



## Commentary

### Aging Places: A Review Essay

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#### Abstract

This Commentary reflects on the convergence of social and geographical gerontology as presented in two books addressing place and aging with and without dementia. The two books are expansive in scope, exploring aging and dementia research and care practices globally, with an emphasis on English-language settings and resources. Drawing on my own work that addresses the significance of place and living with dementia (i.e., McGovern 2016) and on personal experiences with the place-making practices of both my parents, this Commentary provides an overview of each text and concludes by stressing the need for deepening understanding of the experience and impact of place and environment as we age.

*Keywords:* Place; Aging; Dementia; Remembering

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### Aging Places: A Review Essay

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Location, location, location. It's a cliché for a reason but I am not referring to the monetary value of real estate here. Instead, reading the two collections of essays *Dementia and Place: Practices, Experiences and Connections* (2021), edited by Richard Ward, Andrew Clark, and Lyn Phillipson and *The Environments of Ageing: Space, Place and Materiality* (2022), by Sheila Peace, has me thinking, again, about place, geography, spatiality, environment, and home in relation to growing old. I have explored the convergence of place, aging and dementia in my own research (i.e., McGovern, 2016). Reading these two collections not only renewed my professional interest, but also triggered a personal reflection on my related experiences. In 1967, my family moved from New York City to Paris, France. While my sister and I came back to the States, married Americans and made lives in the U.S., our parents stayed in the City of Light, as permanent expats. They visited us, of course, but they never returned in any meaningful way. My mother died of Alzheimer's in 2005 at the American Hospital of Paris. On February 7th, 2020, three weeks before Covid imposed an extended period of draconian lockdown in France, my father died at home, the same home we had all moved to fifty-five years earlier. The funeral was held at the American Cathedral of Paris on February 15th, the day on which our mother had died fifteen years earlier. Our parents made one big move, and never moved again. Their remains will stay in Paris in perpetuity, or until the end of the world as we know it.

I remember very well my mother's waning years. Her memory was taken from her slowly. The average length of a dementia diagnosis is ten years (Alzheimer's Association 2023). For some the disease can cause a rapid decline, but for others the losses occur gradually year after year; I am not sure which is better or worse. My mother's experience was protracted. "The doctor says there's something wrong with my memory," she would explain. Over and over again. And again. And then again. My father kept working but their world slowly began to shrink. As Mom grew frailer and needed increasing support and supervision they tried to hire home aides, but ultimately felt more comfortable with the housekeeper, Maria, who stayed by their side until Dad's end, fifteen years later. My sister and I never ceased to marvel at the genuine affection, patience, and generosity Maria embodied and extended to our parents. "I couldn't care for my own parents. They grew old without me in the Philippines, but now I can take care of yours since you live far away," Maria explained when we expressed our gratitude and appreciation for her help.

Maria and my stories are different in many, many ways, but my parents died far from me, as well. My sister and I traveled to Paris as much as our growing families, work, and budgets allowed, first to help Dad and be with Mom, then just to help and be with Dad. We witnessed first-hand the significance of place as Mom continued to enjoy walking the familiar blocks of our neighborhood, even as so many other pleasures fell away as the disease progressed. A sort of muscle memory guided her down the street, turning left toward the shops. Although she could not remember my sister's name – "I don't know her name but I know that she's mine," she once said to me – she could find her way to the clothing store

she had always enjoyed. Once there, however, the situation would usually take a turn for the worse. Mom would rifle disdainfully through the racks of delicate clothes, dropping items on the floor, complaining loudly in broken French about the lack of service and terrible quality of the clothing. It was mortifying, and mystifying, why Mom would continue going to the same shop only to complain once there.

Much has been written about – in fact, I have written about – adopting a Strengths Perspective where persons experiencing dementia are concerned (McGovern 2015). In my field, social work, the Strengths Perspective refers, amongst other things, to an affirmative attitude toward the client that can enhance empathy in the practitioner and promote positive self-regard and preparedness for change in the client (Saleebey 1996). As a dementia care practitioner, I have advocated for adopting a Strengths Perspective among carers to make room for new interpretations of relatedness under challenging circumstances. My mother's struggle forced me to reckon with the potential and limitations of the Strengths Perspective head on. My mom had been a model and a portrait painter of some renown. She loved beauty and beautiful things. I can understand that this drew her to the shop where she had bought so many beautiful items, but once there, she no longer moved through the space as she once had. Perhaps her rudeness was an expression of frustration. I will never know what she was experiencing. Eventually, she lost her words, her independence, her life. And though she lost so much, she never lost her way. She could point, she could guide, she could direct us toward the shops that meant so much to her, and had defined her in many ways. Whether from her wheelchair when she was still at home or from my father's car when he would take her out for a ride to see the city beyond the institution in which she spent her final two years, Mom could lead us back to her special places.

My father continued to drive perhaps longer than he should have. His car had dents and dings, and eventually we refused to ride with him. My sister and I were terrified when Maria described his insistence on driving to work – "He drives himself to work?!" Terrible scenarios flooded our imaginations: he could cause an accident or get lost. And that was just the driving. We shuddered to think what might happen should he safely reach his law offices. The thought that he might give bad advice to clients was horrifying. At his funeral, however, while many stories about his terrifying driving were shared, no one complained about his advice. And he never did get lost. He might forget where he parked, but he could always find his way home. Work and home. Those were the places he belonged until his death at ninety-one.

As my life goes along, I have often asked myself where I belong, where my special place is, that place that makes me 'me.' With both my parents gone, and in the post-Covid universe, travel to Paris is no longer a priority. I share a home near New York City with my husband; my children are young adults, employed, partnered, living not too far away. On the cusp of 60, I am almost the age my mother was when we first noticed her memory issues. This gives me pause. How will my late life play out? Will I revert to French, my first language, as I follow in my mother's footsteps and develop dementia? Will I be able to stay in this home? Will I spend the last years of my life in an institution? Where is the place I will yearn for? What will keep me going? Who and what will be available to me when I need help? While these questions might be universal, their answers reflect the inquirer's positionality, privilege, and context. As the works I examine in this Commentary make clear, socio-material environments greatly impact experiences of aging.

The works referred to here expand on the notion of context not only by taking the life course perspective into account, but also by adopting an intersectional lens. As a result, new questions emerge. These include, where does the person live? What are the meaningful relationships in that individual's life? What kind of place does the person inhabit in terms of home and community? What are the individual's

life course circumstances in relation to national and global influences? What is the impact of privilege, or lack thereof, on the person's later life? In other words, what is the impact of the reciprocal dynamic of person and environment over time on experiences of and possibilities for aging?

A pioneer of environmental gerontology, Sheila Peace put spatiality and aging on the map when she became the founding director for the Centre for Environmental and Social Studies in Ageing at London Metropolitan University in the 1980s. She has been exploring experiences of place, home, and the socio-material environment among older adults ever since. In *The Environments of Ageing: Space, Place and Materiality* (2022) she explores the interaction of micro (local), meso (national), and macro (global) phenomena with the lived experience of advanced age. Peace moves beyond the false divides of human and physical geography to explore diverse experiences of aging in context. By focusing on how places can be both enabling and disabling, she conceptualizes the well-worn notion of person-environment as "the relationships between milieu, behaviour and well-being" (xv). Here, the environment extends from the home to global cities to digital spaces, and the interacting dynamics these have on one another. According to Peace, the interaction between person and environment occurs on and between micro, meso and macro levels and is neither entirely supportive of, nor entirely detrimental to, well-being in later life. Peace reframes the person and environment perspective as a framework of spatial scales consisting of three levels of mutual influence. The micro/local level takes the impact of neighborhood, community, and dwelling into account; the meso/national focuses on the effect of cities, towns and villages on lived experience across the life course; and the macro/global concentrates on regional, supra-national and global influences and phenomena such as urbanization, migration, climate change and technological developments. The author focuses primarily on housing in the UK, emphasizing the intersection of economics, race, and health status. The spaces she discusses range from single-family dwellings with homecare to general housing, specialized housing, and care homes. Moreover, she provides an in-depth overview of the history of the development of housing policies surrounding integrated and segregated communities and housing options in the UK.

When Peace turns her attention to research methods used to explore the relationship of place and aging, she argues against exclusionary and reductive practices. She advocates for participatory-action-research methods that involve participants as co-researchers, privileging their lived experience as expertise. She uses her own research as well as case examples to demonstrate the strengths of participatory action research and other qualitative methods. Further, Peace suggests the need to further develop and implement innovative research methods that put people first. She recommends employing non-interfering data collecting methods such as observation, as well as non-hierarchical research approaches such as photo walks and tracing studies, examples of which are included in the text.

In her concluding chapter, Peace expounds on future global challenges and trends that impact older adults, and humanity in general. In placing issues such as future pandemics, climate change, technology and transportation, migration and transience, and housing in the context of the life course, she argues for theorizing lived experience from the perspective of the mutual impact of place and person, as well as intra-person interaction. Moreover, she advocates for policies and practices that take socio-economic and demographic predictions into account, as well. Going beyond advocacy, she provides guidelines for more supportive and equitable options for older adults in relation to liveable spaces and places.

While Peace refers to a range of characteristics impacting experiences of aging, such as socio-economic, ethnic, racial and gender-based differences, with some exceptions, she focuses exclusively on the UK. That said, she readily covers the rural-urban continuum, which continues to be under-represented in gerontological research. The author encourages further research to deepen understanding about the relationship of environment and aging in other places and cultures.

Scholarship on aging that effectively bridges research, theory, practice and policy-making, such as Peace's, occurs rarely. This is even more true in dementia studies. Organized around the theme of "placing dementia," by which the authors mean to emplace and embody the lived experience of dementia, Richard Ward, Andrew Clark, and Lyn Phillipson's *Dementia and Place* (2021) consists of a collection of essays by leading global scholars whose careers have notably pushed the boundaries in dementia studies and practice. They hail from the health sciences, public health, social geography, and gerontology. The collection is one of the few texts to gather the voices of so many leading experts from multiple disciplines. Interspersed among these heady chapters are contributions by persons living with dementia and care partners. Their words were captured, and sometimes edited, by trusted listener-transcribers. The result is powerful. Grounding research and theoretical chapters in first-hand testimonies humanizes the data. The voices of persons living with dementia and their carers make tables, figures, and statistics more relatable. Combining conventional approaches to knowledge dissemination with first-person testimonies breaks down barriers between us and them, young and old, expert and participant, well and ill.

The authors focus on managing life with dementia in community-settings rather than in care institutions. Across fourteen chapters, contributors suggest that dementia – here an experience rather than a diagnosis – and place – a refraction of environment and community best comprehended in terms of neighborhood – are co-constitutive. In conversation with one another but coming from different vantage points, the contributors comment on how opportunities and obstacles present in places familiar and unfamiliar can define, reflect, challenge, and support both the experience of dementia and of place. Each chapter explores different angles of the main theme, that cognitive capacity is relational, and places facilitate or limit relatedness, which is key to well-being. Starting from the understanding of neighborhoods as places defined by physical space, local geography, environmental design, and daily living support networks, the authors argue for a definition of neighborhoods as spaces of interaction between people and places rather than as static localities. Here, neighborhood extends beyond physical locale, familiar streets, and shops, etc., to relational environments where relatedness, interaction, belonging, and connection occur. The grammar of neighborhood is rewritten once "neighboring" (39) is redefined, blurring the line between an adjective and an adverb. Neighborhood in this context is something that people *do*. This performative shift allows for adopting a Strengths Perspective that recognizes resilience among persons living with dementia. Neighboring allows for creative problem solving, including reframing expectations and holding on to what remains rather than mourning what is lost. This is not to say that neighboring is without its challenges. Andrew Clark and colleagues move from redefining the concept of neighborhood to providing examples of positive and challenging iterations of neighboring

Ultimately, the collection of essays effectively argues for increasing person-first knowledge-building to better understand diverse experiences of aging and promote well-being across the life course. One of the most significant contributions of this collection is its rendering of inclusivity. Not only are first-person accounts embedded as stand-alone chapters, but the research methods are also qualitative and defer to the expertise of research participants. With the exception of two chapters, the voices of persons living with dementia and carers are front and center, firmly establishing their belonging in processes of knowledge development.

For example, Jill Batty describes in her own words how she and her husband, whose dementia was progressing, succeeded in moving to a new home that provided them more family and social support. That positive example of neighboring is contrasted by research-based explorations of problematic neighborhood experiences. Building on terms used by her participants living with dementia, author

Anna Brorsson identifies several themes capturing their experiences navigating public spaces: feeling exposed, clutter and crowding, layout variations, and unpredictable changes. Brorsson then highlights strategies employed by people living with dementia to maintain their autonomy and access to community spaces, such as avoiding potentially problematic situations, engaging with familiar activities in familiar spaces, asking for help, and optimizing timing and scheduling. These strategies provide examples of resilience.

Resilience was also evident in another first-person account. In her own words, Wendy Mitchell describes her experience relocating from the hustle and bustle of York, which had become overwhelming due to her diagnosis of mixed dementia, to the peace and quiet of a village. While she experienced many losses with the move, including her sense of self and sense of place, she also acknowledges certain gains. Living a quieter life closer to nature, experiencing time differently with the advent of pandemic restrictions, and developing a new hobby (photography), have provided her something significant as well: a new identity. She became known around the village neighborhood first as "the camera lady" and as a person with dementia, second.

Innovative and inclusive research methods are also essential in Chapters Five, Seven and Eleven. Here, the authors advocate for walking interviews, social network mapping, home tours, and semi-structured interviews and demonstrate how to use them. Sketch mapping, crowdsourced mapping and qualitative GIS were methods and terms with which I was unfamiliar. The methods are lauded as inclusive and effective in developing new kinds and sources of knowledge. I was particularly taken by the passage describing the importance of the participants' windows and balconies in Chapter Five. Elzana Odzakovic and colleagues describe how windows and balconies can provide a connection to the outside world for persons of advanced age with little mobility. In the words of one participant, they offer "a feeling of freedom" (81). The example not only strengthens the argument about the inter-relatedness of spaces, connectedness, and meaning-making processes, but also highlights the power of shifting perceptions. At a different point in the life course, viewing the world from afar and indoors might have had a different meaning, perhaps a prison rather than a new-found freedom.

Moving beyond reporting, the authors of Chapter Seven include concrete suggestions for facilitating inclusion of persons with dementia and promoting social engagement with enabling neighborhoods. The authors describe how enabling neighborhoods provide for safety and familiarity and nurture a sense of comfort, both emotional and physical. Ways of "doing neighborhood" (109) include attentiveness to the rhythms and tempo of places, keeping in mind that persons with different capacities experience these temporalities differently. The authors state that out-of-home mobility promotes agency, belonging, autonomy and identity, and is thus linked to well-being. Walking programs provide one example of a low-cost scalable opportunity for out-of-home mobility support that can reduce isolation.

In another first-person account, Lynda Henderson describes how isolation began to take over once her partner was diagnosed with dementia. As a lesbian couple living with dementia, the two women felt particularly invisible in the neighborhood. However, their experiences changed once they became involved with a Dementia Friendly Kiama group. Dementia Friendly Kiama is an initiative to make the town of Kiama in Australia more hospitable to persons affected by dementia. Dementia Friendly communities offer inclusive social activities such as Dementia Cafes that welcome all members of society, educate community members about dementia and the range of manifestations and experiences of dementia, and promote social engagement for persons affected by the condition. The model is an evidence-based intervention for reducing isolation and improving wellbeing among persons with dementia (Alzheimer's Disease International 2024). Members of the Dementia Friendly Kiama group

were more aware of the needs of couples living with dementia than non-affected peers and supported Lynda and her partner more effectively than other friends. Lynda and her partner found a renewed sense of purpose in participating in Kiama project activities such as advocacy and education activities. Drawing on resources made known to them through the project, the couple has been able to increase levels of care as needed and continues to engage with their community.

There is perhaps an irony in that the penultimate chapter of the collection by Joanne Connell and Stephen Page seems...out of place. The authors make the case that a visitor economy – a term which refers to how visitors experience a place and what is available locally to enhance a visit – needs to include opportunities for people with different capacities, such as persons living with dementia and carers. Moreover, they argue for increasing opportunities for persons with dementia to be included in meaningful leisure activities, including tourism, even if they do not go far from home. Their points are well taken, but the chapter reads more as a prospectus for an opportunistic business plan than a serious exploration of the role, presence/absence, and expectations of leisure among persons with dementia – and the biases such an exploration reveals in the community at large, the tourism industry, and beyond.

Overall, the authors in this volume further the discussion about place and dementia in important ways. The collection makes the case for re-thinking place, and re-defining neighborhood as something to be done, rather than as a physical locale. It identifies burgeoning areas of research that need more attention, including transnational and rural experiences of place. The main emphasis is on the need to deepen understanding of the meaning and experience of community among persons living with dementia. To do so, the authors suggest moving analytical attention away from physical spaces toward more performative experiences of space, such as feelings of proximity, reciprocity, and belonging. Ultimately, the text calls for further research about the experience of place from the perspective of persons living with dementia, whose voices continue to be notably absent from dementia scholarship. Applying findings is a next step, perhaps for a different collection of essays, one by author practitioners rather than scholars.

Peace's *The Environments of Ageing: Space, Place and Materiality*, and Ward, Clark, and Phillipson's *Dementia and Place: Practices, Experiences and Connections* talk to each other. While they sometimes overlap in terms of data sources and study locales and draw heavily on English-language scholarship despite claims to a more global context, they nonetheless extend the conversation about well-being in later life in significant ways. Together, they make the case for inclusive research that adopts a person-first standpoint. They shed light on complex phenomena affecting societies worldwide and quality of life for growing numbers of older adults whose voices, experiences, and perspectives on their living conditions remain largely absent from scholarship and humanistic practices of care. The first book reads as a capstone oeuvre by one of social geography's premier scholars on aging. The latter consists of a collection of essays written by scholars and persons living with dementia who together deconstruct the notion of 'neighborhood' by drawing attention to attachment, belonging and connectivity to a place and how these feelings are experienced through the lens of dementia. Further, they make suggestions on how to promote enabling interactions between person and environment. I can't help but hope that their suggestions will become realities sooner rather than later, not only for the benefit of older adults of all capacities everywhere, but also for myself.

My husband and I live in a woodsy area, largely isolated from people but in the company of nature and each other. Like my mother, I have favorite shops in the village where I am a regular and I am known by name. Like my father, I drive myself to work, with no alternative, and no plans to retire. In addition, I benefit from the greater community of rural locals toughening out the changes in climate and landscape that affect our every move. Dirt roads get washed out. The lights and internet go down. We rely on each other and we adapt. I intend to deepen my roots right here, in this place I call home. I hope

that as I grow older and experience the challenges that often come with advanced age, I will benefit from the same kind of formal and informal support my parents each received from their family and friends, neighbors, local community members and colleagues. As the authors of both books I have commented on imply, neighboring and all it stands for contributes to quality of life, combines place and people, policy and practice. Let's meet for coffee in 20 years.

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