

The effectiveness and suitability of social isolation and loneliness interventions for older people from minoritised ethnic groups living in the UK

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10th December 2021

Overview



- Background
- Research aims and design
- Theoretical framework
- Phase 1-4
- Conclusions
- Limitations and strengths

Definitions



Minoritised ethnic group people

'people are actively minoritised by others rather than naturally existing as a minority' (Milner & Jumbe, 2020, p. e419)

Loneliness

An unwelcome feeling occurring when there is a discrepancy between a person's desired & actual relationships (Hughes et. al. 2004)

Social isolation

A lack of contacts, interactions and quality support between people & a social network (Dickens et. al. 2011)

Health and economic impact of social isolation and loneliness



Symptoms of depression

(Cacioppo et. al., 2010)

Poor cognitive function

(Wang et al., 2015)



Impaired immunity

(Cacioppo et.al., 2011)

Impaired sleep

(Cacioppo & Cacioppo, 2014)



Risk comparable with well-established risk factors for mortality (Holt-Lunstad et. al., 2015).

(in)direct economic impact

(Fulton & Jupp, 2013)



Social isolation, loneliness & older minoritised ethnic group people



Geographical separation



Language difficulties



Negative effects of persistent discrimination

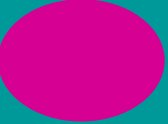


Hostile environment policy



Socioeconomic & health inequalities

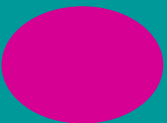
Isolation, loneliness & older people from minoritised ethnic groups




Older minoritised people are at an increased risk of poor health, economic inactivity and late-life poverty (Gough & Adami, 2013; Tillin et al., 2013).



Around 7 % of those over 65 say that they are often lonely and 31% say that they are sometimes lonely (Age UK, 2017).



Rates of loneliness reported ranging from 11%-25% in some minoritised categories (Victor et al., 2020).



33% of Black Caribbean people had network types characterised by a limited number of people to draw on for support (Burholt et al., 2017)




Past systematic reviews of social isolation & loneliness in older people

Effective interventions...

- Incorporate an educational component, targeted at specific groups, with some level of facilitator and/or participant control (Cattan et al, 2005).
- Have a theoretical basis (Dickens et al, 2011).
- Adaptability and have a community development approach (Gardiner et. al, 2016).
- Interventions that corrected maladaptive social cognition may be more effective in reducing loneliness (Masi et.al., 2011)

Past systematic reviews of social isolation & loneliness in older people

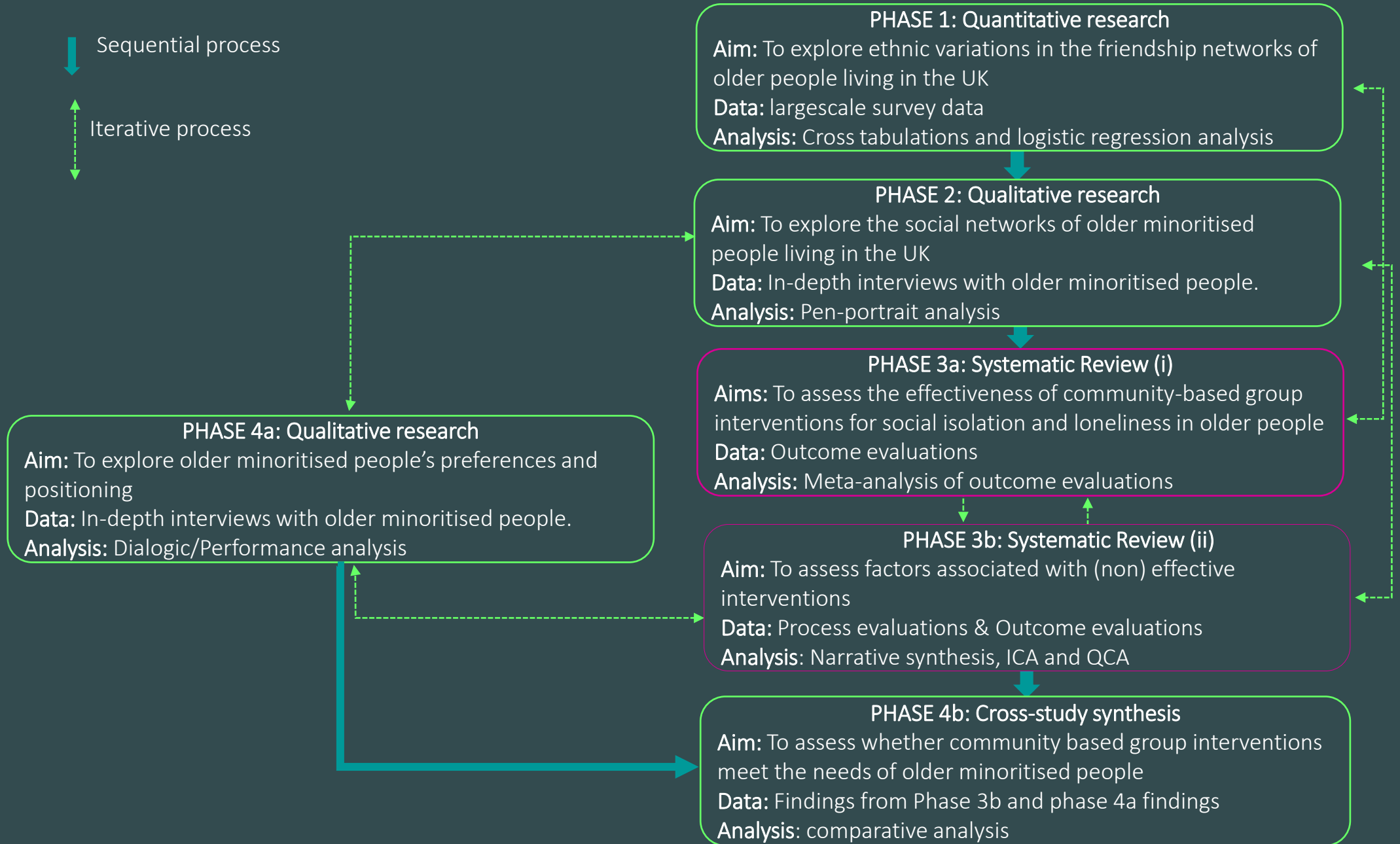
Shortcomings

-  Broad in focus.
-  Narrow in synthesis by focusing on studies with quantitative outcomes.
-  They lack a theory-based framework that includes the life-course experiences of older minoritised ethnic group people

Overarching aims

- Understand quantitatively whether social isolation and loneliness is likely to be different among older people from minoritised ethnic groups compared to older white people.
- Develop a deep understanding of how social isolation and loneliness is experienced by older minoritised people.
- Use this information to understand their needs
- Review interventions on social isolation and loneliness for older people.
- Assesses the size of the gulf between what is needed by older people from minoritised ethnic groups and what is offered.

Research Design



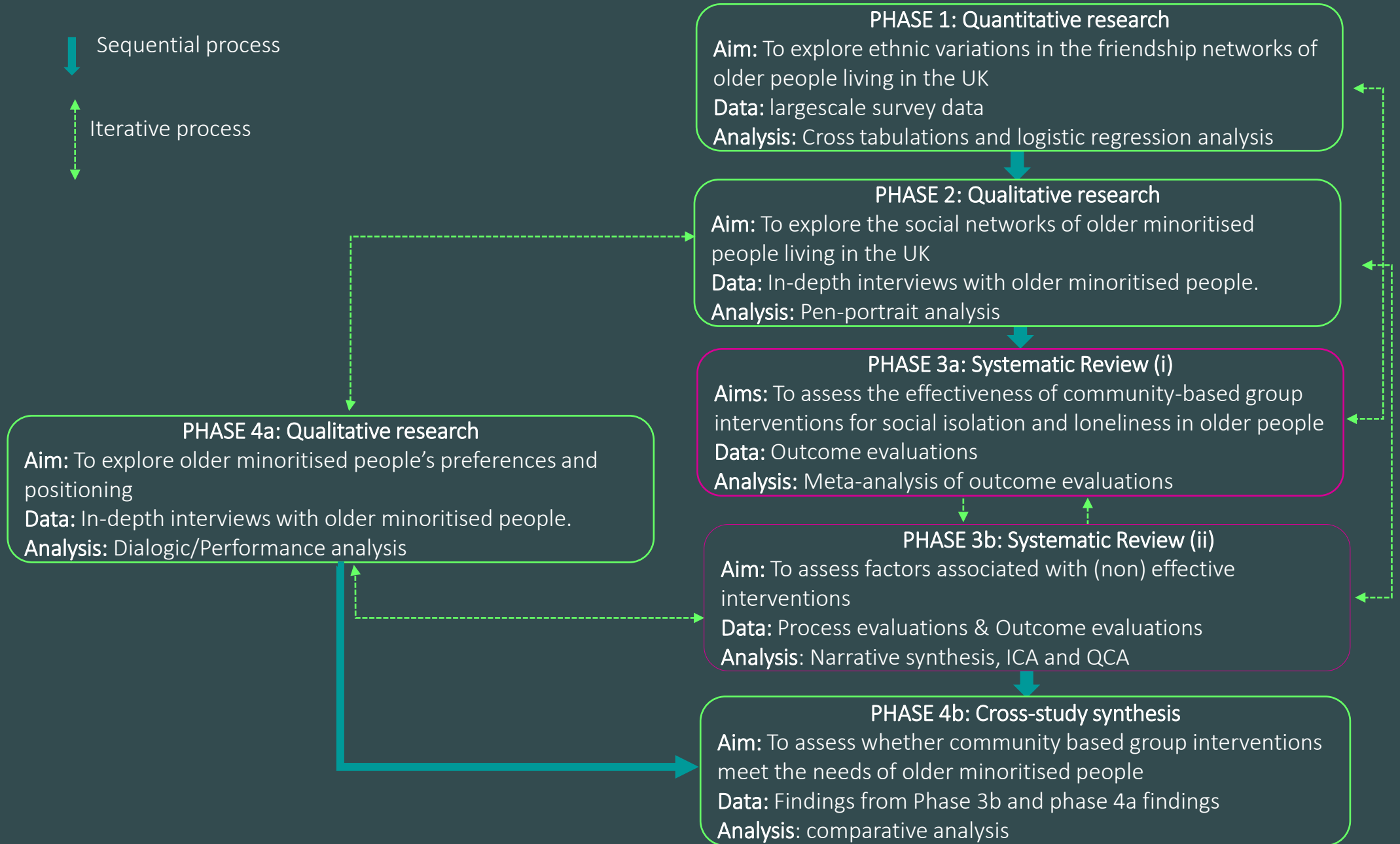
Theoretical framework: Intersectionality

- People are simultaneously positioned within social categories which cannot be understood in isolation (Phoenix, 2006)
- Social categories interact within connected systems and structures of power to privilege some while disadvantaging others (Hankivsky, 2014).
- The intersections of social categories shape people's social identities, life experiences, and opportunities (Fang, Canham, Sixsmith, & Woolrych, 2016).

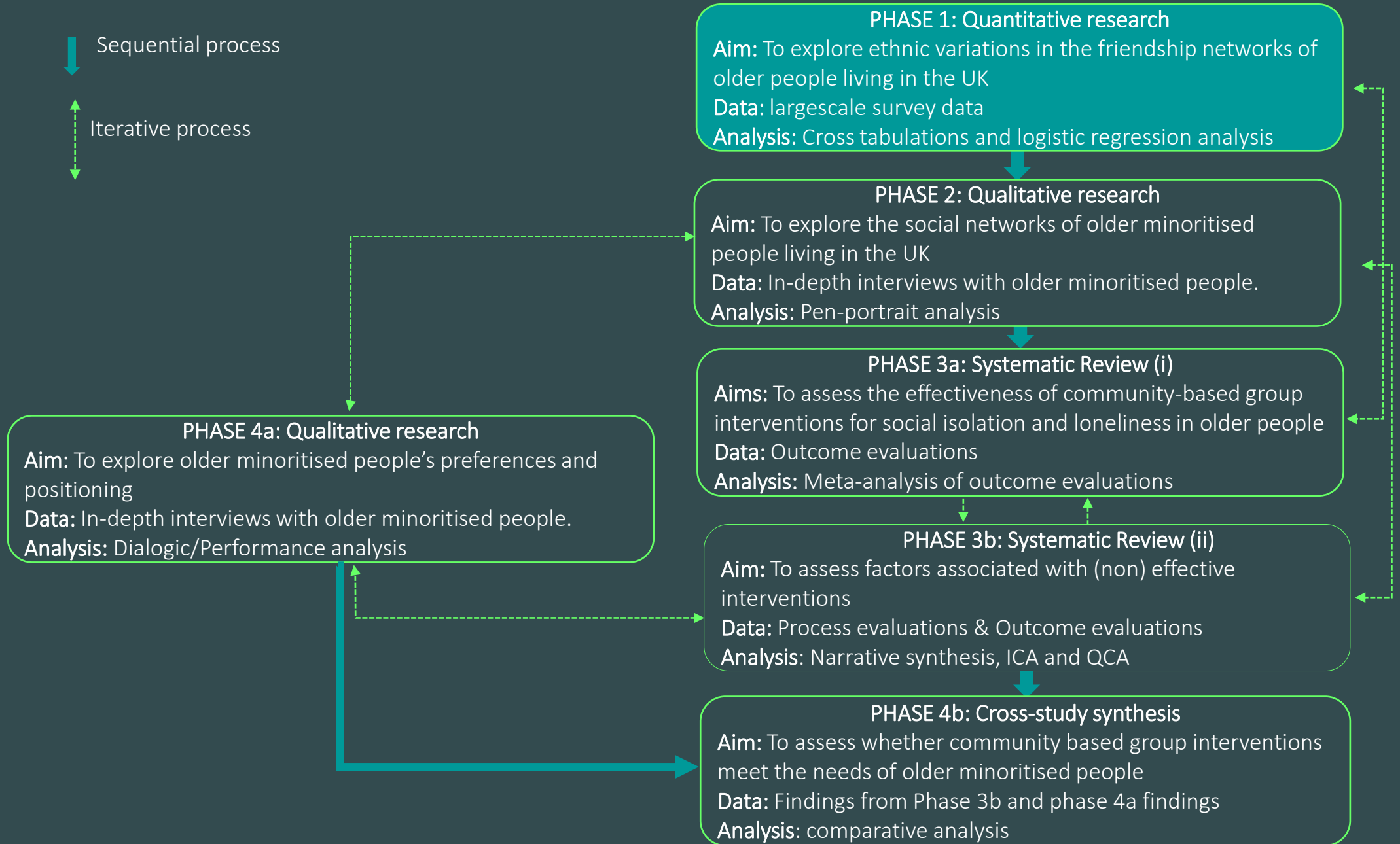


(Simpson, 2009)

Research Design



Research Design



Phase 1: Quantitative Exploration

Aim:

To explore ethnic variations in the friendship networks of older people living in the UK

Data:

Understanding Society: UK Longitudinal Household study.

Variables:

Ethnicity, age, gender, marital status, house-hold size, current financial situation, rurality, long standing illness, and life satisfaction, 'Number of close friends', 'Proximity of friends', 'Number of family members who are friends', 'Social visits' and 'Barriers to going out socially'

Analysis:

Cross tabulations and logistic regression

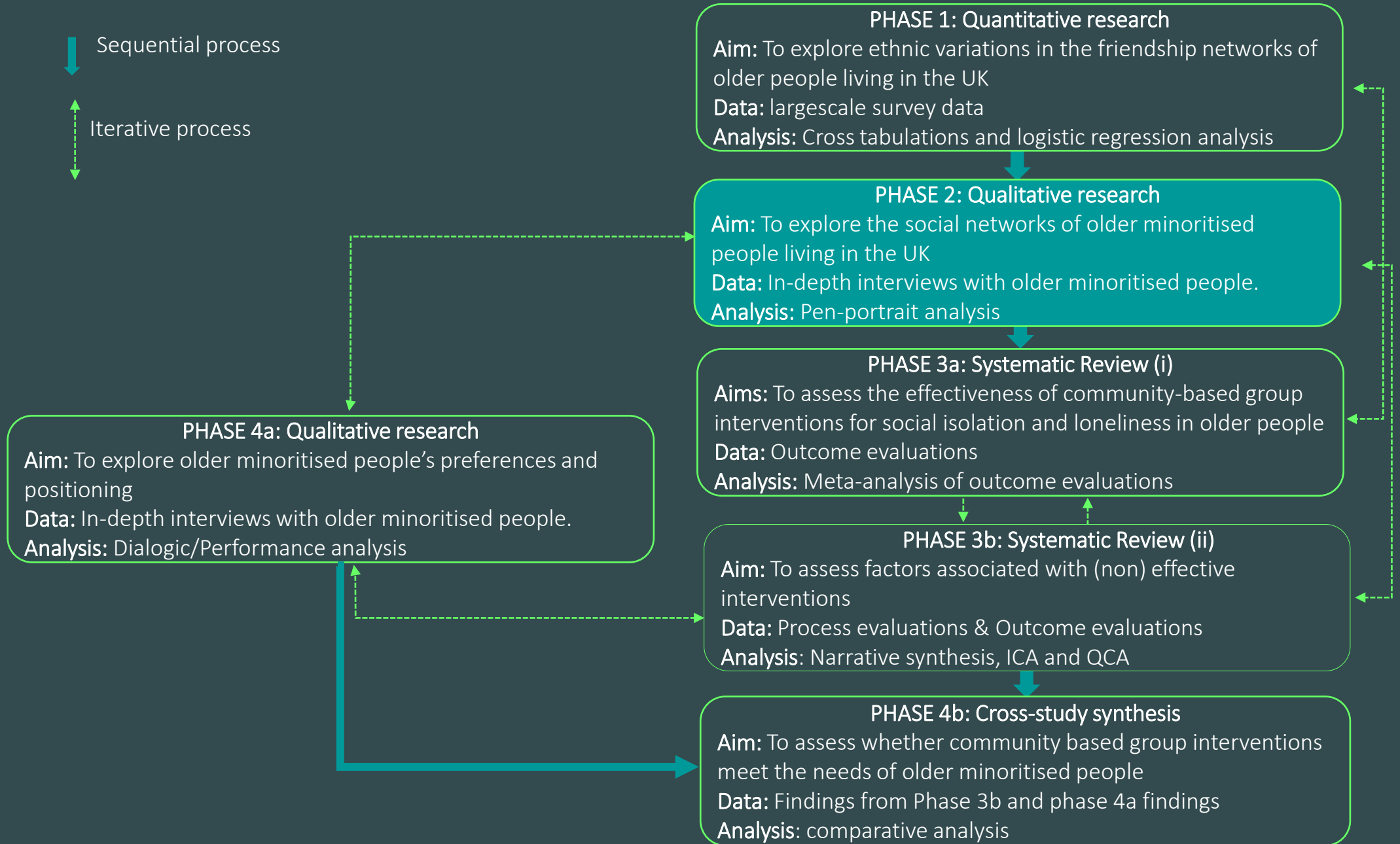


Phase 1: Quantitative Exploration: Key finding and discussion

- Compared to older white people, older minoritised people were significantly more likely to report that half or less than half of their friends live locally (AOR=1.81, 95% CI = 1.35-2.43) and were more likely to report having two or fewer close friends (AOR=1.67, 95% CI = 1.24-2.26)
- Older minoritised people were grouped into broad categories.
- There was a lack of appropriate variables that could explicitly measure social isolation and loneliness.
- There were no variables to tell us about levels of satisfaction with the number of friends and/or levels of support.



Research Design



Phase 2: Qualitative Exploration

Aim:

To explore the social networks and ties of older minoritised people living in the UK.

Data:

In-depth interviews with ten older minoritised people

Analysis:

Pen portrait analysis



Processes that increase vulnerability to isolation & loneliness

Perceived cultural differences

“If I was home, they would be couple of people at the door... they want to find out what is wrong, 'Why have you- Where are you?' 'We haven't seen you today, are you ok?' you know, people will come to you,' let me check what I can do for you”- Mr Edosa

Poor Health

“Some of my friends they always come from [Reading] to see me...one of them is not well now. Because of this my condition I couldn't go to [Reading] to see her”
-Mrs Jide

Caring Duties

“At the moment, I cannot see me travelling going anywhere because I've got [Albert] to look upon...”
- Mrs Lambert

Family/friends being busy

“But everybody has got grandchildren and babysitting. I think it has become harder for us now...older generation... Because children need us more and it's hard...”
- Mrs. Chakrapani.

Cold Weather

“Sometimes I say I want to go to bingo. I won't be feeling alright. My pains, joints (.). Then I will be thinking, 'Should I go?' Then, the day will be gone! You know, because of the weather. You don't even see the, oh the...the sun - so I can't go anywhere”
-Mrs Khuboni

Processes that reduce vulnerability to isolation & loneliness

Using technological/digital applications

"=You see the good thing now we've got these easy communications but even...it's not the same. You can communicate, you can Skype, you can WhatsApp. You see the person but it's not the same as going to see them there. You know what I mean?"

- Mrs Khuboni

Keeping busy with activities of interest

Mind you the thing is the other hobby I have is I go for bus rides and stuff like that since I've got the concessionary pass now I use the buses a lot..."

- Mr Gill

Belonging to community groups

"..erm it's very.. it's very ha- It's very good. It's that time where you meet people of your... of your own... background and so on which is just good and we play games like dominos or scrabble or...you know whatever [interviewer: yeah] or just sit down and have a chat with somebody that you don't see every day and erm it's very good" - Mrs Lambert

Meaningful contact with peers

"I have a, I have a friend here- I thank God- of the same mind... you know, we think alike... this is the friend of 50 something years...and we are about the same age...and so we sat down and we were talking discussing about the Bible..."

-Miss Isaacs

Good knowledge of local services

"...there's a lot to be done. A lot of activities in this country and er....I was talking about golf because that's what I like but you know, you could go angling, you know, you could er... it.., there's a lot, a lot..."

-Mr Bilal

What types of interventions would benefit the lonely and/or isolated

Interventions

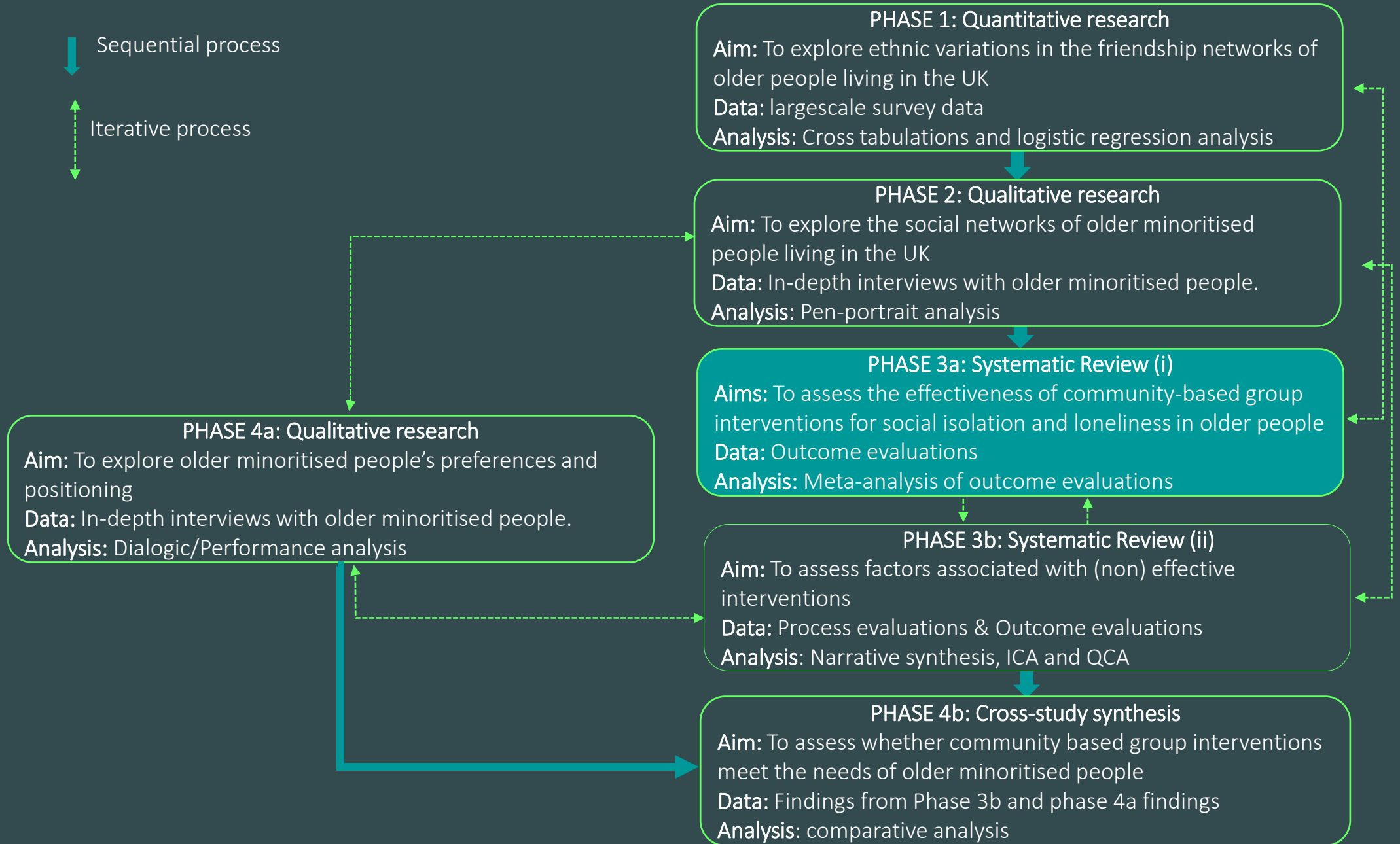
Information
giving?

Community-
based groups?

Health
promotion?

Web-
based/digital?

Research Design



Phase 3a: Systematic review (i)

Aims: To assess the effectiveness of community-based group interventions for social isolation and loneliness in older people

Participants/population: people aged 50+ living in the community in (OECD) countries

Intervention(s): Social isolation and loneliness group interventions conducted in a community setting

Comparator: no community-based group intervention, standard treatment groups, wait-list control groups.

Outcomes: loneliness, and/or involuntary social isolation

Study type: Outcome evaluations

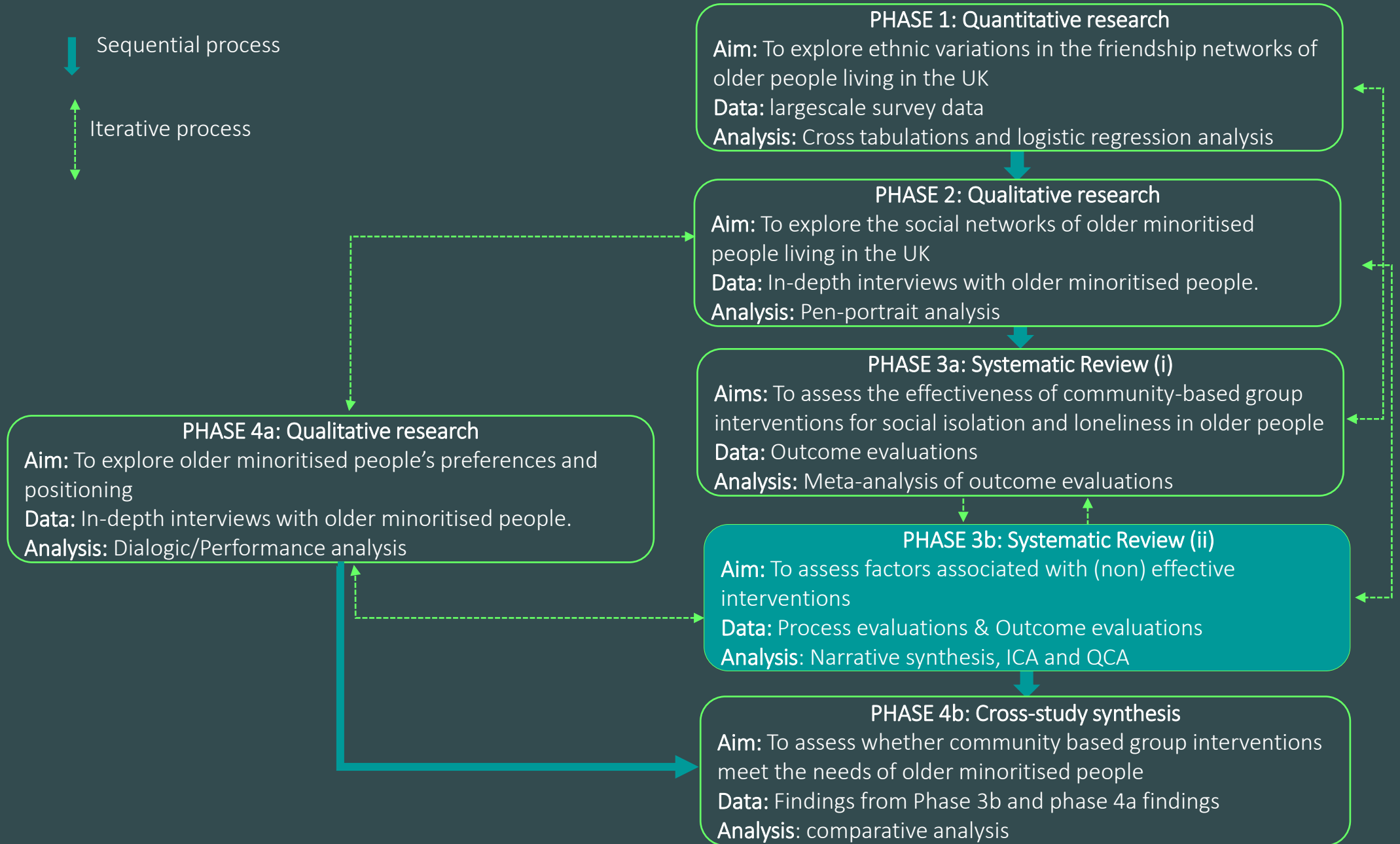
Data synthesis: Meta-analysis of outcome evaluations

Phase 3a: Systematic review (i) Key findings

Loneliness measured between 0-6months post-intervention

- The results are strongly suggestive, but ultimately inconclusive as to whether community-based group interventions can reduce levels of loneliness in older people
- The pre-specified subgroup analysis of post-intervention loneliness scores showed that some intervention and participant characteristics could not explain the differences between studies.
- Some key participant characteristics (e.g. health, ethnicity and socioeconomic status) were unavailable and the small numbers of studies included in the meta-analyses precluded the use of meta-regression to explore the inconsistent effect sizes in meta-analysis.
- The differences between the studies remained unexplained.

Research Design



Phase 3b: Systematic review (ii)

Aim:

To assess combination of intervention/participant/implementation features associated with (non) effective interventions

Data:

Process evaluations & Outcome evaluations

Analysis:

Qualitative Comparative Analysis informed by Narrative synthesis and Intervention Component Analysis (ICA)

Phase 3b: Systematic review (ii) QCA key finding

The most effective interventions attended to the following processes

adopted a cognitive approach

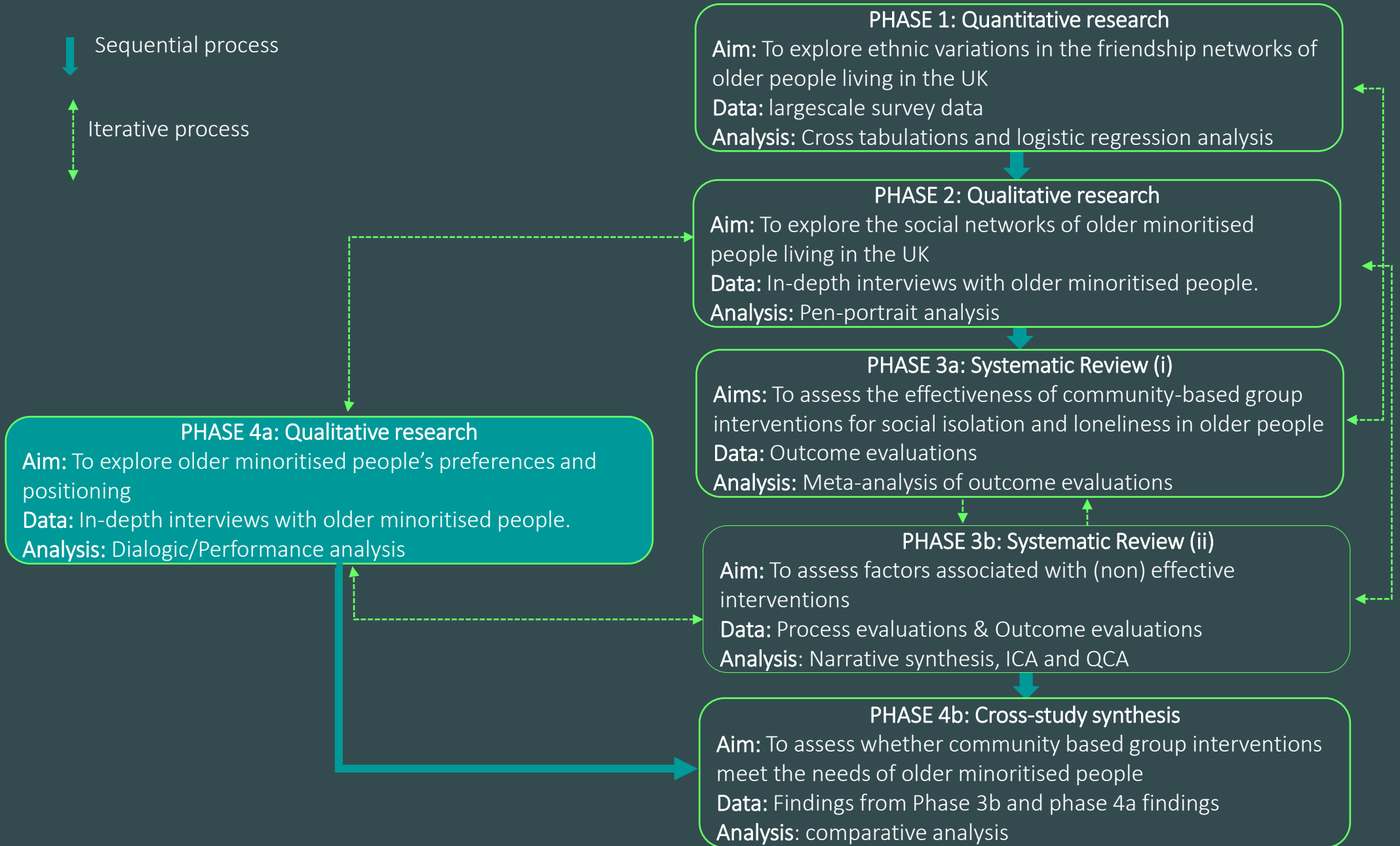


included participants with shared characteristics



provided opportunities for them to connect

Research Design



Phase 4a: Re-use of qualitative data

Aim:

To explore older minoritised people's preferences and positioning

Data:

In-depth interviews with older minoritised people.

Analysis:

Dialogic/Performance analysis



Phase 4a: Re-use of qualitative data: Key themes

Social interaction based on activities of interest

So, I have friends and we- friends come visiting. I'm, I'm- I like company... at least I have also English friends Interviewer: mmm Mrs Chakrapani: they come, they like my food, I cook for them, you know...And I enjoy, I mean, it's something for me to do
-Mrs Chakrapani

Resistance to master narratives

My experience is that I don't feel really I'm old!I could do things, I could do things myself. I go shopping, I cook, I do all things I want to do. So, I don't necessarily have to go to clubs to socialize
-Mr Edosa

Wider societal influences

...if you go out, you have to spend money... to buy why drinks and this and that, you know, lots of people couldn't afford doing that ...
-Mr Fiaz

Shared characteristics

....and then we can take your individual problem there, pray for it and in, in, in together with praying generally. So then, that's where I get my support...My church, my church is my support
- Miss Isaacs

Temporality

“.....but I'm not complaining because maybe, you know, I wouldn't be probably as content as I am in spite of sometimes, demands, you say, "Oh blooming hell, not again!" but yeah, it's a passing phase, you know, with families that is always the way isn't it? With highs, lows and in-betweens, so yeah”
- Mr Hall

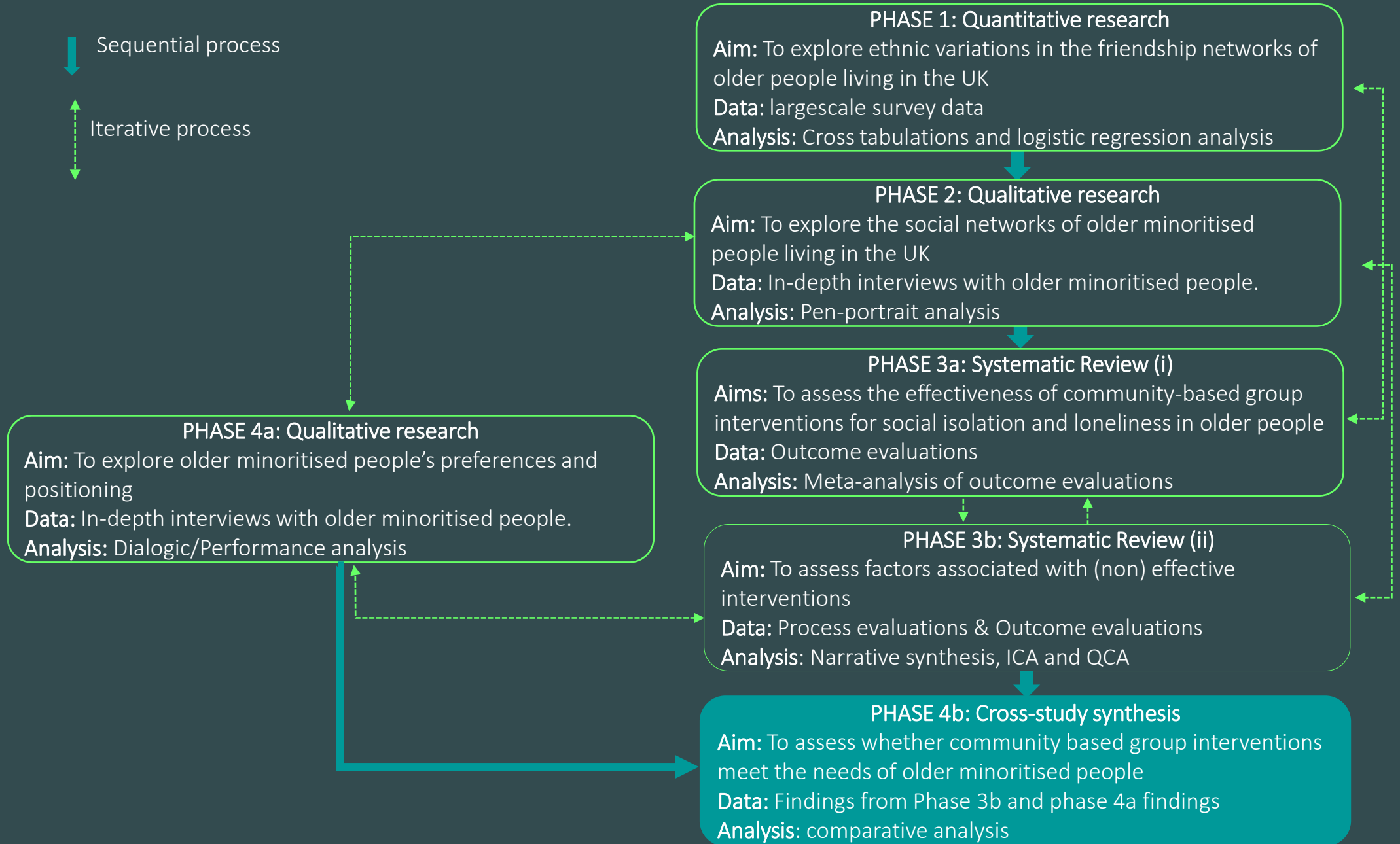
Phase 4a: Qualitative exploration: key findings

Principles of community-based group interventions based on older minoritised ethnic group people's preferences and positioning

- Assign participants active roles
- Avoid labels suggestive of reliance & dependency when recruiting
- Recruit participants who share similar characteristics
- Utilise naturally occurring groups
- Provide avenues for social interaction
- Be adaptable to participants' needs
- Support the continuation of current activities/roles
- Mitigate costs incurred as a result of the intervention
- Address wider societal barriers



Research Design



Phase 4b: Cross study synthesis

Aim:

To assess whether community based group interventions meet the needs of older minoritised people

Data:

Findings from Phase 3b and phase 4a findings

Analysis:

Comparative analysis



Phase 4b: Cross study synthesis

To what extent do the most effective interventions align with the intervention principles based on older minoritised ethnic group people's needs?

Some alignment

To what extent do the shared characteristics in the interventions closely align with those reported by older minoritised people ?

Poor alignment

The what extent do the cognitive approaches adopted in the most effective interventions reflect older minoritised people's preferences and positioning?

No evidence that older minoritised ethnic group people had maladaptive cognition.

Phase 4b: Cross study synthesis: Conclusions

For community-based group interventions for loneliness to be suitable for older minoritised people, they need to

- recruit participants based on aspects of identity that older minoritised people value.
- ensure that the opportunities to connect are based on shared characteristics and activities that older minoritised people find meaningful.
- provide opportunities for older minoritised people to play an active role.
- Consider wider societal processes and be mindful of the health issues that may hinder the participation of older people from minoritised ethnic groups

Strengths and Limitations

Limitations

- Experiences of older Chinese people not included
- Experiences of people who live in care homes not included
- Experiences of people who do not speak English not included
- Experiences of people who live in rural areas not included
- QCA conducted for interventions focusing on loneliness
- Findings will need to be interpreted in the context of COVID-19 pandemic

Strengths

- Older minoritised people kept at the core of the study
- Findings are generalizable to older people from minoritised ethnic groups
- Adds to the sparse literature on social isolation and loneliness in this population
- Shifts focus away from problematic aspects of ethnic group belonging
- Illustrates how an intersectionality informed mixed methods study can be conducted

Acknowledgements and contact information

Thank you

Acknowledgements:

UKRI Economic and Social Research Council

Dr Dylan Kneale & Professor Ann Phoenix

Dr Henglien Lisa Chen & Avanka Fernando

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