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A larger print version of this newsletter is available from the Communications Secretary.

The Fourth Newsletter of the Growing Older Programme: Ethnicity and Quality of Life

In this fourth newsletter of the ESRC Growing Older Programme I would like to introduce myself as the Programme's recently appointed Deputy Director. The topic of this issue of the newsletter - ethnicity and quality of life in old age - is an area that has long been a major focus of my own research in the United States. I have primarily worked with older people in numerically small US ethnic groups - American Indians, Pacific Islanders, and Asian Americans - whose presence on the 'radar screen' of policy-makers is weak in comparison to African Americans and Hispanics. Geographic isolation, lack of political clout, and assumptions about the self-sufficiency of 'model minorities' have been among some of the barriers to investigating the situation and experiences of older people in these ethnic groups. Yet the growth rate of the older population among ethnic minorities now far exceeds that for older white Americans, and the increasing service needs of these older people is creating a demand for policy- and practice-relevant research across the disciplines. As researchers venture into studies with black and ethnic minority older people, issues such as insufficient representation of these groups in national survey samples and difficulties in recruitment and retention of minority study participants often present considerable challenges to conducting this research.



Many of these challenges parallel those facing researchers doing work with ethnic minority older people in the UK. The five Growing Older projects highlighted here are specifically focusing on quality of life in old age among Black-Caribbean, Asian, Irish, and other British ethnic populations. These studies are using innovative methodologies combining quantitative and qualitative data to explore quality of life as subjective, lived experience, and to describe and identify its context, variations and predictors among these groups. The process of conducting this research - including issues like working with ethnic advocacy groups and community organisations and service providers to recruit respondents who fit the definition of the ethnic study population, and to help shape findings into culturally appropriate messages - has presented a significant learning curve for the projects. How the projects have creatively addressed such issues and findings to date across the wide range of research questions being explored are described in this issue of the newsletter. ■

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Qualitative Methods for Investigating Ethnic Inequalities: Lessons from a Study of Quality of Life among Older People

James Nazroo and Ini Grewal

Whilst there is agreement that studies of ethnic inequalities are important, how such studies should be carried out remains less clear. High quality research involves selecting an appropriate research approach, systematic sampling, methodical data collection, rigorous data analysis and well-reasoned interpretation. This formula is no different for research on ethnicity, but certain aspects may become amplified. We shall discuss three elements of this, namely: research approach, sampling, and ethnic matching of interviewer and respondent. We will draw on experiences gained during the qualitative phase of the GO Programme project *Ethnic Differences in Quality of Life at Older Ages*, which sought the views of older people from four ethnic groups.

RESEARCH APPROACH

It is worth considering and contrasting two approaches typically adopted (often implicitly) in qualitative studies of ethnicity: classical ethnography and what might be called comparative studies (which often draw on an ethnographic tradition).

Classical ethnography is orientated to an in-depth investigation of a community; such research is concerned with experiences, needs and problems as defined by the community. So, it is able to provide an in-depth account of a community from the perspectives of its members. However, the lack of a comparative perspective inherent to such an approach has two major drawbacks for a study of inequality. First, it runs the risk of making the community under investigation look exotic, or of portraying some of the behaviours of members of the community as 'alien', 'different' and 'other'. Second, it is unable to determine the extent to which and why the features and experiences of a community are different from those of other communities.

Of course, by their very nature studies that adopt a comparative approach (even if rooted in ethnography) have greater potential to overcome these problems. But they also face difficulties that are amplified in studies of ethnicity. First, a comparative investigation is inevitably concerned with an issue, or

problem, that is defined *a priori* so, although it can retain some grounding in the experiences of those being researched, the main orientation of data collection will be decided before fieldwork begins. Second, the type of data collected from each community or group under investigation must be comparable, leading to an approach that is the same for the different groups and, consequently, that cannot be entirely responsive to the experiences or idioms of particular groups.

SAMPLING

In order to devise a sampling strategy we need to answer three questions: whom do we want to sample, where do we sample from, and how will recruitment take place?

In terms of *whom* to sample, there are a number of related issues. Are there specific ethnic groups that the study is concerned with, or a range of groups? Should comparative work focus on groups that are 'similar' with regard to the key characteristics being studied or attempt to maximise difference? Should groups be as culturally homogenous as possible, or should we accept the heterogeneity that is common within constructed ethnic groups? Should ethnic groups be defined in terms of cultural attributes (internally defined), or structural attributes (externally defined)? Finally, should the ethnic categorisation be self-ascribed, or the

researcher's interpretation? Of course the answers to these questions depend on the issues being investigated, but they should be considered.

Where to recruit the sample from involves the classic problem of 'hard-(for us)-to-reach' groups that are difficult to sample using traditional methods, a problem that applies not only to ethnic minority groups, but also to older people. Although this might seem to be a problem that is particularly relevant to the probability sampling techniques of quantitative research, qualitative studies also need to ensure that the full range of people in the community under investigation are covered. How do we ensure that sampling from particular sites (for example community centres), or using particular techniques (for example snowballing), gives adequate coverage of the full range of circumstances? Are alternative strategies feasible?

Finally, how is the recruitment of respondents conducted? A lack of an infrastructure for ethnic or language matching in fieldwork agencies, or research departments, means that recruitment often has to be done by white recruiters in English. This may well have an important influence on the characteristics of the sample.

ETHNIC MATCHING

Studies of ethnicity often use ethnic matching of interviewer and respondent to avoid anticipated difficulties in recruitment and data collection. The rationale behind this is that matched interviewers should be culturally aware and more likely to obtain access, and will be able to conduct the interview in the respondent's first language. Language is crucial for qualitative work. Indeed, the use of translators, or interviewing in a second language, sits very uneasily with qualitative research's claim to enable respondents to describe their situations and emotions in their own words.

Beyond language, though, a central issue is how we define ethnicity for matching. How closely matched do the interviewer and respondent have to be? For example, our study involved second-generation interviewers and first-generation respondents, Indian Punjabi Sikhs interviewing Pakistani Punjabi Muslims, and mixed ethnicity people interviewing non-mixed people. Do these qualify as matched inter-

views? We also need to consider whether ethnic identity should be a prime factor when the need to match is considered - what about gender, class, age, regional affiliation, etc.? Perhaps we are primarily concerned with ethnic matching because we consider explanations to lie in culture, if not why prioritise ethnic matching? Or are we matching because we think that the 'other' is so different that this is the only way to access his/her account? Instead, should the issue be one of orientation to accounts as constructed by those being researched - effectively cultural sensitivity? If so, can we expect skilled researchers to be able to identify and explore the cultures and 'sub-cultures' of those they research regardless of their familiarity with these cultures?

In practice, to achieve ethnic/language matching it is often necessary to use freelance interviewers and this sometimes leads to freelancers being employed purely on the basis of being able to speak the language, with little consideration for their interviewing skills. In fact, interviewers need an appreciation of what they are doing,

and why. Hence, it is useful to involve freelancers in the development of a study and to adequately train them as part of the study. Currently, this is rarely the case and more commonly interviewers are brought in at, and only for, the fieldwork stage.

As well as an impact on the study, the sporadic nature of this arrangement has career implications for ethnic minority interviewers, many of whom have to rely on a 'day job' for a regular income, which affects their ability to develop a research career. Also the demands of their freelance work almost always includes the responsibility to translate and transcribe interviews that are not conducted in English, without regard for their transcribing skills, or access to appropriate equipment.

CONCLUSION: BUILDING A CAPACITY

We recognise that solving these methodological issues is not straightforward. It may be that it is only now that we have a significant quantity of studies involving ethnic minority

groups that we can begin to address issues of quality. That is not to say, of course, that good research on ethnicity has not been carried out. Indeed, there are some highly acclaimed studies from which we should learn good practice, generate benchmarks for quality, and set standards. However, until the research infrastructure in the UK can adequately support research that includes ethnic minority groups, it will remain difficult for researchers to meet the standards achieved by similarly resourced researchers investigating other issues - the lack of an adequate infrastructure escalates costs. Furthermore, this reflects unfairly on the careers of ethnic minority researchers, who end up working with unsatisfactory tools and who often find their research and themselves marginalised. ■

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Working with Older Women from Communities in Sheffield: Methods Issues

Lorna Warren, Joe Cook and Tony Maltby

One of the key aims of the *Older Women's Lives and Voices* project was to find out more about the experiences of women aged 50+ from a range of ethnic groups. In general, relatively little research has focussed on the lives of older women. Where it has, the issue of ethnicity tends to have been marginalised and certainly under-theorised.¹ This article concentrates on a selection of methods-based issues arising from our efforts to work with older women from existing social groups and political fora in Sheffield in attempting to address some of these shortfalls.

RECRUITMENT

Recruitment of participants to the first strand of the study - discussion groups - was characterised by constant revision to plans and intensive out-reach work. We soon realised, for example, the obvious need to cap the number of communities we had hoped to involve in order to avoid the risk, within a limited budget, of diluting findings. The process of capping was rather less predictable than we might

have imagined, however. A plethora of recent and ongoing projects within the City raised the issue of the over-researching of some minority groups. In some cases, contacts advised us not to attempt to recruit from the communities (Pakistani and Bangladeshi). In another, visits to the given community group (an African-Caribbean lunch-club) were welcomed but the older women attendees, participants in several projects, including biographical work, made it

clear that they had come to perceive of research as tokenistic and even intrusive and did not want to participate in our study without guaranteed changes to services.

In contrast, other communities were relatively under-researched and community workers were very keen to find a forum for the voices of the women within them. Contact with such workers (Irish communities) was made through the Sheffield Better Government for Older People (BGOP) network² and wider community networking. Personal contacts also played a role, however. A close colleague and friend helped us gain access to two Chinese associations with whom she worked as project manager, whilst a replacement was found for the Black-Caribbean³ group thanks to the project secretary. She successfully approached a social group of older women new to research and based at the church which she attended.

Even where access was immediate, negotiating the fine details of the involvement of groups in most cases proved extremely time-consuming, requiring several visits a week to build up trust with community representatives, as well as the older women ►

themselves. Gatekeepers to groups were uniformly over-worked and under-funded, and commitment to the project constituted an additional drain on their time and resources.

The recruitment of our final sample, comprising older women from Black-Caribbean, Irish, Chinese, Somali and White British communities, was a key element of what we have come to refer to as the organic nature of participatory approaches.

FIELDWORK PRACTICALITIES

Working with older women from different ethnic groups at the community level required the provision of appropriate venues, transport, refreshments and translation services.⁴ In terms of venues, there was potential for individual women to feel alien or ill at ease inside a religious building. Many community venues are in former churches which are unsuitable meeting places for Muslim women, for example. Since, in most cases, we recruited pre-existing groups we booked venues where members routinely met: effectively, the women's 'own ground'. The result was a relaxed atmosphere and a good flow of conversation. As an exception, two of the discussion groups were run in the University Department where a couple of the research team are based. In this instance, participants welcomed the opportunity to visit sites which are usually off-bounds to community groups and, in one woman's words, to 'mix[ing] with scholars of in-depth achievements'.

In-house caterers were not always available and mainstream caterers typically did not provide for cultural variation in diets. Where this was the case, groups were allocated funds directly to arrange refreshments which suited their tastes.

In situations where English was not the first language of the older women, interpreters attended discussions. However, despite careful briefing, differences still arose in the degree to which the interpreters appeared in tune with the participative nature of the groups. In one case, the group organiser acted as interpreter. She was a dominant voice, accustomed to representing the members of the group. When questions were asked, she was the one who usually replied and, in the early stages of the research, often without translating the question to the older women.



The group organiser was very eager to capture the women's very immediate experiences and needs. At the same time, it was not always easy to judge whether the silence of the members of the group reflected accustomed non-response, a captive and consenting audience, or the lack of opportunity to reply. Efforts to ensure that discussions were fully interpreted in the case of non-English speaking groups meant that breadth of coverage given to topics was often compromised.

COMBINED APPROACHES

The account so far has related mainly to the involvement of older women in discussion groups. However, the study also used individual interviews to find out about participants' lives.⁵ What this deliberate combination of methods usefully helped to tap were the overlaps and divergences in experiences and priorities for older women across different ethnic groups. In general, discussion groups provided an opportunity for participants to share information and to highlight positive and negative aspects of their lives and of support and services. Interviews guaranteed confidentiality and anonymity, and were relatively less constraining in terms of language barriers due to the provision of one-to-one interpretation. They allowed women to set their responses in context and to talk in more depth and more openly about their experiences than may have been possible in a group. Nevertheless, there were differences between groups in their foci and responses to certain topics. For example, Chinese and Black-Caribbean

women did not provide details about their families in open fora. Somali women deemed the topic to be totally private and, like the Chinese older women, wanted to focus on the public sphere.

The subject of health can be used to give a brief illustration of the usefulness of combined methods in capturing the complexity not just of needs but also older women's experiences of health and health-care related issues. Across all communities, health was one of the main topics of discussion. In the group settings, women acknowledged the embodied relationship between health and ageing and highlighted the efforts they made at making the connection a positive one at the level of individual identity. Health could define, as well as potentially limit, their roles and relationships. For women from the Black-Caribbean community in particular, health issues had structured their lives in both the public and private spheres. Women described their position as employees recruited from overseas to work in low status jobs in an often inherently racist health care system characterised, moreover, by a highly gendered and racialised division of labour. Their life stories also told of the discriminatory treatment that they receive as individual patients at the hands of individual practitioners. The implications for service provision of the sum of findings was that a 'joined-up' approach⁶ to older women's health concerns is not enough but needs to be accompanied by a radical critique of the norms and values underpinning the broader organisation and discourses of welfare.

SUMMARY OF LESSONS FOR GOOD PRACTICE

Methods-based lessons for good practice have to be understood in a general situation in which minority ethnic older people and women from all ethnic groups are notably absent from fora and other self-help and campaigning organisations.

❖ Reaching diverse, often socially and economically excluded communities, even with pre-existing contacts, requires face-to-face meetings and intensive inputs of time and energy to build trust and demonstrate commitment. Funding bodies need to be persuaded to support outreach work at the community level. Community groups require reassurance that research will be purposeful. When using participatory methods, it is better to work in-depth with a small number of groups and to clarify and agree on sets of aims and objectives for the project, as well as what is to be left behind at the end of the initiative.

❖ Where methods include discussion groups, the practical arrangement of venues, transport, catering and, above all, interpretation need careful and thorough attention, as well as adequate resourcing. It is important to satisfactorily brief interpreters about the participatory nature of methods, especially if they are unfamiliar with research, and to take into account their relationship to the group in the analysis of findings. Literal translation is rarely possible and interpreters have to be trusted to lead in the course of the discussion. Checking transcripts and following through on points by holding subsequent discussions is one way to maximise efforts to ensure that participants' voices are heard.

❖ One-to-one interviews and group discussions are a popular means for older people, especially users of services, to put over their views to service providers.⁷ Combining the two methods helps to ensure that needs, especially where current and pressing, are contextualised. Such an approach may also demonstrate to still marginalised groups of older women the potential for their greater involvement in shaping policy and influencing service development.⁸ ■

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2. The involvement of one member of the research team with the BGOP pilot also opened doors to working with older women attending or resident at a number of resource centres, as well as to members of Sheffield's 50+ group (both BGOP related initiatives).
3. In common with other researchers within the GO programme (Afshar, Franks, Maynard and Wray), we are using the term 'Black-Caribbean' to reflect the fact that participants from this group came from different Caribbean islands and saw their identity as Black rather than 'African'.
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5. A team of 10 older women volunteers was

recruited from members of the discussion groups and trained to carry out interviews alongside the project team members. Unfortunately, there is not room in this brief article to describe this aspect of the research in detail.

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Researching Social Disadvantage Amongst Older People Belonging to Ethnic Minority Groups

Thomas Scharf

A research group based at Keele University is examining issues relating to social exclusion and quality of life of older people living in socially deprived areas of Liverpool, Manchester and Newham (London). In broad terms, the research is examining the ways in which social exclusion may affect different groups within the older population, and seeks to identify factors associated with deprived neighbourhoods that have the greatest bearing on quality of life in old age.¹ The research has involved two major stages of fieldwork. The first, completed in Spring 2001, was a survey of 600 people aged 60 and over living in selected electoral wards of the three cities. The second, completed in early 2002, involved follow-up interviews with 90 people who had previously taken part in the survey phase.

A key focus of the Keele research has been to identify differences in relation to social exclusion and quality of life for different groups of older people, including people belonging to ethnic minorities. This contribution to the Newsletter explores some of the main issues that have arisen in our research on (and with) older people belonging to a range of ethnic minority groups.

WHICH GROUPS?

One of the difficulties associated with past research on ethnic minorities has been an inability to distinguish

adequately between different groups of older people. Typically, a nationally or locally representative survey of older people would yield too few people from particular minority groups to ►

facilitate analysis according to an ethnicity variable. One way around this problem might be the 'pooling' of data from successive years or waves of a survey (as undertaken by Evandrou²), but this is rarely possible and not always satisfactory. An alternative strategy - well-suited to community-based studies - is to draw research participants from particular minority groups. In our project, a decision was made to collect data from the numerically largest ethnic minority groups in each of the study areas. Somali people in Liverpool, Pakistani people in two Manchester wards, Black-Caribbean people in a third Manchester ward, and Indian people in Newham were targeted in this research as a way of generating sufficient cases to allow at least a basic level of analysis according to ethnicity. In all, 100 of the 600 people who took part in the survey stage of our research were to be recruited in this way (the remainder being selected at random using a system based on the electoral register). The advantages of such an approach were felt to outweigh any disadvantages associated with the use of two different sampling systems. In particular, by gathering sufficient data from people in a select range of groups it would be possible to comment on the specific nature of social exclusion and disadvantage affecting older people from different backgrounds.

SECURING ACCESS

Strategies based on developing contacts with local organisations and snowballing represent the most commonly used means of recruiting people from minority groups into research programmes. In this research, it was possible to build upon existing links with groups within the local communities to generate the different samples. However, this is never straightforward, especially when dealing with different groups in each study area. There is inevitably some resistance within minority groups to participating in research that appears to have no obvious benefit to the community. Whilst supporting the need for research, group representatives and professionals working with minorities often comment on the lack of feedback from researchers to research participants. Overcoming cynicism about the motives of researchers is therefore an important first step in securing access to research

participants. In our research, we were able to make progress by:

- ❖ seeking to convince gate-keepers that the absence of recent research might limit the minority groups' ability to influence policy;
- ❖ recruiting fieldworkers from the relevant groups and, through appropriate training, developing individuals' skills in social research;
- ❖ maintaining regular formal and informal contacts with relevant community organisations and individuals;
- ❖ agreeing to feed back the findings from our research in a variety of ways.

Without the active involvement and support of people belonging to each of the minority groups, allied with the overwhelming commitment of our fieldworkers, it would have proved difficult for the research group to achieve its target sample of 100 interviews with older people from the relevant groups.

DOING THE RESEARCH

The survey phase of this research involved conducting face-to-face interviews with older people using a standardised questionnaire. The questionnaire was piloted extensively, with particular emphasis given to the applicability of questions to the situation of people from minority ethnic groups. Here a balance had to be struck between the demand to ensure strict comparability of findings of our research with those of other studies and the desire to capture fully the circumstances of older people belonging to minority groups. For example, our research replicates aspects of a recent Survey of Poverty and Social Exclusion, in particular by collecting information about individuals' access to a range of items regarded by a majority of the population as being necessities of daily life.³ To achieve comparability with the broader survey only slight modification of these items was possible. The same applies to standard 'quality of life' measures, such as the Philadelphia Geriatric Center Morale Scale,⁴ which are not necessarily well-suited to the situation of ethnic minority older people. However, where we felt that standard questions and response categories did not adequately apply

to minority groups, greater use could be made of open-ended questions. Where appropriate, it has also been possible to broaden our understanding of the limitations of standard approaches to measuring social exclusion, deprivation and quality of life in the follow-up interviews that we have conducted with people belonging to some of the minority groups represented in the survey.

USER ENGAGEMENT

A key feature of this and other projects within the Growing Older Programme has been the desire to engage actively with a range of user groups. Contact with older people from ethnic minority groups who agreed at the survey stage to keep in touch with the research is maintained through the distribution of a project newsletter. There has been a range of informal and formal contacts with groups and individuals that represent minority communities in the study areas. The research group has prepared short summary reports of the survey findings relating to particular minority groups and discussed these with the groups. It was felt important to write such reports in a way that allows study findings to be used in a number of practical ways, for example, to support funding applications that build capacity within local communities. In many ways this aspect of our research has been the most rewarding. It has also led to a collaboration between the Keele research group and Help the Aged that could potentially yield important benefits for older people belonging to ethnic minority groups who live in areas of Liverpool and Manchester. ■

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Interviewing Black and Minority Ethnic Older People

Jabeer Butt, Jo Moriarty, Michaela Brockmann and Chih Hoong Sin

The Growing Older Programme is perhaps unique in terms of ESRC (and many other research) programmes in the number of projects that are paying specific attention to Britain's black and minority ethnic communities. This attention comes at a time of continuing concern about the quality of support provided to older people from these communities (e.g. NSF for Older People) as well as the regularity with which black and minority ethnic communities are absent from 'mainstream' research.^{1,2}

This welcome interest in black and minority ethnic communities has been accompanied by a growing literature on how to effectively engage members of these communities in research. While the discussion of effective methodologies is still in its infancy, it has raised several important issues that researchers need to address in carrying out studies. The issues raised include: the construction of representative samples; securing consent; the viability of using standard instruments (particularly those that are health related); whether it is important to 'match' interviewer and interviewee; as well as the value and viability of carrying out interviews in 'community languages'.

Our study of quality of life and social support among older people from different ethnic groups addressed many of these issues, but in this article we only explore the role of interviewers.

OUR METHODS

A challenge for researchers must be to recognise that research interviews, in common with every other form of social interaction, take place in a context in which social and material differences exist, including racism. As researchers, we must attempt to ensure that we do not replicate it. One way we addressed this was to attempt to match the 'ethnicity' of interviewers with that of respondents. We attempted to do this in terms of Asian (including Chinese) older people, African and Caribbean older people as well as white older people.

In terms of African and Caribbean older people there is sometimes a

view that because they use English, there is perhaps less of a need to match in terms of ethnicity. For instance, some researchers have commented on African and Caribbean older people's use of language, choosing not to use the term 'depression' but instead talking about being 'down-hearted'.³

Furthermore, language is not the only issue being addressed by matching. In our experience trust, based on some recognition of a shared experience, is significantly aided by matching.^{4,5} During debriefings, our interviewers reported that matching was important because the older people felt that the 'interviewer would understand and relate to their experiences'. Interestingly, members of the research team have also received comments from white respondents about the difference between them.

Effective communication was aided by matching in three ways. Firstly, we chose interviewers not only because they were able to speak in the same language as the respondent, but interviewers who were also confident and capable enough to engage in a conversation that used everyday language. Second, we chose bi-lingual or multi-lingual interviewers rather than interpreters because it would aid the conversational style we were trying to achieve with our interview schedule. We were also aware of the limitations of using interpreters, particularly family members of the respondent.⁶ In debriefing our interviewers pointed out that on occasion other people were present and these situations would have been made particularly difficult if there was a further presence, beyond which interpreters can act as a filter, making it

harder for the interviewer to get a true sense of the respondent's own views.

Third, the fact that interviewers could use the relevant community language also played a part in establishing trust and rapport with the respondent. One interviewer reported that being able to speak in Hindi 'broke the ice' with respondents, even though the interviews were subsequently conducted in English (I think this happened more than once). Another interviewer pointed out that respondents needed to feel confident about what they said and that 'it is much harder to feel confident if you are not talking in your language of choice'.

Importantly, one of our interviewers concluded that ethnic origin and language may make a difference to the willingness of respondents to discuss sensitive topics - issues that are rarely discussed with strangers. The example she gave was of one woman speaking of her readiness to discuss her husband's drinking and gambling.

The interviewers were aided by the interview schedule we developed. We avoided technical language or, where required, we ensured that there was an explanation that could easily be translated into everyday language (such as when we enquired if respondents had seen a physiotherapist). We also recognised that metaphorical questions posed difficulties. In the pilot we attempted to explore identity by replicating a question that had been used in earlier research with people from minority ethnic groups. The question asks respondents to describe themselves on the telephone to a person whom they have never met. Respondents were perplexed as to how such a situation could possibly arise and therefore found it difficult to respond to this question. There may also be difficulties in successfully translating questions that require a choice between several intervals (for example a number of the Asian respondents saw little difference between 'some of the time' and 'a little of the time').

We have followed through this sensitive approach by including a payment that is additional to the interview fee for the interviewers to translate and transcribe their interviews. This has allowed us to capture what one of the interviewers

describes as the 'essence' of the interview. This means that the translation aims to capture not only what was said, but how it was said.

IMPLICATIONS

To conclude, choosing to match interviewer and respondent appears to have been beneficial to our study. As our knowledge base on research with black and minority ethnic older people develops, it may be that we become aware of the disadvantages, such as the potential for respondents to answer in ways that they see as being socially desirable. Notwithstanding this, it does appear that one way of improving the social interaction that is at the heart of good interview, is to look at the matching of interviewer and respondent. ■

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Issues of Ethnicity in Researching Older Women

Haleh Afshar, Myfanwy Franks, Mary Maynard and Sharon Wray

Our project is looking at what quality of life means to older women from different ethnic and social backgrounds. It aims to explore how ageing might be successfully negotiated by different ethnic groups and whether positive experiences might be translated or shared across different cultures. The research has adopted a qualitative approach, using either focus groups or interviews with 170 women. The initial proposal named three ethnic groups for inclusion, Afro-Caribbean, Asian and white British women who were able-bodied and in the age range of 60 to 75 years.

Immediately the process of accessing potential participants began, it became apparent that this formulation was problematic for a number of reasons. First, a common sense and unreflexive categorisation of minority ethnic populations led to the homogenising of those with different cultures and backgrounds. To make a rather obvious point, not all South Asians are Muslims or Indians or Pakistanis. Within the Pakistani and Indian communities there are differences of religion and of language. There are cultural differences between African Caribbean islands, although participants' experiences of racism in Britain has made them feel that they are 'all in the same boat'. 'White' does not connote a uniform group. It cannot be assumed, then, that such terms imply a shared cultural identity. Differences may mean that potential research participants have disparate as well as shared views on ageing and the meaning of later life, even within supposedly similar ethnic groupings.

It was, therefore, necessary to deconstruct the categories in the original proposal in order to highlight 'difference' and diversity. However, this raises further questions. How many differing groups and ethnic categories is it possible for one research project to include? How far should we go in exposing the differences within difference and how far can we go given the constraints of time and budget? There is the potential danger here of doing so much deconstructing that it becomes impossible to make any general statements about the populations one is studying. There is also a tension between allowing ethnic categories to emerge from the data during the course of the research, rather than imposing them *a priori*, and the need to work with certain categorisations in order to ensure that ethnic diversity is sufficiently represented in the first place. In this

research we adopted a compromise by locating the first participants through community groups and projects designed for specific cultures. This meant that the project eventually included women who defined themselves as African (or black, since some women did not see themselves as 'African' and disliked the term) Caribbean from different Caribbean islands, Bangladeshi, Indian and Pakistani and as white, including first generation Polish migrants, Irish and non-migrant women. This was ascertained by asking 'if you are asked to fill in a form which requires you to give your ethnicity how do you fill it in?', rather than putting the question more directly. Contacting community groups offers a relatively quick way of gaining access to minority ethnic people, although doing so through male community leaders and other gatekeepers has its problems. It also runs

the risk of possibly skewing the characteristics of participants. Snowballing from this point would lead to access to individuals in their homes.

A second issue relates to age, since we sometimes found that research participants were outside the range specified. For example, some Pakistani and Bangladeshi women reported feeling older at an earlier age than other participants. Yet, not to include them would have been to have imposed culturally loaded western assumptions concerning the meaning and definition of later life. At times, we also found ourselves interviewing women who were older than the specified 75 years. It was too culturally insensitive to turn them away on account of being too old. Further, not all the South Asian women knew exactly how old they were as they had no original birth certificate. In the event, then, the majority of the women interviewed were within the previously agreed range. However, a few were in their late 50s or between 76 and 85.

Defining 'able-bodied' also presented problems. This was included in the original proposal in order to focus on those whose 'successful' ageing was not constrained by lack of mobility or ill-health. In practice, of course, the women saw things in a quite different way. Despite what seemed to the researchers as potentially debilitating health problems for some, such as arthritis, asthma and heart disease, they reported getting on with their lives and feeling positive about themselves. In fact, across all cultural groups women spoke of their efforts to remain active at all costs. They challenged the very simplistic dichotomy disabled/able-bodied that characterised the research proposal.

Once in the field other issues relating to researching ethnicity became apparent. For instance, researchers on the GO Programme have discussed the tactic of 'matching' interviewer and interviewee, a practice advocated in some feminist, disability and other kinds of research in order to minimise power relations, make participants feel comfortable and increase rapport. In a project concerned with age, gender and ethnicity, however, it is difficult to decide which of these variables should be given priority or, indeed, whether

there are others (religion, language) which should be taken into account. In fact, it is likely that different ones would be prioritised by particular groups. Our research was constrained in that three out of the four researchers were white. We are struck, however, by how little work exists on interviewer/interviewee impact and its influence on the research process and outcomes, particularly when researching across cultures. Indeed, it was, at times, difficult to convince some participants that we were not from the DSS or going to report what they said back to their families.

Another issue which arose for us is in relation to language and the construction of meaning. Interpreters were used on a number of occasions and women were also interviewed in their second language, which raises different concerns, since this puts pressure on the interviewee. With interpreters, there may be discrepancies between the length of the interview, because of the translating, and the amount of information gained. Further, some interpreters insisted on speaking about the interviewee in the third person, thereby impeding access to direct quotes. There are also matters in relation to the translation process, for instance the Christianisation of terms by the interpreter in order to make the researcher understand. An example of such a process was when an interpreter declared that an interviewee was 'baptised a Sikh'. There are also issues of power in working through male interpreters, through interpreters who know the interviewees or through professionals or volunteers associated with local communities. These people have their own particular political agendas, which may not be apparent to an incomer. They might use the interview as an opportunity for ventriloquism. One suggestion to combat the possibility of interpreter bias is to have the whole interview transcribed by a translator. However, this raises ethical and budgetary issues and, at the end of the day, there can be no linguistically absolute translation.

A number of other matters have also arisen during the course of this research. Some minority ethnic women expressed anger about being over-researched. At a Bangladeshi Centre, for instance, there were four research projects already in a queue waiting for

interviews. A group of Black-Caribbean women complained that they were asked the same questions over and over again but never saw any outcomes or feedback. In contrast, a group of non-migrant inner-city women living in a sheltered housing complex were angry about never being consulted and felt that they were continually overlooked. These older white women are not in demand as research subjects and do not attract research funding. Stones are regularly thrown at their windows and they perceive themselves to be under siege. They are discontent and prey to the neo-fascist propaganda which comes through their letter boxes. They claim that community resources go to other groups and not to themselves.

During the fieldwork, we were made aware of the tensions which existed between various faith and ethnic groups. For instance, some Black-Caribbean women felt that the Muslims receive double provision because of the Islamic requirement for gender segregation and some of the Hindus had felt under threat from Muslim youth. The Ousley Report draws attention to the manner in which competition for resources engenders conflict between groups, with some minorities within minorities feeling that they are being ignored.¹ Our research participants were brought together at a day meeting in York in July 2001 in order to offer them feedback and for them to have the opportunity for further input. There were some voices advocating an inclusive agenda for older women, especially among those from India and Pakistan who spoke out for shared resources. Others represented themselves as in more need than other groups, underlying the potential for rivalry and discord. ■

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Project Updates

Brief updates to keep readers informed about the progress of GO projects

DEFINING AND MEASURING QUALITY OF LIFE

Coping with Life and Using Services: How People Over 75 Maintain Their Dignity and Self-esteem When Faced with a Limiting Physical Condition (John Baldock - jcb4@ukc.ac.uk)

This project completed its period of ESRC funding after two years at the end of October 2001. We followed a sample of 35 people over 75 who were living alone and whose health had recently deteriorated to a point that they were effectively house-bound. We measured changes to their self-esteem and evaluated how their sense of self was affected. We have also considered the implications of our findings for service providers. Article to appear in *Quality in Ageing*, March 2002, one conference paper and one Report-back to Respondents available from the researchers.

Quality of Life of Healthy Older People: Residential Settings and Social Comparison Processes (Graham Beaumont - gbeaumont@clara.net)

The project continues to progress on schedule. The second main phase of interviews is just being completed, and as 160 of the 193 original participants were available, the attrition rate of only 17 per cent is much more favourable than had been anticipated. The third and final phase is just beginning. Meanwhile, preliminary analyses based on the first phase data are being undertaken and these will be informally reported in various ways during 2002.

Adding Quality to Quantity: Older People's Views on Their Quality of Life and Its Enhancement (Ann Bowling - a.bowling@pcps.ucl.ac.uk)

For the quantitative survey: The four waves of the survey have been merged and analysis using SPSS is continuing. Two papers have been submitted for publication. Regarding the qualitative study: the data from the 80 baseline interviews has been analysed. Zahava Gabriel is currently carrying out follow-up interviews to examine changes in older people's quality of life. Additionally, a student on placement (Priya Solanki) has carried out a postal follow-up study of changes in quality of life (response rate = 70 per cent).

Spiritual Beliefs and Existential Meaning in Later Life: The Experience of Older

Bereaved Spouses (Peter Coleman - pgc@soton.ac.uk)

Our project was completed in the summer. Of the 28 participants who entered our study, 26 completed the three interviews over the one year fieldwork involved. We held a thank you lunch and get together for our participants in September during which we also provided feedback on the study. We submitted our End of Award Report to ESRC in October and have just received notification that it has been graded 'outstanding'. Dr Marie Mills is now working part-time on a one year study funded by the Nuffield Foundation on the spiritual beliefs and attitudes to churches of a large sample of SAGA readers, which developed from articles about our ESRC GO research written by Marie for SAGA magazine. We are now engaged in developing a follow-up proposal to our main study to submit to ESRC.

An Anthropological Investigation of Lay and Professional Meanings of Quality of Life (Chris McKeivitt - christopher.mckeivitt@kcl.ac.uk)

This project ended in July 2001. A brief article about the project appeared in *Stroke News* Summer 2001. An invitation to comment on the article resulted in a number of telephone calls, letters and emails from individuals who had had a stroke, and their family members. The latter all commented that stroke can affect the quality of life of family members and not just the individual who had a stroke. Scientific papers have been submitted to journals and conferences and writing up is on-going.

Environment and Identity in Later Life: A Cross-Setting Study (Sheila Peace - s.m.peace@open.ac.uk)

In February we completed interviews in two of our three study areas, with all the fieldwork due to be completed by the end of March. For each of the respondents we have compiled a dossier which contains the interview, housing history, quality of life questions from HOOP, basic respondent and accommodation characteristics, health and financial data, local area mobility mapping, NEO five-factor inventory, (optional) full HOOP questionnaire, and photographs. Data from these interviews is being transcribed and entered into Nud.ist for the first stage of analysis. Preliminary findings and reflections on the methodology are being presented at the British

Psychological Society conference at Blackpool in mid-March as part of the GO symposium. In April we will be recruiting three older people to feature in a video which we are making with a consultant in May/June. One person will be recruited from each of our study areas, and the intention is to illustrate three different aspects of our research findings in a particularly visual way.

INEQUALITIES IN QUALITY OF LIFE

Influences on Quality of Life in Early Old Age (David Blane - d.blane@ic.ac.uk)

Data collection completed June 2000; ongoing data analysis and dissemination of results; four articles submitted to peer-reviewed journals; presentations made to four national or international conferences; on-going contact with users in voluntary sector, central government and local government; further presentations, user contact and peer-reviewed articles planned.

Inequalities in Quality of Life Among People Aged 75 and Over Living in the Community (Elizabeth Breeze - elizabeth.breeze@lshtm.ac.uk)

The end of award report was sent to ESRC at the end of April 2001 and should be posted on the Regard website (<http://www.Regard.ac.uk/>) by the end of March. The data set is deposited in the ESRC Data Archive and ready for use. A project 'Findings' is available from the GO Programme office or web site. Some further analysis has been undertaken by the researchers since the project officially finished and papers will now be prepared for submission to journals.

Ethnic Inequalities in Quality of Life at Older Ages: Subjective and Objective Components (James Nazroo - j.nazroo@public-health.ucl.ac.uk)

We have now completed fieldwork for the qualitative phase of the study. This has involved interviews with older people from four ethnic groups (Jamaican, Hindu Gujarati, Punjabi Pakistani and white English). Analysis and paper writing for the qualitative side of the study is now well underway. We are also a considerable way into the secondary analysis of quantitative material from the Fourth National Survey of Ethnic Minorities. This has involved identifying dimensions of quality of life in the qualitative work, then identifying

indicators of these dimensions in the quantitative data, and then using factor analysis to tap into the underlying dimensions of quality of life measured by these quantitative indicators. We have also been working on imputing missing values in the quantitative data. We will shortly be submitting articles to peer review journals and conferences.

Older People in Deprived Neighbourhoods: Social Exclusion and Quality of Life in Old Age (Thomas Scharf - t.s.scharf@keele.ac.uk)

Analysis of data collected in a survey of 600 older people living in socially deprived neighbourhoods of Liverpool, Manchester and East London has continued. Findings from the survey are currently being written up for both academic and policy audiences. The research group has also presented papers at a range of national and international conferences. A second stage of data collection, involving in-depth interviews with 90 people living in the same neighbourhoods, was completed at the end of January 2002. These interviews have addressed the ways in which older people manage the local environment and potential barriers to social participation. Detailed analysis of the qualitative data will commence in April 2002 once transcripts of all interviews have been produced.

Exploring Perceptions of Quality of Life of Frail Older People During and After the Transition to Institutional Care (Susan Tester - susan.test@stir.ac.uk)

Summary of findings of focus groups available on-line (<http://www.stir.ac.uk/Departments/HumanSciences/AppSocSci/SP/ESRC/index.HTM>). Observation completed, analysis in progress. Main fieldwork mostly completed, analysis in progress. One book chapter published, one journal article forthcoming, two journal articles under review, two in preparation. Four papers and four posters presented at national conferences. Two papers presented at international conferences.

TECHNOLOGY AND THE BUILT ENVIRONMENT

Transport and Ageing: Extending Quality of Life for Older People via Public and Private Transport (Mary Gilhooly - m.gilhooly@paisley.ac.uk)

The aim of this study is to examine public and private transport needs in relation to quality of life in old age. Data collection for this multi-method project is now complete.

The study took place in four locations: Paisley, rural Renfrewshire, and an inner and outer borough of London. The data are being analysed and the drafting of the final report is beginning. The project received an extension until the end of February to enable the Paisley research assistant to combine finishing this project with the start of a new research contract. Preliminary findings include the following: The availability of transport was seen as essential to quality of life by study participants. Although age was associated with increasing use of public transport, participants reported increasing difficulties in its use. Security concerns, especially for women, were a barrier to the use of public transport after dark. Satisfaction with public transport was highest in London and lowest in rural Renfrewshire, where a car was felt to be essential. There appears to be some evidence that car drivers rate their quality of life more highly than non-drivers. Although driving was seen by elderly people as stressful and expensive, the majority were reluctant to give it up and found it difficult to imagine being without a car. Interviews with transport providers indicated that they tended to think of services for disabled people rather than older people.

HEALTHY AND PRODUCTIVE AGEING

Quality of Life and Real Life Cognitive Functioning (Mary Gilhooly - m.gilhooly@paisley.ac.uk)

The aim of this study is to examine the extent to which risk factors measured in mid-life predict cognitive functioning in old age. Also under investigation is an examination of whether or not older people engage in activities to maintain good cognitive functioning. Data collection is still ongoing, though preliminary analyses have revealed some interesting findings. For example, it appears that higher blood pressure in mid-life is associated with better cognitive functioning in old age. Less surprising findings include an association between (higher) body mass index, (lower) cholesterol levels and (higher) forced expiry volume in mid-life and poorer cognitive functioning in old age. There is little evidence that older people engage in specific physical or mental activities aimed at improving or even maintaining good cognitive functioning in old age. Preliminary analysis indicates that those who perform better on the tests of cognitive functioning generally rate their quality of life higher. Although these are interesting

findings, overall there were few mid-life risk factors which predicted current cognitive functioning in the sample. This may be due to the relatively small numbers at this stage, or it may be due to the fact that the sample was drawn from the survivors of the original MIDSPAN study, an epidemiological study of 15,000 middle aged people conducted 30 years ago in Paisley and Renfrew, Scotland.

Evaluating the Impact of Reminiscence on the Quality of Life of Older People (Kevin McKee - k.j.mckee@sheffield.ac.uk)

An intensive period of fieldwork involving delivery of reminiscence type activities to older people in residential and nursing home care, and collection of both quantitative quality of life measures and qualitative data was completed in Autumn 2001. Analysis of this data is ongoing. All quantitative data has been entered into SPSS. Transcription of raw qualitative data is ongoing and analysis of completed transcriptions has commenced. Dissemination will involve a mini conference to present findings to local policy makers and practitioners at the beginning of May, and the project will conclude at the end of May. Four conference papers/abstracts available on request (one pending).

Older People's Experiences of Paid Employment: Participation and Quality of Life (Ivan Robertson - Ivan.Robertson@umist.ac.uk)

Two hundred and seventy interviews have been completed as a follow up to our original postal survey (n=1200). Fourteen categories are represented - according to gender, age group, and employment status. Data has been analysed and interim findings suggest that employment status does influence well being - supporting the original hypotheses. The mechanisms through which this may operate are under examination. A poster presentation was made to the British Psychological Society Annual Conference in March 2001 and a research paper has been drafted for publication. In addition, a presentation to the BPS Annual Conference will take place in March 2002.

FAMILY AND SUPPORT NETWORKS

Older Men: Their Social World and Healthy Lifestyles (Sara Arber - K.Davidson@surrey.ac.uk)

Data collection from the two qualitative components is now complete: observations ►

in Social Clubs and organisations; interviews with 85 men over the age of 65, stratified for age and marital status. We were unable to complete the full sample of 100 interviews as we found it very difficult to obtain our intended quota of divorced and never married men, within our time-frame. The analysis of the qualitative data is well under way. The secondary analysis of the three UK datasets, GHS, HSE and BHPS continues. Papers have been presented at national and international conferences. There are two articles in the press, and two have been submitted.

Older Widow(er)s: Bereavement and Gender Effects on Lifestyle and Participation (Kate Bennett - kmb@liv.ac.uk)

Fieldwork was completed by the end of 2001. Interviews will be transcribed by the end of January 2002. Coding is now complete and both the quantitative and qualitative analyses are in progress. A paper is being prepared for the BPS conference in March 2002.

Quality of Life and Social Support Among Older People From Different Ethnic Groups (Jabeer Butt - jabeer@reunet.demon.co.uk)

Successfully secured sample of older people from minority and majority ethnic communities using the FRS as a sampling frame. Fieldwork is still in progress. Initial exploration of completed interviews has demonstrated the value of using the FRS as a sampling frame over other methods. The older people interviewed possess a diverse range of social and economic circumstances, which appears to overcome the clustering effect of many other methods. Furthermore, conducting interviews in the home with interviewers of a similar background has helped to counteract the under-representation of older Asian women for whom English is not their first language (an issue previously reported in the literature).

Grandparenthood: Its Meaning and Contribution to Older People's Lives (Lynda Clarke - lynda.clarke@lshtm.ac.uk) This project has been extended until April 2002 due to long-term illness and errors in the ONS Omnibus Survey. This survey was repeated in September/October 2001 and included more information on grandparents' support of grandchildren and opinions about wanting more or less involvement. The qualitative survey and analyses have been completed. Papers have

been presented at conferences and published - more will be presented at the BPS Conference (March 2002) and the Population Association of America Conference (May 2002).

Family, Work and Quality of Life: Changing Economic and Social Roles (Maria Evandrou - maria.evandrou@kcl.ac.uk)

We are currently focussing on investigating pension entitlement amongst carers and non-carers using the work and caring histories from the Family and Working Lives Survey (1994-95). Findings will be presented at an Employment and Family Care user workshop, as well as the 2002 BSG annual conference. One paper is under review by a journal and another is being drafted.

Loneliness, Social Isolation and Living Alone in Later Life (Christina Victor - cvictor@sghms.ac.uk)

We have completed both the quantitative and qualitative fieldwork components of the project. We achieved 999 interviews in the survey and completed 45 in-depth interviews. Preliminary analysis is complete and a paper summarising the preliminary findings is in press (*Journal of Quality and Ageing*). We have two other papers currently under review and will be presenting two papers from the project at the World Congress of Sociology in Brisbane in July.

PARTICIPATION AND ACTIVITY

Empowerment and Disempowerment: Comparative Study of Afro-Caribbean, Asian and White British Women in Their Third Age (Mary Maynard - mm45@york.ac.uk)

The project is now nearly completed and ends its funded stage on 31 January 2002. Interpretation of findings and completion of the final report are ongoing. Four written papers are available. Sharon Wray left at the end of September in order to take up a lectureship at Leeds Metropolitan University. Myfanwy Franks will remain as a Research Fellow at the University of York for the time being, working on projects with young people in collaboration with the Children's Society.

Older Women's Lives and Voices: Participation and Policy in Sheffield (Lorna Warren - l.warren@shef.ac.uk) Majority of discussion group meetings completed with only one or two

outstanding. Transcripts and coding of discussion groups and life story interviews completed. Those of service provider interviews being transcribed and coded. Analysis of data from discussion groups and life story interviews currently being undertaken and a paper being written for publication. Video production on schedule and a rough-cut will be shown at the end of project conference on 11 April.

Older People and Lifelong Learning: Choices and Experiences (Alexandra Withnall - A.Withnall@warwick.ac.uk) Data collected to date amounts to 80 questionnaires returned from 100 originally sent out which are now being analysed. A range of definitions of 'learning' have been offered. Our trained interviewers (older people) are currently completing 40 interviews with a sample of the respondents, returning the tapes and their field notes. Work has begun on the transcription of tapes. In addition, 10 learning diaries have been returned. Further publications are planned. ■

For Further Information:

Our web site includes detailed information on projects and activities.

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