are more easily made (Watson, 2009). The shopping centre has more vibrancy due to the presence of younger people in the public space and surroundings (Staeheli & Mitchell, 2006). Care facilities are not associated with recreational or relaxation spaces, as is the case with shopping trips (Van Melik & Pijpers, 2017). In summary, for the elderly, the communicative role and social dimension of a shopping centre play a significant role.

As more elderly continue to live at home and age, organizations will need to adapt their social and built environments to become ageing-friendly. There has been extensive research on the potential of public spaces to promote the physical health of the elderly (Van den Berg et al., 2016; Weijs-Perrée et al., 2015;). In contrast, this research focuses on the potential of public spaces for improving the mental health of the elderly through social purposes, with a focus on shopping centres. In the broader literature the term denoted as a 'shopping centre' typically refers to a sizable standalone shopping facility not integrated into an existing central area. The standard criterion for such centres often entails a minimum size of 500,000 m<sup>2</sup> and consists of multiple levels (Guy, 1998). However, it is crucial to underscore that this definition does not precisely align with the specific contextual usage within the Netherlands.

Within the scope of this research, the characterization of a 'focused centre' drawn from the general literature is applied to the context of a shopping centre in the Netherlands, as proposed by Guy (1998). This delineation resonates most accurately with the Dutch context and the specific methodology employed in this study. In this context, a 'focused centre' is elucidated as *a facility comprising stores, typically organized to cater to the retail needs of surrounding residential areas. These centres often encompass a supermarket, hypermarket, and various small retail units, commonly identified as local or neighbourhood centres.*

### 2.2.1 Different Forms of Social Interaction in Public Space

Elderly individuals seek alternative 'spaces of care' to be part of their local community, with a preference for commercial meeting places (Pijpers and Van Melik, 2017). These places serve as important hubs where people regularly gather for social interaction and to feel connected with others. Such places foster a sense of inclusivity, significance, and meaningfulness (Noon & Ayalon, 2018). When individuals feel welcomed and free to express themselves, a third place can transform into a 'safe haven' (Power & Bartlett, 2015). The practice of users creating such 'safe havens' in local neighbourhoods proves to be a significant aspect for the elderly experiencing feelings of loneliness (Power & Bartlett, 2015). Consequently, the local shopping centre becomes an integral part of their daily routine, serving not only as a venue for shopping but also as a space for social engagements (Van Melik & Pijpers, 2017).

In a time when formal care spaces are diminishing, civic and advocacy work is taking on an increasingly prominent role in caring for the elderly. To alleviate the pressure on formal care and enable the elderly to live at home longer, it is essential to make more use of alternative 'spaces of care' (Tronto, 2013). By conceptualizing care as an activity, a form of exercise, the possibility remains open for other manifestations of care. The shopping centre can be considered an alternative 'space of care.' Tronto (2013) defines care as follows: *"On the most general level, we suggest that caring be viewed as a species activity that includes everything that we do to maintain, continue, and repair our 'world' so that we can live in it as well as possible. That world includes our bodies, ourselves, and our environment, all of which we seek to interweave in a complex, life-sustaining web"* (Tronto 1993, p. 103). The communicative role and social dimension of a shopping centre can be seen as a form of care for the elderly with feelings of loneliness. Nevertheless, it is crucial to acknowledge that diverse forms of encounters are conceivable within public spaces.

Firstly, Lofland (1998, pp. 53-67) introduces a categorization of three types of social bonds that exist within the public domain. These include fleeting relationships, referring to passing interactions without long-term significance; quasi-primary relationships, which are temporary and imbued with emotional sentiment; and intimate secondary relationships, based on emotional attachment and tend to endure over time. Additionally, Lofland (1998) emphasizes the concept of 'person-to-place connections', where visited locations acquire cultural meaning for observers, leading to a sense of connection both to the physical space and to other individuals. Lofland (1998) argues that interactions in public spaces can have significant emotional resonance, and even fleeting social bonds can evolve into meaningful relationships based on a shared connection to the public space.

Secondly, Stillerman (2006) confirms the development of meaningful social relationships in flea markets, street markets, and shopping centres. These can range from brief conversations to long-lasting, emotionally charged, trust-based bonds. Furthermore, Peterson (2023) suggests that the city needs 'connecting spaces' to facilitate various forms of contact in the city, where ideas, knowledge, and experiences can be shared to enhance and expand the sense of group identity and solidarity. This can be achieved through light and fleeting contact, from which more personal, intimate, and profound connections can emerge.

Lastly, an important finding emphasizes the significance of superficial contact in the environment, as described by Coupland (2003) as 'small talk.' According to Coupland (2003), small talk refers to casual and often superficial conversations people have during social interactions. Small talk

usually revolves around topics like the weather, current events, and other non-personal subjects. Coupland (2003) argues that small talk is an essential part of social interaction, especially in situations where people do not know each other well or have shared few experiences. It is often used to initiate or maintain social relationships rather than convey deep or meaningful information. Small talk can serve various social functions, such as building rapport, expressing solidarity, managing social distance, and conveying important social information. Small talk is essential for individuals to create a sense of connection and community (Coupland, 2003). It can help create a sense of shared experience and may be particularly important in situations where people feel isolated or disconnected from others. Through small talk, people can gauge the social norms and expectations of a particular environment and adjust their behaviour accordingly. Moreover, small talk can be used to indicate social status and convey important information about one's identity and social role (Coupland, 2003).

By being in public spaces, city residents give meaning to the space and shape it as 'lived space'. Lefebvre (1996) describes 'lived space' as an ongoing process, a production in which the user plays a key role. Public space plays a crucial role in facilitating social interactions and promoting social relationships because it provides a platform for people from different backgrounds to come together, engage in activities, and form connections that enhance social capital and promote social cohesion. These 'connecting spaces' are important for offering the opportunity to meet and connect with others, fostering community solidarity (Peterson, 2023). This perspective aligns with the concept of the 'place ballet,' introduced by Jane Jacobs (2015), which denotes a distinctive differentiation in the meaning of encounters, for specific social groups and subgroups. Meeting periodically at the same place and time significantly contributes to cultivating a strong and deep sense of place (Buttimer and Seamon, 2015). Encounters within the 'place ballet' are characterized by fixed routines and familiar faces, yet the potential for new individuals to become part of these routines over time is acknowledged. Strong social cohesion has a positive effect on social interaction among residents (Weijs-Perrée et al., 2015). When people live in a neighbourhood with social cohesion, there will also be increased social interaction in that neighbourhood. Noon and Ayalon (2018) confirm the importance of public spaces in the lives of the elderly. Noon and Ayalon (2018) describe public space as an extension of one's home and serving a social purpose for the elderly. This highlights the necessity of identifying variations in space usage and emphasizes the need to create places that facilitate such evolving encounters (Van Eck & Pijpers, 2017).

Nevertheless, literature on encounters also emphasizes the negative effects of brief encounters. Encounters are often chaotic, ambiguous, and open-ended, with unpredictable outcomes (Wilson 2016). Encounters are always fraught with issues of non-connectivity, and exclusion, underscoring the complexity of many encounters, which carry the potential for both (dis)connection, (dis)identification, (non)belonging, and inclusions and exclusions. This is where the concept of micro-connections can be important, the connections people forge in everyday spaces such as public libraries, and urban spaces, and community solidarity can strengthen. Peterson (2023) defines micro-connections as 'the multiple and iterative points of connection that people nurture in informal settings and their ability to translate into broader notions of recognition, belonging, hospitality, comfort, and multicultural exchange in society' (p 67).

In an interview addressing the subject of loneliness, Van Tilburg underscores that the provision of a meeting place on a structural basis alone is insufficient to effectively address the issue of loneliness (Ruijs, 2019). Breaking the negative cycle and building the confidence to establish long-lasting social relationships is extremely difficult. It is especially challenging for lonely elderly individuals to initiate conversations because they may feel insecure and anxious. According to Van Tilburg, it is important to facilitate meeting places with connectors, people who can assist in building sustainable relationships (Ruijs, 2019). Guidance is needed to start building a social network.

## 2.3 Mobility

Based on research by Peace, it has been found that mobility and movement are crucial to ensure the engagement and access of the elderly to the shopping centre (2013). The proximity of shops plays a crucial role in influencing the mobility and flexibility of older individuals, thereby promoting social encounters (Peace, 2013). Third places (Oldenburg, 2001), especially those within walking distance of the residence, fulfil a crucial social function for the elderly, as emphasized by Lane et al. (2020). These spaces contribute to the maintenance and promotion of social functions. According to Van Melik and Pijpers (2017), public space facilitates encounters with strangers, individuals outside the circle of family and close friends, and within the domain of diverse and complex social groups.

## 2.4 Conceptual Framework

In Figure 2.1, the discussed theory of this chapter is visually presented. This conceptual framework illustrates the relationship of the discussed theory based on the research question: *To what extent does the shopping centre serve as an essential meeting place for independently living elderly people with feelings of loneliness, in the municipality of 's-Hertogenbosch and the municipality of Heusden?* As shown in the diagram, these concepts are also reflected in the conceptual framework. Based on the literature, the relationship between these components is posited as follows. The independent variable 'Shopping centre as a meeting place' influences the dependent variable 'feelings of loneliness' through the moderating variables 'Different forms of social interaction' and 'Mobility'. Within this study, it is expected that elderly individuals can still access these meeting places. When the elderly use the shopping centre as a meeting place, this has a positive effect on the level of loneliness among the elderly. 'Ageing-in-place' constitutes an overarching element and represents independently living elderly individuals in this study, as all elderly in this study reside independently at home. Finally, this study explores the potential of everyday meeting places, especially shopping centres, to promote the emergence of 'fleeting moments' and thereby imbue more meaning into everyday encounters in public spaces for the elderly with feelings of loneliness.

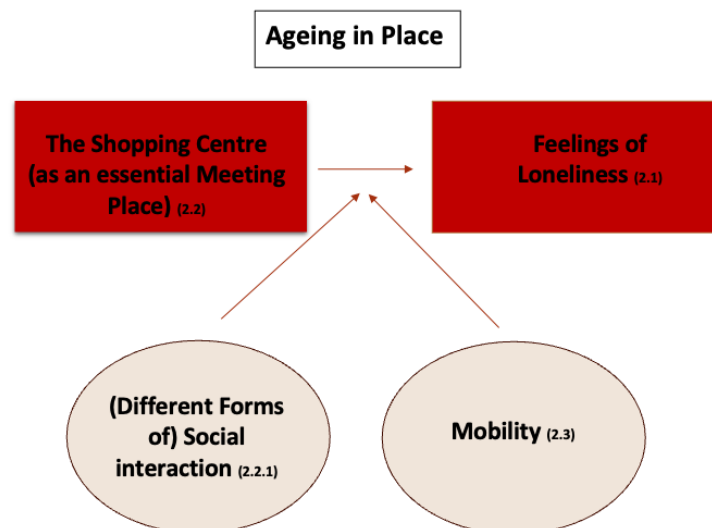


Figure 2.1: Conceptual framework based on the literature review.

*"Otherwise, I wouldn't be here now."* William (59)

## Chapter 3. Methodology

This chapter elaborates on the methodology of the thesis. First, section 3.1 explains the research design, consisting of ten in-depth interviews with elderly people with feelings of loneliness and one in-depth interview took place with care providers. Then, section 3.2 explains the research area and the choice of gatekeeper within this study. Finally, section 3.3 explains the method of analysis.

### 3.1 Research Design

This research aims to capture the identification and importance of valuable public meeting places for elderly people with loneliness issues, with a specific focus on the shopping centre. Narrative interviews were used to answer this question. A total of eleven interviews were conducted, ten of which focused on the elderly (Table 3.1)<sup>12</sup>, and one in-depth interview took place with care providers. The selection of respondents was facilitated by the foundation ‘Alles voor Mekaar’. The analysis of the obtained data contributes to a better understanding of the specific needs and preferences of elderly people with feelings of loneliness regarding meeting places.

To identify valuable public meeting places for elderly people with feelings of loneliness, data was collected to answer the main question. Due to the open-ended nature of the research question, a qualitative study was chosen, with ten in-depth (narrative) interviews. According to Baarda (2009), qualitative research involves the description and interpretation of problems in situations, events, and persons using qualitative data, such as perceptions, experiences, and meaning. The interviews were conducted using an interview guide (see Appendix 1). The specific focus of this study is on the elderly as the target group for data collection, with an age of +/- 60 years and older. Within this target group, no distinction was made based on age to get the most accurate and differentiated picture of the target group. The selection of the elderly was based on specific criteria. Namely, these elderly were selected based on age, degree of loneliness and form of living. A group of respondents was assembled in collaboration with a gatekeeper. The foundation ‘Alles voor Mekaar’ acts as the gatekeeper within this study, which will be explained further in section 3.2. Given the foundation's extensive experience with loneliness, it can be assumed that this was done carefully and accurately and that the selected group of elderly people represents a degree of loneliness. This resulted in a total of ten interviews (Table 3.1). Whereby efforts were made to achieve saturation within the data collection. This means that the process of data collection was continued until no new information was obtained and the foundation did not approach and present new respondents to the researcher. The interviews were conducted from May 2023 to June 2023.

Table 3.1: Data collected by narrative interviews.

Name	Location	Age	Gender	Household help	Children	Mobility	Health
Milly	MoHB <sup>1</sup>	69	F	Bi-weekly	3 (little contact)	Mainly walking	Discomfort from various disabilities
William	MoH <sup>2</sup>	59	M	X	1 (No contact)	Car	Poor condition due to smoking addiction
Gerard	MoHB	88	M	Showering 5 days a week	2 (weekly contact)	Mobility scooter	Abdominal tumor and requested euthanasia
Nick	MoH	60	M	x	0	Mobility scooter	Amputated left leg
Katja	MoH	72	F	Weekly	2 (Living in Brazil)	Car	Herniated disc in her back and neck
Rinus	MoHB	72	M	Twice a week	2 (weekly contact)	Mobility scooter	Swollen feet
Lambert	MoH	79	M	x	3 (no contact)	Mobility scooter	Cerebral infarction, walking is difficult
Gijs	MoHB	62	M	Ambulatory care, weekly	0	Scooter	Ptsd and a minor brain abnormality
Riet	MoHB	89	F	Twice a week	2 (weekly contact)	Walker	Shoulder injury
Hillary	MoHB	89	F	Weekly	3 (little contact)	Moped car/Walker	Arthritis, osteoarthritis and gout

<sup>1</sup> Municipality of ‘s-Hertogenbosch

<sup>2</sup> Municipality of Heusden

### 3.1.1. Narrative interviews

Loneliness is still a taboo subject; therefore, it was chosen to conduct the interviews in the form of narrative interviews. Narrative interviews provide an opportunity for the elderly to speak freely about all aspects of their daily lives and environment (Anderson & Kirkpatrick, 2015). Through narrative interviews, the aim was to describe and interpret the perceptions and experiences of the elderly in detail, to gain insight into their needs regarding public space. The shopping centre was the focus of these interviews, as a public space, with other public spaces of value to the elderly also discussed. This provides further insight into the general needs of the elderly in other meeting places.

Narrative interviewing is a form of unstructured interviewing and is often used to capture respondents' own experiences or life stories (Anderson & Kirkpatrick, 2015). For the results, it was important to keep the stories as authentic and spontaneous as possible. Asking open-ended questions and allowing the respondent to speak as much as possible allowed for more depth in the data collection and maintained the authenticity of the study. Where necessary, direction was taken during the interview to obtain the appropriate and rich data for the study. Furthermore, there was also the possibility in this form of interviewing to deviate from the question and thus gather additional information. In addition, care was taken to adopt a more dialogical approach to reduce the power differential between the researcher and the researched (Russell, 1999). Additionally, the conversation was kept going without the researcher bringing up new themes or continuing to ask questions to provide insight into his or her frame of meaning. Thus, insight into the experiences of older people and the valuable meeting places was gained in a non-committal and accessible way. This assumed that each choice the respondent made in his or her telling (what was told, how it was done, etc.) was not accidental, but worked toward what he or she wanted to convey.

## 3.2 'Alles voor Mekaar' as Gatekeeper [Together for each other]

### 3.2.1 The Choice for a Gatekeeper

Besides the existing taboo surrounding loneliness, the target group of elderly people with feelings of loneliness proves difficult to track in public spaces. Because of this difficulty, it was decided to collaborate with an organization as a gatekeeper. This organization acts as a gateway to the target group, and the collaboration facilitates understanding and accessing the experiences and needs of this vulnerable group of elderly people.

There is a difference in the extent to which these initiatives work with the elderly with loneliness. The initiatives focus on individual interventions or broader community approaches. The foundation 'Alles voor Mekaar' was chosen for this study. The choice of this foundation was prompted by the fact that this organization operates within the living environment of the vulnerable target group, namely behind the front door of their residential. As a result, the foundation maintains close and personal contact with the elderly who suffer from feelings of loneliness. Through this proximity and personal involvement, the foundation develops a deep understanding of the elderly. The foundation 'Alles voor Mekaar' focuses on personal contact moments and individual social support through supporters [volunteers], whereas other initiatives focus on broader interventions, such as creating meeting places, organizing community events, and promoting social cohesion. The name of the foundation 'Alles voor Mekaar' is translated as together for each other. Which is representative of helping another in the neighbourhood through small chores to increase cohesion among neighbourhood residents. On April 18, 2023, a semi-structured interview was conducted with the foundation 'Alles voor Mekaar,' providing insight into the foundation's origins, goals, and activities. Alexander van Weert and Jeanne-Marie Cantineau, the current owners of the foundation, were interviewed during this session. The interview guide of this interview can be found in Appendix 2.

### 3.2.2 Alles voor Mekaar' [Together for each other]

'Alles voor Mekaar' has been active within the Municipality of Heusden since May 2018. In 2018, Alexander van Weert started the foundation 'Alles voor Mekaar' to put together neighbourhood inclusion and combat social isolation and loneliness among the elderly. The idea is that help from the immediate neighbourhood will enable the elderly to live comfortably and responsibly at home for longer, also known as AIP (Ageing-in-Place). After all, as the saying goes; *"A good neighbour is worth more than a far friend"* (A. van Weert, personal communication, April 18, 2023). Over the years, 300 lasting connections have already been made between vulnerable elderly people and supporters [volunteers]. Of these, about 75% experience a degree of loneliness, with the remainder requiring more contact (Personal communication, April 18, 2023). The foundation focuses on establishing personal and individual connections, pairing volunteers [supporters] with elderly people experiencing loneliness. Offering and facilitating meetings is not enough to reduce loneliness (A. van Weert, personal communication, April 18, 2023). The foundation focuses on building lasting contacts, where trust and continuity are crucial to providing effective help to the elderly and satisfaction. During a meeting with the foundation on April 18, 2023, it was emphasized that everything starts with sincere attention because it is essential for the people involved.

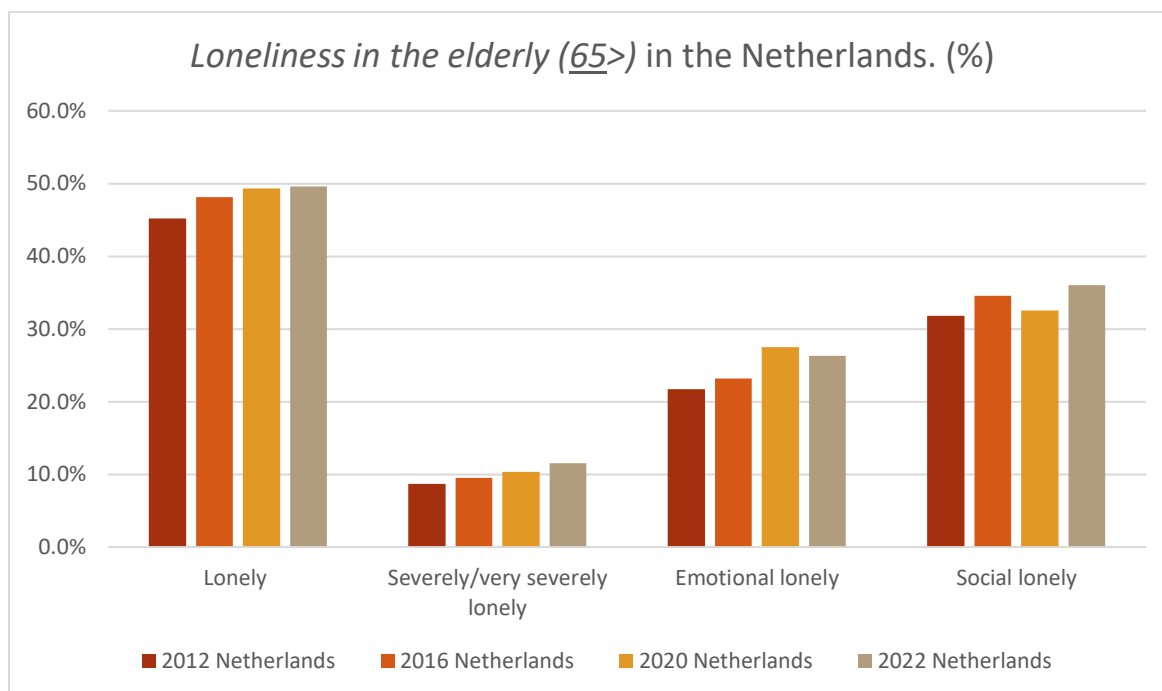
To reach the vulnerable elderly, the Foundation 'Alles voor Mekaar' works with local organizations. These include institutions that effectively connect with the community or reach individuals behind the front door, such as neighbourhood nurses/home care, supermarkets, or convenience stores. Sustainability and continuity are important to the foundation to build trust with the elderly. The goal is to get these elderly people, to whatever degree, actively participating in society again. No strict time limit is set here, so the support can be continued as long as needed. This unique working method of the foundation, with its core values of approachability, continuity, and sustainability, led to the choice of 'Alles voor Mekaar' as a gatekeeper.

### 3.3 Research Area

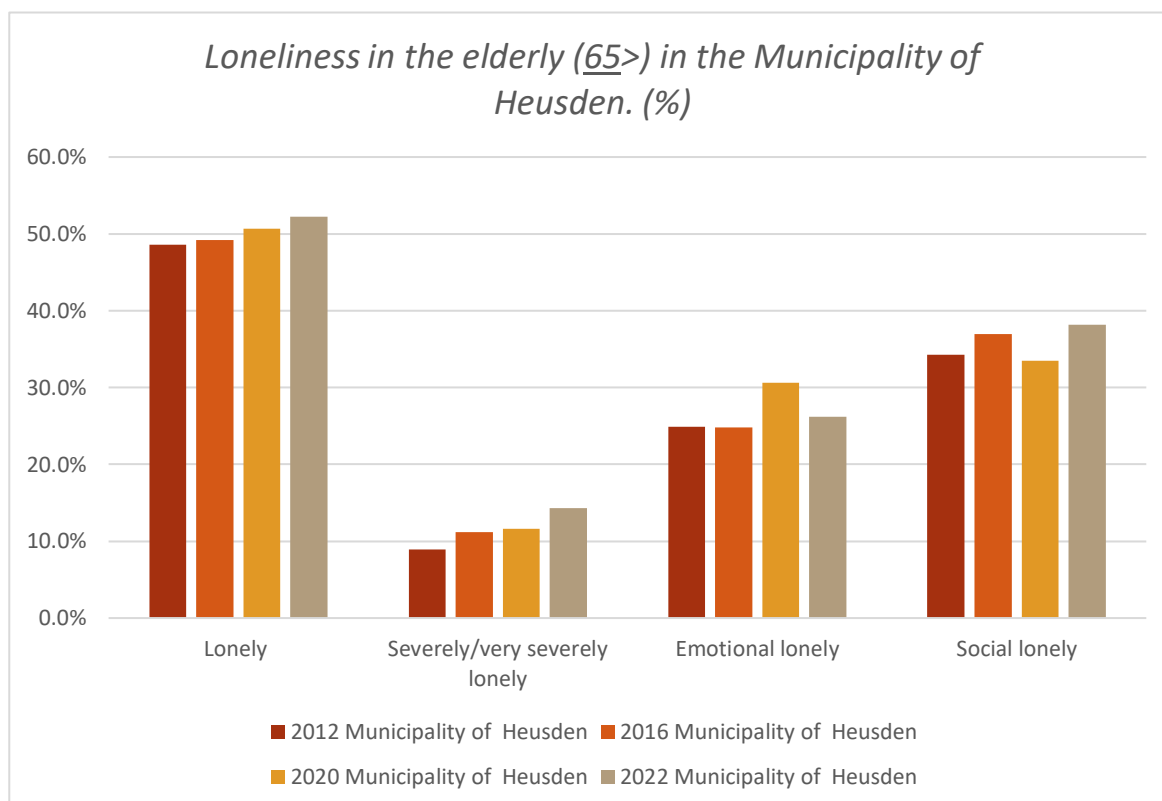
The activities of the foundation 'Alles voor Mekaar' originate from the municipality of Heusden. Due to financial circumstances, the foundation is forced to expand its area of operation. The municipality of Heusden no longer receives financial support. It is no longer possible for the foundation to continue its work in the municipality of Heusden without the financial contribution of the municipality. As a result, the foundation is currently operating in the municipality of 's-Hertogenbosch. This shift also affects the results of the study. So, part of the respondents is in the municipality of Heusden, while another part of the respondents reside in the municipality of 's-Hertogenbosch.

The Graphs below show the development of feelings of loneliness among elderly people aged 65 years and older, from both the municipality of Heusden (Graph 3.2) and the municipality of 's-Hertogenbosch (Graph 3.3). In addition, the national average is also visible in Graph 3.1. Graph 3.2 shows that in the municipality of Heusden, there has been a remarkable increase in loneliness among the population aged 65 years and older over the past 11 years. Moreover, the increase in loneliness in the municipality of Heusden is higher than the national average. In contrast, loneliness rates in the municipality of 's-Hertogenbosch (Graph 3.3) show a decreasing trend, even below the national average. The study area here includes the various residential neighbourhoods within both the municipality of Heusden and the municipality 's-Hertogenbosch.

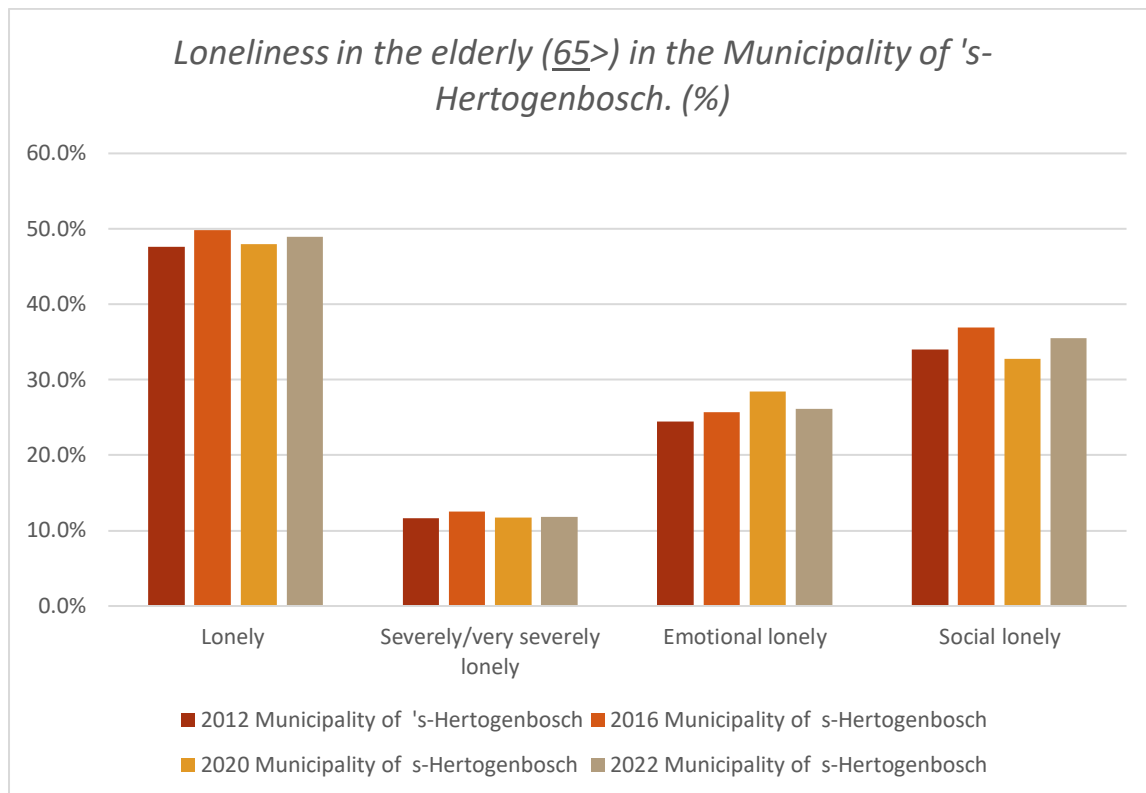
Graph 3. 1: Health monitor; population 65 years or older, region, 2012-2022 (Ministerie van Volksgezondheid, Welzijn en Sport [Rijksinstituut voor Volksgezondheid en Milieu], 2021)



Graph 3.2: Health monitor; population 65 years or older, region, 2012-2022 (Ministerie van Volksgezondheid, Welzijn en Sport [Rijksinstituut voor Volksgezondheid en Milieu], 2021)



Graph 3.3: Health monitor; population 65 years or older, region, 2012-2022 (Ministerie van Volksgezondheid, Welzijn en Sport [Rijksinstituut voor Volksgezondheid en Milieu], 2021)



### 3.4 Data Analysis

After conducting the interviews, the data were analyzed to gain meaningful insights. The interviews were used to gather more information about daytime activities, mobility, health, hobbies, and avocations, to identify places of value for the elderly. All interviews were recorded, with approved verbal consent from the respondents, using recording devices on the phone. The researcher created a transcript after all recordings were completed. This summarized the course of the interview and other details relevant to the analysis, such as interruptions, the emotion with which someone told, a health issue that was in the foreground, important and poignant quotes, etc. Next, using the software program Atlas.ti, the transcripts of the interviews were analyzed. Qualitative studies usually use a combination of deductive and inductive approaches to code the data. In keeping with the qualitative nature of this study, a mixed method was chosen. The interviews were coded both deductively and inductively. First, coding was done based on key terms from the literature review, also known as deductive coding (Stacey, 2019). Then, the interviews were further coded through open coding, also known as inductive coding (Stacey, 2019). The inductive coding approach provided new codes as the analysis progressed. The detailed codebook is included in Appendix 3 for reference. In it, the unique, personal narrative is reduced to the level of topics, arguments, positions, etc. This is valuable for gaining insight into what is going on within the target elderly group around the topic. In this, the unique story is considered valuable research data. The data is then sorted based on axial coding. In which recurring patterns and themes that emerged from the respondents' stories are coded. The axial codes can be seen in Appendix 2. The codes provide insights into the results of the study to ultimately answer the research question.

### 3.5 Quality Criteria and Ethics

To uphold the quality of this qualitative research, various criteria were considered. While conducting the interviews, it was important to maintain an empathetic and respectful attitude. Given the

sensitivity of the topic, the term 'loneliness' was avoided during the interviews. In addition, it was important to let respondents know that their stories were important and taken seriously. This was done through, the ability to end the interview at any time, the reassurance that incorrect answers were not considered during the interview and by guaranteeing anonymity. This was also done by setting aside time for the interviews and giving respondents time to speak. Finally, respondents were facilitated in a comfortable (home) environment.

Trust plays a crucial role when researching a vulnerable population, as within this study (Emmel et al., 2007). After gaining access to a participant, work was done to build trust as an essential part of the relationship between the researcher and the respondent. Several methods were used to establish this trust, including exchanging informal information before and during the interview. Taking sufficient time during the interviews allows the respondent to tell his or her story at length. Taking the time makes people feel valued and heard. In addition, the researcher's already familiarity, with the places mentioned by the respondents within the research area, contributed to the smooth running of the interviews. This resulted in the ability to ask targeted questions about specific locations, such as the shopping centre in the village, which also contributed to the respondents' openness and confidence.

However, the question can be raised whether personal involvement can be adequately ensured through only one interview per respondent. Nevertheless, most respondents were very candid about their experiences of social isolation and loneliness, with some even becoming emotional. Although some interviewees did not speak explicitly about their isolation, some of them unmistakably exhibited all the signs of loneliness identified by provider respondents. This was particularly evident in their unwillingness to end the interview.

In addition, the recruitment method, in which the elderly are identified through a foundation as a gatekeeper, may affect the results. In this regard, it is important to be aware of the interpretation of the results. The selection process may affect an unrepresentative sample, where certain perspectives or experiences may be underrepresented. This may affect the generalizability of the findings and serve as a limitation to external validity. It is important to be aware of this potential bias to ensure transparency when reporting findings. Interactions with the foundation can unintentionally affect research findings. The foundation may have provided certain perspectives, information, or respondents, which may have affected the representativeness and neutrality of the study. The researcher's position, despite efforts at objectivity, cannot be considered completely neutral. Personal beliefs, experiences and interactions with participants and stakeholders may unconsciously influence the interpretation of data and the formulation of conclusions. Awareness of this subjectivity is crucial when interpreting results.

Finally, it can be argued that the elderly in this study are not entirely representative of the broader population of elderly people with feelings of loneliness. As the respondents were recruited based on their involvement with the foundation and thus took the initiative to reduce loneliness (in part) with help from the foundation. The lack of direct recruitment in the shopping centre affects the generalizability of the findings. However, more needy, and vulnerable elderly with feelings of loneliness will be excluded from the shopping centre.

### 3.6 Summary of method

In summary, the primary objective of this study is to explore the identification and significance of meaningful public meeting places for elderly individuals grappling with loneliness, specifically focusing on the shopping centre. Employing narrative interviews as the research method, a total of ten respondents were subjected to in-depth interviews. The recruitment of these participants was facilitated through collaboration with the organization 'Alles voor Mekaar,' functioning as a gatekeeper in this research context. The term 'gatekeeper' implies that this organization worked in tandem with the researcher to identify and facilitate access to suitable respondents. The selected respondents are residents of the municipalities of Heusden and 's-Hertogenbosch, forming the geographical scope of this study.

*"I don't have anything to do all day anyway." Rinus (72)*

## Chapter 4. Findings: Lonely in the Crowd

*This chapter presents the findings of the study and divides them into four sections, each corresponding to the components of the conceptual model explained in Chapter 2. The findings are analyzed using this conceptual model, with each paragraph representing a variable from the model. The central component of the model is 'Ageing-in-Place', which is the desire of the elderly to continue living independently in their familiar environment for as long as possible. This is essential because the elderly in this study live independently at home and experience various forms and degrees of loneliness. The results linked to **Feelings of Loneliness** are discussed in Section 4.1. With an ageing population, there is a growing awareness of the importance of promoting social interactions and community involvement as essential components of a healthy and fulfilling life in old age. Earlier in this study, it was highlighted that public spaces can play a crucial role in promoting social interactions among older people. The **mobility** and usability of public spaces are vital in facilitating older people's participation in social activities. These results are discussed in Section 4.2. Public facilities act as meeting places where the elderly can meet, engage in activities, and stay involved in society. Where this research examines the degree of importance of **the shopping centre as an essential meeting place**. The results of this are discussed in Section 4.3. Finally, in Section 4.4, new components from the empirical work on mental health among the elderly are shared and substantiated with findings from the study.*

### 4.1 Feelings of Loneliness

#### 4.1.1 Social Network at an Older Age

The intrinsic need for deeper connections and close relationships results as a cause of emotional loneliness. Emotional loneliness occurs when an individual experiences a lack of close, intimate connections with one or more people, usually involving the life partner. Such a deficit is accompanied by an emotional need that, as the findings show, is difficult to replace. This is reinforced by respondents' testimonies, with many having been closely connected to their life partners throughout their lives, making the lack of this connection even more challenging. Gerard (88) illustrates the complexity of this experience: *"It's not easy, so alone. I have known my wife for 64 years."* Despite numerous social contacts, he feels considerably alone. After looking at a photo with his wife, he emphasizes the difficulty in getting used to the loneliness that comes from the loss of such a long-term and meaningful relationship. William (59) confirms that his wife's passing still moves him intensely. *"On the inside, I am completely devastated. I live from second to second, from day to day."* Katja (72) testifies that she became depressed and lonely after the death of her husband. Riet (89) shares her grief over her husband's passing, *"I cared very much about my husband."* She continues to experience much grief. Milly (69) describes how the prolonged illness and death of her husband led to the loss of many contacts and increased her loneliness. It still touches her deeply and evokes strong emotional reactions. Rinus (72) emphasizes the inestimable value of his wife, despite her dementia, and the pain of loss and having to slowly say goodbye. His love for his wife remains unabatedly strong and this causes much grief and emotional reactions. These examples individually expose the profound emotional impact of the lack of a life partner, which ties in with the complexity of emotional loneliness and the difficulty of replacing this lack through social interactions (cf Cotterel et al, 2018; Machiels, 2011). As individuals age, the occurrence of losing a spouse, friends, relatives, and acquaintances becomes more prevalent. Nearly all respondents are widowed, leading independent lives in their respective homes. Notably, one respondent, though not widowed, resides alone. His spouse, affected by severe dementia, cannot cohabit with him due to health reasons and care requirements, rendering him unable to provide the necessary care. The findings substantiate the conclusion that each respondent experiences a discernible degree of emotional loneliness, stemming from the loss of a life partner or the deteriorating health of a spouse.

Furthermore, the findings reveal that the closest connections for the elderly primarily consist of family, particularly children and grandchildren. Riet (89) expresses her satisfaction with her family, emphasizing that her children do everything for her, even in difficult times. Her words radiate a profound sense of gratitude and the power of family support, and it seems she has little to complain

about in terms of her social circumstances. Moreover, Rinus (72) affirms the good relationship with his children and grandchildren. When he speaks of the joy he experiences when his grandchildren visit, it becomes clear here that social connectedness, especially with family, is a valuable source of happiness and satisfaction for him. For a considerable number of respondents, family serves as a central component of their contact network. Regrettably, this is not a universal experience. Approximately half of the respondents have limited or no contact with their family. Explanations provided by participants for this phenomenon include past familial disagreements, the busy schedules of family members, or geographical distance and accessibility issues. Milly (69) shares her experience of loneliness, stating that her family members are busy with work and hobbies, leaving little time for shared activities. Her comments highlight a lesser sense of belonging, due to lower self-esteem. In addition, friends often fade from the social landscape due to factors such as relocation, geographical distance, or the protracted illness of partners, rendering sustained contact challenging.

Meanwhile, the findings repeatedly recur expressions of appreciation for neighbours and the importance of neighbours as a close social network for many elderly people (cf Weijs-Perrée et al., 2015). Neighbours provide approachable and uncomplicated social contact within the neighbourhood. Promoting robust neighbourhood inclusion can provide a supportive social network that is especially valuable during times when informal help or care is needed. The ability to provide mutual help within the neighbourhood contributes significantly to facilitating AIP (Ageing-in-Place) (cf Fausset et al., 2011). During the interviews, Gerard (88) expressed his gratitude for his neighbours and emphasized the comfort it brings to family members who are reassured by the thought that he can enlist help from neighbours when needed. Gerard recounted a remarkable event in which he accidentally fell asleep and was therefore absent from a scheduled afternoon of games. His vigilant neighbours immediately contacted him to check on his well-being. Riet (89) gave another illustrative example of high levels of neighbourhood inclusion, describing how neighbours regularly check in on her when her curtains are not yet open at 11 a.m. to make sure she is awake and healthy. Hillary (89) highlights the positive dynamics within the neighbourhood, where regular coffee meetings and joint help with household chores, including grocery shopping, foster a sense of community. Mutual vigilance among neighbours is characterized by benevolent intentions and contributes to the overall well-being of residents. It is noteworthy that this high level of neighbourhood inclusion is particularly prevalent among respondents living in an apartment complex.

However, it is recognized that, despite the potential benefits, some individuals may still struggle with deep loneliness to the extent that the figurative barrier to going outside becomes insurmountably high. Rinus (72) indicated repeatedly during the interview that his impaired physical health prevents him from going outside. In addition, he reported trying unsuccessfully to contact a neighbour through written communication, giving various explanations for the perceived lack of response. This behaviour has been interpreted as an indication of low self-esteem and a reluctance to interact with others. Gerard's (88) poignant statement, *"You can't get more visitors than me (...) But it's still too little"*, highlights the nuanced nature of emotional fulfilment, which goes beyond mere numerical social contacts (cf Cotterell et al., 2018). His comments reflect the importance of regular social contact and the complexity of loneliness. In addition, the metaphorical description of Hillary (89) accentuates herself as a "man-eater," indicative of her want to constantly surround herself with companionship. These statements confirm the complex interplay between human contact and emotional satisfaction.

In addition, the primary feeling of emotional loneliness stems from the lack of a life partner, it becomes clear that alternative social contacts are insufficient to alleviate this emotional deficit. The research highlights the crucial role of meaningful relationships in reducing emotional loneliness and argues that the lack of an intimate relationship acts as a catalyst for this emotional state. The profound effect of losing a life partner, an irreplaceable bond built over a lifetime, evokes deep grief and serves as a poignant manifestation of emotional loneliness. This poignant reality is illustrated in the experiences of the elderly, where a considerable number struggle with grief following the loss of their

life partners. The testimonies of individuals like Gerard (88), despite maintaining numerous contacts, reveal an enduring sense of loneliness and a desire for more meaningful social interactions.

In contrast, a contradictory perspective emerges among some elderly who derive satisfaction from the simplicity of small talk (cf Coupland, 2003). Small talk is an approachable way to connect with others. The importance of these informal interactions is emphasized, as they provide an accessible means of connection that does not initially require deep conversations to eventually build meaningful bonds. This sentiment is echoed by Milly (69) who, due to health limitations, seeks rest on benches during walks and uses these moments as appropriate times for light conversations with others. The facilitation of such interactions is influenced by seasonal variations, with summer providing more conducive conditions due to an increase in passersby. Moreover, the meeting space in the residential complex provides a low-threshold form of contact, especially during recreational activities such as games, for initiating conversations. Milly (69): *"You don't necessarily have to talk to people about deep things, but it can also easily be about the game or activity."* This dichotomy in preferences for social interaction underscores the complexity of loneliness in the elderly and highlights the multifaceted role of human contact in addressing emotional needs.

Despite these low-key moments of contact, respondents expressed a need for longer lasting and meaningful contact. Small talk is an easy way to start a conversation but ultimately gets in the way of forming a deeper connection. Building a closer bond or friendship with others requires more than just small talk. Milly (69) also expresses a need for a desire to form long-term friendships and establish meaningful connections. She is actively seeking individuals who are willing to approach her and build lasting friendships.

These examples individually expose the complexity of emotional loneliness and the difficulty of replacing this lack through social interactions in public spaces in the form of small talk or other forms of light or fleeting contact. Thus, in the context of the elderly in this study, the size of the social network seems to play a less prominent role. The emphasis here is mainly on the quality of social interactions rather than the quantity.

#### 4.1.2 Seek for Autonomy

The elderly in the study exhibit a reluctant attitude when accepting or requesting help, feeling as if they are not entitled to express their needs. The majority experience being dependent on others as a complex choice, presumably motivated by the desire to get through the day as independently as possible. And to be able to live independently at home for as long as possible (AIP). Low self-esteem also seems to play a role here, with elderly people being reluctant not to burden others with their need for help. The research highlights that increased dependence on others creates significant discomfort for older people, both in terms of support in the home and help outside the home. A common reason for refusing help is the desire to remain self-reliant and be able to live independently in the home for as long as possible. Almost half of the elderly emphasize the crucial role of self-reliance in their unwillingness to seek help. Milly (69), for example, articulates this sentiment by emphasizing that she continues to manage all aspects of her life independently despite back problems. Hillary (89) concurs, emphasizing the need for self-motivation in order not to relinquish control of daily activities. Rinus (72) also emphasizes wanting to be self-reliant before seeking outside help. Finally, Riet (89) also confirms the need for self-reliance for continuing independent living.

The findings of this study reveal a reluctance and modesty among the elderly that manifests itself in various forms. A reduced ability to function independently in both physical and mental areas results in restlessness among the elderly. This is illustrated in the case of Rinus (72), whose great modesty prevents him from going outside because of his custom [conspicuous] shoes.

*Rinus (72): [He says he spends far too much time getting dressed up and therefore doesn't get out much.] "It's so hard at times. If I want to get dressed nicely, it takes me half an hour to do so. It's not easy. I guess I look for the path of least resistance. Then I don't have to change my clothes. Otherwise, I'll have to explain why I have those crazy shoes on. Don't need all that."*

Despite offered help and the presence of supportive elements in his home environment, Rinus shows a marked reluctance to go outside and engage in (social) contact with others. Besides weekly family visits, Rinus receives no visitors at home. Family forms a very important and meaningful social network for him. His reticence reinforces his isolation, as it prevents him from getting in touch with friends, acquaintances, or neighbours. Rinus (72): *"People don't come to visit for small talk so easily anymore, because then they have to go to someone on their own."* In addition, he is dependent on his mobility scooter and does not want to be a burden to anyone with it. Rinus (72): *"Then they all have to drag me around, they don't want that [he thinks]."*

Furthermore, the fear of institutionalization threatens large for some respondents, with some indicating reluctance to transition to a nursing home even when faced with increasing dependence on others. Riet (89) firmly rejects the prospect of staying in a care facility, emphasizing that she prefers to remain in her current living environment. Hillary (89) articulates the feeling that outside help once a week allows her to maintain independence for the most part. She fears losing her freedom if she were to accept too much help from others out of convenience. The dislike of nursing homes is underscored by the fear of losing autonomy, with Hillary expressing a preference for alternative outcomes. Hillary (89): *"Then they should just give me an injection if I really can't do it anymore."*

Noteworthy is the fact that almost all participants in the study use domestic help at home. This support extends to various household tasks, including cleaning, laundry, and shopping. Although the elderly involved are generally positive about this form of domestic help, some experience resistance to accepting it fully. Both Rinus (72) and Hillary (89) express a mixed sentiment towards accepting assistance. Rinus acknowledges the need for help at times but is hesitant to take the step of seeking external assistance. Similarly, Hillary rejects the idea of others providing care, expressing a strong aversion to dependence.

These findings highlight that, despite the recognized value of household support, some elderly experience an inner resistance to fully embracing outside help. This reluctance may stem from a desire for independence and maintaining a degree of freedom in performing daily tasks. When older people live longer at home, on the one hand, they continue to live independently in their familiar surroundings, but on the other hand, in addition to increasing social isolation, they experience increasing dependence on others. The positive relationship between accepting social support and individuals' self-esteem is confirmed by research of Qian (2014).

#### 4.1.3 Daytime Activities

Although some older people engage in outside activities, such as playing card games, shopping or volunteering, a notable pattern emerges in which their activities are primarily confined indoors. The older population tends to be more housebound, participating in activities such as watching television, playing games, pursuing hobbies, doing crafts, solving puzzles, and reading. These indoor pursuits are an important aspect of their daily lives and reflect a distinctive lifestyle that reflects home bondage. The tendency toward indoor bondage highlights possible implications for their social dynamics and well-being.

A notable and important activity prevalent among all the elderly in this study is housekeeping, which is an essential part of their daily routine. As a result, this activity takes up considerable time, especially given the reduced physical health of the elderly, which contributes to the perception that they lead busy lives. For example, Riet (89) testified, *"I have to do all kinds of things. I must make coffee, do the laundry, and take off my bed, with one hand. It all takes an incredibly long time."* Gijs (62) adds, *"I did fill my time."* Hillary (89) describes her daily routine, getting up around 9 or 10 a.m., changing clothes, which takes some time, and then having breakfast. She notes, *"For someone else, it's almost lunch by then. Half my day is already lost."*

However, the seemingly mundane task of household chores has broader implications for the nuanced understanding of loneliness among the elderly. Despite the availability of time for various activities, the elderly often appear to be engaged in household chores, illustrating the complicated nature of their experiences of loneliness.

## 4.2 Mobility

### 4.2.1 Mobility Outside the Home

The challenges faced by older people in this study extend beyond the confines of their homes and significantly affect their mobility and access to transportation services. Reduced mobility, due to factors such as reduced walking or cycling skills, combined with health-related limitations in driving, contributes to these challenges. As a result, almost all elderly in this study rely on alternative means of transportation, such as mobility scooters, cabs, or public transportation, to get around their environment (see Table 3.1). Although mobility scooters provide a practical solution for short distances, their usefulness decreases for longer trips due to the limited battery range, limiting trips to areas close to their homes. Moreover, public areas often lack suitable infrastructure for mobility scooters, such as narrow paths and height differences (Kapsalis et al., 2022).

For longer distances, options include area buses, elderly buses, cabs, or public transportation. However, financial constraints prevent some elderly from using these services, as they rely primarily on low incomes such as old-age pensions. Gijs (62): *"In the winter I would always have to take a cab to the shopping centre, which would be too high in cost, so then have to choose to visit the shopping centre less often."* In addition, the inconvenience of scheduling appointments well in advance, combined with the unpredictability of arrival times, contributes to the elderly reluctance to use these services. Indeed, arrival times are often unpredictable. For example, Milly (69) had to wait several hours in the hospital waiting room until she was picked up by the cab.

Moreover, the insecurity of cabs, where people are sometimes forgotten, contributes to the reluctance of many elderly people to use these services. Finally, weather conditions also play a role in transportation choices, with fear of falling or slipping in poor weather conditions being a common concern. Although family and friends may serve as alternatives for maintaining mobility, many older people reject this option because of their aversion to dependence on others, as mentioned earlier. The prospect of growing older and succumbing to physical limitations presents a significant emotional challenge for many older people. Lambert (79) struggles with periods of self-doubt about driving and acknowledges the responsibility he feels toward others on the road. Riet (89) emphasizes her preference for the elderly bus and cab over-reliance on family, confirming her need for independence. Gerard (88) emphasizes the positive impact of a mobility scooter on his mobility but acknowledges the cost considerations associated with using a cab. The reluctance to accept help, combined with the complex interplay of practical, financial, and independent factors, underscores the multifaceted nature of the barriers the elderly face in maintaining mobility outside the home (cf Peace, 2013).

### 4.2.2 Mobility Inside the Home

Mobility includes not only the physical environment but also extends to access to the digital world. This extension emphasizes that mobility is not just limited to physical space, but also the ability to participate in and use digital means to stay connected to society. However, research by both Cotten et al. (2013) and Yu et al. (2020) indicates that internet use has a positive effect on reducing feelings of loneliness and increasing social contact. Nevertheless, it is essential to guide older adults in the use of the Internet for social purposes, as emphasized by Yu et al. (2020).

Moreover, half of the elderly in the study experience significant barriers in utilizing online platforms to engage in social contact, which is partly caused by limited accessibility in this age group. Although organizations provide opportunities for the elderly to participate in social initiatives, they encounter several difficulties in signing up for such projects. For example, the 'Oranje fonds' [Orange Fund], is a Dutch foundation that provides funding to foundations and associations to strengthen the social side of society. Milly (69), for example, experienced practical difficulties in applying for the Orange Fund's 'buddies' project, including technical errors on the website and inaccessibility of telephone support. The complexity of enrollment procedures and ambiguity surrounding the application process are obstacles that can hinder willingness to participate in such organizations. Individual stories of participants reflect the complexity of these issues. William (59) shares his disappointment following the loss of his wife, where requests for help remained futile and trust in aid

organizations was damaged. The cumulative impact of these obstacles led to the withdrawal of Milly (69), who concluded with a disheartened *"Then let's not."* Rinus (72) emphasizes his initial reluctance to engage with support organizations, despite an inner conflict that persisted for a long time. However, recognizing the limitations of solving loneliness on his own, he eventually contacted a foundation. Lambert (79) recently sought out an organization to create a profile for him, hoping to find a suitable partner. These results confirm the importance of understanding and addressing barriers that older people experience when seeking social contact and participating in social connection initiatives, both online and in a physical (public) space.

### 4.3 Spaces of Encounter

Besides social contacts or networks formed by neighbours or family and friends, one can also meet others in public spaces such as parks, community centres, churches, and libraries. This research started from the premise that shopping centres are one of the key meeting places for social contacts for the elderly. As mentioned in Chapter 2, in this research, the shopping centre is defined as follows, *a centre consisting of stores, usually set up to provide surrounding residential areas with convenience stores (Guy, 1998). These centres often include a supermarket, hypermarket, and some small retail units, and are known as local centres or neighbourhood centres.*

#### 4.3.1 The Shopping Centre as an Essential Meeting Place

A subset of respondents in the study attests to the significance of the shopping centre in their lives. They utilize the shopping centre as a venue for social interactions, either with acquaintances or strangers. The shopping centre serves as a conducive space for casual conversations or brief encounters, facilitated by amenities such as dining options, benches, and supermarkets. Lambert (79), for example, visits the supermarket daily to alleviate loneliness, stating, *"I could also go shopping once a week, but this breaks the loneliness."* He emphasizes the regularity of his visits and the familiarity of the staff at the supermarket. Similarly, Gijs (62) frequents the nearby shopping centre for groceries but also ventures there without a specific purpose. During such visits, he strolls through the shopping centre, engaging in brief conversations or exchanging greetings with others, including strangers. His consistent presence has led to recognition by store owners, as Gijs remarks, *"Other than that, I don't need much attention."* The act of visiting the shopping centre without a specific purpose serves as a strategy to combat loneliness, allowing individuals like Gijs to be amidst people and maintain light social contact. Even brief exchanges contribute to breaking the pattern of loneliness. The recognition and acknowledgement received from store staff further foster a sense of belonging and bolster self-esteem among these individuals. Both examples imply shopping as a distraction motivation (Kim et al., 2005). The positive appreciation of Lambert and Gijs for the shopping centre can be explained by their continued mobility to reach the shopping centre. This provides them with a form of exercise, which is not only beneficial for their physical health but may also contribute to reducing feelings of loneliness and boredom. Nevertheless, in this context, the role of the shopping centre seems to be more significant in alleviating the loneliness of older consumers and obtaining emotional satisfaction than in stimulating their spending on products or services (Kim et al., 2005). In this way, the shopping centre serves not only as a practical space for errands but also as a social arena where individuals can forge connections, however fleeting, enhancing their overall well-being. Gerard (88) exemplifies a different perspective by regularly meeting his neighbour at the shopping centre for social activities. For Gerard (88), the shopping centre serves as a meeting point with acquaintances. Which implies shopping as a social motivation (Kim et al., 2005). These are some examples of the elderly in this study for whom the shopping centre provides an important meeting place.

However, this is not true of the other respondents. The perceived significance of shopping centres as social meeting places among the elderly, as indicated by the literature (Peace, 2013), appears to be less pronounced according to the findings from the elderly participants in this study. An observation arises that the health of respondents in this study has deteriorated to the extent that a shopping centre is no longer a viable option for easy access, particularly through walking. The act of

walking longer distances, especially with heavy shopping bags or a trolley, becomes impractical in later life. Another factor, highlighted by Milly (69), is the hesitancy to enter public spaces alone. According to Milly, visitors to the shopping centre typically come in pairs, making it challenging for those who visit alone to connect with others. This example underscores the complexity of encounters in public space that can be accompanied by feelings of exclusion and non-belonging (cf Wilson, 2016). The research demonstrates that the challenges associated with reduced mobility due to ageing pose considerable obstacles for many elderly individuals in reaching shopping centres. Peace (2013) argues that the mobility and dexterity of the elderly are pivotal factors influencing the accessibility of shopping centres, pointing out that, in this study, the physical distance to the shopping centre proves to be a limiting factor.

However, the weather also emerges as a factor influencing the accessibility of shopping centres, with the summer months making the shopping centres easier to reach. Gerard (88) sometimes meets others at the shopping centre in the summer to socialize, highlighting the shopping centre's role as a meeting place with acquaintances like friends or family. However, as Gerard notes, the repetitiveness of visiting the same places diminishes the appeal over time. Deteriorating mobility is identified as a limiting factor, constraining choices for many elderly individuals.

In response to these challenges, neighbours, family, or other contacts play a significant role in assisting the elderly with grocery shopping, as many can no longer manage it alone due to declining health and mobility. Although older individuals may not always possess the necessary skills or equipment for online shopping, it emerges as an emerging trend in response to health decline, mobility limitations, and the distance to supermarkets (Kvalsvik, 2022). For instance, Riet (89), who is unable to cook due to a shoulder injury, relies on meal delivery for 5 to 6 days a week. These freshly prepared meals, which can be stored for 5 days, are an ideal solution for Riet, who lives alone. Other errands are handled by her neighbours or children, and she also orders groceries online, expressing satisfaction with these services. Riet emphasizes the convenience of online grocery delivery, stating, *"That's the most convenient, they bring that to the front door."* These evolving trends indicate that, despite the social aspect of shopping centres, there is a decreasing reliance on them among the elderly, with alternative solutions such as online shopping and meal delivery gaining prominence, particularly for those facing mobility challenges.

#### 4.3.2 Alternative Spaces of Encounter

Although the shopping centre does not emerge as a crucial meeting place for everyone, alternative locations play a significant role in fostering social encounters among the elderly. Among these, commonly frequented spaces include the church, the park (as a natural setting), or communal meeting areas within housing complexes. Gijs (62), for instance, actively participates in church activities three times a week, engaging in communal singing and music during services. The church not only holds importance for him in terms of spiritual engagement but also serves as a community hub where he can socialize over coffee or tea after the service. The variety of post-service activities makes the church a pivotal meeting place for Gijs, given its convenient proximity to his residence throughout the year. However, this accessibility is not universal, as Hillary (89) finds it challenging to attend church regularly due to difficulties entering with her walker. Despite these challenges, she still values the church as a place she enjoys.

In addition, nature is also an important environment for the elderly. Half of the respondents have a keen interest in nature or enjoy being outdoors. The elderly who are still able to go for walks like to seek out nature. This mainly involves small stretches around the house or in a park. A salient observation within the obtained results pertains to the distinct profile of Milly (69) as the singular respondent who articulates engaging with others during her walks, especially in park resting areas that provide opportunities for brief conversations. This form of contact typically involves small talk, and increased familiarity occurs when individuals frequently walk around their neighbourhoods. Meeting periodically at the same place and time significantly contributes to 'place ballet' (cf Buttimer and Seamon, 2015). In contrast, most other elderly individuals primarily conceptualize their interaction

with nature as an activity or hobby, suggesting discernible variation in the social dynamics associated with outdoor pursuits within this demographic. This diversity is further exemplified by the expressed passion for gardening among certain elderly participants. Specifically, three respondents invest significant time in this horticultural pursuit, either autonomously or with support from family members. Lambert (79) serves as a representative case in point, taking pride in his gardening proficiency and affirming, *"I spend a lot of time in the garden, I think you can tell. No one can cut the hedge better than me."* Lambert's (79) love for tending to plants and flowers during gardening can be seen as a form of 'giving care' and 'receiving care' of Tronto's care process (Tronto, 2013). The outcome of the care provided is visibly evident in the garden. This distinction like involvement in outdoor activities highlights the multifaceted nature of leisure preferences among the older population and reflects a nuanced perspective on the role of nature-related pursuits in their lives.

Finally, the findings also indicate that the common area within the apartment complex is an essential and accessible meeting place. Residents emphasise the diversity of activities here, ranging from billiards, darts, cards, and games to hobby clubs. One resident adds that bingo is a popular and enjoyable event, and hopes this dynamic is maintained. However, Hillary (89) emphasizes that for her, it's not just about the bingo, but also the informal gathering and a little social contact. Hillary (89): *"Cozy contact is necessary though"* she notes. Interestingly, Gerard (88) emphasizes how the common area within the apartment complex has played a crucial role in building social connections in the area. He appreciates being able to go somewhere, even if he does not participate in specific organized activities. Simply being able to have a cup of coffee and be part of the community contributes significantly to his sense of well-being. Milly (69) attends the bingo activity weekly, not for her benefit. Milly's conviction that her neighbour could not complete the bingo without her assistance contributes to a sense of connectedness and usefulness. This can be interpreted as the third phase of Tronto's care process, 'giving care,' to humans. Nevertheless, the fourth phase within this framework can also be observed, wherein the received care for her neighbour results in a contented neighbour (Tronto, 2013). These findings underscore the value of well-designed public spaces within residential communities, not only as locations for recreation and activities but also as catalysts for informal meetings and building social networks.

#### 4.4 Mental Well-being

Based on the findings, it appears that mental health holds a prominence surpassing that of physical health in the facilitation of social engagements and relationships. The mental threshold for going outside becomes greater the lower the mental health and self-esteem. The results show that older people with low self-esteem are less likely to seek or accept help from others and therefore experience a lesser sense of belonging. Based on these findings, a component was added to the original conceptual framework from Chapter 2, namely mental well-being. This will be further explained in Section 4.5, the conclusion of the findings.

Some of the respondents experience a positive outlook on life, approach situations with humour and enjoy what they can still do. Throughout the interviews, several older people emphasized the importance of maintaining humour and courage. Rinus (72) maintains humour, exemplified by his term "elephant feet" for custom-made shoes. Milly (69) finds pleasure and a positive outlook in humour. Gijs (62) emphasizes the importance of perseverance, with humour as a source of strength. Hillary (89) underscores the necessity of humour for maintaining courage and positivity, even in the face of physical challenges. For them, maintaining an optimistic perspective is very important. For this reason, could also explain why the church is of great importance to Gijs (62) and Hillary (89). By holding on to faith and (Bible) texts, it provides guidance and courage to live life with a positive attitude. Research by Morse et al. (2018) confirms that humour has a positive effect on the mental health and well-being of the elderly. Moreover, a positive mindset often manifests itself in positive thoughts and emotions, which reduce the tendency to loneliness. They typically demonstrate a strengthened self-image and higher level of self-confidence, resulting in a greater willingness to engage in social interactions and relationships. This willingness to engage socially helps reduce subjective feelings of

loneliness. The size of one's social network plays a crucial role in shaping self-esteem. Respondents with a broader social network describe themselves with more positive self-esteem, leading to reduced feelings of loneliness. In contrast, older people with feelings of loneliness tend to have a smaller or less close social network, resulting in lower self-esteem (Qian, 2014). In contrast, negative emotions such as anxiety and gloom can increase feelings of loneliness.

Thus, humour is an important part of ageing. A positive mindset and courage depend on mental health for the elderly. The results underscore that humour acts as a resilience mechanism for individuals. However, the ability to maintain humour depends on both physical and mental health. In later life, the elderly face various ailments that limit their ability to participate in activities as before. The cumulative impact of these challenges makes it increasingly difficult for the elderly to maintain a humorous perspective. During the interviews, participants with a more positive outlook were more enthusiastic and proactive in finding meaning in life. They displayed less negativity and complained less about physical ailments.

#### 4.5 Conclusion

In conclusion, these findings highlight the intricate interplay of factors that affect well-being and feelings of loneliness in older people as they age in their familiar surroundings. Based on these findings, a new conceptual framework can be established, and a third dependent component 'Mental Well-being' can be added to the original conceptual framework explained in Chapter 2. Where mental well-being is found to have an impact on feelings of loneliness. Based on the findings, it can be concluded that mental well-being, and thus a person's mindset, determines a person's level of loneliness. In addition, mental well-being also affects the accessibility of the elderly to eventually enter public spaces. The literal threshold of the home increases when mental health worsens and decreases when mental health improves. The new conceptual framework is shown in Figure 4.1.

Furthermore, within this study, the size of the social network seems to play a less prominent role. The emphasis is primarily on the quality of social interactions rather than the quantity. As the elderly continue to live independently in familiar environments, they experience increasing dependence on others in addition to growing social isolation. Where there is a notable resistance to receiving outside help. This resistance stems from a desire for independence and maintaining a certain degree of autonomy in performing daily tasks. In addition, declining mobility in the elderly also has profound implications for a dependence on others and effects on their social interactions. The psychological consequences of decreased mobility include feelings of uselessness, dependence, and a decrease in self-esteem, which further reduces their willingness to participate in social activities. Moreover, the findings shed light on the multifaceted nature of leisure preferences among the elderly population. In addition, the findings highlight the context of residential communities and the perception of a full schedule among the elderly, a perception that is often inconsistent with actual circumstances. The reduced physical health of older adults causes tasks to take up more time, creating the perception that they have a significantly busy daily schedule.

This nuanced interplay between social inclusion, physical health and psychological well-being in older adults highlights the complexity of loneliness. These findings highlight the critical importance of understanding and addressing various barriers older people face in seeking social contact and participating in social connection initiatives, both online and in physical (public) locations, which will be discussed in Chapter 5.

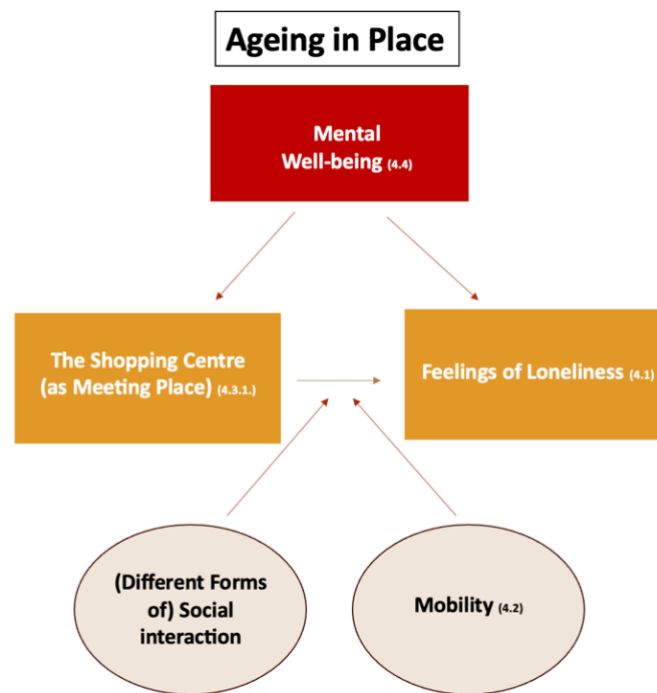


Figure 4.1: New Conceptual Framework

*"You get up alone and go to bed alone."* Lambert (79)

## Chapter 5. Conclusion

*In this chapter, the research question will be addressed by utilizing the four components of the conceptual framework (Chapter 4) as a guide in shaping the substantial conclusion. This model is effectively derived from the components of (5.1) Feelings of Loneliness, (5.2) Mobility, (5.3) Spaces of Encounter, and (5.4) Mental Well-being. Each of these components will be sequentially discussed in a paragraph, followed by a comprehensive response to the question based on this information in section 5.5.*

### 5.1 Feelings of Loneliness

within the broader context of social contacts, the elderly experience various degrees of loneliness. Respondents in this study experienced a perception of emotional loneliness (Cotterel et al., 2018; Machielse, 2011). In which family is a central element for many. In addition, findings show, that neighbourhood inclusion is a valuable source of social contact. Neighbours provide low-threshold and uncomplicated social contact within the neighbourhood, which can help facilitate the concept of ageing-in-place. These findings confirm the study by Douma et al. (2015), which showed that neighbourhood social contacts are important for the health and well-being of the elderly. Despite the potentially positive impact, the results recognize that some individuals may still experience deep loneliness, where the threshold to go outside becomes insurmountably high, due to the loss of contacts such as a partner, friends, relatives, and acquaintances. In addition, close contacts often disappear from the social landscape due to relocation or long-term illness, making long-term contact challenging. A lack of motivation and interest in activities due to loneliness in the elderly can create the feeling that they no longer have a purpose in life. This can lead to further withdrawal and increase feelings of loneliness (cf Machielse, 2011).

In addition, the study reveals that a large proportion of the elderly view experiencing dependency as a complex choice, and this is presumably influenced by the desire to be able to live independently at home for as long as possible (Ageing-in-Place). Whereas AIP can be perceived as positive on the one hand because it helps older people maintain their social network within the community (Sixsmith et al., 2014), on the other hand, it can lead to increasing loneliness and dependency, as has also been confirmed within this study. The results of the study show that the elderly generally have a reluctance to accept or request help. This reluctance seems to stem from feelings of discomfort, a desire for independence and low self-esteem. Caused by the fact that older people do not want to be a burden to others, prompted by the feeling that they are not entitled to express their needs. As a result of a subdued attitude, elderly people are discouraged from going outside and feelings of social isolation are reinforced. An interesting finding is the importance of self-reliance for the elderly, with them indicating that maintaining control over their daily activities is crucial. Fear of admission to a care facility plays a role in this. This aversion to nursing homes seems to stem from the fear of loss of freedom. Furthermore, the elderly prefer environments in which they are perceived as inclusive, in contrast to healthcare settings where they are often associated with their age (Noon & Ayalon, 2018; Van Melik & Pijpers, 2017; Watson, 2009).

Even though all participants use weekly domestic help, it appears that some still experience resistance to fully accepting this support. This ambivalent attitude toward external help suggests that the desire for independence and freedom in performing daily tasks plays a crucial role in the decisions of the elderly. These complex dynamics between social inclusion, physical health and psychological well-being underscore the nuances of loneliness in older people.

### 5.2 Mobility

In addition to physical limitations, deteriorated mobility changes have significant implications for the social well-being of the elderly, with loneliness often an undesirable consequence. The psychological impact of impaired mobility is significant, with the elderly experiencing feelings of uselessness, dependence, and a decrease in self-esteem. Resulting in a decrease in their willingness to participate in social activities. The challenges older people face extend beyond their home spheres. Reduced

mobility, combined with health-related limitations, creates problems. A study by Graham et al. (1991) emphasizes that the proximity and accessibility of the shopping centre are of great importance for the mobility of the elderly. The elderly in this study experience a significant degree of dependency and reduced mobility, resulting in lower accessibility to the shopping for them. Alternative modes of transportation, such as mobility scooters, cabs, and public transit, while offering solutions, are hampered by financial constraints, unpredictable arrival times, and weather conditions. The complex decision-making around transportation choices illustrates the inner struggle of the elderly to remain independent despite increasing physical limitations.

In addition to mobility challenges, the elderly also experience barriers to accessing online platforms for social contact. The study indicates that online platforms for social interaction are difficult to access for half of the elderly in the study. Half of the elderly experience significant obstacles such as limited accessibility, complex enrollment procedures and miscommunications with organizations. Experiences show the complexity of these issues, resulting in disappointment and participant disengagement. However, research by both Cotten et al. (2013) and Yu et al. (2020) indicates that internet use has a positive effect on reducing feelings of loneliness and increasing social contact. Nevertheless, it is essential to guide older adults in the use of the Internet for social purposes, as emphasized by Yu et al. (2020).

The importance of understanding and overcoming these barriers to social interaction, both offline and online, is emphasized to promote elderly well-being and reduce loneliness. These results highlight the mobility challenges of the elderly, where not only practical transportation solutions but also psychosocial support are essential. Social initiatives strengthen the social inclusion of the elderly, where it is important to consider the complex and unique challenges they face. Understanding and overcoming these barriers to social interaction, both online and offline, is crucial to promoting the well-being of the elderly and reducing loneliness.

### 5.3 Spaces of Encounter

This research highlights the role of public spaces, specifically shopping centres, as meeting places for the elderly and its influence on their social interactions. However, the findings show that the perception of the significance of shopping centres as social gathering places among the elderly differs from what has been previously highlighted in the literature (Peace, 2013). As a result of ageing, the study shows, mobility problems pose significant obstacles for the elderly to reach the shopping centre, reducing their role as social gathering places. Declining mobility due to ageing is found to be a significant barrier for the elderly, resulting in a shift to alternative solutions such as online shopping, meal delivery or help from others. Nevertheless, there are still some older people, especially three older men, who consider the shopping centre a valuable meeting place, especially for casual conversations and social interactions to break the pattern of loneliness. In this context, the significance of the shopping centre appears to lie more in alleviating the loneliness of older consumers than in stimulating their expenditure on products or services (Kim et al., 2005).

However, public spaces, such as churches, parks, and common areas within apartment complexes, do appear to be recognized as important locations for social gatherings among the elderly. These places provide opportunities for various activities and social interactions to engage in some form of low-key contact with others. Whereas some older people prefer specific locations based on their interests and physical abilities. These 'connecting spaces', where individuals come together collectively, act as a setting to facilitate various forms of interaction (Peterson, 2023). Through shared interests and joint activities, a sense of group identity and belonging can be reinforced, reducing feelings of loneliness. By making frequent use of these spaces, these locations act as a 'safe haven' for older people, where they feel welcome and experience the freedom to be themselves (Power & Barlett, 2015). In contrast, the research reveals the complexity of emotional loneliness among the elderly, with the loss of a life partner as a profound and difficult-to-replace cause. While small talk and light contact in public spaces are seen as a low-threshold form to initiate social contact (Coupland, 2003), respondents simultaneously emphasize the intrinsic need for longer-lasting and more

meaningful relationships. The lack of deeper connections is reinforced by poignant accounts of mourning and grief following the death of life partners. These findings confirm Van Tilburg's perspective that merely offering meeting places on a structural basis is inadequate (Ruijs, 2019). According to Van Tilburg, tackling loneliness requires more than just providing such meeting opportunities. It also includes breaking the negative cycle of loneliness and building the trust necessary for establishing long-term social relationships (Ruijs, 2019). Considering these findings, it can be concluded that public spaces, while serving as important meeting places for some older people, do not universally meet the intrinsic needs of this diverse group.

#### 5.4 Mental Well-being

The results highlight the significant and remarkable impact of mental health on the social engagement and well-being of the elderly, suggesting that mental well-being may be even more crucial than physical health for promoting social connections and engagement. The study reveals that willingness to participate in social activities is influenced by mental well-being. As mental health and self-esteem decline, the mental threshold for going outside increases. Older people with lower self-esteem and/or mental health experience more barriers to engaging in social connections. Barriers can be formed by, for example, being less inclined to seek or accept help from others or less likely to venture out the door. This results in a reduced sense of connection and belonging.

In contrast, some respondents exhibit a remarkably positive outlook on life, approach situations with humour and enjoy what they can still do. Humour and courage are identified as resilience mechanism that has a positive impact on the mental health and well-being of the elderly. Research by Morse et al. confirms that humour has a positive effect on older people's mental health and well-being (2018). A positive mindset is associated with enhanced self-esteem, increased self-confidence, and a greater willingness to participate socially. This improved willingness to participate socially contributes to a reduction in subjective feelings of loneliness. In contrast, negative emotions such as anxiety and gloom can intensify feelings of loneliness. Therefore, humour plays a crucial role in the ageing process, as a resilience mechanism. However, the ability to maintain humour depends on both physical and mental health. In later life, the elderly face various health challenges that limit their participation in activities, making it increasingly difficult to maintain a humorous perspective. Interestingly, respondents with a more positive outlook in the interviews showed more enthusiasm and proactivity in finding meaning in life, with less negativity and complaints about physical ailments.

Furthermore, the importance of green public spaces, such as parks or nature, for mental health and well-being is emphasized. Exposure to green spaces is associated with reduced loneliness and increased physical activity, with a direct correlation to lower perceived stress. The indirect connection via physical activity, such as walking, highlights the therapeutic role of natural environments. Visits to green spaces are associated with improved mental health and satisfaction at both personal and community levels, highlighting the role of natural processes in promoting recovery.

#### 5.5 Conclusion

An ageing population has a major impact on public health and healthcare. With the growth of the elderly population, loneliness remains an increasing and persistent problem within this population. The complex consequences of loneliness, and social isolation, and the effects on both the mental and physical health of the elderly are an increasing problem (Cotterel et al., 2018). To improve the quality of life of the elderly while also relieving pressure on long-term care, AIP is seen as a solution (Fausset et al, 2011). While AIP offers significant benefits to the autonomy and quality of life of the elderly, it has also highlighted the inherent risk of loneliness (Cotterel et al., 2018; Sixsmith et al., 2014). Mainly among those with limited mobility or a lack of social relationships and support as a result.

However, the importance of public spaces proves crucial in the pursuit of social interaction and engagement, especially for the elderly population. The concept of 'spaces of encounter' highlights the essential role in promoting social inclusion and cohesion in diverse communities (Latham & Layton, 2019). Within this research, a specific focus is placed on shopping as a leisure activity for the elderly,

examining the importance of the shopping centre as an important place of encounter for the elderly. This activity transcends merely the acquisition of goods and is considered a social experience, with the elderly enjoying the ambience, social interactions, and observation of fellow shopping passersby in shopping centres (Kim et al, 2005).

This research highlights the importance of deeply understanding the complex relationships between social isolation, public spaces, and the ageing process. To address this, narrative interviews were conducted with ten elderly people with feelings of loneliness to investigate this issue. The elderly were approached in cooperation with the foundation 'Alles Voor Mekaar'. The goal was to answer the research question:

*To what extent does **the shopping centre serve as an essential meeting place** for independently living elderly people with **feelings of loneliness**, in the municipality of 's-Hertogenbosch and the municipality of Heusden?*

The shopping centre plays a dual role when it comes to the elderly and their social interactions, with both positive and negative aspects. The shopping centre acts as a meeting place where the elderly can engage in social interactions. Despite mobility problems, some elderly still recognize the value of the shopping centre as a location for casual conversations and contacts, breaking the feeling of loneliness. Public spaces, including the shopping centre, provide opportunities for small talk and light interactions. This type of contact is seen as a low-threshold way to initiate social contact. However, reduced mobility due to ageing poses a significant barrier for the elderly to reach the shopping centre. This limits the role of the shopping centre as a universal meeting place. Because of mobility problems, some elderly shift to alternative solutions such as online shopping, meal delivery, or help from others, which reduces the traditional role of the shopping centre as a social gathering place. While a few elderly see the shopping centre as valuable, the research highlights the complexity of emotional loneliness, especially after the loss of a life partner. This suggests that public spaces do not universally meet the intrinsic needs of the diverse group of the elderly. Namely, respondents emphasize the intrinsic need for longer-lasting and more meaningful relationships, which is not always met by casual encounters in public spaces. An important and notable finding from the study is the crucial role of mental health in social engagement and well-being. Older people with a positive mindset and sense of humour show more willingness to participate socially, which helps reduce loneliness. However, it also highlights the complexity of older people's needs and points to the need for a holistic approach that considers mobility limitations, emotional loneliness, and the impact of mental health on their social engagement and well-being.

## 6. Discussion

*This chapter reflects on the study. First, in section 6.1 the recommendations for praxis will be discussed, based on the conclusion. In addition, a critical look will be taken at the limitations of this research in section 6.2, including limitations related to the methodology chosen, the interpretation of the results and the recommendations developed. Finally, suggestions will be made for further research in section 6.3.*

### 6.1 Recommendations for Praxis

The pursuit of an ideal home situation includes not only the physical home but extends to the neighbourhood and community. Therefore, I will make recommendations to the municipality for policy changes and initiatives that address loneliness issues.

Municipalities must focus on increasing the proximity of help and invest in neighbourhood inclusion through foundations such as 'Alles voor Mekaar'. Here, it is important to remove not only physical accessibility but also social barriers for the elderly experiencing loneliness. Supporting initiatives such as the foundation discussed contributes to neighbourhood inclusion and strengthens the social fabric. As a result, proximity to help can be increased and barriers to participation in social activities are lowered. By implementing more buddy systems such as 'Alles Voor Mekaar', help and support can be provided by using volunteers. Also, implementing such a buddy system lowers the threshold for social contact and builds bonds of trust, which supports the elderly.

First, the findings show that the mental well-being of the elderly plays a significant role in their willingness to reach out and connect to improve the mental health of the elderly, the focus is on strengthening a positive mindset. This can be achieved through investing in programs and initiatives aimed at promoting a positive mindset, contributing to the elderly becoming more socially active. For example, workshops on emotional resilience and offering counselling services.

In addition, improving mobility is crucial to the accessibility of public spaces. It is therefore important to address mobility issues with innovative solutions, such as improving local transportation services and encouraging online mobility among the elderly. To break social isolation. To improve the accessibility of public spaces, it is important to focus on the mobility of the elderly. It is essential to improve local (transportation) services so that the elderly can easily access essential locations and activities in their neighbourhoods. Local transportation services can improve municipalities by investing in programs that focus on neighbourhood inclusion, such as 'Alles Voor Mekaar'. Volunteers can help and support by transportation and thus mobility of the elderly. It saves them a lot of time and dependency by using a lift from a nearby care provider.

In addition, encouraging online mobility is important for elderly mobility. This not only increases the opportunity for the elderly to be active online but also helps break social isolation. Through specific training that familiarizes the elderly with digital communication, this target group can become more mobile and accessible. An intervention, such as Seniorweb, which supports older people with online mobility, municipalities can set up similar programs.

However, financial support from foundations such as 'Alles Voor Mekaar' is important. Municipalities should work with various funds to make financial resources available for these initiatives. This will enable foundations to increase their impact and offer a wider range of services. Greater focus on initiatives such as 'Alles Voor Mekaar', which promotes neighbourhood inclusion, helps to connect within the community. Supporting the concept of 'Ageing-in-Place' through policy development to enable older people to live independently in their familiar environment is an additional recommendation.

By incorporating these recommendations into policy and actively investing in social inclusion, foundations as well as municipalities and other stakeholders can collectively make a powerful contribution to reducing loneliness among the elderly. It is imperative to strive for a society where the elderly feel supported both emotionally and practically, where loneliness is effectively combated and pressure on formal care institutions is reduced. It is time to make a concerted effort to create a society

where the elderly feel supported, both emotionally and practically, and where loneliness is effectively combated.

## 6.2 Critical Reflection

This study contributes significantly by offering insight into the value of the shopping centre for elderly people with feelings of loneliness within the Dutch context. A unique finding in this study is that mental health seems to take precedence over physical health when it comes to older people's willingness to enter public spaces. These insights are a valuable addition to existing research, which mostly focuses on physical health aspects. Remarkably, maintaining humour appears to contribute to the resilience of the elderly, resulting in a more positive attitude toward life and reduced levels of loneliness.

In addition, this study highlights the perceptions of a focus on quality social interactions. Virtually all participating elderly affirm a deep sense of missing their partner, highlighting the degree of emotional loneliness among the elderly and the complexity of ways to cope. These findings contribute to a broader understanding of the various dimensions of loneliness in the elderly.

However, this research also has limitations, some of which have already been briefly mentioned in Chapter Three. The results of the study diverge from the expectations about the importance of the mall for elderly people with feelings of loneliness that derive from the theoretical framework. Several factors contribute to this discrepancy and must be carefully considered to understand the validity and generalizability of the findings. A notable difference in health status between respondents in this study and those in other studies could represent deteriorated mobility and limited access to the mall. It is plausible that the elderly in this study experience more serious health problems, making it physically more difficult to access the mall. These mobility problems affect the perception of the mall as a meeting place and result in a lower frequency of visits than expected.

In addition, it should be noted that this study concerns a different spatial setting. The specific layout of the shopping centre within the scope of this research differs from the layout of the shopping centre in the literature. Much literature refers to the American context of the shopping centre, where there is typically an indoor structure and a more spacious design. The traditional image of a shopping centre in the United States often includes extensive and covered shopping areas with wide aisles. This situation differs significantly from the layout of an average village shopping centre in the Netherlands. These differences in physical layout and structure between American and Dutch shopping centres emphasize the importance of considering local contexts and cultural variations when interpreting findings related to the use of public spaces, such as shopping centres, by the elderly.

Another crucial aspect that was not explicitly examined, but may affect the results, is whether the shopping centre was already an essential part of the social life of the elderly before their mobility deteriorated. The timing of integrating the shopping centre as a meeting place plays a significant role in the extent to which it continues to play a role in the lives of the elderly as their health declines.

## 6.3 Further Research

First, further scientific research can focus on the importance of specific interventions that can significantly improve the mental health of the elderly. Thus, promoting their active participation in public spaces. Such interventions should not only aim at reducing loneliness but also at increasing the overall quality of life for the elderly. It is important to gather empirical evidence regarding the effectiveness of these interventions and to understand the mechanisms by which they produce positive outcomes.

Second, a further extension of the research could take place by measuring the effectiveness of neighbourhood inclusion as a means of reducing feelings of loneliness among the elderly. Neighbourhood inclusion involves the active involvement of older people in local community activities and events. By exploring this approach, researchers can better understand the role of social connectedness and local community involvement as protective factors against loneliness.

Third, promoting and exploring digital platforms offer opportunities for older people to become more actively involved in their communities. It is important to explore how these

technological approaches can support the social interaction and expansion of social networks of the elderly. This aspect of the research can also address the digital literacy of the elderly and the potential for creating inclusive digital environments.

Finally, in the context of the topic of loneliness, further refinement of the research can take place by considering specific demographic differences. Namely, the difference in the experience of loneliness between men and women. Gender-specific factors, such as social expectations, communication styles and social behaviours, may influence how loneliness is experienced and manifested. A detailed analysis of these differences can provide valuable insights and the basis for gender-specific interventions to reduce loneliness. In addition, it is relevant to consider the context in which people live. Researchers can examine the differences in loneliness between village and urban residents. Urban and rural environments offer unique social structures and networks, which can affect the degree of social isolation. It is important to understand how these environmental factors contribute to the experience of loneliness and what specific aspects of urban or village life are related.

Moreover, it is crucial to consider the random distribution of town and village residents and the ratio of men to women in existing research. A more balanced and focused approach in selecting participants can help avoid biases and increase the validity of the findings. By considering these additional variables, future research can provide a deeper understanding of the complexities of loneliness, and tailored interventions can be developed to deal more effectively with loneliness within specific target groups and contexts.

By further exploring these aspects, we can take concrete steps towards a more inclusive and supportive environment for older people, in which their mental well-being is central. To reduce feelings of loneliness in this target group as the driving force.

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## Appendices

### Appendix 1 Interview guide of the elderly

<b>Datum van interview</b>		
<b>Leeftijd</b>		
<b>Geslacht</b>		
<b>Voormalig beroep</b>		
<b>Introductie</b>	Onderzoek naar openbare ruimte en waarde voor sociale welzijn van ouderen	
<b>Intro</b>	Hoelang bent u al woonachtig in (plaats)?	Opbouw sociale contacten in de buurt door de jaren heen
<b>Gezondheid</b>	Waar bent u geboren? Hoe omschrijft u uw welzijn over het algemeen?	
<b>Sociaal netwerk</b>	Welke activiteit levert u het meeste welzijn op? (beweging/ familie/ winkelen/ vrienden/ vermaak)	Waarom?
<b>Winkelen</b>	Sociale contacten in de woonomgeving	
	Hoe vaak bezoekt u het winkelcentrum/gaat u naar de winkels?	Hoe vaak gaat u naar het winkelcentrum zonder de behoefte iets te kopen? Gaat u wel eens naar het winkelcentrum om te kijken wat er aan de hand is? Gaat u wel eens naar winkelcentrum om onder de mensen te zijn? Gaat u wel eens winkelen omdat u vrienden en andere wilt ontmoeten?
	Wat zijn voor u redenen om naar het winkelcentrum te gaan?	
	Hoeveel tijd spendeert u in het winkelcentrum?	Waar gaat die tijd aan op?
	Wat voor mensen ontmoet u tijdens het winkelen?	Wat voor ontmoetingen zijn dat?
	Is winkelen een belangrijk uitje voor u?	Waar gaat u nog meer heen?
<b>Sociale nevenactiviteiten</b>	Welke plekken in de buurt bezoekt u nog meer graag?	Wat maakt dit een aantrekkelijke/aangename/fijne plek voor u?
	Wat zijn uw hobbies?	
	Wat doet u graag in uw vrije tijd?	Alleen of samen?
	Merkt u verschil in de afgelopen jaren?	
	Zijn er activiteiten in de openbare ruimte die u liever vermijdt?	Waarom?

<b>Mobiliteit</b>	Bent u tevreden over uw mobiliteit?	Zijn er reisdoelen voor u onbereikbaar, maar zou u wel graag willen bezoeken? Waarom?
	Ondervindt u moeilijkheden bij het bereiken van de winkels?	Zo ja, hoe gaat u hiermee om?
<b>Stichting</b>	Hoe bent u met 'Alles voor Mekaar' in contact gekomen?	
	Wat heeft 'Alles voor Mekaar' voor u betekend?	
	Wat heeft 'Alles voor Mekaar' voor u gebracht?	
<b>Outro</b>	Kunt u mij deze plekken laten zien?	
	Hoe belangrijk is deze locatie voor u?	Waarom is dat zo?
	Is de locatie belangrijk voor uw sociale contacten?	
	Is de locatie te vervangen?	
<b>Afsluiting</b>	We zijn bij het einde van het gesprek aangekomen;	
	Zijn er nog dingen die niet aan bod zijn gekomen in het gesprek maar die u wel belangrijk vindt om nog te noemen?	
	Ik wil u graag bedanken voor uw tijd en deelname aan dit gesprek. Ik hoop dat u het gevoel heeft dat u uw verhaal hebt kunnen vertellen.	

## Appendix 2 Interviewguide 'Alles voor mekaar'

*Voorbeeld van een interventie in Nederland*

Introductie onderzoek

*Is eenzaamheid te herkennen bij ouderen?*

*Aanleiding om de stichting te starten - open houden - hoe gefocust op eenzaamheid?*

*Wat zijn de mooiste momenten met de stichting?*

*Lastige ervaringen en niet haalbaar met de stichting?*

*Gedrag van ouderen met eenzaamheid?*

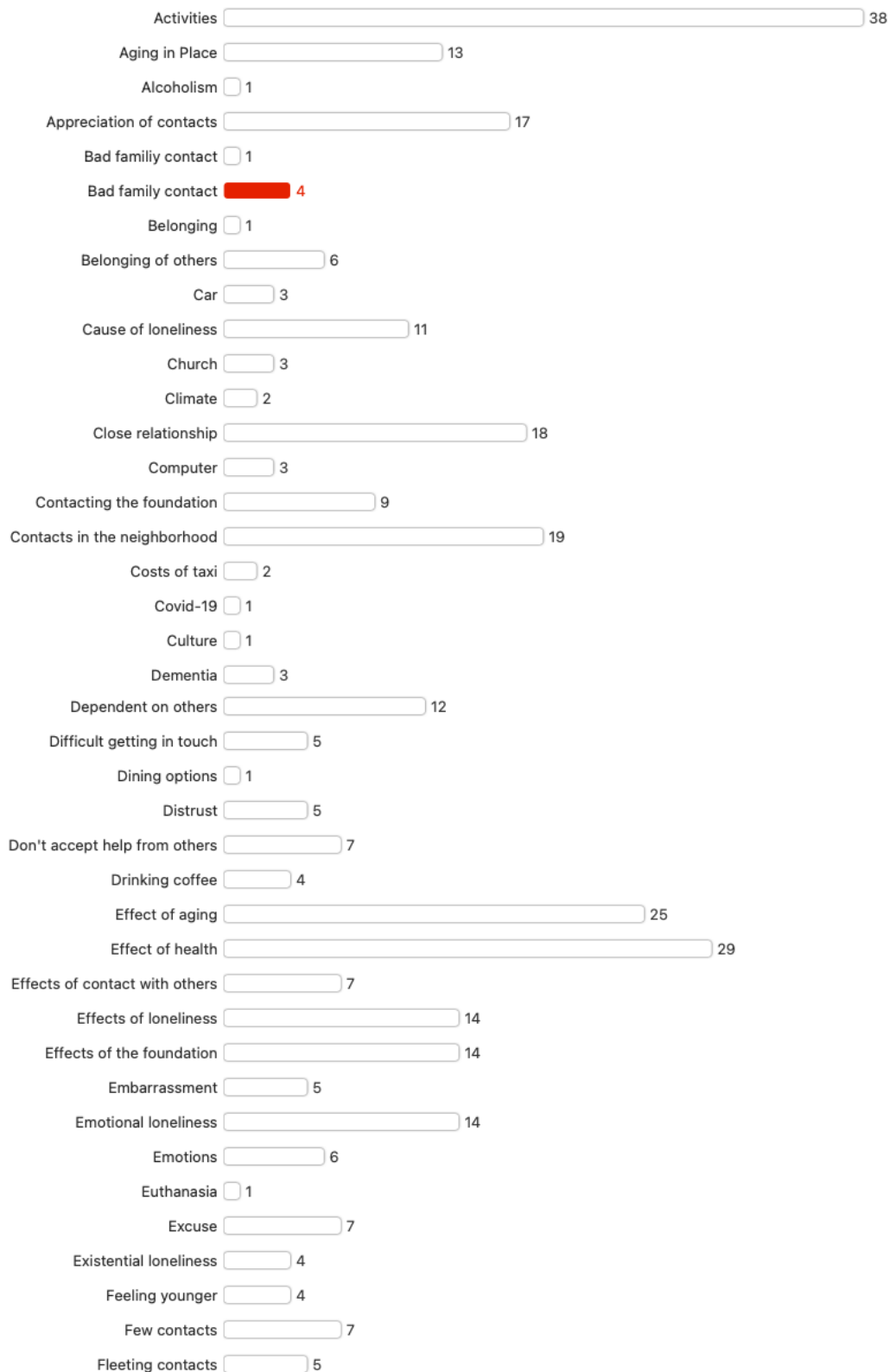
*Praatkassa's meer informatie, waarde, ervaringen*

- Voldoening vanuit ouderen? Waardevolle contacten? Ontstaan van sociale relaties?
- Werkvloer en cassières cursussen? Aanpak van idee en uitwerking
- Evaluatie?

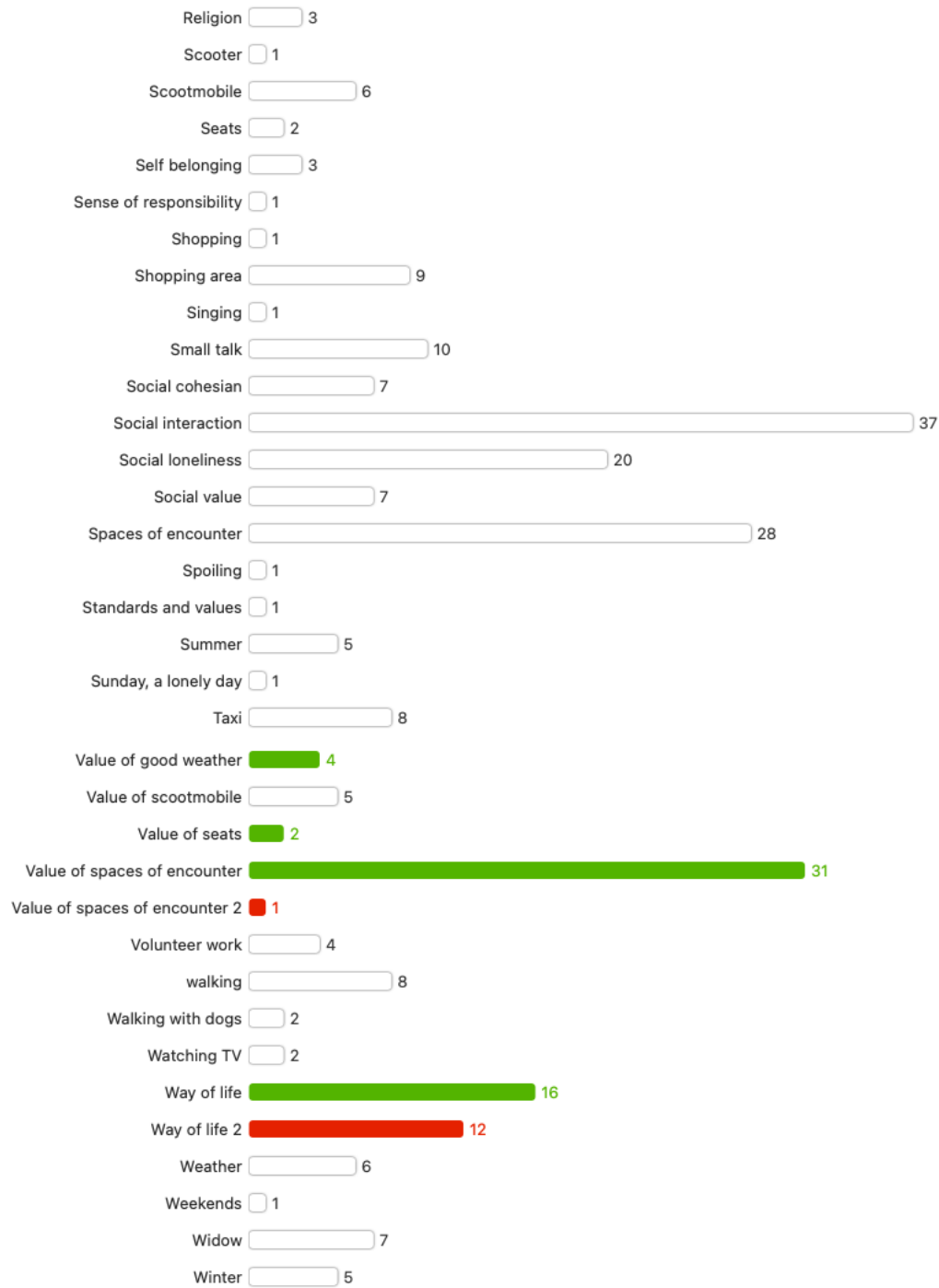
Contacten met doelgroep, gemeente

Hoe te benaderen?

## Appendix 3 Axial codes







115 Code(s)