

Course: BSc (Hons) Health and Social Care

Module: Independent Project (BMHP6020_BIRM)

Component 1: Element 1 - Project Proposal

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My Project Title:

The Impact of Loneliness and Social Isolation on the Mental Health and Wellbeing of Older Adults in the UK

1) Aim

The aim of this research is to investigate how loneliness and social isolation influence the mental health and wellbeing of older adults in the UK, while evaluating current interventions and strategies designed to address this growing issue within health and social care.

2) Objectives

- Define and examine the prevalence and risk factors of loneliness and social isolation among older adults in the UK.
- Analyse the effects of loneliness and social isolation on psychological and physical health outcomes, including depression, anxiety, and dementia risk.
- Evaluate current policies, healthcare initiatives, and community-based interventions that aim to reduce loneliness in older adults.
- Provide recommendations for improving support systems and long-term strategies to address loneliness among the elderly population.

3) Background/Rationale

The number of older people in the UK is steadily rising, and by 2040 almost one in four people will be over 65 (ONS, 2021). With this shift comes new challenges, and loneliness and social isolation have become major concerns within health and social care. Studies show that loneliness doesn't just make people feel unhappy — it can increase the risk of depression, anxiety, dementia, and even early death (Holt-Lunstad et al., 2017). Despite greater awareness in recent years, many older adults still struggle to get the support they need, whether because of mobility issues, lack of transport, or being excluded from the digital world. Organisations like Age UK and the NHS have developed initiatives to tackle the problem, such as Age UK's "Call in Time" telephone befriending service, which pairs older people with volunteers for weekly social calls (Cattan et al., 2009; Devine, 2014) and volunteer befriending schemes more broadly, which have been shown to improve health and wellbeing for older adults (Fakoya et al., 2021; Gardiner & Barnes, 2016). But the fact that

loneliness remains widespread suggests these efforts are not always effective. This research is important because it will explore both the real impact of loneliness on older adults and how current strategies could be improved to better support wellbeing in later life.

4) Methods

This study will use secondary research by reviewing existing academic literature, government reports, and policy documents. Sources will be selected based on relevance, and credibility focusing on UK-based studies and data from 2015 onwards. The analysis will include a thematic review to recognize shared results and deficiencies across studies, along with comparisons of the effectiveness of interventions. Ethical aspects will involve correct citation through Harvard referencing, truthful portrayal of authors' concepts, and the prevention of plagiarism

5) Resources

- University online library (Primo, EBSCO, ScienceDirect)
- Google Scholar
- Age UK, NHS Digital, ONS websites
- Microsoft Word/Excel for organisation and analysis

6) Timescale

Week 1:

- Finalise research aim, objectives, and question.
- Meet with lecturer for feedback on proposal.
- Create a project timeline (using Excel).

Week 2:

- Identify main databases and start initial searches (Age UK, NHS Digital, ONS, etc.).
- Develop inclusion/exclusion criteria (e.g., UK, 2015-present, older adults).

Week 3:

- Build a literature tracking spreadsheet (title, author, date, relevance).
- Collect 10–15 key sources to start core reading.

Week 4–5:

- Deep reading: focus on definitions, prevalence, and risk factors.
- Summarise findings (quotes, key data, critical points).

Week 6–7:

- Research health impacts — depression, anxiety, dementia links.
- Identify gaps or contradictions between studies.

Week 8–9:

- Focus on interventions — Age UK, NHS, community projects.
- Evaluate effectiveness and outcomes.

Week 10:

- Draft a rough structure for literature review (themes/subthemes).
- Update reference list and ensure all sources are cited correctly.

Week 11–12:

- Group literature by theme (causes, impacts, interventions, policies).
- Identify key patterns, trends, and gaps.

Week 13–14:

- Begin writing your analysis section — integrate evidence and critique.
- Reflect on how findings relate to your aim/objectives.

Week 15:

- Review and refine your thematic map.
- Meet with tutor for feedback on progress.

Week 16–18:

- Write **Introduction** (background, rationale, aim, objectives).
- Write **Literature Review** (thematic sections).

Week 19–20:

- Write **Analysis/Discussion** section (evaluate interventions, identify gaps).

Week 21:

- Write **Conclusion & Recommendations**.
- Ensure alignment with aim/objectives.

Phase 5: Revision & Editing (Weeks 22–25)**Week 22:**

- First full draft completed.
- Take a short break before re-reading for clarity.

Week 23–24:

- Edit for flow, structure, and argument strength.
- Check referencing (Harvard style), tables, figures, appendices.

Week 25:

- Proofread grammar, formatting, and word count.
- Ask for peer/tutor review.

Week 26:

- Incorporate feedback and finalise document.
- Double-check Turnitin originality report.

Week 27:

- Submit final dissertation/report.
- Write short reflection (what you learned, skills gained).

7) Self-reflection as researcher

I bring strengths in critical thinking and structured organisation, which will support the analysis of diverse literature. However, I may face challenges in narrowing down a large amount of research material. This project will help me strengthen skills in critical evaluation, academic writing, and time management, preparing me for future academic and professional work.

References (Harvard style)

Age UK, 2021. *All the Lonely People: Loneliness in Later Life*. London: Age UK.

Cattan, M., Kime, N. and Bagnall, A.M., 2009. *The use of telephone befriending in low level support for socially isolated older people—an evaluation*. *Health & Social Care in the Community*, 19(2), pp.198–206.

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Fakoya, O.A., McCorry, N.K. and Donnelly, M., 2021. *How do befriending interventions alleviate loneliness and social isolation among older people? A realist evaluation study*. *BMC Public Health*, 21(1), p.1517.

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Holt-Lunstad, J., 2017. *The potential public health relevance of social isolation and loneliness: prevalence, epidemiology, and risk factors*. *Public Policy & Aging Report*, 27(4), pp.127–130.

Holt-Lunstad, J., Smith, T.B., Baker, M., Harris, T. and Stephenson, D., 2017. *Loneliness and social isolation as risk factors for mortality: A meta-analytic review*. *Perspectives on Psychological Science*, 10(2), pp.227–237.

NHS England, 2019. *The NHS Long Term Plan*. London: NHS England.

Office for National Statistics (ONS), 2021. *Living longer: implications of an ageing population*. [online] Available at: <https://www.ons.gov.uk/peoplepopulationandcommunity> [Accessed 5 Oct. 2025].

Victor, C.R. and Yang, K., 2012. *The prevalence of loneliness among adults: a case study of the United Kingdom*. *Journal of Psychology*, 146(1–2), pp.85–104.