

## **Peer Support Telephone Dyads for Elderly Women: The Wrong Intervention or the Wrong Research?<sup>1</sup>**

**Catherine H. Stein<sup>2</sup>**

*Bowling Green State University*

*Reaction to the intervention paper by Heller et al. (1990) places their work into a larger framework of social support interventions to make explicit the assumptions underlying the project. It is suggested that the intervention was constrained by the experimental design of the evaluation research and overlooked important features in the process of relationship development among dyads. In developing interventions designed to impact personal relationships, it is recommended that community psychologists (a) consider the context in which personal relationships are formed, maintained, and terminated; (b) use the power of their scientific inquiry to create, strengthen, or legitimize new social roles for people who are disenfranchised; (c) promote the use and legitimacy of research methods that compliment rather than dictate the nature of interventions.*

The paper by Heller, Thompson, Trueba, Hogg, and Vlachos-Weber (1991) describes the "failure" of telephone intervention project designed to facilitate social support among low-income elderly women. Given the methodological rigor of the research, the lack of expected results raises questions about the viability of social support interventions and directions for community psychologists working in the area. By presenting the details of their intervention and its outcome, the authors invite us to contemplate social support interventions in a new, more critical light.

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<sup>2</sup>All correspondence should be addressed to Catherine H. Stein, Department of Psychology, Bowling Green State University, Bowling Green, Ohio 43403.

To this end, I place the work of Heller et al. into a larger framework of social support interventions to make explicit the assumptions underlying the project. I suggest that the investigators were more sensitive to the experimental design of the evaluation research than to the intervention itself. In so doing, the authors may have overlooked important conditions that facilitate relationship development in dyads that could have contributed to the lack of expected results. I close by offering three recommendations for community psychologists interested in designing interventions that impact personal relationships.

### **THE LOGIC OF DYADIC LEVEL SUPPORT INTERVENTIONS**

According to Gottlieb's (1988) typology of social support interventions, Heller's work is a clear example of a dyadic level support intervention. It is an intervention where a "lay person is grafted onto the recipient's personal community" and involves the "process of matching and introducing an outsider to the recipient and then taking steps to optimize the likelihood of the two parties forming a supportive alliance" (p. 525). Consistent with the logic of such support interventions, the goal of Heller's intervention was the achievement of new relationships. It was expected that addition of a new relationship to a participant's social world would reduce feelings of social isolation and that "being a friend" would increase the number of valued social roles available to an individual. Heller anticipated that these key ingredients of the intervention would enhance well-being among low-income elderly women.

Unlike many previous support interventions for the elderly, Heller's intervention had an extensive evaluation research component. The project had the methodological rigor of clinical trials research using a large, carefully selected sample, random assignment to experimental and control conditions, and state-of-the-art measurement devices. It is a fine example of the use of traditional experimental research design to construct and evaluate a support intervention. Yet, the strength of the research design may also be the project's greatest limitation. Constrained by the experimental design, the investigators may have overlooked important features in the process of relationship development among dyads. Although well suited to evaluating a new drug treatment, the research approach used by Heller may have shaped a support intervention in which providing participants with "a new person" was akin to providing them with "a new pill."

### **RELATIONSHIP CONTEXT AND SOCIAL ROLES**

Participants in Heller's study either received five weeks worth of telephone contacts from a "friendly staff" person after an initial assessment

or received no contact as assessment-only controls. In the next phase of the intervention, the “friendly staff contact” group was basically divided into those women who were asked to either initiate or receive telephone contact from an “elderly peer” in the study (peer dyad group) and those asked to continue with their telephone association with friendly staff (staff-participant dyad group). It was expected that peer dyads would be better suited than staff-participant dyads to “develop a relationship” and “become friends” over the telephone and thus realize the greatest benefits from the intervention in terms of their well-being.

Yet, research on friendship development suggests that peer relationships are formed within a *context* (see Hays, 1988, for a review of friendship studies). People develop relationships under particular circumstances or in specific settings and these situational conditions shape the nature of dyadic ties (Feld, 1981; Fischer, 1977). For example, my expectations for developing a peer relationship in the context of my job are different than my expectations for a relationship with the same peer in the context of a church group, or on a bus, or at a bar. Context influences features of friendship development such as frequency and duration of contact, level of self-disclosure, relationship reciprocity, and so on. What was the context for developing dyadic ties in Heller’s intervention? Was there any reason to suspect that elderly peers should be more successful at forming a relationship over the telephone than staff-participant dyads?

Let us first consider the vehicle for developing new relationships in Heller’s intervention—the telephone. As Heller himself acknowledges, the telephone may not have been an appropriate vehicle for forming a relationship. Although convenient, the telephone is a means of communication typically reserved for relationship maintenance and not relationship development. (Even A.T.&T. says “Reach out and touch someone” not “Reach out and *find* someone.”) There is no particular reason to believe that randomly assigned peer dyads would be any more successful in developing a relationship based on telephone contact than staff-participant dyads. In fact, given that participants had an initial 5 weeks of contact from friendly (socially skilled) staff, it could be argued that subsequent staff-participant telephone interactions may have been more “friend-like” than peer dyad interactions. Yet despite the project’s emphasis on longitudinal assessment, the researchers learned relatively little about the content and process of relationship development among either types of dyads.

If the telephone was the vehicle for relationship development in Heller’s intervention, what then was the context for relationship development? I submit that the context for developing new relationships was the research project itself. In the peer dyad condition, for example, participants were told that calling peers was “a way for women in the study to keep in touch with one another and to make another friend” (p. 59). Dyadic relationships introduced in elderly peer, friendly staff, and assessment-only control conditions were all predicated on being involved in the research. It is

not surprising that Heller observed that participants looked forward to their contacts with research staff and were proud to be involved in such an “important study.” I wonder whether the significant social role gained by participants in this study was less “being a friend” than the more novel social role of “being a participant in an important research study.” This additional “valued social role” was available to participants in all of the research conditions and may account for some of the project’s findings.

If the focus of the intervention had been more on the *process* of relationship development, then investigating conditions that “optimize the likelihood of creating a supportive alliance” and detailing changes in relationships over time would have been the heart of the intervention project. The major variables that Heller manipulated, role relationship of dyad (staff vs. peer) and initiation of contact (initiator vs. receiver) are only two of many relevant relationship characteristics. Other relevant areas for consideration include relationship context, and expectations for dyadic transactions, as well as individual differences variables (some of which were assessed by Heller) such as the configuration of existing personal networks, desire for social contact, and level of social competence. Evaluation research consistent with a relationship development perspective would need to assess the flow of dyadic relationships in different relational contexts over time. The research would likely focus on dyadic partners’ expectations, perceptions, and transactions and a consideration of the position of the new dyad in each member’s network of personal relationships. Longitudinal assessment would be necessary to investigate factors that facilitate or impede relationship development. In contrast, Heller’s conception of relationships is much more static, as peer dyads either achieved a friendship or they did not (measured primarily by differences on well-being indices for the peer dyad condition and poststudy contact among peer dyads). Here the longitudinal assessment is analogous to a drug treatment study where time is needed for the drug to take effect. Time, in Heller’s project, was treated as a condition necessary to determine the success of the intervention.

### LESSONS TO LEARN

Given that it is always easier to critique than to create, what practical points can be taken from this critical analysis of Heller’s work? Heller et al. conclude they might have conducted the “wrong intervention” in trying to foster friendships among the elderly and suggest that family relationships may be a more appropriate target for support interventions with this population. Another reasonable conclusion may be that community psychologists should avoid dyadic level interventions completely and stick with support interventions focused at group (e.g., Morin & Seidman, 1986),

social systems (e.g., Felner, Ginter, & Primavera, 1982), or community levels of analysis (e.g., Jason, 1985).

Unlike Heller, my feeling is that there are many potential benefits in designing dyadic level interventions to foster and enhance peer relationships (elderly samples included). I also feel that community psychologists should not a priori restrict themselves to working at certain levels of analysis. However, community psychologists cannot assume that because they are studying "social support" that their work is grounded in community psychology principles. Community psychologists working at the dyadic level must be particularly aware of the premises upon which they base their intervention and its evaluation, precisely because the translation of community psychology principles at this level is so difficult.

In developing interventions designed to impact personal relationships, I believe that community psychologists need to (a) focus on the context in which personal relationships are formed, maintained, and terminated; (b) acknowledge and use the power of their scientific inquiry to create, strengthen, or legitimize new social roles for people who are disenfranchised; and (c) promote the use and legitimacy of research methods that complement rather than dictate the nature of interventions. I briefly sketch each of these recommendations and use examples from an intervention research project in which I am currently involved to illustrate my points.

### *Focus on Context*

The identification of "context" may be particularly challenging in designing dyadic level support interventions. If the intervention task is fostering the development of new dyadic relationships, context may be characterized in at least two ways. First, context may be viewed as the circumstances in which the dyadic relationship is initiated. Investigators may also consider the context or network of participants' existing social relationships into which new associations may be added. In designing an action-research project for individuals with serious mental illness (Stein, 1990), we wanted to use both views of context to build and strengthen participants' social resources.

The goal of our action-research project was to develop and enhance participants' personal network relationships by increasing their social competence. Although social skills training programs for individuals with psychiatric disabilities have demonstrated that participants can learn new interpersonal behaviors, treatment gains typically do not generalize to daily living in the community. Generalization of social skills may be enhanced by making the application of skills to participants' social relationships a specific part of the training program, but mental health service providers often lack the time and resources to help clients cultivate and strengthen

network ties. College undergraduates have been effective as nonprofessional helpers working with individuals with serious mental illness and have been an important resource for social service agencies. Yet the role of nonprofessional helper often perpetuates unidirectional "helper/helpee" relationships between undergraduates and mental health consumers.

We decided on an intervention that combined social network methods and social skills training in a practicum course on personal relationships offered at the university. In class and through assignments in the community, mental health consumers and college undergraduates work on enhancing their own social skills and on building and strengthening their personal network relationships. The project recognizes the importance of social competence and network ties in the promotion of mental health as well as the treatment of mental illness. The context for dyadic relationship development among participants is a college practicum. We selected this context, in part, because it is socially valued and flexible enough for us to introduce an explicit set of expectations about interactions among participants. The course is based on mutual help principles that highlight an individual's ability to both teach and learn from others. All participants are involved in enhancing their communication skills, applying that knowledge to their existing network of personal relationships, and assisting their classmates in doing the same.

### *The Power to Create New Social Roles*

Rappaport (1990) urged community psychologists who embrace empowerment as a social agenda to use research methods that provide "voice" to people who are the subject of inquiry. Through the design and execution of their research, investigators have a choice about sharing the influence of their scientific endeavors with the people of their concern. In my experience, the value principles Rappaport offers to researchers interested in empowerment are equally compelling for community psychologists who design support interventions. Researchers have the power to create, strengthen, and legitimize new social roles for the participants of their support interventions. In our intervention project, for example, the primary social role created for participants is the normalized (and fairly prestigious) role of "college student." We created this role, in part, by selecting the college classroom as the context in which to promote the development of dyadic relationships among participants. We could have selected the day treatment room at the mental health center as the context for the intervention. This context would have promoted a new social role for the undergraduates, namely, that of "nonprofessional helper." I am not saying that context is synonymous with the place where participants meet. Rather, the

social roles created by the intervention context provide “rules” or expectations for dyadic relationship development. Although mental health consumers and college undergraduates may differ in their life experiences and communication skills, both groups are “relationship experts” or “relationship novices” (depending on one’s point of view) simply by virtue of living in the world. The point is that investigators who design support interventions can consciously choose to strengthen or promote new social roles for people who are disenfranchised which provide them with new experiences and access to social resources.

### *Deciding the Legitimate Methods of Research*

Some research methods tend to be viewed by the scientific community as a priori more or less “acceptable” or “prestigious” to use, regardless of their appropriateness to the phenomena of interest (Rappaport, 1990). Investigators may feel constrained to use particular research methods given their assessment of the current realities of what agencies will fund and what journal editors will print. By presenting the “failure” of an intervention based on a traditional experimental design, Heller et al. become advocates, in some sense, for the expansion of legitimate methods available to those conducting action research.

Of course, there are a number of different ways that community psychologists can promote the legitimacy of particular research methods. Heller recommends careful ethnographic study be done preceding intervention programs so that researchers can appreciate the more subtle characteristics of their samples. In so doing, Heller has introduced the legitimacy of ethnographic or naturalistic methods as a prerequisite to the design of interventions and evaluation. At the other end of the continuum are those who advocate for the use of the naturalistic inquiry and the constructivist paradigm to *replace* the dominant research paradigm (Guba & Lincoln, 1989). Their work can demonstrate the descriptive power and methodological rigor of research techniques based on alternative assumptions about the nature of “truth.” The position of middle ground is the use of both quantitative and qualitative methods in action-research. Naturalistic methods can be used to describe the phenomena of interest, inform the interpretation of quantitative data, and guide future directions for research and action. My point is that community psychologists should strive to expand their repertoire of available research methods and select those methods that complement rather than dictate their interventions. Perhaps community psychologists can best advocate for particular research methods by providing consistent examples of the rigor of studies that allow others to understand the experience, as well as the efficacy, of their interventions.

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