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Ageing in changing community contexts: Cross-border perspectives from rural Ireland and Northern Ireland

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A B S T R A C T

Ongoing demographic, social, economic and cultural changes point to the dynamic and continually changing contexts of rural areas in Ireland and Northern Ireland. However, the influence of such changes on the lives of older people remains under-explored, particularly the question of how older people perceive, connect to and engage in their communities. Drawing on interviews and focus groups with indigenous and non-indigenous older people in three case-study sites in Ireland, Northern Ireland and a cross-border region, this article presents a comparative analysis of how changing community contexts have shaped the lives of rural-dwelling older people. The analysis focuses on four key areas: economic structure and service access; social relations and social cohesion; meanings and attachments; and community engagement. While the findings demonstrate that some dimensions of participants’ lives were affected by complex economic and social changes, others dimensions were connected in a more significant way to life course and residential history and the desire to maintain community capacity.

1. Introduction

This article examines how changing community contexts have shaped the lives of older people in rural areas of Ireland and Northern Ireland.2 Drawing on an analysis of empirical data collected in three case-study sites across the island of Ireland, the article considers four key dimensions of rural living: economic structure and service access; social relations and social cohesion; meanings and place attachments; and community engagement. Acknowledging on-going debates concerning the conceptualisation of community (Mormont,1990; Day and Murdoch,1993; Day, 2006; Evans, 2009), this article identifies community as a place-based and socially constructed representation of a society of people. For the most part rural ageing, as a policy and research domain, has been neglected in Ireland and Northern Ireland. Yet, it is
difficult to think about ageing in this dual-jurisdiction context without considering rurality and rural living. Population changes, particularly outward migration, have carved an ageing demographic into the rural landscape of the island of Ireland: people aged 65 and over comprise 12 per cent of the aggregate rural population in Ireland and 13.73 per cent in Northern Ireland. Of those aged 65 years and over, 44 per cent in Ireland and 35 per cent in Northern Ireland live in rural areas (NISRA, 2001; CSO, 2006; NISRA, 2008). Therefore, notwithstanding a lack of political and academic focus, rurality represents an important element in understanding ageing across the island.

However, the nature of rural living has fundamentally changed for rural-dwelling older people. Patterns of rural decline, increased personal mobility, changes in family structure and interpersonal relationships, fluctuations in the global and local economy, outward migration, counterurbanisation and other inward migration flows, has meant that living and ageing in rural communities takes place in an increasingly dynamic context. Indeed, there is a growing recognition in both jurisdictions that rural-dwelling older people are a diverse group, and that the communities in which they live vary in their degree of rurality, cohesion and structural integrity (Connolly et al., 2010). It is also evident that rural communities are shaped by increasingly urbanised social, economic, and cultural perspectives (Mahon et al., 2009).

Research on rural-dwelling older people in Ireland and Northern Ireland has been typically limited to small-scale studies in a single jurisdiction, with an absence of any meaningful cross-border analysis. As a consequence, there are significant questions around what these changing community contexts mean for the community lives of a diverse group of rural-dwelling older people, particularly in relation to key issues of service access; social relations and social cohesion; meanings and place attachments; and engagement in communities. The contrasting government administrations and welfare models in the two jurisdictions, and sectarian tensions and religious differences in Northern Ireland, contribute an additional dimension of interest to such questions. This article seeks to address these knowledge gaps in the context of three case-study sites in Ireland, Northern Ireland and a cross-border region.

The article begins by reviewing some of the relevant research on rural ageing, summarising current information deficits in the Irish and Northern Irish contexts. It then outlines the methodological approach, and describes the three case-study sites. Key findings arising from the case-study analysis are then presented and discussed.
with reference to relevant international literature and the dynamics of rural communities and their older populations. The paper concludes by identifying key areas for future research and policy development.

2. Ageing in rural communities: changing contexts

The review of the literature concentrates on contrasting aspects of rural ageing that stem from the geographic, social, economic and cultural characteristics of rural places and the changes that have occurred in rural community contexts. While this section draws on different disciplinary bodies of knowledge, given the article’s focus, the review is primarily situated in a gerontological frame of reference.

In policy and practice debates, there is a marked tendency to problematise rural ageing, particularly in the areas of health and social care provision and social inclusion. To some degree, this approach also characterises international research, which is dominated by the challenges associated with growing older in rural places, often drawing on rural and ever-changing socio-economic dimensions. Isolating geographies, together with low-density and dispersed populations, create particular problems for service provision, personal mobility and maintaining social connectedness (Krout, 1988; Joseph and Chalmers, 1995; Ryan-Nicholls, 2004). The lack of suitable rural transport systems and the implications for the social and health lives of older people have been documented internationally (Ryan-Nicholls, 2004) and for Ireland and Northern Ireland (Layte et al., 1999; Ahern and Hine, 2010). Combined with interconnected structural issues, such as declining local economies, agricultural reform, a receding community infrastructure and neoliberal transformation strategies, the changing context of rural communities can render such places socially, economically and politically marginalised (NCAOP, 2001a; Marcellini et al., 2007; Farmer et al., 2003).

Taking such a context, and applying it to the potential vulnerabilities of the ageing process, has led to the suggestion of a 'double jeopardy' for rural older people (Krout, 1986; Joseph and Cloutier-Fisher, 2005): geographic, cultural and socio-economic characteristics of rural communities, and the places that they are situated within, can negatively influence the social and functional nature of these communities and the lives of the people that reside within them. Certainly, there has been some international (Wenger, 2001; Savikko et al., 2005), Irish (NCAOP, 2001b), and Northern Irish (Rural Community Network, 2004) evidence to indicate that growing older in rural places can be accompanied by a higher risk of
poverty, deprivation, isolation and loneliness. While there are sometimes difficulties in identifying the prevalence and mechanisms of disadvantage in rural communities, the realities of rural life can be unsympathetic (Shucksmith and Chapman, 1998; Commins, 2004; Scharf and Bartlam, 2008). In the context of the current economic recession, which has had a significant impact on both Ireland and Northern Ireland, the potential for such issues to be intensified for rural-dwelling older people is all too apparent (Hillyard et al., 2010).

Alternatively, at an emotional and an idealised level, rural ageing sometimes conjures up thoughts about close-knit, supportive communities nestled in scenic landscapes, which inspire a strong sense of cohesion and belonging amongst older people. While this perspective has periodically been subject to critical review (Rowles, 1988; Magilvy et al., 1994; Wenger, 2001; Walsh and O’Shea, 2008), a variety of international studies do highlight positive relational features of rural ageing. For example, Kivett (1988) linked high rates of subjective well-being amongst objectively disadvantaged rural older people to such psychosocial factors as social networks and enhanced personal space. Similarly, social capital within rural communities has been credited with providing the potential to address rural marginalisation for older adults (Keating et al., 2005). Being integrated in a community and embedded within a network of social and supportive relationships provides both a practical resource for older people to draw upon and a sense of emotional and psychological connectedness (Walsh and O’Shea, 2008).

In addition, the accumulation of memories, attachments and associations that arise from living and ageing in place may reinforce the personal identity of rural dwellers (Rowles, 1983, 1993; Heenan, 2010a). It is this role of place as a setting of experience and relationships that leads to an emotional bond or attachment between people and places (Shumaker and Taylor, 1983; Rubinstein and Parmelee, 1992; Gustafson, 2001). The notion of place attachment features strongly in rural ageing studies and has been suggested by Burholt (2006) to comprise of: location satisfaction; historical perspective; aesthetic and emotional components of location; social support; social integration; appropriateness of the environment; and relocation constraints.

However, the changing demographic structure of rural communities means that socio-economic and cultural elements of place are likely to be undergoing a process of change. On one hand, rural depopulation of younger generations (Champion and
Shepherd, 2006) is linked not only to service depletion, but also to a diminution of older people’s social and support networks. This is likely to impact both in terms of the social resources available to older people and an individual’s sense of community and belonging. Conversely, patterns of counterurbanisation can increase rural population numbers and lead to greater diversity of rural communities (Champion, 1998). As a by-product of a sustained period of economic growth in Ireland and Northern Ireland from the late 1990s up to 2008, a significant rise in property development both in fringe rural communities (Williams and Shiels, 2000; Mahon et al., 2009) and, indeed, in the general rural landscape has altered the demography of rural areas primarily, but not exclusively, with the introduction of a commuting population and a foreign-labour migrant population (Mac Éiní, 2009). As noted by Halfacree (1994), both expectations and disappointments are likely to be underpinned by ‘social representations’ of the rural, such as the rural idyll.

Such processes raise questions around the cohesiveness of a social community and perceptions and how relations to place are maintained by rural-dwelling older people, those who are originally from the community and those who are not. Boyle and Halfacree (1998), who considered ‘rural’ as a complex multidimensional construct, posited that different people can experience ‘rural’ in contrasting ways, and in some cases in the same places. Mahon (2007: p.354), in an analysis of the conceptualisation of place by indigenous and non-indigenous occupants in the developing rural fringe in Ireland, found ‘different and changing sets of social relations, as well as altering social representations of space, providing different senses and experiences of place’. While such difference are, in part, reflected in Burholt’s (2006) model of place attachment, there have been few studies that have specifically explored perceptions of place and changing community context within the gerontological literature. While evidence suggests that, in some countries, older people from various perspectives (e.g. native residents and inward retiree residents) relate to different types of communities in contrasting ways (Windley and Scheidt, 1988; Burholt and Naylor, 2005), there has been no equivalent research focussing on rural Ireland and Northern Ireland.

Inevitably, the reality is that rural ageing is likely to encompass both positive and negative aspects (Wenger, 2001), and is likely to mean different things to different people at different stages of the life course. Consequently, older people will engage with their
communities in diverse ways and to different extents at different points in their lives. Given the changes that have occurred in rural Ireland and Northern Ireland, this is likely to be increasingly the case. While some researchers acknowledge the complexity of these lived experiences (Joseph and Cloutier, 1991; Wenger, 2001; Burholt and Naylor, 2005), there is still a tendency in public and policy discourse to simplify rural life and older people’s roles in these settings. There is also a failure, with the exception of a small number of studies (Wenger, 2001), to investigate the linkage and connection between positive and negative aspects of rural ageing, and the potential for these factors to occur simultaneously in the lives of rural-dwelling older people.

Fundamentally, our understanding of growing old in these dynamic rural contexts, especially in the case of Ireland and Northern Ireland, remains underdeveloped (Burholt, 2006; Heenan, 2010a). Without a suitable focus, there is a risk that rural ageing will not be prioritised and that ageing in these settings will be viewed as a homogenous set of experiences lived by a homogenous group of people in homogenous communities. There is also a danger that older people in rural areas will be viewed as a needs-based group who burden the over-stretched exchequers and welfare systems of the two jurisdictions. It has been suggested that this image is already pervasive within some of the existing policy and bureaucratic structures for the general Irish older population (NESF, 2005; O’Shea, 2007). In effect, older people’s multiple roles in society and the contributions that they make to communities have been overlooked (Le Mesurier, 2003; O’Shea and Conboy, 2005). Given the challenges that have been documented around rural living, similar, if not more dependent, associations may be linked with rural older people.

Yet, previous research has demonstrated that older people have an important input to make in terms of the cultural life of rural communities (Phimister et al., 2003). Piecemeal evidence from Ireland and Northern Ireland would suggest a complex dynamic, but one where older people are far from passive and are involved in multiple ways in their communities. Heenan (2010a, 2010b), in qualitative studies of rural Northern Ireland, reports that older people are often an important source of social capital. Walsh and O’Shea (2008) indicated how older people in one rural community in Ireland were empowered not only to improve their own lives, but contributed to the lives of others and to the capacity and cohesion of the locality. For the most part, though, while there has been some relevant work in the volunteering literature (Hawe, 1994; Kincade
et al., 1996; Lochner et al., 1999; Moreton et al., 2005; Le Mesurier, 2006), there has been limited research on older people’s participation and contribution in rural areas (Dorfman and Rubenstein, 1994; Skinner and Joseph, 2007; Walsh and O’Shea, 2008). Currently, however, we know little about how individuals actually engage with their rural communities in later life, or to what degree they participate in local structures and activities and whether it matters if they are originally from these communities or not.

3. Research design and methodological approach

Reflecting the international literature and current knowledge gaps relating to rural ageing in Ireland and Northern Ireland, an empirical study was designed to explore how changing community contexts have shaped the lives of rural-dwelling older people in terms of: (1) service access; (2) community-based social relations and social cohesion; (3) community meanings and attachments; and (4) community engagement. Research questions relating to these four areas underpinned the research design and the process of data-collection and analysis.

In broad terms, the research adopts an exploratory case-study approach. Case-study qualitative analysis can offer rich understandings of the complex economic, social and health experiences of people in real-life contexts (Yin, 1994; Bryman, 2004). Three case-study sites were chosen to reflect potential variations in rural living across the island of Ireland: the Ards Peninsula in County Down, Northern Ireland; the villages of Belcoo and Blacklion in the Irish borderlands; and part of Connemara centred around the village of Letterfrack in County Galway, on the west coast of Ireland. Focus group discussions and in-depth semi-structured interviews were conducted with older people across the three sites. Focus groups were conducted in Letterfrack (n = 7; aged 63–82 years), the Ards (n = 7; aged 59–78 years), and Blacklion-Belcoo (n = 13; aged 60–85 years) with a total of 27 participants comprising of five men and 22 women. In-depth interviews were conducted with four older people in each of the sites (n = 12). The 12 interview participants ranged in age from 69 to 91 years and were recruited with the assistance of key community stakeholders. Participants comprised two men and two women from Letterfrack; two men and two women from the Ards communities; and four women from Blacklion-Belcoo. Where possible, consideration was given to community representativeness within the participant sample across the categories of younger old (65–79 years); older old (80 years and over); males and females; indigenous and nonindigenous
residents; Protestant and Catholic; and isolated and non-isolated older people. The study followed standard ethical procedures in relation to such issues as securing consent and protecting participants’ confidentiality. All interviews and focus groups were audio recorded and transcribed. Content analysis was subsequently undertaken to identify the key themes emerging from the data-collection in relation to the four topics of interest.

4. Setting and case-study description
There are a unique set of social and structural similarities and differences between Ireland and Northern Ireland that establish an intriguing comparative dimension to this article. Firstly, Ireland possesses a ‘hybrid’ welfare state, involving state management with a combination of public, private and voluntary provision (NESC, 2005). By contrast, Northern Ireland follows the UK welfare model, operating on the basis of rights and minimum standards of entitlement designed to provide equitable state-funded welfare provision. Secondly, while social commonalities exist between the jurisdictions, British rule and well-documented socio-political and sectarian tensions (exemplified by the period of the Troubles) in Northern Ireland have highlighted and heightened religious and cultural differences within Northern Ireland and on the border between North and South. Thirdly, rurality in Ireland and Northern Ireland is fundamentally different, with less dispersed and scattered settlements and a greater degree of urbanisation apparent in Northern Ireland; population density is 60 persons per square kilometre in Ireland (CSO, 2006) and 132.5 persons per square kilometre in Northern Ireland (NISRA, 2008). Such differences impact not only on distances and accessibility, but are also likely to affect the nature of places themselves and realities and perceptions within them.

The case-study areas comprise of three varied locales (Fig. 1). Their location, scale and socio-cultural characteristics point to rural diversity, while an over-representation of older people, scenic landscape and evidence of economic decline reflect commonalities among them. While deficiencies in official data, especially at small area level, limit direct comparability across the two jurisdictions, key statistics for each of the sites are presented in Table 1. The Ards Peninsula is located in County Down on the eastern edge of Northern Ireland. The Peninsula is within the Belfast commuting zone, with the top of the Peninsula located 10 miles east of the city, and would therefore be considered to be of the city’s rural fringe. The Ards is bounded on its western side by Strangford Lough and comprises a series of villages located primarily around its edge. In the main, residents are outward looking for employment, major services
and retailing, though the villages do act as important centres for local convenience shopping and community activities. In 2004 travel time to an accident and emergency hospital for all areas on the Peninsula was above the Northern Ireland average of 13 min. The Ards Peninsula attracts recreational and tourist visitors and it has a number of large permanently sited caravan parks. The villages on the Ards Peninsula comprise of a predominantly Protestant population. The village of Letterfrack and its hinterland is located in northwest Connemara in County Galway in a strongly rural and geographically isolated region. Situated 51 miles north-west of Galway City and nine miles north-east of the regional town of Clifden, the rural landscape comprises of an upland landscape with a scattering of loughs and an intricate coastline. Letterfrack consists of a number of pubs and small shops, a community development complex, public library service, and enterprise and community services. The closest district hospital is nine miles away and the closest accident and emergency hospital is in Galway City. Tourism
is a strong source of income for the region. While the local economy remains rooted in agriculture (small-scale farming and fishing), commuting for employment is also prevalent.

Belcoo, in County Fermanagh, and Blacklion, in County Cavan, are situated respectively on the Northern Ireland and Ireland border and are separated by a bridge over the Belcoo River. This is a mountain, hill and lakeland rural area with a local economy dominated by small farms and an increasing dependency on tourism and recreation. The nearest major towns are Enniskillen, 12 miles to the east inside the border of Northern Ireland, and Sligo, 30 miles to the west inside the
border of Ireland. Blacklion and Belcoo are similar in population size and age structure and the two villages are considered predominantly Catholic. During the Troubles, both villages were separated by customs and border security barracks, with a decommissioned army barracks still standing in the centre of Belcoo. Belcoo on the Northern side is 33 min away from an accident and emergency hospital, while for Blacklion, the closest accident and emergency hospital is in Sligo, a 30 min drive away.

5. Findings: ageing in rural Ireland and Northern Ireland

Interview and focus group participants described rural areas as places of change, not just in terms of differences between the past and the present, but in terms of an on-going process of community-based transformation. Economic, demographic and social changes have combined to influence the community context and dynamics of rural life for older people in Letterfrack, Blacklion-Belcoo and the Ards. In this section we present empirical findings concerning such changes and their impact in relation to the four key areas: (1) economic structure and service access (2) community-based social relations and social cohesion (3) community meanings and attachments; and (4) community engagement.

5.1. Economic structure and service access

A number of interviewees referred to the economic changes that had occurred in their communities, highlighting the difference between the subsistence lifestyle that they experienced in their younger lives and the opportunities that are now available. The variable and unreliable nature of a previous subsistence experience was illustrated through interviewees’ accounts of the harshness of rural living for families with only basic provisions. For some participants, this introduced a strong relative appreciation of their current economic circumstances. Technological change was also credited with securing an improved standard of living for rural people and contributing to the relative affluence of contemporary society:

“I mean years ago times were hard and poor, rearing the children, different now really. I mean there’s more of everything now like since we got electricity and all that sure. You know we’re set, it brought us up, wonderful really.”

(Interview with female Letterfrack resident)

However, there was an awareness that with such technical change, agricultural, marine and manufacturing sectors were now less labour intensive, leading to a change in both production and employment structure towards more service-orientated urban-based enterprises. As a consequence, the quantity and quality of work available in rural areas was perceived to have changed and
a large part of rural life had consequently been transformed. For those of working age, travelling to the towns and cities was now a part of everyday life for all of these rural areas, and given its urban fringe location was a particular feature of the Ards region: Well if you want to work you have to commute. That road in the morning everybody is going up and in the evening everybody is coming down it whether you live in Kircubbin, Portaferry or Portavogie, wherever. Everybody has to do it, including myself. (Interview with female Ards resident)

Issues around service provision were significant in each of the sites and have been documented extensively in the literature (Krout, 1988; Joseph and Chalmers, 1995; Ryan-Nicholls, 2004; Marcellini et al., 2007). Participants referred to the general absence of a service infrastructure within rural areas. There were insufficient health and social care services, in terms of primary, acute and emergency care; poor retail services, with little access to cost-efficient supermarkets and market choice; insufficient banking services; and a lack of social and recreational facilities. In some interviews, there was an acknowledgement of economy of scale arguments as the determining factor in service decline. However, there was still an emphasis on the difficulty that the lack of provision creates for the health and wellbeing of older people.

Aside from any recessionary cut-backs, Letterfrack, Blacklion-Belcoo and the Ards were all sites of service depletion and restructuring. In most cases these trends stemmed from service rationalisation and were a product of more sustained socio-economic changes in rural communities concerning agricultural reform and economic decline (Joseph and Chalmers, 1995; Kearns and Joseph, 1997; Cloutier-Fisher and Skinner, 2006; Skinner and Joseph, 2007). Banking services, post offices, creameries, police stations, primary health care clinics, home-help support and community development projects were either under threat or had already suffered in each community. Focus group participants particularly highlighted the importance of, and their concern for, person-led services that engage directly with older people in their own homes.

And like there was some talk at one stage about putting post boxes [at the gates of houses] and if that happened like, that’s an awful loss ’cause the post man calls to your door and he will take note if he thinks there’s anything wrong. (Letterfrack focus group participant)

The current economic recession affecting Ireland and Northern Ireland only served to deepen economic decline in rural communities. This intensified community deprivation, and reinforced cycles of
decline whereby a decline in employment results in a population decrease, leading to a reduction in services and a further decline in employment (Skinner and Rosenberg, 2006). While there has been limited research on the effect of the economic recession on older people and their communities in Ireland, Hillyard et al. (2010) have documented significant impacts on individuals and local services. Dereliction has become a problem for some of the case-study communities, particularly in the Ards Peninsula, where interviewees noted the disrepair of several villages and the neglect of public facilities and greens spaces. Participants in all communities described how the recession appeared to have a greater impact on rural than on other communities, sometimes, it must be said, without providing much evidence to support that claim. There was, however, a palpable sense of frustration amongst older people, who described how the progress that had been made in recent years had been negated by the recession:

‘we thought we were going very well in the past number of years, like we had a lot of services in and. we were saying you know you'll get you chiropody and then somebody said the chiropody is gone. we were just getting there but now with the cut backs that’s where they seem to be cutting. I mean, the chiropody only came once a month.

(Letterfrack focus group participant)

Transport was identified as being a very important factor in determining quality of life in rural areas. This is supported by previous research, which has highlighted the direct relationship between transport and older adult psychosocial and well-being outcomes (Gabriel and Bowling, 2004; Cutchin, 2003; Sixsmith and Sixsmith, 2008). In each site, public transport served the village centres, but did not connect to the surrounding rural environs. Many of the problems around socialising and services were framed in this infrastructural context, a finding which has been documented elsewhere for Ireland and Northern Ireland (Ahern and Hine, 2010). For older people, the potential for isolation and disconnection from the immediate and wider community was exacerbated by the lack of transport. Even when bus routes suited participants’ needs, the times and frequency of the service rarely did:

It’s the timing of the bus. The bus passes my door but you could be marooned. well I can’t walk except with a stick. I can’t walk and carry things. So if you need to go to town for something, some specific shopping of some kind and it was heavy, you just couldn’t carry it that distance.

(Female Ards focus group participant)
Transport problems assumed additional weight when older people spoke about accessing health care. While transport to primary and acute care was problematic, and often involved expensive taxi fares, emergency care was of most concern. To the dismay of the Ards participants, deficient emergency transport appeared to be generally accepted as part of the reality of rural living:

Every time you call them [emergency services], no matter who you are and what time it is, you still get the same thing, ‘What is wrong?’; ‘Can you get this?’ ‘Can you do that there?’ They don’t come out as quick as they are supposed to come out. And I took a heart attack and the doctor was sitting beside me and he said, ‘If I call an ambulance it would take an hour here and an hour back’. He says, ‘Have you anybody that could take you by car?’

(Male Ards focus group participant)

5.2. Social cohesion and social relations

The population structure of the three communities had changed and reflected some of the broad migration trends observed in other contexts (Champion and Shepherd, 2006). This introduced considerable demographic and cultural diversity into the general and older population that would traditionally be unexpected in some rural communities. Indigenous local residents, older retirees from other parts of Ireland and Northern Ireland, seasonal holiday home owners, return Irish emigrants from the UK and the US, and foreign national labour migrants were resident in all study areas. Some communities, especially on the Ards Peninsula, had substantial commuter populations. While commuters tended to be indigenous to the communities of Letterfrack and Balclon-Belcoo, the Ards had experienced substantial inward migration during the 1970s and 1980s, as people sought to leave larger urban centres because of sectarian and terrorist activities associated with the Troubles. Although population changes had occurred to a different extent in each site, there were distinct chronological, life-history and cultural layers visible in all case-study areas. In this manner, the communities were stratified by birthplace, reason for living in an area, length of time living in an area, and religious and cultural factors. In some cases, the stratification resulted in tensions between the various sub-groups, whereas in other cases it simply indicated a layered population structure that contributed to growing population diversity.

Participants in Letterfrack mentioned the emergence of new migrant communities and how the changed population composition influenced their perceptions of where they lived. The
increasing number of foreign nationals was contrasted with the perceived ethnic homogeneity of their rural area in the past. Some participants found it difficult to adjust to the cultural changes that were occurring in their community, while others were critical of the intolerant attitudes of some residents towards labour migrants and spoke generally about the positive aspects of a more diverse population (e.g. community vibrancy and cultural heterogeneity):

What would they do if it was said (negative comment) to me or said to the ones that were saying it?

(Interview with male Letterfrack resident)

In Blacklion-Belcoo and the Ards, socio-political histories and potential tensions between Catholic and Protestant populations strongly influenced the dynamic of community relations. In Blacklion-Belcoo, participants pointed to reasonably good relationships between Protestant and Catholic communities especially considering the period during which these relationships would have evolved:

I'm still very good friends with Protestants. I suppose one can't help noticing things, but then you give up and say I've got this far. I'm not going to, I'm not going to argue with them anymore. Just let it be.

(Interview with female Belcoo resident)

In Blacklion-Belcoo, while people still remained conscious of what happened during the Troubles, there was a strong desire to rebuild cross-community relationships.

The particular demographic composition of the Ards accentuated the stratification evident within its population. The variety of groups, including native Catholic and Protestant groups, different Protestant sub-groups, migrants from the Troubles, a sizeable commuter population and the older retirees, confounded issues of fragmentation.

In some cases, the differences across population sub-groups established subtle cultural distinctions across the villages:

It's so funny because Kircubbin [predominantly Catholic] and Greyabbey [predominantly Protestant] are so different. Kircubbin always reminds me of a southern village. I don't know why I say that, but it's just sort of the double parking at the side of the road everything is more casual. Whereas, as I say, we reckon that Greyabbey is more like a little English village.

(Interview with female Ards resident)

In other cases, it was clear that having multiple sub-groups within small communities gave rise to a complex set of interactions and, in some instances, tensions between groups. This, in turn, had implications for community integration and civic cohesion:
a big lot of the population in this village, particularly the older population, are still holding on to the old ideas of 'I can spot a Catholic at sixty yards, because of the width of his eyes.' That's the mentality we are dealing with. In the early part of the Troubles, we had a big movement down from the likes of Belfast. The housing estates were developed. Now, you don't have the same problem. Because most of the people that live in these private housing estates are commuters. They don't really play a major part in the village.

(Interview with male Ards resident)

In all of the case-study sites, the relational dynamics between native residents and those who had moved into the areas were discussed. Several participants noted about how people who were born in a place seemed to perceive a clear distinction between the two groups. This suggested a categorisation of 'rural' and 'real rural' people and gave rise to the question of when somebody actually belongs to a community. One older man had lived in his village for over forty years, commenting:

Depends on people who lived here before you, whether you're rural or not. Different people turned up here looking for some part of [here] and I was going over to tell them, whoever it was, and someone from [here] said, 'He doesn't live here'.

(Male Ards focus group participant)

In the international literature, there has been some work on attitudinal differences and tensions between longer-term rural residents and newer urban migrants. However, the findings tend to vary across studies (Jobes, 1995; Smith and Krannich, 2000). Aside from relational implications of population diversity, participants, particularly those native to rural communities, spoke more generally about changes to interpersonal relationships in rural areas. Several interviewees noted that people no longer seemed to call to each other's homes. Social visiting had historically been a major feature of the social and cultural fabric of the three sites. While often just a casual social call, these visits could in other instances involve larger group elements of communal socialisation, storytelling, recitation and music. For many, the advent of television was the principal reason for the decline in visiting in rural areas. Regardless of the cause though, the loss of this aspect of rural life, and the company that it brought, was lamented:

It is isolated now I could say around here like, because well I see plenty passing but I could be here and I could be alone. Nobody visits now really. Visiting days have stopped now since television and all that came in (laughs). 'Twas lovely when people
visited you and you had the cup of tea and the chat. You know 'twas great company.

(Interview with female Letterfrack resident)

As a result, participants described how daily social contact, in the absence of strong family networks, was often based on intermittent interactions with neighbours. Some people depended almost entirely on visits from various social care providers for social contact, but these visits were, as one might expect, nearly always planned rather than spontaneous. Similar findings have been documented elsewhere, suggesting that older people sometimes find it difficult to adapt to the changing nature of rural social life (Scharf and Bartlam, 2008).

Despite this, and regardless of being an indigenous or nonindigenous resident, most research participants still felt socially connected to their communities. Community networks provided emotional and practical support for older residents within the three sites and a dependable source of assistance during periods of ill health and infirmity. The networks reflected the accumulated interpersonal connections that threaded a person's life course and that spanned the surrounding hinterland and localities:

Do you understand me now, like if you're sick or sore in hospital for instance, you have them from Renvyle you have them even from Clifden, they'll come to see you. Once they know you, you know this sort of way, there's always a great unity between us.

(Interview with female Letterfrack resident)

A small number of interviewees, however, again typically those who had moved into the locality, described a more disconnected, introverted community stemming from initial difficulties of integration:

I don't think you would ever get attached to this place to be honest with you. People seem to hide. There are things out there for them, but they won't claim anything. They're not coming out to claim anything, they're just sitting in their house you know.

(Interview with female Ards resident)

This points to the fact that social networks, and the social capital that they can be used to generate, may not be accessible to all individuals (Foley and Edwards, 1999; Shorthall, 2008).

For the most part though, participants praised the readiness of their rural neighbours to provide help and support when required. While there was an acceptance that people have their own lives and responsibilities, it was the knowledge that someone was there if needed that seemed decisive. This has been recorded in the international literature with respect to the role of local social capital in
the lives of older people (Keating et al., 2005) and the assertion by long-term and native residents and by new-residents that rural communities possess a strong sense of community connectedness and neighbourliness (Cattell, 2001; Phillipson et al., 1998; Van Dam et al., 2002; Mahon, 2007; Mahon et al., 2009).

5.3. Rural meaning and attachments

With such changes occurring in rural communities, there are clear questions about the meanings that older people associate with living in rural areas and about older people’s connection to place. In this study, however, the impact of such changes appeared to be relatively limited, with meaning and attachments stemming primarily from life-course connections and residential histories. Rural living was viewed differently by older people who were indigenous to these communities, or similar rural communities, and those who moved to rural areas later in life. Previous work on ageing and place has shown that older people from different backgrounds relate to their communities in different ways (Windley and Scheidt, 1988; Burholt and Naylor, 2005). At a fundamental level, there was a difference in how the term rural was interpreted. Participants who were native to these communities concentrated on emotional aspects of place and what their communities meant to them personally. They described a multidimensional, but primarily positive, construction based on community relationships; peace and quiet; connections to birthplace; wide-open spaces; and psychological and emotional freedom:

Well, I’ve been living here all my life, I never moved anywhere. And ah, I mean I found it a very nice part of the country or the world to live in: quiet and peaceful. And we have very good neighbours. And ah, you know everything goes on grand.

(Interview with female Letterfrack resident)

Conversely, for participants who were originally from more urban communities, the meaning of rural focused more on the structural and environmental characteristics. There was a tendency amongst these participants to problematise rural life:

Well, deprivation, employment or lack of employment. Lack of facilities and geographical isolation. We are 11 miles from the nearest big centre. Another four miles away from a hospital... We don’t have a local ambulance base. We are talking about the whole of the Peninsula.

(Interview with male Ards resident)

The distinction in associated meanings was intertwined with...
how these groups viewed their relationship with their communities. Again, those individuals who were born in the three sites spoke in depth about their connection to, and fondness for, their community. Several interviewees cited their native upbringing as an explanation for being tethered to these areas throughout their life course and described the communities as a core part of their identity:
Oh I was born here about a mile up the road from here and I don't think I was ever intended to be away from it. (Interview with female Belcoo resident)

Participants suggested that the characteristics of rural places appeared to be naturally congruent with the preferences of older people. As reflected elsewhere (Van Dam et al., 2002; Mahon, 2007; Mahon et al., 2009), most interviewees, regardless of having a native connection to the area or not, mentioned the scenery, and in particular the tranquillity of rural places as being reasons for staying in the communities:
The wide-open spaces and plenty of fresh air and you know lack of noise as we get older. I love the sound of silence now. more so than I did when I was younger. I love the peace and the quiet. It comes with advancement of your age, I think, that you can't stick the same rula bula that you did when you were younger. And I like that in the rural area. (Interview with female Belcoo resident)

By contrast, there was evidence of a disassociation in some people's relationships with their communities. For these individuals, even rural characteristics often perceived to be positive were problematised, indicating that the nature and appreciation of such attributes are relative:
Oh it is a nice place, a nice resting place cause you could rest all the time if you wanted (laughs). Then when you go to bed properly you won't rest at all. You can only sleep so much. (Interview with male Letterfrack resident)

The specificity of attachment to home-places was also underlined in interviews. One participant, who returned to Ireland after 40 years in England, commented that even when in close proximity to her original parish (six miles away), she still did not feel like she was truly home. Feelings of disconnection or 'this is not my place' were strongest amongst those who conceptualised rural as meaning disadvantaged and who had moved into these areas from more urban areas later in life. These participants tended to speak about more about the exclusionary characteristics of rural places, with the level of emphasis being linked to feelings of a lack of belonging:
So we came back here and the place was goin’, my wife’s place was goin’. (laughs) Well I tell you it doesn’t mean nothing to me really. It’s not too bad I can still drive. Now, but if I wasn’t driving a car I’d be out of here. Yeah, I’d get out of here. So because, there’s nothing you could do, you’re there, stuck. But the car saves you. (Interview with male Letterfrack resident)

5.4. Community engagement
Even with distinctions and changes in individual contexts and differences in how different older people relate to their communities, most participants were actively engaged with their local communities in one form or another, supporting the few existing studies on this topic (Heenan, 2010a, 2010b; Dorfman and Rubenstein, 1994; Skinner and Joseph, 2007). This encompassed participation in charitable groups, voluntary organisations, church groups, historical societies and activity groups. It also entailed more informal activities, including babysitting and assisting more dependent relatives and neighbours. In essence, the contributions of older people seemed to be tackling, in part at least, the structural problems arising from the increasingly deficient state and market systems in each case-study site. They also provided evidence of a commitment to community and the relationships embedded within that community. Several individuals referred to their economic contribution to the local area and to the various businesses and shops in the vicinity. Participants viewed their role in terms of sustaining the local community and in providing one more user to justify the statutory funded infrastructure:

Yeah, that’s how I support the [local age] club, you know by going to it. You have your meal there, you buy your meal and all that, like you contribute that way to both of them [club and community].

(Interview with female Letterfrack resident)

A strong theme of reciprocity underlined participants’ contributions to their community. Studies have shown that reciprocity, in combination with social networks and norms of trust, is important not only for the generation of social capital, but also for a sense of a strong community with shared ownership (Onyx and Bullen, 2000). The nature of voluntary activity and the benefits that were in turn received from making the contribution featured in several participants’ accounts; either from the activity of volunteering itself or from the reciprocal actions of other members of the community. Participants who were no longer able to volunteer described how their previous contribution to the locality motivated reciprocation from the current cohort of volunteers:
Sure, but I got a lot out of it [volunteering] as well. And nowadays, seeing as I’m not really able you know, people are very good to me. It’s payback time! I am getting pay back now!

(Interview with female Blacklion resident)

Whether originally from these communities or not, older people in this research recognised the need to make an effort within their own rural localities, both in terms of mixing with other people and undertaking a civic responsibility. Combating isolation and issues of integration was viewed as a mutual process that while needed to be led by the community, required the older person to assume an active role. Community groups, such as active age groups, were especially praised in this respect:

Well I think if you are interested you can get involved with other groups. You do need to do that as you are getting older. You have to make the effort to go out and join things.

(Female Ards focus group participant)

Several participants highlighted the apparent unwillingness of some people to become active citizens. Notwithstanding high rates of economic activity amongst rural dwellers, older individuals felt that it was the civic duty of local residents to assist in running and developing the community. However, interview and focus group participants questioned the extent to which older people’s contribution to their community was valued (Le Mesurier, 2003; O’Shea and Conboy, 2005). They suggested that government departments and policy makers failed to recognise the efforts of older people and the time and financial investment that older volunteers were making to their rural communities:

Well, if you hadn’t the volunteers you’d be dead, that’s it. If people didn’t volunteer, the authorities, as you call it, well they are useless as far as transport, hospitals, everything. You go to politicians and nobody does anything for you. It’s the older people that’s fighting all the time.

For a small number of participants, typically older old individuals, general health, mobility and energy levels impinged upon their capacity to contribute to their communities and to participate within their locality:

Ah no, I’m quite happy now the way I am. You see I’m not able you see. I wouldn’t be able to take part as much now at my age, you know.

(Interview with male Letterfrack resident)

6. Discussion

This article has explored how changing community contexts have shaped the community lives of older people in rural areas of
Ireland and Northern Ireland. As an exploratory analysis, several limitations should be acknowledged. Due to the small-scale nature of the research, and the diverse contextual factors of place and the heterogeneity of the rural older population, it is not possible to generalise our findings to other rural settings. Although community changes reflect broader, and more global, social, economic and demographic trends, the way and the extent to which these trends impact on local structures and representations is likely to vary across different kinds of rural communities. This work does, however, provide valuable insight into the experiences of ageing in rural places on the island of Ireland. What is clear is that the changes that have occurred and are occurring in these rural communities have influenced the lives of older people with respect to their experiences of accessing services, and social relations and social cohesion. Challenges with respect to general services and health and social care provision were introduced, sustained or intensified by the changing socio-economic structures in all rural communities. While in some cases, deliberate neoliberal strategies may have impacted sharply on access, there was evidence of decline over a long and sustained period in each of the three sites.

Where concerns around social cohesion and togetherness existed amongst indigenous older people, changes in interpersonal social relations and socialisation within the communities certainly contributed, as did changes in the demographic composition of the local population. For older people who were not indigenous to these communities, these feelings appeared to reflect a lack of integration. This in turn was likely to be a consequence of several potential factors including: insularity within a community, underlined by notions of ‘us’ and ‘them; a lack of engagement on the part of individuals; and a lack of social opportunities in the area. Of course, for some individuals in some of the communities, a sense of fragmentation was also a consequence of long-standing tensions, based on traditional religious differences, both between Catholic and Protestants and between protestant population sub-groups. The role of faith-based groups in reinforcing local segmentation in these communities needs further investigation.

Of interest is how informal networks continue to provide a sense of connectedness and a significant resource for older people in rural areas, even if only on occasions when assistance is needed. For many, it was these connections, especially their availability in times of crises, that underlined their connection to their communities. This may help to explain why older people’s attachment to
place was largely independent of the demographic, social and economic changes that had occurred in the communities. Rural ageing is not a uniform process and is not derived from a set of generic experiences in static and homogenous communities. Across each of the case-study sites, older people were shown to relate in different ways to their rural communities, reflecting their individual contexts and life-course histories. It was also clear that the relative weighting given to the problems and challenges of rural living depended on people’s connection and relationship to their place. This finding lends weight to previous work undertaken in other contexts (Windley and Scheidt, 1988; Burholt and Naylor, 2005; Davies, 2011).

The consistency of findings across the sites would suggest that we should view these communities not as separate unconnected settlements in a divergent rural typology, but instead as a product of the combination and intersection of a series of continua incorporating: rurality, socio-economic changes, demography and fragmentation. For example, while Letterfrack is more rural, in the traditional spatial sense, than the other two sites, all three communities have experienced common socio-economic and demographic changes. Similarly, while the particular demographic and socio-political characteristics of the Ards and Blacklion-Belcoo may have produced a more pronounced potential for fragmentation, this is a heightened variation of the tensions that can occur between indigenous, new and migrant residents in Letterfrack and in many other rural areas. Moreover, difficulties and challenges around service infrastructure, changes in the nature and culture of rural living, and the meanings and connections associated with rural places were common themes across the three sites.

In system terms though, there may have been an expectation that funding and structural differences in the welfare states of Ireland and Northern Ireland would have given rise to different sets of experiences, especially with respect to service access and usage, and different outcomes in rural communities. This was not the case in this research and lends weight to previous work for the general older population that suggests differences across the island of Ireland are neither clear nor consistent. In larger cross-border survey analyses, few meaningful differences have arisen in objective measures of health, service usage and health behaviours between the two jurisdictions (McGee et al., 2005; Ward et al., 2009). There is still significant debate whether or not in real terms the welfare systems in Ireland and Northern Ireland are altogether that dissimilar, given they are both broadly liberal and
encompass a mix of private, public and voluntary provision. The similarity of these broad macro issues helps to explain the emphasis that participants placed on civic responsibility and contribution to community. The failure of the state system and the underdeveloped private market system in rural communities creates significant deficits in rural areas, as was evident in this research and elsewhere (Shucksmith, 2004; Commins, 1993). Understandingly, this places additional pressure on voluntary and community mechanisms as gaps need to be filled. For older people in this research, however, while their actions were often linked to particular infrastructural deficiencies, their overall philosophy in relation to participation and engagement was driven more by traditional principles of reciprocity and contribution, regardless of their previous connections to the communities. This demonstrates the importance of giving and sharing for older people, sometimes as a means of exercising influence over their immediate environment. This study did not explicitly set out to explore exclusionary processes in the community lives of older people in rural communities. Nevertheless, both as a consequence of the changes occurring in rural communities, and patterns of residential tenure, it was clear that some participants felt excluded from certain dimensions of 'normal' life within their communities. Principally, and in a more tangible manner, this involved a lack of general service infrastructure, challenges with respect to accessing health and social care, deficient transport and a depletion of local service and social meeting centres. Other issues were more subtle, incorporating feelings of disconnection, weak social relationships and a general lack of trust. Inclusion had as much to do with having the opportunities for reciprocity and to maximise capabilities and contribution than any connection with income and wealth. Sometimes these issues were linked to clear absences, for example deficient social networks, but not always, and could and did exist in the minds of older people without any specificity. As Commins (2004) notes, many of the mechanisms of social exclusion are invisible in rural areas, and although there has been some recent work in this area (Scharf and Bartlam, 2008), this is a topic that requires further research.

7. Conclusions

Rural places are more than mere landscapes. The rural communities represented in this research are dynamic entities in themselves that are constantly shifting and changing, shaping and influencing the lives of older people living within them. Naturally, and as evidenced by the engagement of participants in these sites,
in turn, older people shape and influence their rural communities in a dynamic dialectic and reciprocal relationship. The challenge for policy makers and practitioners is to nurture and enhance this relationship to ensure mutual benefits for both individuals and communities. While the small-scale nature of the empirical research limits our ability to derive detailed policy and practice recommendations, there are three potentially useful lessons stemming from the work. First, if principles of equity and fairness are to be applied to ageing in Ireland and Northern Ireland, then there are clear limitations to the traditional economies of scale arguments with respect to rural service provision. There needs to be a reassessment of the relative weighting given to efficiency and equity in policy development concerning rural-dwelling older people, particularly in relation to health and social care provision and services that help to maintain social cohesion and connectedness. In this light, there needs to be an acknowledgement of the dual role of person-led provision, for example postal delivery, in maintaining services and maintaining contacts. Second, policy makers should recognise the diversity of the rural milieu, in terms of differences across rural communities and differences within rural older populations. Without such recognition, there will always be a danger of viewing older people and their communities as homogenous, and as a consequence policy will remain generic and, therefore, less effective. Third, communities must be assisted in fostering cohesion between the generations and between different older population sub-groups. While this is a longer-term and on-going process in relation to religious differences in Northern Ireland, social fragmentation was evident to some extent in all the case-study communities and could be addressed, in part at least, through community-based social integration initiatives, including intergenerational programmes. The state has a role to play in facilitating such initiatives, but communities themselves can and should take the lead in developing new and innovative strategies that promote cohesion and connectivity. Acknowledgements This research was funded by the Centre for Ageing and Research Development in Ireland (CARDI). The funders were not involved in the design or completion of the study. We would like to thank all of the people who took part in the research. We would like to thank Shirley McNulty, Caroline Maguire
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