

Urban Local Environments and the Well-being of Older Residents

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Why is this important?

- 17.4% of W. Europe in 2005 aged 65+; 21.3% by 2020
- Incidence and risk of certain conditions increases with age: Musculo-skeletal weaknesses; cardio-vascular issues; balance and gait disturbances; sensory loss; lowered immunity to infectious disease; cognitive slowing
- Challenges to mental health
- Changes in lifestyle after retirement. More time spent in residential neighbourhood (Golant 1984; Phillips et al 2005)
- Older people overlooked in regeneration, social inclusion initiatives and urban planning / design (Glass and Balfour 2003; Scharf et al 2004; Help the Aged 2003).

Older people and their environment: perspectives

- Environmental gerontology: Functionality is outcome of the dynamic between competence of individual and challenge of environment (e.g. Lawton 1980; 1982)
- Until recently, work concentrated on indoor environments: 'homes for life' / Lifetime Homes
- Recent attention in inclusive urban design and 'streets for life' / Lifetime Neighbourhoods
- Wider environmental justice scope of this study.

Study background

- 3 urban neighbourhoods: inner city; suburban estate; small town on coast
- Deprived → more affluent
- In-depth interviews – individuals, couples and groups
- Observation

Area 1: inner city



Area 2: suburban estate



Area 3: small coastal town



Results themes: the dimensions important to older peoples' health

- Cleanliness and lack of pollution
- Promotion of exercise
- Promotion of social interaction
- Peace and quiet
- Positive sensory experience for emotional wellbeing

1. Cleanliness and lack of pollution

- Litter and waste on streets seen as health hazard
- Also 'symbolic insult'
- Air quality seen as general health issue; pollution affected older people with respiratory problems.
- All potentially affect older people more
- Cleanliness and pollution both worst in deprived inner city area

Participant. “I think the health of the people in [this] area has suffered greatly.

Interviewer. tell me about that?

Participant. Definitely because I know so many people like myself that have taken chest infections, and asthma, and other related lung problems and I think its because of the pollution that is coming over the [motorway] and it was supposed to help us in [...] Road reduce the traffic but that has not happened....”

[woman, 80s, inner city neighbourhood].

2. Promotion of physical exercise

- Participants actively tried to exercise: mainly walking
- Barriers to walking:
 - Uneven pavements
 - High kerbs
 - Obstacles such as bins and advertising boards
 - Heavy traffic
 - Lack of places to rest
 - Natural topography
- Factors encouraging walking:
 - Pleasant places to walk: well landscaped or interesting architecture
 - Services: shops, cafes, toilets, transport
- Coastal town most walkable but all areas had some problems and some good points

“And the high kerbs, so if we are going to a certain place we have got to say now we have got to go along there and there’s a low kerb there and go down here, but I have got to cross there and move along there. You can't just go from A to B.”

[couple, 80s/90s, coastal town].

3. Promotion of social interaction

- Social contact vital for health
- Could be planned but opportunities for informal interaction also critical especially for those living alone
- Features that promoted interaction:
 - Those that promoted walking: lack of barriers, light traffic; location of services
 - Places to sit
 - Critical mass of people to interact with
 - Layout of neighbourhoods
- Coastal town best for this: combination of scenery, services, slow traffic and critical mass

“You meet a lot of people and although you don't know who they are, you recognise them. So you walk down the street, ‘good morning, lovely day, how are you keeping, you've got a stick, what happened’ – that kind of thing. And people talk to you. They never pass you on the street, they always talk and if you're walking in a street where there's just 2 people and you don't even know them, they'll say good morning ... which you don't always get.”

[Woman, 80s, small coastal town.]

4. Peace and quiet

- Seemed to matter more as got older: preference and tolerance (also Brook Lyndhurst 2004)
- Certain kinds of noise disturbing: traffic, aggression, noise at night
- But also liked to hear 'life around' especially those living alone
- Small town quietest but inner city residents acclimatised.

5. Emotionally uplifting qualities

- Largely connected with natural elements: nature particularly therapeutic (Kaplan and Kaplan 1989; Korpela 2007)
- Natural views and places helped combat depression and cope with stress such as bereavement
- In built up areas, small resources at street level such as tubs and window boxes very important
- Views important for those mostly indoors
- Not just about the visual: other senses too
- Probably most needed in more deprived area

Participant: I was just thinking even if I lived in [the inner city neighbourhood], what is it about these streets, they are so damned depressing you know. And all of a sudden it just got to me there wasn't a blessed window box, there was nothing, they are all grey, there is no greenery anywhere. You can walk up to [the park], but I mean actually in the street itself and it does make a difference, it really does. In my opinion it really does.

Interviewer: How does it make you feel?

Participant: It just makes you...it really makes you feel better, seeing a bit of greenery, it needn't be great big trees, it could be, something to take away the greyness you know?

[Woman, 70s, suburban estate, former resident of the inner city neighbourhood.]

Equality issues

- These dimensions potentially more important to older people, affecting physical and mental health
- Older people more affected if spending more time in neighbourhood
- Environments for older people may be worst in more deprived places, where interact with other deprivation issues
- Here will also re-inforce existing health inequalities
- Many felt older people marginalised in planning and decision-making.

Some implications for policy and practice

- Improve walkability: maintenance, traffic management and landscaping
- Provide places for rest and informal socialising
- Take account of older people in air quality and noise management
- Provide natural elements where possible, on small scale – not just parks
- Maintain local services
- Consider older people in planning decisions
- Strengthen participation / consultation / advocacy

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