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## THE NECESSITY OF PROMOTING SOCIAL PARTICIPATION IN ORDER TO REDUCE SOCIAL ISOLATION IN OLDER PEOPLE

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### ABSTRACT

*Many Asian countries including Sri Lanka, has experienced rapid ageing of the population from last few decades. Sri Lankan elderly population currently represents 12.4% of the total population. When the elders are reaching to their old age, they have to face different kinds of situations and difficulties. Among them, social isolation is one of the major negative situations that elders have to face. To decrease this condition of social isolation, increasing the level of social participation is necessary for the older people. The main purpose of this study is to explore the necessity of promoting social participation in order to reduce social isolation in older people. Under this main aim, this research discusses the topics as causes and effects of social isolation in older people, existing services for older people, benefits of social participation and activities need to promote social participation in older people. The sample size of this research is 25 respondents and this study was conducted using both quantitative and qualitative analyses. The researcher followed purposive sampling method which comes under non- probability sampling. Questionnaire and semi- structured interview have used for data collection. Data analysis was done with the use of statistical methods through MS Excel software and qualitative data through thematic analysis method. The findings of this research will help for the authorities, social service organizations, related professionals, academics and whole society to understand the necessity of promoting social participation in order to reduce social isolation in older people.*

**KEYWORDS:** Older people, Social isolation, Social participation, Social network, Social support

## **INTRODUCTION**

Many Asian countries including Sri Lanka, has experienced rapid ageing of the population from last few decades. According to the World Health Organization (2002) elderly population is the fastest growing population in the world. In 2012, the population over 60 years was 2.5 million which 12.5% of the total population in Sri Lanka (Department of Census and Statistics, 2012). By 2041, one out of four of the population would be elderly (DCS, 2012). So, this will affect for the country in many aspects. Decline in the birth rate and the death rate had resulted in the increase of the number of older persons in the population. The shift of age structure from younger to older with a higher proportion resulted in a transformation of the shape of the age pyramid of the country from a broad based to "barrel shaped" that confirming ageing at the apex (Siddhisena., 2004).

### **Problem statement**

This research conducts to explore about the necessity of promoting social participation in order to reduce social isolation in older people. The basis of this research is the concept of "Ageing". In Sri Lankan context, the person who has completed 60 years of age is considered as an elderly person.

In another aspect, female life expectancy is higher than male life expectancy in Sri Lanka, leading to an increasing early- widow population in the country. It is evident that one in every three older women is widowed (DCS, 2012).

The institute of policy studies of Sri Lanka (2017) states that there is a relationship between social isolation and older people. Social isolation means the condition of reduced social belonging, reduced responsibility towards other people, social contact of a very low level and lacking in relationship quality and fulfillment (Nicholson, 2009). Although social isolation may occur in people of all ages, it is a more common problem of the older populations. Courtin and Knapp (2017) state that social isolation is particularly problematic in old age due to decreasing economic and social resources, functional limitations, death of relatives and spouses and changes in family structures and mobility. Furthermore, Hammig (2019) identifies that social isolation can be defined as the opposite of social integration or a lack of social interaction and therefore as having only few confidants or closely related persons or none at all. On other hand, insecurity resulting from multiple losses can lead to imposed isolation.

The elderly people prefer to live with children and grandchildren which significant for happiness. With the emergence of new socio-economic situations due to modernization, industrialization and urbanization, the extended family system is decreasing and nuclear family system is becoming more popular. Social factors such as the breaking down of the extended family system, erosion of the traditional values due to modernization, migration, industrialization, urbanization and globalization lead to many life style changes in the developing countries (Siddhisena & Rathnayake,

1998). The changing life style has resulted in the disintegration of the institution of family. This situation warrants strategies to stabilize the family and assist the protection of the elders. So, the long- term care of the elderly was affected.

When consider about the social isolation, it also commonly seen among the elders. Specially, the personal capabilities and physical status of the elders may cause to raise isolation (Snedeker, 2017). Accordingly, the elders who are suffering from vision, hearing and muscle impairments feel isolated within the society. The elders, who are staying in elders' homes, have very limited number of social contacts and interactions. At the same time, the elders who are staying in other institutions such as National Institute of Mental Health or other psychiatric wards of the hospitals on treatment, they feel social isolation because of their mental disorders (Maduwage, 2019). Whatever the situation, most of the elders are suffering from social isolation.

Broad social participation in shaping policies to advance health equity is justified on ethical and human rights grounds, but also pragmatically (WHO, 2008). There has long been interest in the role of social relationships in promoting health of the older generation and the evidence base for the significance of social participation as a protective factor in old age has been growing rapidly (Jayakody, 2018). Social participation is influenced by the social environment, which is defined by three broad dimensions: interpersonal relationships (Social support and social network), social inequalities (Socioeconomic position and income inequality, racial discrimination), and neighborhood and community characteristics (Social cohesion and social capital, neighborhood factors) (Hooghe & Botterman, 2011).

Although this elderly social isolation problem can be seen in the society, lack of actions has been taken to solve this problem. Most of the previous researches has explored about the factors affected for social isolation, health risks of social isolation, effects of social isolation and some other related topics. But, there is no proper social work research which illustrates the steps can be taken to reduce social isolation by increasing social participation among elderly. So, the researcher has identified this gap and thought to undertake a research in order to fill this research gap.

### **Aim and Objectives**

Main aim: - To determine the necessity of promoting social participation in order to reduce social isolation in older people

Sub objectives: -

- I. To find out the causes for social isolation in older people
- II. To investigate the existing services which help to decrease the isolation in older people
- III. To come up with the way of promoting social participation in order to reduce social isolation

## Research questions

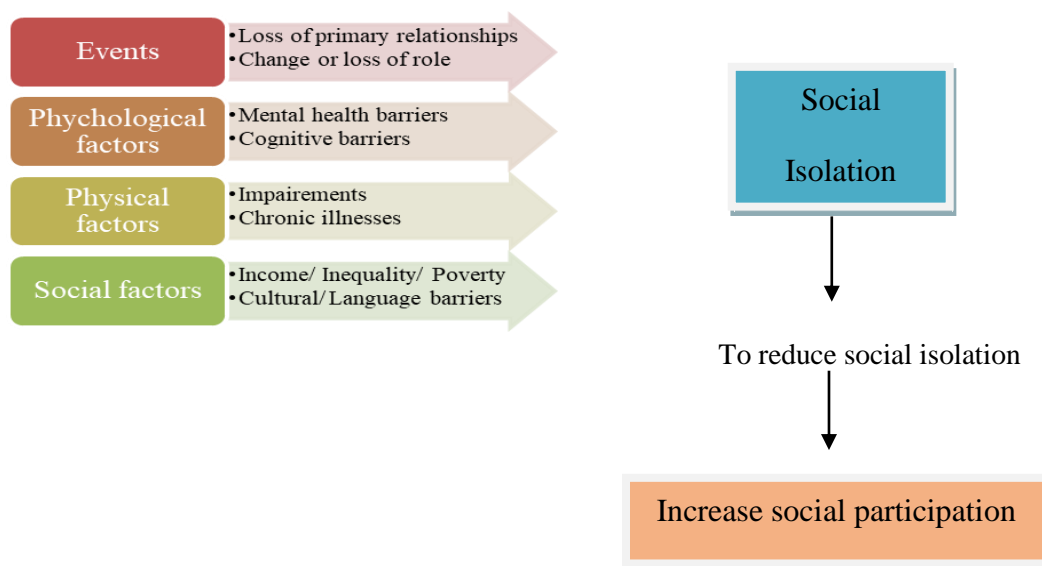
- What are the causes for social isolation in older people? (Related to sub objective I)
- What are the existing services which help to decrease the isolation in older people? (Related to sub objective II)
- How the increase of social participation can help to reduce social isolation in older people? (Related to sub objective III)

## Conceptual framework

A conceptual framework is a structure which the researcher believes can best explain the natural progression of the phenomenon to be studied (Camp, 2001). It is linked with the concepts, empirical research and important theories used in promoting and systemizing the knowledge espoused by the researcher.

The author has developed following conceptual framework according to this research study.

Figure 1: Conceptual framework (Author developed, 2020)



## Methodology

A research can be defined as a task which people are logically conducting to find some facts to expand the knowledge (Saunders, Lewis, & Thornhill, 2009). Social work research can be defined as a systematic investigation into the problems in the field of social work.

A study design is a plan, structure and strategy of investigation so conceived as to obtain answers to research questions or problems (Kumar, 2012). In this study, the author uses the mixed design which consists of both quantitative and qualitative research components.

#### Study population, sample size and sampling technique

The population of this research based on Kaduwela divisional secretariat area which is situated in Colombo district. The author has selected a divisional secretariat area in Colombo district because according to the secondary data which she gathered, the highest number of older population (Age 60 years and above) is living in Colombo district. The reports of Department of Census and Statistics, Sri Lanka has mentioned that the older population in Colombo district is 12.5% from the total ageing population in Sri Lanka which marked the highest ageing population in a district. The sample size of the research was 25 elders. Furthermore, to gather data on socio-economic and health aspects related to ageing and social isolation, the author has interviewed some key informants.

The researcher followed purposive sampling method which comes under non-probability sampling.

#### Types of data

In this research, the author initially collected secondary data from books, journal articles, past literature, surveys, reports and other websites as sage publications, research gate in relevant to the ageing, social isolation and social participation. Then the primary data collection has done by the author through a well structured questionnaire and interviews.

#### **Data collection methods and instruments**

In the current study, the author has used questionnaires as the data collection instrument from the selected 25 elderly people. Among those 25 elders the author interviewed 10 elders and for further studies. Additionally, to gather data on socio-economic and health aspects related to ageing and social isolation, the author has interviewed some key informants who are working with the elderly population in the country. Thus, the author has used both qualitative and quantitative data collection methods and instruments such as questionnaires and semi- structured interviews since this study followed the mixed research design.

#### **Data collection and analysis**

After collecting the data through the questionnaire, the researcher collected data through a semi- structured interview. The interview was consisted of two parts. The first interview was held between the researcher and the selected respondents who were participated for the questionnaire. According to the purposive sampling technique, the researcher has selected 10 respondents by concerning the way they had

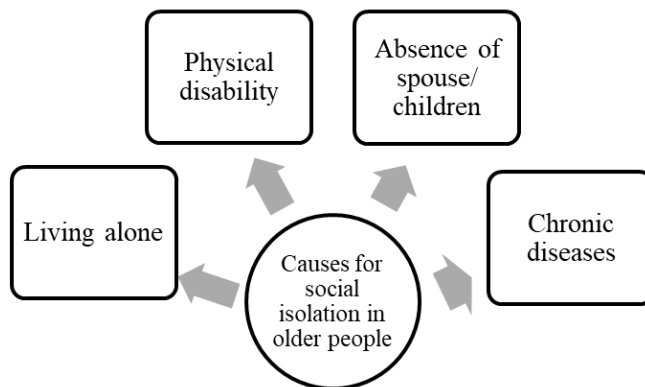
participated and answered for the questionnaire. The inclusion criteria were age over 60 years, good mental health and interest in discussing the topic. The second interview was held between the researcher and the key informants related to the field.

Data analysis was done with the use of statistical methods through MS Excel software and the findings has represented through column charts and pie charts as necessary. The qualitative data has analyzed through thematic analysis method.

### Theme Maps

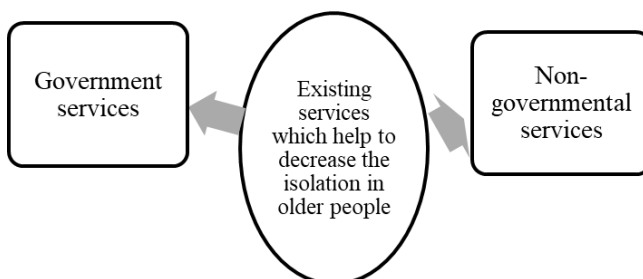
Sub objective I: To find out the causes for social isolation in older people

Figure 2: Theme map for sub objective 01 (Author developed, 2020)



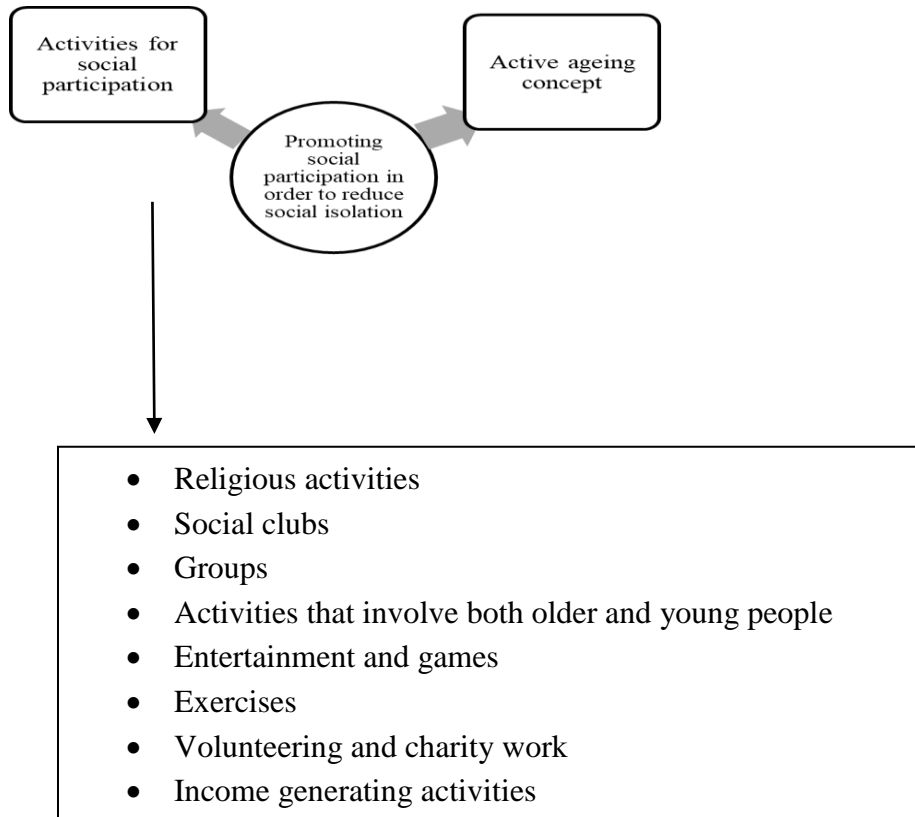
Sub objective II: To investigate the existing services which help to decrease the isolation in older people

Figure 3: Theme map for sub objective 02 (Author developed, 2020)



Sub objective III: To come up with the way of promoting social participation in order to reduce social isolation

Figure 4: Theme map for sub objective 03 (Author developed, 2020)



### **Ethical consideration**

The research undertaken abides by ethical guidelines. Anonymity and confidentiality was highly protected. Participation of the respondents was voluntarily and no any personal details were included in the study. The researcher has got the permission for data collection from the respective respondents, their families, care givers and from the key informants.

### **Findings and Analysis of the Questionnaire data**

Response rate

The response rate of the questionnaires and interviews is 100%.

Demographic details of the respondents

In this study, the researcher has identified four age categories and 7 respondents were belong to the 60- 70 years age category, 8 respondents were belong to the 71- 80 years age category, 8 respondents were belong to the 81- 90 years age category and 2 respondents were belong to the 91 years and above age category.

The level of education qualification of a respondent may affect for the answers. According to this study, 7 respondents were grade 8 passed, 9 respondents were Ordinary level passed, 5 were Advanced level passed and 4 were had Above Advanced level or professional qualifications. From the respondents, 11 were married, 10 were unmarried and 4 were widowed. 60% respondents were female and 40% respondents were male.

#### Living arrangement, social network and social support details of the respondents

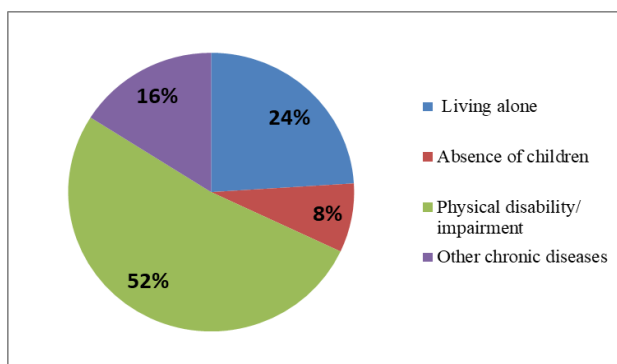
According to the collected details, 10 respondents are living alone, another 10 respondents are living with spouse and children and remained 5 respondents are living with spouse or current partner. Also, 10 respondents have not children. Also, 4 respondents have one child, 6 respondents have two children, 1 respondent has three children and 4 respondents have four or more than four children. Furthermore, 11 respondents have no grand children. Also, 5 respondents have one grandchild, 4 respondents have two grand children, 3 respondents have three grand children and 2 respondents have four or more than four grand children.

From the Question 10, author had collected details about the people who are helping for the respondents when he/ she need help. Relevant to the living arrangement, respondents were identified their partners, children, friends, relations, neighbours as the people who are there for when they need help. The unmarried respondents expect help from relations and/ or friends and/ or neighbours.

According to the collected details for the 11th Question, 76% respondents given answer as “Yes” by accepting that disability, handicap or chronic disease kept them away from participating in community activities and social opportunities. 24% respondents were given the answer as “No” for this question.

From the last question of Section Two (Question 12) author wanted know the reasons that respondents are not much engaging with social activities. The result can be shown as follow.

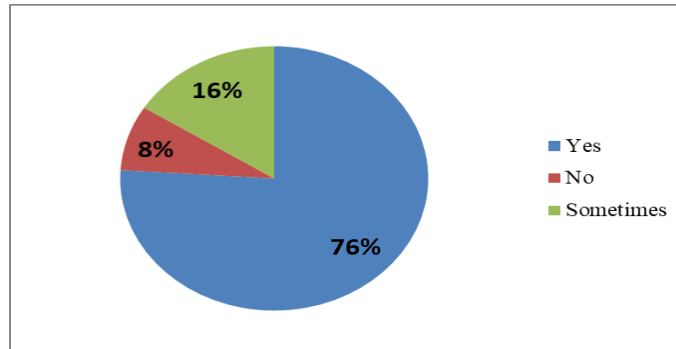
Figure 5: Reasons for not much engaging with social activities (Author developed, 2020)





## Social participation details of the respondents

Figure 6: Preference to be socially active and participate in social activities (Author developed, 2020)



Moreover, according to the collected details, 56% of respondents are sometimes attending for religious activities, 36% of respondents often attending and 8% of respondents rarely attending for religious activities. 44% of respondents are rarely attending for meetings with organized groups, 32% of respondents are sometimes attending, 16% of respondents often attending and 8% of respondents are never attending for meetings with organized groups. 64% of respondents are sometimes socializing with friends and relatives, 16% of respondents are often, 16% of respondents rarely and 4% of respondents never socializing with friends and relatives. 44% of respondents are sometimes attending entertainment activities, 24% of respondents are rarely, 20% of respondents often and 12% of respondents are never attending entertainment activities. 40% of respondents are sometimes attending for volunteering activities, 36% of respondents are rarely attending, 16% of respondents never and 8% of respondents are often attending for volunteering activities.

### Respondents' ideas for participating for social activities

From Question 19, the researcher examines the respondents' preference to do activities that involve both older and young people to reduce social isolation in older people. According Most of the respondents which represents the 60% proportion Agreed to the statement. 16% of the respondents Strongly Agreed and another 16% of respondents had Average idea about that. However, 8% of the respondents disagreed for the statement. From Question 20, the researcher examines the respondents' preference to do attend the social clubs. Most of the respondents which represents the 65% proportion Agreed to the statement. 12% respondents Strongly Agreed and 19% of the respondents had Average idea about that. However, 4% of the respondents Disagreed for the statement. From Question 21, the researcher examines the respondents' preference to do volunteering and charity work. Most of the respondents which represents the 56% proportion Agreed to the statement. 28% respondents Strongly Agreed and 16% of the respondents had Average idea about that. From

Question 22, the researcher examines the respondents' preference to participate in religious activities and tours. Most of the respondents which represents the 56% proportion Agreed to the statement. 36% respondents Strongly Agreed and 8% of the respondents had Average idea about that. From Question 23, the researcher examines the respondents' preference to engage in income generating activities. Most of the respondents which represents the 60% proportion Agreed to the statement. 24% respondents Strongly Agreed and 16% of the respondents had Average idea about that. From Question 24, the researcher examines the respondents' preference to work with the groups. Most of the respondents which represents the 60% proportion Agreed to the statement. 28% respondents Strongly Agreed and 12% of the respondents had Average idea about that.

## Data Analysis

### Causes of social isolation in older people

Almost all participants expressed that they feel loneliness and feeling of isolation within their community. The causes for social isolation may be varying according to their current living condition, health conditions, other life events and/ or any other reason. Because of social isolation, all of them experienced negative impacts.

(Respondents were marked as R1 – R10 and Key informants were marked as K1 - K3 to keep their privacy).

“I am unmarried and living alone. So, I don't have close relationships with anyone. Specially, I don't have good relationship with relations. So, most of the times, I am in my home. I feel I am isolate within the community.” (R4)

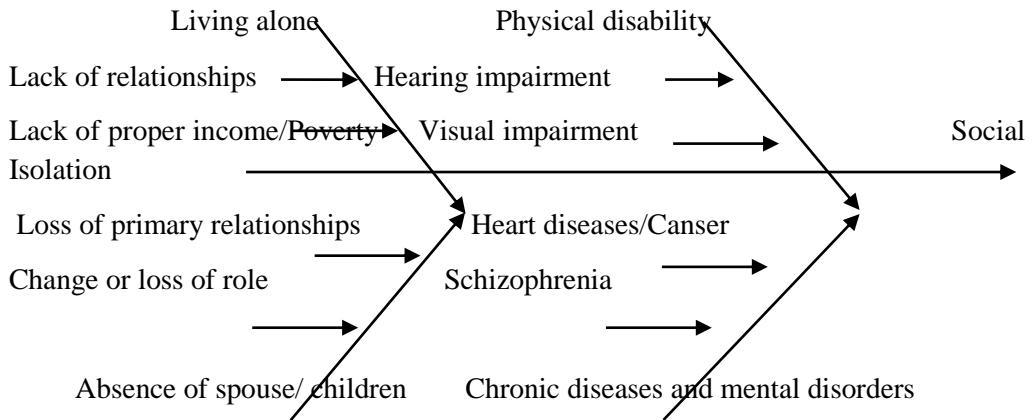
“I am living with physical disability. In the year of 2002, I fell down from a jack tree and my left side leg was injured. I cannot go anywhere. I have to spend all my day in this bed. There is no anyone to talk. I cannot participate for any activity. I am isolated within this society.” (R6)

“I am suffering from a heart disease. I am taking medicine. My children did not allow me to go anywhere even to the temple. I know they are really worrying about my disease but I need to participate for social activities. I like singing; I like to talk with people. But, my children did not allow me to do those things. I feel so lonely and isolate.” (R7)

“I am a physically disability person. I am living with my spouse in this home. We have two children but both of them are living in Australia with their families. They are sending us money but they do not let us to go anywhere. I am doing same things everyday as my routine. Eating, sleeping, watching television, reading newspapers are only in my everyday daily routine. I feel so lonely and sad to say, each and every moment I think I am isolated within this community.” (R9)

The author has used Fishbone Analysis to explain the causes of social isolation further. Fishbone Analysis is a visualization tool for categorizing the potential causes of a problem.

Figure 7: Causes of Social Isolation (Author developed, 2020)



#### Effects of social isolation in older people

Table 1: Effects of social isolation in older people (Author developed, 2020)

Health effects	Social effects	Economical effects
Social isolation has higher risks for a variety of physical and mental conditions including high blood pressure, heart disease, a weakened immune system, anxiety, depression, cognitive decline, Alzheimer’s disease, and even death.	<ul style="list-style-type: none"> <li>• Decreasing social network</li> <li>• Decreasing social support from the society</li> </ul>	<ul style="list-style-type: none"> <li>• No any opportunity to have an income</li> <li>• Do not have the chance to get help in immediate situations</li> </ul>

## Existing services for older people

- Mainly the government established and maintain elders' homes for the older people
- Protection of the rights of elders (Amended) Act, No. 5 of 2011
- National Secretariat for Elders
- National council for elders
- Pension for retired government officers
- Give Rs 5000/= payment for elders over age 100
- Give Rs 2000/= payment for elders over age 70
- Senior citizen committees
- Legal aid
- Elders Sponsorship "Wedihiti Awarana kepakaru"
- Senior Citizen Assistance Scheme for Elderly Hood
- Eye Lenses and Hearing aid instrument to the needy
- Identity card for all elders who are over 60 years of old
- Home care services for elders
- Help for self employments
- Elders' day celebrations

Moreover, there are non- governmental organizations, charity organizations which provide facilities and services for elders. "HelpAge Sri Lanka" is a good example for a charitable non-governmental Organization working for and on behalf of disadvantaged senior citizens in Sri Lanka to improve their quality of lives.

"We are providing the day center facility for the elders to spend their day time. In there, they can do various recreational activities including making greeting cards, flower pots and whisks. We are providing breakfast, lunch and evening tea for them in a free of charge. During the free time they can work together with the other elders who are coming to the day center. They can cook, they can do games, they can watch television and they can do many more good things in there. I think this day center concept is very helpful for them to decrease their loneliness and it helps to diminish social isolation. Moreover, we are providing the services such as eye hospital, medical camps, ayurvedic center, distribution of disability equipments, free physiotherapy center, sponsor a grandparent programme, voluntary home care programme, home care assistants programme, Wheels on meals programme and training programme for the well- being of the elderly." (K1)

Benefits of social participation for the well- being of older people

“I am physically disabled and I am spending all my day in this home. I could not go anywhere; I am going out only to take medicine. But, I like to socialize with my relations, neighbours and friends. I think it can give me a very relaxed mind and it can decrease my stress.” (R1)

“My husband died in the year of 2014. Now I am living alone. Sometimes, I am participating for religious activities. Also, I am engaged in the women’s committee in our village. In there I can meet new people. I can talk and work with them in a very friendly manner. Although I am living alone, I feel I am belonging to this community and I am very happy about that.” (R3)

“I think by engaging social activities I can make a lot of new friends and I believe there’s always somebody there for me within this community.” (R5)

According to the collected data from the key informants, the benefits can be divided into three parts.

#### Social benefits

- Belong to a community
- social inclusion
- Can build- up close relationships
- Can develop social networks
- Social interaction and friendships
- Can have social support

#### Physical health benefits

- Enhanced quality of life
- Lower morbidity
- Significant positive impact on participants’ perceptions of their physical health

#### Mental health benefits

- Improved life satisfaction
- Lower levels of psychological distress
- Lower rates of depression
- Decreased risk of dementia
- Decreased possibility of generalized anxiety disorders

Activities need to promote social participation for older people

Each and every respondent suggested some activities to do in order reduce their feeling of isolation

- Religious activities, tours and excursions
- Social clubs

“I am a woman who likes to engage in social clubs to do various crafts activities. I can make various beautiful crafts works. That activity leads me to spend a happy life. It helps me to get rid from my isolated feeling. So, I think giving chance to attend for social clubs such as for crafts, books, and gardening will help old age people to get rid from social isolation.” (R3)

- Groups related to political, cultural and social activities
- Activities that involve both older and young people (intergenerational activities)

“I like to do the activities that we used to have when we were younger. I like to indentify new generation young people. I like to talk with them, play with them and laugh with them. It will help to vanish my feeling of loneliness and isolation.” (R4)

- Entertainment activities and games
- Exercises
- Volunteering and charity work

“I am unmarried and I am living alone. I like to participate in religious works and charity works. Specially, I like to help people and I love volunteering. During these activities I can work together with other people and that companionship, helps me to improve my life satisfaction.” (R8)

- Income generating activities

## Discussion

The main aim of this research is to explore about the necessity of promoting social participation in order to reduce social isolation in older people. The basis of this research is the concept of “Ageing”.

According to this research the researcher’s main focus was on social isolation and social participation. Social isolation can be defined as the condition of reduced social belongingness, social contact, lacking in relationship quality and reduced responsibility towards other people. Social participation encourages the elders’ participation of civil society and the empowerment of affected communities to become active protagonists in shaping their own health. According to the research, all

the respondents were suffered the condition of social isolation within their respective communities. The respondents who were residing in elders' home felt loneliness and isolation than other respondents.

The participants had various causes for social isolation which includes physical impairment/ disability, being single, living alone, absence of spouse or children, chronic diseases and financial difficulties. Most of these causes are related with the life events and activities. Participants felt they were estranged from the society and even from their own children because of their disability, children being too busy, they are living in far away or lack of contacts with the family. According to the key informants, other than these causes mental health and cognitive barriers, income inequality, cultural/ language barriers, transportation issues, exposure to domestic or community violence and low self esteem also can be caused for social isolation in elderly.

When consider about the effects of social isolation, it has health effects for a variety of physical and mental conditions including high blood pressure, heart disease, a weakened immune system, anxiety, depression, cognitive decline, Alzheimer's disease, and even death. Decreasing social network, decreasing social support from the society can be social effects and no any opportunity to have an income can be an economical effect.

Due to the above mentioned causes, the social life of most of the service users was mostly dependent on their care provider's availability which limited the amount and choice of activities and made this people more socially isolated. According to the questionnaire survey 76% of the respondents like to be more socially active and participate in social activities. But, when consider about these older people's current situation, their participation in social activities is in a very low level. They are not often attending for social activities. Although we are happy about the social improvements, it is not always giving us good results. Social improvements lead to increase the wants of the people. As a result the educational levels, employment levels of the children were increased. So, the children went far away from home to fulfill their needs and wants. Finally, because of the urbanization children went to cities and old parents were limited to the grand home in the village. Social participation gives number of social benefits, physical health benefits and mental health benefits for the older people. Specially, the older people who were marginalized as socially isolated can get a relief through social participation. During the social participation activities people can get to know about each other and can make meaningful relationships. That will help them to lead a healthy life without negative impacts.

Thus, it is clear that social participation is necessary for reduce social isolation in older people. As a country all the people and respective authorities should take steps to promote social participation among older people. Therefore, as a step it is necessary to aware the older people about life events, social incidents and other relevant areas.

Specially, the authorities should introduce a proper plan for the elders to spend their retirement age. It will help them to avoid numerous problems in old age. In addition, as a country there should be a proper health care system for the elderly people which is consisting of multi- dimensional health care professionals. The intermediate and long- term health care institutions to provide an optimized service for the older generation also should be established. For this step social workers also can give their contribution. When consider about this kind of topics, social workers’ contribution is very necessary. The social workers can properly work with the elders who are isolate within the community. They have a key role to play at the interface between the older person, their families, hospital staff and community services. The role of the social worker in the care of older people is to represent and advocate for the person’s needs, while collaborating with other key stakeholders and establishing the supports required. So, the social work intervention includes advocating on behalf of the service users to a range of services such as local authorities and social welfare services. Social work intervention assists the service users to empower them by themselves. Furthermore, social worker can give his/ her contribution in policy making activities in behalf of the well- being of elderly people. It is a great help to protect the dignity of the elderly population in the country.

Moreover, as a country it can take some long term actions other than the previously discussed actions to promote social participation among elderly. Accordingly, involve the elders for the day- to- day activities of the society and accepting their experiences, ideas and suggestions is leading to promote social participation among elders. In addition, if the government can involve the elders for the labour force as the “Silver Economy” it can give more positive outcomes for the lives of the elderly as well as for the country. Furthermore, if the country can amend the National elderly health policy by concerning latest needs and wants of the elders, it will be more advantageous.

Hence, the researcher could identify that it is necessary for promoting social participation in order to reduce social isolation in older people.

#### Recommendations and conclusion

Relevant to the findings and analysis the author has made following recommendations.

Table 2: Recommendations (Author developed, 2020)

Area of improvement	Recommendation	Benefit
Retirement age	Introduce proper insurance schemes and	Help to properly face for their numerous



	make an elder friendly environment to spend their retirement age.	problems in old age and can have a safe elderly life.
Health care system	Establish a proper health care system which is consisting of multi-dimensional health care professionals in order to find out the physical, mental and spiritual conditions of the elders who are in their homes as well as in the institutional care.	Help to decrease the various physical, mental diseases, negative effects of the life events, other negative conditions of the elders and support to lead a healthy and happy life for the elders.
Policy making	Appoint a group of members to find out the implementation status of the National Elderly Health Policy in Sri Lanka and introduce activities to increase the social participation of the elders while protecting their dignity.	Help to make a secured environment for the elders and help to protect their dignity and worth.

### **Conclusion**

The author has undertaken this research to explore about the necessity of promoting social participation in order to reduce social isolation in older people. Mainly the respective major life events, physical, social and mental related issues cause for social isolation in older people. According to the survey data, the respondents do not participate for the social activities and that affects for their status of social isolation. Although, there are number of existing services for the elders, most of the older people are not much engaging in those. But they were agreed that social activities are needed to decrease their isolated situation. This research showed that involvement in various types of social activities needs to increase the social participation in older

people. While the social participation level is increasing, it helps to reduce social isolation in older people. Some results of this study are match with prior research “Factors associated with social participation amongst elders in rural Sri Lanka” (Jayakody, 2018) which indicates participating for social activities is a necessary thing for the elderly people. The findings of this research will help for the authorities, social service organizations, related professionals, academics and whole society to understand the necessity of promoting social participation in order to reduce social isolation in older people. In conclusion, the researcher indicates that the findings of this research verify the necessity of promoting social participation for older people in order to reduce social isolation.

## REFERENCES

Camp, W. (2001). Formulating and Evaluating Theoretical Frameworks for Career and Technical Education Research. *Journal of Vocational Education Research*, 26(1), 4-25. doi: 10.5328/jver26.1.4

Courtin, E. & Knapp, M. (2017). Social isolation, loneliness and health in old age: A scoping review. *Health and social care in the community*, 25(3). doi: 10.1111/hsc.12311

Economic and Social Statistics of Sri Lanka | Central Bank of Sri Lanka. (2012). Retrieved 11 January 2020, from <https://www.cbsl.gov.lk/en/publications/other-publications/statistical-publications/economic-and-social-statistics-of-sri-lanka>

Fratiglioni, L., Paillard-Borg, S., & Winblad, B. (2004). An active and socially integrated lifestyle in late life might protect against dementia. *Pubmed*, 3(6), 343-353. doi: 10.1016/S1474-4422(04)00767-7.

Gardner, I., Brook, E., Ozanne, E. & Kendig, H. (1998). Improving social networks. A research report.

Hammig, O. (2019). Health risks associated with social isolation in general and in young, middle and old age. *PLOS ONE*, 14(7). doi: 10.1371/journal.pone.0219663

Holloway, I. & Wheeler, S. (2002) *Qualitative research in nursing*. Blackwell Science, Oxford.

Hooghe, M., & Botterman, S. (2011). Urbanization, Community Size, and Population Density: Is There a Rural-Urban Divide in Participation in Voluntary Organizations or Social Network Formation?. *Nonprofit and Voluntary Sector Quarterly*, 41(1). doi: 10.1177/0899764011398297

IPS. (2017). Retrieved 17 October 2020, from <https://www.ips.lk/>

- Jayakody, G. (2018). Factors associated with social participation amongst elders in rural Sri Lanka: A cross-sectional mixed methods analysis. *BMC public health*, 4- 6. Retrieved from <https://www.researchgate.net/publication/325190421>
- Kumar, R. (2012). *Research methodology: a step by step guide for beginners*. *Nurse researcher*, 19(3). doi: 10.7748/nr.19.3.45.s5
- Maduwage, S. (2019). Sri Lankan ‘silver-aged’ population. *Journal Of The College Of Community Physicians Of Sri Lanka*, 25(1), 1- 2. doi: : <https://doi.org/10.4038/jccpsl.v25i1.8205>
- Manami, E., Hisashi, K., Yoshinori, F., Kazushige, I., Yutaka, W., Hirohiko, H., Hun, K., Kaori, I., Koichiro, O., & Shuichi, O. (2019). Social participation reduces isolation among Japanese older people in urban area. *PLOS ONE*. doi <https://doi.org/10.1371/journal.pone.0222887>
- Menike, H., R., A. (2015). Social Support and Social Security of Elderly Population in Sri Lanka. *International Journal of Business and Social Science*, 6(11), 51-54.
- Meyer, R., & Schuyler, D. (2011). Old Age and Loneliness. *PMC*, 13(2). doi: 10.4088/PCC.11f01172
- Minagawa, Y., & Saito, Y. (2014). Active Social Participation and Mortality Risk among Older People in Japan. *Research on aging*, 37(5). doi: 10.1177/0164027514545238
- Mugenda, O., M. & Mugenda, A., G. (2003). *Research Methods, Quantitative and Qualitative Approaches*. Open Access Library Journal.
- Nicholson, N. (2009). Social isolation in older adults: an evolutionary concept analysis. *Journal of Advanced Nursing*, 65(6), 1342-1352. doi: 10.1111/j.1365-2648.2008.04959.
- Pinquart, M., & Sorensen, S. (2001). Influences on Loneliness in Older Adults: A Meta-Analysis. *Basic and Applied Social Psychology*, 23(4), 245-266. doi: 10.1207/s15324834basp2304\_2
- Researchmethodology. (2019). Retrieved 15 June 2020, from <https://research-methodology.net/>
- Saunders, M., Lewis, P., & Thornhill, A. (2009). *Research Methods for Business Students* (5th ed., pp. 41- 50). Uttar Pradesh: Pearson.
- Siddhisena, K. (2004). Socio- Economic implications of ageing in Sri Lanka: An overview. *Oxford Institute of Ageing Working Papers*, 4- 10. Retrieved from [https://www.ageing.ox.ac.uk/files/workingpaper\\_105.pdf](https://www.ageing.ox.ac.uk/files/workingpaper_105.pdf)
- Siddhisena, K., A., P. & Rathnayake, K. (1998). Aging of population and elderly care in Sri Lanka. *Sri Lankan Journal of Population Studies*.

Silva, S., H., N., M. & Thabrew, K., C., K., D. (2018). Social work interventions on ageing and changing role of the family in elder care. E- journal of social work, 2(2), 33-39.

Singer, C. (2018). Health effects of social isolation and loneliness. Journal of aging life care, 2018 Spring. Retrieved from <https://www.aginglifecarejournal.org/health-effects-of-social-isolation-and-loneliness/>

Snedeker, L. (2017). Aging & Isolation — Causes and Impacts. Social work today, 17(1), 24. Retrieved from <https://www.socialworktoday.com/archive/011917p24.shtml>

UNESCAP. (2015). Retrieved 20 June 2020, from <https://www.unescap.org/>

WHO. (2002). Retrieved 02 April 2020, from <https://www.who.int/>

WHO. (2008). Retrieved 05 April 2020, from <https://www.who.int/>

WHO.(2015). Retrieved 11 December 2020, from <https://www.who.int>