

SOCIAL INCLUSION, EXCLUSION AND LONELINESS IN NEIGHBOURHOODS

AN INTERNATIONAL PERSPECTIVE



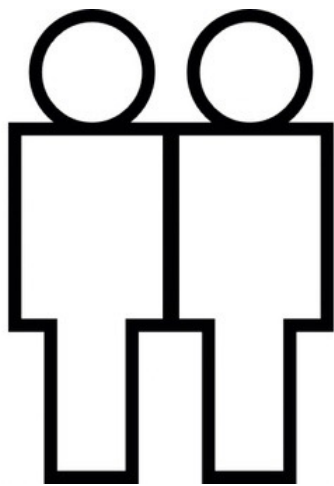
VRIJE
UNIVERSITEIT
BRUSSEL

Hannelore Stegen
Prof. Sarah Dury

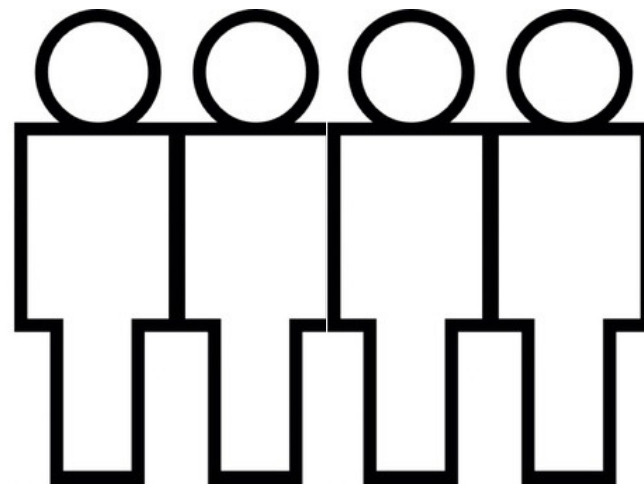
FEELINGS OF LONELINESS

Loneliness is defined as a subjective, unpleasant, and distressing phenomenon resulting from a discrepancy between an individual's desired and achieved levels of social relations (Perlman and Peplau, 1982).

Weiss (1973)



Emotional loneliness



Social loneliness

A. SOCIAL LONELINESS



- Lack of a broader network of social relations

"Until recently, I had a busy job, and I didn't have the time to invest in friendships. And well, now that I'm retired, I don't have many friends anymore." (67-year-old woman)

B. EMOTIONAL LONELINESS



- Lack of close, intimate relationship(s)

"It was very difficult to let go. The two of us lived very intensively together. We had no children, we only lived to love each other..... I miss her every day...."
(74-year-old man)

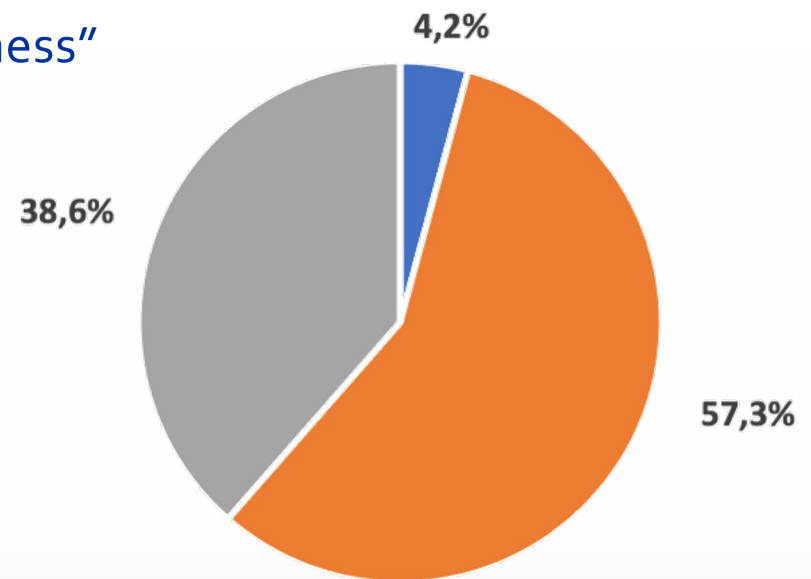
C. EXISTENTIAL LONELINESS

- Originally a philosophical point of view
- Unavoidable part of life: self-confrontation
- Inner process of doubt and uncertainty
- Path to self-growth, strength and inspiration

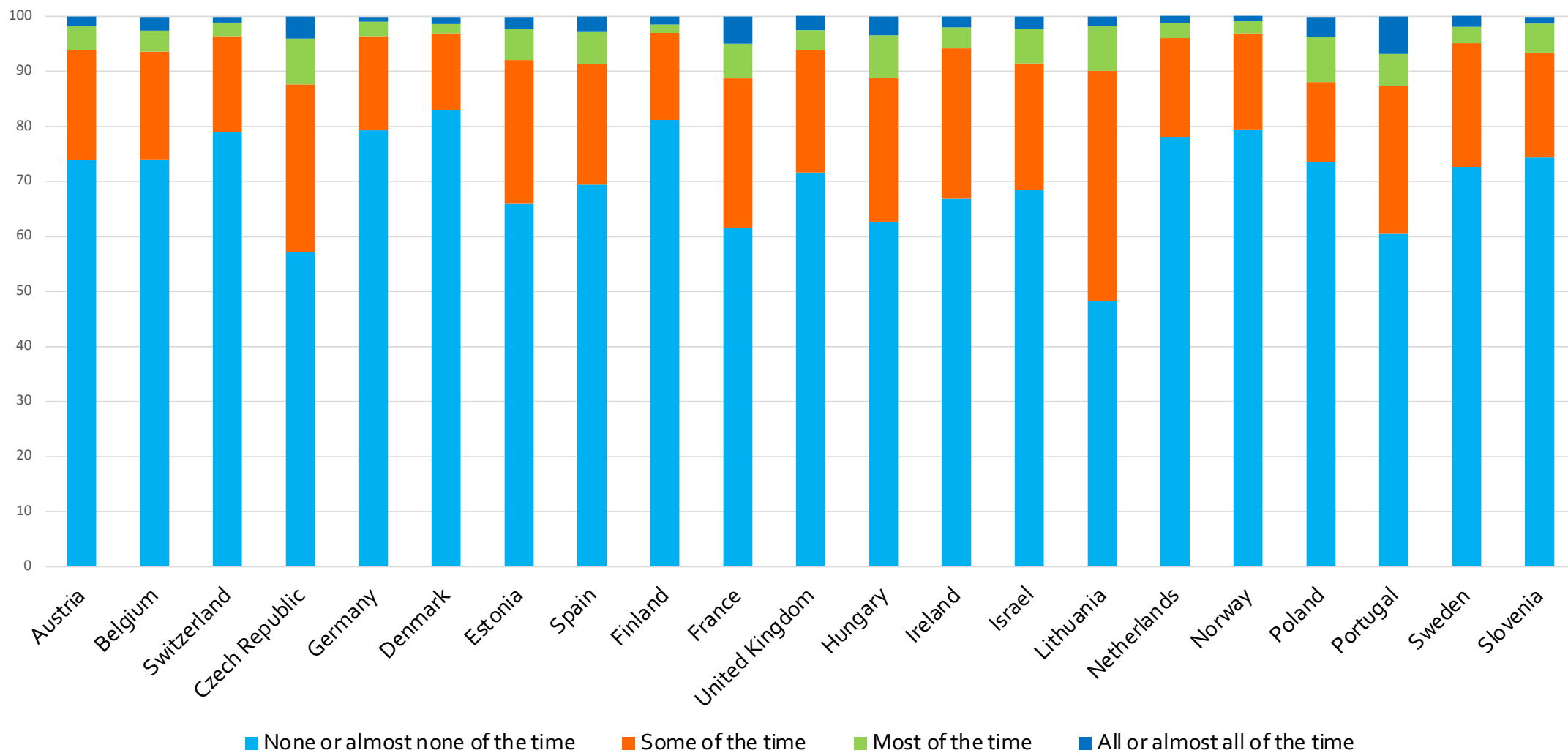


D. POSITIVE LONELINESS?

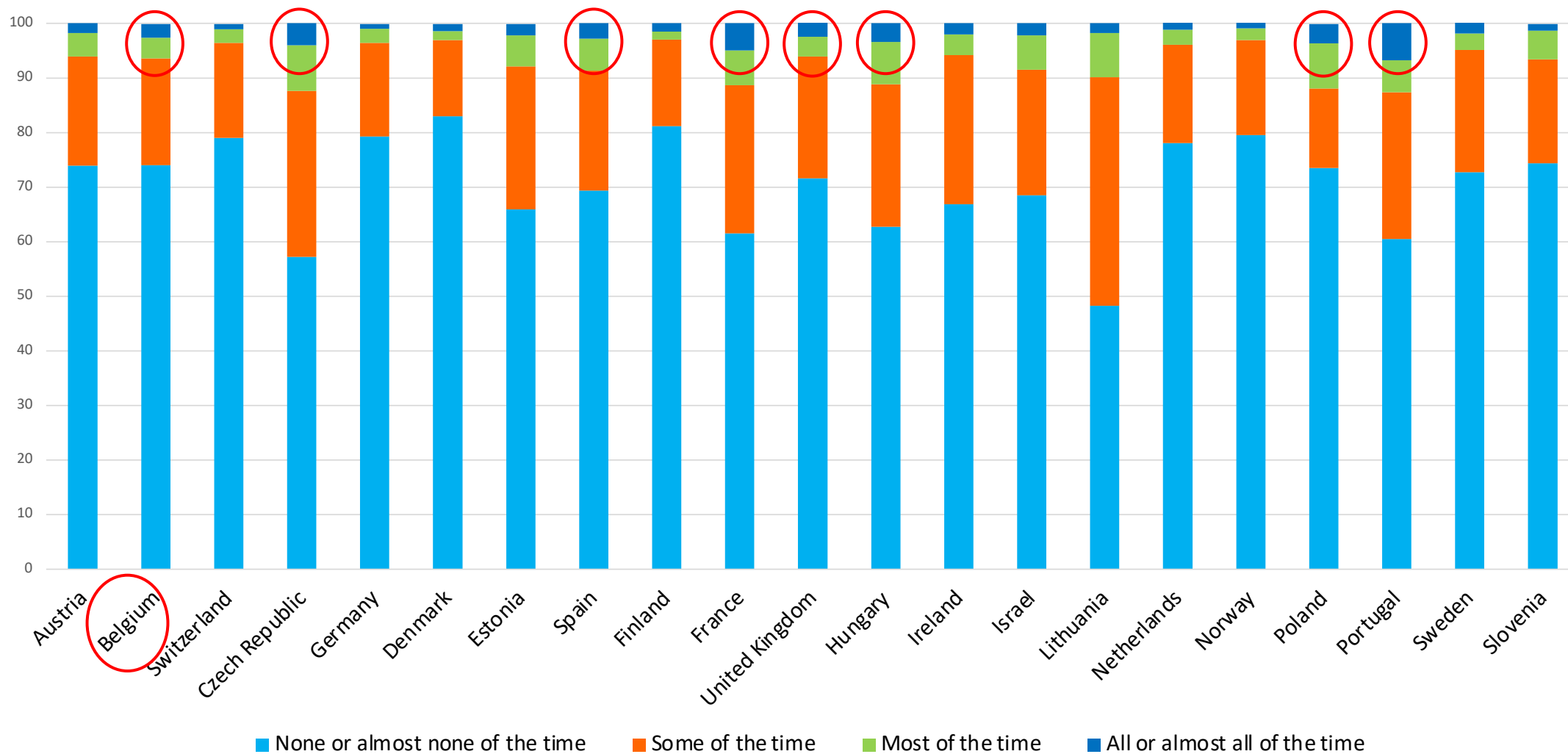
- Voluntary (mostly temporary) withdrawal from social contacts, oriented toward goals such as reflection, meditation, dedication toward writing or painting, and communication with God
- BUT: rather: “positive consequences of loneliness”
- BBC Loneliness Experiment: 60+ UK
 - Is the experience of loneliness positive?
 - 4.2% - yes
 - 57.3% - no
 - 38.6% - sometimes



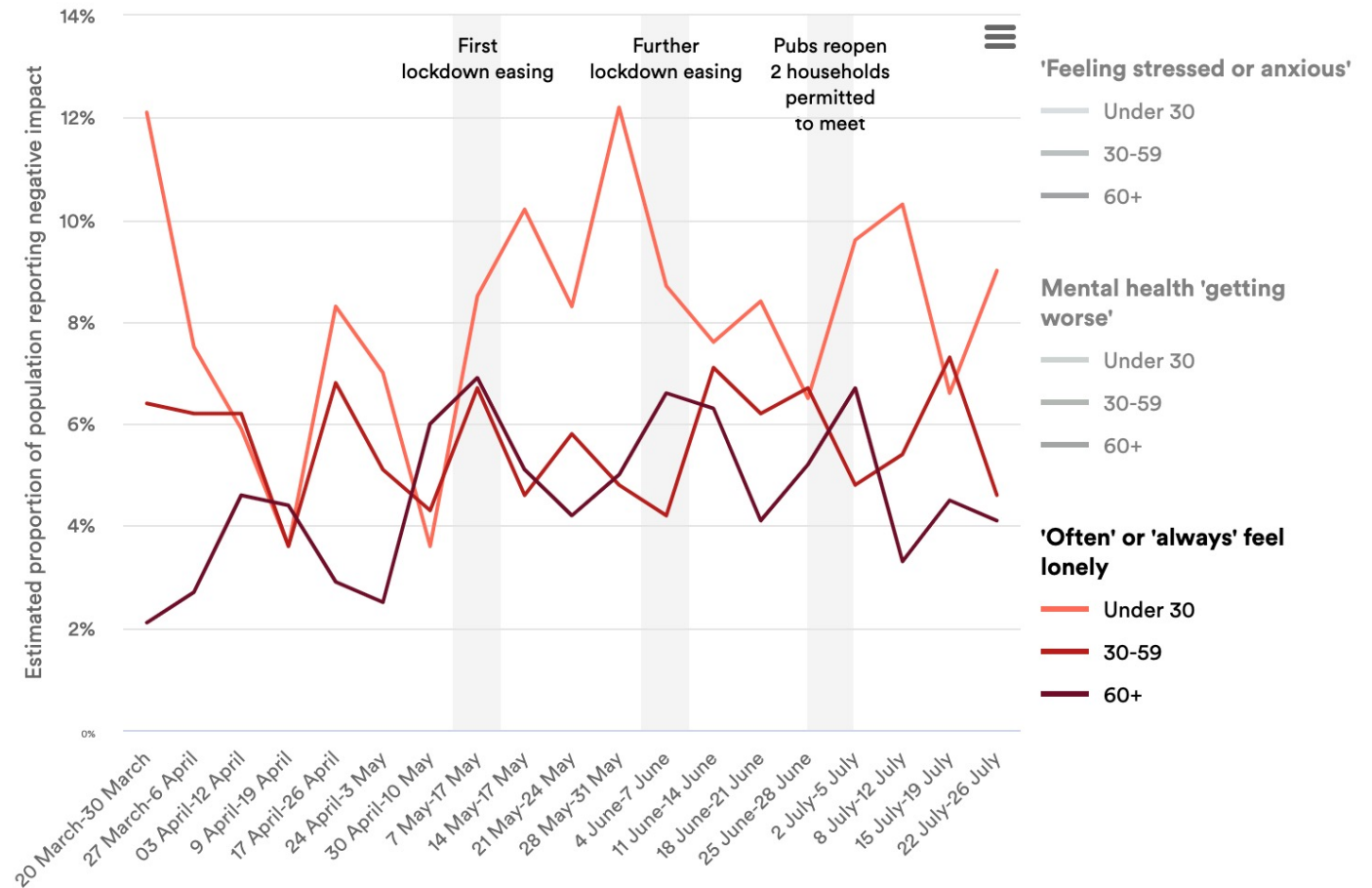
FEELING LONELY FROM THE EUROPEAN SOCIAL SURVEY 2014



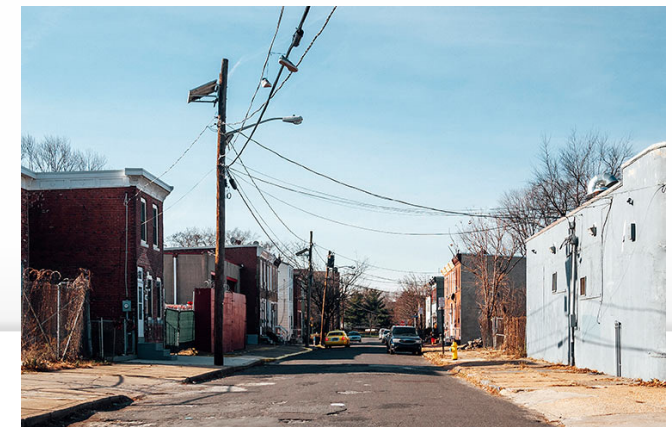
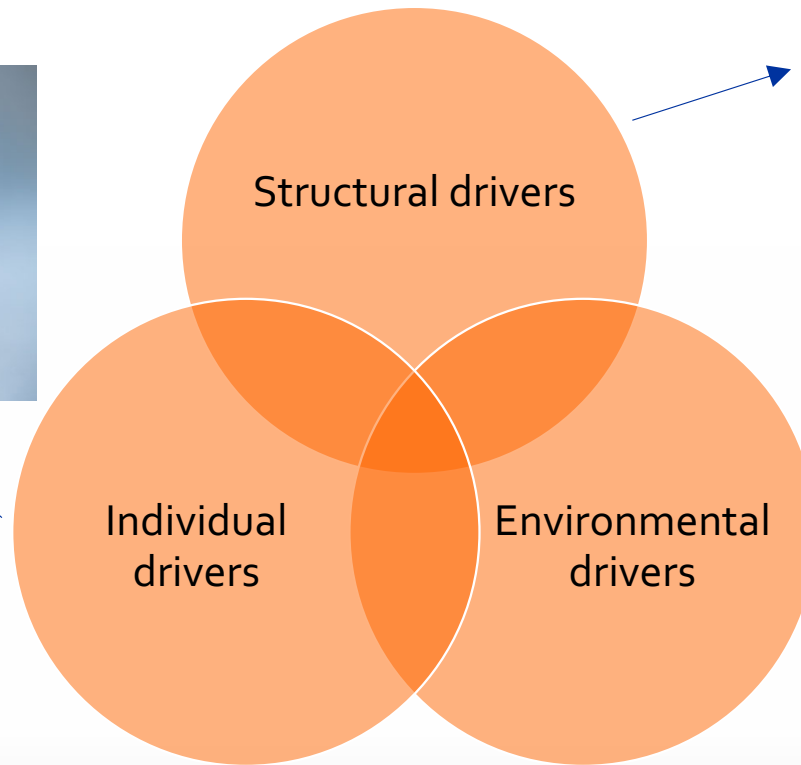
FEELING LONELY FROM THE EUROPEAN SOCIAL SURVEY 2014



LONELINESS DURING THE COVID PANDEMIC (2020) - UK



RISK FACTORS



BELGIUM



BACKGROUND

- Looking at loneliness in later life from an ecological framework (i.e., Bronfenbrenner 1979)
- Employs a multidimensional and multifaceted view: loneliness as the outcome of the interaction among **individual** (micro), **relational** (meso), **community-level** (exo), and **societal** (macro) factors
- Environmental gerontology: need to optimize the relationship between aging persons and their physical and social environments

DATA AND METHODS

BELGIAN AGEING STUDIES

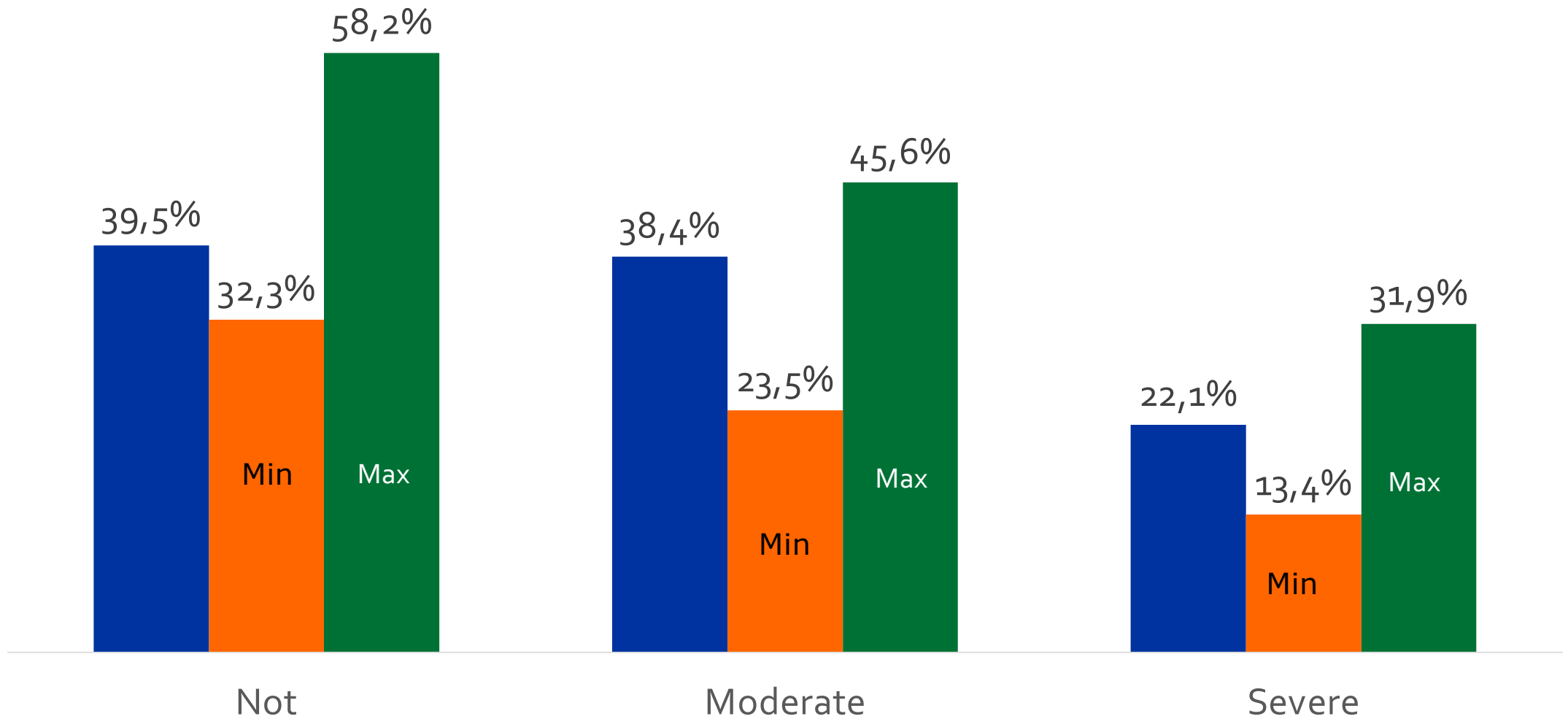
Large scale survey

- Rural areas: N = 1,673 older people (60+)
- Semi-rural areas: N= 7,949 older people (60+)
- Semi-urban areas: N= 11,993 older people (60+)
- Urban areas: N = 12, 879 older people (60+)
- Total : N = 33,694 older people (60+) in 79 municipalities

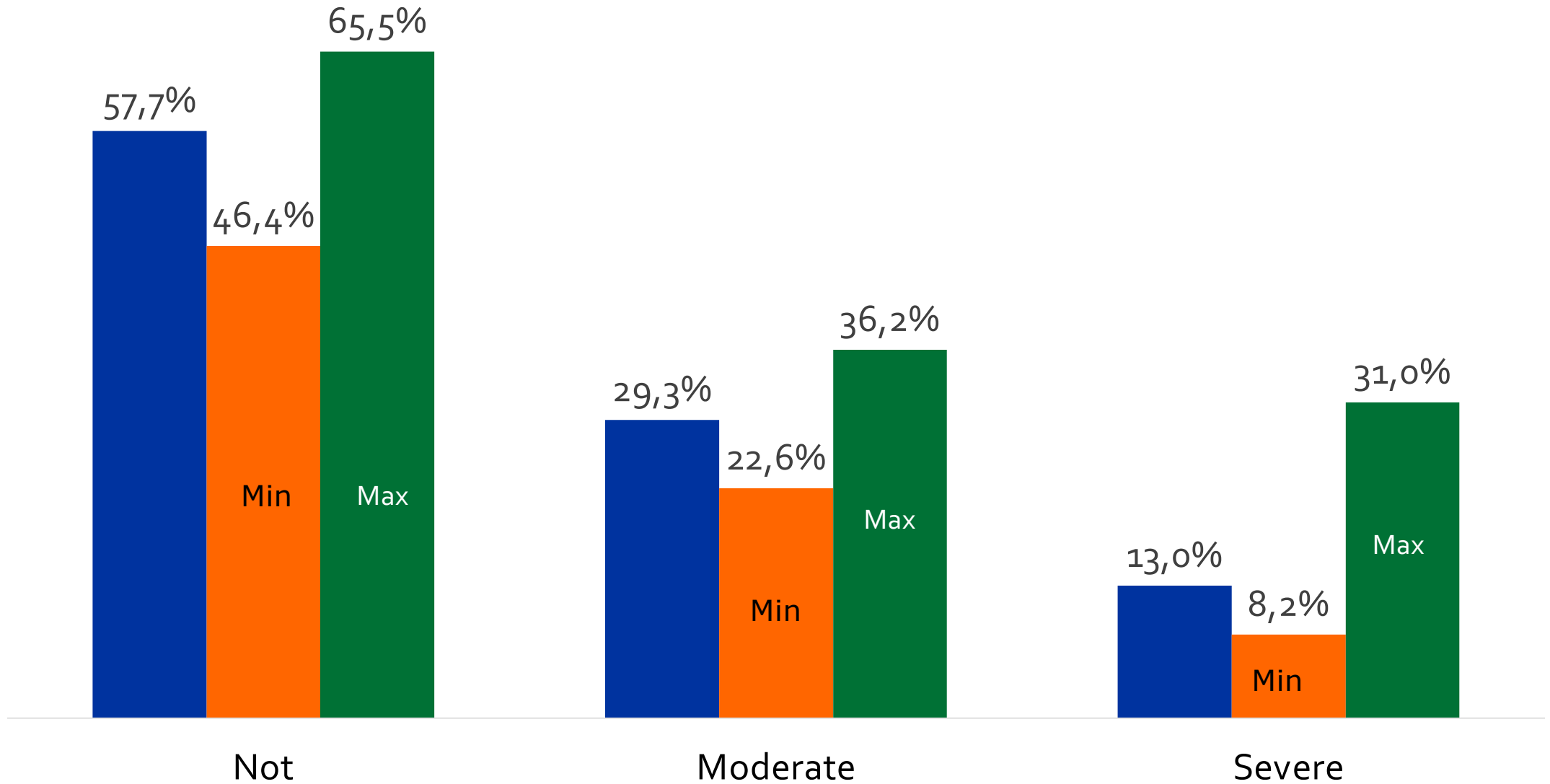
Research in municipalities in Belgium

- Representative sample in each municipality
- Quota for age & gender
- Peer-research

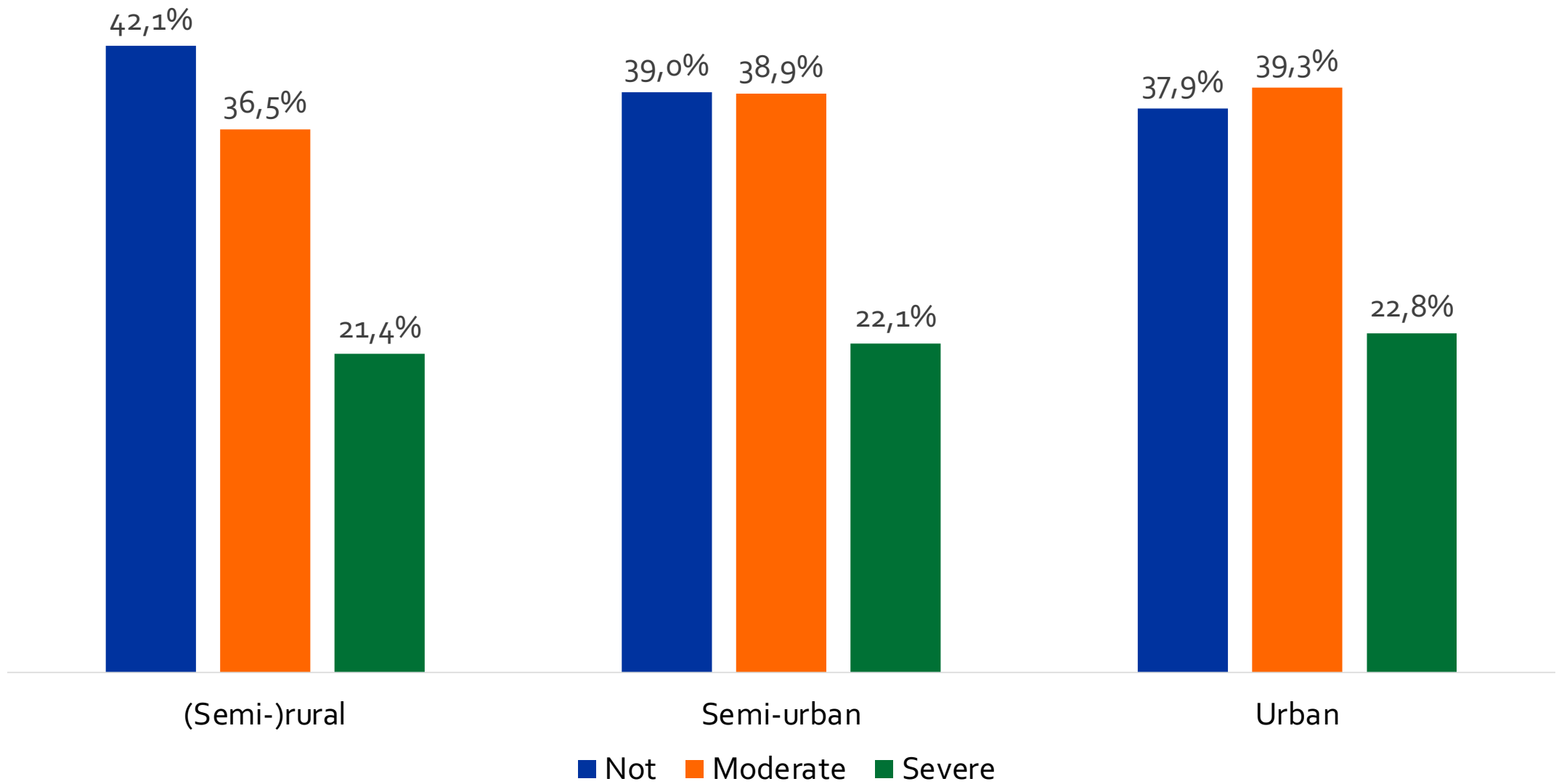
Social loneliness: local differences



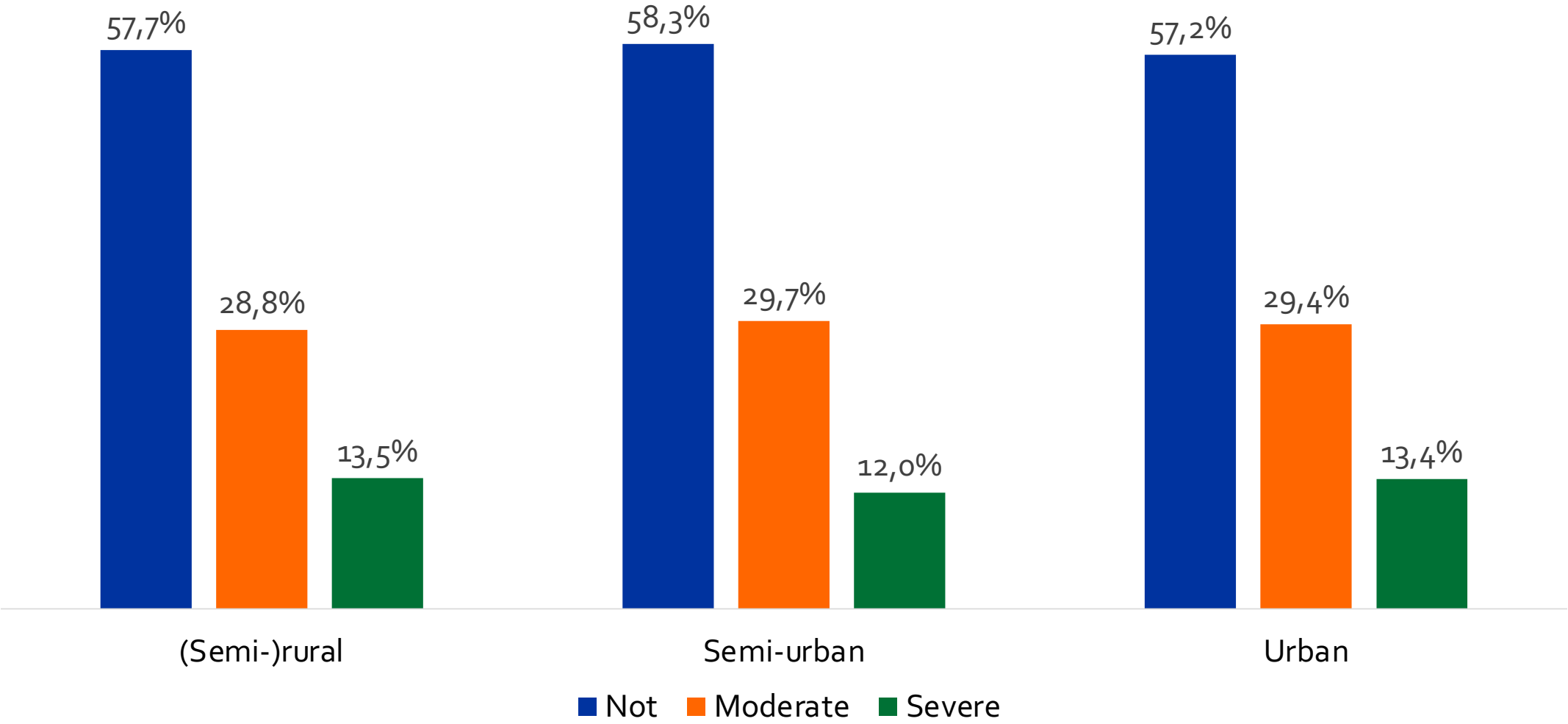
Emotional loneliness: local differences



Social loneliness



Emotional loneliness



WHAT'S IN A NAME?

Caring Neighbourhoods

Caring Communities

Caring Cities

Compassionate Communities

Compassionate Cities

....

- **Integrated Community Care**

- Integrated care (i.e. integration of health and social care provision)
- Aims to put the community at the centre of primary care and integrated care

- <https://transform-integratedcommunitycare.com>

An 'actively caring neighbourhood' is one where

- ▶ all people who need (informal or formal) care, help and support can get it,
- ▶ People feel at home
- ▶ Professional aid and care providers **coordinate their offer** with each other, with the needs of the neighbourhood, and with the individual needs of each neighbourhood resident,
- ▶ Residents **help and support each other** and are encouraged and supported to do so,
- ▶ **housing and public spaces** are adapted to older people and those in need of care,
- ▶ there are meeting places where they can make **social contacts**.



PHOTO: JAN VAN BOSTRAETEN

LOKAAL

SAMENWERKEN IN ZORGZAME BUURTEN



35 projects (1 year)

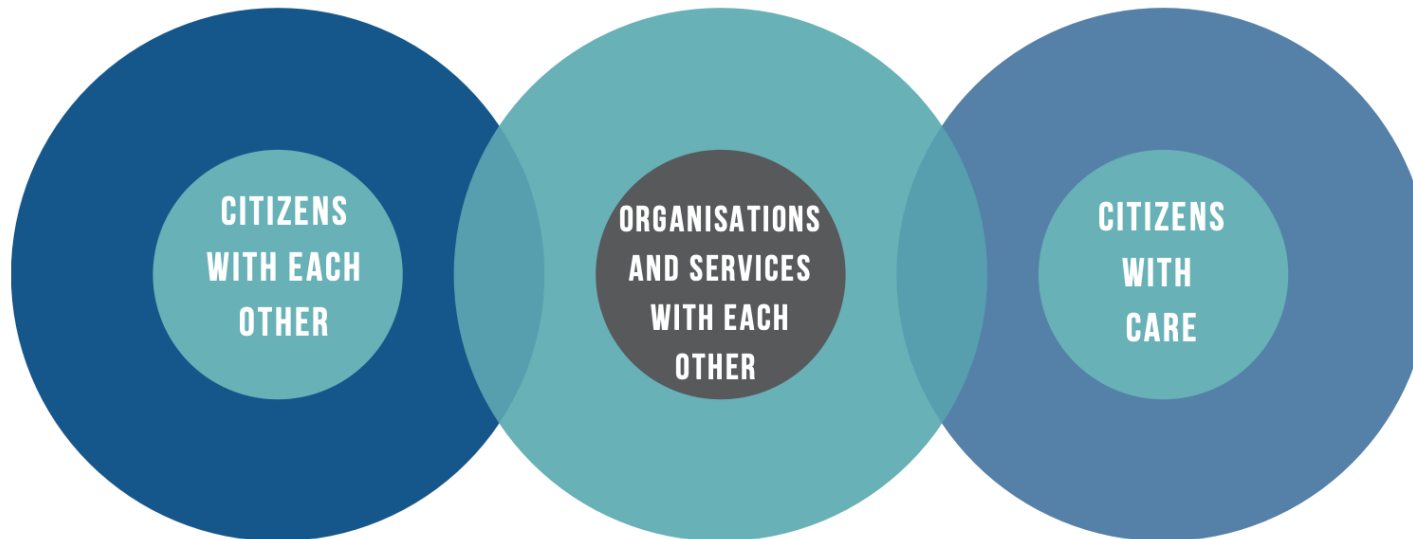
Supported by the Foundation dr. Daniël De Coninck

Learning from the experiences in “developing a caring neighbourhood” :

- What makes a neighbourhood a caring neighbourhood? What added value did the projects bring?
- Process? Challenges, barriers, facilitators, success factors?

CONNECT

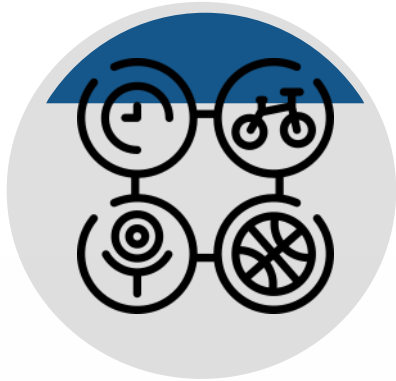
02 NETWORK BASED GOVERNANCE



01 SOCIAL COHESION

03 DETECTION AND REFERRAL

CONNECTING



CONNECTING ACTIVITIES

Neighbourhood Talks,
Storytelling in the Nieuwe
Tuinwijk - The box in my
frontyard



CONNECTORS

"neighbourhood care directors",
"care ambassadors", "community
health workers", "neighbourhood
matcher", "neighbourhood
connectors", "talent scouts"



PUBLIC SPACES CONNECT

Fixed: e.g. social restaurant,
a social grocery, caring gardens

Mobile: e.g. soup and
coffebikes

Research among 233 local governments in Flanders

- ▶ 62% need more support (in a broad sense) for projects aimed at combating loneliness
- ▶ 59% have difficulties in reaching lonely people
- ▶ 75% believe that local governments are needed in tackling loneliness, but there is a shortage of professionals with the necessary expertise, knowledge and methodologies

CARING NEIGHBOURHOODS HAVE TOO LITTLE ATTENTION FOR ...

01. HOUSING

Barely any projects on housing and living environment (e.g. housing quality, adaptation, moving, housing innovation, cohousing)

02. CO-CREATION

Often nothing more than a buzz-word

03. SYSTEMIC CHANGE

Projects are nice and valuable as such. Yet, the question is, how can structural problems be tackled with structural policy change? Warm solidarity (i.e. benevolence) cannot replace cold solidarity.

04. SERIOUS ILLNESS, DEATH AND GRIEF

Are caring neighbourhoods only for the “small help and support”?

05. SOCIAL EXCLUSION AND INEQUALITY

While intended to increase access to care, caring neighbourhoods are at risk of widening the care gap, and create additional exclusion.

COMPASSIONATE COMMUNITIES

- Global movement for public health practice
- To improve community circumstances related to experiences of serious (mental or physical) illness, death, dying and loss.
- Re-organize care and support



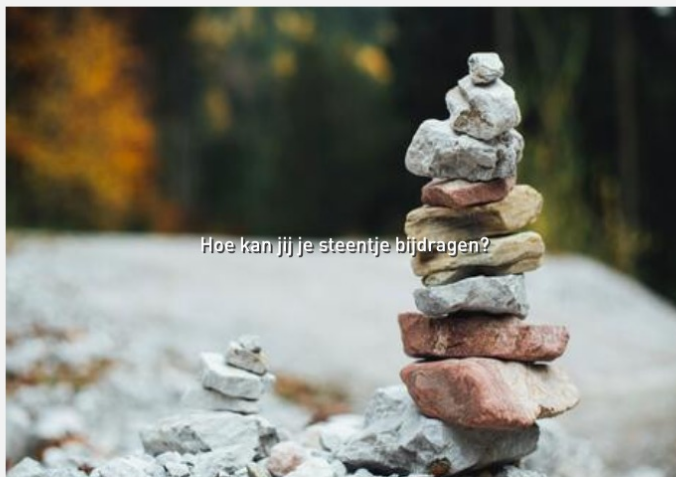
Verlies, overlijden, verdriet, rouw, situaties van ernstige ziekte en langdurige (mantel)zorg maken deel uit van het dagelijkse leven in onze stad, buurt en gemeenschap.

Met Compassionate Brugge **verbinden** we Bruggelingen en slaan we de handen in elkaar over beleidsdomeinen en sectoren heen zodat niemand alleen hoeft te staan met zijn verlieservaring.

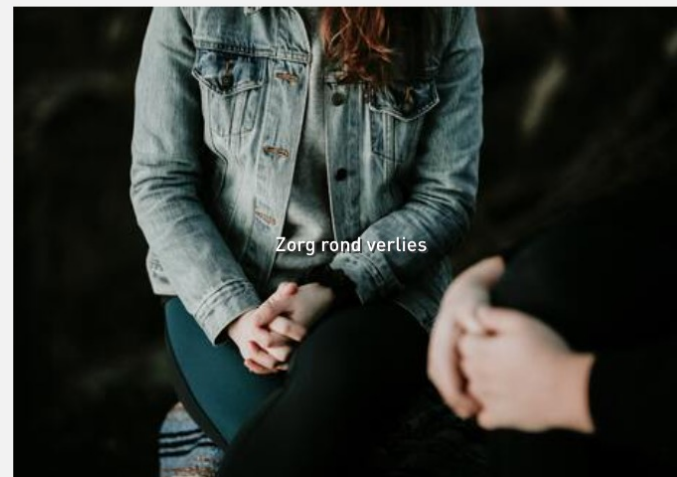
Door Bruggelingen, sociale partners, bedrijven, scholen en organisaties te **versterken** in hoe we met deze ervaringen omgaan wordt Brugge nog meer een solidaire en zorgzame stad. Volg ons op de Facebookpagina van [Brugge draait om mensen](#) en op [Instagram](#).



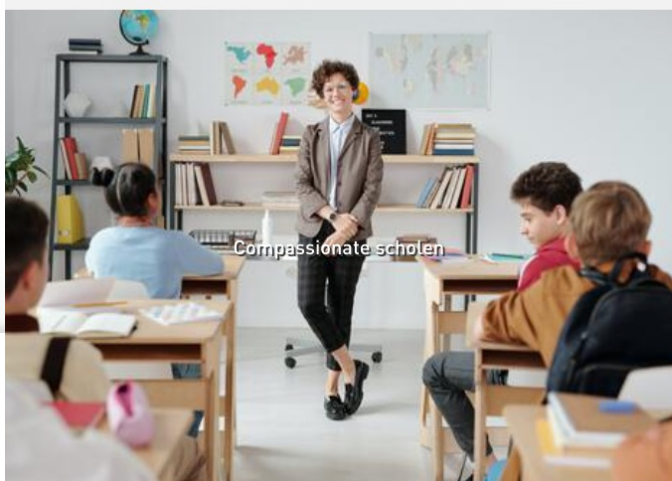
Netwerk Compassionate Brugge



Hoe kan jij je steentje bijdragen?



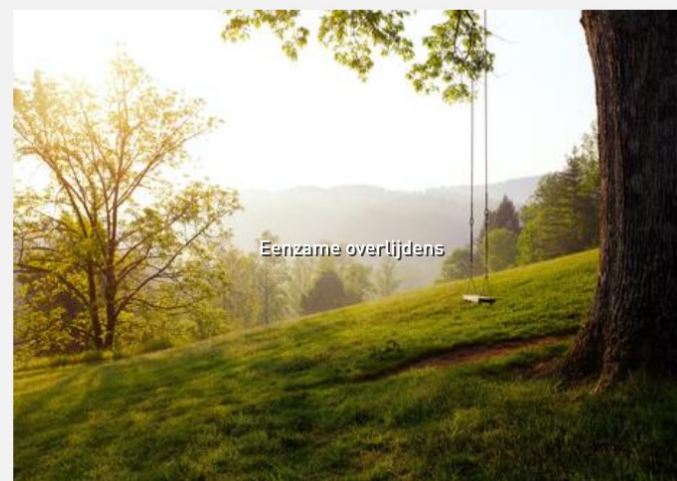
Zorg rond verlies



Compassionate scholen



Compassionate werkgevers



Eenzame overlijdens





RECOMMENDATIONS

- 1) Recognising the importance of socially and emotionally meaningful relationships
- 2) Making psychological therapy accessible throughout the life course
- 3) Evolving from loneliness reduction to loneliness prevention: lifelong prevention of loneliness
- 4) Emphasise the role of age-friendly and caring neighbourhoods

Thank you!



VRIJE
UNIVERSITEIT
BRUSSEL

Hannelore Stegen
hannelore.stegen@vub.be

Prof. Sarah Dury
sarah.dury@vub.be