

Title	A review of the CONNECT home visitation project from the perspective of the service user
Authors	Quirke, Michael
Publication date	2011-04-19
Original Citation	Quirke, M. (2011) A review of the CONNECT home visitation project from the perspective of the service user. Cork: Community-Academic Research Links, University College Cork.
Type of publication	Report
Link to publisher's version	https://www.ucc.ie/en/scishop/rr/
Rights	© 2011, Michael Quirke.
Download date	2026-10-11 13:09:08
Item downloaded from	https://hdl.handle.net/10468/8278

A review of the CONNECT home visitation project from the perspective of the service user

Michael Quirke

Science Shop Research Project



Name of student(s):	Michael Quirke
Name of civil society organization/community group:	Maine Valley Family Centre
Supervisor(s):	Rachel Rice
Name and year of course:	Master of Social Work Year 2.
Date completed:	19th April 2011

What is a Science Shop?

Science Shops are a service provided by research institutes for the Civil Society Organisations (CSOs) in their region which can be grass roots groups, single issue temporary groups, but also well structured organisations. Research for the CSOs is carried out free of financial cost as much as possible.

Science shops seek to:

- provide civil society with knowledge and skills through research and education;
- provide their services on an affordable basis;
- promote and support public access to and influence on science and technology;
- create equitable and supportive partnerships with civil society organisations;
- enhance understanding among policymakers and education and research institutions of the research and education needs of civil society, and
- enhance the transferrable skills and knowledge of students, community representatives and researchers (www.livingknowledge.org).

What is a CSO?

We define CSOs as groups who are non-governmental, non-profit, not representing commercial interests, and/or pursuing a common purpose in the public interest. These groups include: trade unions, NGOs, professional associations, charities, grass-roots organisations, organisations that involve citizens in local and municipal life, churches and religious committees, and so on.

Why is this report on the web?

The research agreement between the CSO student and University states that the results of the study must be made public. We are committed to the public and free dissemination of research results.

How do I reference this report?

Author (year) *Project Title*, [online], School of Applied Social Studies, University College Cork, Available from: <http://www.ucc.ie/en/appsoc/resconf/scishop/completed/> [Accessed on: date].

How can I find out more about the UCC Science Shop and the Living Knowledge Network?

The UCC Science Shop website has further information on the background and operation of the Science Shop at University College Cork, Ireland. <http://scienceshop.ucc.ie>

The UCC Science Shop is part of an international network of Science Shops. You can read more about this vibrant community and its activities on this website: <http://www.scienceshops.org>

Disclaimer

Notwithstanding the contributions by the University and its staff, the University gives no warranty as to the accuracy of the project report or the suitability of any material contained in it for either general or specific purposes. It will be for the Client Group, or users, to ensure that any outcome from the project meets safety and other requirements. The Client Group agrees not to hold the University responsible in respect of any use of the project results. Notwithstanding this disclaimer, it is a matter of record that many student projects have been completed to a very high standard and to the satisfaction of the Client Group.

Background to the Study

This study began as an MSW thesis as part of a new Science Shop initiative by University College Cork. Research was carried out on a home visitation project which aims to alleviate loneliness. This project is named CONNECT and is run by the Maine Valley Family Centre, based in Castlemaine, Co. Kerry. This project trains volunteers to meet older people in their homes for one hour per week. The role of the volunteer is to listen and talk with the older person.

Objectives

The aim of this study was to evaluate the CONNECT home visitation project from the perspective of the service user. The rationale of the CONNECT project is to alleviate loneliness and therefore another objective was to review literature in the area of loneliness. Interviews were conducted to ascertain the service users perspectives on three areas; has the CONNECT project alleviated loneliness amongst its service users; are the service users happy with the service that they receive; and what are the views of the service users in relation to the development or improvement of this service.

Methodology

The methodology used was qualitative in nature. The theoretical perspectives applied were phenomenological, interpretivism and community social work. Primary research was carried out through six semi-structured interviews. Secondary research in the form of a literature review was also conducted.

Results

There was a definite sense that the CONNECT project was well regarded amongst the service users who were interviewed. The participants spoke of their relationships with the volunteers and described the service as consistent and reliable. There was some discrepancy in views about the role

of CONNECT whereby some service users were not fully aware from the very beginning that the service was based on listening. In this sense there was an expectation that the service incorporated elements of home help. The CONNECT project was seen as instrumental in maintaining some friendships between the service user and their friends. Some participants described their lives before their involvement with CONNECT as lonely whereas other participants were of the view that it was fine. A gender difference emerged; the female participants used the word 'lonely' and the male participants did not. This concept is analysed in more detail in chapters four and five of this report. The issue of volunteerism came through this research in that some participants felt that the volunteers were paid for the service that they provided through mileage payments. The issue of making tea also surfaced. The participants felt that the volunteers should be allowed to make a cup of tea for the older person, something which at the time of the interviews was not allowed.

Recommendations and Implications of the study's findings

Communication was a big feature of the recommendations. The service users should be provided with clear information about the CONNECT project from the beginning of their involvement with the service. There should be flexibility in negotiating times between the volunteer and the service user. The policy of tea making should be re-evaluated so that volunteers can make tea for service users. Training in the area of loneliness is vital for volunteers who work with people who may experience this phenomenon. The handover process when a new volunteer is assigned to a service user should also be clearly outlined to the service user.

It is hoped that the CONNECT project will utilise the opinions of the service users and that a discussion about the service as a whole will evolve. This can only serve to strengthen the role of the CONNECT project and ensure that it remains client focused.

Author's conclusions

This was a very interesting and worthwhile study. The honesty and openness of the service users and staff of the CONNECT project was much appreciated. The recommendations made are based on the views of the service users. This report seeks to give a voice to the service users and present the information in such a forum that it will be considered with high priority by the CONNECT project. While recommendations were made, the overwhelming view was that the CONNECT project was a huge source of support and should be commended for this.

DECLARATION

I certify that the work presented in this thesis is, to the best of my knowledge and belief, original, except as acknowledged in the text, and that the material has not been submitted, either in whole or in part, to UCC or any other university.

Michael Quirke

Date

ACKNOWLEDGEMENTS

First and foremost, I would like to thank the older people who agreed to take part in this study. I very much appreciate the opportunity to have met with each one of you. Your outlook on life was refreshingly honest and I sincerely thank you for that. To all involved with the CONNECT project and the Maine Valley family centre, thank you for being so welcoming to me when I came to Castlemaine. In particular, thank you to Liz Fenton for her support throughout this study. A sincere thank you to my tutor, Rachel Rice, for her continued encouragement and guidance. It has been much appreciated. Thank you to all involved with the Science Shop, in particular Catherine O'Mahony. To my dear friend Michelle, thank you for your help in formatting and putting together this piece of work, your assistance as always has been most welcomed.

ABSTRACT

This research study was conducted on the CONNECT home visitation project which aims to alleviate loneliness among older people. The project trains volunteers to carry out a weekly one hour home visit. The volunteer talks and listens to the older people. The concept of loneliness was explored and its subjective nature outlined. Interviews were conducted with the older people to obtain their views and satisfaction with the service as well as ideas on improvements. The research indicates that the project is perceived to be a positive element to their lives. Clearer communication was the main source of recommendations made. It became evident that the older people required a better understanding of some of the elements of the project and that clearer communication would aid this.

TABLE OF CONTENTS (PLEASE NOTE PAGES NUMBERS MAY NOT MATCH IN PDF VERSION)

Declaration.....	i
Acknowledgements.....	ii
Abstract.....	iii
CHAPTER 1: INTRODUCTION.....	11
1.1 Introduction to the Research	11
1.2 The CONNECT Project	11
1.3 Science Shop	12
1.4 Rationale	13
1.5 Research Aims and Objectives.....	14
1.6 Research Questions	14
1.7 Conclusion.....	14
1.8 Chapter Summaries	14
CHAPTER 2: METHODOOGY.....	16
2.1 Introduction	16
2.2 Methodology	16
2.3 Theoretical Perspectives.....	16
2.4 Methods.....	17
2.4.1 Literature Review.....	18
2.4.2 Semi-Structured Interviews.....	18
2.4.3 Sampling	19
2.4.4 Data Collection	19
2.4.5 Data Analysis	20
2.5 Limitations	21
2.6 Ethical Considerations	22

2.7 Conclusion.....	23
CHAPTER 3: LITERATURE REVIEW	24
3.1 Introduction	24
3.2 Loneliness	24
3.3 Factors Associated with Loneliness	24
3.3.1 Social Isolation.....	25
3.3.2 Living Alone	25
3.3.3 Loss/Bereavement	26
3.3.4 Mental health.....	26
3.4 Coping Strategies	26
3.4.1 Social Interaction	27
3.5 Policy.....	28
3.6 Community Services	28
3.7 Conclusion.....	29
CHAPTER 4: PRESENTING THE FINDINGS AND ANALYSING THE DATA	30
4.1 Introduction	30
4.2 Reason for Involvement	30
4.3 Establishing if Loneliness was Part of the Service Users Life Prior to	31
4.4 What the Service Means to the Service User	31
4.5 The Effects of the Project on the Life of the Service User	32
4.6 Satisfaction with the CONNECT Project.....	33
4.7 Development of the CONNECT Project.....	33
4.8 Experiences of the CONNECT Project.....	34
4.9 Community Serviceson	35
4.10 General Support System.....	36
4.11 Conclusion.....	37
CHAPTER 5: FINAL WORDS	38
5.1 Conclusions	38

5.2 Has the CONNECT Project Alleviated Loneliness Amongst its Service Users?	38
5.3 Are the Service Users Satisfied with the Service that they Receive?	39
5.4 Recommendations for the CONNECT Project	39
BIBLIOGRAPHY	41
APPENDIX 1.....	48
APPENDIX 2.....	49
APPENDIX 3.....	50
APPENDIX 4.....	53
APPENDIX 5.....	54

CHAPTER 1: INTRODUCTION

1.1 INTRODUCTION TO THE RESEARCH

*The glorious chariots of the kings wear out;
the body also comes to old age;
but the virtue of good people never ages;
thus the good teach each other.*

(‘Old Age’ by Buddah)¹.

This poem depicts the idea that people can learn from each other. Similarly, the hope of this research is that the CONNECT project can learn from the older people who avail of the service. The objective of the project is to alleviate loneliness and enhance the service user’s life. The project trains volunteers to call to older people once a week for one hour and interact with them at a social level. This research will explore the concept of loneliness which is the rationale for the CONNECT project. It will then assess the attitudes of the older people towards the CONNECT project and their interpretation of what the service entails. Recommendations will be made following this. The researcher comes from a social work background and so this will form part of his theoretical framework. The focus, of course, is on the CONNECT project and this focus was maintained throughout.

1.2 THE CONNECT PROJECT

The CONNECT project is run by the Maine Valley Family Centre which was established in 1999 in response to the needs of the community of Castlemaine. The mission statement of the centre is

to empower, and support all the members of our community to respond to its needs, by providing information and guidance and by developing social, educational and recreational activities for all in an open and welcoming atmosphere

(Maine Valley Family Centre, 1999).

¹ Reference: Watkins, A. and Pettinger, T. (2011) Poet Seers, Available from: <http://www.poetseers.org> [Accessed 08/04/2011].

The community centre runs a number of services for the community including; counselling service; parent and toddler group; evening classes; lone parent support group; youth group; lone parent mentoring service; and the CONNECT project. CONNECT stands for Community Operated Network for the Elderly of Castlemaine Town and its surrounds. The CONNECT project is based in Castlemaine, County Kerry, a rural and remote area. The project provides a service which also covers the hinterland of this area. Some older people live alone, often in physical isolation. The CONNECT project works in tandem with other voluntary, community and statutory services to ensure that these vulnerable members of the community can choose to live at home. The visits are carried out by a visitation worker and volunteers. To date the service has been in contact with 30 older people in the community with an additional waiting list. New volunteers were trained recently, bringing the total number of volunteers to 15. The CONNECT project has been run for the past two years by a part-time coordinator. According to the CSO (Civil Society Organisation)², there is an extensive criteria list for older people who wish to avail of the service. These factors are considered before a visitation service begins. Volunteers undergo training, which includes knowledge about the needs and issues which affect older people who live in isolation.

1.3 SCIENCE SHOP

This piece of research began through a pilot Science Shop run in the School of Applied Social Studies. This is a new community based research initiative at University College Cork (Cork), but Science Shops have been in operation in other countries for some time. The Living Knowledge Network (2011: 1) defines Science Shops as follows:

Science Shops provide independent, participatory research support in response to concerns expressed by civil society groups. They cover all academic and engineering disciplines, so 'science' should be taken in its broadest meaning. They are also not 'shops' in the traditional sense of the word. Science Shops are small entities that carry out research in a wide range of disciplines – usually free of charge – on behalf of (or with) citizens or civil society organisations. That Science Shops respond to civil society's needs for expertise and knowledge is a key element that distinguishes them from other knowledge transfer mechanisms. Science Shops are often linked to universities, so that students can conduct research as part of their curriculum with no additional costs to partners

² Maine Valley Family Centre

Masters of Social Work students had the opportunity to undertake research with civil society groups and I worked with the CONNECT group. The initial proposal from the Maine Valley Family Centre wished to focus on three aspects of the home visitation project; if/how the service has improved the lives of the older people; the multi-agency aspect of the project and if this benefits the older people; to evaluate the training and the experiences of the volunteers. Due to time and volume constraints, it was decided to focus on one area, namely any improvements to the lives of the older people. This particular option was chosen over the other two topic areas because the researcher wanted to use a person-centred approach to this research. The focus is on the service user who avails of the service and so this person should be in a position to offer knowledge on how the service responds to their needs as well as offering an insight into potential improvements to the service. If the researcher were to review the project from the point of view of the volunteers or multi-agency workers, then that review would focus on the needs of these distinct groups as opposed to the needs of the service user.

1.4 RATIONALE

The researcher is a student social worker. The values which he holds such as social justice and human rights are well echoed and feature heavily in the new code of ethics for the discipline (Social Workers Registration Board, 2011). Reviewing a service from the perspective of the service user fits well with the human rights perspective that all people have a voice. Furthermore it resonates with the view that action can happen from the ground up.

The researcher applied to carry out a science shop project because of his interest in the practical element of this type of project. This facility uses available resources which makes absolute sense to this researcher. The research gathered will also be used to inform a service how it is performing. It was felt that a comprehensive review of a specific project in Ireland would assist in developing discussion around the area of service provision for older people. Older people currently account for 11% of the population in Ireland (Central Statistics Office, 2006). Indeed it is estimated that over the next 20 years this population will increase to at least 22%. Additionally, average life expectancy has increased to 75 years for men and 80 years for women. There is therefore a necessity on society to ensure that services for older people today are developed so as to facilitate the increase in service user numbers tomorrow. As well as the service and the service users, it is believed that this piece of research should be of interest to academics, policy makers and the public alike.

1.5 RESEARCH AIMS AND OBJECTIVES

The perspective of the older people will be focused on and their experiences of this project will be examined. This piece of research is designed to gather the opinions of the participants and to give the older people a forum through which they can express their honest opinions of this home visitation project. The impact of loneliness on older people will be examined. As noted earlier, the original aim of this project was to alleviate loneliness and so it is important to assess if this criteria is met. Through discussions with the participants, the impact of working with older people from a social work perspective will be analysed. Recommendations will be made following an analysis of the information gathered.

1.6 RESEARCH QUESTIONS

The research questions were a vital component of this piece of research as they guided the researcher and ensured a focus at all times. The process of designing the questions involved examining the synopsis of the CONNECT project³, speaking with the CSO, speaking with the researcher's tutor and coming to a conclusion which appeared achievable and justified. The research questions were:

1. Has the CONNECT project alleviated loneliness amongst its service users?
2. Are the service users satisfied with the service that they receive?
3. What are the views of the service users in relation to the development or improvement of this service?

1.7 CONCLUSION

This piece of research is small in scale and so was limited from the start. However, a substantive study was achievable and was strived for. The research questions lay at the heart of this project throughout its lifetime. Indeed, it enabled and allowed the research to develop from it. The science shop element to this project required the researcher to have an open mind and to negotiate with the CSO while maintaining the integrity of the project at all times.

1.8 CHAPTER SUMMARIES

Chapter two will examine the methodologies and methods used by the researcher to undertake this study. The theoretical perspectives as well as data collection and data analysis methods will be examined with scrutiny. Limitations and ethical considerations will also be highlighted.

³ As supplied through the Science Shop Committee.

Chapter three will provide a systematic literature review of this topic area. The concept of loneliness, as well as factors associated with it, will be examined in detail. Coping strategies and government policy will then be considered.

Chapter four will present the findings and analyse the data. It is split into two sections so as to allow the service users to illustrate their views, uninterrupted. The researcher will then analyse the data using literature at this point.

Chapter five will draw conclusions from the themes which were analysed. It will go on to make recommendations to the CONNECT project.

CHAPTER 2: METHODOOOGY

2.1 INTRODUCTION

This chapter will examine the most appropriate methodology to use for this research and explain in a detailed way how the data will be collected and analysed. The theoretical perspective of the author will also be outlined which will influence how the data is collected and analysed. The limitations to this research will be discussed, as will ethical considerations.

2.2 METHODOLOGY

Methodology can be broken down to three main types; qualitative; quantitative; or a combination of both. Qualitative research examines the construction of the social world by participants (Bryman, 2008). This type of research is open and allows the interviewer to understand the position of the participant in a meaningful way (Ritchie, 2003). Conversely, quantitative research is numerically based and often works with a large number of participants (Carey, 2009). Qualitative research involves studying *‘things in their natural settings, attempting to make sense of, or interpret, phenomena in terms of the meanings people bring to them’* (Denzin & Lincoln, 1998: 3). A universal component of qualitative research is that it does not impose a strict structure and is geared to capture reality in action (Sarantakos, 2004). The research methodology which was undertaken was qualitative. The decision to use qualitative research was based on the research questions which required in-depth analysis which values the individuality of people’s experiences.

2.3 THEORETICAL PERSPECTIVES

An ontological stance refers to the *‘nature of the world and what we can know about it’* (Snape and Spencer, 2003: 16). Matthews and Ross (2010) describe the social world as filled with social phenomenon which could include groups of people such as a family or ethnic groups, or could include a social behaviour or social events. The researcher’s ontological position comes from a social constructivist perspective. This theoretical perspective asserts that social phenomena are constructed by social actors (humans) who then review and rework these constructions (Matthews and Ross, 2010). This perspective closely reflects the researchers’ outlook on life, taking into account his links with social work.

An epistemological stance examines '*how it is possible to know about the world*' (Snape and Spencer, 2003: 16). In this sense it establishes a researcher's theory of knowledge and how they know things (Matthews and Ross, 2010). For the purpose of this research, an interpretivist perspective was taken in tandem with a phenomenological perspective and a community social work perspective. A researcher using interpretivism derives understanding and explanation of the social world by interpreting social phenomenon (Matthews and Ross, 2010). An interpretivist perspective recognises that a researcher cannot be entirely objective and that his/her interpretation of what is said is inevitably influenced by their values and outlook on life (Snape and Spencer, 2003). A phenomenological perspective is linked with interpretivism and can be simply described as '*the meaning for several individuals of their lived experiences of a concept or a phenomenon*' (Creswell, 2007: 57). Phenomenology appeared to meet the requirements of the research aims in terms of inclusiveness and seemed conducive to conducting a review as it took account of the views held by the group. It had the potential to allow the researcher to gain an understanding of several individuals' common or shared experiences of loneliness and how the CONNECT project affects their lives. A community social work perspective is participatory in nature which fits well with the Science Shop element of this research. Community social work seeks to find alternative ways to serve individual service users (Stepney and Popple, 2008). Indeed the idea of community social work is to work with a community and empower these people to make changes for themselves. This fits well with the rationale of this researcher and the nature of the CONNECT project.

2.4 METHODS

The methods for this project were both primary and secondary based. Primary research is obtained from direct involvement with, or participation in, data collection (Carey, 2009). Effectively, it is original data. Secondary research is the use of primary data which has been processed or analysed and made available for example through the format of a book or journal article (Carey, 2009). Primary research was required in order to assess the views of the service users. Secondary research alone would not have allowed a specific review of the project to take place. The rationale for the CONNECT project was loneliness, it was therefore important to gain an insight into this concept through secondary research. Additionally, it would enhance analysis of the primary data. In this sense the method used can be described as applied research as it involves both primary and secondary data (Carey, 2009).

2.4.1 LITERATURE REVIEW

The theoretical perspectives of the researcher were influential in defining the type of literature that would be analysed and framed the thinking process of the author. The EBSCO database was used as the main search engine. There are many databases to choose from but from previous experience the author felt that EBSCO offered the most sufficient results. The EBSCO database offers an academic search of over 13,200 publications (EBSCO, 2011). A search for the terms '*older people*' and '*loneliness*' in all abstracts of articles from January 2001 to December 2011 reported 79 results. Each abstract was read and articles were chosen based on their relevance taking words such as '*support network*' and '*community*' into account during this process. This refining process yielded 10 articles. The '*social care online*' section of the SCIE (Social Care Institute of England) website was searched using the same search terms but refined to '*available online*' and '*articles*' (SCIE, 2011). This reported five results, two of which were used after applying the same refinement technique. A UCC library search using the keyword '*loneliness*' yielded 60 results. These were filtered manually determined by relevance according to the title of the publication. Seven publications were utilised. The author completed a module on social work with older people in February 2011 and the bibliography from this module was utilised to offer a broad perspective on the area of older people. Subsequent to reading all of the above material, further articles and books were sourced from their bibliographies. The approach taken when reading all of the material was to highlight areas of interest as the reading took place. These areas of interest were derived from the research questions and from the theoretical perspectives held by the researcher. An Irish study on loneliness by Drennan et al (2008) was included. However, secondary research was not restricted to Ireland because it is a global phenomenon and there was a lack of detailed qualitative Irish studies.

2.4.2 SEMI-STRUCTURED INTERVIEWS

It was decided to carry out individual interviews as opposed to focus groups because many of the service users of the CONNECT project are house bound. The choice therefore was between the types of individual interviews. Structured interviews have a set of questions which are often closed or fixed in nature (Bryman, 2008). Semi-structured interviews have a set of open questions but the sequence may vary depending on the participant. Also the interviewer has the possibility to ask additional questions of interest (Bryman, 2008). Unstructured interviews have a set of topics and the questions can vary according to the participant (Bryman, 2008). It was decided to use semi-structured interviews because they are non-standardised, which allowed further investigation into the views and opinions of a participant where appropriate (Gray, 2004). This enabled the researcher to combine structure with flexibility. Additionally, the author was aware

that he was interviewing older people and so wanted to make the interview style less formal and more open to discussion.

2.4.3 SAMPLING

Sampling is the process whereby a sample is chosen (Carey, 2009). In ideal terms, this sample should be representative. The two sample types are probability and non-probability. A probability sample is randomly selected and every person in the population has a chance of participating (Bryman, 2008). This type of sample is usually termed representative and sampling error is kept to a minimum. A non-probability sample is deliberately chosen and certain individuals have a greater chance of participating than others (Bryman, 2008). Probability sampling in the form of systematic sampling was chosen because it ensured that each service user had an equal opportunity of participating in the study (Bryman, 2008). Polkinghorne (1989) suggests that research using a phenomenological perspective should involve at least five participants who have experienced the phenomenon (cited in Creswell, 2007). Taking this and time into consideration, the sample for this research was decided at six. The current number of CONNECT service users is 15. The CSO advised the exclusion of four service users because of ill health. The researcher provided an introduction letter⁴ and consent form⁵ to all of the available older people. This letter detailed his involvement in this study, the role he would undertake, the expectations of a participant and that consent was voluntary. The letter and a self-addressed envelope were delivered through the volunteers of the CONNECT project. The service users were asked to sign and forward on the consent form if they were willing to partake in this research. Each service user who agreed to participate was allocated a number according to the delivery of their consent form, for example the first respondent was allocated the number '1' etc. There were eight respondents altogether. A computer generated researcher randomiser was located from Urbaniak and Plous (2011). This computer device provided six random numbers between the numbers '1' and '8'. These numbers were allocated according to the number assigned to each participant and so the six participants were chosen.

2.4.4 DATA COLLECTION

The interview process was conducted in conjunction with the CSO, taking on board their advice and considering the client group at all times. The CSO informed the participants of the dates the interviews would take place. After many discussions with the coordinator it was decided that the

⁴ Please see Appendix 1.

⁵ Please see Appendix 2.

most convenient, respectful and pragmatic process was for the volunteer to introduce the researcher to the service user. It was planned that the volunteer would spend a few minutes with the researcher and service user until such time as the service user was comfortable for the interview to take place. The volunteer was then expected to return to the service user for a chat after the interview with the researcher took place. The researcher wished to interview each participant on their own so as to remove any undue influence from any other individual who may have been present. This was not possible for all of the interviews and on two separate occasions the service user wished for the volunteer to remain in the vicinity of where the interview took place. The researcher was more concerned with ensuring the service user felt comfortable rather than the independence of the interview and so this was facilitated.

An interview guide⁶ was used by the researcher to facilitate the interview at hand. This included a list of six open ended questions under specific topic areas. Probing questions were also used to elicit further information. The researchers' tutor, science shop tutor and the co-ordinator of the CONNECT project, as well as friends of the researcher were involved in deciphering the wording of these questions. The questions needed to be useful for the CSO, therefore the CONNECT project were very involved in this process. It was advised not to ask any direct question about loneliness as this was deemed a sensitive area for the service users. The involvement of CONNECT in the process illustrates the participatory approach utilised during this research. Indeed many questions were refined and altered on advice from the CSO and from conducting the literature review.

2.4.5 DATA ANALYSIS

A phenomenological perspective involves the researcher interpreting the data and interpreting the experiences of the collective group (Creswell, 2007). For this reason, the data was analysed through the lens of interpretivism. Interviews were recorded using a Dictaphone. By recording the interviews it was hoped to gain a detailed record of what was said, as compared to what may have been gained through note taking alone. The data was transcribed in full with the aid of a transcriptionist. Permission for this was obtained from the service users prior to conducting the interviews⁷. The transcriptionist agreed to keep the information confidential⁸. Notes were not taken during the actual interview but were written immediately afterwards using a research

⁶ Please see Appendix 3

⁷ Please see Appendix 4

⁸ Please see Appendix 5

journal. The initial reaction, thoughts and environmental observations were accounted for using this forum. The researcher had to be ever mindful throughout the process of data analysis that his background, history, context and prior understandings did not impact upon his interactions with the data collected (Creswell, 2007). It was endeavoured to overcome this risk by focusing on the attitudes and outcomes of the participants. Key themes which linked participants were identified. This is a process known as thematic analysis which identifies themes as described by the participants so as to avoid interviewer bias (Dawson, 2006 cited in Carey., 2009). Thematic analysis was achieved by reviewing the data repetitively so as to ensure that all potential links were made. The data, both audio and text, were reviewed on a regular and constant basis.

The method used to code the data was the constant comparison method. This method is viewed as both comprehensive and systematic (Rapley, 2007). This began as a general coding mechanism which was very inclusive. As the information was re-examined the coding became more detailed and specific. The transcripts were used to assign visual labels. For this reason extra large margins were provided in the transcript as advised by Creswell and Plano Clark (2007). The themes gathered were assessed and linked with what the literature review had uncovered. In this manner it was planned that there would be little scope for personal bias. This also allowed the material to be validated (Rapley, 2007). Another important aspect to the analysis was the use of a research journal. This was used to document themes and became an invaluable tool when it came to putting the analysis together in a cohesive manner.

2.5 LIMITATIONS

It is acknowledged that there were limitations within this research. The research simply focused on one area, namely the perspective of the service user. This excluded the other parties involved such as the volunteers, co-ordinators and other service providers. In this way the review was limited as to the recommendations which were made.

Due to time and volume restrictions it was only feasible to conduct a small scale research of the CONNECT project. There would not have been sufficient time to carry out and analyse in any meaningful detail a greater number than six participants.

Some of the participants asked the volunteer to remain in the room while the interview took place. While this was necessary for the service user to feel comfortable, it does raise questions as to how much freedom the service user felt they had to constructively criticise the CSO.

The regional dialect and tone of voice of the participants proved difficult when transcribing took place. This was overcome by the researcher assisting the transcriptionist and ensuring that the data was recorded appropriately. However, there remained a minimal amount of data which proved impossible to transcribe.

2.6 ETHICAL CONSIDERATIONS

The ethics and research guidelines for the MSW course were consulted. These guidelines include the concepts of respect and dignity for the individuals involved (Department of Applied Social Studies, 2009). In this sense the issue of labelling loneliness became an issue. The CSO advised that not all of the participants were aware that this was their reason for involvement with the project and so the researcher had to be sensitive and respectful of this position.

Informed consent is perhaps one of the most important principles in the code of research ethics. To have informed consent for a study, the researcher should '*explain as fully as possible, and in terms meaningful to participants, what the research is about, who is undertaking it and why it is being undertaken*' (British Sociological Association 2002 cited in Gomm., 2004: 307). A letter to participants informed them about voluntary consent, anonymity, the recording of the interview and process of transcribing it. Interviews were not conducted until such time as full permission had been granted by each participant.

The issue of anonymity was a difficult one. Every attempt was made to disguise the participants' identity. The coordinator of CONNECT read over the analysis chapter prior to publication to ensure anonymity. However, because the organisation and the community in which it is based, are small in size, there remains the slight possibility that the people who work with the CONNECT project may be able to identify participants. The tapes which recorded the interviews will be deleted six months after the interviews took place. The decision to set such a timetable was taken in the undesirable circumstance that this researcher may have to resubmit this piece of work.

The researcher was aware that the participants were a vulnerable group in society. For this reason the CSO required Garda clearance from the researcher. This was provided without hesitation.

Ethical research should be available for scrutiny by others in order to demonstrate that the work held to the '*moral requirement to do research truthfully and that all reasonable precautions were taken to prevent the production of misleading results*' (Gomm, 2004: 300). Many people were

involved in this project in the capacity of advisors. Namely the coordinator of the CONNECT project, the author's tutor and a Science Shop tutor. Additionally, this study will be made available to the academic community as well as the CSO. A report will be published and available on the Science Shop website.

2.7 CONCLUSION

The theoretical perspectives of the research were identified as interpretivism, phenomenological and community social work. These lenses were pivotal in conducting both the primary and secondary research. Secondary research in the form of a literature review took place, which informed the analysis of the data collected. In terms of primary research, it was decided to carry out six semi-structured interviews. Limitations were recognised and ethical considerations raised.

CHAPTER 3: LITERATURE REVIEW

3.1 INTRODUCTION

This chapter will examine the discourse of loneliness and ways of coping with it. The correlation between loneliness and the areas of social interaction, living alone, loss/bereavement and mental health will be discussed. Finally, community responses to alleviating loneliness will be addressed.

3.2 LONELINESS

‘Loneliness is as natural and integral a part of being human as are joy, hunger, and self-actualisation’ (Rokach, 2001: 39). Weiss (1973) describes the experience of loneliness as unpleasant. Loneliness can be experienced by any human being during any part of their life (Lauder et al, 2004 cited in Drennan et al., 2008). To this extent, loneliness is not experienced by one homogenous group, but rather by people in all facets of life. International research illustrates that five to 16 per cent of older people experience loneliness (Drennan et al, 2008). Weiss (1973: 17) defines loneliness as being *‘without some definite needed relationship or set of relationships’*. Weiss (1973) differentiated two aspects of loneliness, emotional loneliness and social loneliness. Social loneliness is related to a lack of community (Weiss, 1973). It occurs when a person feels that they lack social integration (Heylen, 2010). Social isolation is experienced when one lacks a meaningful social network (Pettigrew and Roberts, 2008). However this experience is not always viewed as a negative one as people can enjoy the experience of spending time on their own. Emotional loneliness occurs when an attachment figure is absent (Heylen, 2010). Emotional isolation refers to the lack of another person(s) to whom one can be emotionally attached. This deficit has the effect of preventing social bonding from occurring, an experience which is desired by all humans (Pettigrew and Roberts, 2008). This is viewed as a negative experience. Evidentially, social and emotional loneliness have different causes. Loneliness is experienced when both social and emotional isolation are prevalent and so is deemed to be unpleasant by definition (Forbes, 1996 and Killeen, 1998 cited in Pettigrew and Roberts., 2008).

3.3 FACTORS ASSOCIATED WITH LONELINESS

Age, socio-economic status, social networks, living arrangements, family function and the quality of social relationships all play a part in affecting loneliness in a person (de Jong-Gierveld, 1987). Holmén and Furukawa (2002) and Drennan et al (2008) go on further to suggest that gender, age, health, marital status, friendship, living in a rural area and cognition also feature. Loneliness can

become apparent following circumstantial issues such as bereavement or changing residence or by predisposing individual factors (Cohen, 2000 and Fees et al, 1999 cited in Adams et al., 2004). In this sense, characteristics of older people such as physical health and self-esteem are deemed to be influential (Drennan et al, 1987). Blazer (2002) associates characteristics such as being shy, introverted, lower social risk-taking and poor social skills with being lonely. The most prominent areas associated with loneliness appeared to be social isolation; living alone; loss/bereavement; mental health. This was consistent across the literature including Victor et al (2000), Blazer (2002), Holmén and Furukawa (2002), Weiss (1973), Adams et al (2004) and de Jong-Gierveld et al (2006). In order to gain a deeper understanding of loneliness these issues were investigated.

3.3.1 SOCIAL ISOLATION

Social isolation is viewed as the lack of quality communication or lack of contact with one's family or the wider community (Victor et al, 2000). Victor et al (2000) assert that social isolation and loneliness are linked. Loneliness is viewed as the subjective experience of social isolation (Golden et al, 2009). Heylen (2010) proclaims that there are two schools of thought about the association between social isolation and loneliness. A deficit approach is of the opinion that people need social contacts or else they will experience social isolation (Marangoni and Ickes, 1989 cited in Heylen., 2010). On the other hand, a cognitive approach is of the view that loneliness occurs when there is a discrepancy between actual and desired social relationships (de Jong-Gierveld et al, 2006 cited in Heylen., 2010).

3.3.2 LIVING ALONE

Victor et al (2000) defined living alone as the make-up of a household composition. The frequency of people living alone has increased over the years due to changes in societal structures such as adult children living independently and better health amongst older people in general. People who live alone are deemed to experience loneliness more so than people who live with a partner (Holmén and Furukawa, 2002). However, there is a note of caution in that a person who lives alone is not automatically determined to be lonely. Indeed, Weiss (1973) was of the view that loneliness did not have a direct relationship with being alone, he found a more direct relationship between living alone and *isolation*. Research indicates that the vast majority of people who are isolated do in fact live alone, however, all those that live alone are not necessarily isolated (Victor et al, 2000). Treacy et al (2005) argue that some older people may wish to remain alone and have that choice.

3.3.3 LOSS/BEREAVEMENT

The loss of a partner and poor health are seen as influential factors to loneliness (Perlman, 1988 cited in de Jong-Gierveld., 1998; Holmén and Furukawa, 2002). The older a person's age, the more at risk they are of experiencing the loss of a friend or relative (Holmén and Furukawa, 2002). The loss of a pet, job and home were also associated with loneliness (Victor et al, 2000).

3.3.4 MENTAL HEALTH

Loneliness is seen to have links with depression and is in fact viewed as a risk factor to this and other mental health problems (Adams et al, 2004, Blazer 2002). Mental health problems such as dementia are reported to have a negative influence on the person's level of security towards friendship. This in turn can lead to feelings of loneliness and disassociation from the local community (Holmén and Furukawa, 2002). It is further argued that loneliness results in a reduced wellbeing which may include depression, sleeping problems and poor appetite (de Jong-Gierveld, 1998). In their study, Adams et al (2002) suggested that alleviating loneliness may indirectly alleviate serious mental health issues. Having discussed loneliness and factors associated with it, it is now pertinent to focus on coping strategies.

3.4 COPING STRATEGIES

Emotional attachment to another person, be they a spouse or close friend, can act as a protective factor against loneliness (Drennan et al, 2008). Spirituality and having a pet are viewed as protective factors against both loneliness and isolation (Miller, 1985., Mahalski et al, 1998 and Rogers et al, 1993 cited in Victor et al., 2000). Self-discipline is seen as another means of alleviating loneliness. This approach is endorsed by Daly and O'Connor (1984). This article is quite dated but its seemingly simplistic notions do have resonance when empowerment is taken into consideration. They argue that people can cope with loneliness if they do not engage with self-pity and instead take on prayer, listening to the radio, watching television and reading. Rokach (2001) established three phases to cope with loneliness. The first is acceptance and self-healing. The person experiencing loneliness is encouraged to engage with reflective solitude so as to face the concept as opposed to deny it (Rokach, 2001). This means that the person takes on a positive outlook, attends to their daily responsibilities, develops their personal being and takes on new hobbies and activities that make them feel good. The second phase is transition which allows the person to re-adjust personally and to take account of their life while doing so (Rokach, 2001). This may mean changes in lifestyle and attitude. In order to advance through this phase, professional support may be required. Religion and faith may also be of help, dependent on the individual. The third phase is reaching out to belong. Involvement with social networks and

establishing close relationships are seen as one of the most effective ways of dealing with loneliness (Rokach, 2001). Building up a social network allows for the ability to make new social contacts. This is seen as one of the most socially popular means of coping with loneliness (Rook, 1984 cited in Rokach., 2001). This phase has links with social interaction which is used by the CONNECT project as their means to alleviate loneliness.

3.4.1 SOCIAL INTERACTION

Meaningful social networks and social interactions are perceived to be the most influential supports in alleviating loneliness and social isolation (Holmén and Furukawa, 2002). A reduction in the number of social contacts does not necessarily equate to loneliness. The quality and not the quantity of relationships are viewed as important (Whelan and Vaughan, 1982 cited in Drennan et al., 2008). Loneliness was found to be most prevalent where the quality of social contacts was low (Pinquart and Sorenson, 2001 cited in Adams et al., 2004). However, this was found to be less true in relation to close friends (Mullins and Duggan, 1990 cited in Adams et al., 2004). According to a study by Mullins and Mushel (1992) close friends are more significant to preventing loneliness than family members (cited in Victor et al., 2000). This point was re-emphasised by Adams et al (2004) who found that physical home visits by friends and adult children were seen as important to preventing loneliness. Pettigrew and Roberts (2008) meanwhile assert that the most meaningful contact occurred when social contact was with loved ones, most notably children and grandchildren.

Satisfaction with social contacts is seen to have a relationship with alleviating loneliness (Holmén and Furukawa, 2002). However this contact can be in the form of visits or phone contact and does not necessarily relate to physical contact. Additionally, one strong relationship is seen as more important than a variety of weak relationships (Fahey and Murray, 1994 cited in Drennan et al., 2008). Inappropriate or unwanted social support can be counter-productive and encourage negative outcomes such as dependency as opposed to independence (Victor et al, 2009). Cattán et al (2005) found that home visitation services were concerned with social support to the exclusion of coping strategies for loneliness. Additionally, Quinney (2011) highlights that professionals are not trained to recognise or deal with loneliness. There appears to be a consensus however that *‘a meaningful social network for elderly seems to be a support against loneliness and social isolation’* (Holmén and Furukawa (2002: 270). The means of coping with loneliness can have a direct relationship with government and the policies they publish. Indeed the CONNECT project is dependent upon funding from the HSE amongst others and so national policy is of real influence for the project.

3.5 POLICY

Ireland developed the initiative of community care with the publication of *The Care of the Aged* in 1968. This document put forward the argument that it was more cost effective and beneficial to enable older people to live in their own community than to be admitted to some type of institution (Inter-Departmental Committee on the Care of the Aged cited in National Council for the Elderly., 1994). This led to improvements in services for older people such as the introduction of the home help scheme, development of public health nursing service and increased quality of housing (National Council for the Elderly, 1994). A full chapter is dedicated to older people within the latest government policy document *National Action Plan for Social Inclusion 2007-2016*. This document highlights a goal that older people remain living independently in their own homes and communities for as long as possible (Government of Ireland, 2007). This document believes that older people should be provided with adequate supports and resources to enable this. Specific mention is made to ‘*good quality services within the community*’ (Government of Ireland, 2007: 48).

3.6 COMMUNITY SERVICES

Community action groups are seen as important in alleviating loneliness (Pettigrew and Roberts, 2008). Such groups encourage participation and involvement with others. The range of such groups is vast and diverse, from visitation programmes to quilting groups to contact with pets. However, the appropriateness and accessibility of such services remains unclear (Cattan et al, 2005). Blazer (2002) recommends offering a designated service to people who are lonely. This point is re-emphasized by Adams et al (2004) who point to the benefits of such services in combating loneliness. Drennan et al (2008) argue that methods used to alleviate loneliness need to take into consideration the complexity and the individuality of the experience of loneliness. Indeed, the experience of loneliness varies from person to person (Rokach, 2001). There is also the relevant point that not all people who experience loneliness want help. As such, service providers need to respect this viewpoint (Findlay and Cartwright, 2002 cited in Grenade and Bolby., 2008). Solitary activities such as reading and gardening are seen as beneficial in allowing older people to self-manage their experience of loneliness (Pettigrew and Roberts, 2008).

Grenade and Bolby (2008) are of the view that older people should be provided with services and supports which enable them to sustain their social networks. They highlight community interventions such as self-help support groups, home visiting and transport services. Such examples are seen to enhance people’s social networks (Grenade and Bolby, 2008). There has been little research into whether these interventions work and research that is carried out is

unclear (Grenade and Bolby, 2008). However a number of effective strategies have been devised and include: involving a combination of strategies; involving older people in decision-making; well trained and supported staff and volunteers; using community resources; targeting specific groups. Older people themselves need to have an active role in identifying causes and solutions to loneliness (Savikko et al, 2005 cited in Pettigrew and Roberts., 2008). However it was found in at least one report that older people are rarely involved in any aspect of the service provision (Cattan et al, 2005). A study conducted by Cattan et al (2005) reported that across the United Kingdom, multiple activities were provided by services to alleviate loneliness among older people. It was found that home visiting and social activities were the most frequently listed to alleviate loneliness. This same study highlighted that while the aim of the services were to alleviate loneliness, the target group and participants often appeared generic rather than specific in description (Cattan et al, 2005). This meant that there were no strategies for selecting participants despite the aim of the project to alleviate a specific experience, namely loneliness. It also found that the service was restricted by its number of volunteers as to its catchment area and number of service users (Cattan et al, 2005). The study concluded that services which were specific in nature were effective (Cattan et al, 2005).

3.7 CONCLUSION

According to Adams et al (2004) there has been relatively little written about the effects of loneliness. Indeed much of the literature concerned the definition of loneliness and how it is formed. It was recognised by all authors that it is a subjective experience. With regards community services, a major problem which was highlighted was accessing and recruiting older people who are at risk of loneliness or social isolation (Grenade and Bolby, 2008). Coping strategies were examined, with specific reference to social interaction as this is the method used by the CONNECT project.

CHAPTER 4: PRESENTING THE FINDINGS AND ANALYSING THE DATA

4.1 INTRODUCTION

The information which was gathered during the data collection stage will be presented, analysed and discussed in this forthcoming chapter. The information will be presented from the perspective of the group as a whole, as phenomenology encourages. This means that reference will not be made to individuals. The voices of all respondents will be represented in an equal, consistent, respectful and confidential manner. This chapter will be split into two sections. Part one will present the findings, while part two will analyse and discuss it. The data will be presented drawing from the topic areas and interview questions. The analysis section will group together themes which emerged from the findings and draw on literature to enhance specific points.

PART 1: PRESENTING THE DATA

4.2 REASON FOR INVOLVEMENT

The older people reported that they were made aware of the CONNECT project through ‘*the nurses I’d say*’ and ‘*from the doctor I’d say*’ as well as from people who work in the laundry service. It was rare that personnel from the CONNECT project directly informed the older people about the CONNECT project. One older person described the first time they heard about the CONNECT project: ‘*[He] came to see me. . . I met him on the road when I was walking, that’s how I met him the very first day*’. Reasons, such as living alone and bereavement, were outlined: ‘*Like I’m all on my own here, I’m living alone like. I’m living alone since my brother died*’. At the prospect of becoming involved with CONNECT, the older people appeared divided, stating: ‘*I didn’t mind*’, ‘*I liked it*’ and ‘*I was quite happy about it*’. One respondent remarked,

Oh, he put that question to me, and if I didn’t want him he wouldn’t call. And I told him, call away. He was a couple of years calling, of a Tuesday and he used visit all the old people like. He didn’t call at all with the last twelve months.

The other sub group appeared less enthusiastic, but nevertheless did provide some positive reaction towards aspects of the project: ‘*Well I didn’t look for anyone like. I can manage on my own like. But I don’t mind talking to people. I like talking to people*’. Existing relationships with neighbours was also identified as a reason for not being enthusiastic about the CONNECT project: ‘*Didn’t care. . . the world is calling. . . the neighbours coming to you*’.

4.3 ESTABLISHING IF LONELINESS WAS PART OF THE SERVICE USERS LIFE PRIOR TO CONNECT

Interests were named as important aspects of the older people's lives. 'Gardening, things like that, painting' were identified, as was prayer: 'I prays a lot. I do, I say a lot of prayers'. Taxis were identified as the only means of transport as 'the bus doesn't come by here'. The levels of social contact varied. Services were identified as a support such as 'home help coming to me' and family were named as providing meals for some of this sample. Neighbours were selected as another means of support, 'I have, neighbours are good to me too like. They call in, they help you'. Others stated that they had 'no callers or nothing'. Life before the CONNECT project was described by the men of the group as 'alright because I've a lot of interests' and 'sure it was grand out because we were farming'. However, with reference to employment it was felt that 'they don't want me now, no-one'. Sickness was mentioned as a feature of life by the male participants. One respondent described how they 'got pneumonia then, I had to go to hospital'. Another participant outlined how a family member became hospitalised for a long period. The female participants in this group differed from the men in that they used feelings to describe their life at the time: 'Well twas alright but lonesome I'd say, especially when I buried my sister' and 'well twas lonely, I was after coming out of hospital you see only'.

4.4 WHAT THE SERVICE MEANS TO THE SERVICE USER

Overall it was found that there was a consistency in describing 'talking' as the activity which a volunteer from the CONNECT project engages with: 'Well nothing like, but to talk, sit down and talk like. [She] have the cup of coffee now with me everyday now that she comes.' Respondents said that it was nice to have someone 'chat with them' and described it as a 'bit of company' and a 'way to pass the time'. Filling out forms was also described as an activity which the volunteers have engaged with. There was an acknowledgement that entertainment was organised by the CONNECT project, one participant responded 'I don't go out at all, I don't go to any of their entertainments at all, I prefer a quiet time'. Describing their time spent with the volunteer once a week, the older people said:

'I love it'

'It's alright to be calling, they're trying to do their best with anyone of course that's the way with it then'

'Tis company I suppose, that's all it is'

‘I likes them calling to me, yeah. I do yea. I do be looking forward to them’

‘Surely be to God they could bring in a bucket of turf’

‘Well tis nice to someone come in and have a visit, have a chat like with someone’

‘Like to keep them in the job because there’s so many today got no job’

‘Oh I think it’s a good thing, elderly people living alone would need someone to call to them . . . A lot of them would be isolated kind of’

‘It brightens my life, it does’

‘She likes talking to me’

‘I’d make tea for her, we’d be chatting away’

A more exceptional view was that the older people were not fully aware that talking was the main task of the volunteer until after they became involved with the project:

If you want something out for shopping they wouldn’t do that, they wouldn’t do that at all for you . . . we tried one of them. . . just to chance him, but he done nothing . . . after, we heard that they sit down talking.

There also appeared to be confusion about the different services. When asked about the CONNECT project, one respondent said, *‘I’ve a home help coming in, she does, she tidies my house and my bed and things for me’*.

4.5 THE EFFECTS OF THE PROJECT ON THE LIFE OF THE SERVICE USER

The presence of the CONNECT project was described as *‘a good thing’*. Other respondents stated that they looked forward to the visits, *‘I suppose it has changed [participant’s life] because I look forward to it like, you know’* and *‘well I’m happy about it. I’m happy like that they’re coming’*. There was a rare view, that the time which the volunteer calls at, does not suit the older person. In this particular case it was because it is the same time that the older person usually goes for a walk. The CONNECT project was also said to help set up telephones, personal alarms and communication with friends: *‘It was [name of CONNECT volunteer] that started that like, the emailing on the computer’*.

4.6 SATISFACTION WITH THE CONNECT PROJECT

At the prospect of not having a CONNECT service, there was a commonly held view that this would not happen. Indeed the respondents felt that the volunteers would continue with their visits. One person noted that *'they just sit down, no more, we chat away for the hour they're supposed to come'*. Another respondent felt that *'she'd get another girl in her place, she told me that, she'd get another girl in her place'*. The idea of not having a service from CONNECT was viewed negatively and seen as *'a bad job'*. Some of the following statements were used by the group to describe their feelings:

'But I suppose you'd be a bit lonely if you were accustomed to it like'

'I'd be left alone then we'd say, you know'

'Well it means a lot, it shortens the day for me. I'd be all alone like'

'I'd miss them I suppose'

'I don't know, I'd be kind of lonely after them coming you know'

Other supports were identified in the absence of the CONNECT project such as *'a neighbour might call'*. There was a sense of uncertainty: *'I don't know that, sure I'm living years that way. When I got the pension first there was no-one calling to see me'*. There was also reflection on the activities of the volunteer and a judgement that *'they're trying to do their best with anyone of course, that's the way with it then'*.

All participants experienced a change in personnel of the volunteer assigned to them. One respondent stated that *'[name of new volunteer] calls to see me, since [name of old volunteer] left'*. Another described their lack of contact with the old volunteer, *'he used to call to me every week before [new volunteer's name] came. He didn't call at all with the last twelve months, he's gone with a year'*.

4.7 DEVELOPMENT OF THE CONNECT PROJECT

A consistent reaction to the idea of improving the service was that *'its fine, it tis yeah'*. This was repeatedly noted and the older people did not *'find anything wrong with it'*. When asked specifically about the frequency of the visits, one participant felt that *'once a week suits me'*

grand'. The notion of timing and consistency reappeared as a theme and the CONNECT project was described as '*alright, as long as they come at the appointed time. . I like people to keep their word*'. A more exceptional feeling was that the project should engage with other activities. There was a view that '*there's some people only saying that the people who come to make the chat should be allowed to make them the cup of tea like d'you know*'. Other respondents felt that the service should be expanded further and that '*well they should do shopping or something for you. If you weren't able to go*'. However, the recurrent theme was one of: '*I'm satisfied with it the way it is*'.

PART 2: ANALYSING THE DATA

4.8 EXPERIENCES OF THE CONNECT PROJECT

There was a positive reaction to the project in general. The words used by the older people when describing the time spent with the volunteers appeared compassionate and honest. There was significant reference made to the value of the project throughout the interview process. There was a definite indicator that the participants assessed that the project was consistent. They expected their respective volunteer to show up every week at the allocated time. Additionally, there was an expectation that a new volunteer would be provided if the service was to end. Indeed, consistency is a strong feature within friendship building (Piercy, 2000 cited in Andrews et al., 2003). There was also a strong sense of awareness among this group of older people about the activities of the CONNECT project. The service users were aware that the task of the volunteer is to talk with, and listen to, the older people. Reference was made however to a lack of knowledge that talking was the main activity of the volunteers until after the older person received the service. This could relate to a lack of communication between CONNECT and the older person or between CONNECT and other community service providers. Indeed, it is worth recalling that other service providers were significant in introducing the older person to CONNECT. Additionally, negotiating a suitable time was cited as an issue. In practical terms this meant that the volunteer engaged with the older person at the same time that the older person wished to perform another activity such as going for a walk.

Following each interview, the researcher noted his initial thoughts and observations. It was clear at this point and subsequently throughout the research process that the female participants used the word '*lonely*', while none of the male respondents did. There appeared to be reluctance on the part of the male respondents to engage with their feelings. Lee and Owens (2002) assert that men have more difficulty expressing their emotions and use fewer emotional words, as compared to

women. Furthermore, they found that men often experience similar emotions to women but express it in a different way. This knowledge goes some way to possibly explaining the reason for the gender difference in this study in relation to feelings around loneliness.

A rare, yet significant, theme arose during the course of data collection. It was felt by one respondent that the volunteers were paid for their mileage and that by participating in the project that the older people were employing the volunteers. Friendship is viewed as a relationship of choice which has connotations with the notion of volunteering (Andrews et al, 2003). Allan (1996) argues that volunteering should be a mutually reinforcing relationship with non-financial rewards (cited in Andrews et al., 2003). A finding from this study is that there is a view that the volunteer is gaining from the relationship in terms of money. Therefore, the relationship is potentially not viewed as a friendship by the older person.

The departure of a CONNECT volunteer also came through as a theme in the data collected. This was not portrayed as a negative aspect and appeared to be very much accepted by the participants. In all six of the interviews, the participants said that the original volunteer no longer kept in contact with the older person. McNeil (1995) found that many of the relationships continued beyond the duration of the programme which he assessed (cited in Andrews et al., 2003). It is unclear why the CONNECT project differs. For the older people in this study it means that they have lost a social contact. Further to this point was the recurring negative reaction about the potential withdrawal of the CONNECT project and the expression that it would be missed.

4.9 COMMUNITY SERVICES

Across participants, there were a variety of services which were in contact with the older people. It was found that other service providers were pivotal in raising awareness about, and arranging the first contact between, the CONNECT project and the older people. However there appeared to be some confusion about the role of different services. Views on the home help service and the CONNECT project were intertwined at various stages. This led the researcher to believe that the participants viewed both services as one and the same. This has connotations with the point made earlier, that the service user may not be fully aware of the role of CONNECT. There was a recurring theme that the older people were satisfied with the current status of the CONNECT project and how they receive it. Nevertheless, suggestions were made on improvements. Having a cup of tea or coffee was portrayed as part of the process, and a natural accompaniment to having a chat. However, there was a view that it was part of the policy of the CONNECT project not to allow volunteers to make a cup of tea or coffee. Opinion was raised that the volunteer should be

allowed and that if a person wanted a cup of tea or coffee that the volunteer should not be prevented from making it. Another suggestion was that the volunteers could do some shopping or tasks such as bringing in the turf. Cattan et al (2005) suggest that older people should be involved in the decision-making process of their service. It is therefore important that the views of the older people, through this research, are considered by the CONNECT project which will be made clear through the recommendations in chapter five.

4.10 GENERAL SUPPORT SYSTEM

According to the older people in this sample, they received support from a variety of sources but the most prevalent was that of neighbours. According to Nocon and Pearson (2000) support from neighbours can be particularly important for older people who are lonely and depressed (cited in Andrews et al., 2003). Andrews et al (2003) go on to assert that friendships, including home-visiting, can potentially have a life-enhancing effect on the lives of older people who are isolated and lonely. Indeed, friendships can have the potential to alleviate loneliness and isolation through the qualities they provide such as security and belonging (Andrews et al, 2003). CONNECT facilitated the maintenance of friendships through email.

The CONNECT project itself was viewed positively in providing companionship to the older people. Studies by Gottlieb (2000) and McKibbin et al (1997) illustrate that support groups can provide support in addition to the support obtained from natural networks (cited in Stewart et al., 2001). Indeed, the CONNECT project was seen to benefit anyone living alone because of isolation. This resonates with what Victor et al (2000) discussed in chapter three. According to Squire (2002), having someone to talk to can buffer a person from circumstances such as isolation and bereavement. The participants of this study appeared to experience bereavement prior to their involvement with the CONNECT project. Social isolation can lead to loneliness, depression and early institutionalisation in older people (Eloranta et al, 2008). Among participants, there was some element of social support between older adults in the community. However, the level of such support and, by inference, social isolation cannot be comprehensively assessed. Family members provided meals to some within this group while others did not have any family members who appeared active within their life. Transport was another issue which was raised. There was a reliance on taxis and a dependency on the rural or community bus scheme which determined the frequency of visits to town. According to Lymbery (2005) physical isolation can negatively impact on social isolation. Indeed, living in a rural community and lack of transport could be viewed as examples of such physical isolation. It is difficult to assess the

role of CONNECT in this regard, but there may be some potential for CONNECT to consider reconfiguring its services to meet some of these needs.

4.11 CONCLUSION

The process of analysing the data was a difficult one so as to give justice to the older people represented in this sample. Every effort was taken to ensure that the voices of all respondents were heard. The findings were presented firstly so that the reader had the opportunity to engage with the spoken words of the service users. Consideration was then given to the literature and the response of the researcher.

CHAPTER 5: FINAL WORDS

PART 1 - CONCLUSIONS AND RECOMMENDATIONS

5.1 CONCLUSIONS

The information gathered from this piece of research illustrates the complexity which surrounds loneliness. It was found through an extensive literature review that loneliness is comprised of two aspects; social loneliness and emotional loneliness. This piece of research has attempted to investigate the issue but the focus was primarily on reviewing a service with the aim of alleviating loneliness and not on the older person's experience of loneliness per se. The factors of living alone, social isolation and loss/bereavement subsequently came through the primary research conducted though to varying and questionable degrees. There were no direct questions on any of these factors; therefore there can be no definite conclusions drawn as to whether or not these are even contributory factors of loneliness for this sample. Coping strategies were analysed and the importance of empowering an older person to deal with loneliness was highlighted. Social interaction can potentially have positive impacts on a person who experiences social loneliness. The CONNECT project was viewed by this sample in a positive light. There was much praise for the work carried out by the project and for the time spent with individual older people.

5.2 HAS THE CONNECT PROJECT ALLEVIATED LONELINESS AMONGST ITS SERVICE USERS?

The issue of whether loneliness has been alleviated by the project is uncertain. The researcher decided not to ask a direct question about loneliness under the direction of the CSO, given the sensitivity of the matter. The concept of loneliness was examined in detail in chapter two as this is the rationale for the CONNECT project. This process allowed the researcher to understand the concept of this complex phenomenon. One could arguably conclude that the female participants of the CONNECT project do feel that the project alleviates loneliness because they said so directly. However, the feelings of the male participants are less clear. Murphy and Kupshik (1992) argue that most people can conceivably be described as a little lonely because most people experience some form of social deficiency. They further argue that people are restricted from disclosing that they feel lonely because of norms within society. That is to say that loneliness is a taboo area for a lot of people. Research conducted by Quinney (2011) concluded similarly, noting that 30% of respondents felt too embarrassed to admit to being lonely. This illustrates the fact that loneliness is a complex issue and one cannot take for granted that a person who simply does not

name their feelings does not encounter such feelings. Quinney (2011) asserts that loneliness is very prevalent within society but the issue requires further investigation due to its complex nature. It was not within the capabilities of this researcher to assess if loneliness has actually been alleviated. It can be concluded, however, that the CONNECT project is considered a source of support to the older people and the withdrawal of the service would undoubtedly leave the older people in a more vulnerable position, more socially isolated, and quite possibly lonelier.

5.3 ARE THE SERVICE USERS SATISFIED WITH THE SERVICE THAT THEY RECEIVE?

There was a strong feeling of satisfaction among participants towards the CONNECT project. Participants felt that the project was a good service and that they were happy with its structure. Indeed, McNeil (1995) asserts that non-family social interaction positively affects an older person's sense of wellbeing and happiness (cited in Andrews et al., 2003). There was a sense that this sample expected and relied on their volunteer to turn up every week. Examples were provided of how volunteers helped older people to communicate with friends and fill out forms. These were viewed as positive benefits in addition to the main task of talking and listening.

5.4 RECOMMENDATIONS

This section represents the views of the older people in relation to changes and improvements they would make to the CONNECT project. These have been broken down as follows:

1. Communication featured as a major theme in terms of improvements. The older people highlighted a lack of knowledge about the existence and scope of the service. In this respect, it should be more clearly outlined to the older people what exactly the service entails. This needs to occur as soon as the person comes in contact with the service so that they are fully aware of the objectives of the project and the limitations which exist. The CONNECT project should continue to develop this service while maintaining strong communication with the service users.
2. The CONNECT project should, as much as is reasonably possible, facilitate a visitation at a time that suits the older person. Greater flexibility in negotiation between the volunteer and the older person could address this. Regular reviews of the agreements would ensure that both parties are accommodated.
3. It became clear during the course of primary research that the experience of having a cup of tea with the volunteer was a very natural accompaniment to a chat. Indeed, this is an

experience which most Irish people enjoy. The service users strongly recommended reviewing the policy of not allowing volunteers making tea for the older person. The medium of a cup of tea would also ensure that the service remains informal. Clear limitations should be communicated to the older person so that there are no unreasonable expectations of a volunteer.

4. It was recommended by the service users that the expansion of the service to include daily chores should be considered. It is clear from the policy of the CONNECT project that this is not part of their brief. The CONNECT project should therefore aim to clearly communicate their brief to the service users. Additionally, information should be supplied to the older people on how to access such additional supports, such as home help, if this is a need which is highlighted.
5. Research has emphasised a lack of training in the area of loneliness. As such it is recommended that the CONNECT project ensure that volunteers are educated on loneliness. This piece of research illustrated a difference between service users on their perceptions of loneliness. Therefore, volunteers should be trained that some service users may not recognise their feelings as lonely but that loneliness may still be prevalent in their lives.
6. A turnover of volunteers was experienced by all participants in the interviews. It is recognised that personal circumstances may change. However the CONNECT project could review the handover process if a volunteer leaves the service. The withdrawal of a volunteer should be well communicated with a service user and the end of contact with this volunteer should be clearly outlined.

BIBLIOGRAPHY

Adams, K.B. Sanders, S. and Auth, E.A. (2004) 'Loneliness and Depression in Independent Living Retirement Communities: Risk and Resilience Factors', *Ageing and Mental Health*, 8 (6), pp. 475-485.

Anderson, L. (1985) 'Intervention Against Loneliness in a Group of Elderly Women: An Impact Evaluation', *Social Science and Medicine*, 20 (4), pp. 355-364.

Andrews, G.J. Gavin, N. Begley, S. and Brodie, D. (2003) 'Assisting Friendships, Combating Loneliness: Users' Views on a 'Befriending' Scheme', *Ageing and Society*, 23 (3), pp. 349-362.

Blazer, D.G. (2002) 'Self-efficacy and Depression in Late Life: A Primary Prevention Proposal', *Ageing and Mental Health*, 6 (4), pp. 315-324.

Bouman, A. Rossum, E.V. Nelemans, P. Kempen, G.I.J.M. and Knipschild, P. (2008) 'Effects of Intensive Home Visiting Programs for Older People with Poor Health Status: A Systematic Review', *BMC Health Service Research*, 8 (74), pp. 74-85.

Bryman, A. (2008) *Social Research Methods*, Oxford, Oxford University Press.

Carey, M. (2009) *The Social Work Dissertation: Using Small-Scale Qualitative Methodology*, Berkshire, Open University Press.

Cattan, M. White, M. Learmonth, A. and Bond, J. (2005) 'Are Services and Activities for Socially Isolated and Lonely Older People Accessible, Equitable, and Inclusive?', *Research, Policy and Planning*, 23 (3), pp. 149-164.

Centre for Home Care Policy and Research (2005) *Establishing a National Framework for Geriatric Home Care Excellence* [Online], New York, CHAMP, Available from: <http://champhomecare.org/static/RPGExecSummary-Final.pdf> [Accessed: 4th January 2011].

Corby, B. (2006) *Applying Research in Social Work Practice*, Berkshire, Open University Press.

Creswell, J.W. (2007) *Qualitative Inquiry and Research Design: Choosing Among Five Approaches*, London, Sage Publications.

Creswell, J.W. and Plano Clark, V.L. (2007) *Designing and Conducting Mixed Methods Research*, London, Sage Publications.

Central Statics Office (2006) *2006 Census of Population – Volume 2 – Ages and Marital Status* [Online], Dublin, Central Statistics Office, Available from: http://www.cso.ie/newsevents/pr_census2006vol2.htm [Accessed: 4th January 2011].

Daly, M. and O'Connor, J. (1984) *The World of the Elderly: The Rural Experience*, Dublin, The National Council for the Aged.

D'Cruz, H. and Jones, M. (2004) *Social Work Research: Ethical and Political Contexts*, London, Sage Publications Ltd.

de Jong-Gierveld, (1987) 'Developing and Testing a Model of Loneliness', *Journal of Personal and Social Psychology*, 53 (1), pp. 119-128.

de Jong-Gierveld, (1998) 'A Review of Loneliness: Concept and Definitions, Determinants and Consequences', *Reviews in Clinical Gerontology*, 8 (1), pp. 73-80.

Denzin, N.K. & Lincoln, Y.S. (1998) 'Introduction: Entering the Field of Qualitative Research', in Denzin, N.K. and Lincoln, Y.S. (eds.), *Strategies of Qualitative Inquiry*, London, Sage Publications Ltd.

Department of Applies Social Studies (2009) *Social Work Course Handbook: 2009-2011*, Cork, University College Cork.

Drennan, J. Treacy, M. Butler, M. Byrne, A. Fealy, G. Frazer, K. and Irving, K. (2008) 'The Experience of Social and Emotional Loneliness Among Older People in Ireland', *Ageing and Society*, 28 (8), pp. 1113-1132.

EBSCO (2011) *Choose Databases* [Online], Ipswich, EBSCO, Available from: <http://0-web.ebscohost.com.library.ucc.ie/ehost/selectdb?hid=14&sid=fff45715-9398-40fe-baa8-dda18fcac5e2%40sessionmgr4&vid=1> [Accessed: 18th February 2011].

Eloranta, S. Routasalo, P. and Arve, S. (2008) 'Personal Resources Supporting Living at Home as Described by Older Home Care Clients', *International Journal of Nursing Practice*, 14 (4), pp. 308-314.

Flick, U. (2009) *An Introduction to Qualitative Research* (4th ed.), London, Sage Publications Ltd.

Gallagher, C. (2008) *The Community Life of Older People in Ireland*, Oxford, Peter Lang.

Golden, J. Conroy, R.M. Bruce, I. Denihan, A. Greene, E. Kirby, M. and Lawlor, B.A. (2009) 'Loneliness, Social Support Networks, Mood and Wellbeing in Community-Dwelling Elderly', *International Journal of Geriatric Psychiatry*, 24 (7), pp. 694-700.

Gomm, R. (2004) *Social Research Methodology: A Critical Introduction*, Hampshire, Palgrave Macmillan.

Government of Ireland (2007) *National Action Plan for Social Inclusion 2007-2016*, Dublin, The Stationery Office.

Gray, D.E. (2004) *Doing Research in the Real World*, London, Sage Publications Ltd.

Grenade, L. and Bolby, D. (2008) 'Social Isolation and Loneliness Among Older People: Issues and Future Challenges in Community and Residential Settings', *Australian Health Review*, 32 (3), pp. 468-478.

Heylen, L. (2010) 'The Older, the Lonelier? Risk Factors for Social Loneliness in Old Age', *Ageing and Society*, 30 (7), pp. 1177-1196.

Holmén, K. and Furukawa, H. (2002) 'Loneliness, Health and Social Network Among Elderly People: A Follow up Study', *Archives of Gerontology and Geriatrics*, 35 (3), pp. 261-274.

HSE (2010) *Protecting Older People from Abuse* [Online], Dublin, Health Service Executive, Available from: <http://www.hse.ie/go/elderabuse> [Accessed: 3rd January 2011].

Lee, C. and Owens, R.G. (2002) *The Psychology of Men's Health*, Berkshire, Open University Press.

Lundstrom, F. And Mc Keown, K. (1994) *Home Help Services for Elderly People in Ireland*, Dublin, National Council for the Elderly.

Lymbery, M. (2005) *Social Work with Older People: Context, Policy and Practice*, London, Sage Publications Ltd.

Maine Valley Family Centre (1999) *Mission Statement*, Castlemaine, Maine Valley Family Centre.

Matthews, B. and Ross, L. (2010) *Research Methods: A Practical Guide for the Social Sciences*, Essex, England, Pearson Education Ltd.

Murphy, P.M. and Kupshik, G.A. (1992) *Loneliness, Stress and Well-Being*, London, Tavistock/Routledge.

National Council for the Elderly (1994) *Older People in Ireland: Social Problem or Human Resource? A Submission to the National Economic and Social Forum*, Dublin, National Council for the Elderly.

National Council of Ageing and Older People (2005) *Perceptions of Ageism in Health and Social Services in Ireland* [Online], Dublin, National Council of Ageing and Older People, Available from: http://www.ncaop.ie/publications/research/reports/85_Ageism.pdf [Accessed: 4th January 2011].

Owen, R.E. Choo, P.W.J. Lee, K.S. and Jayaratnam, F.J. (1990) 'Geriatric Medicine: The Multidisciplinary Approach', *Singapore Medical Journal*, 31 (6), pp. 621-623.

Pettigrew, S. and Roberts, M. (2008) 'Addressing Loneliness in Later Life', *Aging and Mental Health*, 12 (3), pp. 302-309.

Popple, K. (1995) *Analysing Community Work: Its Theory and Practice*, Buckingham, Open University Press.

Punch K.F. (1998) *Introduction to Social Research*, London, Sage Publications Ltd.

Quinney, L. (2011) 'Tackling Loneliness to Avert a Downward Spiral', *Community Care* [Online], 10/02/2011, pp. 32-33. Available from: <http://www.communitycare.co.uk/Articles/2011/02/04/116227/research-and-evidence-social-isolation.htm?printerfriendly=true> [Accessed: 1st March 2011].

Rapley, T. (2007) *Doing Conversation, Discourse and Document Analysis*, London, Sage Publications Ltd.

Richie, J. and Lewis, J. (eds.) *Qualitative Research Practice: A Guide for Social Science Students and Researchers*, London, Sage Publications Ltd.

Ritchie, J. Lewis, J. and Elam, G. (2003) 'Designing and Selecting Samples', in Ritchie, J. and Lewis, J. (eds.) *Qualitative Research Practice: A Guide for Social Science Students and Researchers*, London, Sage Publications Ltd.

Rowan, N. Faul, A.C. Birkenmaier, J. and Damron-Rodriguez, J. (2011) 'Social Work Knowledge of Community-Based Services for Older Adults: An Educational Model for Social Work Students', *Journal of Gerontological Social Work*, 54 (2), pp. 189-202.

Rowe, J. W. and Kahn, R. L. (1997) 'Successful Ageing', *The Gerontologist*, 37 (4), pp. 433-440.

Rokach, A. (2001) 'Surviving and Coping with Loneliness', *The Journal of Psychology*, 124 (1), pp. 39-54.

Routasalo, P.E. Savokko, N. Tilvis, R.S. Strandberg, T.E. and Pitkala, K.H. (2006) 'Social Contacts and their Relationship to Loneliness Among Aged People: A Population-Based Study', *Gerontology*, 52 (3), pp. 181-187.

Sarantakos, S. (2004) *Social Research*, Basingstoke, Palgrave Macmillan.

SIM Group (2007) *A Better Life for Older People in Sligo* [Online], Sligo, SIM Group, Available from: <http://www.sligocdb.ie/media/FinalAmendedreportOlder%20Persons.pdf> [Accessed: 4th January 2011].

Snape, D. and Spencer, L. (2003) 'The foundations of Qualitative Research', in Ritchie, J. and Lewis, J. (eds.), *Qualitative Research Practice: A Guide to Social Science Students and Researchers*, London, Sage Publications Ltd.

Social Workers Registration Board (2011) *Code of Professional Conduct and Ethics for Social Workers Bye-Law* [Online], Dublin, CORU, Available from: <http://www.coru.ie/media-events/consultations/Code-of-Professional-Conduct-Consultation/Press-release-on-Code-of-Conduct-for-Social-Workers/> [Accessed: 20th February 2011].

Squire, A. (2002) *Health and Well-Being for Older People: Foundations for Practice*, Edinburgh, Bailliere Tindall.

Stepney, P. and Popple, K. (2008) *Social Work and the Community: A Critical Context for Practice*, Hampshire, Palgrave Macmillan.

Stewart, M. Craig, D. MacPherson, K. and Alexander, S. (2001) 'Promoting Positive Affect and Diminishing Loneliness of Widowed Seniors through a Support Intervention', *Public Health Nursing*, 18 (1), pp. 54-63.

Stuck, A.E. Egger, M. Hammer, A. Minder, C.E. and Beck, J.C. (2007) 'Home Visits to Prevent Nursing Home Admission and Functional Decline in Elderly People: Systematic Review and Meta-regression Analysis', *The Journal of the American Medical Association*, 287 (8), pp. 1022-1028.

The Living Knowledge Network (2011) *What is a Science Shop?* [Online], Bonn, Germany, The Living Knowledge Network, Available from: <http://www.scienceshops.org/new%20web-content/framesets/fs-about.html> [Accessed: June 10th 2011].

Tijhuis, M.A.R. de Jong-Gierveld, J. Feskens, J.M. and Kromhout, D. 'Challenges in and Factors Related to Loneliness in Older Men. The Zutphen Elderly Study', *Age and Ageing*, 28 (5), pp. 491-495.

Treacy, P. Butler, M. Byrne, A. Drennan, J. Fealy, G. Frazer, K. and Irving, K. (2005) *Loneliness and Social Isolation Among Older Irish People*, Report Number: 84, Dublin, National Council on Ageing and Older People.

Urbaniak, G.C. and Plous, S. (2011) *Research Randomizer* [Online], Connecticut, Social Psychology Network, Available at: <http://www.randomizer.org/form.htm> [Accessed on 07/03/2011].

Victor, C. Scambler, S. Bond, J. and Bowling, A. (2000) 'Being Alone in Later Life: Loneliness, Social Isolation and Living Alone', *Reviews in Clinical Gerontology*, 10 (4), pp. 407-417.

Victor, C. Scambler, S. and Bond, J. (2009) *The Social World of Older People: Understanding Loneliness and Social Isolation in Later Life*, Berkshire, Open University Press.

Victor, C. and Scharf, T. (2005) 'Social Isolation and Loneliness', In Walker, A. (ed.), *Understanding Quality of Life in Old Age*, Berkshire, Open University Press.

Weiss, R. (1973) *Loneliness: The Experience of Social and Emotional Loneliness*, Cambridge, MIT Press.

WHO (2003) *The World Health Report 2003: Shaping the future* [Online], Geneva, World Health Organisation, Available from: <http://www.who.int/whr/2003/en/> [Accessed: 15th January 2011].

WHO (2011) *Definition of an Older or Elderly Person* [Online], Geneva, World Health Organisation, Available from: <http://www.who.int/healthinfo/survey/ageingdefnolder/en/index.html> [Accessed: 3rd January 2011].

APPENDIX 1

Woodbrook
15 Evergreen Street
Cork
10/02/11

To whom it may concern,

My name is Michael and I am a student at University College Cork where I am in my final year of my Masters degree in Social Work. Liz Fenton approached University College Cork to carry out research on the CONNECT (home visitation) project and I have been assigned to carry this out. Liz has informed me that you participate in this project and I hope that you will take part in the research I will carry out. The aim of the research is to review the CONNECT (home visitation) project and try to find out how it has affected you. The research will be used to produce a report for the CONNECT (Home Visitation) project. I will also be basing my final year dissertation on it and it may be used in future presentations and publications.

I would like to review the CONNECT (Home Visitation) project by interviewing you and other participants of the project, five to six people in total. This study will involve me interviewing you for approximately 30 minutes to an hour maximum, asking you a number of questions about your experiences of the CONNECT (Home Visitation) project. Please be assured that your replies will be made anonymous. Participation in this study is entirely voluntary.

The following consent form is required to be signed prior to me beginning my study. If you are willing to participate in this study could you please post the consent form by Monday 28th February 2011, using the self addressed envelope provided. I will be in contact with you once I receive your letter.

Thank you for your time and please contact me should you wish to discuss any detail of the project or the consent form. My contact details are at the end of this letter.

Yours sincerely,

Michael Quirke

Telephone: 087-9013095
Email: 107220144@umail.ucc.ie

APPENDIX 2

Consent Form

Title of report: A review of the CONNECT home visitation project from the perspective of the service user.

I.....agree to participate in Michael Quirke's research study.

The purpose and nature of the study has been explained to me in writing.

I am participating voluntarily.

I give permission for my interview with Michael Quirke to be tape-recorded. This will be transcribed and will be kept for a period of six months after the interview takes place, at which time the data will be deleted. The CONNECT home visitation service will not see this transcript at any stage and this will only be seen by Michael Quirke and his supervisor at University College Cork.

I understand that I can withdraw from the study at any time, whether before it starts or while I am participating.

I understand that I can withdraw permission to use the data within two weeks of the interview, in which case the material will be deleted.

I understand that my name will not be used and every effort will be made to disguise my identity.

I understand that data from my interview will be used in a report to the CONNECT (home visitation) project and future publications and presentations, including Michael Quirke's final year dissertation.

Signed.....

Date.....

APPENDIX 3

Semi Structured interview with participant of the CONNECT Home Visitation Service

- Begin recording
 - Thanks for participation
 - Explanation of the consent letter
 - Ensure person is comfortable with participation
 - Brief outline of number of questions
 - Begin asking questions
-

Topic: Reason for involvement

Question 1

Can you tell me how you became involved with the home visitation service?

Probing questions

- What led you to become involved?

Topic: Interpretation of what the service means to the service user

Satisfaction with the service

Question 2

In your own words, how would you describe the service and what it means to you?

Probing questions

- What is your understanding of the service?
- What would you say are the good parts?
- What are the not so good parts?

Topic: To establish if loneliness was a part of the service users life prior to CONNECT**Question 3**

Can you describe to me what life was like for you before your involvement with the service?

Probing questions

- Can you describe a typical day before your involvement?
- Can you tell me about your social life and the people you met?

Topic: The effects of the project on the life of the service user

To establish if loneliness has been alleviated

Question 4

What has changed in your life now that you are part of the service?

Probing questions

- What does a typical day look like for you now?
- What is your social life like now?

Topic: Satisfaction with the service

To find out if loneliness is a factor

Question 5

Now this next question is not going to happen, but I am wondering what would it be like for you if the project stopped tomorrow?

Probing question

- In what way would this affect your life?
- How would you feel?

Topic: Development of the service**Question 6**

What changes would you like to see made to the service?

Probing questions

- What improvements would you make?
 - If you could change anything about the service what would it be?
-

Ask if anything else that the person wishes to say about the CONNECT project, or their involvement or about anything else that might have come up today.

Thank the person for their involvement.

APPENDIX 4

Consent Form

I give permission to Michael Quirke to employ someone to transcribe the recorded interview which I will take part in.

I understand that this third party will sign a confidentiality document.

Signed_____

Date_____

APPENDIX 5

Transcribers Confidentiality Agreement

Title of Study: A review of the CONNECT home visitation project from the perspective of the service user.

Researcher: Michael Quirke

As a transcribing typist of this research study, I understand that I will be hearing tapes of confidential interviews. The information on these tapes have been revealed by research participants who participated in this project on good faith that their interviews would remain strictly confidential. I understand that I have a responsibility to honour this confidentiality agreement.

I hereby agree not to share any information on these tapes with anyone except the researcher of this project. Any violation of this agreement would constitute a serious breach of ethical standards, and I pledge not to do so.

Michelle Moran

Date