

5 Therapeutic Virtual Landscapes: An exploration of gendered learning spaces during the COVID-19 lockdown

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5.1 Introduction

I met Sabina Jelenc Krašovec in Australia a few days before the start of the Getting of Wisdom conference in February 2017. She and I very quickly found common research interests, and in particular in the areas of gender and gendered spaces. We both had strongly held feminist beliefs about the importance of gendered spaces for women, but equally held strong views about the need for some men, such as older men, to engage in gendered spaces like Men's Sheds, for health and wellbeing purposes.

In this chapter I want to further explore the idea of gendered spaces and introduce the concept of therapeutic learning landscapes where community members come together in communities of practice to share skills, learn life skills, develop friendships and in doing so derive health and wellbeing benefits. The community spaces that are discussed in this chapter are deliberately gendered. One is a Men's Shed in regional Victoria, Australia, and the other is a women's crafting group also located in regional Victoria. This chapter will make use of the concept of therapeutic landscapes as a framework to examine the benefit for some men and women of gendered community spaces and to make the case that therapeutic learning landscapes can be embodied in and outside of fixed locations. The interviews took place in relation to the Men's Shed after a COVID-19 lockdown and for the women's crafting group, during COVID-19 restrictions in 2020.

5.2 Background

There has been a plethora of research about the importance of community-based, situated, informal and lifelong learning (Foley, 2011; Golding et al., 2007) for health and wellbeing benefits. Voluntary organisations, community groups, and other informal learning settings have been shown to engage older learners, widen community participation across community activities, benefit individual health and wellbeing, alleviate loneliness, and provide enjoyment and social connections (Burt & Atkinson, 2012; Liddle et al., 2013).

5.2.1 Adult Learning and wellbeing

There is an ever-growing body of research that supports the benefits of health and wellbeing when individuals participate in both formal and informal learning. Indeed, some commentators have identified that many forms of community learning can and do change lives (Department of Education and Training [DET], 2019; Field, 2011; Golding & Foley, 2013). Adult education is seen to assist with the attainment of core skills and can help individuals participate more fully in their communities (DET, 2019), which in turn has a social capital benefit in terms of civic engagement (Field, 2011). Wellbeing has been identified by some as an enabler of learning, as it is associated with increased confidence, a greater sense of self-efficacy and a greater sense of belonging when involved in a learning community (Withnall, 2009).

5.2.2 Gendered Engagement

Social participation is defined as a person's involvement with social activities that provide interactions with others in the community. It has been recognised as an important dimension to healthy ageing and a determinant for health. Social determinants of health relate to ways in which structural, cultural and psycho-social factors beyond biology influence individual and community health outcomes (Marmot & Wilkinson, 2006). Social interaction is determined by the physical and social aspects of the environment (Naud et al., 2019). In addition to the physical and environmental aspects, gendered differences and interests in social participation can differ due to their differing needs (Levasseur et al., 2015; Turcotte et al., 2015).

Social engagement and support have been identified as being beneficial (Stansfeld, 2006) beyond the social ties of the family, "including friends and neighbours [who] can play a considerable role in enriching the lives of older people" (Macfarlane & Maidment, 2009). It is with this framework that an examination of the wellbeing of the participants in the craft group and the Men's Shed was undertaken with a particular spotlight on the impact of interactions whilst COVID-19 restrictions were in place.

5.2.3 Crafting Groups

Engagement with craft is seen to foster connections within society (Jefferies, 2016) and has been described as providing an avenue for developing personal skills as well as a sense of active citizenship (MacEachern, 2005). In their study Macfarlane and Maidment (2009) found that women participating in a crafting group

identified learning new skills as an “important part of their craft group experience, often linking new skill development to their sense of wellbeing” (p. 17). Producing artefacts was identified as meaningful when women do crafting activities together, but the process of belonging and “contributing to the craft group was a major source of personal support for these older women, where reciprocity, friendship, learning and empowerment were derived from being part of the collective” (Macfarlane & Maidment, 2009, p. 23).

5.2.4 Men’s Sheds

Men’s Sheds are community-based community organisations that deliberately focus on informal learning, social health, wellbeing, and the learning needs of older men (Merriam & Kee, 2014, p. 141). Research on Men’s Sheds confirms that men who attend them are able, in non-threatening social and situated contexts within a wide range of community organisations, to informally and positively share skills from their work lives with other men of all ages with a range of important benefits to their own wellbeing, as well as to the wellbeing of others (Golding et al., 2007).

Men’s Sheds have been found to greatly benefit older men’s learning, social interactions, community connection and general health and wellbeing (Golding et al., 2014). Indeed, sheds have many functions and cater for and service the diverse needs of the mainly older men.

5.3 Therapeutic landscapes: a theoretical framework

Therapeutic landscapes were originally developed by drawing from theories in cultural ecology, pioneered by William Gesler in 1992. They were described as healing places “where the physical and built environments, social conditions and human perceptions combine to produce an atmosphere which is conducive to healing” (Gesler, 1992, p. 96). “The assumption that places were somehow *intrinsically* therapeutic raised particular concern, prompting greater recognition of a relational nature of people’s therapeutic landscapes” (Bell et al., 2018, p. 2). Conradson (2003) put forward the argument that therapeutic landscapes are something that emerges through transactions between people in a broader social and the environmental setting.

Therapeutic landscapes are said to include landscapes such as coastal locations, rivers, and green spaces, such as parklands and recreation spaces. Other therapeutic landscape healing places include hospitals, health spas, clinics, community settings, and the home. Therapeutic landscapes are also recognised to include nonphysical

spaces, for example, virtual spaces. They are also recognised to include symbolic and spiritual spaces, such as churches, mosques, synagogues and temples (Bell et al., 2018; Bignante, 2015; Winchester & McGrath, 2017).

Researchers have drawn on therapeutic landscapes as a framework to demonstrate connections between wellness and place for religious pilgrims (Williams, 2010), First Nations peoples (Wilson, 2003), breast cancer survivors (English *et al.*, 2008) and the value of community gardens for end of life care (Marsh *et al.*, 2017). (Cox et al., 2020, p. 1457)

The notion of therapeutic geographies includes those landscapes that are fluid and embody interactions between health and place in the greater landscape through the act of walking and talking (Doughty, 2013). Therapeutic landscapes are used as a framework in this chapter to understand the multiple and fluid ways in which the engagement of and through a community of practice spaces can be understood.

5.4 Method

This chapter draws on data from two larger studies. Some data are from two focus group interviews in a study of a Men's Shed in regional Victoria with seven older men. The data were collected in a study retrospectively investigating the impact of COVID-19 on the Shed. The chapter also reports some data from one focus group interview carried out via Zoom with six older women involving an examination of the health and wellbeing benefits for women crafting together during a 2020 COVID-19 lockdown.

Thematic analysis was used to analyse the data which involved searching across the data set to identify, analyse and report repeated patterns or themes (Braun & Clarke, 2006). The thematic analysis process consisted of six steps: (a) familiarising ourselves with the data, (b) generating initial codes, (c) searching for themes, (d) reviewing themes (e), defining and naming themes (f) and producing the report/manuscript (Braun & Clarke, 2006). The data was sorted manually, which included "a process of sorting and defining the transcripts and defining and sorting of collected data [...] applicable to the research" (Glesne, 2006, p. 21). The sorting process consisted of reading and rereading the transcripts, identifying reoccurring words, ideas, patterns and themes generated from the data. The transcripts were read and reread, and themes were highlighted. Within each transcript, concepts and ideas emerged through re-occurring words, messages and meanings. Corresponding codes were used to identify themes, and from this three categories in the data were identified, each with corresponding themes.

The study was approved by the Human Ethics Committee of Federation University Australia, which included ethical protocols to ensure informed consent, voluntary participation, confidentiality, and privacy.

5.5 Findings

5.5.1 The Men’s Shed

Common themes which made reference to important points in the study relating to participants’ perceptions, beliefs and attitudes about participation in a Men’s Shed and the impact of COVID-19 were identified in the data (Ely et al.,1997). These were categorised into three themes, each involving subthemes (Table 1).

Table 1: *Themes and subthemes arising from men participation in a Men’s Shed after a COVID-19 lockdown*

Themes	Subthemes
Benefits	<ul style="list-style-type: none"> • Social/friendship • Being connected with other men • Social bond • Meaning
Learning	<ul style="list-style-type: none"> • New skills • Sharing skills • Making things
Lockdown	<ul style="list-style-type: none"> • Lonely • Keeping connected • Broke the routine

5.5.1.1 Benefits

The benefits described by the men participating in the Men’s Shed involved learning new skills and making friends. For Allen, “being able to come to the Shed and share skills and learn things from each other as well and enjoy each other’s company” was an important part of why he participated. For Jeff, the benefit was quite profound. Beyond making friends and making things, Jeff reported that participating in the Shed gave his life a sense of purpose and meaning. As Jeff put it: “coming to this place gave me a meaning and to be amongst other men.”

For others the Shed gave them a place to go and provided them with a routine that had been lost after retirement. For Bob, who was very passionate about the Shed and had started attending soon after he retired, participating was described as having “saved me from going crazy because I was doing nothing”.

For all of the participants in both focus groups, friendship was the key component of the Shed. Frank was happy to simply be in the Shed, have a coffee and chat to the men and “just walk around and do little bits and pieces to try to help people and do what I can for them”. Similarly, for Colin, going to the Shed meant meeting up with his friends to enjoy each other’s company. “You come here and laugh and tell jokes. It’s about the friendships that are formed”. Neville also responded by reporting that he enjoyed making things and having a place to come, but it “was all about the friendships” that in essence kept him coming back to the Shed.

Wayne and Bill both described illnesses that they had previously had and how the friendships in the Shed helped them with managing their illnesses. For Wayne, mental illness was a huge issue, and he reported that being in the “safety of the Shed with the blokes” helped him cope.

5.5.1.2 Learning

Learning new skills and being able to access a well-stocked tool shed with equipment was also described as being beneficial for most of the men. For Colin, “being able to pass on skills and share” these with other “shedders” was important to him. “It lets you use the skills you have developed through the years and allows you to pass on the skills onto others, which I think, from my point of view, is really important – and I enjoy it, you know.” Colin also commented that passing on lost skills to other men was a way of leaving behind some of his craftsmanship:

It allows you to go back into those hills and hollows, if that’s a good explanation of the crafts that have been lost over the years. For that we live in the past slightly in these places, where we can get our skills to shine again. It’s hard to evaluate or put a number on it.

Similarly for Bob, learning new things, being able to learn how to repair things for his family and accessing tools and equipment and being taught how to use them was beneficial:

Yeah, things to make and things to repair. By coming to the Shed I’ve learnt I have no skills whatsoever with tools - literally no skills. Some probably would say I still have no skills but anyway, it’s not a judgemental Shed. I get to work with some really good equipment out there.

Wayne also commented on his lack of skills and the ability to learn new things when attending the Shed:

From a skills point of view, like [Bob], I had no real skills, but you come in here and people are willing to pass on their knowledge, help you out – any questions – the flow of information has been really good, so [people are] always willing to help. From that point of view it's been very easy to come here.

5.5.1.3 Lockdown

When asked if the lockdown impacted the Shed, the overall responses were that the first lockdown did have an impact. For Jeff, he felt this happened swiftly: “We very quickly closed the Shed down and therefore we couldn't attend so that left a hole in my timetable so I couldn't do somethings I would really like to do”. Bill felt that the second, longer lockdown was more impactful, and described it as being harder to cope with because he missed the men and doing projects.

The first lockdown it wasn't that bad at all, the second one was harder because it was six to 12 weeks. It broke the routine for the week. I missed coming here and meeting up with the men and telling jokes and doing projects that we had on the go [...] it was a break I could have done without. For me it was a loss of momentum, I became somewhat lethargic.

When the lockdown happened, Wayne missed the other men most of all, “for me the work is secondary”, and Frank described the Shed as being an “extension of our lives ... during the lockdown we missed seeing each other regularly, face to face.”

The coordinator of the Shed and the committee secretary reported that during the two lockdowns they organised newsletters, emails, and social media for all of the men, along with organising regular phone calls to keep in touch. For Wayne, this was “really important and helped with my mental health issues.” Similarly, for the others being able to read the Shed newsletters and get a call from someone from the Shed helped with the lockdown and kept the friendships and comradery going.

5.5.2 Women's Crafting Group

Common themes, which made reference to important points in the study relating to the participants' perceptions, beliefs and attitudes about participation in a crafting group during a COVID-19 lockdown were also identified in the data collected from the women's crafting group (Ely et al., 1997). These were categorised into three themes, each involving subthemes (Table 2).

Table 2: *Themes and subthemes about participating in a crafting group during COVID-19*

Themes	Subthemes
Motivation	<ul style="list-style-type: none"> • Isolated • Alone • Being creative • Sharing ideas • Mental stimulation • Common bond
Benefits	<ul style="list-style-type: none"> • Social/friendship • Being connected • Like-minded
Lockdown Zoom meetings	<ul style="list-style-type: none"> • Stayed close • Allowed • Connection • COVID-inspired craft • Learnt new technology

5.5.2.1 Motivation

When asked about the motivation for joining a craft quilting group, the responses from some of the women suggested it involved alleviating loneliness and filling up spare time after becoming retired.

Elaine stated that she felt she was previously “alone and isolated, and a neighbour invited me to her little sewing group [...] and I found it really lonely, and I was looking for some way of getting out and doing something.” Jennifer explained that she was not as mobile as she once was, and she had to give up work so was looking for something to do that she enjoyed and to meet some other women. “I had some trouble with my hips, and I had to give up work, I was sort of forced into early retirement.”

For others, like Jacqui, the motivation was her interest in creativity. “I guess I enjoy the creative side of things, I love seeing what other people are doing, just the ideas, the sharing of ideas, techniques, and skills and the chat that goes on alongside it.”

For Julie mental stimulation was the motivating factor, “that’s probably why I got started in it and probably why I’ll continue to do it with groups because that’s kind of the connectivity and for me it’s an artistic outlet.”

Kylie also commented on the mental stimulation through the need for concentration and the arithmetic involved with quilting:

[It] engages the kind of arithmetic side of it and the abstract notion that thinking through a pattern engages you mentally. Because even though you might have chosen the colours and things, you still have to think [things] through. In our case, patchwork, because it's American based it's inches and everything you buy is metric, so you're constantly thinking through that kind of conversion of, 'How big is something?' that's five foot square or three inches square.

Sharon mentioned the importance of the common bond the women had for crafting, which brought them together:

I am probably one of the oldest people at work, and yet I think there's a bit of a bond with everybody because there's a common thread through it and everybody is interested in seeing and sharing ideas, and that's terrific to see the creative side coming through, that common thread.

5.5.2.2 Benefits

One of the key benefits indicated by all of the women when asked about the crafting group, were the friendships they had made, along with the common bond and "like mindedness" they shared through crafting together.

Sharon described the mix of mental stimulation and socialising that she gained with her "quilting friends" as both being beneficial her: "So there's that kind of mental occupation and then the other thing is social."

Similarly, for Julie, friendships were key to her involvement in the group. For her, the combination of making friends and enjoying making something together "benefits me greatly because I feel connected. I'm working on something that is beautiful." Julie made it clear, however, that the friendships were the most beneficial part of being in the group: "But basically, it's the connection with the people because if we didn't connect, I'm sure the group would fail. But we've got a thing that links us. I also think, because we're all similar age stages in life, so that's another connection."

5.5.2.3 Lockdown Zoom meetings

During the time of the crafting interviews the state of Victoria was in a COVID-19 lockdown. Melbourne had been in a strict lockdown, though regional Victoria, where the women were located, had been in a less severe lockdown, allowing restricted numbers to attend cafés and restaurants. The crafting women had

been meeting in a group for a few weeks at a local café for coffee together. Restrictions were still in place in individual homes, which meant they could not meet together as a group in private premises. The focus group interview was conducted via Zoom, and the women were also meeting via Zoom from their individual homes for their regular craft meetings.

When asked how the lockdown and restrictions had impacted the group, the women were generally positive and agreed that being able to continue to meet virtually via Zoom was a bonus. An example of this was Sharon, who believed that social media had allowed “people to share and connect and learn things. It’s actually come at a good time, really, COVID-19, technologically.” Similarly, Elaine also agreed that technology had maintained their bond despite not being physically together: “It’s certainly different, and we have done Zoom, but we don’t feel that our bond has lessened any because we haven’t physically been together. We’re just looking forward to when we can all get back together, so that’s been really good.”

Julie added, which the others agreed, that Zoom had allowed them to keep in touch.

Having the opportunity to continue with the group and keep in touch through the technology and work on their crafting projects together was seen by all of the women as important, described by Julie as a being “meaningful” and helped to relieve their “lockdown boredom”.

5.5.3 Summary of findings

For both the Men’s Shed and the women’s crafting group participants, friendships and the social benefits and sharing together were identified as important. Studies of Men’s Sheds and women’s craft groups have identified the social benefits and the sharing of skills as being of significant importance (Flood & Blair, 2013; Golding & Foley, 2008; Johnson & Wilson, 2005; Macfarlane & Maidment, 2009).

Little research to date has been done on the very recent impact of COVID-19 on community groups in Australia. For the participants in this study, there were some key findings across both groups. For the women in the study, technology such as Zoom allowed them to continue to meet together and share their crafting projects. For these women, despite not being able to share a physical space together, their connection and “bond” was maintained through a virtual space, which facilitated “meaningful” connections. For the men in the study not being able to see each other face to face or go to the physical space of the Shed was greatly missed. The coordinators in the Shed did, however, make efforts to maintain contact in the

form of social media, email, phone calls and newsletters, that was described by the men as effectively maintaining the friendships and keeping the camaraderie going.

5.6 Discussion

The men and women who participated in these gendered communities of practice described their social connections and friendships as being as important as the activities occurring in the Shed and the crafting group. Indeed, when faced with COVID-19 and separation from the physical locations, a different and arguably equally as therapeutic virtual space (in a time of great stress during COVID-19 lockdown) was taken up by the participants.

Therapeutic landscapes have been conceptualised as sites in which environmental, individual and societal factors come together in order to enhance the healing or therapeutic process (Gesler, 1992). There has been a broad and comprehensive account of the therapeutic landscape through the notion of blue spaces (Foley, 2017; Foley et al., 2019), green spaces (Lea, 2008), spas, domestic spaces, schools and playgrounds (Dunkley, 2009; Harris et al., 2010; Spray, 2020), and virtual therapeutic landscapes (Trnka, 2021), as well as women's craft groups and Men's Sheds.

The men and women in these study contexts have been forced in many ways to unify their community physical spaces with an embodied, fluid and dynamic gendered space that enabled them to maintain their connections, through Zoom, social media, phone calls and newsletters and so maintain therapeutically meaningful virtual opportunities that kept relationships continuing throughout COVID-19 restrictions.

These alternative fluid therapeutic landscapes provided an opportunity for different ways to connect and communicate, and facilitated the continued "bond" and friendships and "kept the camaraderie" going at a time of unprecedented change and upheaval.

5.7 Conclusion

These small studies provide an opportunity to rethink the benefits of social participation facilitated through virtual connection. A therapeutic landscape, physical or virtual, that provides opportunities for connection, friendship, the sharing of ideas and skills, *matters*. Indeed, for Gesler and Kearns (2002), whether spaces are digital or real-life is unimportant when it comes to health. What is important is the continued connections that allow for social contact.

There is little doubt that COVID-19 has impacted these social groups, in some cases permanently. Certainly, there has been a take-up of virtual spaces and communication opportunities more broadly across the globe since COVID-19. However, there will arguably be many community spaces, such as Men's Sheds and community craft groups, where people have not been able to connect virtually. Many older and less technologically literate or networked people in Australia have little or no access to virtual spaces due to a lack of knowledge about the technology or lack of opportunity to own and pay for it. Either way, governments will need to consider the importance of availability for all to access, make use of and navigate virtual therapeutic landscapes to cater for future potential unprecedented events that again force lockdowns, cutting community groups off from opportunities for face to face meetings. Loneliness and isolation from community group activities and friendships through a lack of digital literacy and lack of resources has potentially catastrophic consequences. Social isolation and loneliness are linked to mental illness, dementia, suicide, premature death, poor health behaviours and physical inactivity (Holt-Lunstad et al., 2015), particularly for older people, and thus further research in this area is required.

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References

- Bell, S. L., Foley, R., Houghton, F., Maddrell, A., & Williams, A. M. (2018). From therapeutic landscapes to health spaces, places and practices: A scoping review. *Social Science & Medicine*, *196*, 123–130.
- Bignante, E. (2015). Therapeutic landscapes of traditional healing: Building spaces of well-being with the traditional healer in St. Louis, Senegal. *Social & Cultural Geography*, *16*(6), 698–713.
- Braun, V., & Clarke, V. (2006). Using thematic analysis in psychology. *Qualitative Research in Psychology*, *3*(20), 77–101.
- Burt, E. L., & Atkinson, J. (2012). The relationship between quilting and wellbeing. *Journal of Public Health*, *34*(1), 54–59.
- Conradson, D. (2003). Spaces of care in the city column the place of community drop-in centre. *Social & Cultural Geography*, *4*(4), 507–525.

- Cox, T., Hoang, H., Barnett, T., & Cross, M. (2020). Older Aboriginal men creating a therapeutic Men's Shed: An exploratory study. *Ageing & Society, 40*(7), 1455–1457.
- Department of Education and Training. (2019). *The Future of Adult Community Education in Victoria 2020–2025* (Ministerial Statement, Department of Education and Training). Victorian State Government.
- Doughty, K. (2013). Walking together: The embodied and mobile production of therapeutic landscape. *Health & Place, 24*, 140–146.
- Dunkley, C. M. (2009). A therapeutic landscape: Theorising place making, discipline and care at a camp for troubled youth. *Health & Place, 15*(1), 88–96.
- Ely, M., Vinz, R., Downing, M., & Anzul, M. (1997). *On writing qualitative research: Living by words*. Falmer Press.
- Field, J. (2011). Adult learning, health and well-being – changing lives. *Adult Learner, 13–25*.
- Flood, P., & Blair, S. (2013). *Men's sheds in Australia: Effects on physical health and mental well-being: Full report*. Beyond Blue.
- Foley, R. (2011). Performing health in place: The holy well as a therapeutic assemblage. *Health & Place, 17*(2), 470–479.
- Foley, R. (2017). Swimming as an accretive practice in healthy blue space. *Emotion, Space and Society, 22*, 43–51.
- Foley, R., Kearns, R., Kistemann, T., & Wheeler, B. (Eds.). (2019). *Blue space health and wellbeing: Hydrophilia unbounded*. Routledge.
- Gesler, W. M. (1992). Therapeutic landscapes: Medical issues in light of the new cultural geography. *Social Science & Medicine, 34*(7), 735–746.
- Gesler, W. M., & Kearns, A. (2002). *Culture/place/health*. Routledge.
- Glesne, C. (2006). *Becoming qualitative researchers: An introduction*. Pearson.
- Golding, B., Brown, M., Foley, A., Harvey, J., & Gleeson, L. (2007). *Men's sheds in Australia: Learning through community contexts*. NCVER.
- Golding, G., & Foley, A. (2008, July 2–4). *How men are worked with: Gender roles in men's informal learning* [Conference presentation]. 38th Annual SCUTREA Conference, University of Edinburgh.
- Golding, B., & Foley, A. (2013, October 10–12). *The Men's Sheds movement: Some implications for men's learning*. ESREA's Network on Gender and Adult Learning Conference, University of Coimbra.
- Golding, B., Mark, R., & Foley, A. (2014). Men Learning Through Life. In B. Golding, R. Mark & A. Foley (Eds.), *Men Learning Through Life* (pp. 3–19). NIACE.

- Harris, R., Henwood, F., Marshall, A., & Burdett, S. (2010). "I'm not sure if that's what their job is": Consumer health information and emerging "healthwork" roles in the public library. *Reference & User Services Quarterly*, 49(3), 239–252.
- Holt-Lunstad, J., Smith, T. B., Baker, M., Harris, T. M., & Stephenson, D. (2015). Loneliness and social isolation as risk factors for mortality: A meta-analytic review. *Perspectives on Psychological Science*, 10(2), 227–237.
- Jefferies, J. (2016). Crocheted Strategies: Women crafting their Own Communities. *Cloth and Culture*, 14(1), 14–35.
- Johnson, J. S., & Wilson, L. E. (2005). It says you really care: Motivational factors for contemporary female handcrafters. *Clothing and Textiles Research Journal*, 23(2), 115–130.
- Lea, J. (2008). Retreating to nature: Rethinking therapeutic landscapes. *Area*, 40(1), 90–98.
- Levasseur, M., Cohen, A. A., Dubois, M.-F., Généreux, M., Richard, L., Therrien F.-H., & Payette, H. (2015). Environmental factors associated with social participation of older adults living in metropolitan, urban, and rural areas: The NuAge study. *American Journal of Public Health*, 105(8), 1718–1725.
- Liddle, J. L. M., Parkinson, L., & Sibbritt, D. W. (2013). Purpose and pleasure in late life: Conceptualising older women's participation in art and craft activities. *Journal of Aging Studies*, 27(4) 330–338.
- MacEachern, S. (2005). Two thousand years of West African history. In A. B. Stahl (Ed.), *African archaeology: A critical introduction* (pp. 441–466). Blackwell Publishing.
- Macfarlane, S., & Maidment, J. (2009). Craft groups: Sites of friendship, empowerment, belonging and learning for older women. *Groupwork*, 19(1), 10–25.
- Marmot, M., & Wilkinson, R. G. (2006). *Social Determinants of Health* (2nd ed.). Oxford University Press.
- Marsh, P., Gartell, G., Egg, G., Nolan, A., & Cross, M. (2017). End of life in a community garden: Findings from a participatory action research project in regional Australia. *Health & Place*, 45, 110–116.
- Merriam, S. B., & Kee, Y. (2014). Promoting Community Wellbeing: The Case for Lifelong Learning for Older Adults. *Adult Education Quarterly*, 64(2), 128–144.
- Naud, D., Genereux, M., Bruneau, J. F., Alauzet, A., & Lavasseur, M. (2019). Social participation in older women and men: Differences in community activities and barriers according to region and population in Canada. *BMC Public Health*, 19, 1124.
- Spray, J. (2020). *The children in child health: Negotiating young lives and health in New Zealand*. Rutgers University Press.

- Stansfeld, S. (2006). Social Support and Social Cohesion. In M. Marnot & R. Wilkison (Eds.), *The social determinants of health* (pp. 267–296, 2nd ed.). Oxford University press.
- Trnka, A. (2021). Multi-sited therapeutic assemblages: Virtual and real-life emplacement for youth mental health support. *Social Science & Medicine*. <https://doi.org/10.1016/j.socscimed.2021.113960>
- Turcotte, P. L., Côté, C., Coulombe, K., Richard, M., Larivière, N., & Couture, M. (2015). Social participation during transition to adult life among young adults with high functioning autism spectrum disorders: Experiences from an exploratory multiple case study. *Occupational Therapy Mental Health*, 31(3) 234–252.
- Williams, A. (2010). Spiritual therapeutic landscapes and healing: A case study of St. Anne de Beaupre, Quebec, Canada. *Social Science & Medicine*, 70(10), 1633–1640.
- Wilson, K. (2003). Therapeutic landscapes and First Nations peoples: An exploration of culture, health and place. *Health & Place*, 9(2), 83–93.
- Winchester, M., & McGrath, J. (2017). Therapeutic landscapes: Anthropological perspectives on health and place. *Medicine Anthropology Theory*, 4(1), i–x.
- Withnall, A. (2009). *Improving Learning in Later Life*. Routledge.