

“Life Course of Place”: Older Adults' Social Networks and Informal Help Amidst Urban Change

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Abstract

This article examines how older adults, who are long-term residents in disadvantaged urban neighborhoods, engage in informal help amid neighborhood change. While dominant narratives often frame older adults as passive recipients of care, this study highlights their often-overlooked role as informal caregivers within their neighborhoods. Drawing on 19 life story interviews conducted in two Brussels neighborhoods, Kuregem and Brabantwijk, the study analyzes how changes in population composition, public safety, and neighborhood decay affect older adults' social networks and neighborly relations. Using a “life course of place” approach and an “ethics of care” perspective, the analysis shows how neighborhood environments and older residents co-evolve over time. Using composite vignettes as an innovative narrative method, the findings show that neighborhood change has led to reduced social networks, which can hinder informal help. At the same time, long-term residents respond to these changes through localized informal help, drawing on their environmental knowledge, natural neighborhood networks, and personal commitment to helping others. Local community centers are key infrastructures fostering informal help as places where neighbors meet and support each other. The findings present a counter-narrative to hegemonic aging discourses by demonstrating how long-term residents enact care in ways that resist the social exclusion often associated with urban disadvantage. This article contributes to urban planning debates on social infrastructure, aging in place, and the daily practices that sustain public urban cultures of care.

Keywords

aging in place; caring communities; disadvantaged urban neighborhoods; ethics of care; informal help; long-term residents; neighborhood change; older adults; social networks

1. Introduction

Urban neighborhoods are spaces where daily practices of care, from casual neighborly support to organized community solidarity, play a crucial role in sustaining the social fabric. Yet, in many urban environments, processes of neighborhood change challenge the very conditions that allow such public cultures of care to flourish (Fontes & Cordeiro, 2023). Rising unemployment and poverty, shifts in population composition, or public safety concerns often erode the social infrastructure that supports informal care, particularly in disadvantaged urban neighborhoods (Taei et al., 2023; Yarker, 2022). Older adults, particularly those who have resided in such neighborhoods for decades, are especially vulnerable to these transformations. Their social networks, essential foundations for everyday forms of informal help, often weaken, exposing them to risks of social exclusion (Buffel et al., 2013; Scharf et al., 2005). Yet, despite their embeddedness in local social life, older adults' informal contributions to neighborhood care are frequently overlooked in both research and policy debates, which tend to valorize formal volunteering while neglecting informal practices of mutual aid (Serrat et al., 2021; Stewart et al., 2024).

At the same time, broader societal trends, such as individualization and digitalization, are seen to undermine local community and social networks (Hampton & Wellman, 2018; Phillipson, 2007). While these macro-forces are well-documented, relatively little is known about how long-term residents experience neighborhood changes at the micro-level and how they respond to these changes through informal helping practices. This gap is particularly salient for older adults who, constrained by socio-economic barriers, remain "stuck in place" (R. J. Smith et al., 2018), experiencing neighborhood decline without the resources to relocate. This study aims to address these lacunae by exploring how neighborhood change shapes the social networks of older adults who are long-term residents (> 20 years) of disadvantaged urban neighborhoods, and how this, in turn, influences the informal help they give.

Social networks serve as a key dimension of social capital, and they have been theorized as credential resources for individuals (Bourdieu, 1986), relational enablers of productive action (Coleman, 1988), or as mechanisms that foster collective benefit (Putnam, 2000). In neighborhoods, these social networks encompass both "bonding" ties with close family and friends, and "bridging" ties with more distant groups such as acquaintances and neighbors (Putnam, 2000). One important element of these bridging social ties is what Gardner (2011) refers to as "natural neighborhood networks": everyday, low-key, "chance" encounters that occur spontaneously or recur over time (Duppen et al., 2020; Haleboua & Johnson, 2021; Sharifian et al., 2022). Third spaces, such as local coffee shops, community centers, or fast-food restaurants, often provide the physical infrastructure for such encounters (Finlay et al., 2024).

Participation in social networks increases the likelihood of providing informal help, defined as unstructured assistance offered to friends, neighbors, and relatives outside the household (Tanskanen et al., 2024; Wilson & Musick, 1997). Recent studies increasingly recognize older adults as active agents within their communities (e.g., Gott et al., 2024; Hand et al., 2020) who often develop strategies to resist or adapt to changes in their neighborhood (e.g., Taei et al., 2023; Wanka, 2018). Particularly in disadvantaged urban areas, informal help between neighbors has become an important resource, compensating for the withdrawal of public services and institutional support (Martinez et al., 2011; Rutherford et al., 2019). Yet, the question of how older adults' informal help toward others evolves in the face of adverse neighborhood changes remains underexplored.

To investigate these dynamics, this article employs a dual conceptual framework: a “life course of place” approach (Dikmans et al., 2025; Lekkas et al., 2017) and an “ethics of care” lens (Tronto, 2013). Neighborhoods are not only geographically defined spaces where residents engage in daily activities, but also dynamic spaces of neighborly relations and social participation (Kurtenbach, 2024; Ruonavaara, 2022). A “life course of place” perspective emphasizes how individuals and their neighborhoods co-evolve over time (Oswald et al., 2024), providing a nuanced understanding of the temporality of social networks and informal help. Methodologically, the study uses life story interviews to explore how long-term residents experience and respond to neighborhood change.

Complementing this, an “ethics of care” approach reframes care as relational, everyday, and deeply embedded in political organizational structures (e.g., state healthcare provision, privatized care systems; Tronto, 2013). Rather than viewing autonomy and dependence as opposites, this perspective highlights the mutual and relational nature of caring relationships. Instead of the simple dichotomy of “support-giver” versus “support recipient,” interdependency is crucial (De Donder et al., 2019; Lambotte et al., 2018). Informal help between neighbors, from mowing your neighbor’s lawn to watching over their children, can thus be seen as an important manifestation of a caring neighborhood (De Donder et al., 2024). Through an “ethics of care” lens, this study reframes older adults not as passive recipients of change, but as active contributors to the social fabric of disadvantaged urban neighborhoods, a perspective often overlooked in existing research (see for instance Dury et al., 2023 for older adults during the Covid-19 lockdown). Therefore, the study departs from two central research questions:

RQ1: What are the main neighborhood changes that have impacted older adults’ current social networks, as long-term residents in disadvantaged urban neighborhoods?

RQ2: What are the dynamics of the current informal help that older adults provide in these changing neighborhoods?

In what follows, the study’s design and methods will be presented, followed by an analysis of the generated themes through composite vignettes. The article concludes with a discussion of the findings and their implications for policy and practice.

2. Research Design and Methods

The authors of this article followed the Consolidated Criteria for Reporting Qualitative Research (COREQ) checklist, which outlines essential components that should be included in qualitative research reports. To ensure transparency and rigor in terms of qualitative methods and reporting, this section systematically details the research design, research setting, research sample, data collection, data analysis, presentation of results through composite vignettes, and ethical considerations.

2.1. Research Design

This research is part of the European research project CIVEX (Exclusion From Civic Engagement of a Diverse Older Population: Features, Experiences and Policy Implications), which departs from a life course perspective to understand features of in- and exclusion from civic engagement in later life. The CIVEX

project uses a multidimensional framework for studying older adults' civic engagement which encompasses informal help, but also membership of an association, formal volunteering, political participation (both formal [e.g., volunteering for a political candidate or party] and informal [e.g., signing petitions or participating in demonstrations]), as well as digital civic engagement.

2.2. Research Setting

Data collection took place between February 2022 and February 2023 in two disadvantaged urban neighborhoods in Brussels, Belgium, namely Kuregem and Brabantwijk. These neighborhoods have relatively young populations. In 2022, the average age was 34.2 in Brabantwijk and ranged from 32.1 to 34.3 in Kuregem, which is divided into three administrative parts and therefore averages vary. Older adults (65+) made up 8.08% of Brabantwijk's population and 6.81–8.91% in Kuregem in 2021 (Brussels Instituut voor Statistiek en Analyse, 2021–2022). The urban area of Brussels is comparatively younger than other cities in Belgium, since its demographic development has always been dominated by migration (Deboosere et al., 2009). The studied neighborhoods, while exhibiting distinct characteristics, are influenced by similar socio-economic and demographic dynamics. These neighborhoods were selected following a comprehensive review of the extant literature on disadvantaged urban neighborhoods and an evaluation of the indicators employed for their identification. These indicators include, but are not limited to, high unemployment rates, high rates of resident turnover, and low educational attainment (e.g., Scharf et al., 2005; A. E. Smith, 2009). Socio-economically, these neighborhoods are part of the so-called “poor crescent” in Brussels, a crescent-shaped area spanning the city center, where inhabitants live on an average individual taxable income lower than €13,100 per year (Brussels Instituut voor Statistiek en Analyse, 2021–2022).

2.3. Research Sample

Interviews were carried out with 19 older adults who were at least 60 years old and who were long-term residents in one of the neighborhoods (i.e., living there for more than 20 years, see Sýkora et al., 2023). Of these interviews, 16 were part of the CIVEX project. Three interviews were conducted using the same methodological approach as in CIVEX, but they fell outside of the project's scope. These three interviews were conducted to collect additional data, on top of what the project required. Participants were mainly recruited face-to-face through local community organizations, such as social restaurants, socio-cultural organizations, and social housing associations ($n = 7$). Some of these centers were specifically geared towards older adults, but the selection was not based on this criterion. Various neighborhood venues were utilized to recruit participants, as the goal was to reach a diverse group of older adults living in the neighborhood. Other recruitment strategies were also employed to counteract an over-representation of participants connected to these local community organizations and to prevent exclusion of neighborhood residents who did not frequent these spaces. These recruitment strategies included snowball sampling ($n = 6$), location-based convenience sampling ($n = 3$), and other strategies (e.g., mouth-to-mouth, or social media; $n = 3$). Nevertheless, these strategies may have led us to overlook older adults who might be most excluded (e.g., those who do not frequent neighborhood spaces overall or have limited social networks).

Of the 19 interviews, 12 were done in Kuregem and 7 in Brabantwijk. Eleven participants reported helping members within their household over the last year (e.g., helping with household chores, doing errands, filling in paperwork), while 17 participants helped individuals outside their household. The participants had lived for

on average 42 years in one of the neighborhoods, varying from 23 to 77 years. Eleven participants were born in Belgium, while others migrated in adulthood from other European countries ($n = 6$), and some relocated to Belgium from outside of Europe ($n = 2$). The interviews were conducted in French ($n = 12$), Dutch ($n = 6$), or English ($n = 1$), depending on the preference of the participant. Six men and 13 women were interviewed. The mean age was 75 years, ranging from 64 to 89 years. The duration of the interviews varied between 65 and 149 minutes and no third party was present during the interviews. Participants either lived alone ($n = 10$) or lived together with a spouse, partner, and/or their children ($n = 9$). Interviews were held at a venue chosen by the participant, either at their home ($n = 8$) or at local community centers ($n = 11$).

2.4. Data Collection

Semi-structured life story interviews were conducted by the first author of this study, who was employed as a doctoral researcher for the CIVEX project when data collection took place. While the first author conducted most of the interviews ($n = 16$), a Master's student conducted some of the interviews ($n = 3$) as well. The interviews were pilot-tested and audio-recorded.

The interview followed a three-phase structure. In the first phase, participants were asked about their own definition of civic engagement and their current civic engagement, if any. The second phase consisted of five parts in which the various dimensions of civic engagement in CIVEX's multidimensional framework were discussed (i.e., associational membership, formal volunteering, [formal and informal] political participation, digital civic engagement, and informal help). A life course approach was used during this part to examine how the participants' civic engagement trajectories had evolved over time, zooming in on changes regarding the intensity of their civic engagement at different points in time, as well as the obstacles and enablers that they encountered in their civic engagement throughout their lives. Additionally, participants were explicitly asked to talk about the disadvantaged urban neighborhood they lived in, how it had changed, and whether they felt that the neighborhood environment influenced their civic engagement. Life diagrams supported the interviews. Life diagrams are a form of visual elicitation that fosters participation and reflexivity during interviews (Dikmans & Chacur, 2024; Söderström, 2020). During data collection, they were instrumental in exploring in greater depth how neighborhood changes affected participants' civic engagement. A completed life diagram depicting one participant's informal help can be found in Figure 1. The horizontal axis represents a participant's life course, starting from the year of birth until the present. The vertical axis represents the intensity of the informal help given, from low to high. Life diagrams were filled in individually and participants were asked to draw a line representing their civic engagement over time. This served as a basis for discussion and reflection. The interview's third phase explored participants' experiences of in- and exclusion of civic engagement. They were asked to give detailed examples, including context, persons involved, or thoughts of emotions during moments when they felt in- or excluded.

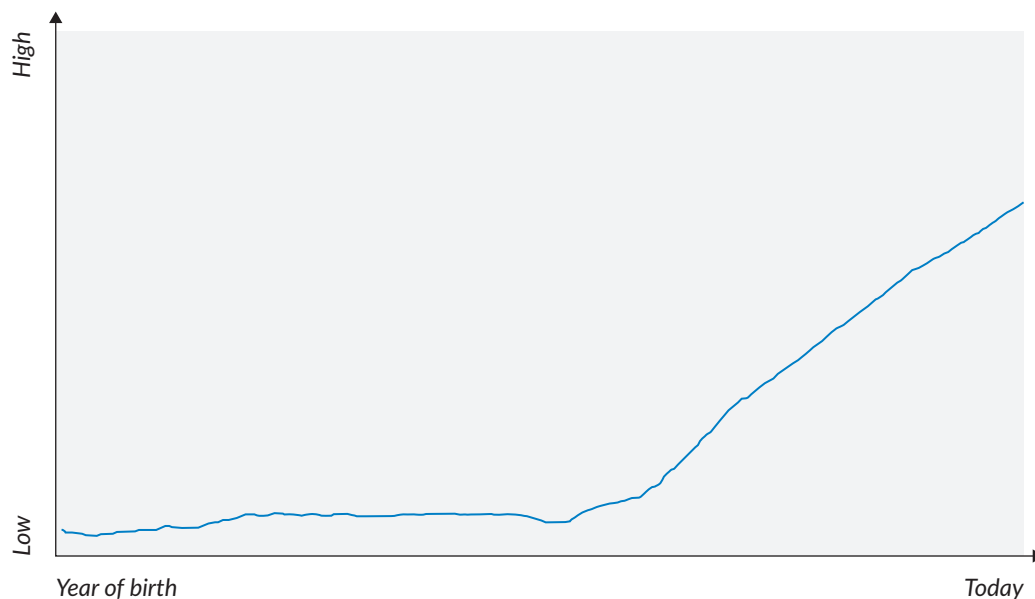


Figure 1. Example of a filled-in life diagram concerning one participant's informal help.

2.5. Data Analysis

The interviews were transcribed by a professional transcription service and analyzed in their original language (Dutch, French, or English). The analysis for this article focused on the data related to one of the five dimensions of civic engagement, namely the participants' informal help, while not overlooking the full interview transcripts for a mention of neighborhood change, social networks, and informal help mentioned in other parts of the interview. A narrative approach to qualitative thematic analysis (e.g., Butina, 2015) was chosen to spotlight the stories of the participants. The goal was to remain as close as possible to their lived or subjective experiences, which meant zooming in, for instance, on their feelings, perceptions, preferences, or ambitions, throughout their lives (Karunamuni et al., 2021). The data were analyzed using the QUAGOL (Qualitative Analysis Guide of Leuven) approach (Dierckx de Casterlé et al., 2012, 2021). The QUAGOL approach fosters inductive thematic analysis, while also recognizing the narrative richness of the data. The eventual analysis consisted of two parts.

In the first part, the coding process was thoroughly and narratively prepared following five steps. First, the interviews were carefully re-read, and relevant passages were highlighted. Second, a narrative report of each interview was drafted, in which the individual stories were written down in relation to the research question. Third, a so-called conceptual interview scheme was made, wherein the excerpts of the participants' stories were reviewed to explore the relevant themes of the research in a more structured manner (i.e., neighborhood changes, altered social networks, and current informal help). Fourth, a fitting-test was conducted to determine whether the conceptual interview scheme was suitable for the various interviews. The individual transcripts were reviewed in a forward-backward movement with the conceptual interview scheme in mind. The aim was to assess whether concepts emerging from the transcripts needed to be incorporated to answer the research questions. Fifth, a constant comparison of the different interview transcripts was performed. In this part, the conceptual interview schemes were refined by comparing them with other interviews.

In the second part, the actual coding was done thematically using MAXQDA 2022 (Release 22.2.0). First, based on the findings from the first part, a list of preliminary codes was drawn up. Second, the interview transcripts were revisited to determine whether the preliminary codes aligned with the previously highlighted excerpts. Third, concepts were clustered into preliminary themes and sub-themes, and the coding tree took form. Particular attention was given to the way participants spoke about neighborhood change in relation to social networks and their current informal help, following the study's objectives. Sub-themes were constructed through thematic analysis, as analytically significant sub-components of the main theme, based on a rigorous coding process. Fourth, the interviews were re-read and definitive main themes and sub-themes were generated. Fifth, a description of the results was written out using composite vignettes (see below).

2.6. Composite Vignettes

Results are presented in the form of composite vignettes. Composite vignettes consist of combined narrative excerpts, grounded in the data, which merge the experiences of different narrators into one all-encompassing character story (Blodgett et al., 2011; Knight et al., 2023). Although not conventional for thematic analysis, they have been used to showcase the richness of participants' experiences through storytelling, which otherwise goes lost in the classical writing up of thematic analysis. Furthermore, as the authors of this study aimed to highlight commonly shared experiences of neighborhood change, social networks, and informal help, this style of presentation was deemed the most suitable. Each vignette combines the stories of the various participants in an overarching story. The vignettes span both studied neighborhoods, as similar themes were discussed in each. However, each vignette reflects the narratives of different participants. Table 1 shows which participants' stories were coded for each vignette and which were not. Some participants are only represented in two of the vignettes (e.g., Participant KU_10, Participant BW_1), illustrating the tension that existed between recognizing individuals' narratives and describing shared experiences when crafting the vignettes.

The choice of presenting the vignettes separately from the authors' analysis is deliberate, following for instance Claeys et al. (2025), Crocker et al. (2021), and Knight et al. (2023). However, a short analysis paragraph has been included for each vignette to better explain the analytical work that preceded each narrative.

The creation of the vignettes followed Claeys et al.'s (2025) instructions for organizing vignettes. Five themes were developed, each with sub-themes, following the analytical process (see the results section). First, relevant quotes for each theme, and sub-theme, were drawn from the coded transcripts. Second, these quotes were combined into outlines of fictional testimonials. Finally, a full initial draft of each vignette was produced by linking the relevant quotes for each theme with sub-themes structuring the vignette's sub-sections, and shaping them into a testimonial format.

A visualization of the steps undertaken during the QUAGOL analysis, and the creation of the vignettes, can be found in Figure 2.

Table 1. Overview of the creation of the composite vignettes based on coded excerpts from the participants' stories.

		Vignette 1	Vignette 2	Vignette 3	Vignette 4	Vignette 5
Kuregem	Participant KU_1	X	X		X	X
	Participant KU_2		X	X		X
	Participant KU_3	X	X	X		X
	Participant KU_4	X	X	X	X	X
	Participant KU_5		X		X	
	Participant KU_6	X	X	X	X	X
	Participant KU_7	X			X	X
	Participant KU_8	X	X	X	X	X
	Participant KU_9	X	X	X	X	X
	Participant KU_10			X		X
	Participant KU_11	X	X		X	X
	Participant KU_12	X	X	X	X	X
Brabantwijk	Participant BW_1			X		X
	Participant BW_2	X			X	
	Participant BW_3	X	X	X	X	X
	Participant BW_4	X				
	Participant BW_5	X	X	X	X	
	Participant BW_6	X	X		X	
	Participant BW_7	X	X	X	X	X

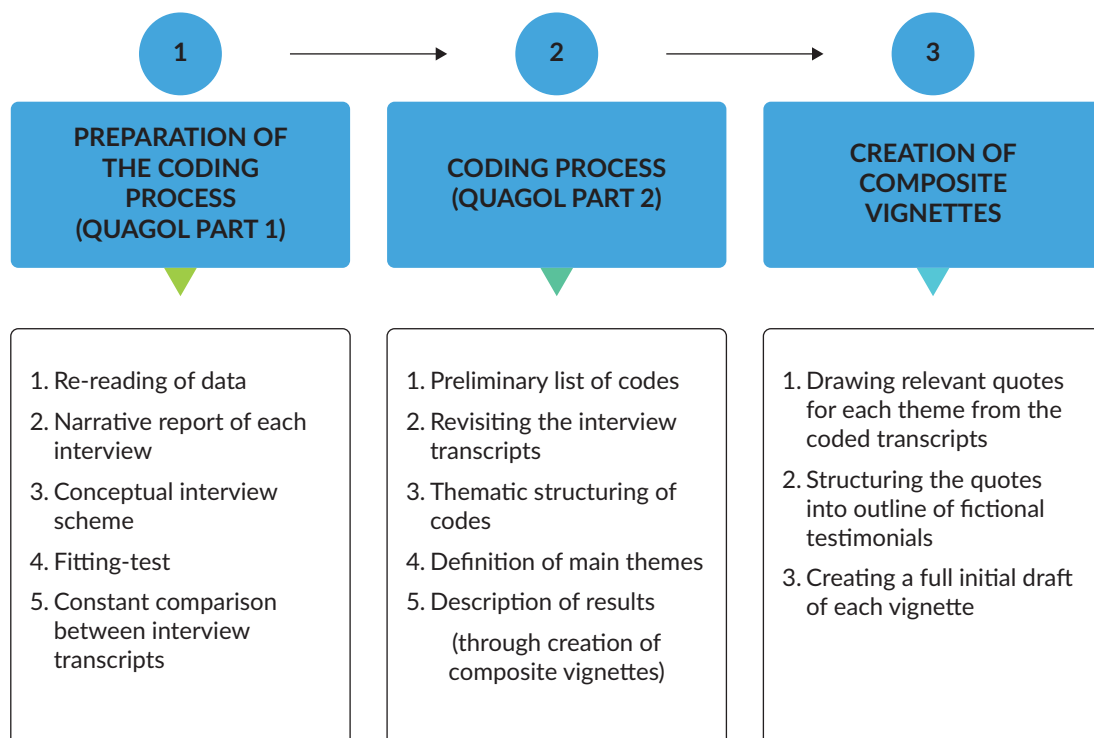


Figure 2. Visualization of the steps undertaken during the QUAGOL analysis and the creation of the vignettes.

In the results section, direct quotes from the transcripts are *italicized* to clearly distinguish the participants' own words from the constructed narrative within the vignettes. By marking these direct quotes, the vignettes do justice to the authenticity of the participants' voices while also showing how their narratives have been woven together to capture broader thematic patterns. These original quotes were in most cases translated from Dutch ($n = 6$) or French ($n = 12$) to English. A third interview language was English ($n = 1$).

2.7. Ethical Considerations

Ethical approval was obtained from the Institutional Review Board VUB: Human Sciences Ethics Committee (ECHW_324 / Date ethical approval: 8 December 2021).

Since the first author was neither an older adult nor a local resident and had not personally faced socio-economic challenges or health issues, it was essential to approach the research with humility, sensitivity, and a commitment to accurately and transparently conveying the experiences of persons who are often marginalized. This aligns with Dwyer and Buckle's (2009) perspective that researchers do not need to be part of the group they study to understand and represent participants' experiences effectively. However, Dwyer and Buckle (2009) emphasize the importance of being open, honest, authentic, and genuinely interested in participants' perspectives. To foster this connection, the first author consistently spent time in the neighborhoods, engaged with participants on multiple occasions, and actively sought their feedback. Holmes (2020) suggests that such familiarity may enhance participants' trust in the researcher. Additionally, the inclusion of life diagrams during data collection fostered reflection and prioritized participants' narratives. Flexibility was also key, allowing participants to determine the timing and location of their interviews.

During the interviews, participants were given the opportunity to ask questions or express their concerns. All participants were given clear information (e.g., about the research, their right to withhold or withdraw information, or to decline to answer questions they deemed sensitive). They also signed an informed consent. In a few cases, a break was provided during the interviews, as life story interviews can be long and exhaustive.

During the analysis, the first author took the lead, while all co-authors analyzed different parts of the data, provided feedback during the various phases in the coding process, and discussed the (intermediate) results as a group. The authors reflected as much as possible, both individually and collectively, on their positionality and personal biases. For example, all members of the research team have experience working with older adults, while some have personal experience with informal care, and some live in urban areas. Implicit notions of what informal help means for older adults in disadvantaged urban neighborhoods were constantly questioned and re-thought throughout the research process.

3. Results

3.1. RQ1: Neighborhood Change and Social Networks

Through the described analytical process, two main themes were created with regard to how participants' social networks connected to neighborhood change: "Changes in population composition have reduced social networks" and "Declining safety and neighborhood decay reduce familiarity with one's direct environment." These themes portray a shared narrative of adverse change in the neighborhoods, present in

most of the interviews. Although, at times, positive changes were referred to by participants, this was not further developed as a theme or a sub-theme. The themes are presented through two composite vignettes, and each is introduced by a short analytical section.

3.1.1. Vignette 1: Changes in Population Composition Have Reduced Social Networks

This first vignette is organized around three sub-themes. The first sub-theme shows how participants felt that, in the past, there used to be a strong sense of community in their neighborhood, exemplified through opportunities for civic engagement. Knowing one another or having organizations and other facilities nearby were deemed important for community building. However, the second sub-theme of the vignette shows how neighborhood changes, and more particularly ongoing in- and out-migration, have, in the words of the participants, decreased opportunities for establishing new social networks over the years. In the third sub-theme, participants expressed feeling less part of their neighborhood community today:

In the past, I knew what the neighborhood had to offer. The environment came to life with organizations, shops, and bars, offering numerous opportunities for engagement. Back then, *we were good neighbors to each other*. People knew each other.

With migrants, contact is often good, but it is not the same. Social networks have considerably decreased. Moreover, having lived here for a long period of time, I have witnessed how the neighborhood's population has changed. Several of the people I know are still here, and many have left, but *I am not sitting in front of the window all day to keep track of who comes and goes*. In this context, creating new social networks requires effort and adaptation. The arrival of different groups of people has made it difficult to communicate with others. The question is: How can one engage with his or her neighbor, when the neighborhood population is constantly changing?

Now, *I am sort of the neighborhood's furniture*. With time, my close circle of friends has been reduced, because those persons have died. Others have simply moved out. The people who say hello to me in the neighborhood have become scarce. I feel disconnected from many of my current neighbors, even though fostering relationships remains important to me. Today, *I do not even know my neighbor's name*. Over the years, the vibrant spirit that once was present in this neighborhood has disappeared. *It is everyone for themselves here*.

Overall, this vignette shows how, for the participants, neighborhood cohesion has drastically deteriorated due to the adverse changes in the population composition (e.g., people leaving, different groups arriving), which resulted, in their view, in estrangement between neighbors (e.g., "I do not even know my neighbor's name").

3.1.2. Vignette 2: Declining Safety and Neighborhood Decay Reduce Familiarity With One's Direct Environment

This second vignette is also organized around three sub-themes. The first sub-theme illustrates how older adults' experience of neighborhood decay, such as the increased socio-spatial density in, or the declining general appearance of, the neighborhood, has made them "very uneasy" (e.g., through houses that are demolished, a decline in the neighborhood's appearance). The second sub-theme looks deeper into a general

sentiment of insecurity among participants. This feeling is represented in the vignette by, for instance, the realization that the world is becoming “raw and deranged” and that children no longer play on the streets. In the third sub-theme of the vignette, participants emphasized a decrease in social networks and a diminished sense of community due to the adverse neighborhood changes mentioned earlier:

Here, it is a ghetto! Many of the old houses have been replaced or demolished, and there has been a decline in the general appearance of the neighborhood. The streets are befouled with litter. Nowadays, everything feels congested here. Time has not stood still. It is hard to imagine that this was once a spacious environment. There is rampant poverty in the neighborhood. This makes me very uneasy.

Yes, this is a dangerous neighborhood. There has been a downturn in safety, and I have often been swindled, a lot of times. In the past, children used to play in the street. Now, the neighborhood has changed. I regularly feel afraid, and throughout the years, I have become increasingly reluctant to go out by myself. The world is becoming raw and deranged. I have found myself in unfavorable situations far too often here.

These neighborhood changes have had an impact on my life. I do not dare go anywhere on my own anymore. I am telling you: I have lost all sense of anything and that scares me. Neighbors who had the financial means have left when they had the chance. Some people have understood: “We are not staying here with our children. We are gone.”

In this vignette, participants expressed a sense of place detachment (Lau et al., 2021), together with increased feelings of insecurity and discomfort in their neighborhoods (e.g., “yes, this is a dangerous neighborhood”), which, in their view, reduced their social networks (e.g., neighbors moving away).

3.2. RQ2: Current Informal Help

Regarding the current informal help of older adults as long-term residents in disadvantaged urban neighborhoods, three primary themes were created: “Decreased social networks lead to reduced informal help,” “Being a long-term resident means helping others,” and “Local community centers are places where neighbors meet and help each other.” The three themes are explained through three composite vignettes, and each is introduced by a short analytical section.

3.2.1. Vignette 3: Decreased Social Networks Lead to Reduced Informal Help

This third vignette consists of three sub-themes. The first sub-theme shows how opportunities for bonding have become scarce in the neighborhood. Participants spoke of shutting themselves off and, as a result, detaching themselves from neighborhood relations. Conversely, other participants spoke about being shut off because they do not know their neighbors anymore. Nevertheless, they also talked about providing informal help to others, even though they downplayed this informal help, explaining that it cannot really qualify as volunteering. In the third sub-theme, participants discussed how their help towards others has diminished, for various reasons, which can be for instance individual (e.g., fear of being falsely accused of theft), or socio-demographic (e.g., the observation of an increasing number of young people in the neighborhood):

From time to time, I feel the urge to talk to my neighbors, but initiating more profound conversation is not easy. *Perhaps, at my age, I have shut myself off somewhat.* Opportunities are also scarce. In this sense, my neighborhood has not given me much. In my building, at church, or in public places, I see unfamiliar faces among an increasingly younger generation. *I do not even know my new neighbors anymore.* Even though I always say hello to the persons I come across, *those contacts remain shallower.*

Sometimes I donate some money, or I prepare sandwiches for those in need. Yes, I help, *but in a way that you do not even notice.* I can give a hand when someone asks for support, but the small help I give to those around me *cannot truly qualify as volunteering.*

Also, my help towards others has decreased. A lack of confidence in others has put a strain on the help I give. *I am involved in helping, but never at others' homes.* I am too afraid of being falsely accused of stealing something. My age plays a role as well. *Now, there are a lot of young people. I am still standing, you know, that is not the problem, but for how long? I do not know.*

This vignette illustrates how the participants reflected on their current informal help. This informal help mainly consisted of small helping behaviors (e.g., donating money, preparing sandwiches) that were frequently undervalued by the participants (e.g., “in a way that you do not even notice”).

3.2.2. Vignette 4: Being a Long-Term Resident Means Helping Others

This fourth vignette is made up of two sub-themes. The first sub-theme, which spans the first two sections of the vignette, shows how the older adults in this study engaged in informal help because they felt responsible for their neighbors. They spoke about leading by example, which included offering advice to neighbors or donating items to those in need. The participants placed high importance on exerting a positive influence on others. The second sub-theme (represented by the last section of the vignette) expands further on this, as participants talked about how the informal help they provided was even motivated because of, and not despite, the fact that they lived in a disadvantaged urban neighborhood:

For me, the neighborhood is my engagement. It is important to support newcomers, especially considering their unfamiliarity with the area. Also, I feel a sense of responsibility for my environment, which drives me to help others. I lead by example: I go out by bike to show that one does not always need a car for getting around, or I repair discarded items to donate them afterwards. Neighbors come to me for advice, whether it is the woman next door seeking social housing, someone inquiring about home-buying, or a person asking for an address. I gladly help them. *People know me, sometimes more than I know them, from the fact that I have lived here for so long.*

I prioritize being a positive influence on others, and people respect me for this. *I leave the problems in my life at home when I go out.* For instance, there are people who beg for money in the street. I sometimes provide financial support, but more often *I send them to associations to eat or sleep.* I prefer to help others quietly. *There is no need to let people know.* I see my help as a personal undertaking that benefits both me and others.

Certainly, *you notice that this is a neighborhood with a lot of challenges, a lot of deprivation, and that there is work to be done there, but that stimulates you to make an extra effort.* Showing the best version of myself

is therefore crucial, particularly because *more and more people are forced to live on the streets and many people are losing their jobs.*

This vignette shows how, partly due to the precarious context of the neighborhood, it was important for the participants to show a good example by helping others, using their environmental knowledge as long-term residents (e.g., referring persons to associations). As is also the case in Vignette 3, the participants' stories bring to the fore how participants downplayed their informal help to others, seeing it rather as a personal endeavor than as a contribution to society.

3.2.3. Vignette 5: Local Community Centers Are Places Where Neighbors Meet and Help Each Other

This fifth vignette represents three sub-themes. The first sub-theme illustrates how most of the older adults in this study participated in activities organized by local community centers to engage with neighbors. In some instances, they even organized their own activities. Moreover, in the second sub-theme, the emphasis lies on the fact that these local community centers were thought of as places that stimulate informal help. Interactions in these spaces contributed to overcoming the feelings of disconnection from one's environment that participants expanded on in Vignette 1 and 2. Some participants even spoke about having found a family. The third sub-theme of this vignette shows how these local community centers serve as places for seeking help as well as providing it:

If you take part in something with others, your heart opens. I have been coming here (i.e., local community center) for a few years now, and I am happy to encounter many different people. I come here to participate in the various activities offered. I also organize my own activities for others, such as collective laughing exercises and language exchanges.

Nevertheless, *the main reason why I come here is to communicate and share stories.* Although initiating interactions with strangers can be overwhelming, this space helps me to overcome this initial fear. I said to myself at some point that I did not want to be confined to my house anymore. *Sometimes, there are interiors where you do not feel like staying.* Here, people value your company. I rarely feel lonely. This place makes me feel connected, newcomers are welcomed, and you experience what the neighborhood has to offer. Here, *I have found a family.*

I have also found the courage to engage with and help others when they ask for it. For instance, *when I ask someone for help, there is always somebody to lend a hand.* In my view, it is the social role of this place that is so important. *Giving to others, I do it gladly, and here, it just works.* As an example, there is a visitor here who comes regularly to eat. He has difficulties walking, and as soon as I see him, *I let him sit down and I collect the food for him, and then sit with him. He even calls me "my wife" (laughs). And at times, he has a problem with his eyes. So, anytime he comes, he will bring the medication, and I administer it on the eye.*

This vignette illustrates the importance of local community centers as places for meeting and providing informal help (e.g., "giving to others, I do it gladly, and here, it just works"). This informal help sometimes even resulted in more sustained forms of caring relations (e.g., collecting food for others or providing companionship).

4. Discussion

The present study examines the informal help older adults give to others, as well as their social networks, which are important elements of caring communities (De Donder et al., 2024). More particularly, the emphasis is on how changes in neighborhoods affect the social networks and informal help of older adults as long-term residents in two disadvantaged urban neighborhoods in Brussels, Belgium. This study highlights the adverse impact of neighborhood changes on the social networks of older adults. Changes in population composition, but also declining safety and neighborhood decay, resulted in a general sense of unfamiliarity with one's direct environment. Participants also reported that it has become more difficult to provide informal help due to decreased social networks. Nevertheless, as a reaction to those changes, the participants of this study show that they are not passive bystanders: They actively help neighbors as well. The informal help they provide is spurred on by the unique knowledge and expertise that long-term residents possess, and through local community centers that stimulate informal help among neighbors. This discussion is centered around four overarching take-aways from the results section, namely "Adverse neighborhood change might lead to being 'stuck in place' or staying in place," "Older adults exhibit strategies of resistance through their informal help," "Local community centers are important for informal help," and "Care co-evolves with the neighborhood environment through time."

4.1. Adverse Neighborhood Change Might Lead to Being "Stuck in Place" or Staying in Place

There seems to be a relationship between population change, feelings of insecurity in neighborhoods, and the social capital of its long-term residents (see De Donder et al., 2012; Versey, 2018). Sometimes, the neighborhood changes mentioned by participants were related to specific events. In Brabantwijk, participants spoke about the construction of high-rise apartments and office buildings that decreased social networks. In Kuregem, participants referred to specific points in the 1960s when migration started. However, more frequently, these were narratives of decline that were not associated with particular points in time, but instead reflected shifts in participants' feelings about neighborhood use and social connections. These adverse neighborhood changes, embedded in the neighborhood's life course, have had implications for older adults' understanding of their direct environment. Several of the participants' narratives confirm that both their social networks and neighborhood cohesion were stronger prior to the neighborhood changes. This is a well-known dynamic in so-called transitional urban neighborhoods (Mahbubur & Mandarano, 2021), reinforcing the conclusion often found in the literature that living in a disadvantaged urban neighborhood might deprive these older adults of close and stable social networks (Cornwell & Behler, 2015).

R. J. Smith et al. (2018) refer to these older adults as being "stuck in place." The authors further explain how older adults in changing neighborhoods often lose the stable social networks that previously made them feel part of the neighborhood community, while simultaneously lacking the financial means to relocate. However, the study at hand requires some nuance: Most participants in fact expressed the loss of social networks and a sense of community in their neighborhoods, but some made a conscious decision to stay, even when their financial situation might have permitted them to move elsewhere. It is in these cases not a matter of being stuck in place, but rather a positive decision to stay. Similarly, several studies suggest that diverse groups of older adults respond in various ways to neighborhood change, which in turn impacts their attachment to place (Burns et al., 2012; Lecovich, 2014). The findings of the current study also allude to how changes in

the neighborhood's composition may not necessarily lead to decreased social networks, as, for instance, local community centers can foster new networks between neighbors. This highlights the complex ways in which older adults experience neighborhood change, and how they maintain a feeling of attachment to their neighborhoods.

4.2. Older Adults Show Strategies of Resistance Through Their Informal Help

This study highlights how older adults living in disadvantaged urban neighborhoods, and particularly long-term residents, show strategies of resistance. Previous research confirms that adverse neighborhood changes might erode older adults' social networks, leaving them more vulnerable to social isolation and exclusion (e.g., Dahlberg, 2020; Versey, 2018). However, the participants in this study did in various cases talk about informally helping neighbors. These forms of informal help, while at times downplayed by the same participants, can be seen as important "strategies of resistance" that long-term residents use to resist pressures of exclusion resulting from adverse neighborhood change (Buffel & Philipson, 2019; Lees et al., 2018). These "strategies of resistance" range from still engaging in neighborly informal relations, although reduced through altered social networks, to actively helping neighbors through one's environmental knowledge as a long-term resident.

Moreover, informal neighborly care relations in the face of adverse neighborhood change are stimulated through various forms of community capital (Wild et al., 2013), such as using one's knowledge of the neighborhood's history, or spatial capital, being the ability to navigate the neighborhood's geography (De Decker, 2023). This spatial capital is derived from one's "autobiographical insideness" (Rowles, 1983). One other important concept to better understand these strategies of resistance is that of "natural neighborhood networks" (Gardner, 2011), which, although diminished over time, still enable the participants of this study to help neighbors. These different forms of capital are pivotal for the participants of this study for maintaining place attachment and supporting others in the neighborhood through the informal help they give, even in the face of adversity throughout the neighborhood's life course.

4.3. Local Community Centers Are Important for Informal Help

The findings spotlight the crucial role of local community centers for strengthening participants' informal help and their social networks. Informal help among neighbors is often less profound when there is no or low personal relationship between them (Volckaert et al., 2021). Local community centers can thus be vital platforms for facilitating social interactions and stimulating the informal help of older adults. As venues that encourage relationships and foster a feeling of community between neighbors in the face of declining social networks, these local community centers have become an essential part of the neighborhoods' social infrastructure, and they provide diverse possibilities for older adults to interact with others and engage in new social networks (Yarker, 2019).

In this research, the vital role of local community centers as places for connection, for accruing bridging social capital, or for fostering meaningful neighborhood networks is confirmed, in conjunction with broader research (see De Donder et al., 2024; Lewis et al., 2023). Many participants attested that the local community center is a place where one engages with persons one would likely never have met otherwise. Participants described their involvement in recurrent social interactions through the local community center. These interactions are

important, as they often involve reciprocal help between neighbors. Haleboua and Johnson (2021) talk about the importance of “chance encounters” and how opportunities in the neighborhood for meeting others are pivotal for neighborhood caring relations. In the studied neighborhoods, local community centers appear to facilitate, but also enhance and solidify, these chance encounters.

Similarly, local community centers serve as places where one engages in neighborly care, such as participating in activities together, providing others with food or medication, or just chatting up with neighbors. Care is a broad concept that “includes everything we do to maintain, continue, and repair our world so that we can live in it as well as possible” (Fisher & Tronto, 1990, p. 103). In the interviews conducted for this study, numerous activities that were identified as informal care for neighbors and the neighborhood are examples of this broad notion of care. Participants spoke about maintaining and continuing social interaction and informal help through local community centers, as is exemplified by their expression of using the space to “communicate and share stories.” Participants spoke about activities that can be considered repairing as well, such as providing care for somebody else through collecting food or administering medicine. As such, participants’ stories suggest that caregiving is entangled with the material infrastructure that local community centers provide.

4.4. Care Co-evolves With the Neighborhood Environment Through Time

This study has enriched the debate around how care interrelates with the neighborhood environment during the life course, while adopting an “ethics of care” approach. The concept of care is a holistic and relational practice that describes a process, rather than one single activity (Fisher & Tronto, 1990). Gardner (2011) explains how thinking about caring through the lens of neighborhood relations can shift the focus away from care as a one-way process, as is often the case in studies on caring dynamics within families or the household, while also helping us to think about care as reciprocal or interdependent. For instance, local community centers seem to be places where care and interdependence take shape. Participants, for instance, stated how they were able to help, but also ask for help. They therefore play a vital role in supporting this neighborly care.

Moreover, the two studied disadvantaged urban neighborhoods can be seen as places where care between neighbors still takes place, despite adverse neighborhood changes that have negatively impacted social networks. The addition of a “life course of place” perspective to the “ethics of care” approach brings the literature on the topic of older adults’ care relations further, as researchers are becoming aware that older adults’ lives are not only influenced by neighborhood features, but that they also contribute to their surroundings and this interaction co-evolves through time (e.g., Gott et al., 2024; Hand et al., 2020).

4.5. Implications for Research, Policy, and Practice

This article has focused on the effects of community change and neighborhood decay on older adults’ social networks and informal help in disadvantaged urban neighborhoods. This study aims to contribute to the theoretical lenses that researchers use to look at older adults in these neighborhoods. Future studies could benefit from a new synergy between alternative theoretical paradigms related to exclusion, life course, and the environment (Dikmans et al., 2025). Viewing person–place relations as dynamic and co-evolving (Oswald et al., 2024) is relevant in this sense. This article incorporates this view through using a “life course of place”

approach (Lekkas et al., 2017). Consequently, the findings of this study suggest that neighborhoods possess life courses characterized by neighborhood changes that shape the social networks and the informal help of residents.

It is pivotal for researchers, but equally for policymakers and practitioners, to recognize that older adults in disadvantaged urban neighborhoods have strategies of resistance in the face of adverse neighborhood change. A focus on how they informally help others surpasses a one-sided exclusion lens and recognizes how older adults, notwithstanding important adverse environmental changes, still informally help those around them through “natural neighborhood networks” (Gardner, 2011), or what Haleboua and Johnson (2021) call “chance encounters.” Policymakers and practitioners might want to focus more on creating opportunities for connecting people through activities, such as organizing clean-up days in neighborhoods or building a bus stop together. Urban design plays a crucial role in creating these opportunities (Aelbrecht & Quentin, 2023). Public investments in physical spaces are therefore needed to strengthen encounters between neighbors, especially those physical places in the neighborhood where residents can casually meet (Carstensen et al., 2022). For instance, so-called “third spaces,” being public or commercial venues that exclude the home and work environment (Finlay et al., 2024), are neighborhood sites where activities of “bonding” and “bridging” can take place. In these spaces, people come together to connect and feel part of their community. These spaces might even evolve into places of resilience (Golant, 2015).

This study has shown the role that local community centers play in strengthening social networks and stimulating informal help. Local community centers provide opportunities for creating and maintaining those routinized relations that might even evolve into more structural and recurring forms of informal care between older neighborhood residents. As older adults spend more time in their neighborhoods as they age, regular contact with and mutual support between neighbors become more important (Seifert, 2020). This realization is important to include in future policy and practice. Local authorities might, through for instance actively funding and supporting local community centers, foster aging in place of older adults in disadvantaged urban neighborhoods, an insight that is corroborated by other studies as well (see Dahlberg, 2020; Walsh et al., 2012). Nonetheless, it is important to be aware of the inclusionary and exclusionary mechanisms of neighborhood networks (Ruonavaara, 2022), and to remain conscious of who finds their way to, and therefore makes use of, local community centers, and who does not (Custers & Engbersen, 2022). Future community interventions could therefore invest in neighborhood encounters through formal spaces that value the contributions of diverse groups of older adults as a form of neighborhood care.

5. Strengths and Limitations

One strength of this study is its engagement with long-term residents of disadvantaged urban neighborhoods, a perspective that is often missing in discussions on aging and place (Buffel & Philipson, 2019). Second, this research looks at older adults’ experiences of neighborhood change in disadvantaged urban neighborhoods, which is a topic that has received increasing attention (e.g., Buffel et al., 2013; Scharf et al., 2005), but which remains frequently overlooked. Third, the combination of the QUAGOL analytical approach (Dierckx de Casterlé et al., 2012, 2021) and the use of narrative vignettes as a presentation style does justice to the shared narratives of participants. Fourth, an epistemological focus on “ethics of care” valorizes the informal help, albeit sometimes small, that older adults provide to their neighbors, highlighting the importance of micro-encounters in the neighborhood for stimulating neighborly care.

Nevertheless, two main limitations persist. Primarily, in the two neighborhoods, participants were mainly recruited through local community centers, possibly fostering the inclusion of older adults who are already more inclined to be an engaged neighbor. The chosen recruitment strategy could be a reason why most participants emphasize the role of local community centers in the informal help they give. To address this limitation, several participants were at a later stage recruited through location-based convenience sampling. Secondly, the choice of vignettes as a presentation style highlights common experiences but downplays individuals' unique and separate characteristics (Knight et al., 2023). For instance, more women were interviewed than men (six men against 13 women), but the vignettes do not account for the gendered nature of life course experiences (Hagestad & Dykstra, 2016). As such, the focus was on finding a common narrative and the chosen presentation style risks overlooking participants' narratives that might be contradictory to the findings, while also disregarding nuance in individual quotes (e.g., gaps, hesitations, silences) in favor of the collective storyline.

6. Conclusion

This study focuses on the altered social networks and the current informal help of 19 older adults, who are long-term residents of two disadvantaged urban neighborhoods in Brussels, Belgium (Brabantwijk and Kuregem). Two main neighborhood changes, namely changes in population composition and declining safety and neighborhood decay, were seen as conducive to the reduced social networks of the participants. This showcases the study's "life course of place" approach: Neighborhoods have life trajectories of their own that influence residents' lives (Lekkas et al., 2017). Equally, the current informal help provided by the participants decreased through reduced social networks, but being a long-term resident can spur on informal help. Local community centers can also be important places for creating informal connections. The main take-away lesson that this article offers is that the relationship between older adults' informal help toward neighbors and their neighborhood environments is entangled. Neighborhood changes reduced social networks, but the participants of this study showed agency through informally helping others. This can be seen as a form of resistance to adverse change, while changing their neighborhoods for the better. It is therefore important to highlight that the networks of neighborly care needed for a caring community to thrive do still exist in the studied disadvantaged urban neighborhoods.

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Conflict of Interests

The authors declare no conflict of interests.

Data Availability

For ethical reasons of safeguarding the anonymity and privacy of the research participants, the authors will not provide the original data.

Supplementary Material

Supplementary material for this article is available online in the format provided by the authors (unedited).

References

- Aelbrecht, P., & Quentin, S. (2023). Geographies of encounter, public space, and social cohesion: Reviewing knowledge at the intersection of social sciences and built environment disciplines. *Urban Planning*, 8(4), 63–76. <https://doi.org/10.17645/up.v8i4.6540>
- Blodgett, A. T., Schinke, R. J., Smith, B., Peltier, D., & Pheasant, C. (2011). In Indigenous words: Exploring vignettes as a narrative strategy for presenting the research voices of Aboriginal community members. *Qualitative Inquiry*, 17(6), 522–533. <https://doi.org/10.1177/1077800411409885>
- Bourdieu, P. (1986). The forms of capital. In J. Richardson (Ed.), *Handbook of theory and research for the sociology of education* (pp. 241–258). Greenwood Publishing Group.
- Brussels Instituut voor Statistiek en Analyse. (2021–2022). *Interactieve kaarten van statistische indicatoren*. <https://wijkmonitoring.brussels/kaarten>
- Buffel, T., & Philipson, C. (2019). Ageing in a gentrifying neighbourhood: Experiences of community change in later life. *Sociology*, 53(6), 987–1004. <https://doi.org/10.1177/0038038519836848>
- Buffel, T., Phillipson, C., & Scharf, T. (2013). Experiences of neighbourhood exclusion and inclusion among older people living in deprived inner-city areas in Belgium and England. *Ageing & Society*, 33(1), 89–109. <https://doi.org/10.1017/S0144686X12000542>
- Burns, V. F., Lavoie, J.-P., & Rose, D. (2012). Revisiting the role of neighbourhood change in social exclusion and inclusion of older people. *Journal of Aging Research*, 2012(1), Article 148287. <https://doi.org/10.1155/2012/148287>
- Butina, M. (2015). A narrative approach to qualitative inquiry. *Clinical Laboratory Science*, 28(3), 190–196. <https://doi.org/10.29074/ascls.28.3.190>
- Carstensen, T. A., Skytt-Larsen, C. B., Busck, A. G., & Søråa, N. G. (2022). Constructing common meeting places: A strategy for mitigating the social isolation of disadvantaged neighbourhoods? *Urban Planning*, 7(4) 486–498. <https://doi.org/10.17645/up.v7i4.5821>
- Claeys, A., Chaouni, S. B., Tricas-Sauras, S., & De Donder, L. (2025). Bridging the gaps: Narratives of informal carers of older migrants with dementia on professional care. *Ageing & Society*. Advance online publication. <https://doi.org/10.1017/S0144686X25000017>
- Coleman, J. S. (1988). Social capital in the creation of human capital. *American Journal of Sociology*, 94(1), S95–S120. <http://www.jstor.org/stable/2780243>
- Cornwell, E. Y., & Behler, R. L. (2015). Urbanism, neighborhood context, and social networks. *City & Community*, 14(3), 311–335. <https://doi.org/10.1111/cico.12124>
- Crocker, B., Chard, S., & Duncan, L. (2021). Composite vignettes of challenges faced by Canadian collegiate student-athletes negotiating the demands of university life. *Psychology of Sport and Exercise*, 55, Article 101937. <https://doi.org/10.1016/j.psychsport.2021.101937>

- Custers, G., & Engbersen, G. (2022). Linking social capital and organizational ties: How different types of neighborhood organizations broker resources for the urban poor. *Journal of Urban Affairs*, 46(10), 1992–2008. <https://doi.org/10.1080/07352166.2022.2137032>
- Dahlberg, L. (2020). Ageing in a changing place: A qualitative study of neighbourhood exclusion. *Ageing & Society*, 40(10), 2238–2256. <https://doi.org/10.1017/S0144686X1900045X>
- Deboosere, P., Eggerickx, T., Van Hecke, E., & Wayens, B. (2009). The population of Brussels: A demographic overview. *Brussels Studies*. <https://doi.org/10.4000/brussels.891>
- De Decker, P. (2023). *Space as capital: Or why geography matters for ageing*. Preprints. <https://doi.org/10.20944/preprints202304.0463.v1>
- De Donder, L., De Witte, N., Buffel, T., Dury, S., & Verté, D. (2012). Social capital and feelings of unsafety in later life: A study on the influence of social networks, place attachment, and civic participation on perceived safety in Belgium. *Research on Aging*, 34(4), 425–448. <https://doi.org/10.1177/0164027511433879>
- De Donder, L., Smetcoren, A.-S., Schols, J. M. G. A., van der Vorst, A., Dierckx, E., & D-SCOPE Consortium. (2019). Critical reflections on the blind sides of frailty in later life. *Journal of Aging Studies*, 49, 66–73. <https://doi.org/10.1016/j.jaging.2019.100787>
- De Donder, L., Stegen, H., & Hoens, S. (2024). Caring neighbourhoods in Belgium: Lessons learned on the development, implementation and evaluation of 35 caring neighbourhood projects. *Palliative Care and Social Practice*, 18. <https://doi.org/10.1177/26323524241246533>
- Dierckx de Casterlé, B., De Vlieghe, K., Gastmans, C., & Mertens, E. (2021). Complex qualitative data analysis: Lessons learned from the experiences with the Qualitative Analysis Guide of Leuven. *Qualitative Health Research*, 31(6), 1083–1093. <https://doi.org/10.1177/1049732320966981>
- Dierckx de Casterlé, B., Gastmans, C., Bryon, E., & Denier, Y. (2012). QUAGOL: A guide for qualitative data analysis. *International Journal of Nursing Studies*, 49(3), 360–371. <https://doi.org/10.1016/j.ijnurstu.2011.09.012>
- Dikmans, B., & Chacur, K. (2024). Rethinking life stories in the context of civic engagement: The life diagram and its potential for ageing and childhood research. In A. Wanka, T. Freutel-Funke, S. Andresen, & F. Oswald (Eds.), *Linking ages: A dialogue between ageing and childhood research* (pp. 49–65). Routledge.
- Dikmans, B., Dury, S., & De Donder, L. (2025). Older people living in disadvantaged urban neighbourhoods. In R. Serrat (Ed.), *Civic engagement in later life* (pp. 192–208). Bristol University Press.
- Duppen, D., Lambotte, D., Dury, S., Smetcoren, A.-S., Pan, H., De Donder, L., & D-SCOPE Consortium. (2020). Social participation in the daily lives of frail older adults: Types of participation and influencing factors. *The Journals of Gerontology: Series B*, 75(9), 2062–2071. <https://doi.org/10.1093/geronb/gbz045>
- Dury, S., Brosens, D., Pan, H., Principi, A., Smetcoren, A.-S., Perek-Białas, J., & De Donder, L. (2023). Helping behavior of older adults during the early Covid-19 lockdown in Belgium. *Research on Aging*, 45(1), 8–20. <https://doi.org/10.1177/01640275221105231>
- Dwyer, S. C., & Buckle, J. L. (2009). The space between: On being an insider-outsider in qualitative research. *International Journal of Qualitative Methods*, 8(1), 54–63. <https://doi.org/10.1177/160940690900800105>
- Finlay, J., Cannon, M., Meltzer, G., & Yeh, J. (2024). Aging in third spaces. In M. P. Cutchin & G. D. Rowles (Eds.), *Handbook on aging and place* (pp. 221–239). Edward Elgar Publishing.
- Fisher, B., & Tronto, J. (1990). Toward a feminist theory of caring. In E. Abel & M. Nelson (Eds.), *Circles of care* (pp. 36–54). SUNY Press.
- Fontes, C., & Cordeiro, G. I. (2023). Portraying urban change in Alfama (Lisbon): How local socio-spatial practices shape heritage. *Urban Planning*, 8(1), 110–120. <https://doi.org/10.17645/up.v8i1.6073>
- Gardner, P. J. (2011). Natural neighborhood networks—Important social networks in the lives of older adults aging in place. *Journal of Aging Studies*, 25(3), 263–271. <https://doi.org/10.1016/j.jaging.2011.03.007>

- Golant, S. M. (2015). Residential normalcy and the enriched coping repertoires of successfully aging older adults. *The Gerontologist*, 55(1), 70–82. <https://doi.org/10.1093/geront/gnu036>
- Gott, M., Wiles, J., Morgan, T., Williams, L., Morgan, K., Black, S., Koh, A., Fanueli, E., Xu, J., Goodwin, H., Pilimatalawwe, D., & Moeke-Maxwell, T. (2024). Older people's contributions during the Covid-19 pandemic response. *Journal of Aging & Social Policy*, 36(6), 1396–1416. <https://doi.org/10.1080/08959420.2024.2384322>
- Hagestad, G. O., & Dykstra, P. (2016). Structuration of the life course: Some neglected aspects. In M. J. Shanahan, J. T. Mortimer, & M. K. Johnson (Eds.), *Handbook of the life course* (pp. 131–157). Springer.
- Halegoua, G. R., & Johnson, B. J. (2021). Seeing like a neighbor: Rethinking neighborhoods as service-oriented communities. *Urban Affairs Review*, 57(6), 1730–1758. <https://doi.org/10.1177/1078087420924759>
- Hampton, K. N., & Wellman, B. (2018). Lost and saved...again: The moral panic about the loss of community takes hold of social media. *Contemporary Sociology*, 47(6), 643–651. <https://doi.org/10.1177/0094306118805415>
- Hand, C., Rudman, D. L., Huot, S., Pack, R., & Gilliland, J. (2020). Enacting agency: Exploring how older adults shape their neighbourhoods. *Ageing & Society*, 40(3), 565–583. <https://doi.org/10.1017/S0144686X18001150>
- Holmes, A. G. D. (2020). Researcher positionality: A consideration of its influence and place in qualitative research—A new researcher guide. *Shanlax International Journal of Education*, 8(4), 1–10. <https://doi.org/10.34293/education.v8i4.3232>
- Karunamuni, N., Imayama, I., & Dharshini, G. (2021). Pathways to well-being: Untangling the causal relationships among biopsychosocial variables. *Social Science & Medicine*, 272, Article 112846. <https://doi.org/10.1016/j.socscimed.2020.112846>
- Knight, R. L., Mackintosh, K. A., Hudson, J., Shelley, J., Saynor, Z. L., & McNarry, M. A. (2023). Battling the unknown: Using composite vignettes to portray lived experiences of Covid-19 and long-Covid. *PLoS ONE*, 18(4), Article e0284710. <https://doi.org/10.1371/journal.pone.0284710>
- Kurtenbach, S. (2024). Neighbourhoods and social cohesion: Why neighbourhoods still matter. *Built Environment*, 50(1), 73–94. <https://doi.org/10.2148/benv.50.1.73>
- Lambotte, D., Kardol, M. J. M., Schoenmakers, B., Fret, B., Smetcoren, A.-S., De Roeck, E. E., Van der Elst, M., De Donder, L., & D-SCOPE Consortium. (2018). Relational aspects of mastery for frail, older adults: The role of informal caregivers in the care process. *Health and Social Care in the Community*, 27, 632–641. <https://doi.org/10.1111/hsc.12676>
- Lau, U., Durrheim, K., & Young, L. S. (2021). Place detachment and the psychology of nonbelonging: Lessons from Diepsloot township. In C. M. Raymond, L. C. Manzo, D. R. Williams, A. Di Masso, & T. Von Wirth (Eds.), *Changing senses of place: Navigating global challenges* (pp. 103–115). Cambridge University Press.
- Lecovich, E. (2014). Aging in place: From theory to practice. *Anthropological Notebooks*, 20(1), 21–33. http://www.drustvo-antropologov.si/AN/PDF/2014_1/Anthropological_Notebooks_XX_1_levovich.pdf
- Lees, L., Annunziata, S., & Rivas-Alonso, C. (2018). Resisting planetary gentrification: The value of survivability in the fight to stay put. *Annals of the American Association of Geographers*, 108(2), 346–355. <https://doi.org/10.1080/24694452.2017.1365587>
- Lekkas, P., Paquet, C., Howard, N. J., & Daniel, M. (2017). Illuminating the lifecourse of place in the longitudinal study of neighbourhoods and health. *Social Science & Medicine*, 177, 239–247. <https://doi.org/10.1016/j.socscimed.2016.09.025>
- Lewis, C., Philipson, C., Yarker, S., & Lang, L. (2023). *Covid-19, inequality and older people: Everyday life during the pandemic*. Bristol University Press; Policy Press.

- Mahbubur, R. M., & Mandarano, L. A. (2021). Using photovoice and emotional maps to understand transitional urban neighborhoods. *Cities*, 118, Article 103353. <https://doi.org/10.1016/j.cities.2021.103353>
- Martinez, I. L., Crooks, D., Kim, K. S., & Tanner, E. (2011). Invisible civic engagement among older adults: Valuing the contributions of informal volunteering. *Journal of Cross-Cultural Gerontology*, 26, 23–37. <https://doi.org/10.1007/s10823-011-9137-y>
- Oswald, F., Wahl, H.-W., Wanka, A., & Chaudhury, H. (2024). Theorizing place and aging: Enduring and novel issues in environmental gerontology. In M. P. Cutchin & G. D. Rowles (Eds.), *Handbook on aging and place* (pp. 37–60). Edward Elgar Publishing.
- Phillipson, C. (2007). The 'elected' and the 'excluded': Sociological perspectives on the experience of place and community in old age. *Ageing & Society*, 27(3), 321–342. <https://doi.org/10.1017/S0144686X06005629>
- Putnam, R. D. (2000). *Bowling alone: The collapse and revival of American community*. Simon & Schuster.
- Rowles, G. (1983). Place and identity in old age: Observations from Appalachia. *Journal of Environmental Psychology*, 3(4), 299–313. [https://doi.org/10.1016/S0272-4944\(83\)80033-4](https://doi.org/10.1016/S0272-4944(83)80033-4)
- Ruonavaara, H. (2022). The anatomy of neighbour relations. *Sociological Research Online*, 27(2), 379–395. <https://doi.org/10.1177/13607804211012708>
- Rutherford, A. C., Bu, F., Dawson, A., & McCall, V. (2019). *Literature review to inform the development of Scotland's Volunteering Outcomes Framework: People, communities and places*. Scottish Government. <https://www.storre.stir.ac.uk/bitstream/1893/31598/1/literature-review-inform-development-scotlands-volunteering-outcomes-framework.pdf>
- Scharf, T., Phillipson, C., & Smith, A. E. (2005). Social exclusion of older people in deprived urban communities of England. *European Journal of Ageing*, 2, 76–87. <https://doi.org/10.1007/s10433-005-0025-6>
- Seifert, A. (2020). Day-to-day contact and help among neighbors measured in the natural environment. *Innovation in Aging*, 4(2), Article igaa009. <https://doi.org/10.1093/geroni/igaa009>
- Serrat, R., Scharf, T., & Villar, F. (2021). Mapping civic engagement in later life: A scoping review of gerontological definitions and typology proposal. *VOLUNTAS: International Journal of Voluntary and Nonprofit Organizations*, 33, 615–626. <https://doi.org/10.1007/s11266-021-00346-6>
- Sharifian, N., Sol, K., Zahodne, L. B., & Antonucci, T. C. (2022). Social relationships and adaptation in later life. *Comprehensive Clinical Psychology*, 7, 52–72. <https://doi.org/10.1016/B978-0-12-818697-8.00016-9>
- Smith, A. E. (2009). *Ageing in urban neighbourhoods: Place attachment and social exclusion*. Bristol University Press; Policy Press.
- Smith, R. J., Lehning, A. J., & Kim, K. (2018). Aging in place in gentrifying neighborhoods: Implications for physical and mental health. *The Gerontologist*, 58(1) 26–35. <https://doi.org/10.1093/geront/gnx105>
- Söderström, J. (2020). Life diagrams: A methodological and analytical tool for accessing life histories. *Qualitative Research*, 20(1), 3–21. <https://doi.org/10.1177/1468794118819068>
- Stewart, K., Hand, C., Rudman, D., McGrath, C., McFarland, J., Gilliland, J., & Kinghorn, W. (2024). Invisible, unrecognised and undervalued: Examining stories of unpaid work performed by older adults in their local neighbourhoods. *Ageing & Society*, 44(9), 2038–2064. <https://doi.org/10.1017/S0144686X2200126X>
- Sýkora, J., Horňáková, M., Visser, K., & Bolt, G. (2023). 'It is natural': Sustained place attachment of long-term residents in a gentrifying Prague neighbourhood. *Social & Cultural Geography*, 24(10), 1941–1959. <https://doi.org/10.1080/14649365.2022.2115534>
- Taei, A., Jönson, H., & Granbom, M. (2023). Crime, disorder, and territorial stigmatization: Older adults living in deprived neighborhoods. *The Gerontologist*, 63(5), 910–919. <https://doi.org/10.1093/geront/gnac159>
- Tanskanen, A. O., Hämäläinen, H., Arpino, B., & Danielsbacka, M. (2024). Prosocial activity in later life: Are informal help and care associated with volunteering and charity? *Ageing & Society*, 44(7), 1645–1680. <https://doi.org/10.1017/S0144686X22001015>

- Tronto, J. C. (2013). *Caring democracy: Markets, equality, and justice*. NYU Press.
- Versey, H. S. (2018). A tale of two Harlems: Gentrification, social capital, and implications for aging in place. *Social Science & Medicine*, 214, 1–11. <https://doi.org/10.1016/j.socscimed.2018.07.024>
- Volckaert, E., Schillebeeckx, E., & De Dekker, P. (2021). Beyond nostalgia: Older people's perspectives on informal care in rural Flanders. *Journal of Rural Studies*, 87, 444–454. <https://doi.org/10.1016/j.jrurstud.2020.07.006>
- Walsh, K., O'Shea, E., Scharf, T., & Murray, M. (2012). Ageing in changing community contexts: Cross-border perspectives from rural Ireland and Northern Ireland. *Journal of Rural Studies*, 28(4), 347–357. <https://doi.org/10.1016/j.jrurstud.2012.01.012>
- Wanka, A. (2018). Disengagement as withdrawal from public space: Rethinking the relation between place attachment, place appropriation, and identity-building among older adults. *The Gerontologist*, 58(1), 130–139. <https://doi.org/10.1093/geront/gnx081>
- Wild, K., Wiles, J., & Allen, R. (2013). Resilience: Thoughts on the value of the concept for critical gerontology. *Ageing & Society*, 33(1), 137–158. <https://doi.org/10.1017/S0144686X11001073>
- Wilson, J., & Musick, M. (1997). Who cares? Toward an integrated theory of volunteer work. *American Sociological Review*, 62(5), 694–713. <https://doi.org/10.2307/2657355>
- Yarker, S. (2019). *Social infrastructure: How shared spaces make communities work*. The University of Manchester Institute for Collaborative Research on Ageing. <https://www.ambitionforageing.org.uk/sites/default/files/Social%20Infrastructure%20Report.pdf>
- Yarker, S. (2022). *Creating spaces for an ageing society: The role of critical social infrastructure* (1st ed.). Emerald Publishing.

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