Exploration of Loneliness Among Black Older Adults: A Scoping Review Protocol

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ABSTRACT

Background: Loneliness is a public and social issue affecting older adults, but in varying degrees across ethnic groups. Black older adults (BOAs) are more prone to loneliness because they have unique and accumulated factors (e.g., low socioeconomic status, high number of chronic conditions) that predispose them to loneliness. This review aims to describe the extent and the nature of research activities on loneliness and identify the contributory factors to loneliness among BOAs as presented in the global literature.

Methods/Design: We will follow the five steps of Arksey and O'Malley's (2005) framework to search multiple databases from inception till June 2021. MeSH terms and keywords, e.g., "older adults", "blacks", and "loneliness", will be adopted for several databases, including CINHAL, Ageline, PsychINFO, Cochrane Central Registers of Control Trials, PubMed, Web of Science, Social Science Abstract. Multiple reviewers will independently screen citations (title/abstract and full text) and extract data using predefined inclusion and exclusion criteria. "Best fit" framework synthesis using the six social provisions of Weiss' framework as a priori themes will guide the data analysis.

Discussion: This review will inform policy development around contributory factors for loneliness among BOAs and the most relevant issues on loneliness related to BOAs.

Keywords: aging, older adults, blacks, loneliness, scoping review

1. Background

Loneliness is a prevalent social and public health issue affecting older adults across the globe today, thus making it an integral aspect of the human condition (Victor et al., 2021). Loneliness is defined differently across the literature. One of the most popular proponents describes loneliness as negative and undesirable subjective feelings caused by unmet social and intimate needs (Peplau & Perlman, 1982). Loneliness has been approached as a multi-dimensional concept comprising of social (a lack of involvement or engagement with others) and emotional (lack of attachment or an intimate relationship) aspects (Weiss, 1973). Growing evidence showed that loneliness is associated with many health outcomes, including increased suicide and mortality (Holt-Lunstad et al., 2015), increased cortisol and systolic blood pressure (Hawkley et al., 2010), decline in cognition, and worsening immune system (Ong et al., 2016). Furthermore, loneliness is associated with mental health conditions, such as depression (Taylor & Nguyen, 2020) and dementia (Holwerda et al., 2014).

The incidence of loneliness among older adults (60+) in the UK, US, and Canada ranges from 12% to 43.1% (Finlay & Kobayashi, 2018; Savage et al., 2020; Victor & Bowling, 2012). Other research has also found a relatively high prevalence of loneliness among some ethnic groups, as compared to others. For instance, in an exploratory study on loneliness among ethnic minority elders aged 65+ in Great Britain, the prevalence of loneliness was shown to be highest among participants from Africa (50%), China (40%), and the Caribbean (24%) (Victor et al., 2012). Recently, Victor et al. (2021) reported that the prevalence of loneliness among the ethnic minority in the UK has dropped: Black Africa reported (11%), China (25%), and Black Caribbean (16%). The discrepancy may reflect the pilot method used in the initial study and the larger sample size used for the most recent article (1206 versus the previous 469 participants). In the US, among Blacks, Whites, and other racial groups, loneliness ranges between 16%, 35%, and 45%, respectively (Finlay & Kobayashi, 2018). This inconsistency in the prevalence of loneliness among ethnic minorities, especially black older adults, highlights the need to conduct a review on loneliness and its related factors among black older adults.

Research and reviews (e.g., scoping, integrated and systematic reviews) on loneliness among older adults have proliferated to the extent that researchers have advanced to conducting "rapid reviews" of reviews on loneliness (Boulton et al., 2020). Recent reviews primarily focus on interventions to reduce loneliness among older adults in the community (Fakoya et al., 2020; Gardiner et al., 2018; O'Rourke et al., 2018) and in long term care facilities (Quan et al., 2020), defining the concepts of loneliness, social isolation and health (Courtin & Knapp, 2017; Malcolm et al., 2019), risk factors for loneliness in older adults (Dahlberg et al., 2021) and public health consequences of loneliness (Leigh-Hunt et al., 2017).

Few reviews have focused on loneliness among ethnic minorities (Johnson et al., 2019; Shorey & Chan, 2021). While Johnson et al. (2019) included 17 articles in a scoping review that explored loneliness and social loneliness among immigrants and refugee seniors (e.g., South Asian) in Canada, Shorey and Chan (2021) included 14 articles in a qualitative systematic that explored the experiences and needs of Asian older adults who are socially isolated and lonely. Both reviews described similar themes: association with older adults' well-being, loss of social support, dealing with social isolation and loneliness, unique experiences of Asian older adults in western countries, and wish list of older adults (Shorey & Chan, 2021), and loss, living arrangement, dependency, barriers and challenges and family conflict (Johnson et al., 2019). These reviews have highlighted the cultural and contextual factors/experiences that shape or influence loneliness among ethnic groups. However, they used social isolation and loneliness, which have different meanings despite often being used interchangeably; researchers have advocated that the terms should be examined individually (Wigfield et al., 2020) While loneliness is a subjective negative feeling resulting from a lack of a meaningful or intimate social or emotional relationship, social isolation is an objective measure of the quantity of social contact available to an individual (Wigfield et al., 2020). The flaw of using

loneliness and social isolation as synonymous may limit the application of related findings to understanding loneliness among BOAs. More so, many factors, including country of birth; ethnic background (cultural context); a sense of belonging (community context); and social networks (social contexts), increase loneliness among ethnic minorities. In addition to these factors, BOAs are more predisposed to the risk of loneliness because they are disproportionately disadvantaged across many dimensions. Compared to other ethnic groups, BOAs tend to have low socioeconomic status, have more comorbidities (chronic conditions), live in poor conditions with more poor neighborhood characteristics (e.g., perceived neighborhood social cohesion, perceived neighborhood safety, neighborhood poverty, and perceived neighborhood resources and services) (Kowitt et al., 2020; Taylor, 2019; Warner & Brown, 2011). These unique and accumulated factors that predispose BOAs to loneliness warrant the need to conduct a review that focuses explicitly on this population.

To the best of the authors' knowledge, no reviews have focused on loneliness among black older adults globally. This review aims to describe the extent and the nature of research activities on loneliness and identify the contributory factors to loneliness among Black older adults as presented in the global literature.

2. Methods/Design

2.1 Scoping review design

The five-stage Arksey & O'Malley (2005) York framework will guide this review: (1) identifying the research question(s); (2) identifying relevant studies; (3) study selection; (4) charting the data; and (5) collating, summarizing and reporting the results. A scoping review enables researchers to understand the knowledge and research gap in a research field (Arksey & O'Malley, 2005). The need for a scoping review was identified with the absence of any existing scoping review papers or synthesis on the experience of social and emotional loneliness among older Black adults. We will report this scoping review using the Preferred Reporting Items for Systematic reviews and Meta-Analyses extension for Scoping Reviews (PRISMA-ScR) Checklist, see Appendix 1 (Tricco et al., 2018). This review is registered at Open Science Framework (OSF) https://doi.org/10.17605/OSF.IO/KFUV6.

2.2 Identifying the research question(s)

The following research question guided this review: *a) what are the extent and the nature of research activities on loneliness among Black older adults? b) what are the contributory factors for loneliness among Black older adults?*

2.3 Identifying relevant studies

The search strategy will be developed in consultation with a social science librarian. See Table 1 for key terms. These keywords will be adapted in multiple databases, including Ageline, Psych INFO, Cochrane Library, PubMed, CINAHL, SocIndex, and Social Services Abstracts and Web of Science (See Appendix 2 for search terms and output for Ageline). Grey literature will be obtained by searching policy documents from organizational websites such as National Institute on Aging, National Caucus and Center on Black Aging (NCBA), HelpAge, AARP, and StatCan. Further, the research team will hand search the references of included studies, relevant reviews, and grey literature. The principal investigator will also contact experts in the field later to ensure we have not missed any published studies fitting the inclusion criteria.

Table 1. Key terms and MeSH terms.

Concepts	Key or MeSH terms
Loneliness	MH "Social Contact (Omaha)") OR "social contact" OR "social connection" OR "social connectedness" OR (MH "Interpersonal Relations") OR (MH "Social Participation") OR (MH "Social Inclusion") OR "Being alone" OR "lonely" OR (MH "Loneliness") OR (MH "Social Isolation")
Older adults	"Older adults" OR "Older people" OR "Older persons" OR "Seniors" OR "ag*ing" OR (MH "Aging") OR (MH "Aged") OR "elder*" OR "elderly"
Black	"African American" OR "Afro Caribbean" OR "African*" OR (MH "West Indies") OR (MH "Cuba") OR "Caribbean*" OR (MH "Black Persons") OR "Black*"

For all the database searches, the symbol * will be used to allow the inclusion of varied word endings.

2.4 Selecting studies

All article citations from each database will be exported into Rayyan QCRI© for removing duplicates and study screening. Study selection will be conducted in two stages: title/abstract and full-text screening. Two or more independent author reviewers will perform pilot testing at each stage using at least 100 articles using the predefined inclusion and exclusion criteria. Inter-rater agreement will be calculated using Kappa. If the Kappa score is ≥ 80, interpreted as an almost perfect strength of agreement for abstract/title and full-text screening (Landis & Koch, 1977), articles will be equally divided among reviewers. However, if the Kappa score is ≤ 0.81, reviewers will independently conduct title/abstract and full-text screening. We will meet at any stage of the screening to discuss any discrepancies that may arise.
We will include an article if:

a. It explored and investigated the experiences/risk factors of social and/or emotional loneliness among Black older adults (Africa and the Caribbean) or some aspect of loneliness (e. g., feeling alone, reduced, or no social support or contact. We define *loneliness as a subjective negative feeling resulting from a lack of a meaningful or intimate social and/or emotional relationship*. This definition differs from social isolation, *an objective measure of social contact available to an individual.*

b. It employed quantitative, qualitative or mixed-method methodologies. Qualitative studies may include but are not limited to studies that explored the experience of loneliness among BOA. We will include only qualitative articles with at least one BOA, provided we can extract the specific experiences of Blacks in the study. Quantitative studies may include but are not limited to articles that describe risk factors for loneliness among BOAs, specific interventions to reducing loneliness among BOAs. We will quantitative studies that conducted (a) sub-analysis for BOAs or use race (black) as a risk factor or predictor in their loneliness studies, and (b) BOAs constitute 70% of the study population. We will contact authors three times, requesting specific data (qualitative or quantitative) for BOAs, and articles whose author(s) do not respond on the third attempt will be excluded.

c. The mean age of the study population should be 55 years and above.

d. Published in the English language.

e. Peer-reviewed and grey literature articles (e.g., organizational reports, theses, etc.)

Articles will be excluded if: (a) they clearly explored objective social isolation, as defined above, or factors related to social isolation- e.g., depression or social isolation as synonymous

with loneliness, and (b) they are opinion papers with no empirical data. There will be no year restriction on both the article to be included and during database searches [i.e., each database will be searched from inception till 2021].

2.5 Charting the data

A standardized Microsoft Excel data-charting form will be used to chart the data. We will extract the following information: authors name(s), year of publication, country the study was conducted, study aims/research questions/hypothesis, study settings, type of study (qualitative, quantitative, or mixed-method), study design, sampling method, participants characteristics (e.g., the number of participants, mean age of the participants, sex/gender), study themes (if qualitative), study findings (if quantitative or mixed-method), policy statements, clinical implication statements future research statement. Two reviewers will independently perform a pilot data extraction, meet and discuss any discrepancies. A third reviewer will be consulted if there is any persistent disagreement.

2.7 Collocating, summarizing, and reporting the results

The result of this review will be collated and summarized in several different ways. The PRISMA flowchart will be used to describe the process of data inclusion and exclusion. Article metadata listed above will be summarised using frequency counts, means, medians and standard deviation. The "best fit" framework synthesis allows researchers to code evidence from included studies against the themes of a priori framework and create new themes that are not captured within the a priori framework (Carroll et al., 2011). The six social provisions [attachment, reassurance of worth, social integration, guidance, reliable alliance, and opportunity for nurturance] of Weiss' framework will be used as the a priori themes (Weiss, 1973). Data that cannot be accommodated within Weiss' framework will undergo iterative interpretation using inductive, thematic analysis techniques. Two authors will independently map the evidence that emerges from the included studies across the six provisions of Weiss's framework and create any new theme that did not fit into any of Weiss' framework's six social provisions. Any disagreement will be discussed and resolved during the research team meeting.

4. Discussion

Although there is a proliferation of research and reviews (e.g., scoping, integrated and systematic reviews) on loneliness among older adults, a limited number have focused on specific ethnic groups include black older adults. Previous reviews have highlighted the cultural and contextual factors/experiences that shape or influence loneliness among Asian older adults (Johnson et al., 2019; Shorey & Chan, 2021). In addition, black older adults have unique risk factors, including a high prevalence of chronic conditions (e.g., hypertension, diabetics) that predisposed them to be lonely (Taylor, 2019). Therefore, conducting a comprehensive review to explore the nature and extent of research on loneliness among black older adults is warranted. The "best-fit framework" analysis used in this review will provide insight into how the research on loneliness among older adults fits into the six provisions of Weiss' framework by highlighting gaps in the literature. Furthermore, this scoping review will provide comprehensive information on the existing nature and extent of research on the prevalence of loneliness among BOAs and some of the contributory factors (barriers and facilitators) for loneliness among this population. Finally, this review will inform policy development around contributory factors for loneliness among BOAs and aspects of the most relevant issue to the Black community across the globe.

Declarations

Ethics approval and consent to participate: This is a scoping review; therefore, ethical approval is not applicable.

Consent for publication: All authors have reviewed and consent to this publication.

Availability of data and material: There is currently no data available for this review. Information not presented in the body of the main manuscript will be attached as supplementary materials.

Competing interests: The authors have no competing interest.

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Appendix 1: PRISMA-ScR Checklist

SECTION	ITEM	PRISMA-ScR CHECKLIST ITEM	REPORTED ON PAGE #
TITLE			

SECTION	ITEM	PRISMA-ScR CHECKLIST ITEM	REPORTED ON PAGE #
Title	1	Identify the report as a scoping review.	1
ABSTRACT			
Structured summary	2	Provide a structured summary that includes (as applicable): background, objectives, eligibility criteria, sources of evidence, charting methods, results, and conclusions that relate to the review questions and objectives.	1
INTRODUCTION			
Rationale	3	Describe the rationale for the review in the context of what is already known. Explain why the review questions/objectives lend themselves to a scoping review approach.	2-3
Objectives	4	Provide an explicit statement of the questions and objectives being addressed with reference to their key elements (e.g., population or participants, concepts, and context) or other relevant key elements used to conceptualize the review questions and/or objectives.	3
METHODS			
Protocol and registration	5	Indicate whether a review protocol exists; state if and where it can be accessed (e.g., a Web address); and if available, provide registration information, including the registration number.	3
Eligibility criteria	6	Specify characteristics of the sources of evidence used as eligibility criteria (e.g., years considered, language, and publication status), and provide a rationale.	4
Information sources*	7	Describe all information sources in the search (e.g., databases with dates of coverage and contact with authors to identify additional sources), as well as the date the most recent search was executed.	4
Search	8	Present the full electronic search strategy for at least 1 database, including any limits used, such that it could be repeated.	4 and 10
Selection of sources of evidence†	9	State the process for selecting sources of evidence (i.e., screening and eligibility) included in the scoping review.	4-5
Data charting process‡	10	Describe the methods of charting data from the included sources of evidence (e.g., calibrated forms or forms that have been tested by the team before their use, and whether data charting was done independently or in duplicate) and any processes for obtaining and confirming data from investigators.	5
Data items	11	List and define all variables for which data were sought and any assumptions and simplifications made.	5
Critical appraisal of individual sources of evidence§	12	If done, provide a rationale for conducting a critical appraisal of included sources of evidence; describe the methods used and how this information was used in any data synthesis (if appropriate).	Not applicable
Synthesis of results	13	Describe the methods of handling and summarizing the data that were charted.	5
RESULTS			
Selection of sources of evidence	14	Give numbers of sources of evidence screened, assessed for eligibility, and included in the review,	Not applicable here

SECTION	ITEM	PRISMA-ScR CHECKLIST ITEM	REPORTED ON PAGE #
		with reasons for exclusions at each stage, ideally using a flow diagram.	
Characteristics of sources of evidence	15	For each source of evidence, present characteristics for which data were charted and provide the citations.	Not applicable here
Critical appraisal within sources of evidence	16	If done, present data on critical appraisal of included sources of evidence (see item 12).	Not applicable
Results of individual sources of evidence	17	For each included source of evidence, present the relevant data that were charted that relate to the review questions and objectives.	Not applicable here
Synthesis of results	18	Summarize and/or present the charting results as they relate to the review questions and objectives.	Not applicable here
DISCUSSION			
Summary of evidence	19	Summarize the main results (including an overview of concepts, themes, and types of evidence available), link to the review questions and objectives, and consider the relevance to key groups.	Not applicable here
Limitations	20	Discuss the limitations of the scoping review process.	Not applicable here
Conclusions	21	Provide a general interpretation of the results with respect to the review questions and objectives, as well as potential implications and/or next steps.	6
FUNDING			
Funding	22	Describe sources of funding for the included sources of evidence, as well as sources of funding for the scoping review. Describe the role of the funders of the scoping review.	Not applicable

Appendix 2: Ageline Search

EBSCOhost

#	Query	Limiters/Expanders	Last Run Via	Results
S4	(Black American OR African American OR Black Caribbean* OR Afro Caribbean* OR Black person* OR Black* OR West Indies OR African*) AND (S1 AND S2 AND S3)	Expanders - Apply equivalent subjects Search modes - Boolean/Phrase	Interface - EBSCOhost Research Databases Search Screen - Advanced Search Database - AgeLine	759
S3	Black American OR African American OR Black Caribbean* OR Afro Caribbean* OR Black person* OR Black* OR West Indies OR African*	Expanders - Apply equivalent subjects Search modes - Boolean/Phrase	Interface - EBSCOhost Research Databases Search Screen - Advanced Search Database - AgeLine	11,941
S2	ag*ing OR older adult* OR older people OR older person* OR senior* OR Aged OR elder* AND elderly	Expanders - Apply equivalent subjects Search modes - Boolean/Phrase	Interface - EBSCOhost Research Databases Search Screen - Advanced Search Database - AgeLine	164,043
S1	loneliness OR social contact OR social isolation OR social connection OR social support OR social connectedness OR Being alone OR Lonely	Expanders - Apply equivalent subjects Search modes - Boolean/Phrase	Interface - EBSCOhost Research Databases Search Screen - Advanced Search Database - AgeLine	9,139