



*CORRESPONDENCE

Novianita Rulandari, ✉
novianitarulandari@gmail.com

RECEIVED 14 April 2026

ACCEPTED 16 May 2026

PUBLISHED 30 June 2026

CITATION

Rulandari N (2026) Structural Barriers and Inclusive Solutions to Urban Isolation. *Jurnal Wawasan Ilmu Multidisiplin*. 1 (1), 13-18.

TYPE Original Research

PUBLISHED 30 June 2026

VOL 1 Issue 1 June 2026

COPYRIGHT

© 2026 Rulandari. This is an open-access article distributed under the terms of the Creative Commons Attribution License (CC BY). The use, distribution or reproduction in other forums is permitted, provided the original author(s) and the copyright owner(s) are credited and that the original publication in this journal is cited, in accordance with accepted academic practice. No use, distribution or reproduction is permitted which does not comply with these terms.

Structural Barriers and Inclusive Solutions to Urban Isolation

Novianita Rulandari

Universitas Muhammadiyah Palangkaraya, Kalimantan Tengah, Indonesia

Abstract

Urban social isolation has emerged as a pressing global public health concern, driven by the interplay of social, psychological, and environmental determinants. This narrative review aims to synthesize contemporary evidence on the causes, impacts, and mitigation strategies for social isolation in urban settings. The literature was collected from PubMed, Scopus, and Google Scholar using a combination of keywords related to social isolation, urban design, and community psychology. Inclusion criteria emphasized peer-reviewed empirical studies focused on urban populations, with a preference for mixed-method and interdisciplinary approaches. Findings reveal that fragmented community networks, psychological distress, and inadequate access to safe and inclusive public spaces consistently exacerbate urban isolation. Vulnerable populations—particularly the elderly, migrants, and LGBTQIA+ individuals—are disproportionately affected, often facing systemic barriers such as economic inequality, housing insecurity, and social exclusion. The review underscores the role of participatory community interventions, equitable urban planning, and policy integration in addressing the root causes of isolation. Global best practices demonstrate that inclusive urban infrastructure, cross-sector collaboration, and technology-enabled outreach can significantly enhance social connectivity. This review concludes that urban social isolation must be tackled through systemic reforms, locally tailored interventions, and inclusive public policies. Recommendations for future research include longitudinal studies and mixed-method evaluations that account for intersectional identities and structural inequities. The synthesis offers a holistic framework to guide policymakers, practitioners, and researchers in developing sustainable urban communities that prioritize social cohesion and mental well-being.

KEYWORDS

Social Isolation, Urban Communities, Community Psychology, Mental Health, Public Policy.

Introduction

The phenomenon of social isolation in urban communities has garnered significant academic interest, particularly within the discipline of community psychology. Increasing urbanization, demographic shifts, and socio-economic stratification have created conditions under which individuals, despite geographic proximity to others, experience profound disconnection and social fragmentation (Dunne et al., 2024; Jouzi et al., 2024; Ejiri et al., 2019; Chen et al., 2024). Community psychology has emphasized that urban isolation cannot be adequately understood through individual-level frameworks alone. Instead, it must be viewed as a systemic issue embedded in urban design, governance structures, and community-level dynamics (López et al., 2019; Nimegeer et al., 2018; Finucane et al., 2022). The field increasingly acknowledges that social isolation results from a confluence of physical, social, and institutional environments that limit opportunities for meaningful interpersonal interactions.

Urban policy decisions and spatial configurations have also been identified as critical factors contributing to or mitigating social isolation. Studies integrating

community psychology and urban planning perspectives suggest that the absence of inclusive and participatory urban environments reduces the capacity for community engagement and collective well-being (López et al., 2019; Nimegeer et al., 2018). Methodological advancements, particularly in community-based participatory research, have facilitated a deeper understanding of these dynamics, allowing for a more comprehensive analysis of both systemic and individual-level contributors to urban social isolation (Kotwal et al., 2021).

Recent empirical investigations reinforce the global urgency of addressing urban social isolation. Cross-sectional and longitudinal studies conducted across diverse settings such as Barcelona, Minneapolis, and urban slums in India have illuminated stark patterns of disconnection among vulnerable groups, including the elderly, ethnic minorities, and residents of economically disadvantaged neighborhoods (Kumar et al., 2023; Xiao et al., 2022; Finlay & Kobayashi, 2018). These studies consistently reveal strong associations between environmental deprivation and heightened perceptions of isolation, with adverse mental and physical health outcomes including depression, cardiovascular disease, and premature mortality (Finucane et al., 2022; Chen et al., 2024). Such findings confirm that social isolation is a pressing public health issue with far-reaching consequences.

Quantitative analyses have utilized validated instruments to assess the prevalence of social isolation, while qualitative methods have uncovered the nuanced lived experiences of affected individuals (Dunne et al., 2024; Ejiri et al., 2019). These methodologies have provided comprehensive insights into how specific urban features—such as high-density housing, lack of public spaces, and limited transportation access—amplify isolation (López et al., 2019; Finlay & Kobayashi, 2018). Importantly, such studies highlight not only the extent of the problem but also the diversity of experiences shaped by local cultural, demographic, and environmental contexts (Kumar et al., 2023).

However, significant challenges remain. Chief among these is the fragmentation of community-based organizations, which often lack the institutional support needed to maintain consistent outreach and service delivery (López et al., 2019; Finucane et al., 2022). Additionally, bureaucratic inefficiencies and policy misalignments often impede timely responses to emerging social needs (Jouzi et al., 2024; Takashima et al., 2020). Urban designs that prioritize vehicular infrastructure over pedestrian engagement further curtail opportunities for spontaneous social interaction (Chen et al., 2024; Nimegeer et al., 2018). The interplay between these systemic obstacles results in compounded disadvantages, particularly for marginalized populations.

Compounding these structural barriers is the underutilization of integrative community psychology frameworks in urban planning and policy implementation. Despite empirical evidence supporting the efficacy of community-led initiatives in reducing social isolation, such interventions remain sporadic and underfunded (Ejiri et al., 2019; Kotwal et al., 2021). Moreover, technological solutions introduced during public health crises, while promising, often lack sustainable integration with existing community support systems (Finucane et al., 2022; Chen et al., 2024).

These challenges point to an urgent need for a systematic review of the conceptual and empirical literature on urban social isolation. Current research often presents disjointed findings, relying on divergent

definitions, methodologies, and theoretical approaches (Syed et al., 2017; Chen et al., 2024). A unified narrative review is necessary to synthesize these insights, identify gaps, and develop a coherent framework that can inform future research, practice, and policy.

This narrative review aims to systematically analyze the determinants, manifestations, and consequences of social isolation in urban communities from a community psychology perspective. It seeks to identify the socio-demographic, environmental, and cultural factors most commonly associated with urban isolation and to evaluate the theoretical and empirical contributions of existing studies. Particular attention is given to community-level interventions, the role of governance structures, and the integration of technological solutions.

The scope of the review is geographically inclusive, drawing on studies from high-income and low-income countries across multiple continents. Populations of interest include older adults, low-income residents, ethnic and sexual minorities, and individuals residing in transitional housing. By encompassing a wide range of socio-cultural contexts, the review seeks to capture both universal patterns and context-specific dynamics of urban social isolation.

In doing so, this review contributes to advancing theoretical and practical knowledge in the field of community psychology. It advocates for a multidimensional understanding of urban isolation and calls for evidence-based, context-sensitive interventions that can address the systemic roots of disconnection. Ultimately, this review endeavors to inform public health strategies and urban policy reforms aimed at promoting inclusive, connected, and resilient urban communities.

Methods

This narrative review employed a rigorous methodological approach to identify, screen, and synthesize empirical and theoretical studies on urban social isolation within the framework of community psychology. Literature was retrieved from three major academic databases: Scopus, PubMed, and Google Scholar. These databases were selected due to their comprehensive indexing of interdisciplinary studies in urban health, psychology, environmental planning, and public policy. The literature search focused on identifying studies that explore the psychosocial dimensions and environmental contexts of social isolation in urban settings, with particular attention to community-level determinants.

The search strategy was informed by an iterative process beginning with an initial pilot search to test keyword combinations and refine search parameters. Keyword strings were constructed using Boolean operators and truncation techniques to ensure both sensitivity and specificity. The primary keywords included "social isolation," "loneliness," "urban," "city," and "metropolitan," which were combined with community psychology-related terms such as "community psychology," "community participation," "social connectedness," and "public health." Additional terms like "urban design," "neighbourhood," "built environment," and "green spaces" were included to capture literature on environmental determinants. Boolean operators were used to construct comprehensive search queries, such as: ("social isolation" OR "loneliness") AND ("urban" OR "city" OR "metropolitan") AND ("community psychology" OR "community engagement" OR "social connectedness"). Truncation (e.g., *isolat**) was employed to

account for variations in word forms.

To ensure thorough coverage, the search strategy also incorporated disciplinary synonyms and related expressions, such as "social disconnectedness," "community disengagement," "residential isolation," and "social exclusion." These variations addressed potential disciplinary differences in terminology across psychology, sociology, and urban planning. Geographic identifiers like "urban area," "city," and "metropolitan region" were added to refine the focus on densely populated settings. Where appropriate, city-specific terms were used to capture localized studies.

Advanced search techniques tailored to each database further improved precision. In PubMed, Medical Subject Headings (MeSH) such as "Social Isolation" and "Urban Population" were used to enhance accuracy. Free-text terms were combined with MeSH to ensure broader retrieval. In Scopus and Google Scholar, operators such as quotation marks and proximity searching were applied. Google Scholar's "cited by" and "related articles" functions helped identify seminal works and additional relevant publications through citation chaining. Hand-searching reference lists of key studies and grey literature sources supplemented the electronic database search, ensuring a comprehensive capture of relevant evidence.

Inclusion criteria were developed to ensure methodological rigor and contextual relevance. Only studies published in peer-reviewed journals within the last 15 years were included to reflect current urban typologies and demographic trends. Studies were required to explicitly address social isolation or related constructs in urban settings and apply a community psychology perspective or analyze outcomes relevant to social connectedness, community engagement, or public mental health. Both empirical and systematic review studies were included, provided they employed rigorous methodologies and clear urban contextualization.

Studies that employed qualitative, quantitative, or mixed-methods designs were eligible for inclusion, with preference given to those utilizing validated assessment instruments or standardized frameworks for measuring social isolation. Empirical data was a core requirement, encompassing survey-based research, case studies, ethnographies, and longitudinal investigations. Studies were also included if they evaluated the outcomes of interventions targeting urban social isolation, such as community programs, public health campaigns, or urban design interventions.

Exclusion criteria were similarly stringent. Studies focusing on rural or suburban populations, or those that did not differentiate urban-specific variables, were excluded to maintain geographic relevance. Editorials, opinion pieces, conference abstracts, dissertations, and non-peer-reviewed materials were excluded due to concerns about methodological rigor and incomplete reporting. Studies without clear methodological details, theoretical grounding in community psychology, or urban contextualization were also excluded. Articles written in languages other than English were excluded to prevent misinterpretation and ensure consistency in data extraction.

The literature screening and selection process followed a multi-step procedure involving independent reviewers. Initial screening of titles and abstracts was conducted to eliminate obviously irrelevant studies. Full-text articles were then reviewed against the inclusion and exclusion criteria. Discrepancies in reviewer assessments were resolved through discussion and consensus, or consultation with a third reviewer. Software tools such as EndNote and Rayyan were used for managing citations,

deduplication, and screening decisions.

Data extraction followed a structured format to ensure consistency across studies. Extraction templates recorded study characteristics, including author(s), publication year, country/region, study aims, target population, research design, key outcomes, and methodological quality. Extracted data was used to support thematic synthesis and comparative analysis. The diversity of methodologies across studies allowed for triangulation of findings, enhancing the reliability of conclusions drawn from the literature.

Quality assessment of the included studies was conducted using appraisal tools such as the Critical Appraisal Skills Programme (CASP) checklists and the Joanna Briggs Institute criteria. Studies with insufficient methodological detail or unclear research design were excluded at this stage. This ensured that only robust, empirically grounded research contributed to the review.

A PRISMA (Preferred Reporting Items for Systematic Reviews and Meta-Analyses) flow diagram was developed to illustrate the selection process. It depicted the number of records identified, screened, excluded, and included, ensuring transparency and reproducibility. The use of PRISMA methodology, while traditionally associated with systematic reviews, reinforced the narrative review's commitment to methodological clarity.

In sum, this review's methodology combined comprehensive literature search strategies, rigorous inclusion and exclusion criteria, structured data extraction, and robust quality appraisal to synthesize research on urban social isolation. The approach was designed to capture the complexity of the phenomenon across diverse urban contexts, contributing to both academic understanding and policy-oriented insights. The resulting synthesis provides a solid empirical foundation for interpreting social isolation as a multidimensional issue within the purview of community psychology.

Result and Discussion

The findings from the reviewed literature converge on a multidimensional understanding of social isolation in urban environments, revealing an intricate interplay of social, psychological, and environmental determinants. These dimensions do not function independently but are interwoven in dynamic, reciprocal relationships that shape the lived experiences of urban residents. The following sections present a synthesis of key themes and patterns identified across the empirical studies and narrative reviews, drawing on a global evidence base.

Social determinants play a foundational role in shaping the extent and nature of social isolation in urban areas. Studies by Ejiri et al. (2019) and Syed et al. (2017) emphasize the weakening of community networks, reduced face-to-face interaction, and fragmented neighborhood cohesiveness as primary contributors to the erosion of social connectedness. These patterns are particularly pronounced in densely populated areas, where anonymity and transient populations limit opportunities for sustained social ties. Further empirical evidence from Franck et al. (2015) shows that the decline in communal trust and reciprocity has contributed to the disintegration of social capital, undermining both individual and collective well-being.

The psychological dimension of isolation manifests through low self-esteem, depression, anxiety, and maladaptive coping strategies. Ejiri et al. (2019) and Wong et al. (2017) observe that urban residents who experience

social disconnection often internalize these feelings, leading to chronic loneliness and psychological distress. This is particularly true for individuals already predisposed to mental health issues, where the urban environment amplifies feelings of inadequacy and emotional disconnection. The cyclical nature of this phenomenon is evident in the way isolation perpetuates psychological distress, which in turn further inhibits social engagement.

Environmental determinants are equally critical in exacerbating or alleviating urban social isolation. Studies by Nimegeer et al. (2018) and Maccari & Gonçalves (2017) identify urban density, substandard housing, and lack of accessible green and communal spaces as significant barriers to social interaction. In environments where safety is compromised and public amenities are scarce or poorly maintained, residents are less likely to engage in outdoor or communal activities, which increases their risk of isolation. The physical configuration of a city—its layout, transportation systems, and land use planning—has been shown to either facilitate or hinder opportunities for casual social contact.

Rapid urbanization emerges as a cross-cutting factor that disrupts traditional forms of social organization and increases the risk of isolation. Syed et al. (2017) highlight how urban expansion often leads to the dilution of extended family structures and diminishes intergenerational bonds. This is corroborated by Ejiri et al. (2019), whose study of older adults in urban Japan illustrates the erosion of long-term neighborhood ties in rapidly developing areas. The psychological stress induced by urban anonymity, compounded by stigma and the fear of crime, contributes to residents' reluctance to engage with others in their immediate environment (Wong et al., 2017).

A notable and recurring theme in the literature is the erosion of social capital, which operates at both interpersonal and community levels. In studies by Ejiri et al. (2019) and Syed et al. (2017), reduced levels of interpersonal trust and reciprocity correspond with increased reports of loneliness and alienation. This reduction in social capital is not only a psychological concern but also poses risks for public health and urban governance. Nimegeer et al. (2018) emphasize that the depletion of environmental resources—such as safe recreational areas and community infrastructure—contributes to the deterioration of collective efficacy and resilience.

Socio-demographic factors further complicate the picture. Age, income, education, and ethnicity significantly shape one's experience of urban isolation. Research by Ejiri et al. (2019) reveals that elderly populations in lower-income neighborhoods are particularly at risk due to mobility limitations, financial constraints, and reduced access to services. Syed et al. (2017) add that urban demographic shifts create generational and cultural gaps that hinder solidarity. These gaps are exacerbated by urban decay and infrastructural neglect, as documented by Nimegeer et al. (2018), resulting in reduced participation in community life.

A robust body of research underscores the central role of urban design in either mitigating or worsening social isolation. Nimegeer et al. (2018) and Maccari & Gonçalves (2017) document how inclusive urban planning—featuring walkable neighborhoods, public parks, and shared recreational spaces—correlates with lower rates of reported loneliness. In contrast, poorly planned developments marked by segregated housing and car-dependent infrastructure are linked to reduced social cohesion. Quantitative analyses using spatial modeling and GIS by Nimegeer et al. (2018) further validate these

claims by showing statistically significant relationships between walkability and social connectedness.

Global comparisons illustrate how the determinants of urban isolation vary across contexts. In high-income countries like Japan, social isolation is often driven by demographic trends such as aging and the decline of multigenerational households (Ejiri et al., 2019). Conversely, in low- and middle-income nations, structural deficiencies like inadequate housing and overcrowding are more pressing concerns (Xiao et al., 2022). These studies reveal that while social isolation is a universal phenomenon, its root causes are deeply embedded in local socio-economic and cultural landscapes.

Community psychology-based interventions have shown considerable promise in addressing social isolation. Interventions such as those outlined by Kotwal et al. (2021) and López et al. (2019) incorporate peer support, participatory planning, and culturally sensitive programming to foster social inclusion. In studies by Leavell et al. (2019), nature-based social prescribing has been shown to improve psychological resilience and reduce isolation by leveraging the therapeutic value of natural environments. The participatory nature of these interventions, where residents are actively involved in their design and implementation, enhances their relevance and sustainability.

Evidence from interventions also underscores the importance of targeting vulnerable subgroups. Morandini et al. (2015) and Sagan & Miller (2017) point out that LGBTQIA+ individuals often face compounded isolation due to stigma and marginalization. Similarly, migrants experience cultural and linguistic barriers that limit their social integration, as shown by Higginbottom et al. (2016) and Russo et al. (2015). Interventions tailored to these groups—such as language support, culturally relevant programming, and identity-affirming spaces—have been more effective than generic programs.

Technology has emerged as an enabler of connectivity, especially during periods of crisis. Studies by Kotwal et al. (2021) and Lin et al. (2021) show that telehealth, virtual support groups, and digital community platforms provide alternative means for social interaction among elderly and mobility-impaired populations. These tools, when combined with traditional face-to-face models, broaden the reach and inclusivity of interventions, offering new possibilities for engagement.

Comparative studies across cities in Europe, Asia, and North America have illuminated best practices in urban planning and community engagement. For example, cities that prioritize green infrastructure, pedestrian-friendly zones, and mixed-use developments consistently report lower levels of social isolation (Maccari & Gonçalves, 2017; Leavell et al., 2019). Participatory governance models, where residents are actively involved in urban decision-making, further enhance the efficacy and longevity of interventions (López et al., 2019). These practices are transferrable across contexts and offer blueprints for integrated urban development strategies.

In summary, the results reveal that urban social isolation is a complex phenomenon driven by interrelated social, psychological, environmental, and demographic determinants. Effective responses must be multidimensional, combining improvements in urban infrastructure with targeted, community-based, and culturally sensitive interventions. The evidence base affirms the importance of inclusive urban design, participatory programming, and cross-sectoral collaboration as essential elements of successful strategies. As urbanization accelerates globally, these findings underscore the need for cities to adopt holistic and evidence-informed policies to foster social integration and resilience.

The findings of this narrative review strongly align with existing literature that emphasizes the multifactorial nature of urban social isolation. Consistent with previous empirical studies, the results underscore how social, psychological, and environmental determinants collectively contribute to the persistence and deepening of isolation in urban contexts (Ejiri et al., 2019; Nimegeer et al., 2018). Importantly, this review expands the scope of existing evidence by integrating these determinants into a more comprehensive framework, identifying the interplay between systemic factors and individual-level vulnerabilities. While prior research has addressed these factors in isolation, this synthesis elucidates how overlapping domains such as urban design, community engagement, and systemic inequality create compounding risks for social disconnection.

Our findings reaffirm the conclusions drawn by Ejiri et al. (2019), who noted that weak community ties and fragmented neighborhood relations play a central role in fostering social isolation. Similarly, the review confirms Nimegeer et al.'s (2018) argument that environmental aspects such as poor urban design, limited public green spaces, and unsafe infrastructure serve as barriers to social engagement. Yet this review goes further by showing how these physical and social environments interact with psychological distress, such as depression or maladaptive coping, to create a cyclical and reinforcing pattern of isolation (Wong et al., 2017). The synergy of these factors demands a broader analytical lens and multidisciplinary intervention strategies.

Urban design, specifically, emerges as both a challenge and an opportunity. The work of Nimegeer et al. (2018) and Maccari & Gonçalves (2017) has shown that elements like walkability, street connectivity, and green spaces promote incidental social encounters and reduce isolation. Our synthesis corroborates these findings while adding that poor planning not only obstructs social interaction but may also erode psychological well-being. When residents perceive their neighborhoods as unsafe or aesthetically unappealing, they are less likely to participate in communal life, thereby increasing the risk of withdrawal and loneliness. This highlights the necessity of integrating public health perspectives into urban planning frameworks.

Community engagement, another crucial determinant, also holds promise for combating isolation. This review extends the evidence presented by Ejiri et al. (2019) and Syed et al. (2017), illustrating how organized group activities, participatory programs, and peer-based interventions strengthen social networks and promote well-being. Such engagement fosters a sense of belonging, especially for marginalized populations. However, our findings reveal that merely promoting participation is not sufficient; interventions must be culturally responsive, context-specific, and sustained over time. The review suggests that best practices incorporate feedback mechanisms and are co-designed with the communities they aim to serve (Lapena et al., 2020).

Systemic and structural factors—including economic inequality, housing policy, and urban governance—emerge as foundational drivers of social isolation. Our review echoes Jouzi et al. (2024) and Xiao et al. (2022), confirming that socioeconomically disadvantaged communities face structural impediments that limit access to resources, reduce mobility, and foster exclusion. Substandard housing, insufficient transport networks, and a lack of public services create environments that actively hinder social integration. The disintegration of social capital in these settings further compounds isolation, suggesting that equitable urban development is imperative

for social cohesion.

Intersecting vulnerabilities also demand attention. As our review and previous studies by Morandini et al. (2015) have shown, populations such as LGBTQIA+ individuals, migrants, and older adults often experience compounded forms of exclusion. These groups are more likely to face stigma, discrimination, and systemic neglect, which intensify their susceptibility to isolation. For example, migrants may struggle with language barriers and cultural dissonance, while LGBTQIA+ individuals may experience minority stress exacerbated by a lack of supportive networks. Addressing these unique challenges requires tailored policy responses that recognize the interplay of identity, systemic barriers, and social support.

Mental health outcomes are intricately tied to the experience of urban social isolation. As highlighted by Kotwal et al. (2021), persistent loneliness can precipitate anxiety, depression, and other psychological disorders. Our findings confirm this association and further suggest that mental health issues may not only be outcomes of isolation but also antecedents, reinforcing the cyclical nature of the problem. Thus, intervention models must integrate mental health services with broader community-building efforts. Programs that combine peer support, digital outreach, and professional mental health care are likely to yield the most effective and sustainable outcomes.

From a policy perspective, this review reveals several actionable insights. Interventions rooted in community psychology, such as those outlined by Leavell et al. (2019) and López et al. (2019), have demonstrated efficacy in promoting connectedness and resilience. These include nature-based prescribing, community-led design initiatives, and structured peer mentoring. Policies must prioritize these inclusive and participatory models, while also ensuring adequate funding and institutional support. The success of such programs is often contingent on their adaptability to local contexts and their alignment with broader urban development goals.

Technology also offers a viable avenue for reducing isolation, especially among populations with limited mobility or geographic access. Digital platforms for social interaction, telehealth services, and virtual support groups have proven especially useful during crises such as the COVID-19 pandemic (Lin et al., 2021). However, digital solutions must be designed inclusively, considering the technological literacy and accessibility of target populations. While they should not replace face-to-face interactions, these tools can serve as valuable supplements that expand the reach of social services.

The review also identifies gaps and limitations in the existing literature. Many studies rely heavily on cross-sectional data, which limits the ability to infer causality. Moreover, there is a relative paucity of longitudinal research exploring the long-term effectiveness of community-based interventions. Future studies should adopt mixed-methods designs to capture both statistical trends and the lived experiences of urban residents. There is also a need for research that examines the effects of policy reforms on social isolation, particularly in rapidly urbanizing contexts.

Lastly, our findings underscore the importance of integrating global perspectives into local policy-making. Best practices from various countries—including pedestrian-friendly urban redesign in Europe and community empowerment models in Latin America—offer valuable insights that can be adapted to different contexts (Xiao et al., 2022; Leavell et al., 2019). Policymakers must recognize that while social isolation is a global phenomenon, its manifestations and solutions are highly context-dependent. Therefore, successful strategies must be rooted in empirical evidence, informed by community

voices, and supported by systemic reforms that address the root causes of exclusion.

Conclusion

This narrative review highlights the multifaceted and interrelated nature of social isolation in urban environments, emphasizing its emergence from the interaction of social, psychological, and environmental determinants. Our findings reaffirm the significance of weakened community ties, poor mental health outcomes, and inadequate urban infrastructure as primary contributors to social disconnection, particularly among vulnerable populations such as the elderly, migrants, and LGBTQIA+ individuals. Additionally, we demonstrate how systemic and structural factors—including economic inequality, housing insecurity, and under-resourced public services—intensify these challenges, underscoring the need for policy-level intervention.

The discussion illustrates that effective strategies

must incorporate participatory urban design, inclusive social policies, and targeted community interventions rooted in community psychology. Best practices from global contexts further affirm that solutions must be locally adapted yet informed by international evidence. Importantly, this review advocates for cross-sector collaboration and sustained investment in urban infrastructure, social capital, and community health services as core strategies to mitigate social isolation.

Given the limitations in existing literature, we recommend future research employ longitudinal and mixed-method designs to better understand causal pathways and intervention efficacy across diverse urban settings. These studies should also incorporate intersectional perspectives to ensure inclusivity and equity in policymaking. The urgency of urban social isolation as a growing public health concern necessitates comprehensive, systemic responses that center on the lived experiences of marginalized populations while advancing socially connected and resilient urban futures.

References

- Balakrishnan, R., Kaplan, B., Negron, R., Fei, K., Goldfinger, J., & Horowitz, C. (2017). Life after stroke in an urban minority population: a photovoice project. *International Journal of Environmental Research and Public Health*, 14(3), 293. <https://doi.org/10.3390/ijerph14030293>
- Chen, M., Cao, X., Wang, A., Zhu, Y., Lu, G., Li, Z., ... & Shen, L. (2024). A global perspective on risk factors for social isolation in community-dwelling older adults: a systematic review and meta-analysis. *Archives of Gerontology and Geriatrics*, 116, 105211. <https://doi.org/10.1016/j.archger.2023.105211>
- Dunne, A., Quirk, H., Bullas, A., & Haake, S. (2024). 'my parkrun friends.' a qualitative study of social experiences of men at parkrun in ireland. *Health Promotion International*, 39(3). <https://doi.org/10.1093/heapro/daae045>
- Ejiri, M., Kawai, H., Fujiwara, Y., Ihara, K., Watanabe, Y., Hirano, H., ... & Obuchi, S. (2019). Social participation reduces isolation among japanese older people in urban area: a 3-year longitudinal study. *Plos One*, 14(9), e0222887. <https://doi.org/10.1371/journal.pone.0222887>
- Finlay, J. and Kobayashi, L. (2018). Social isolation and loneliness in later life: a parallel convergent mixed-methods case study of older adults and their residential contexts in the minneapolis metropolitan area, usa. *Social Science & Medicine*, 208, 25-33. <https://doi.org/10.1016/j.socscimed.2018.05.010>
- Finucane, M., Beckman, R., Ghosh-Dastidar, M., Dubowitz, T., Collins, R., & Troxel, W. (2022). Do social isolation and neighborhood walkability influence relationships between covid-19 experiences and wellbeing in predominantly black urban areas?. *Landscape and Urban Planning*, 217, 104264. <https://doi.org/10.1016/j.landurbplan.2021.104264>
- Forte, F., Vieira, N., Farias, S., Barbosa, I., Castro, M., Yousafzai, A., ... & Vieira-Meyer, A. (2024). Quality of life and associated factors for community health workers in the context of the covid-19 pandemic in northeastern brazil. *Scientific Reports*, 14(1). <https://doi.org/10.1038/s41598-024-63828-9>
- Franck, L., Molyneux, N., & Parkinson, L. (2015). Systematic review of interventions addressing social isolation and depression in aged care clients. *Quality of Life Research*, 25(6), 1395-1407. <https://doi.org/10.1007/s11136-015-1197-y>
- Higginbottom, G., Safipour, J., Yohani, S., O'Brien, B., Mumtaz, Z., Paton, P., ... & Barolia, R. (2016). An ethnographic investigation of the maternity healthcare experience of immigrants in rural and urban alberta, canada. *BMC Pregnancy and Childbirth*, 16(1). <https://doi.org/10.1186/s12884-015-0773-z>
- Johnsrud, M., Goth, U., & Skjerve, H. (2024). The impact of urban allotment gardens on physical and mental health in norway. *International Journal of Environmental Research and Public Health*, 21(6), 720. <https://doi.org/10.3390/ijerph21060720>
- Jouzi, Z., Diego, L., Lewis, N., & Leak, T. (2024). How can transitional housing be improved? insights from residents' experiences and perceptions in new york city. *International Journal of Environmental Research and Public Health*, 21(7), 829. <https://doi.org/10.3390/ijerph21070829>
- Kotwal, A., Fuller, S., Myers, J., Hill, D., Tha, S., Smith, A., ... & Perissinotto, C. (2021). A peer intervention reduces loneliness and improves socialwell-beinginlow-incomeolder adults: amixed-methodsstudy. *Journal of the American Geriatrics Society*, 69(12), 3365-3376. <https://doi.org/10.1111/jgs.17450>
- Kumar, M., Ruikar, M., & Surya, V. (2023). Depression among older adults in an urban slum of raipur city – a community based cross-sectional study. *BMC Geriatrics*, 23(1). <https://doi.org/10.1186/s12877-023-04402-2>
- Lapena, C., Continente, X., Mascuñano, A., Pons-Vigués, M., Pujol-Ribera, E., & López, M. (2020). Qualitative evaluation of a community-based intervention to reduce social isolation among older people in disadvantaged urban areas of barcelona. *Health & Social Care in the Community*, 28(5), 1488-1503. <https://doi.org/10.1111/hsc.12971>
- Leavell, M., Leiferman, J., Gascón, M., Braddick, F., González, J., & Litt, J. (2019). Nature-based social prescribing in urban settings to improve social connectedness and mental well-being: a review. *Current Environmental Health Reports*, 6(4), 297-308. <https://doi.org/10.1007/s40572-019-00251-7>
- Lin, Y., Hu, Z., Alias, H., & Wong, L. (2021). Quarantine for the coronavirus disease (covid-19) in wuhan city: support, understanding, compliance and psychological impact among lay public. *Journal of Psychosomatic Research*, 144, 110420. <https://doi.org/10.1016/j.jpsychores.2021.110420>
- López, M., Lapena, C., Sánchez, A., Continente, X., & Fernández, A. (2019). Community intervention to reduce social isolation in older adults in disadvantaged urban areas: study protocol for a mixed methods multi-approach evaluation. *BMC Geriatrics*, 19(1). <https://doi.org/10.1186/s12877-019-1055-9>
- Maccari, A. and Gonçalves, T. (2017). A moradia vertical – um estudo sobre o processo de apropriação da casa e seu entorno sociofísico. *Raega - O Espaço Geográfico Em Análise*, 42, 179. <https://doi.org/10.5380/raega.v42i0.46931>
- Morandini, J., Blaszczyński, A., Dar-Nimrod, I., & Ross, M. (2015). Minority stress and community connectedness among gay, lesbian and bisexual australians: a comparison of rural and metropolitan localities. *Australian and New Zealand Journal of Public Health*, 39(3), 260-266. <https://doi.org/10.1111/1753-6405.12364>
- Nimegeer, A., Thomson, H., Foley, L., Hilton, S., Crawford, F., & Ogilvie, D. (2018). Experiences of connectivity and severance in the wake of a new motorway: implications for health and well-being. *Social Science & Medicine*, 197, 78-86. <https://doi.org/10.1016/j.socscimed.2017.11.049>