

Wellbeing, independence and mobility: an introduction

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ABSTRACT

This paper introduces the theme of the special issue on wellbeing, independence and mobility. We begin with outlining the complexity of each of these notions and then turn towards their interdependence. It is argued that the links between wellbeing, independence and mobility are manifold and contextual in older people's everyday lives: they differ between places, between individuals and across phases in each individual's unique life-course. The inherent complexity of those links can be examined fruitfully and understood better, if a geographical or environmental analytical perspective is adopted. We also suggest that the interdependence of wellbeing, independence and mobility in later life needs to be understood in the context of neo-liberal governmentality and the creation of particular ways of being and acting for older people. The piece concludes with a brief description of the papers brought together in the special issue.

Key words: wellbeing, independence, mobility

Introduction

Wellbeing, independence and mobility – three terms that are easily and quite often used in gerontological discourse and the social sciences more generally, three terms also with meanings that at least at first glance appear to be obvious and straightforward. Upon closer scrutiny, however, each concept can be difficult to pin down, heterogeneous and contested. In other words, each term is complex and should be carefully scrutinised. Social gerontologists have certainly interrogated the notions of independence and wellbeing, significantly advancing our understanding of these concepts (*e.g.* Secker *et al.* 2003; Ball *et al.* 2004; Bowling 2005). However, as a concept mobility has attracted less attention in the social gerontology literature (see also Kaiser 2009).

It is no coincidence that wellbeing, independence and mobility are brought together in the title of this guest editorial and special issue. This is because they are intricately connected with each another in many ways, especially in later life. For instance, if mobility is understood as the capacity to move through physical space and independence as independent living, then it is easy to see that the latter presupposes that older people (and others) are at least to some extent mobile within and beyond their residence. Likewise, it is widely believed within and beyond academia that independence and mobility are important constituents of wellbeing in later life: mobility allows older people to engage in everyday activities outside the home that are meaningful and enhance wellbeing, whilst independent living gives older people control over the times and places in which activities are carried out (*e.g.* Hill 2000; Audit Commission 2004; Peace *et al.* this issue; Ziegler and Schwanen, this issue). Given these positive linkages, ageing in place – growing old in one's dwelling and neighbourhood – is a major concern of national policies on older people, housing and care in such countries as

the UK and the Netherlands (VROM and VWS 2007; Sixsmith and Sixsmith 2008).

However, the relationships between wellbeing, independence and mobility in later life are complex and can take on many different forms. While gerontologists and others have been studying these linkages for some time, further study is justified and necessary, as across the Western world both the absolute numbers and the proportion of older people ageing in place will increase in the near future.

Against this background, the contributions in this special issue aim to enhance our understanding of wellbeing, independence and mobility and their complex interrelationships in later life. They do so by explicitly adopting environmental or geographical analytical perspectives. These are particularly apt to analysing the complex interrelationships of wellbeing, independence and mobility in later life, because they allow researchers to foreground the importance of older people's place-bound experiences, unique life histories and the particularities of how they interact with the social and physical environments in which they are situated in their everyday practices. Individually the articles may focus on a subset of the linkages between wellbeing, independence and mobility, but together they shed light on the whole wellbeing-independence-mobility triad. In the remainder of this piece we will explore the interrelationships in greater detail, amongst others by building on and re-interpreting findings from the individual papers. However, we first return to the complexity of the concepts of wellbeing, independence and mobility.

Complexity

Different conceptualisations of wellbeing, independence and mobility abound in the social sciences. Of the three concepts, wellbeing is perhaps the most complex. This is in part due to

the fact that wellbeing is being studied in disciplines as diverse as gerontology, economics, psychology, health studies, sociology and human geography, and is understood and examined in different ways in each. But even within a single discipline differences can be profound. As Ziegler and Schwanen (this issue) also document, diverse conceptualisations of wellbeing can be identified in the social gerontological literature. These include the hedonic approach of subjective wellbeing (George 1981; Ryan and Deci 2001) and the eudemonic personal wellbeing tradition (Ryff 1995; Ryan and Deci 2001). Others have employed Amartya Sen's capabilities approach (Gilroy 2007), mobilised theories of human need (Higgs *et al.* 2003), or relied on 'lay understandings' – i.e. how older people themselves understand wellbeing and the factors that contribute to it (Bowling and Gabriel 2007; Bowling 2009).

The conceptual complexity regarding wellbeing is amplified by the existence and use of the closely related term quality of life. While some authors draw distinctions between wellbeing and quality of life (*e.g.* Lawton 1983; Fleuret and Atkinson 2007), we tend to see them as more or less interchangeable. This is because both concern the 'good life' and what makes life worth living, and because some of the identified facets of quality of life and wellbeing are the same. For instance, having positive relationships with others and a role in society have been identified as components and constituents of both wellbeing and quality of life (*cf.* Ryff 1995; Bryant *et al.* 2001; Bowling and Gabriel 2007). What is more, at least in the gerontological literature, both are employed to underscore that healthy or successful ageing is more than the absence of disease, illness or impairment (*ibid.*).

Independence is also used in diverse contexts and understood in a variety of ways. In the gerontological and social care literature, the dominant understanding is in terms of functioning unaided and not being dependent on others (Secker *et al.* 2003; Leece and Peace

2010). However, older people tend to have more flexible interpretations of independence that change over time (*e.g.* Mack *et al.* 1997; Secker *et al.* 2003; Ball *et al.* 2004; Plath 2008). On the basis of interviews with residents of assisted living units in Georgia, USA, Ball *et al.* (2004) concluded that older people understood independence not only in terms of self-reliance and avoiding dependency but also as retaining functional ability, reciprocity, autonomy, meaningful activity, valued role and continuity of identity. These understandings shifted over time: study participants reduced their expectations for independence over time so that these matched their decreasing functional capacities.

To capture some of the richness and diversity of ‘lay’ understandings, Secker *et al.* (2003) have proposed a two-dimensional model of independence composed of levels of self-reliance and unaided functioning on the one hand, and of perceived autonomy, desired level of choice and social usefulness on the other. Similarly, drawing on Collopy (1988) and work in dis/ability studies, Leece and Peace (2010) distinguish decisional from executorial autonomy. Decisional autonomy indicates the ability and freedom to make decisions without external coercion or restraint, whereas executorial autonomy refers to the ability and freedom to carry out and implement personal choices. The conceptualisations proposed by Secker and colleagues and Leece and Peace are clearly more comprehensive than the idea of independence as self-reliance. However they neglect the fundamental *interdependence* of individuals with people, animals, nature and with inanimate materiality. The latter may for instance include the house and neighbourhood to which older people often have become attached to over time and the car that allows them to travel elsewhere. Because of the inherent limitations of independence as a concept, its very use helps to reproduce and maintain the subordination of dependence and interdependence that is characteristic for individualistic Western societies (see also Reindal 1999).

Finally, mobility is usually understood as the capacity to move or as actual or potential movement through physical space in the gerontological literature, but a range of other conceptualisations can be identified in such disciplines as sociology and human geography (see Ziegler and Schwanen, this issue). Some of these have found resonance in the social gerontology literature (Mollenkopf *et al.* 2004; Kaiser 2009; Siren and Hakamies-Blomqvist 2009), but more work could be done to develop a broader conceptualisation of mobility. The functionalism – the idea that mobility is little more than getting from A to B – that underpins much work about mobility in later life could be challenged further through engagement with the mobilities turn in social and cultural theory (*e.g.* Urry 2007; Adey 2010). In addition, the links between mobility, identity and the social construction of old age needs to be explored in greater detail (Schwanen and Páez 2010; Mollenkopf *et al.* this issue).

We do not wish to claim that any given conceptualisation of wellbeing, independence or mobility is by definition the best or most preferred. This depends on the context and purpose of the research or policy-related question addressed. Also, every conceptualisation is selective in that it foregrounds certain aspects of wellbeing, independence and mobility or enacts it in particular ways, whilst simultaneously rendering invisible other facets (*cf.* Law 2004). Rather, we believe that critical examination is needed of understandings of wellbeing, independence and mobility both in academic discourses and as held by older people in different geographical contexts. The effects these understandings generate in different places also need to be examined carefully.

The contributions brought together in this special issue extend our knowledge of such understandings in various ways. For instance, the article by Portacolone brings out the sheer

diversity of how older people understand independence and what this means to them, whilst Mollenkopf and colleagues and Ziegler and Schwanen do the same for mobility. Further, Portacolone, Peace *et al.* and Bailey and colleagues complement prior work that challenges the prevailing understanding of independence in terms of self-reliance and functioning unaided. Portacolone shows how for some participants in her study independence is premised on interdependence with others; both Peace and colleagues and Bailey *et al.* discuss how independence and independent living in later life are made and remain possible through particular material arrangements and spatiotemporal practices within the home. Actor-network theory (ANT) (Latour 2005; Moser 2006; Winance 2007) is helpful in further developing the insights the papers in this special issue provide about independence. This is because ANT provides a unique perspective on individuals' interdependence with others, animals, nature and inanimate materiality. Combining ANT with the papers in this special issue, we can say that independence is a *collective* achievement that emerges out of interactions not only among human agents but also between humans and non-human elements. It is a co-production in which humans, furniture, familiar everyday technologies as TVs and phones, stair rails, walking sticks, pendant social alarms and so on actively mediate.

Finally, the papers by Ziegler and Schwanen and Mollenkopf and colleagues further open up the notion of mobility by moving beyond functional and objective conceptualisations. Mollenkopf *et al.* extend earlier work into older people's own understandings of mobility by analysing how these change over time. Ziegler and Schwanen also analyse how older people redefine their mobility as their situation changes. At the same time, they outline a relational, broader conception of mobility in which movement in physical space is linked to mobilities in the psychological, electronic and other realms.

Interdependence

While it is important to understand how older people themselves or researchers understand the concepts of wellbeing, independence or mobility in later life, a deeper grasp of each one can be developed by analysing their interrelationships. These interdependences can be analysed at multiple levels. This special issue focuses on the level of the *everyday lived experiences* of older people's mobility, independence and wellbeing. The utilisation of a number of different methodological and conceptual approaches by the contributors of this special issues further develop our understanding of these experiences. For instance, the ecological models of ageing derived from Lawton and Nahemow's (1973) seminal work (see Peace *et al.* and Shoval *et al.* in this issue), Foucaultian scholarship and political economy (Portacolone), the life-space approach (Bailey *et al.*) and the mobility turn in social and cultural theory (Ziegler and Schwanen).

From the articles in this special issue we can conclude that the links between wellbeing, independence and mobility are heterogeneous and contextual. They depend critically on the embodied capacities of older people and on the resources they can mobilise. 'Embodied capacities' refer to what people can do with their bodies in relation to the social and physical environments in which they are situated. Following Gibson's work on affordances and Merleau-Ponty's theorisation of the lived body (Gibson 1979; Merleau-Ponty 2002), we should understand these capacities not as individual attributes but as emergent from the interactions between individuals and their environments, and as pertaining to how such biological and cultural factors as perceptual and motor skills, cognitive function, stamina, and mental dispositions work out in concrete everyday actions and situations. Embodied capacities are thus inherently environmental or geographical. Where these capacities are

greater, independence in the sense of independent living and functioning unaided tends to be related positively to wellbeing, as Peace *et al.* and Portocolone suggest. On the basis of the contributions to this special issue, we may say the following with regard to mobility: actual movement through physical space, independence and wellbeing mutually reinforce one another via complex feedback loops for older people with greater embodied capacities, but for those whose embodied capacities have diminished over time mobility, independence and wellbeing can become linked up in a downward spiral. Negative feedback loops may emerge because older people restrict their out-of-home movements or because they become dependent on forms of mobility they perceive as problematic or undesirable, such as being driven to places by others or having to use such mobility aids as scooters or walking sticks.

However, negative feedback loops leading to lack of wellbeing, dependence and immobility are not inevitable and do not occur for everybody or in every place. This is among others because people's embodied capacities are dynamic: older people can make adjustment to their (physical) environments by developing new ways of interacting with them, training their bodies through fall programs and in other ways, and redefining their understandings of independence and mobility (see Peace *et al.*, Bailey *et al.* and Ziegler and Schwanen in this issue). Additionally, as Bailey *et al.*, Mollenkopf *et al.* and Shoval *et al.* suggest in different ways, people can also compensate reduced embodied capacities by mobilising a variety of resources, including such mundane technological devices as walking sticks and pedant alarms and the help of others. If, however, such resources are limited and/or older people are incapable of adjusting their embodied capacities vis-à-vis environments – for instance, because of profound physiological changes associated with biological ageing or because in earlier phases of the life-course the 'will to be independent' has become deeply ingrained in

their being and doings (see also Portacolone and Ziegler and Schwanen in this issue) – negative effects and feedback may come into existence.

The key message is that mobility, independence and wellbeing can be linked in many different ways, which exhibit great variation between individuals, places and also between periods in a single person's life-course. Events, such as the unexpected loss of one's driver's license for medical reasons or a fall, may suddenly reset previously existing positive feedback loops between mobility, independence (*e.g.* living alone and being able go out and about when and when one likes) and wellbeing (*e.g.* having positive relations with others and playing valuable role in society) to which some people may adjust more successfully than others. Given the heterogeneity of linkages between wellbeing, independence and wellbeing, we believe that detailed and nuanced in-depth studies of the societal and institutional practices and often seemingly mundane lived experiences of older people in different places, with different life-courses and personal histories, of different gender, ethnic extraction and so on, are indispensable (Hopkins and Pain 2007). Geographers and environmental gerontologists are well equipped with the analytical tools for conducting such in-depth studies. The current collection of articles as well as earlier publications in *Ageing & Society* and elsewhere are important steps in that direction, but further work is needed. Further, the heterogeneity of linkages also implies that researchers should be careful to avoid reductionist and overly generalising conclusions about how mobility, independence and wellbeing are interrelated.

The interdependence of wellbeing, independence and mobility can also be understood at another level that both includes and exceeds the everyday life of older people. This level is what in post-Foucaultian scholarship is known as the *dispositif* – “the assemblage of

imaginaries, rationalities, techniques and practices” (Dean 2010:461) – through which old age is governed and particular subjectivities – normatively prescribed ways of being and doing – are created for older people. As multiple authors have argued (Katz 2000; Gilleard 2005; Featherstone and Hepworth 2005; Laliberte Rudman 2006), the rise of neo-liberalism and the consumer culture has been accompanied by new discourses about ageing. Discourses that associate ageing with decline, illness, impairment and bereavement have been complemented and refracted by discourses of ‘lifelong fitness’ (Gilleard 2005), ‘healthy ageing’ or ‘active ageing’. While the latter differ from each other in subtle ways, they all highlight vitality, activity and resisting the negative consequences of biological ageing. This work in social gerontology aligns with governmentality studies (Dean 1999; Miller and Rose 2008) in sociology, human geography and related disciplines, which examine the “conduct of conduct” (Gordon 1991:2) or the activities and involved rationalities and techniques through which the actions and thoughts of some person or persons are shaped and guided.

Governmentality studies have shown that a distinctive feature of neo-liberalism – here not so much understood as an ideology but more as a “discourse about the nature of rule and a set of practices that facilitate the governing of individuals from a distance” (Larner 2000:6) – is the creation of active, responsible subjects that through consumption and other choices seek to fulfil themselves within such communities as the family, workplace, leisure associations and the neighbourhood (Miller and Rose 2008). This creation of new subjectivities is non-intentional in that it does not follow from the intentions of a single actor but is instead the emergent outcome of myriad distributed practices involving, among others, public policy, popular media and conversations and everyday small talk between individuals.

The creation of active and self-responsible subject positions in neo-liberalism has been linked to the growing emphasis on personal wellbeing in the realms of policy-making and the

popular media (Sointu 2005; Carlisle *et al.* 2009). In advanced neo-liberalism, (older) individuals are often addressed by public authorities, experts, advertisers, the media, others in their social networks on the assumption that they want to ‘be well’, *i.e.* to be active, have a role in society, and so on; they are expected to seek out ways of living that promote their own quality of life and autonomy (*cf.* Rose 1999). If older people encounter these assumptions and expectations repeatedly over time, their ideas about what they are and what they do may be affected, although the nature and intensity of effects is likely to differ across individuals (as they are active agents rather than passive subjects). Certain ideas, values and desires – *e.g.* that it is important to remain self-reliant, or to go out and about even when you think you don’t have the energy for it – may become ingrained in people’s being and selves (*cf.* Crossley 1996). Such processes of incorporation may be particularly strong when they align with and are able to resuscitate remembered experiences from earlier stages in the life-course (*e.g.* when one could go out and about unaided with little effort). Such processes may also entail that older people adopt independent living and mobility as technologies of the self (Foucault 1988), *i.e.* as mechanisms through which they act on their selves in order to fulfil their authentic potential and live a life a worth living. Some of the contributions in this special issue seem to indicate that for many older people independent living and out-of-home mobility function in this manner.

The governmentality perspective allow us to see that the idea that being active, mobile, self-reliant, able to make one’s own decisions, and so on in later life pave the way towards wellbeing is a temporally and spatially contingent social construction, one that is inextricably bound up with the neo-liberal era. In fact, framing wellbeing as primarily a personal phenomenon that can be enhanced through independent living and out-of-home mobility can be understood as a governmental technique that helps to produce what in contemporary

western societies are understood as ‘good’ older people, *i.e.* people who look after themselves and their wellbeing in ways that place a rather limited burden on existing and future health care systems and national government budgets. This conclusion has at least two implications. Although quality of life has long been of interest to social gerontologists, the grown and growing interest in wellbeing, independence and mobility and their interrelationships in later life among gerontologists but also geographers, transport researchers, psychologists and others is bound up with the development of neo-liberalism. Further, academic research about wellbeing, independence and mobility in later life – and indeed this special issue – does more than merely examine and document the very real experiences of older people. It may reinforce the propagation of active, self-reliant subject positions for older people. If, however, academics provide nuanced and context-sensitive accounts, as the contributors to this issue do and indeed many others have done, they help to qualify those subjectivities and to open up alternatives.

The above critical reflections notwithstanding, we do believe wellbeing, independence and mobility need to be maintained and enhanced in later life, and academics can make an important contribution here. For one, deficits in wellbeing, independence and mobility have real, negative effects on older people. Older people also tend to think of wellbeing, independence and mobility as desirable and good, as some of the contributions to this issue make clear. Also, across the Western world population ageing will have severe consequences for health care systems and national budgets when wellbeing, independence and mobility will not be maintained or stimulated among the older and oldest older persons. At the same time, however, we should be aware that the promotion of wellbeing through mobility and independent living among the oldest cohorts also comes with risks and conflicts that demand

mitigation as well as critical reflection on the limits to which neo-liberal subject positions for older people should be promoted.

With regard to risks, older people who are less privileged in terms of embodied capacities and resources are at greater risk of social exclusion, amongst others because they may refuse assistance due to a deeply ingrained desire to be independent (Portacolone this issue) or because of falls or fear of falling (Bailey *et al.* this issue). They may also endanger themselves or others, as they may start wandering, get lost or become unsafe drivers. These risks have of course been acknowledged by policy-makers, researchers and others and are addressed in many different ways. For instance, fall prevention programs have been set up and monitoring systems and assistive technologies through which older people can alert others are increasingly used (Bailey *et al.* this issue), and transport systems are redesigned to improve traffic safety (e.g. Oxley *et al.* 2010). Academic research contributes to the governing of risks associated with independent living and mobility, among others by examining how less privileged older people negotiate and interact with the environments in which they are situated and how they respond to risk-reducing interventions. The contributions by Bailey *et al.* and Shoval *et al.* in this special issue could be placed in this tradition of risk mitigation research.

While certainly not the only conflict one could think of, the promotion of wellbeing via out-of-home mobility in later life is to some extent in tension with attempts to reduce greenhouse gas (GHG) emissions in the transport sector. Given that transport is an increasingly important source of GHG emissions and technological measures (cleaner, more efficient vehicles) will not suffice, it is by now widely accepted that car use needs to be reduced (*e.g.* Banister 2008). At the same time, a steady stream of studies has shown that cars are of great importance to

older people in many geographical contexts (Davey 2007; Schwanen and Páez 2010; Ziegler and Schwanen this issue; Mollenkopf *et al.* this issue): they provide access to places, activities and people that provide meaning, contribute to people's independence and are associated with people's personal identity. It is not unlikely that the importance, values and emotions associated with car use will be larger in future generations of older people, given that they may have relied on cars to a greater extent in previous life-course phases than older people. What is more, studies have also shown that alternative modes of transport, such as public transport and walking, frequently do not satisfy older people's mobility needs as well as cars do (*e.g.* Siren and Hakamies-Blomqvist 2004; Adler and Rottunda 2006). It seems that especially for (future) older people ageing in place in suburban and rural areas, the need to reduce car use and the importance of being able to drive may clash with each other, which may adversely affect their personal wellbeing. Further research is required about how the competing interests of ageing in place, drive a car for reasons of wellbeing and the need to reduce driving for the sake of the environment are and can be negotiated by older people, and environmental or geographical analytical perspectives would again be useful.

The contributions

This special issue brings together *environmental* or *geographical* perspectives on mobility, independence and wellbeing. In the preceding discussions we have already alluded to the papers brought together in this special issue but here we will introduce each article briefly. Drawing on and developing their earlier work, Peace *et al.* extend ecological models of ageing and are revealing some of the complexities of person-environment interaction by focusing on the subjective experiences of ageing, change and continuity in relation to housing decisions. Using ethnographic methods, they show that older people can redefine aspects of

their identity in response to changes in their current environment and living arrangements in order to maintain or enhance their personal wellbeing. Peace *et al.* propose the concept of option recognition to define the point at which an older person's adaptive behaviour or environmental adaptations are no longer sufficient in maintaining the balance between individual capabilities and environmental pressures. At this point, in order to maintain wellbeing, new (housing) options have to be evaluated to maintain continuity of identity. Portacolone also uses ethnographic methods to analyse the lived experience of independence among solo living older people in San Francisco. The author argues that the seemingly instinctual desire for independence among older participants is socially produced and reproduced through individual discourses and social and institutional practices. As many of her participants were living on a low income, she critically examines the effects of discourses of independence on those who do not have the resources to access opportunities for maintaining independence. Her main argument is that this imperative of independence which is particularly strong in the USA also has important downsides and comes with risks for vulnerable older people. She concludes her paper by exploring how an ethics of *interdependence* which emphasises individual capabilities and potential within an enabling and supporting community environment may be used to mitigate those risks. Bailey *et al.* also consider risks that come with independent living, namely those associated with falls and the fear of falling, but unlike most previous research they explicitly take a social science rather than a biomedical approach. Drawing on the life-space approach (Baker *et al.* 2003) and using ethnographic methods, these authors aim to raise older people's awareness of their own routine interactions with their home environments in order to explore the impact of *fear of falling* on participants' mobility, social participation and independence. The authors conclude that technologies and rearrangements of people's home spaces can reduce the actual and perceived risk of falling as long as they are adaptable, are commensurate with the

individual's identity and are fully integrated into everyday practices and meanings of the home space.

Like Bailey *et al.*, the other contributions focus on mobility as well as its relationships with independence and wellbeing. Ziegler and Schwanen argue that a broad and relational conception of mobility needs to be employed to enhance our understanding of the links between mobility and wellbeing. They develop such a broad and relational conception on the basis of recent research about daily mobilities utilising social and cultural theory and focus-group interviews with older people in County Durham in the UK. Using this conceptualisation, they then show how wellbeing, mobility and also independence are interrelated for the focus-group participants. Like Ziegler and Schwanen, Mollenkopf *et al.* understand mobility as more than a functional and objective phenomenon but as subjectively experienced and imbued with meaning. Their study is unique in that it explores longitudinally how and to what degree older people's satisfaction with and the meanings given to out-of-home mobility change over a period of ten years. Mixed-method research among 82 German respondents suggests that the meanings inscribed into mobility are rather stable over time, whereas participation in leisure activities, travel and satisfaction levels with out-of-home mobility tend to decrease with age. The authors emphasise the variability between individuals' ageing pathways but conclude that many older people adjust their expectations in order to accommodate the effect declines in mobility has on their personal identity and wellbeing. Finally, Shoval *et al.* analyse the out-of-home mobility of older Israelis with different levels of cognitive function based on the understanding that mobility is also an important aspect of the wellbeing of cognitively impaired older people. These authors develop and discuss an innovative method for measuring the out-of-home mobility and use of space and time by cognitively impaired respondents based on Global Positioning System

(GPS) devices for capturing travel data and Geographic Information Systems (GIS) for its analysis. Analysis of the collected information confirms that the spatial range of out-home mobility and diversity in daily time use patterns was smaller among cognitively impaired respondents. The authors argue that the limited spatial range and times of movements should be taken into account in urban planning to make services *locally* available and accessible. Otherwise the independence and wellbeing of cognitively impaired older people will be adversely affected.

The papers in this special issue suggest that the links between wellbeing, independence and mobility are manifold and constitute a fertile area for research using environmental or geographical analytical perspectives. We hope that the studies brought together in this issue of *Ageing & Society* inspire others to further analyse wellbeing, independence and mobility as concepts and in all their interrelationships.

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