ISRCTN14922432 https://doi.org/10.1186/ISRCTN14922432

Intergenerational engagement among older people in the long-term care facility

Submission date 20/06/2025	**Recruitment status** No longer recruiting	[_] Prospectively registered [X] Protocol
Registration date 24/06/2025	**Overall study status** Completed	[_] Statistical analysis plan [_] Results
Last Edited 28/08/2025	**Condition category** Other	[_] Individual participant data [_] Record updated in last year

Plain English summary of protocol

Background and study aims
China is experiencing a rapid rise in its aging population. Cognitive and physical declines associated with ageing can limit social
interaction, which particularly impacts those residing in long-term care facilities and their engagement with children and young people.
Intergenerational engagement (the interaction between the old and the young) presents a promising avenue to improve the well-being of older people residing in such long-term care settings. However, there is a noticeable gap in empirical evidence supporting its potential benefits in long-term care facilities in China. This study aims to assess the feasibility and acceptability of IE in a long-term care facility in China.

Who can participate?
1. Older people aged 60 years and above who reside in the long-term care facility
2. Young people aged 15 to 16 years from a local school
3. Staff working at the long-term care facility

What does the study involve?
The study involves participation in a 5-week intergenerational engagement intervention held at a long-term care facility. Older and younger participants will take part in weekly shared activities, such as music, crafts, and discussions. Older people will be asked to complete brief questionnaires before and after the intervention to help assess changes in well-being. They will also take part in individual interviews to share their experiences. In addition, focus groups will be conducted with young people and care staff to gather their perspectives on the IE intervention. All participation is voluntary, and activities are designed to be enjoyable and appropriate for participants' abilities.

What are the possible benefits and risks of participating?
Participation in this study may benefit both older and younger participants by fostering intergenerational interaction, which could support the well-being of older people in long-term care facilities and promote mutual understanding across generations. The study may also contribute to identifying practical strategies to enhance mental and social well-being in these settings. Younger participants may gain increased awareness of ageing, empathy, and a sense of

social responsibility. In addition, the findings may help inform future policies and practices in long-term care facilities and address gaps in existing research on the feasibility and acceptability of intergenerational engagement in China. Potential risks are minimal but may include emotional discomfort when reflecting on personal experiences and slight physical strain associated with certain activities, particularly for older participants with existing health conditions.

Where is the study run from?
Department of Nursing and Midwifery, School of Health Sciences, University of Birmingham (UK)

When is the study starting and how long is it expected to run for?
July 2024 to September 2024

Who is funding the study?
Investigator initiated and funded

Who is the main contact?
Hao Liu, hxl345@bham.ac.uk

Contact information

Type(s)
Public, Scientific, Principal investigator

Contact name
Ms Hao Liu

ORCID ID
https://orcid.org/0009-0003-7872-7998

Contact details
University of Birmingham
Edgbaston
Birmingham
United Kingdom
B15 2TT
+44 (0)7946452670
hxl345@bham.ac.uk

Additional identifiers

Study information

Scientific Title
Intergenerational engagement among older people in the long-term care facility in Chinaa mixed methods feasibility study

Study objectives
The intergenerational engagement (IE) intervention is feasible and acceptable among older residents, young people, and staff in the long-term care facility.

Ethics approval required
Ethics approval required

Ethics approval(s)
Approved 30/07/2024, Science, Technology, Engineering and Mathematics Committee of the University of Birmingham (University of Birmingham, Edgbaston, Birmingham, B15 2TT, United Kingdom; +44 (0)121 414 3344; ethics-queries@contacts.bham.ac.uk), ref: ERN_1775-Jul2024

Primary study design
Interventional

Study design
Feasibility study with an embedded mixed methods design

Study type(s)
Efficacy

Health condition(s) or problem(s) studied
Older people living in the long-term care facility

Interventions
This feasibility study employs an embedded mixed methods design, in which quantitative feasibility metrics (e.g., recruitment, retention, attendance, and scale completion) are collected alongside qualitative data. Qualitative insights explore participants' experiences and perceptions of the intervention, providing contextual depth and helping to refine future implementation. By combining quantitative measures with qualitative feedback, this approach offers a more comprehensive understanding of the intervention's feasibility and acceptability. The study begins with the assessment of participant eligibility, followed by obtaining informed consent. Baseline assessment data are collected the day before the IE intervention. After the intervention, a follow-up assessment is conducted within 7 days. This is followed by qualitative interviews with older participants and focus groups with long-term care facility staff and young people.

The IE intervention was developed using insights from our previous systematic review and was guided by the activity theory of ageing, tailored to Chinese cultural contexts. Feedback from a PPI team comprising older people, long-term care staff, young people, and parents ensured the intervention's feasibility, accessibility, and clarity. The intervention brings together older people and young people in weekly 90-minute sessions, organizing group activities with 2-4 older people and 1-2 young people per group. During these interactions, the researcher and staff serve as facilitators, promoting inclusive conversations and ensuring all participants feel valued and heard. Each session includes warm-up games, hands-on activities, sharing of stories and experiences, and refreshments, fostering meaningful intergenerational connections.

Intervention Type
Other

Primary outcome(s)
1. The feasibility will be assessed using quantitative data:
1. Recruitment rate: Measure the effectiveness of recruitment strategies by calculating the percentage of eligible residents who agree to participate (measured 30/07/2024–01/08/2024)
2. Retention rate: Determine the proportion of participants who remain enrolled from the start

to the end of the study. Document and categorize reasons for dropout, if available (measured at intervention end, 08/09/2024)
3. Attendance rate: Calculating the ratio of sessions attended by each participant to the total number of sessions offered, often expressed as a percentage (across the intervention period)
4. Scale completion rate (specifically for older people): Assess the completeness of scale responses by calculating the proportion of older people who fully complete the scales and noting the number of missing items per scale (at baseline and post-intervention)
2. Acceptability will be evaluated through qualitative methods, focusing on participants' satisfaction with the IE intervention, their willingness to continue with or recommend the programme, and their experiences and perceptions of the IE intervention, assessed through interviews within 14 days after the intervention

Key secondary outcome(s)
1. Depression measured using the Geriatric Depression Scale (GDS) at baseline and post-intervention (within 7 days after intervention)
2. Anxiety measured using the Geriatric Anxiety Inventory (GAI) at baseline and post-intervention (within 7 days after intervention)
3. Loneliness measured using the UCLA Loneliness Scale at baseline and post-intervention (within 7 days after intervention)
4. Quality of life measured using EQ-5D-5L at baseline and post-intervention (within 7 days after intervention)

Completion date
08/09/2024

Eligibility

Key inclusion criteria
Eligibility criteria for older residents included:
1. Aged 60 years or above
2. In relatively good physical and mental health, able to perform daily activities with minimal assistance and actively participate in the study without requiring intensive medical or psychological support
3. Able to communicate effectively in either Cantonese or Mandarin, including understanding, responding to questions, and engaging in conversations
4. Willing to participate in the IE programme and provide signed informed consent

Participant type(s)
Carer, Learner/student, Resident

Healthy volunteers allowed
No

Age group
Senior

Lower age limit
60 Years

Upper age limit

100 Years

Sex
All

Total final enrolment
30

Key exclusion criteria
Older residents were excluded if they:
1. Had medium or severe cognitive impairments, were in the acute phase of a chronic disease, were disabled, or were in the end-of-life period
2. Were unable to communicate effectively in either Cantonese or Mandarin
3. Declined to provide informed consent or expressed unwillingness to engage in the IE programme

Date of first enrolment
30/07/2024

Date of final enrolment
01/08/2024

Locations

Countries of recruitment
China

Study participating centre
Furuixin Senior Apartment
No. 89, Aoyugang Street
Yantang
Tianhe District
Guangzhou
China
510000

Sponsor information

Organisation
University of Birmingham

ROR
https://ror.org/03angcq70

Funder(s)

Funder type
Other

Funder Name
Investigator initiated and funded

Results and Publications

Individual participant data (IPD) sharing plan
The dataset generated during and/or analysed during the current study will be available upon reasonable request from Hao Liu (hxl345@bham.ac.uk). All shared data will be fully anonymised, in accordance with the study's ethical approval and participant consent.

IPD sharing plan summary
Available on request

Study outputs

Output type	Details	Date created	Date added	Peer reviewed?	Patient-facing?
Protocol article		27/08/2025	28/08/2025	Yes	No