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**ISM II**

### **Research Assessment #3**

**Date:** September 12, 2024

**Subject:** Full-Stack Software Development

**Assessment:** Annotated Bibliography #2

Ashfaq, A., Sarfaraz, A., Noor, S., Hasan, S. (2024). Stigma, Social Comparison, and Psychological Distress in Type 2 Diabetic Patients. *Pakistan Journal of Psychological Research*, 39(2), 395-407. <https://doi.org/10.33824/PJPR.2024.39.2.22>

The authors' study aimed to investigate the relationships between social stigmas and psychological distress in individuals with type 2 diabetes, and how such distress may exacerbate the treatment of type 2 diabetes. The methodology for this survey, similar to other sources I have researched, was through surveys given to type 2 diabetes patients aged 30-55 years of primarily middle socioeconomic class. Findings correlated with a fact I was familiar with before reading this source: that individuals with poor self-esteem regarding their diabetes often reported experiencing disapproval from others due to social stigma and stereotypes perpetuated by society. However, the authors noted that getting the right food and supplies is another major concern for individuals with type 2 diabetes, and this issue caught my attention due to few sources discussing it – looking into software that can aim to increase the accessibility of supplies for individuals with diabetes may be an objective to target for a final product.

Barbosa Neves, B., Waycott, J., & Maddox, A. (2023). When Technologies are Not Enough: The Challenges of Digital Interventions to Address Loneliness in Later Life. *Sociological Research Online*, 28(1), 150-170. <https://doi.org/10.1177/13607804211029298>

The authors studied possible limitations of technology in mitigating loneliness later in life, an issue that has grown increasingly prevalent in recent years following the COVID-19 global pandemic. Although this source was a little dated, it provided a useful overview of improvements to make to software aiming to mitigate social isolation. I took interest in one particular idea presented in the context of the study: that although loneliness “feels” like an individual feeling, it exists in the context of social structures. In other words, social norms and institutions play a big part in shaping loneliness in individuals; this strongly indicates that the loneliness expressed by patients with metabolic disorders in my previous research could be caused by a lack of social infrastructure to support their dietary needs. Across three cases in the study, there was one common issue that technology failed to address to successfully alleviate loneliness: the network surrounding the end user. It was interesting hearing about a potential approach to software design coming from a non-engineering source, and it is a perspective that I will consider when building my final product.

Drakouli, A.-E., Kontele, I., Poulimeneas, D., Saripanagiotou, S., Grammatikopoulou, M. G., Sergeantanis, T. N., & Vassilakou, T. (2023, February 23). Food Allergies and Quality of Life among School-Aged Children and Adolescents: A Systematic Review. *Children*, 10(3), 433. <https://doi.org/10.3390/children10030433>

The authors conducted a systematic review to explore the relationship between the Health-Related Quality of Life (HRQoL) and food allergies in school-aged children and adolescents using a series of questionnaires. After collecting data from such surveys, researchers compared responses from individuals with food allergies with responses from individuals without such conditions, and made note of any differences in responses.

Contrary to previous studies I had investigated, children and adolescents on average reported similar QoL scores with little to no stark differences, regardless of whether or not the respondent had a food allergy. However, young girls and adolescents with food allergies, on average, reported higher levels of food anxiety than those without food allergies; this may point to a specific demographic of individuals that I could keep in mind when designing my final product.

Matthews, T., Qualter, P., Bryan, B. T., Caspi, A., Danese, A., Moffitt, T. E., ... Arseneault, L.

(2023). The developmental course of loneliness in adolescence: Implications for mental health, educational attainment, and psychosocial functioning. *Development and Psychopathology*, 35(2), 537–546. doi:10.1017/S0954579421001632

The authors' study investigated patterns of loneliness and its development throughout adolescents using a longitudinal approach, tracking sets of twins over the course of their childhood and adolescence. Researchers made home visits at ages 5, 7, 10, 12 and 18, asking participants to indicate agreement with a series of statements describing how emotionally isolated they felt. The study also analyzed the potential causes for variance in the feelings of loneliness expressed by study participants, including behavioral genetic modeling and environmental factors. Overall, the study's results concluded that loneliness in adolescents fluctuated depending on their unique environmental and genetic circumstances, which I found myself familiar with. However, what interested me was the idea that early childhood loneliness could play a role in the onset and continuation of loneliness later into adolescence – for an application targeting helping individuals with mental health issues, this could be a factor to assess when profiling the end user and optimizing their experience.

Park, S., & Berkowitz, S. A. (2024, July). Social Isolation, Loneliness, and Quality of Life Among Food-Insecure Adults. *American Journal of Preventive Medicine*, 67(1), 120-123. <https://doi.org/10.1016/j.amepre.2024.02.001>

The authors studied the associations between food insecurity, social isolation, and quality of life using a cohort study tracking panel data from the 2020-2021 Medical Expenditure Panel Survey (MEPS), a national survey of noninstitutionalized U.S. civilians. There is ample evidence of food-insecure individuals experiencing more physical health conditions due to a lack of quality nutrition – in the study’s results, 79.2% of adults with food insecurity reported being in good physical health, whereas 93.7% adults without food insecurity reported being in good physical health. One point of interest to me, however, was that food-insecure adults also reported a lower SF-12 mental component summary score – in other words, mental health issues and reported cases of social isolation were significantly worse for individuals dealing with food insecurity. A limitation of this study is its lack of discussion regarding the causes for social isolation in food-insecure individuals – addressing the causes of psychosocial impacts stemming from food insecurity might also be another area of interest to consider as I continue my research.