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“It gives you a reason to be in this world”: the interdependency of communities, environments and social justice for quality of life in older people

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Abstract

Research regarding quality of life among older people has predominantly focused on functional elements experienced at individual or dyadic level despite the complex interplay of factors that contribute to quality of life. Perspectives which explore interdependencies within communities and the intersecting environments in which older people exercise agency have seen less study. They do, however, play an important role in influencing quality of life as experienced by older people across community settings. Qualitative data from a co-produced study of dimensions influencing quality of life in older people was subjected to secondary analysis using a critical human ecological approach. Findings demonstrate the importance of community interdependencies in supporting individual quality of life, the expression of active agency to foster quality of life within and across communities, and the importance of state infrastructures and service provision within these interdependencies. This article argues for a

movement beyond functional conceptualisations of quality of life towards the inclusion of perspectives regarding communal well-being, alongside the role differing types of community play in influencing quality of life. Through developing conceptions of quality of life in social relations and community cohesion, in particular how quality of life is influenced by perceptions of solidarity and social justice including across generations, assessing quality of life at community level will assist in driving cultural change in policy making and practice.

Keywords

community development, human ecology, intergenerational, interdependence, older people, quality of life, social justice, co-production

Introduction

As populations age across the globe, increasing attention is being paid to the challenge of maintaining 'quality of life' in later years. The World Health Organization (WHO 1997: 1) defines quality of life as "an individual's perception of their position in life in the context of the culture and value systems in which they live and in relation to their goals, expectations, standards and concerns. It is a broad ranging concept affected in a complex way by the person's physical health, psychological state, personal beliefs, social relationships and their relationship to salient features of their environment". WHO (2004: 48) contends that "as people age, their quality of life is largely determined by their ability to access needed resources and maintain autonomy, independence, and social relationships". Quality of life as people age is therefore influenced by an interplay of both objective and subjective conditions.

Like broader population approaches to quality of life, the field of gerontology has shaped quality of life assessment amongst older adults with its emphasis on the evaluation of multiple objective and subjective influences (Walker and Hennessy 2004; 2005). For example, survey research amongst healthy older people has sought to understand global

domains that matter in later life and to establish population norms, allowing for social diversity in culture and values that differentiate the various psychosocial dimensions necessary for a good life as people age (e.g. Bowling 2009). The interdependency of social, psychological, physical and material dimensions is a significant feature of how older people report quality of life. For instance, access to social activities is defined as an important aspect of life quality that depends on good health, access to transport, and financial resources (Bowling *et al.* 2003). The overlap between ‘active’ or ‘successful’ ageing and perspectives on quality of life is evident in lay and academic discourses, reflecting and being reflected by ageist social norms that are linked to an emphasis on maintaining mental, physical and social functioning (Bowling 2008).

Recognising the limitations of a ‘successful ageing’ model in minimising the societal and physical impacts on health, Stephens, Breheny and Mansvelt (2015a) consider the importance of physical and social environments that are supportive of valued functionings (physical comfort, social integration, contribution, security, autonomy, enjoyment) to provide a framework for understanding potential capability for health amongst older people and its connection with quality of life. A ‘capability’ approach has challenged ideals of individual responsibility and the denial of physical ageing, to reframe well-being by attending to social and environmental contexts in which people’s functional capabilities are supported (Stephens 2017). Such a framework incorporates social justice by recognising the impact of social arrangements and structures on how far people are enabled to do and be those things that are valued within their society. However, while recognising the influence of environments and social structures on creating inequalities, emphasis remains on individual functioning and outcomes when investigating what aspects of life older people value.

Gerontology research therefore recognises the multidimensionality of quality of life, including attention to the economic, physical and social environments and neighbourhoods in

which older people live and participate (e.g. Fenge *et al.* 2012, McKee *et al.* 2015, Molzahn *et al.* 2009, Prieto-Flores *et al.* 2010), and their role in creating opportunities as well as inequalities for realising what individuals value. The connection between an individual and the environment in which they live received early attention in Lawton's (1991: 6) conceptualisation of 'person-environment fit'; the interface between personal and environmental resources which can be defined as "a multidimensional evaluation, by both intrapersonal and social-normative criteria, of the person-environment system of an individual in the past, current, and anticipated time". The impact of person-environment fit has been investigated in relation to residential satisfaction as a proximal outcome of well-being in older people within neighbourhood contexts (Kahana *et al.* 2003).

The concept of 'ageing in place' (Cutchin 2003) similarly emphasises the importance for most older people of living independently at home in their neighbourhood for as long as possible (Golant 2015; Sixsmith and Sixsmith 2007; Vanleerberghe *et al.* 2017). This emphasis has been linked to the notion of 'home as a refuge' and 'community as a resource' (Wiles *et al.* 2012) expressed in a variety of policy goals in relation to older people, such as the use of technology to support ageing in place (Mort *et al.* 2013). 'Community hub models' are an example of this approach in the housing sector that acknowledge the importance of community integration for older people, which has been shown to reduce social isolation and costs as well as support preventative measures in health and social care (Evans *et al.* 2017). Yet while such models are helpful in recognising the importance of place and environmental contexts in influencing individual quality of life, interdependencies at community level remain largely invisible within such frameworks.

Despite the usefulness of connecting enabling or disabling environments with quality of life, continuing focus frames quality of life in terms of functional or symbolic processes of dependency, as opposed to interdependent and participative processes of involvement or

community as a resource or amenity that older people access to support personal independence. Quality of life models are framed predominantly in terms of intersecting social, psychological and physical domains, and material resources that individuals can access to maintain independence. In this paper a new approach is applied to conceptualise quality of life in the context of interdependencies within communities as intersecting multiple environments through which older people exercise agency. The notion of human ecological systems was developed by Bronfenbrenner (1986) to illustrate the nesting systems that surround and influence an individual, and which the individual simultaneously shapes. Burholt *et al.* (2019) have adapted this framework in the context of social relations for older people. These systems are defined as: i) the microsystem closest to the individual comprising individual and neighbourhood characteristics, ii) the mesosystem of family and friends with whom the person interacts, iii) the exosystem that exerts forces but which the individual does not directly interact with, i.e. the wider community, iv) the macrosystem that encompasses values, ideologies and the national policy environment.

We apply a critical human ecology approach to evidence the intersection of assets, environments and structures that contribute to quality of life across different ecological levels. This brings into relief the limitations of relying on the mobilisation of individual assets and social capital for realising quality of life without attention to social justice and structural inequalities in communities of place and interest that shape – and are shaped by - individuals. Particular emphasis is placed on the active roles older people play in contributing to the wider quality of life of their communities: viewing community as more than a resource for quality of life, and rather as a fundamental dimension of quality of life to which older people bring their assets and abilities. Through recognising the value of a capabilities approach to extend the notion of ‘successful’ ageing, this paper contributes a new

empirically-supported lens for conceptualising quality of life within the wider ecological systems in which older people live and contribute to their communities.

Design and methods

The paper presents a secondary analysis of qualitative data from a project in 2016 (Greasley-Adams *et al.* 2017; Greasley-Adams *et al.* 2019) that engaged older people, including people living with dementia and carers, to voice their opinion on what contributes to quality of life. Promoting participatory and reciprocal forms of engagement within an inclusive model of research, the project recognised and valued the social position older people occupy and the contribution they make to sustaining quality of life within and across their communities. Taking a co-production approach, we recruited 30 older volunteer ‘community researchers’ who worked across five community-academic partnerships in Scotland defined as ‘community research teams’ (CRT) to identify the components that determine a good quality of life in later years. ‘Older’ was defined as people aged over 50 years, in line with the policy context where the research was conducted (Scottish Government 2019) and established data collection tools such as the English Longitudinal Study of Ageing (ELSA). Community researchers ranged from 50 to 96 years of age, with most being in their 60’s or 70’s (the ‘third age’), and retired from paid employment; 19 were female, 5 were male and 6 chose for this information to remain private. Community researchers were recruited using snowball sampling methods; an initial online invitation was distributed by the University team via project partners, and was subsequently shared among local community organisations across Scotland and via social media. Community researchers who volunteered were then organised into five teams according to locality, with three groups in the Scottish central belt, one in the Scottish Borders, and one in the North East of Scotland.

Co-production approach

The participatory methodology adopted in this project realigns power and control to share this with all of those involved in the project (Ottmann *et al* 2011). Our approach involved working with people rather than on or about people and adopted a bottom-up approach to develop knowledge across a range of perspectives. The project used a partnership model whereby community researchers acted as leaders and decision-makers across all phases of the research (Vaughn *et al.* 2018). This collaborative approach also ensured relevance of the research to community needs while maintaining the rigour and quality of social science. This approach generated new empirical data coproduced with older people living in Scotland, demonstrating ecological validity by placing the population under study at the heart of data gathering and analysis to generate new insights about quality of life in later years.

Primary data gathering and analysis

The original research project had three research questions:

- What is the essence of a good life in older age?
- What do older people think is needed to achieve/maintain this?
- How might that differ if an individual finds themselves developing a long-term condition (including dementia), or whether they become a carer?

Methods of data collection were identified in conjunction with each community research team through five initial CRT workshops, which brought team members together to identify appropriate research methods. Visual methods were chosen as a first step in gathering data about important aspects of quality of life, as they enable older participants to identify factors important to them without being influenced by a priori assumptions (Newman *et al.* 2018).

Community researchers invited older people in their own social and volunteering networks to

take a series of photographs regarding any objects, events or experiences which they felt may support or hamper their ability to live ‘a good life’. A total of 67 older people responded to this phase, gathering 127 separate images. Community researchers were given training in data analysis techniques to interrogate the data using inductive thematic analysis (Braun and Clarke 2006). CRTs worked independently to analyse images, with each team developing a thematic framework that was attuned to the findings specific to their local communities. This thematic framework developed from a discussion of what each image represented in terms of quality of life. For instance, a photograph of bus seats was connected with travel and the opportunities transport created for accessing a range of activities, including leisure and volunteering; and conversely the barriers that arose from a lack of accessible transport.

The visual analysis subsequently informed 12 focus groups organised with the assistance of a number of national organisations (e.g. Scottish ageing charities) and the local networks of community researchers using a convenience sample and snowball sampling methods. Each CRT used the topics they had identified to develop topic guides and inform focus groups within their local communities. Six focus groups were open to any participants who wished to attend. A further six groups recruited participants by invitation only: two focus groups took place with people living with dementia and their supporters; one discussion was conducted with a Chinese community group in Cantonese with translation support from community researchers; three focus groups took place with members of different communities of place including a remote village community, a local community hub in an urban regeneration area, and a local housing association. Participants lived in a mixture of urban, rural and remote rural (including island) locations. Location, recruitment method and codes for focus groups are provided in Table 1.

[Insert Table 1 here]

Each focus group discussion was transcribed professionally with identifying features removed. In total, 66 people (41 female, 19 male, 6 unrecorded) took part, of which 17 identified as carers and 11 people disclosed having memory problems. Most people taking part in the focus groups were over 60, with 24 people aged between 60-69 years, 18 people aged between 70-79 years and 5 people aged between 80-89 years. There were 2 participants aged under 50 years, 10 aged between 50-59 and 7 people whose age was not recorded. Two thirds of participants (64%) were therefore in their 60's or 70's (the 'third age') and retired from paid employment, reflecting a similar demographic profile as community researchers. The age profile for focus group participants is provided in Table 2.

[Insert Table 2 here]

Each CRT analysed 1-4 transcripts during a second stage of group analysis. A single coding framework was developed, which included all the themes identified during the analysis of visual materials. CRTs had the option to add additional themes to the framework as these emerged from the analysis of focus group data. The qualitative analysis culminated with the identification of 17 quality of life themes comprising: communities; health and well-being; services; hobbies, pastimes and activities; learning and education; volunteering; work, paid employment and retirement; money and financial resources; social relations and friendships; technology and communication; social attitudes and values; environment; transport and travel; independence, freedom and choice; housing; belief systems, spirituality, faith and religion; preparing for end of life.

Ethical considerations

Informed consent for primary data collection was obtained from all participants, following Dewing's (2007) model of process consent. All participants who indicated their interest in participating via recruitment flyers or an approach from a familiar individual were given an

information sheet. Researchers communicated at a pace sensitive to individual abilities and monitored both non-verbal and verbal cues that might indicate a person was uncomfortable or distressed. For participants with dementia, researchers used orientating statements to remind the person they were conducting a focus group. After ensuring the information sheet had been understood, each individual was asked to provide formal written consent. Anonymity and confidentiality were guaranteed by removing names and places in transcripts. In the findings below, data are indicated with participants coded according to their gender and the focus group they attended. While we collected data on age, gender, dementia diagnosis and caring responsibilities to contextualise the overall profile of our participants within each focus group, other than gender we did not link this demographic data to individual participants.

Conceptual lens and data analysis: the focus of this paper

This paper applies a new conceptual lens using a secondary analysis of focus group data (Heaton 1998). While the preliminary analysis in 2017 identified quality of life domains to answer the original research questions, the paper now presents a secondary analysis in 2019 that investigated how quality of life was supported by different environmental contexts.

While a substantial evidence base exists around domains of quality of life that are relevant to older people, we wished to develop a broader analytical framework that would engage with how these quality of life domains intersect and are realised across different contexts.

Consequently, we chose the human ecology approach as an appropriate analytical framework for this interest. Guided by an interest in community development amongst some community researchers we also looked for themes relevant to solidarity and interdependency, to create a critical lens for this analysis.

This analysis was conducted by a sub-group of the original research team who conducted the primary analysis. This group comprised academic and community researchers working

together to analyse the data in line with the original co-production approach. Secondary analysis focused on how older people articulated their involvement across physical, social, technological and policy environments, including communities of place, identity and interest. Critical human ecology (Burholt *et al.* 2019; Keating and Phillips 2008; Means, Burholt and Hennessy 2014) provided a theoretical lens through which to analyse the dynamic interactions between people and the contexts in which they live. This involved analysing how older people framed quality of life in relation to what Burholt *et al.* (2019) conceptualise as: i) the immediate physical and social microenvironments, including neighbourhood, ii) the meso environment of family and friends, iii) the exo environment of community, iv) and the macro environment of policy, including the influence of planning, services and infrastructure. A new set of theoretically-informed questions formed a coding framework for data analysis:

- How do older people express their participation within different types of communities (e.g. place, identity, interest) and environments (e.g. social, built, technological)?
- How do older people experience interdependency with others (e.g. across generations, in friendships, in families) across these different communities and environments?
- How does involvement in these different communities and environments shape older people's quality of life?
- How do older people experience their responsibility in acting fairly for their communities and for younger generations, by constructively informing policies, local and national?

Thematic analysis involved looking across the data set for repeated patterns of meaning using a collaborative data analysis approach which emphasised a joint focus and dialogue between community and academic researchers (Jennings *et al.* 2018) to provide a greater capacity of the analysis to unpack the taken for granted (Locock *et al.* 2019). Within this collaborative approach, an academic researcher led the analysis process by developing the coding framework and involving community researchers in applying themes, codes and frameworks

to data in the summary analysis report. This researcher-led approach was justified by the theoretically-driven nature of the research questions which required familiarity with the academic gerontology literature. Analysis by community and academic researchers enabled interpretation of quality of life through overlapping but different lenses to develop a deep understanding of how community and environment intersect to support quality of life.

Following the analytic process set out by Braun and Clarke (2006), academic and community researchers independently read the analysis report using the above research questions to collate data relevant to the coding framework, searching for and reviewing themes relevant to the code, and selecting participant quotations that represented these themes. Themes were defined and refined following discussion between researchers about any discrepancies in coding; for instance, the community researchers identified learning environments which had not been coded by the academic researcher, demonstrating the value of community perspectives for highlighting taken-for-granted assumptions by the academic community and enhancing the thoroughness of interpretation (Jennings *et al.* 2018; Locock *et al.* 2019).

The main themes generated from this process were: connectedness in communities of place, identity and interest; enabling and intersecting environments to facilitate connectedness; supporting social justice amongst local and national communities.

Findings

Connectedness in communities of place, identity and interest

Focus group participants described being involved in interest groups such as film and book clubs, joining organisations like lunch clubs, silver surfers or walking groups, or visiting their local library, each providing a focus for connections with their community:

You are not isolated. It works for me. (FGJ, male)

So joining and being part of the broader community. (FGD, female)

Being part of a community provided opportunities for people to come together, avoid social isolation and express a shared identity. People associated an active social life and community involvement with good mental health and well-being; with social interaction and confidence considered important parts of living well in older age. In addition to participation in formal groups, looser ties expressed through everyday connections such as speaking to people in local shops also provided opportunities for social interaction and communication about what was happening in local communities;

You go into a shop and (...) you start chatting to them, it is amazing the information that you can collate just by going in for a bar of toffee. That is really good (...) it is something to do with knowledge, as well. (FGL, male)

For older participants who were living in supported housing schemes, such as sheltered housing, having accessible communal facilities was vital to enabling a sense of community. Wardens in such housing schemes, who held responsibility for monitoring properties and supporting residents, held an important role in facilitating opportunities for socialising, supporting residents to empower each other practically:

We are in sheltered housing. We have a common room. There is bingo and there are cards and things like that (...) We have St Andrew's night coming and Christmas then Robert Burns. I must admit that [name] organises it is worth her weight in gold. (...) I feel that the more they get together the happier they are. If they discover a leak in the roof (...) It happens. You can discuss these things. That is what I feel that nobody should be alone. (FGI, male)

Wardens played a key social role of developing connections which enabled social or practical help, and of supporting older people to share information and support, such as around caregiving. This helped empower others as well as support self-management:

That is one of the really positive things from a lot of these groups that people say is sharing those experiences and maybe realising that someone else has gone through a similar positive experience or an equally negative one and finding solace in that. Even just talking and getting things off your

chest really helps and it has made a lot of these groups really quite popular and, in fact, quite necessary. (FGJ, female)

As well as benefitting from connecting with contemporaries, older people also emphasised the value of intergenerational connections, with opportunities to interact with people of all ages being an important determinant of quality of life:

I think it is important for the generations to be together, to interact and I think that people forget when they get older that they [need] interaction with younger people, as well as with older people and the same that younger people to interact with older people. (FGA, female)

While community was organised around place for some, communities of interest, such as feeling part of a cultural group, or through a sense of community also contributed to quality of life. One focus group explored a good life from the perspective of those of Chinese descent. In addition to celebrating shared cultural heritage, for these individuals who had emigrated to Scotland from China when younger, having an opportunity to communicate and socialise with others sharing the same first language was vital:

The organisation also organises regular day trips so we can all go together on a day trip or sometimes the theatre or the Chinese New Year celebrations. All these kinds of activities they can get together for and it is a kind of spirit to cheer everyone up and, most importantly, it is communication. We have regular Tuesday lunch so everyone can make this day available because it is very important to see each other. (FGB, female)

Such groups also gave older people the opportunity to identify and connect with spiritual aspects of quality of life that were deemed important, including connections with their ancestry:

For the Chinese it is not important to be a Buddhist, or a Taoist, or a Christian. They all believe in their origin / ancestors. (...) They do not necessarily go to the church or go to the temple to do things every week or every month - it is not like that. It is a kind of respect. (FGB, translator)

For some, such links with spirituality were expressed through organised religion, or through a spiritual connection to nature or activities such as meditating:

For me it's the spirituality – not organised religion, for me, but spirituality is something completely different for me: it is being outdoors; it is seeing beautiful things. (FGB, female)

Although uncommon some participants described losing community connections, experiencing a feeling of disconnectedness, a claim which the person below attributed to feeling invisible due to their being perceived as no longer contributing to society:

As you get older and become single (again) - I do not quite know how to put this, but you are shunned in the community (that is not right word), but you enter a different category besides the one you used to be in, and you are inclined to become slightly invisible because older people are not seen. It is like you have nothing to contribute and I think there are older people that do still have things to contribute, but there is this (FGA, female)

Such feelings could be exacerbated by changes in an individual's personal circumstances, for example for those who had been widowed. Living in a place where neighbours were younger and out working during the day, feelings of disconnection were associated with lacking common interests, shared activities or shared spaces with other people in their communities. Difficulties with mobility, sensory impairment and a lack of accessible transport also hampered the inter-connectedness and interdependencies that promoted better quality of life. One participant, living with dementia, linked the stigma of her diagnosis to her perceived exclusion in her neighbourhood:

Where I live people a lot of the time do not talk to you. I do not know whether it is something wrong with me. I can walk past and say hello and they will walk on. Have I done something wrong? Is it me? (FGK, female)

A good life in later years therefore emphasises the interdependency of communities in promoting connectedness whether according to place, culture, interest or identity, and highlights the consequences for well-being that can emerge when such connections are not present within an older person's life.

Enabling (and intersecting) environments to facilitate connectedness

Social environments were key to facilitating connectedness in communities. Socialising within a community of interest, for example, provided opportunities for people to maintain or extend their social network. Informal get-togethers at home, sporting events, going to the pub and socialising in community spaces were all cited as important contributors to quality of life:

Coffee mornings always have this picture of old biddies sitting around tables drinking cups of tea and doing knitting. We can easily get 20 people here. It is men and women, drinking coffee. Some of us make cakes. It is a real good buzz here. We have cyclists that come in. We have people who drop in. That coffee morning is desperately important as a place where we can all get together as neighbours. (FGH, female)

Feeling connected to their neighbourhood environment related to people feeling safe and secure. Creating new communities of interest or facilitating access amongst those in their neighbourhood who were isolated provided communities with a means to tackle issues of social exclusion. Several participants also emphasised the necessity of informal support beyond services provided by formal agencies:

We all help anybody new that coming in: you are sympathetic to how they are feeling. If they are not very mobile everybody looks out for them. That is creating something really special and that might just be one hour in a day, but it is something really vital and it allows people to help other people, which is really important - it is not always about the council doing it, but it is about the human touch. (FGC, female)

In addition to social connectedness, some people described the importance of feeling physically connected with their environment. Enjoyment of the outdoors and the Scottish countryside was connected with both physical and social health. In addition to keeping healthy through activities such as hill walking or cycling, some people emphasised the importance of leisure facilities to support indoor exercise that is inclusive of all abilities:

For me, the problem is finding something safe that is physical that is an activity. I have actually just been referred to go back through the doctor.

In [town] we are lucky because we have got a little bit of gym and a leisure centre. (FGD, female)

While some people described taking comfort in later life from familiarity in their surroundings and being in the same place that they had stayed for years, there were, however, particular challenges of moving to a new community for people living with dementia. While moving to a new area could provide better access to services, the lack of familiarity with local people and places could be challenging from both a practical and social perspective, leaving some people feeling isolated. Since communities of place were significant for people's quality of life, having to move location to access appropriate housing was considered detrimental. Rather than moving communities, most people desired having the ability to downsize to accessible and supported housing within their existing community, enabling them to stay connected to their community of place as their health needs changed:

If your circumstances change as a result of health or finance and you have either got to move out of your house whether it be downsizing or something that is more physically suitable and you cannot get something in an area that you would like to be in or that you know people in, I think it would be a huge impact psychologically, as well as physically. (FGE, female)

However others embraced moving so long as they were moving to a strong community where people were welcoming, with existing community networks which they could assimilate into, such as supported housing that could provide a community. However, care homes were generally perceived negatively, largely due to the perceived loss of independence that would result from care home entry. People expressed the need for some form of service that provided more support than the home care model, but not as much support as would be needed in a care home. Sheltered housing with communal areas to interact with others was considered an appealing a model of care to which people aspired if they required some level of support in the future, in preference to living within a care home, although people were concerned about a lack of 24-hour support in such schemes.

Technology also played a role in supporting interdependence across a range of communities. Despite stereotypes of older people as being both computer illiterate and uninterested in technology, in practice most people felt technology was important to their quality of life. Few people described themselves as fearful or unwilling to use technology, with the majority embracing and valuing its role in enabling them to stay connected to the wider world:

*We are not luddites: we are quite happy to embrace technology. Look at the things we have nowadays with television, mobile phones and tablets.
(FGL, male)*

For example, social media technologies such as Skype and Facebook were repeatedly highlighted as means through which people could keep in touch with geographically dispersed family, or with community events:

My family although they are not close they phone every week so I get to know what is happening. Of courses, Face Book, I can find out things that I should not find out. (FGF, female)

Expressed through technology, such links could support people to continue to age in place, particularly for those in isolated areas or whose family had moved away. However several people were concerned about the consequences of not being computer literate, including being vulnerable to ‘cyber-crime’ and being restricted in their ability to access online services particularly given the decline in physically bounded public or commercial services such as pubs or banks.

Judgements about technology were also linked to the quality, or lack thereof, of technological infrastructure necessary to access the networked society. Given the increasing reliance on mobiles and high speed internet to stay connected, those living in geographically isolated areas recognised the need for greater infrastructure investment to support them to age-in-place, and that poor mobile and broadband connectivity posed a significant barrier to their ability to do so:

It is a good mobile phone network because we had a very poor one before and particularly because so many of the family have mobile phones - we did not have a reception and they did not like to use the landline for some reason, but I think those two things - technological communication are important and will become increasingly important as the older generation become more technology savvy. (FGD, female)

On a practical level, learning new skills such as computer skills was viewed as an important element of continued social participation, and therefore of quality of life. Learning environments were perceived as helpful in bringing people together around shared activities and engaging with their community, as well as keeping an active mind and widening their horizons. Organisations such as the University of the Third Age (U3A) were cited as providing opportunities to facilitate a community of learning together with other older people:

Basically, it is this idea of learning together in later life, not for exams - for enjoyment. (FGG, female)

Joining a group, joining the community and education for me. (FGD, male)

While groups such as U3A appeared to be thriving, opportunities provided by local authorities such as evening classes were diminishing, thereby reducing the available opportunities for participation via learning:

One of the biggest chops that the powers that be have made recently is the cutting out of all the evening classes or, at least, reducing the evening classes. Not only was that a method of keeping their minds active, which I think is brilliant - that keeps senility at bay, but also, it is a social event. People make that evening class a social event. (FGA, male)

As civic facilities such as libraries closed, people suggested that this reduced people's access to and choice of activities. Since 'getting out' through structured activities was considered a core element of quality of life, losing access to such facilities and infrastructure could lead to

a higher likelihood of problems such as loneliness and the commensurate declines in quality of life.

Neighbourhoods with good physical infrastructures, such as easy access to private or public forms of transport enabled people to get out to meet others, access services and to travel more widely for leisure. In Scotland, free bus travel for adults over 60 was a notable means by which older people could move freely within and across their communities:

The free bus is very important even for three or four hours to go there and get back is still a kind of activity. What [name] talks about is that one of the male [club] members uses the bus pass very often, every day he goes everywhere with the bus pass which is really good. (FGB, translator)

Reflecting the importance of public infrastructure in supporting quality of life and the impact their loss had on well-being, volunteer or community transport services, while useful, could not replace the loss of formal transport options supported by the state. Those living in isolated areas which typically lacked access to regular public transport links described a negative impact on their capacity for community connections, especially for those with mobility difficulties. Some preferred to lose their free bus pass if it meant more reliable services, although these views were typically only expressed by those living in isolated areas where quality public transport infrastructures no longer existed. Informal lifts, taxis or community transport were valuable resources, but a reliance on them could undermine people's autonomy (e.g. travelling when they wanted to) while leaving them isolated if they couldn't afford them or if (in the case of community transport options) they were not available locally.

From these findings, it is evident that different environments enable people to connect with others in their communities in different ways (or not - if there are clear barriers). These environments encompass social, natural and built, learning, technological and civic dimensions; with the latter incorporating amenities, services, transport and housing. As such,

the interplay of social, physical, technological and legislative environments in influencing quality of life should be considered in a holistic manner.

Supporting social justice amongst local and national communities

In this final section, we focus on the importance to older people of supporting social justice across their communities. Connected with retaining a valued sense of identity, there was a concern for society to be respectful towards older people and recognise that they have talents and a positive contribution to make:

Just respect for age because I think this country could learn a lot from other countries in respecting that everybody is going to be old one day and not stereotype everyone. (FGD, female)

Many people talked about resisting negative stereotypes associated with older age – such as being inactive and dependent - to highlight ongoing capacity as well as diversity in the experience of later life, contributing to a concern for justice and respect extending across all generations including the oldest old. Actively contributing to local issues within communities was an important means of combatting negative stereotypes associated with older age, enabling people to feel engaged and useful in their lives. This sense of contribution supported a positive identity and feeling of purpose:

I think it is very important for the older generation - of which I am one -just to have importance in life, whatever that may be - something of focus in your day besides do it today / do it tomorrow, whatever. To have that sense that you have a purpose and you can focus on that. It gives you a reason to be in this world. (GFG, female)

Interdependence was an important aspect of how participants conceptualised living well. A concern for the quality of life of others in their community was expressed as occurring across all generations, rather than being framed through a purely individual lens. Actively creating new, age-inclusive communities featured in this analysis of how to promote social connectedness, as was supporting those who were isolated:

It makes it another community if your own community is disappearing or your family are dying - creating a new community. (FGC, female)

Intergenerational links also emerged through a concern amongst some participants about the opportunities that younger generations after them would have in the future, such as having decent educational and employment opportunities:

It matters for me because I would worry about what the next generation / what my grandchildren are going to do when they grow up. My grandchildren are no[t] gifted and they do not have a certain intelligence to get the qualifications they may need for a job. I would wonder what quality of life they are going to have because there do not seem to be as many jobs available. (FGF, female)

In addition to good infrastructure around housing, transport and technology, people talked about the importance of living in a place that supported employment and education for younger people. Emphasising the importance of intergenerational connections, people wanted infrastructures to support younger people to remain in their home communities. This issue was felt most acutely in remote communities such as the Scottish Borders, Highlands and Islands, all of whom had experienced significant outward migration of younger people and the services that follow:

[talking about services for remote island communities] I think the bottom line is why do the Government departments bother with discounting (not discounting service), but making sure that we get preferential treatment, if you like. I am not making myself very clear. Do they want people to live on the islands or not? Not just older people, but younger people. If they want people to live on the islands, then they should make the facilities - they should facilitate that. If they do not want people to live on the island then take it away because at the moment it is always fighting for these things. Because you are on an island - oh, it is your choice to be on an island - yes, but do you want these places inhabited or not? The answer to my way of thinking is yes, they do want it inhabited, but then it is a question about I do not know whether fund this or not fund that. (FGA, male)

Further, for people who had children who were still dependent as adults, it mattered that they knew their child would be looked after they were no longer alive, with formal care

arrangements in place. This focus on the next generation demonstrated a concern for social justice across the life course, with participants desiring policies and/or societies to be nudged to enable greater social and financial inclusion for all generations. Therefore a good quality of life concerned not only the individual, but was defined through positive intergenerational networks and links.

A concern for harnessing local energies and interests was apparent, with a call for planning policies that sought and heard local views. Having a voice in local decision-making was expressed by some as important for their quality of life, yet there was ambivalence about whether local groups had real influence:

I think there are groups who will voice their opinion, but I do not think it is getting heard or anything is getting done about it and it makes them lose faith. There are groups and I have been involved in lots of groups and they say what they would like and the powers that be takes it away, but does not use it and do what they want, and that is the truth. (FGF, female)

Civic engagement was discussed consistently across all the focus groups, including in relation to helping build a sense of community and helping people to feel safe and secure. While it was considered important for communities to help themselves, local and national government had a role in supporting communities to do this:

I was going to say it is going to be down to us to help ourselves, but the Government should be helping us to help ourselves. A sense of community could help people feel safe and secure. (FGH, female)

Although people valued having strong local organisations and a voice in local decision-making, some were unwilling to participate in their own local community organisations doubting their value and questioning tokenistic forms of involvement.

Commitments to civic engagement and social justice also included volunteering.

Volunteering encompassed a range of activities, from providing administrative support for a community organisation to custody visiting in prison. Active participation at community level

was important to quality of life as it gave life a feeling of structure or routine, and contributed to feeling a valued sense of identity, particularly for those beyond retirement:

Most of us want to feel valued and not in any kind of patronising way, but actually truly valued just for who we are. (female)

It can be something men find particularly difficult to deal with. Loss of working roles and things like that. (male)

This was something that came up was where do you get your sense of identity from. If you have always been a mother, a nurse or a teacher then once the kids have flown the nest or once you have retired, what are you / who are. (female) (FGG)

Although a positive experience for most, there was some concern about excessive demands placed on volunteers, with third sector organisations viewed as having a growing role in providing services as state funded services retreat from direct service delivery. The continued significance of the civic environment in supporting communities to make progress for their members was therefore an important feature of many participants' reflections on quality of life.

Discussion

The human ecology approach adopted in this paper is novel in that it investigates factors influencing quality of life across varying environmental contexts that attend to both agency and structure, including at a community level. This approach moves beyond individual and functional conceptualisation of quality of life, to instead ground the concept within the interdependencies occurring across a variety of social and community structures – geographic, cultural, of interest and of practice (the exosystem). While the immediate physical and social microenvironments in which people live are important for quality of life, seen in the emphasis on local facilities and social networks supporting people to live well, our findings evidence the significance of wider structures, including civic (macro) environments and infrastructures in supporting interdependence across community structures.

This approach brings a novel framework for understanding quality of life in later years.

Supporting Russell's (2011: 96) assertion that "the desire to age well is inextricably linked to the domains of community and associational life" our findings bring new empirical evidence to demonstrate the importance of communities and environments in determining how quality of life is realised. However, rather than identifying communities as static 'domains' of quality of life, we frame quality of life as a co-created phenomenon or process of realisation that is achieved through social relations. This approach to quality of life is novel in that it operationalises interdependencies as fluid and dynamic since they are contingent on intersecting ecological levels. Rather than delineating quality of life into a list of domains linked to subjective and objective states or functional outcomes, we frame quality of life as a process of realisation across interconnected ecological levels, with each level influencing and being influenced by other levels to influence a person's quality of life.

How the environment facilitates or hinders people to connect with other people therefore strongly affects quality of life, whether at the meso (e.g. friends), exo (e.g. learning community) or macro (e.g. mobile networks) system level. This evidence suggests that when considering changes to formal provision such as of transport routes or connections to information and communication technologies, a change in one will have dramatic impacts across the other dimensions. Sufficient positive interplay between different environmental dimensions to support connectedness across a range of communities is necessary to enable older people to feel that their quality of life is good. This finding builds on existing evidence that social participation and connectedness are important for older people (e.g. Beech and Murray 2013; Gallagher 2012; Means *et al.* 2014; Netuveli *et al.* 2006). Indeed, the creation of inclusive and enabling environments is at the heart of 'age friendly societies' as conceptualised by the World Health Organisation (WHO 2017).

Creating supportive communities is connected with an ‘asset-based approach’ and the assumption that individuals can be resilient with the right capabilities and social capital (Rahman and Swaffer 2018). Yet, whilst inherently appealing with its positive discourse of assets (over deficits) and connectedness (over isolation), an asset-based approach can be considered problematic in the same way as the discourse of ‘successful ageing’: emphasising individual functioning and psychosocial relations with insufficient attention to structural inequalities when defining outcomes (Daly and Westwood 2018). Daly and Westwood (2018) contend an asset-based approach is overly simplistic: resilience is perceived as internal and resources are framed as primarily external in so much as they are amassed and used by the individual. Applying a human ecology lens therefore offers a new framework for conceptualising quality of life that emphasises the interdependency of all ecological levels, to understand how assets and resources can be realised or constrained by the structures that surround the environments and communities in which an individual is located. For example, mobile technology – and the quality of the network infrastructure - played a role in supporting interdependence across families and communities, as did economic funding for island communities who were experiencing outward migration. Hence, rather than separating internal and external components, we argue that both are mutually shaping in relation to the intersecting environments and structures in which people participate and exercise agency.

Communities are based around neighbourhood and place for many people; and they can also be focused on communities of interest or practice, demonstrating how communities serve different purposes. As Means and Evans (2012) consider, these different forms of community overlap and should not necessarily be seen as distinctive. Consequently, future research on quality of life should embrace interdependencies between communities. Feeling connected with other people and having a sense of belonging to a community are therefore core elements of what contributes to quality of life. Our findings highlight the particular

importance of housing and place in older people's understanding of how community participation can be supported, especially as social networks shrink.

Like Stewart, Browning and Sims (2015), we found that the neighbourhood environment was important in enabling older people to sustain an active role in in their local community. However, the importance of community connections in the findings of our study were predominantly described as the need for 'intergenerational' links, 'interdependency' and connections within and between place. This connectedness is enabled by the interplay of social, natural, built, learning, technological and civic environments that either support or reduce people's capacity to participate and contribute within their communities. Burholt *et al.* (2019) in their human ecological evaluation of social relations, argue that good social relations support opportunities for cultural and civic participation, and vice versa, demonstrating the interconnectedness of micro and meso-systems. Similarly, Buffel and Phillipson (2018) contend that 'age-friendly' communities are concerned with participation and stakeholder involvement. Our findings therefore show that quality of life is affected by the interplay of agency (participation and involvement) and wider ecological structures (e.g. neighbourhood, infrastructure, public policy) that frame community involvement.

The human ecology perspective in this paper develops a critical perspective to contend that quality of life extends beyond an individualistic focus on outcomes. Older people in this study attested to the importance of social justice and solidarity within communities and across generations contributing to quality of life for all. Burholt *et al.* (2019) locate social cohesion in the exo-system of the ecological framework (community level), and the findings in this paper reflect this influence of the exo-system on how older people report what they value in life and the interdependency with others' quality of life. Quality of life is created through social and community relations, as well as the macro, meso and micro factors that

impact on community participation at the exo level. Moving beyond the study of issues that are beneficial or detrimental to individual quality of life, our approach focuses on how quality of life is achieved via interdependencies (Stephens, Breheny and Mansvelt 2015a). We therefore encourage the adoption of a model that includes collectivistic dimensions as well as individualistic outcomes to deepen our understanding of quality of life.

Significantly, older people emphasise the importance of contributing to the wider quality of life of their local communities and value communities of interest where people work together for common causes, as well as supporting and looking out for each other. Intergenerational communities are prominent in these accounts, reflecting shared learning and identities across generations (Merriam and Kee 2014). Such a perspective on quality of life recognises the importance of co-producing outcomes and civic action across communities and generations (Russell 2011). However, in line with the critique of asset-based approaches set out above, realising quality of life is more than mobilising assets as resources, and requires attention to the intersection of environments and structures across communities of place and/or interest. This means conceptualising quality of life as more than the achievement of personal or social capabilities: it is also connected with power at a systemic level. Similarly to Daly and Westwood's (2018) critique of asset-based community development in the context of adult social care, this requires turning a critical lens to the ecological contexts that influence the structural impacts on quality of life, including civic infrastructure, funding and policy.

For instance, the importance of volunteering opportunities as a means to develop a continued purpose as well as providing valuable opportunities for social interaction supports evidence from other studies (e.g. Burholt *et al.* 2019, Means and Evans 2012; Stephens, Breheny and Mansvelt 2015a, 2015b). Our project evidenced that an individual's unpaid 'volunteering' ranges from helping a friend or neighbour, through to running a walking group or community

space, or to joining a large charity to provide services on behalf of the state. This clearly shows that ‘community development’ is not all fostered by the state, and that ‘co-production’ is not just about creating a more equal relationship between the people who use public services and those who provide them in the limited context of health and social care. A consensus of those interviewed was to encourage community development which includes infrastructure planning and community empowerment to harness local interests and energies; and co-production which at least includes ‘the environment’, as many people interviewed saw ‘health’ encompassing for example inadequate housing or poor transport options.

Thus, it is important that local and national government continue to support community development, and that interdependencies across sectors are recognised and enabled to flourish. This is vital when public policy often lays the foundations for many elements of the infrastructure needed for social participation to take place such as transport, while privately provided community structures like shops and banking provide opportunities for social participation. As Buffel and Phillipson (2018) argue, the global trend in the reduction and closure of services that assist older people due to economic austerity, and the limited influence of older people in relation to strategic decision-making, is restricting the quality of everyday life for older people. However, thinking beyond asset-based approaches that emphasise the available capabilities and resources older volunteers bring, we need to consider how far unpaid work by older people in their communities can or should extend formal care provision, a concern highlighted by older research participants and volunteers in this study.

A potential limitation of this study is the high involvement of participants who are engaged community members, and further research could apply this quality of life framework amongst a broader and more diverse range of participants given that we cannot assume all older people want to engage with their communities as considered by Means and Evans (2012). However our use of a co-production methodology involving older people as community researchers

provided a means of accessing a diverse range of older participants by increasing the reach of the project across more communities of older people than could have been accessed by an academic team alone. Future research could engage more closely with aspects of social differentiation in its analysis, including gender, health status, cultural background, education, income and family structure. Such analysis was beyond the scope of the current study as we collected only limited demographic data from focus group participants and did not link these data to individual participants beyond gender; engaging with such features of diversity would deepen analysis further to understand their influences on quality of life reporting. While most participants were aged in their 60s and 70s, our study participants encompassed more than a single generation, therefore further research could differentiate age to examine its impact on attitudes to quality of life across generations to avoid the risk of homogenising ‘older’ people.

Conclusions

This paper has adopted a human ecology lens through which to conceptualise quality of life as a more complex and fluid interplay of interdependencies within and across communities than existing assets-based and capability-based approaches would consider. Taking a critical perspective, and reflecting participants’ concerns for social justice and solidarity across generations, we argue that a new framework embraces the need for collective social justice in realising quality of life in later years. Aligned with the co-production methodology that has informed the research within this study, quality of life is more than the realisation of discrete preconditions associated with ‘a good life’. Rather, achieving quality of life relates not only to individual self-realisation but also simultaneously to co-producing a good quality of life for the wider communities in which people are located.

Adopting a critical human ecology approach has enabled us to conceptualise quality of life as the realisation of interdependent communities and environments that intersect and interact to co-produce social realities that are grounded as collective achievements, as opposed to

functional components that can be operationalised at a purely individual level of expression. The model we advocate addresses the acknowledged limitations of social justice approaches that fail to consider the interdependence of social and ecological systems (see Furman and Gruenewald 2004) alongside recognition that asset-based approaches pay insufficient attention to structural issues (see Daly and Westwood 2018). Bringing together social justice and human ecology approaches develops a critical lens through which to investigate quality of life and the means through which it can be improved.

Exploring social relations as interdependent between individuals, organisations and states is well-established (Bowers 2001; Secker *et al.* 2003, White and Groves 1997). However, such an approach has not necessarily been reflected within mainstream conceptions of quality of life, which continue to over-emphasise individualised and functional measures of difference, neglecting exo and macro level influences and the inter-relatedness of these influences on individual experience (Burholt *et al.* 2019). In illustrating how community influences quality of life, this paper argues for a movement beyond functional conceptualisations of quality of life towards the inclusion of perspectives regarding communal well-being, alongside the role differing types of environments and wider social structures play in influencing quality of life.

Our contribution from this study is therefore to reframe quality of life as more than the combination of ‘objective’ and ‘subjective’ dimensions of a person’s living situation or state of mind, as structured by the resources they can access alongside their individual assets. Instead, we frame quality of life as co-produced through collective action as well as individual effort. Therefore, the binary representation of agency and structure that is typically presented in quality of life frameworks is too simplistic; rather, internal capacities and assets and external ecological systems or landscapes are interdependent and mutually shaping.

Through developing conceptions of quality of life in social relations and community cohesion, in particular how quality of life is influenced by perceptions of solidarity and social justice including across generations, assessing quality of life at community level will assist in driving cultural change in policy making and practice. Developing intergenerational social connections across different geographical and cultural communities, online communities or communities of interest is one avenue which communities can explore in order to achieve these aims. In the context of ongoing financial constraints, combining social justice and human ecological approaches provides a critical framework for quality of life in later years: as a model for conceptualising ‘quality of life’ and as an agenda for future action to build communities.

Statement of ethical approval

The study received ethical approval from the University of Stirling School of Social Sciences Research Ethics Committee on 22nd June 2016.

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Declaration of contribution of authors

All authors contributed to the initial study design, primary data analysis and interpretation and revised the article critically for intellectual content. JG, JM, RP and JR conducted the secondary data analysis and interpretation. JR, GG, CG and VM drafted the article.

Statement of conflict of interest

None

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Table*Table 1. Focus group details*

Code	Location	Details of recruitment/group composition
FGA	Island (North Scotland)	Open recruitment in local community area via adverts and networks
FGB	City (Central Scotland)	By invitation to closed group; discussion in Cantonese with translation support
FGC	Town (West Scotland)	Open recruitment in local community area via adverts and networks
FGD	Town (Central Scotland)	Open recruitment in local community area via adverts and networks
FGE	City (Central Scotland)	By invitation to a closed group; people who live in a regenerated urban area
FGF	City (Central Scotland)	Open recruitment in local community area via adverts and networks
FGG	Town (South Scotland)	Open recruitment in local community area via adverts and networks
FGH	Village (South Scotland)	By invitation to closed group; people who live in a small village community
FGI	City (North Scotland)	By invitation to closed group; people with dementia and their supporters
FGJ	City (North Scotland)	Open recruitment in local community area via adverts and networks
FGK	Town (East Scotland)	By invitation to closed group; people with dementia and their supporters
FGL	City (West Scotland)	By invitation to closed group; residents from a local housing association

Table 2. Focus group participant age profile

Age range	Number of participants	Overall percentage of participants (N=66)
Under 50*	2	3%
50-59	10	15%
60-69	24	37%
70-79	18	27%
80-89	5	7%
Unrecorded	7	11%

* whilst the study was designed for participants aged 50+, 2 participants <50 years of age took part in discussions; their responses have not been included in the findings section