

Centre for Policy on Ageing
Information Service

Selected Readings

**Advocacy on behalf of
Older People**

May 2021

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Centre for Policy on Ageing

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2020

The voices of death doulas about their role in end-of-life care; by Deb Rawlings, Caroline Litster, Lauren Miller-Lewis (et al): Wiley, January 2020, pp 12-21.

Health and Social Care in the Community, vol 28, no 1, January 2020, pp 12-21.

The role of the 'death doula' has been described as one of companion, mentor and advocate for dying people and their families. Death Doulas have emerged as a relatively new role in this regard, however there is little clarity around how the role is enacted, and around the death doula role within health and social care systems. This Australian study aimed to explore the ambiguity of the role of death doulas in end-of-life care including the skills, training and experience of death doulas; how the role is communicated to the community; and the relationships to palliative care providers and other health professionals. People identifying as death doulas were invited to participate in an online survey between April and June 2018. Ethical approval was obtained. A descriptive cross-sectional study was conducted, and purposive sampling was used to survey death doulas registered with relevant training organisations, newsletters and email distribution lists. Questions were based on the researchers' previous findings about the role. 190 completed or partially completed surveys were received. Results showed diversity within, and some commonalities across the sample in terms of: training, experience and skill. Death doulas were found to have emerged not only as a response to the overwhelming demands on families and carers but also demands placed on health care professionals (including palliative care) at the end of life. They have identified gaps in health and social care provision, perhaps taking on tasks that health professionals don't have responsibility for. However the role and scope of practice of death doulas is not clear cut even within their cohort, which can then make it hard for patients and families when choosing a doula, especially as a lack of regulation and standardised training means that doulas are working without oversight and often in isolation. (JL)

ISSN: 09660410

From : <http://www.wileyonlinelibrary.com/journal/hsc>

2019

Decisions about the "if", "when" and "how" of moving home: can a relocation service help? A Welsh case study; by Sarah Hillcoat-Nalletamby, Alexandra V Sardani.: Taylor and Francis, July-September 2019, pp 275-297.

Journal of Housing for the Elderly, vol 33, no 3, July-September 2019, pp 275-297.

This small-scale, Welsh qualitative study explores how a new "moving on" service empowered older people to move voluntarily from their home to an extra-care facility. Eighteen older people were interviewed about their experiences of the service, which offered in-person, bespoke information, advice, financial, practical, brokerage and emotional support about moving. Findings indicate three service use patterns: continuous, partial and discontinued. It was instrumental in empowering clients to exercise decision-making, delegated, and/or consumer autonomies, and following through on what had been decided. Recommendations for future developments of a prototype "moving on" service include a multi-partner approach and caseworker case management training modelled on social work practice. (RH)

ISSN: 02763893

From : <http://www.tandfonline.com>

An evaluation of the Counselling on Access to Lethal Means (CALM) training with an area agency on aging; by Karen Slovak, Natalie Pope, Jarod Giger, Athena Kheibari.: Taylor and Francis, January 2019, pp 48-66.

Journal of Gerontological Social Work, vol 62, no 1, January 2019, pp 48-66.

Firearms are a significant risk factor in suicide, and older people are a disproportionately affected by this means of suicide. This study investigated the impact of Counseling on Access to Lethal Means (CALM) training with geriatric case managers at an Area Agency on Aging. A concurrent mixed methods approach was used to explore 1) geriatric case managers' attitudes, beliefs, and behavioural intentions about counselling on access to lethal means following CALM training; and 2) perceived barriers to assessing for suicidality and counselling clients on access to firearms. The CALM evaluation data was collected immediately post-test at CALM training, at three-month follow up. Results indicate that since CALM training, 38% of respondents reported that they had discussed reducing access to lethal means with clients and/or families. At three-month follow-up, data showed that most beliefs, attitudes and behavioural intentions about counselling clients and families on this topic had increased. Focus group findings indicated that training had a positive effect on participants' attitudes, beliefs, and behavioural intentions about counselling on access to lethal means. The findings offer additional evidence and implications for training of this type. (RH)

ISSN: 01634372

From : <http://www.tandfonline.com>

The Golden Thread Advocacy Programme; by Louise Hughes.: Age Cymru, 2019, pp 26-29.

EnvisAGE, no 13, 2019, pp 26-29.

The Golden Thread Advocacy Programme supports the implementation of the advocacy element of the Social Services and Well-being (Wales) Act 2014. This article reports on the Programme's achievements in developing a national framework for commissioning independent professional advocacy (IPA) for adults in Wales; supporting and building the capacity of the advocacy sector in Wales; and raising awareness of advocacy. (RH)

From : <https://www.ageuk.org.uk/cymru/>

The recognition of advocacy as a means of securing and exercising older people's rights: a personal perspective; by Andrew Dunning.: Age Cymru, 2019, pp 8-11.

EnvisAGE, no 13, 2019, pp 8-11.

It was clear to Andrew Dunning that the NHS and Community Care Act 1990 was not going to deliver on choice - let alone voice - and control, and that clients or citizens were instead to become 'consumers'. This article gives an overview of UK and Welsh social policy and legislation (including regulations), highlighting issues facing advocacy at a policy level that have an impact for older people in Wales at a personal level. A personal perspective is offered on importance of advocacy in securing and exercising older people's rights. (RH)

From : <https://www.ageuk.org.uk/cymru/>

Social workers' perceptions of restorative approaches with families in cases of elder abuse: a qualitative study; by Carole Anne Kirk, Campbell Killick, Anne McAllister, Brian Taylor.: Emerald, 2019, pp 190-200.

Journal of Adult Protection, vol 21, no 3, 2019, pp 190-200.

The complex structure of families requires flexible, person-centred approaches in order to safeguard older people more effectively. Restorative approaches can be a more constructive alternative to punishing offenders in some situations of abusive relationships with older people. The aim of restorative justice approaches is to restore or recreate the relationship between the offender and the victim. Varieties of restorative approaches, such as family group conferences and family mediation, are emerging as complementary or potential alternatives to family processes. The purpose of the present study was to explore professional perspectives on restorative approaches with families in elder abuse cases. Data were gathered from 37 social workers in statutory and voluntary organisations through nine focus group sessions in one region of Northern Ireland. A thematic analysis was undertaken and themes were derived from the data using NVivo software. The study reported main findings under the themes of engaging families and service users; managing risk in working with families in adult safeguarding; and challenges for professionals in practice. A key finding was that professionals felt challenged personally and professionally in managing the risks and working with families in these highly complex cases. This study adds to the existing knowledge base, identifies potential practice developments and discusses the challenges in adopting restorative approaches with families in elder abuse cases. The study highlights the need for further specialist training. Managers should consider the creation of specialist teams with a focus on alternative or restorative approaches with families. (JL)

ISSN: 14668203

From : <http://www.emeraldinsight.com/loi/jap>

The tasks and characteristics of supportive support brokers; by Ellen Mahoney, Grace Oh, Kevin Mahoney, Andrew DeVellis.: Taylor and Francis, February-March 2019, pp 216-235.

Journal of Gerontological Social Work, vol 62, no 2, February-March 2019, pp 216-235.

In the United States, under the Cash and Counselling or budget authority model of self-directed personal assistance where the participant manages his or her own services and supports, the Support Broker role was established to assist and coach the participant. The support broker role grew out of a person-centred planning process where focus groups and surveys helped ascertain what potential participants wanted to help them establish a self-directed alternative. But despite this role being described in policy guidance from the Center for Medicare and Medicaid little research has been conducted examining the functions, activities and usefulness of this position. This study draws on 76 ethnographic case studies with early Cash and Counselling participants, examines what participants and their caregivers actually saw the support broker doing, and looks at what the participants found helpful and less than helpful. Participants and family caregivers saw support broker duties as falling into four areas: Coaching, Problem Solving, Advocacy and Monitoring. Equally important was how the support broker performed these duties. Key aspects of quality included: Familiarity, Supportive Relationship, Proactive Engagement, Responsiveness, Knowledge and Cultural Friendliness. These findings can provide the basis for establishing quality indicators for self-direction. (JL)

ISSN: 01634372

From : <http://www.tandfonline.com>

A vision for the future: innovations in care for older adults in the Netherlands; by Hugo de Jonge.: AARP International, 2019, pp 72-77.

AARP International: The Journal, vol 12, 2019, pp 72-77.

Today, Dutch people are living longer, healthier lives than ever before. There are 1.3 million people aged 75+ in the Netherlands, out of a population of more than 17 million. By 2030, that number will have risen to 2.1 million. The author describes his Pact on Care for Older Adults, formed in 2018 with various civil society organisations, social enterprises, companies, and ANBO, the Dutch advocacy group for older people. He describes three interconnected programmes: Ageing in Place (focused on better quality care at home and developing new types of housing); Nursing Home Care (focused on improving the quality of nursing home care); and United Against Loneliness (focused on reducing loneliness and social isolation among older people). (RH)

From : <http://www.aarpinternational.org/journal>

A volunteer-led advocacy service for vulnerable older people in Wales: what did service users say about the beneficial impact of advocacy for them?; by Juping Yu, Mark Llewellyn.: Age Cymru, 2019, pp 14-19.

EnvisAGE, no 13, 2019, pp 14-19.

Drawing on findings from a study evaluating the 'Help to be Heard' volunteer-led advocacy service for older people in Carmarthenshire, the authors focus on what service users have said about the beneficial impact of advocacy. Quantitative and qualitative findings are presented. (RH)

From : <https://www.ageuk.org.uk/cymru/>

Welsh speakers' dementia care; by Lowri W Williams.: Age Cymru, 2019, pp 20-22.

EnvisAGE, no 13, 2019, pp 20-22.

Speaking Welsh "makes people good, and maybe people with dementia don't remember what they've been doing, but they know they feel good". This is one of the comments made at the launch of the Welsh Speakers' Dementia Care report. Drawing on the experiences and voices of people living with dementia, the author outlines the research findings. She highlights that providing services in Welsh to people with dementia is a matter of clinical need. The article is written on behalf of the Welsh Language Commissioner and Alzheimer's Society Cymru. (RH)

From : <https://www.ageuk.org.uk/cymru/>

Why do I need a will anyway?: Assessing the impact of a public legal education intervention embedded in a longitudinal survey; by Pascoe Pleasence, Nigel J Balmer, Catrina Denvir.: Cambridge University Press, April 2019, pp 187-201.

Social Policy and Society, vol 18, no 2, April 2019, pp 187-201.

In England and Wales less than half of the adult population report that they have a will, with similarly low numbers found in other jurisdictions. Dying intestate can have profound implications on the family relationships, housing security, finances, employment, health and welfare of those who are left behind. Social policy initiatives designed to educate the public on the implications of intestacy offer a potential solution but remain difficult to evaluate. This article explores the results of a public legal education experiment embedded in a longitudinal panel survey, the English and Welsh Civil and Social Justice Survey (CSJS). The experiment was designed to explore: the impact of information provision on will creation; and how 'opportunistic experiments' embedded in longitudinal surveys might support public legal education (PLE) evaluation. Whilst the impact of the information intervention in this study was not found to be statistically significant, the methodology points to the possibility of testing more bespoke and substantial initiatives in the future. (RH)

ISSN: 14747464

From : <http://www.cambridge.org/sps>

2018

Can a unified service delivery philosophy be identified in aging and disability organizations?: Exploring competing service delivery models through the voices of the workforce in these organizations; by Bronwyn Keefe.: Taylor and Francis, January-February 2018, pp 48-71.

Journal of Aging and Social Policy, vol 30, no 1, January-February 2018, pp 48-71.

Services for older adults and younger people with disabilities are increasingly merging, as reflected in the creation of Aging and Disability Resource Centers (ADRCs) in the United States. Using ADRCs to coordinate services is challenging, primarily because these fields have different service delivery philosophies. Independent

Living Centers, which serve people with disabilities, have a philosophy that emphasises consumer control and peer mentoring. However, the service delivery philosophy for older people's services is based on a case management or medical model in which the role of consumers directing their services is less pronounced. In 2003, Massachusetts was one of the first 12 states funded to develop an ADRC. This study uses institutional logics theory and a qualitative research design to explore whether a unified service delivery philosophy for ADRCs was emerging. Based on focus groups and questionnaires with staff from ADRCs in Massachusetts, the findings reveal that competing service delivery models continue to operate in the ageing and disability fields. (RH)

ISSN: 08959420

From : <http://www.tandfonline.com>

Family group conferences: an opportunity to re-frame responses to the abuse of older people?; by Kate Parkinson, Sarah Pollock, Deanna Edwards.: Oxford University Press, June 2018, pp 1109-1126.

British Journal of Social Work, vol 48, no 4, June 2018, pp 1109-1126.

Recent legislative and policy changes in adult social care have refocused attention on a strengths-based approach to social work practice. The Care Act 2014 advocates a more inclusive and holistic understanding of individual wellbeing which is evident by its expectation of more personalised responses to safeguarding. Family Group Conferences (FGCs) fit well with this policy shift but require further exploration before being integrated into work with adults. In this article a fictitious case study was analysed through an organic group discussion during which the authors applied their professional expertise to explore the appropriateness of FGCs to provide a response to adult safeguarding cases. FGCs provide a viable alternative to traditional decision making approaches in the adult safeguarding field. The case analysis exposed three main areas that required further consideration to ensure effective implementation. The areas identified were divided into mental capacity, risk and funding. It is important that policy makers and local authorities acknowledge the complexity of transferring an approach originally designed for working with children and families to the context of social work with older adults. More effort should be made to address the practice tensions outlined within the study. (JL)

ISSN: 00453102

From : <https://academic.oup.com/bjsw>

How does peer similarity influence adult children caregivers' perceptions of support from peers?: A mixed-method study; by Marina Bastawrous Wasilewski, Jennifer N Stinson, Fiona Webster, Jill I Cameron.: Cambridge University Press, November 2018, pp 2280-2303.

Ageing and Society, vol 38, no 11, November 2018, pp 2280-2303.

Due to the growing ageing population, adult children care-givers (ACCs) are increasingly providing complex care for one or both aged parents. Social support from similar peers can mitigate care-giving-related health declines. To date, 'peer similarity' among care-givers has been predominantly investigated in the context of peer-matching interventions. However, because peer similarity is especially influential in 'naturally occurring' support networks, care-givers' everyday peer support engagement warrants further attention. The authors explored care-givers' everyday peer support engagement and the influence of peer similarity on support perceptions. They employed a mixed-method design using Web-based surveys and in-depth qualitative interviews. The quantitative data were analysed using a hierarchical multiple, while qualitative data were thematically analysed. Seventy-one ACCs completed the on-line questionnaire and 15 participated in a telephone interview. Peer similarity was positively and significantly associated with perceived support ($\beta = 0.469$, $p < 0.0005$) and explained 18.5 per cent of the additional variance. ACCs' narratives suggested the most important aspect of similarity was 'shared care-giving experience', as it optimised the support received from peers, and also enhanced the quality of the relationship. In conclusion, both data-sets underscored that peer similarity importantly influences support perceptions. The importance of 'shared care-giving experience' suggests that a more comprehensive understanding of this concept is needed to optimise peer-matching endeavours. The influence of peer similarity on relationship quality should also be explored. (RH)

ISSN: 0144686X

From : <http://www.cambridge.org/aso>

'I just want to get on with my life': a mixed-methods study of active management of quality of life in living with dementia; by Charlotte L Clarke, Sarah E Keyes, Heather Wilkinson (et al): Cambridge University Press, February 2018, pp 378-402.

Ageing and Society, vol 38, no 2, February 2018, pp 378-402.

The active management of the experience of living with dementia appears to improve quality of life despite the lack of disease modification. However, research to date has been largely of modest scale, and explanatory factors for improvements have been under-conceptualised. Thus, although promulgated through national strategies, the evidence base is relatively weak. This paper reports on a nation-wide study of the influence of the

National Dementia Strategy for England in relation to Dementia Adviser and Peer Support Network services in 40 demonstration sites. The research aimed to identify ways in which the services contribute to the well-being and resilience of people with dementia and care partners. A mixed-methods research design collected data through: activity and outcome monitoring; organisational surveys; in-depth case studies, including qualitative interviews with people with dementia (N = 47) and care partners (N = 54); well-being and quality of life measures; and interviews with staff and other stakeholders (N = 82). Three themes are explored: addressing individual and community needs; promoting independence, control and choice; and getting a life back. Services promoted independence, control and choice, and consequently enabled people to re-narrate their lives as purposeful within their communities. Ways in which these are achieved resemble the public health model of lay health advisor. This research adds to the imperative to approach dementia as a key public health concern.

ISSN: 0144686X

From : <http://www.cambridge.org/aso>

Implementing reverse mentoring to address social isolation among older adults; by Bethany M Breck, Cory B Dennis, Skye N Leedahl.: Taylor and Francis, July 2018, pp 513-525.

Journal of Gerontological Social Work, vol 61, no 5, July 2018, pp 513-525.

Among older adults reverse mentoring can improve social connection by increasing the digital competence of older adults so they can use technology for social benefit and by facilitating intergenerational connections with young adult mentors. In this paper reverse mentoring was examined within an intergenerational programme that served older adults and utilised the native technological knowledge and skills of young adults who mentored older adult participants. Qualitative data were collected through young adult mentor logs of each session, and through open-ended questions on the post-surveys collected from older adults and young adult mentors. Qualitative analysis revealed three themes related to social connection: (1) an increased sense of self-efficacy for older adults as they built confidence in technological use and for young adults as they developed leadership skills through mentoring, (2) the breaking down of age-related stereotypes and (3) intergenerational engagement and connection. The findings demonstrate that reverse mentoring can be used in various settings to decrease the social isolation of older adults by developing intergenerational connections and increasing older adult usage of technology. (JL)

ISSN: 01634372

From : <http://www.tandfonline.com>

Long-term care and intermediary structures for frail older people: Switzerland and Germany in comparison; by Konstantin Kehl, Rahel Strohmeier Navarro Smith.: Policy Press, May 2018, pp 253-272.

International Journal of Care and Caring, vol 2, no 2, May 2018, pp 253-272.

Long-term care not only includes residential care, home care and familial care, but services 'in-between', such as day and night care, temporary (short-term) stays in nursing homes, respite care, and local infrastructure giving informed advice and conveying informal support. In both Switzerland and Germany, the role of such intermediary structures has been debated and affected by social policy reforms. The authors analyse different functions of intermediary structures, discuss their access and use, and show that intermediary structures can have a different impact on care regimes. (RH)

ISSN: 2397883X

From : <http://www.policypress.co.uk/journals/international-journal-of-care-and-caring>

Making voices heard: older people's access to independent advocacy in Wales; by Older People's Commissioner for Wales. Cardiff: Older People's Commissioner for Wales, May 2018, 65 pp.

A key focus of the role of the Older People's Commissioner for Wales is to ensure that older people have a strong voice and to be a voice for those who do not have one. This principle was in the Commissioner's Framework for Action 2013-17, which outlined her commitment to 'take action to ensure that older people in situations of vulnerability have a strong voice of their own and are heard, including a right to independent advocacy, both for those who have and do not have capacity'. This report reviews the extent to which older people in Wales are getting access to independent advocacy. It finds a lack of understanding of independent advocacy and people's right to it, and shortcomings in the way in which it is offered. It considers the effectiveness of current legislation and the way it is applied, and insufficiency of the data in relation to statutory independent advocacy. Recommendations are made for action required of local authorities, health boards and the Welsh Government. (RH)

From : <http://www.olderpeoplewales.com/en/Reviews/advocacy2018.aspx>

Organizing seniors to protect the health safety net: the way forward; by Leena Sharma, Carol Regan, Katherine S Villers.: Taylor and Francis, May-June, July-September 2018, pp 400-417.

Journal of Aging and Social Policy, vol 30, nos 3-4, May-June, July-September 2018, pp 400-417.

Over the past century, the organised voice of older people has been critical in building the US health safety net. Since the 2016 election, that safety net, particularly the Medicaid programme, is in jeopardy. As we have seen with the rise of the Tea Party, older people's support for health care programmes _ even programmes that they use in large numbers _ cannot and should not be taken for granted. This article provides a brief history of advocacy for older people and an overview of the current organising landscape for older people. It also identifies opportunities for building the transformational organising of low-income older people needed to defend against sustained attacks on critical programmes. Several suggestions are made, drawn from years of work in philanthropy, advocacy and campaigns, for strengthening the ability to organise older people _ particularly low-income older people _ into an effective political force advocating for Medicaid and other safety net programmes. (RH)

ISSN: 08959420

From : <http://www.tandfonline.com>

Peer support, expert help and social interaction; by Sarah Roberts, Lisa Smith.: Hawker Publications, March/April 2018, pp 32-34.

Journal of Dementia Care, vol 26, no 2, March/April 2018, pp 32-34.

'Memory Matters' courses are designed to offer education and advice to people soon after a diagnosis of with dementia or other memory problems, and their carers. The authors wanted to know how these courses were experienced by participants, and this article reports on the results of their evaluation. Commissioned and initially run by Devon partnership NHS Trust (DPT), the course aimed to help people to adapt more quickly to their diagnosis of dementia. The evaluation found that the course had a positive impact on how participants live with memory problems, and with evidence that their well-being is significantly enhanced. It found the courses provided a combination of reassurance through peer support, social interaction and professional advice. (RH)

ISSN: 13518372

From : <http://www.journalofdementiacare.co.uk>

2017

Bangladesh special edition; by Helpage International.: HelpAge International, July 2017, pp 1-12.

Ageways, no 85, July 2017, pp 1-12.

Helpage International has been working with other non-governmental organisations (NGOs) in Bangladesh for more than 20 years, changing the way older people are viewed and treated. Its advocacy work helped to secure the National Policy for Older Persons in 2013 and the Maintenance of Parents Act 2013. Helpage International's Bangladesh country office and partner organisations have been actively engaged in drafting the Older People's Foundation Bill, expected to become law in 2017, to improve older Bangladeshi people's well-being. This special issue of Ageways looks at how cultural campaigning and media work - such as through Age Demands Action (ADA) - promotes older people's rights and influences policy. (RH)

From : <http://www.helpage.org/ageways>

The benefits of being a senior mentor: cultivating resilience through the mentorship of health professions students; by Sean N Halpin, Rebecca L Dillard, Ellen Idler (et al).: Taylor and Francis, 2017, pp 283-294.

Gerontology and Geriatrics Education, vol 38, no 3, 2017, pp 283-294.

Senior Mentor Programs (SMPs) in the United States pair community-dwelling older adults with health profession students, to facilitate knowledge, improve communication skills and promote positive attitudes regarding the ageing process. Although evidence exists that SMPs meet these goals, their psychosocial impact on the senior mentors remains unexplored. This study assessed 101 mostly female (64.4%) senior mentors (mean age = 77.6) pre- and post-program. Although mentors had no change in the amount of perceived ageism experienced or expectation of experiencing ageism, their concern or anxiety over ageism significantly decreased from pre- (M = 21.58) to post-test (M = 20.19). Qualitative thematic analysis indicated meaningfulness of program and scheduling difficulties as prevalent themes. Mentors who reported less concern about ageism following the program were more likely to have experienced ageism in the year prior to the program and to attend religious services more often, another potential intergenerational contact. These results highlight possible benefits of mentor service for older people.

ISSN: 02701960

From : <http://www.tandfonline.com>

Developing a novel peer support intervention to promote resilience after stroke; by Euan Sadler, Sophie Sarre, Anthea Tinker (et al): Wiley, September 2017, pp 1590-1600.

Health and Social Care in the Community, vol 25, no 5, September 2017, pp 1590-1600.

Stroke can lead to physical, mental and social long-term consequences, with the incidence of stroke increasing with age. However, there is a lack of evidence of how to improve long-term outcomes for people with stroke. Resilience, the ability to 'bounce back', flourish or thrive in the face of adversity improves mental health and quality of life in older adults. However, the role of resilience in adjustment after stroke has been little investigated. The authors report on the development and preliminary evaluation of a novel intervention to promote resilience after stroke. The study applied the first two phases of the revised UK Medical Research Council (MRC) framework for the development and evaluation of complex interventions: intervention development (phase 1), and feasibility testing (phase 2). Methods involved reviewing existing evidence and theory, interviews with 22 older stroke survivors and 5 carers, and focus groups and interviews with 38 professionals to investigate their understandings of resilience and its role in adjustment after stroke. The study used stakeholder consultation to co-design the intervention, and returned to the literature to develop its theoretical foundations. It then developed a 6-week group-based peer support intervention to promote resilience after stroke. Theoretical mechanisms of peer support targeted were social learning, meaning-making, helping others and social comparison. Preliminary evaluation with 11 older stroke survivors in a local community setting found that it was feasible to deliver the intervention, and acceptable to stroke survivors, peer facilitators, and professionals in stroke care and research. This study demonstrates the application of the revised MRC framework to systematically develop an empirically and theoretically robust intervention to promote resilience after stroke. A future randomised feasibility study is needed to determine whether a full trial is feasible with a larger sample and wider age range of people with stroke. (RH)

ISSN: 09660410

From : <http://wileyonlinelibrary.com/journal/hsc>

Giving a voice: advocacy on behalf of people with dementia and people with cancer: a study on the effects on service users' lives; by Ziv Amir, Margaret Coffey, Liz Smith, Beth Johnson Foundation - BJJ; University of Salford. Stoke-on-Trent: Beth Johnson Foundation, May 2017, 30 pp.

The University of Salford carried out this review of advocacy work undertaken by the Beth Johnson Foundation (BJF) in recent years. The focus is on two projects on meeting the different needs of people with dementia (in Stoke and North Staffordshire) and people with cancer (initially in Stoke and North Staffordshire, but then across most of Staffordshire, also Wolverhampton). The project reports variously comment on: recruitment and needs assessment; interventions and activities; immediate outcomes for users; making a difference; improving interactions between clients and support services; peer support; user satisfaction; ideas for improvement; the role of volunteer coordinators; and staff views and recommendations. The report also helps raise awareness of the stereotypes and the ignorance surrounding some health conditions. It also notes how advocacy support service has had a very positive impact on people's lives. (RH)

From : Beth Johnson Foundation, Parkfield House, 64 Princes Road, Stoke-on-Trent, ST4 7JL. Email: angela.tunncliffe@bjf.org.uk

Helping DB members make better retirement decisions: the role of schemes, advisers, regulators and government: a joint policy paper; by LCP Insight Clarity Advice, Lane Clark and Peacock LLP; Royal London. London: Royal London, August 2017, 30 pp.

In the last few years, people with Defined Benefit (DB) pension rights have had many options to reshape their retirement incomes, such as taking their pension earlier or later than the normal scheme pension age. This paper asks whether more could be done to help DB members make the right choices as they approach retirement. It brings together the results of specially commissioned surveys of occupational pension schemes and of financial advisers, to answer key questions about the role of schemes, advisers, regulators and government in reshaping pension benefits for members of DB schemes. It concludes that there are vast amounts of pension wealth lie in DB pension schemes. While people have more choices about how to access that wealth than ever before, many of those with DB pension wealth appear to have little or no information about the choices available to them, nor the support they need to make the best choices. Legislation and regulatory changes such as improved information from pension schemes, an updated regime for advising on DB to DC (Defined Contribution) transfers, and new legal rights to partial transfers could all help to deliver better outcomes for savers. (RH)

From : <https://www.royallondon.com/Documents/Policy%20Papers/Helping-DB-members-make-better-retirement-choices.pdf>

'It ain't what you do, it's the way that you do it'; by Anna Buckell.: Hawker Publications, September/October 2017, pp 18-19.

Journal of Dementia Care, vol 25, no 5, September/October 2017, pp 18-19.

Pre-assessment counselling is helping to minimise anxiety surrounding the diagnostic process. The author and colleagues discuss findings from their Early Intervention Dementia Service (EIDS), which was set up in 2010 to provide timely assessment, diagnosis and post-diagnosis support to people with dementia in Worcestershire. The service aims to facilitate choice, control and adjustment through person- and family-centred care that is tailored to meet individual needs. (RH)

ISSN: 13518372

From : <http://www.careinfo.org.uk>

Providing support to surrogate decision-makers for people living with dementia: healthcare professional, organisational and community responsibilities; by Christopher Shanley, Dierdre Fetherstonhaugh, Linda McAuliffe (et al).: Wiley, September 2017, pp 1563-1570.

Health and Social Care in the Community, vol 25, no 5, September 2017, pp 1563-1570.

The prevalence of dementia will continue to increase with the ageing of the population. Many people living with dementia will reach a stage where surrogate decision-makers - mostly family carers - will need to make a range of decisions on their behalf. The aim of this Australian study was to learn from surrogate decision-makers how they can be most effectively supported in this role. The study employed a qualitative design using semi-structured face-to-face or telephone interviews with a purposive sample of 34 surrogate decision-makers of people living with dementia. Transcripts of participant interviews were reviewed using a thematic approach to analysis. Four main themes were identified from this analysis: needing greater community awareness of dementia and its impact; intervening early in cognitive decline; relying on health professionals for ongoing support; and seeking and using support from wherever is relevant for each person. Based on this analysis and a review of the literature, the authors propose a holistic set of recommendations for the support of surrogate decision-makers. Healthcare professionals need to help family carers understand the likely trajectory of dementia, including the significance of surrogate decision-making. They can support the person living with dementia and their surrogates to undertake advance care planning, and they can act as empathic guides during this process. Health and community care organisations need to provide a "key worker" model wherever possible, so that the person living with dementia and the surrogate decision-maker do not have to seek support from multiple staff members or organisations. Carer support programmes can routinely include information and resources about surrogate decision-making. Community and government organisations can help people prepare for the possibility of becoming surrogate decision-makers by promoting a greater public awareness and understanding of both dementia and advance care planning. (RH)

ISSN: 09660410

From : <http://wileyonlinelibrary.com/journal/hsc>

Renegotiating power in adult safeguarding: the role of advocacy; by Sarah P Lonbay, Toby Brandon.: Emerald, 2017, pp 78-91.

Journal of Adult Protection, vol 19, no 2, 2017, pp 78-91.

The increased involvement of adults at risk in the safeguarding process has become a prominent issue within English safeguarding policy. However there is evidence to suggest that actual levels of involvement are still low. The purpose of this paper was to present findings from a PhD study in relation to the benefits of advocacy in supporting this involvement in adult safeguarding for older people. Participants in the study included advocates and social workers who had experience of working with older people through the safeguarding process within two North East England local authorities. A critical realist approach through in-depth interviews was taken with all the participants. The research findings in relation to the benefits of advocacy in supporting older people going through safeguarding processes were reported. The practical limitations and factors which help and hinder advocacy support within the process were also considered. The theoretical implications for power, empowerment, and advocacy were also explored. A key limitation of this research was that it did not include older people who had been through safeguarding amongst the participants. Key implications for practice and policy are discussed. (JL)

ISSN: 14668203

From : www.emeraldinsight.com/loi/jap

The Taiwanese Association of Family Caregivers: transformation in the long-term care debate for carers; by Frank T Y Wang, Chen-Fen Chen.: Policy Press, March 2017, pp 121-126.

International Journal of Care and Caring, vol 1, no 1, March 2017, pp 121-126.

Accepting political appointment from the government is a double-edged sword for an advocacy group, which could mean a chance to influence policies or conflicts with other advocacy groups. The Taiwanese Association

of Family Caregivers (TAFC) went through such a process of transformation when it was appointed as a member of a formal committee set up by the Taiwanese government in 2009 to develop and implement a long term care insurance scheme. The authors called this process TAFC's awakening, because the opportunity served as a catalyst for TAFC to confirm its identity as a representative of carers, speaking solely from the carer's perspective. (RH)

ISSN: 23978821

From : <http://policypress.co.uk/journals/international-journal-of-care-and-caring>

Why are relatives of care home residents reluctant to "rock the boat"?: Is there a culture of acceptance?; by Elizabeth Welch, Sinead Palmer, Ann-Marie Towers, Nick Smith.: Emerald, 2017, pp 124-132.

Working with Older People, vol 21, no 2, 2017, pp 124-132.

Are relatives of care home residents are best placed to act as 'champions' or advocates for their family members, as is often the expectation? Focus groups and interviews were conducted with 25 relatives of residents in four care homes for older people in the South East of England. Two rounds of focus groups were held in each participating care home. The first was to discuss any issues arising from the care received, or concerns about the home itself. The second was to enable a deeper exploration of the key themes that arose from the first round, and to explore why relatives, in this case, failed to complain. Thematic analysis revealed a complex range of emotions experienced by relatives that contributed to a conflict between what they believed to be the correct response and how they behaved in reality, which led to a culture of acceptance. Analysis revealed some relatives were reluctant to 'interfere', for fear of possible negative repercussions; thus they downplayed issues in an attempt not to "rock the boat". This paper discusses the flaws in the policy emphasis on personalisation and the reliance on family members as advocates. It concludes with suggestions on how care homes may foster an environment where relatives, and indeed residents, feel comfortable to raise issues and concerns. (RH)

ISSN: 13663666

From : www.emeraldinsight.com/loi/wwop

2016

Ageing with a learning disability: self-building peer support to combat loneliness and social isolation; by Andrew Power, Ruth Bartlett.: British Society of Gerontology, December 2016, pp 23-27.

Generations Review, vol 26, no 2, December 2016, pp 23-27.

In recent years, around one third of local authorities have closed day services to adults with learning disabilities, resulting in about 1 in 4 of these adults being stuck at home and vulnerable to social isolation. In addition, an outcome of local authority austerity cuts have affected the whole adult social care sector. The co-researchers of this article wanted to find out what is filling this gap for people with learning disabilities' daily lives, and particularly to know whether local peer advocacy has a role to play. Interviews were conducted with 12 participants in two age groups (40-55 and 55+). The study also identified a small range of local peer-support groups around the urban region where the study took place, which enabled people to meet other self-advocates and to feel comfortable being with others. Not only did this form of peer advocacy relieve loneliness and isolation, it also gave participants the opportunity to learn skills enabling them to participate in the community. (RH)

From : <http://www.britishgerontology.org>

Care homes lay assessor project: using volunteers to improve the quality of life of older people living in care homes; by Kenneth Walter Dolbear.: Emerald, 2016, pp 94-100.

Working with Older People, vol 20, no 2, 2016, pp 94-100.

This paper outlines the learning from an innovative approach to using volunteers as lay assessors to secure improvements in the quality of life of older people in care homes. The paper describes the implementation of pilot lay assessor scheme in Bristol, and systematically explores the learning from this case study. The paper concludes that despite a number of important challenges and limitations, a lay assessor approach, particularly when conducted in close co-operation with a local council, can indeed provide demonstrable quality of life benefits for older people in closed institutions such as care homes. The case study highlights key implications for practice including: possibility to recruit, motivate and train volunteers for a lay assessor scheme; working with a local council and providers of care homes to produce real improvements in quality of life; lay assessor schemes as an important way of "shining a light" into closed institutions; defining quality of life and balancing this with institutional attitudes towards risk can be extremely challenging; and working with care home managers to provide them with ideas and support that is effective in bringing about meaningful change. (RH)

ISSN: 13663666

From : www.emeraldgroupublishing.com/wwop.htm

Dementia advisers survey: survey of provision of dementia adviser services; by Ipsos MORI Social Research Institute; Age UK; Department of Health - DH. London: Ipsos MORI, February 2016, 61 pp.

Dementia advisers provide a single identifiable point of contact for people with dementia and their carers following a diagnosis. The Department of Health (DH), working with Age UK and Ipsos MORI, undertook a project to investigate the provision of services available for older people in England, with a particular interest in understanding the role and functions of dementia adviser services. Ipsos MORI conducted an online survey with those responsible for commissioning dementia services in care commissioning groups (CCGs) and local authorities (LAs) in October and November 2015. Of 209 CCGs and 150 LAs, 89 CCGs and LAs responded to the voluntary survey. The aim was to understand the profile and regional variation of dementia-specific services being provided to those with dementia and their families; understand the scope and nature of the dementia services that are provided; identify gaps in service provision for people living with dementia and their families; and understand the profile of services available to older people throughout England. This survey's findings cover who commissions dementia adviser services; services available to older people, including dementia services; how dementia adviser services are commissioned, including the extent of joint commissioning; who provides dementia adviser services; the ways in which dementia advisers provide support; and the cost of commissioning services. Dementia adviser services were found in most of the areas surveyed: 81 out of 89 (91%) commissioners stated that there is a dementia adviser service or similar in their area. In three-quarters of cases, the CCG/LA commissions the Alzheimer's Society to deliver dementia adviser services, by individuals variously also referred to as dementia support workers, dementia Care advisers or dementia navigators. Nearly half (47%) of the commissioners responding said that they jointly commission dementia adviser services with other CCGs and LAs. Where a dementia adviser service is unavailable or is not known to exist within an area, commissioners report a variety of other services available for older people, and people with dementia and their carers. (RH)

From : Download:

https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/513191/Dementia_Advisers_Full_Report.pdf

Portuguese working group advocacy for intergenerational policies: challenges and results; by Marta Goncalves, Alan Hattlon-Yeo, Carla Branco.: Emerald, 2016, pp 30-35.

Working with Older People, vol 20, no 1, 2016, pp 30-35.

The authors examine the benefits and challenges of the advocacy group for intergenerational policies that was created in Portugal in 2012, the European Year of Active Ageing and solidarity between Generations. The group conducted 9 closed group meetings every 3 months (average attendance of five members), and 6 public events bringing together researchers, policy makers, practitioners and civil society. The group was established as a response to the various social changes happening in Portugal as a consequence of the ageing population, low-birth rate and migration, leading to the need to explore new responses which are based both on the need to promote active ageing and intergenerational solidarity, and also the importance of family and state support to multigenerational families as a building block to strengthen communities. The paper sets the context of the changing social situation in Portugal, describes the process used through both closed and public meetings to discuss this, and then describes the perspectives of four core groups. Only by pooling resources and thinking intergenerationally will we be able to deliver the opportunities and support that citizens will need to enable them to age well across the life course. Drawing on this and the strong tradition of the family in Portugal it seeks to make the case that an intergenerational approach is essential to the country's future social well-being. (RH)

ISSN: 13663666

From : www.emeraldgrouppublishing.com/wwop.htm

The role of aging and disability resource centers in serving adults aging with intellectual disabilities and their families: findings from seven states; by Caitlin E Coyle, Michelle Putman, John Kramer, Jan E Mutchler.: Taylor and Francis, January-March 2016, pp 1-14.

Journal of Aging and Social Policy, vol 28, no 1, January-March 2016, pp 1-14.

For the first time, adults with intellectual and developmental disabilities (I/DD) - such as Down syndrome and autism - are living to experience old age. The purpose of this project was to assess the activities of ageing and disability resource centres (ADRCs) as they seek to serve older adults with intellectual disabilities and their family caregivers. Data come from 21 in-depth qualitative interviews with ADRC staff in seven states. Results of this qualitative analysis indicate that ADRCs are not focusing explicitly on adults aging with I/DD and their family caregivers, but meeting the needs of this population is a future goal of ADRCs. Challenges related to accessing and providing information and referral services for adults aging with I/DD were described, and highlight existing unmet needs of this population. Supporting adults who simultaneously require ageing and disability services requires true coordination of ageing and disability service systems. (RH)

ISSN: 08959420

From : <http://tandfonline.com>

2015

Dementia support: an innovative approach from Norfolk; by Katy Ewin, Elizabeth Yaxley, Martyn Patel.: British Geriatrics Society, September 2015, pp 1-4.

BGS Newsletter, no 55, September 2015, pp 1-4.

One bed in every four in an acute general hospital is thought to be occupied by someone with dementia. Starting in late 2013, the Norwich and Norfolk Hospital has been employing dementia support workers, who are specially trained, non-clinical staff, to provide emotional support and advocacy to people with dementia and their carers. This article gives a brief assessment and a case study of the service. (RH)

ISSN: 17486343

From : www.bgs.org.uk

Making adult safeguarding personal; by Marcus Redley, Sally Jennings, Anthony Holland, Isabel Clare.: Emerald, 2015, pp 195-204.

Journal of Adult Protection, vol 17, no 3, 2015, pp 195-204.

The purpose of this study, based in one large English county council, was to ascertain what efforts Adult Safeguarding Leads (ASLs), generic advocates and Independent Mental Capacity Advocates were making to involve service users in decisions about protective measures, and to investigate whether the Adult Safeguarding service was delivering outcomes which were valued by its users. Semi-structured interviews were carried out with a sample of key stakeholders. Study findings showed that ASLs were making efforts to involve service users in the complex and demanding process of safeguarding. These efforts, however, were shaped by their understandings of the difference between 'residential' and 'community' settings. Furthermore clarification is needed of what it may mean to adopt a person-centred approach to adult safeguarding, and the responsibilities of ASLs when individuals with capacity to make decisions about this aspect of their lives are unwilling to engage with the safeguarding process. (JL)

ISSN: 14668203

From : www.emeraldinsight.com/jap.htm

Peer support: what is it and does it work?; by NESTA (National Endowment for Science, Technology and the Arts); National Voices. London: NESTA; National Voices, 2015, 57 pp.

Peer support involves people drawing on shared personal experience to provide knowledge, social interaction, emotional assistance or practical help to each other, often in a way that is mutually beneficial. Peer support is different from other types of support because the source of support is a similar person with relevant experience. This review of the literature was undertaken by two reviewers at an independent organisation, The Evidence Centre; they searched ten bibliographic databases independently to identify studies published between January 2000 and January 2015. More than 20,000 studies were screened and 1,023 studies were identified for inclusion. 524 of these studies examined the outcomes of peer support, while the others described processes. This review examines the effect of various types of peer support on people's experience, behaviour and health outcomes and health service use. Based on the totality of evidence, the review concludes that the top three most useful types of initiatives for improving emotional and physical well-being may be: face-to-face groups run by trained peers which focus on emotional support, sharing experiences, education and specific activities such as exercise or social activities; one-to-one support offered face-to-face or by telephone; and online platforms such as discussion forums.

From : http://www.nationalvoices.org.uk/sites/www.nationalvoices.org.uk/files/peer_support_-_what_is_it_and_does_it_work.pdf

Promoting spiritual care for older people in New Zealand: the Selwyn Centre for Ageing and Spirituality; by Chris Perkins.: Emerald, 2015, pp 107-113.

Working with Older People, vol 19, no 3, 2015, pp 107-113.

The development of a centre to promote the spiritual care of older people in New Zealand is described, as is the spiritual scene in New Zealand. The history of the Selwyn Centre for Ageing and Spirituality (SCAS) is illustrated by case studies on research, education and advocacy, noting challenges in providing spiritual care to older people. The number of New Zealanders claiming a religious affiliation is dropping, but spirituality is of interest and relevance to many people. The acknowledgement of Maori spirituality has affected government policy. The SCAS has supported research and provided education throughout the country. Advocacy is difficult where care focuses on the physical and funding for frail older people is limited. While the importance of good spiritual care for older people is clear, this is not easy to achieve. However, an organisation like SCAS has

brought the issue to national awareness, and made some contribution to increased understanding and improved practice. As the population ages and expressions of spirituality diversify, a deeper understanding of spirituality beyond Christian religion is required. While the SCAS focuses on older people, it has formed a nexus of people more widely interested in spirituality at all ages, in different cultures and throughout the country. (RH)

ISSN: 13663666

From : www.emeraldgroupublishing.com/wwop.htm

Welcoming and celebrating diversity: the Uniting journey of learning on inclusive practice; by Melanie Dicks, Evelyn Santoro, Steve Teulan.: Wiley, 2015, pp 26-28.

Australasian Journal on Ageing, special issue, 2015, pp 26-28.

This invited editorial briefly describes the work of Uniting, an Australian nonprofit organisation that works for advocacy and social justice on behalf of older people, and particularly its work with the lesbian, gay, bisexual, trans and intersex (LGBTI) community. (JL)

ISSN: 14406381

From : wileyonlinelibrary.com/journal/ajag

2014

Age-friendly Portland: a university-city-community partnership; by Margaret B Neal, Alan K DeLaTorre, Paula C Carder.: Taylor and Francis, January-June 2014, pp 88-101.

Journal of Aging and Social Policy, vol 26, nos 1-2, January-June 2014, pp 88-101.

This article addresses the question of how creating an age-friendly city has come to be an important policy and planning issue in Portland, Oregon. In 2006, researchers from Portland State University's Institute on Aging examined the meanings of age friendliness among a broad range of participants in the city. The research was conducted in conjunction with the World Health Organization's (WHO) Age-Friendly Cities Project and followed the completion of two earlier non-WHO-related projects. The city of Portland, through the Institute on Aging, was one of nine original members to apply for and be accepted into the WHO Global Network of Age-Friendly Cities and Communities. An Age-Friendly Portland Advisory Council was formed to guide the development of an action plan, monitor progress over time, and suggest additional research. To understand how Portland's age-friendly policy effort has developed over time, the authors use J W Kingdom's (1984) agenda-setting framework to explain how the policy problem was formulated, how solutions were developed, and the influence of local politics. The Portland experience provides a case study that other cities, especially those with a strong commitment to community-engaged urban planning, may find useful as they develop age-friendly initiatives. (RH)

ISSN: 08959420

From : <http://www.tandfonline.com>

Early and timely intervention in dementia: pre-assessment counselling; by Jenny La Fontaine, Anna Buckell, Tanya Knibbs, Mel Palfrey.: British Psychological Society, October 2014, pp 21-27.

Faculty for the Psychology of Older People (FPOP) Newsletter, no 128, October 2014, pp 21-27.

In 2012, the FPOP Dementia Workstream chose to prioritise early diagnosis in light of considerable attention being given to achieving an earlier diagnosis of demetnia in the UK/ This is the first of four papers commissioned by FPOP in collaboration with the Dementia Action Alliance on psychological aspects of early diagnosis in dementia. It provides a summary narrative review of literature from recent years concerning pre-assessment counselling for people with cognitive symptoms. The review considers the policy and research context, and those factors which influence help-seeking. It discusses pre-assessment principles and practice, including challenges such as balancing honesty, openness and hope. (RH)

ISSN: 13603671

From : www.bps.org.uk

Treatment and prevention of elder abuse and neglect: where knowledge and practice meet - a model for intervention to prevent and treat elder abuse in Israel; by Sara Alon, Ayelet Berg-Warman.: Taylor and Francis, March-May 2014, pp 150-171.

Journal of Elder Abuse and Neglect, vol 26, no 2, March-May 2014, pp 150-171.

Successful handling of elder abuse and neglect requires various interventions. This article presents findings from an evaluation study of a model for intervention implemented in three municipalities in Israel. Data from 558 older adults who were exposed to abuse and treated through the intervention, along with interviews with victims, abusers, and professionals revealed that improvement was achieved in 66% of the cases. In 20% of the cases, the abuse was stopped. The most widespread type of intervention consisted of individual counselling.

Legal intervention yielded the highest rate of improvement (82%). Provision of supportive services for victims of neglect was found to be most effective (82% of improvement in the situation). (RH)

ISSN: 08946566

From : <http://www.tandfonline.com>

2013

Advances in gerontology research and education: perspectives from the Australian Association of Gerontology; by Tony Coles ... (et al.): Wiley Blackwell, October 2013, pp 40-45.

Australasian Journal on Ageing, Supplement 2, October 2013, pp 40-45.

This paper presents a brief history of ageing research and education in Australia, an analysis of current opportunities and gaps and future directions for gerontological research and education, framed alongside the growth and development of the Australian Association of Gerontology (AAG) as a prominent organisation in the communication and application of knowledge to age well. (JL)

ISSN: 14406381

From : <http://www.wileyonlinelibrary.com/journal/ajag>

Advances in research, education and practice in geriatric medicine, 1982-2012; by Leon Flicker.: Wiley Blackwell, October 2013, pp 35-39.

Australasian Journal on Ageing, Supplement 2, October 2013, pp 35-39.

Over the last 30 years, major advances in the provision of services for frail older people in Australasia have taken place. This has been spurred on by the accumulation of the evidence for benefits of the multidisciplinary team model of comprehensive geriatric assessment and management. Current research is now uncovering mechanisms of frailty associated with the ageing process and will lead to further interventions in the management of the health problems of older people. These interventions will almost certainly include both medical and lifestyle strategies. Although there have been major improvements in the education of health professionals in aspects of geriatrics, more concerted efforts are required for the ageing population. (JL)

ISSN: 14406381

From : <http://www.wileyonlinelibrary.com/journal/ajag>

The best things in life are free: community-powered advocacy; by Clare Wightman.: Emerald, 2013, pp 25-31.

Working with Older People, vol 17, no 1, 2013, pp 25-31.

Advocacy practice is about being a corrective to failures in other services and an intermediary between service users and providers. It can be very vulnerable at times to being seen as an "add-on" of unproven value. This opinion piece explores fresh approaches to advocacy for older and disabled people, and suggests a new role for professional advocates. It uses the experiences of Grapevine in Coventry, and draws on the findings of a project conducted with advocacy organisations in the Midlands and South East, many of whom felt that professional advocacy was not getting to the root of the problem. The article asks practitioners to consider the new role advocates might play in developing and connecting networks of local people for mutual help and support. This "community-powered" advocacy could provide effective root cause help and protect the sector's legitimacy during unprecedented financial austerity. (RH)

ISSN: 13663666

From : www.emeraldinsight.com

Counselling in dementia: eliciting memories; by Mike Fox.: Hawker, July/August 2013, pp 32-33.

Journal of Dementia Care, vol 21, no 4, July/August 2013, pp 32-33.

The author explains how counsellors can play an important role in helping people with dementia to remember their past, and in doing so, help them gain strength from the counselling process. (RH)

ISSN: 13518372

From : www.hawkerpublications.com

Dementia advocacy in a time of austerity; by Geraldine Brown, Nicola Standen, Kanwal Khilji.: Emerald, 2013, pp 58-64.

Working with Older People, vol 17, no 2, 2013, pp 58-64.

An exploratory study on the provision of dementia advocacy adopted a qualitative approach. Data is based on 17 semi-structured interviews with a range of key stakeholders, and on observations of the practice of advocates working in third sector organisations in five localities across the UK. The study draws attention to the benefits of advocacy as a means of supporting older people with dementia; and illuminates internal and external challenges encountered by third sector organisations providing this type of support. The study captures the additional dimension that austerity brings to third sector organisations working in this field and the ways in

which financial constraints are shaping the field of dementia advocacy. This paper contributes to ongoing debates in relation to a contradiction between the coalition government's Big Society ideas and the reality as it unfolds in a specific part of the third sector. (RH)

ISSN: 13663666

From : www.emeraldinsight.com/wwop.htm

Dementia care advisors transforming care; by Rob Hasker, Liz Sturgess, John Adams.: Hawker Publications, November/December 2013, pp 16-17.

Journal of Dementia Care, vol 21, no 6, November/December 2013, pp 16-17.

The National Dementia Strategy, 'Living well with dementia' (Department of Health, 2009) set a vision for transforming dementia services. The Strategy aimed to achieve better awareness of dementia, earlier diagnosis, and high quality of treatment regardless of stage of the illness. The authors report on progress of the first team of dementia care advisors (DCAs) to be based within the National Health Service (NHS). (RH)

ISSN: 13518372

From : www.careinfo.org

Discovering Marte Meo and Contact; by Paul Whitby.: British Psychological Society, January 2013, pp 43-49.

FPOP Newsletter, no 122, January 2013, pp 43-49.

Marte Meo means "by one's own strength", and is a counselling or coaching method intended to improve the quality of interactions between staff and people with communication or developmental difficulties. It uses brief video recordings of episodes of care which are then analysed by a member of staff and a Marte Meo therapist, to focus on positive aspects of communication and responsiveness. The author investigates examples of this technique's use in Norway and Denmark. He then describes the Contact programme being used in the Netherlands, which also uses video, but unedited, so that both good and bad moments are considered. He considers how these methods might be used to inform practice with front-line care staff on "what works". (RH)

ISSN: 13603671

From : www.bps.org.uk

Elder mediation in theory and practice: study results from a national caregiver mediation demonstration project; by Alexandra Crampton.: Taylor & Francis, July 2013, pp 423-437.

Journal of Gerontological Social Work, vol 56, no 5, July 2013, pp 423-437.

Mediation is a process through which a third party facilitates discussion among disputing parties to help them identify interests and ideally reach an amicable solution. Elder mediation is a growing subspecialty to address conflicts involving older adults, primarily where caregiving or finances are concerned. Mediation is theorised to empower participants but critics argue that it can exacerbate power imbalances among parties and coerce consensus. This article examines the potential and pitfalls of using mediation to empower older adults in the context of family caregiving and adult guardianship disputes through an exploratory ethnographic study of a national caregiver mediation demonstration project. The study compares mediation in theory from the literature with theory of mediation and empowerment as perceived by study respondents. It then compares mediation as empowering in theory with mediation in practice. Implications from these findings underscore the importance of gerontological social work expertise to ensure the empowerment of vulnerable older adults in mediation sessions. (JL)

ISSN: 01634372

From : <http://www.tandfonline.com>

The importance of a "Lasting Power of Attorney"; by Roberto Martins.: Emerald, 2013, pp 218-220.

Quality in Ageing and Older Adults, vol 14 no 3, 2013, pp 218-220.

The Public Guardian Board Annual Report 2012 stated that the aim is for every adult in England and Wales to have a Lasting Power of Attorney (LPA). This short article outlines the importance of putting an LPA in place, particularly as you plan for your later years. The article takes the form of a review of the current LPA, and offers advice on how to register a LPA. By registering an LPA, both the donor and his/her family benefits from peace of mind. (RH)

ISSN: 14717794

From : www.emeraldinsight.com/qaoa.htm

Mediation and family group conferences in adult safeguarding; by Abbi Hobbs, Andrew Alonzi.: Emerald, 2013, pp 69-84.

Journal of Adult Protection, vol 15, no 2, 2013, pp 69-84.

This article presents an overview of research and practice literature on the use of Mediation (M) and Family Group Conferences (FGC) in the context of adult safeguarding in the UK. The paper describes the main features

of M and FGC and explores how such 'family led' approaches to adult safeguarding fit within the wider agenda of personalisation and empowerment, including the Mental Capacity Act 2005 and its associated Code of Practice. It also considers the main implications for best practice and future research and service priorities. M and FGC in an adult context are inclusive processes that enable people to explore choices and options in a supportive environment, assuring maximum possible independence and autonomous control over basic life decisions, while still addressing the person's need for assistance. When used appropriately, both approaches can be a valuable response to safeguarding concerns, promoting choice and control at the same time as protecting people from risk of abuse and harm. However there are few robust evaluation studies currently available and no systematic research studies have been found on cost-effectiveness. The paper shows that there is a clear need for further pilots of M and FGC in adult safeguarding. If such research and pilot evaluations find M and/or FGC to be effective, then more consideration will need to be given as to how to integrate such approaches into mainstream social work practice. There is also currently wide variation in the training and experience of mediators and FGC co-ordinators, and further work is required to ensure that there are appropriate training and accreditation models in the UK for mediators and FGC co-ordinators working with at-risk adults. (JL)

ISSN: 14668203

From : www.emeraldinsight.com/jap.htm

Productive aging; by International Longevity Center - ILC-Japan. Tokyo: International Longevity Center - ILC-Japan, 2013, 10 pp.

Published on behalf of the ILC Global Alliance, this pamphlet presents statistical information as maps, graphs and charts on a range of themes relating to healthy and active ageing. It also highlights ILC's areas of research, also advocacy in relation to dementia. (RH)

From : International Longevity Center, Toranomom 33 Mori Building, 8th Floor, 3-8-21, Toranomom, Minato-ku, Tokyo, 105-8446 Japan. Website: www.ilcjapan.org/english.html

Religious communities: what can they offer?; by Peter Kevern, Mandy Walker.: Hawker, July/August 2013, pp 26-28.

Journal of Dementia Care, vol 21, no 4, July/August 2013, pp 26-28.

The role that the Anglican clergy and the church community can play in supporting people with dementia was examined in a survey, which looked at who is currently offering support to people with dementia, the types of support, and the support the clergy would like to offer. A questionnaire was sent to all 197 clergy in the Stafford Episcopal Area of the Anglican Diocese of Lichfield; 66 replies were received (33.5% response rate). The clergy are already involved in pastoral visits and support; and the findings suggest that they would welcome training that would help increase their confidence in providing such support, or as advocates. (RH)

ISSN: 13518372

From : www.hawkerpublications.com

Taking their side: the power of storytelling; by Jan Kendall.: Hawker Publications, January/February 2013, pp 23-25.

Journal of Dementia Care, vol 21, no 1, January/February 2013, pp 23-25.

The manager of the Dementia Advocacy Network (DAN) talks about her work. She explains how the careful collecting and sharing of stories has produced a powerful resource, one that shows how independent advocacy is supporting people with dementia through issues and crises in their lives. (RH)

ISSN: 13518372

From : <http://www.careinfo.org/>

2012

Enabling people with dementia to engage in counselling; by Mike Fox.: Hawker Publications, May/June 2012, pp 24-26.

Journal of Dementia Care, vol 20, no 3, May/June 2012, pp 24-26.

The author makes a plea for longer term support for people with dementia. He argues that it often takes involvement of a third party (such as a partner, family member or carer) to facilitate a helpful counselling process for a person with dementia. (RH)

ISSN: 13518372

From : <http://www.careinfo.org/>

Older adult mentors and youth at risk: challenges for intergenerational mentoring programs in family-centered cultures; by M Angeles Molpeceres, Sacramento Pinazo, Rafael Aliena.: Routledge, 2012, pp 261-275.

Journal of Intergenerational Relationships, vol 10, no 3, 2012, pp 261-275.

This article poses some preliminary reflections about the viability of youth mentoring schemes in family-centred cultural contexts based on a pilot experience developed in Spain within the framework of a project aiming to train older adults as youth mentors in five European countries. After an introduction to the field of intergenerational mentoring, a description of the pilot programme follows, with special attention paid to the development of the Spanish local project. Drawing on the project evaluation, some open questions are posed regarding (a) the optimal institutional framing for an intergenerational mentoring programme and (b) the challenge with social representation of the mentor role. (JL)

ISSN: 15350770

From : <http://www.tandfonline.com>

Systematic practice with older people: collaboration, community and social movement; by Mandy Clayton, Glenda Fredman, Eleanor Martin (et al).

PSIGE Newsletter, no 121, October 2012, pp 20-26.

The authors outline the practices they have been developing with their Older People's Project in Camden and Islington to counteract the effects of discrimination and isolation. This article is based on a presentation at the National PSIGE Conference 2012 that is informed by Glenda Fredman's 'Systemic Cs' idea, in which Collaboration is central. The aim is for older people to have a voice and Choice, and focus on how people are Connected in Relationship. Also key to the approach are Communication, Conversation and Co-ordination. Attention to Context is essential, since that gives meaning to actions and beliefs. Circularity, Curiosity and Competence are seen as important in identifying problems and avoiding judgements. (RH)

ISSN: 13603671

From : www.bps.org.uk

2011

'As people get to know it more': experiences and expectations of the Mental Capacity Act 2005 amongst local information, advice and advocacy services; by Kritika Samsi, Jill Manthorpe, Phillip Rapaport.

Social Policy & Society, vol 10, pt 1, January 2011, pp 41-54.

Looks at the level of working knowledge of the Mental Capacity Act 2005 (MCA) possessed by people who work within local information, advice and advocacy agencies and who provide services to older people in their communities in England. Presents the five statutory working principles of the MCA and quotes three of its key extracts with regard to lasting powers of attorney, independent mental capacity advocates and advance decisions. The authors then explore the role of Age Concern staff across North London in providing timely information and advice relating to advance decision making, particularly in the light of the newly implemented Act. Study findings suggest that staff had varied knowledge of the MCA and most lacked confidence in providing detailed advice. Calls for additional training and skills development in order to maximise the benefits of MCA, increase expertise and differentiate more clearly between the information, advice and advocacy given by those in different organisational roles. Also visits briefly the topic of legal literacy amongst older adults. (JL)

ISSN: 14747464

From : <http://www.journals.cambridge.org/sps>

Exploring the advocacy needs of older people with mental health problems in the West Midlands; by Geraldine Brown, Nicola Standen.

Working with Older People, vol 15, issue 1, March 2011, pp 13-18.

The advocacy needs of older people with mental health problems remain a poorly researched area. This paper presents findings from a small study undertaken in the West Midlands. The study investigated the advocacy needs of people aged 65 years and over with mental health problems and determined the current level of demand or need for advocacy among this user group. Respondents included 147 stakeholders including service users, carers and service providers. Overall, findings suggested dissatisfaction with the services provided, with 94% of service users not using advocacy services. In conclusion, the authors describe a need for mechanisms to capture advocacy in order to inform the commissioning of advocacy within mental health services. (JL)

ISSN: 13663666

From : <http://www.pierprofessional.com/wwopflyer/index.html>

Relatives meetings: can we discuss end of life care?; by Amanda Thompsell, Dave Bell.: Hawker Publications, July/August 2011, pp 20-21.

Journal of Dementia Care, vol 19, no 4, July/August 2011, pp 20-21.

The authors share learning from Facing the Future, a project which involved meeting with relatives' groups to talk about end of life issues. Based in south London, the project is a peer support service for carers of people with dementia. It focuses on providing support for carers of people with dementia facing end of life care dilemmas, in the context of objectives in the National Dementia Strategy and the End of Life Care Strategy. The project recruited volunteers who had cared for someone with dementia who had died at least a year before to become peer supporters, who asked care homes about speaking at their regular relatives meetings to introduce the volunteers and generate discussion. The article discusses issues arising from the meetings, including the support needs of the volunteer carers and relatives, and the importance of involving staff. (RH)

ISSN: 13518372

From : www.careinfo.org

The unique and valuable support provided by mentoring and befriending; by Joe Mulvihill.

Working with Older People, vol 15, issue 1, March 2011, pp 34-37.

Against the background of an ageing population and an overburdened NHS, this article argues the case for more mentoring and befriending projects to be set up to support older people with various levels of needs. The many benefits include reducing social isolation and helping with form filling. The author first presents an introduction to mentoring and befriending, along with some case study examples of projects in action. A discussion then follows of some of the ways befriending can be used to support older people from a new report by the Mentoring and Befriending Foundation. Finally, some implications for practice are outlined. Concludes that befriending is an effective intervention in social care planning and should be adopted into packages of care and support for older people. (JL)

ISSN: 13663666

From : <http://www.pierprofessional.com/wwopflyer/index.html>

2010

Bringing dementia out of the shadows for BME elders; by Jan Kendall, Irene Kohler.: Hawker Publications, July/August 2010, pp 16-17.

Journal of Dementia Care, vol 18, no 4, July/August 2010, pp 16-17.

'Bringing dementia out of the shadows for BME elders' is the title of a report on the Ethnic Minority Dementia Advocacy Project (EMDAP) which was published in 2009. The Project was a national project based in a small local advocacy organisation Advocacy Plus (also known as Westminster Advocacy Service for Senior Residents - WASSR). This article outlines the project's key findings and outcomes, for example the positive feedback from working with advocacy providers and BME organisations. (RH)

ISSN: 13518372

Capacity to Communicate: Sense's three-year project training independent mental capacity advocates in communication skills; by Angela Lee-Foster.

The Journal of Adult Protection, vol 12, no 1, February 2010, pp 32-42.

Sense, the leading national charity that supports and campaigns for children and adults who are deaf-blind, set up the Capacity to Communicate Project in response to the new role of independent mental capacity advocates created by the Mental Capacity Act 2005 (HM Government, 2005). The project provided training and information, harnessing best practice around communication and advocacy for people who lack capacity and who have little or no formal communication, in particular those with a dual sensory loss. As part of the training, advocates were asked to submit a written assignment. These case studies, including some adult protection cases, have given us valuable information about the nature and process of independent mental capacity advocacy and what can be done to improve this relatively new statutory role, in particular developing better understanding, skills and processes around communication in order to represent and protect vulnerable adults. (KJ)

ISSN: 14668203

From : Website: <http://pierprofessional.metapress.com/content/121398/doi:10.5042/jap.2010.0092>

Going for brokerage: a task of 'independent support' or social work?; by Peter Scourfield.

British Journal of Social Work, vol 40, no 3, April 2010, pp 858-877.

It is argued that for the agenda to 'personalise' social care in the UK to be successful, adequate systems of support brokerage need to be in place. Where brokerage is situated organizationally and ideologically is not inconsequential, both in terms of the accountability, profile and quality of the 'brokers' and the extent to which service users can feel properly in control of their own care or support. Many involved in support brokerage

argue that independence from statutory bodies is a key principle. However, models of support brokerage have been suggested that propose brokerage as a possible function of the statutory social care sector. The paper traces how and why the 'new' language of brokerage has emerged in official discourses of adult social care. It also discusses the various ideas about what brokerage is and who is supposed to undertake it. It is considered whether support brokerage should be regarded as a form of social work, which is not currently the case. Were independent support brokerage to expand its role in the adult social care system, the question would arise of where that would leave social work with adults. These developments expose conflicts and tensions in New Labour's modernisation agenda. (KJ/RH)

ISSN: 00453102

From : <http://bjsw.oxfordjournals.org/doi:10.1093/bjsw/bcn141>

Intergenerational mentoring in Germany: older people support young people's transitions from school to work; by Tabea Schlimbach.

Working with Older People, vol 14, issue 4, December 2010, pp 4-15.

The high demands that today's young school leavers face in Germany and the increasing recognition of an ageing population with skills and experience to share has led to a rapid increase in mentoring projects where older people work with young school leavers to help them find their way into employment. While still in its infancy, intergenerational mentoring flourishes in Germany and is enjoying enormous public attention. (JL)

ISSN: 13663666

From : <http://www.pierprofessional.com/wwopflyer/index.html>

A manifesto for independent advocacy services in England & Wales: achieving genuine choice, voice and control for all; by Older People's Advocacy Alliance - OPAAL. Stoke-on-Trent: OPAAL, 2010, 16 pp.

The value of independent advocacy is that it supports older people in feeling empowered and enabling them to access appropriate services. However, access to independent advocacy still varies across England and Wales. This manifesto sets out a series of core beliefs relating to advocacy services, and is particularly relevant to the process of personalisation and self-directed support. It states that older people should not have to pay for access to independent advocacy from personal budgets (PBs). (RH)

Price: download

From :

<http://www.opaal.org.uk/Libraries/Local/830/Docs/ADVOCACY%20MANIFESTO%20WEB.pdf>Distribution: A4A, PO Box 31856, Lorrimore Square, London SE17 3XR. info@actionforadvocacy.org.uk

Measuring the outcomes of information and advice services: final report; by Karen Windle, Ann Netten, James Caiels (et al), Measuring Outcomes for Public Service Users Project (MOPSU), Personal Social Services Research Unit - PSSRU, University of Kent. Canterbury: PSSRU, University of Kent, 2010, 90 pp (PSSRU Discussion paper, 2713).

Information, advice and advocacy (IAA) services are fundamental for individuals, their families and carers who need services and support. However, despite their acknowledged value, IAA services find it difficult to obtain secure funding when competing for scarce resources. There is also a lack of outcome tools that commissioners can use to inform decision-making around funding. The research reported here forms part of the 'Measuring Outcomes for Public Service Users' (MOPSU) project funded by the Treasury under the Invest to Save budget and led by the Office for National Statistics (ONS). The overarching aim was to develop the Adult Social Care Outcomes Toolkit (ASCOT) that would provide a variety of approaches to identifying and monitoring value across the range of social care interventions, which are detailed on the website (<http://www.pssru.ac.uk/ascot/>). The aim of this project was to identify a method and design questions that could begin to enable a measurement of robust and valid outcomes within and across IAA services. This report presents methods and results from the exploratory phase in the development of the outcomes tool. The authors bring the empirical work together to discuss the effectiveness of the outcome tool and the developments that needed to be undertaken: the type, extent of questions and administration. (RH)

From : <http://www.pssru.ac.uk/pdf/dp2713.pdf>

Older people with high support needs: how can we empower them to enjoy a better life; by Imogen Blood, Joseph Rowntree Foundation - JRF.: Joseph Rowntree Foundation, October 2010, 16 pp (Ref: 2543).

Round-up: Reviewing the evidence, 2543, October 2010, 16 pp (Ref: 2543).

In 2009, the Joseph Rowntree Foundation (JRF) launched A Better Life, a new research programme focusing on how we can improve the quality of life of older people with high support needs. This Round-up draws out the key messages from 11 reviews commissioned for the programme's first phase, along with other relevant research recently commissioned by JRF. Older people with high support needs live in a range of settings including care homes or nursing homes, sheltered housing, and in their own or relatives' homes. Many live in substandard

private sector housing, and an increasing number live alone. Among the challenges posed by these settings and considered in the research are: affordability; navigating the system; dementia and mental capacity; social isolation; recruiting and retaining a skilled workforce; involving and supporting carers; and end-of-life care. Improving quality of life could involve simple changes to how services are run; and examples of innovative models of care in respect of personalisation and assistive technology are suggested. The full report, 'Equality and diversity and older people with high support needs' by Imogen Blood and Sally-Marie Bamford, considers what we know about the needs and situations of older people with high support needs from different equality groups, and the barriers they commonly face in service provision. (RH)

ISSN: 09583084

From : <http://www.jrf.org.uk/publications/better-life-high-support-needs> Joseph Rowntree Foundation, The Homestead, 40 Water End, York YO30 6WP. Contact: abetterlife@jrf.org.uk; for the latest information: www.jrf.org.uk/better-life

Participation and social justice; by Marian Barnes, Colin Gell, Pat Thomas, Social Policy Association. Bristol: Policy Press, 2010, pp 253-274.

IN: Social Policy Review, 22, Chapter 11, 2010, pp 253-274.

Changes in public service governance since the 1980s have led to changes in service delivery and the relationships between service providers and their users, and more broadly between the state and citizens. By the end of the 21st century, participation has supposedly become official policy in respect of local government and the NHS. The authors examine whether initiatives around participation and user involvement can be considered as contributing to the creation of a more just society. They discuss the relevance to this of the principles of local knowledge and local representation. They assess how the situation of carers and people with mental health problems has benefited from user involvement initiatives. (RH)

From : The Policy Press, University of Bristol, Fourth Floor, Beacon House, Queen's Road, Bristol BS8 1QU. <http://www.policypress.org.uk>

Strengthening older people's rights : towards a UN Convention: a resource for promoting dialogue on creating a new UN Convention on the Rights of Older Persons; by INPEA; International Federation on Ageing - IFA; ILC-US; IAGG; IAHSA; HelpAge International; Global Action on Aging - GAA; Age UK; AARP.: [HelpAge International], 2010, 11 pp.

This publication was produced by 9 non-government organisations (NGOs) to strengthen understanding and awareness of the need for a special rapporteur and convention on the rights of older people. It aims to provide the arguments and tools for engaging people - from older women and men themselves, to civil society organisations, to government officials - across the globe in debate about older people's rights and the role of a convention and special rapporteur. It also suggests ways in which individuals and civil society organisations can promote these new human rights instruments in their countries. It includes a bibliography of essential reading. (KJ/RH)

From : Download from website: <http://www.helpage.org/Resources/Briefings>

Support planning & brokerage service for older people: self directed support; by Maureen Falloon, Deborah Fowler, Sally Prentice, Age Concern London - ACL; London Councils; Age Concern Bromley; London Borough of Bromley. London: Age Concern London - ACL, 2010, 49 pp (booklet) (+DVD 14 mins).

A toolkit developed by Age Concern Bromley in partnership with the London Borough of Bromley. The service provides self-directed support for older people who pay for their own care and support needs. Working with a third sector partner and their Community Volunteers Time Bank, the service enables local authorities and NHS Trusts to invest in preventative services to support a greater number of older people to continue to be independent. The toolkit consists of a booklet, which describes the partnership and provides guidance for local authorities and third sector organisations on commissioning and delivering a support and planning brokerage; and a DVD in which people discuss delivering Age Concern Bromley's service. The booklet presents the business case for local authorities and their strategic partners to invest in creating a support planning and brokerage service for older people delivered by a third sector organisation. Areas covered include creating a service, views from older people and the local authority, and equality issues. The DVD accompanying this booklet was commissioned by London Joint Improvement Partnership and produced by Age Concern Bromley to demonstrate examples of the service. (KJ/RH)

Price: FOC

From : Age Concern London, 1st Floor, 21 St Georges Road, London SE1 6ES. www.aclondon.org.uk

Using family group conferences in safeguarding adults; by Linda Tapper.
The Journal of Adult Protection, vol 12, no 1, February 2010, pp 27-31.

Following the UK Study of Abuse and Neglect of Older People, (O'Keeffe et al, 2007) Comic Relief funded 15 projects across England and Wales to enable them to trial different methods to combat elder abuse. In 2007, Daybreak received three years funding to pilot the use of family group conferences for this age group across Hampshire, Southampton and Portsmouth. This trial as it draws to a close, is being evaluated for effectiveness and value. Hampshire County Council are currently working with Daybreak to expand the provision of family group conferences to all vulnerable adults where there are safeguarding concerns, particularly within the context of personalisation and self-directed support. (KJ/RH)

ISSN: 14668203

From : Website: <http://pierprofessional.metapress.com/content/121398/doi:10.5042/jap.2010.0091>

Welcome advice [ongoing support for people with dementia provided by network of dementia advisers]: [The Dementia Declaration]; by Natalie Valios.

Community Care, issue 1811, 25 March 2010, pp 24-25.

In connection with Community Care's election campaign for the Dementia Declaration, Natalie Valios reports on progress on one of the national dementia strategy's cornerstone policies. This relates to ongoing support for people with dementia from a network of dementia advisers, who are based in GP surgeries, hospitals or community mental health teams. Of the 22 dementia adviser sites, the Alzheimer's Society is working in partnership with local authorities on 16. A case study describes the merits of a having one identifiable point of contact. (RH)

ISSN: 03075508

From : www.communitycare.co.uk

Working with mental capacity advocates; by Social Care Institute for Excellence - SCIE.

Community Care, issue 1802, 21 January 2010, pp 30-31.

Independent mental capacity advocates (IMCAs) were introduced in England and Wales under the Mental Capacity Act 2005 in October 2007. In this article, the Social Care Institute for Excellence (SCIE) highlights best practice in the use of IMCAs and the extent of their legal powers in safeguarding adults. The role of the IMCA is to support and represent the person through the decision-making process and ensure that the person's views and wishes are heard. An IMCA has powers to meet the person in private and to view their health and social care records. The article includes a case study on hospital practice and notes recent research: 'The second annual report of the Independent Mental Capacity Advocacy Service (Department of Health, 2008); 'Access to independent advocacy: an evidence review' (Office for Disability Issues, 2009); and 'Here for good? A snapshot of the advocacy workforce' (Action for Advocacy, 2008). Further information sources can be found on SCIE's website (at <http://www.scie.org.uk/publications/imca/index.asp>). (RH)

ISSN: 03075508

From : www.communitycare.co.uk

2009

Caregiver interventions; by Sara Honn Qualls.: Routledge, 2009, pp 127-197 (4 articles).

Clinical Gerontologist, vol 32, no 2, 2009, pp 127-197 (4 articles).

The four studies that make up this special section of this issue of Clinical Gerontologist offer new, innovative approaches in larger scale clinical trials. They present preliminary or pilot data that describe the effects on individuals and groups of individuals that lead us to expect interesting results from future trials. Clinicians will be able to integrate these strategies and principles into their practices with family members of older adults. (KJ/RH)

ISSN: 07317115

From : <http://www.tandfonline.com>

Creating a stronger information, advice and advocacy system for older people; by Claire Horton, Quality of Life Partnership, Newcastle upon Tyne; Joseph Rowntree Foundation - JRF.: Joseph Rowntree Foundation - JRF, October 2009, 8 pp.

Solutions: lessons for policy and practice, 2409, October 2009, 8 pp.

Choice and control for older people is at the heart of current change to the adult social care system. Yet the information, advice and advocacy services older people need to remain independent are often limited, come without adequate support, and fail to take their experiences and ideas into account. In response to a fragmented system for older people, the Joseph Rowntree Foundation (JRF) supported work by the Quality of Life Partnership in Newcastle to develop a more strategic approach to information, advice and advocacy. Older

people have been instrumental in determining what is needed and how it can be achieved locally. Instead of creating projects and new services, the focus has been on ways of working and how existing systems can be made more older person friendly, efficient, and effective for all concerned. This emphasis on system change is especially pertinent in the current pressurised economic situation. Evidence from the Newcastle programme has enabled JRF to identify key ways of working towards a better system of information, advice and advocacy for older people. Other local authority areas can learn from and replicate these ideas. (KJ/RH)

ISSN: 09583084

From : Website: <http://www.jrf.org.uk/sites/files/jrf/information-systems-for-older-people-summary.pdf>

The emergence of the independent support broker role; by Steve Dowson, Rob Greig.: Pavilion, August 2009, pp 22-30.

Journal of Integrated Care, vol 17, issue 4, August 2009, pp 22-30.

A key element in the personalisation of health and social care is the upfront allocation of a budget to disabled and older people which they can use to obtain the supports they require. The benefit of this arrangement in increasing user choice and control will not materialise unless recipients can either acquire or access the skills of brokerage needed to plan and arrange their supports. The independent support broker is one important response to this need. However, the role needs to match the intentions of personalisation and avoid the undesirable characteristics that many social care users associate with the term 'professional'. This raises specific questions about the definition of the role and training requirements of brokers, and broader themes which are explored with reference to the findings from two recent projects undertaken by the National Development Team for Inclusion. The second of these projects was commissioned by Skills for Care London, and led to a set of proposals for the training and accreditation of support brokers. (KJ/RH)

ISSN: 14769018

From : <http://www.pierprofessional.com>

Good decision-making: the Mental Capacity Act and end of life care: summary guidance; by Simon Chapman, National Council for Palliative Care - NCPC. London: National Council for Palliative Care, January 2009, 19 pp.

The Mental Capacity Act 2005 (MCA) became law in 2007, and governs the way in which decisions are made by and on behalf of adults who have impaired mental conditions to make decisions for themselves. This summary guidance is intended to help patients and informal carers as well as health and social care staff in all settings, including care homes, hospices, hospitals and primary care. It aims to introduce people to the MCA, and to explain its importance for end of life decision making. It also explains how the Act can be used to identify and respect people's choices about their future care, and to improve the quality of end of life care decision-making. 'The Mental Capacity Act in practice: guidance for end of life care' (NCPC, March 2008) gives more detailed guidance on the impact of the MCA on end of life and palliative care. Reference to that document is strongly recommended, as well as to items in the list of other publications and online information resources. Funding was received from the Department of Health to publish this guidance. (RH)

Price: £5.00

From : National Council for Palliative Care, The Fitzpatrick Building, 188-194 York Way, London N7 9AS. E-mail: enquiries@ncpc.org.uk Website: www.ncpc.org.uk

Independent advocacy with older people: what will be the impact of personalisation?; by John Miles.

Working with Older People, vol 13, issue 2, June 2009, pp 28-31.

A trustee and founder member of the Older People's Advocacy Alliance (OPAAL) comments that the meaning of "advocacy" is not fully understood. John Miles comments that "advocacy" is frequently used in the sense of speaking up for an individual or a group. He reviews the position of advocacy with older people as the government pursues its transformation of social care. Among definitions applicable to older people he cites Andrew Dunning (1995): that advocacy involves a "partnership between a [trained] advocate and an [older] person who needs to secure or exercise [his or her] rights, choices and interests", and thus more appropriate. (RH)

ISSN: 13663666

From : <http://www.pavpub.com>

Narratives in a users' and carers' group: meanings and impact; by Susan M Benbow, Yong Lock Ong, Sarah Black (et al).

International Psychogeriatrics, vol 21, no 1, February 2009, pp 33-39.

Carers who wished to share their experiences with a national working group (the Consumer Group) prepared narratives as a way of identifying areas for discussion. The narratives were submitted to one author and subjected to thematic qualitative analysis. The themes were fed back to the Group for discussion. Five main

themes were identified: difficulties in obtaining a diagnosis; acting as an advocate; stresses of caring; practical problems with social care; and emotions experienced by carers. The narratives provided a means of sharing carers' experiences and creating initiatives for further action by the Group. They have an impact on the people who hear or read them, but may also be therapeutic for those who produce them. Narratives can also be a powerful tool in teaching and training, and in identifying areas for service and professional improvement. (KJ/RH)

ISSN: 10416102

From : <http://www.journals.cambridge.org/ipg>

People who fund their own care and support: a review of the literature; and Research into the existing provision of information and advice [cover title]: [title pages]: A parallel universe? People who fund their own care and support: a review of the literature; [and] Navigating the parallel universe: information and advice for people who self-fund; by Bob Hudson, Melanie Henwood, Improvement and Development Agency - I&DeA; Association of Directors of Adult Social Services - ADASS; Local Government Association - LGA.: Social Care Institute for Excellence, October 2009, various paginations (Putting people first: transforming adult social care).

These two reports were commissioned from independent consultants Bob Hudson and Melanie Henwood by the Association of Directors of Adult Social Services (ADASS), the Social Care Institute for Excellence (SCIE) and the Joseph Rowntree Foundation (JRF). The first report, 'A parallel universe?' reviews a range of literature across policy, research and development, focusing on or relevant to people who fund their own care. These "self-funders" often appear to exist in a parallel universe to that of people who meet eligibility criteria for council funded social care. The shortcomings in the information, advice and support available to this group in seeking help is confirmed by the limited evidence base on self-funders. The second, 'Navigating the parallel universe', explores the approach of a number of key national organisations in providing information, advice and advocacy (IAA) to self-funders needing care and support. This also confirms that "the pathway to information and advice is rarely smooth", and that the sorts of advice self-funders require should be sought from independent financial advisers (IFAs). The value of the little-known Information Standard Quality Mark being introduced by the Department of Health will depend on sufficient organisations seeking accreditation. The report identifies ten key messages from the two reports; and building on the findings and conclusion from both, the authors make recommendations for further in-depth investigation with of a representative sample of self-funders using IAA services, also representative provider organisations and councils. (RH)

Quality of Life Partnership: promoting the opportunities arising from an ageing society [and developing partnerships for the benefit of older people]; by Barbara Douglas, Mary Nicholls.

Working with Older People, vol 13, issue 4, December 2009, pp 34-38.

As illustrated in the article by Ellen J Helsper in this issue of Working with Older People, there are a number of factors that dictate and influence an individual's capacity or willingness to use the internet. In Newcastle, an inspiring and award-winning initiative, the Quality of Life Partnership (QoLP), has had a significant effect on the way older people are engaged in the city. Surprisingly, one of the successful ways is using the internet. Barbara Douglas explains how they have achieved this, and Mary Nicholls describes her involvement in the initiative. (KJ/RH)

ISSN: 13663666

From : <http://www.pierprofessional.com>

The role of advocacy and interpretation services in the delivery of quality healthcare to diverse minority communities in London, United Kingdom; by Walid E Ansari, Karen Newbigging, Carolyn Roth (et al).

Health and Social Care in the Community, vol 17, no 6, November 2009, pp 636-646.

Inequalities in access to appropriate and acceptable healthcare contributes to a pattern of poorer health status, reduced life expectancy and greater dissatisfaction with health care amongst people from black and minority ethnic (BME) communities. Language acts as a further barrier to access. The development of bilingual advocacy fuses two key functions - interpretation and advocacy - to ensure that people from BME communities are able to have their healthcare needs met appropriately. This paper explores the development of bilingual advocacy in East London, which has a highly diverse population speaking over 100 languages. It considers the development of the bilingual advocacy services by an NHS University Hospital Trust, the local experience of these services and the factors that have influenced their development. The authors employed the Delphi method to examine the advocate-, service-, or client-related challenges that face advocacy services, and the threats of these changes to Trust-based advocacy and their implications to the service, client and advocate. Advocate-related challenges included status, esteem and remuneration of bilingual advocates in relation to other health professionals, as well as skills development, career progression, gender, capacity building and potential research contributions. Service-related challenges included work load, case mix, administration, commissioning, processes or

arrangements, entrepreneurial aspects of advocacy services, and mechanisms or potentials for cost recovery. Client-related challenges included continuity of advocacy, language requirements and advocacy needs of clients, and ways in which mobile populations influence planning and delivery of advocacy services in inner city hospitals. The paper concludes by identifying the implications for future development of bilingual advocacy services and the implications for their workforce. (RH)

ISSN: 09660410

From : <http://www.blackwellpublishing.com/hsc>

Self-advocacy for people with high support needs; by Social Care Institute for Excellence - SCIE. Community Care, issue 1790, 8 October 2009, pp 32-33.

The Social Care Institute for Excellence (SCIE) recommends self-advocacy as a way of ensuring that people with learning difficulties and complex needs are not left behind in personalisation reforms. Self-advocacy involves shifting the balance so that the views of people with high support needs are heard and their opinions are reflected in the services they receive. This review of the evidence base notes five models of self-advocacy: rights-based, person-centred, watching brief, witness-observer, and best interest. SCIE has concluded that person-centred approaches are central to effective advocacy. Three examples of recent research are cited, and a SCIE report ('Personalisation and learning disabilities'; SCIE Adult services report 22) is suggested. (RH)

ISSN: 03075508

From : www.communitycare.co.uk

Someone to speak up for me: final report of the Mental Capacity Advocacy Project (MCAP); by Age Concern and Help the Aged. London: Age Concern and Help the Aged, 2009, 36 pp.

The Mental Capacity Advocacy Project (MCAP) was a three year pilot project that started in October 2006 and provided volunteer advocacy for older people who lacked mental capacity. What does 'lack mental capacity mean'? If a person is deemed to 'lack mental capacity' it means a person lacks the capacity to make a particular decision for themselves at the time the decision needs to be taken. Thus, mental capacity is time- and decision-specific. A person may, for example, have the capacity for small decisions such as what to eat for breakfast, but lack the mental capacity to make complex decisions about finances or deciding where to live. However, it must be assumed that people have mental capacity until proven otherwise. The project was originally funded by the Department of Health (DH) and Age Concern England (ACE), and the pilot phase of this work has now come to an end. This report assesses the extent to which the project's aims were achieved. Among its key messages are that while the Project is described personalisation in action, older people who lack mental capacity for some decisions have little or no voice and are among the most excluded groups in society. The resources and reports from the MCAP were distributed at the end of project conference held at The King's Fund on 14 October 2009, and are also available to download from the website link given. (KJ/RH)

From : Age Concern and Help the Aged, Astral House, 1268 London Road, London SW16 4ER.

<http://www.ageconcern.org.uk/ageconcern/mhap.asp>

Speaking up to safeguard: lessons and findings from the Benchmarking Advocacy and Abuse Project, 2008-09; by Andrew Dunning, Older People's Advocacy Alliance (OPAAL) UK. Stoke-on-Trent: Older People's Advocacy Alliance (OPAAL) UK, May 2009, 49 pp.

The Older People's Advocacy Alliance (OPAAL) describes advocacy as "a one to one relationship between a trained, independent advocate and an older person who needs support in order to secure or exercise their rights, choices and interests". Action on Elder Abuse (AEA) defines abuse as "a single or repeated act or lack of appropriate action occurring within any relationship where there is an expectation of trust, which causes harm or distress to an older person". The Benchmarking Advocacy and Abuse Project has adopted these definitions for its work. This report outlines the prevalence of abuse as a social problem; and the need for independent advocacy as a means of empowerment, prevention and protection. It discusses the benchmarking approach, and describes some participating benchmarking advocacy schemes and the methods used. (The website www.benchmarking.gov.uk is suggested for examples of use of benchmarking by public service organisations). Project findings are discussed in terms of: the demographics of advocacy partners (service users); examples of the use of advocacy scheme casework in dealing with financial abuse, psychological abuse, neglect, physical abuse and sexual abuse; and the goals of advocacy intervention. Recommendations are made for further projects that "advocate for advocacy" and safeguarding older people in the post 'No secrets' personalised services era. Also available is a 4-page executive summary outlining the Project's main findings. (RH)

From : Download from: <http://www.opaal.org.uk> Older People's Advocacy Alliance (OPAAL) UK, Beth Johnson Foundation, Parkfield House, 64 Princes Road, Stoke-on-Trent, ST4 7JL. E-mail: kathryn.parson@btinternet.com

Volunteer advocacy with older people who lack mental capacity; by Neil Mapes.

Working with Older People, vol 13, issue 1, March 2009, pp 27-30.

The Mental Capacity Advocacy Project (MCAP) with older people is a 3-year pilot project funded by the Department of Health (DH) and Age Concern England (ACE); the pilot phase is due to finish in October 2009. In this article, the MCAP co-ordinator highlights some of the voices from the project, discusses some of the emerging issues with the Mental Capacity Act 2005, and highlights the MCAP resources and key messages from the work so far. (RH)

ISSN: 13663666

From : <http://www.pavpub.com>

"Wheelchair access? That's a lifestyle choice!": lessons from a pilot advocacy service in south west England; by Les Bright, Older People's Advocacy Alliance (OPAAL) UK. Stoke-on-Trent: Older People's Advocacy Alliance (OPAAL) UK, May 2009, 32 pp.

The title of this report refers to an exchange between an advocate and a housing service manager about the needs of a disabled tenant. The exchange took place during the evaluation on which this report is based. It highlights the prejudice and misunderstanding experienced by some advocacy service users, and indicates the valuable role played by independent advocates in helping people to get their voices heard and action taken. It uses case studies and examples of lessons for service commissioners, providers and older people to illustrate points being made about service delivery, referrals and managing demand. Also available is a 4-page executive summary outlining the report's main findings. (RH)

From : Download from: <http://www.opaal.org.uk> Older People's Advocacy Alliance (OPAAL) UK, Beth Johnson Foundation, Parkfield House, 64 Princes Road, Stoke-on-Trent, ST4 7JL. E-mail: kathryn.parson@btinternet.com

2008

Admiral nurses' role in a dementia carers' information programme; by Raminder Sarna, Rachel Thompson.

Nursing Older People, vol 20, no 9, November 2008, pp 30-34.

Admiral nurses support families and carers of those affected by dementia and the future provision of dementia care must take into account the needs of carers. This article describes the delivery of a carers' information programme, which aims to provide educational and emotional support to carers. The development and ongoing evaluation of the education programme is discussed, and the resulting themes and future developments are considered in relation to the emerging national dementia strategy for England. (KJ/RH)

ISSN: 14720795

From : <http://www.nursingolderpeople.co.uk>

Advocacy counts 2: a follow up report on advocacy provision in Wales; by Age Concern Cymru - ACC. Cardiff: Age Concern Cymru, November 2008, 6 pp.

Age Concern Cymru has repeated its survey on the availability of advocacy services for older people in Wales as part of its elder abuse project funded by Comic Relief. The original report in October 2007 highlighted need for an increase in provision of advocacy services in Wales. In the present survey, of 26 respondents (response rate 30%), 19 specifically stated that they provided advocacy services for older people (4 fewer than in 2007). The report points to the importance of advocacy as being essential in helping to protect older people from abuse. Other concerns raised included human rights issues, funding problems, training, and improving standards in advocacy. Development of a National Strategic Framework for older people's advocacy services would greatly assist in implementing the National Service Framework for Older People. In English and Welsh. (RH)

From : Age Concern Cymru, Ty John Pathy, 13-14 Neptune Court, Vanguard Way, Cardiff, CF24 5PJ.

Website: www.accymru.org.uk

Career guidance and advancement: a policy charter to make the new Adult Advancement and Careers Service work for people in mid and later life; by TAEN - The Age and Employment Network. London: TAEN, 2008, 15 pp (Agenda).

The Department for Innovation, Universities and Skills (DIUS) has announced the formation of a new adult advancement and careers service. Information, advice and guidance across a range of interconnected issues will become a possibility for all, whether in work or outside the workforce. This document is the first in TAEN's Agenda series of policy arguments around age and employment. It explains TAEN's Ten Point Manifesto of necessary actions to ensure that career advice services meet older workers' needs, namely: information; advice and guidance; job search; staffing; ICT skills; a comprehensive referral network; marketing and outreach; advocacy; workplace guidance; and monitoring and tracking. It comments that an all-age service will only work

if there is a conscious, focused and public effort to demonstrate that it is relevant to the rather different circumstances of young people and adults in mid and later life. (RH)

From : TAEN, 207-221 Pentonville Road, London N1 9UZ. E-mail: info@taen.org.uk Web: www.taen.org.uk

Collective strength: the impact of developing a shared social identity in early-stage dementia; by Linda Clare, Julia M Rowlands, Rebecca Quin.

Dementia: the international journal of social research and practice, vol 7, no 1, February 2008, pp 9-30.

The impact of developing a shared social identity among a group of people with early-stage dementia was explored in a qualitative, internet-based study extending over two years. The authors investigated the experience of belong to the self-help network Dementia Advocacy and Support International (DASNI), and its effect on self-concept and adjustment, from the perspective of DASNI members in order to understand more about the factors that promote self-help, and the effects of engaging in self-help, mutual support and advocacy in this context. Seven active members of DASNI with a dementia diagnosis volunteered to participate. Interviews were conducted via email, and Interpretative Phenomenological Analysis (IPA) was used to develop a thematic account. The challenges engendered by the onset of dementia were reflected in descriptions of loss, struggle and uncertainty. Participating in DASNI, in contrast, engendered a sense of collective strength and having something valuable to contribute, and made it possible to discover that there can be life after diagnosis. Belonging to DASNI help to counteract the challenges to self and identity posed by developing dementia, and creating the possibility of effecting social change. The development of DASNI, consistent with recent theoretical developments in conceptualising processes of social power and influence, offers significant potential for change. (KJ/RH)

ISSN: 14713012

From : <http://www.dem.sagepub.com>

Elder abuse: the Canadian experience; by Elizabeth Podnieks.

Journal of Elder Abuse & Neglect, vol 20, no 2, 2008, pp 126-150.

Abuse and neglect of older adults occurs in all Canadian communities, and solutions require the coordinated efforts of society at large. Amelioration entails more than a legislative approach. Prevention of this growing problem is a social responsibility that requires networking and collaboration between different disciplines in all sectors of the community. This article will discuss elder abuse in Canada from a historical perspective, as well as current legislation, model programmes, and research initiatives. It is intended to allow for comparison from the various countries presented in this issue of *Journal of Elder Abuse & Neglect*. Hopefully, readers will find some models or ideas they may wish to explore or even replicate within their own jurisdictions. (KJ/RH)

ISSN: 08946566

From : <http://www.tandfonline.com>

It's a family affair: consumer advocacy for nursing-home residents in the United States; by Charles D Phillips, Anne-Marie Kimbell, Catherine Hawes (et al).

Ageing and Society, vol 28, part 1, January 2008, pp 67-84.

For more than 40 years, nursing homes in the US have been riddled with evidence of poor performance. To combat problems in this industry, state and federal governments have developed an elaborate monitoring and regulatory structure. At the same time, an important citizens' movement involving nursing home consumer advocacy groups (CAGs) came to life. This paper presents results of a postal survey of 47 active nursing home consumer advocacy groups. They indicate that the majority of these organisations were started by an individual dissatisfied with the care provided to a family member. The political arena in which these organisations were most active was State legislatures. Though they varied considerably, the average CAG operated on a thin financial margin, largely supported by member contributions and donations. These organisations defined their success in terms of their ability to generate policy changes at the State level. Unfortunately, as they pursued these changes, they often failed to develop the organisational infrastructure necessary to assure the CAGs' continued operation. When CAGs ceased operations, it was in most cases the loss of the organisation's original leader or the cumulative effects of the constant struggle to maintain adequate financial resources. (RH)

ISSN: 0144686X

From : <http://www.journals.cambridge.org/ASO>

The Mental Capacity Act in practice: guidance for end of life care; by Simon Chapman, National Council for Palliative Care - NCPC. London: National Council for Palliative Care, March 2008, 43 pp.

This new guidance takes into account all new guidance since the NCPC's previous October 2005 publication on the subject: the Code of Practice and establishment of the Independent Mental Capacity Advocate (IMCA) service; the new Court of Protection; and the Office of the Public Guardian (OPG). It explains the Mental Capacity Act 2005 (MCA) in the context of current developments in palliative care; sets out NCPC's future

work plans in relation to the MCA; and suggests further reading and websites. It is written for professionals and organisations working in all settings that provide palliative care services, but is also intended to help patients, care home residents, informal carers and family members. Among other issues explained are: assessing capacity; best interests; advance decisions to refuse treatment; liability and responsibility; restraint; third party involvement in decision-making; ill-treatment and neglect; and advance care planning. (RH)

Price: £10.00

From : National Council for Palliative Care, The Fitzpatrick Building, 188-194 York Way, London N7 9AS. E-mail: enquiries@ncpc.org.uk Website: www.ncpc.org.uk

Mental Capacity Advocacy Project (MCAP) with older people; by Mental Capacity Advocacy Project (MCAP), Age Concern England - ACE. London: Age Concern England, 2008, 2 pp.

The Mental Capacity Advocacy Project (MCAP) began in October 2006 with funding from the Department of Health (DH) and Age Concern England (ACE). This leaflet lists the Project's aims, which, overall, are to empower and protect older people who lack mental capacity, by ensuring that their wishes are identified and met where possible, and that their rights and entitlements are protected. It draws attention to the resource materials available on the website (www.ageconcern.org.uk/AgeConcern/mhap.asp), and notes key messages and learning points so far. Four pilot sites run by local Age Concerns have been established: Blackpool (in partnership with N-Compass); Chelsea; Slough and Berkshire East; and Warwickshire. (RH)

From : Nigel Mapes, Project Coordinator, Age Concern England, Astral House, 1268 London Road, London SW16 4ER. Website: www.ageconcern.org.uk/AgeConcern/mhap.asp

Navigating the way: the future care and well-being of older people; by Resolution Foundation. London: The Resolution Foundation, 2008, 53 pp.

A major weakness of the current care market is that older people, their families and carers find it very challenging to navigate their way round a very complex, confusing system, and that consequently their needs are not being met. This report describes seven elements of a "new care architecture" which would create a fairer and more efficient market. It summarises research projects on four of these (discussed in more detail on the Resolution Foundation website). First, navigating the care system: qualitative data obtained from voluntary sector advice organisations and low earners regarding different advice provision models, were used. Second, innovation and efficiency in care: some existing effective examples of service commissioning and provision were examined. Third, local market shaping, considered a new strategic role for local authorities to shape supply and provide oversight of local markets. Lastly, funding care for older people identified three markets that could facilitate direct funding by individuals: equity release, long-term care insurance, and long-term saving. Overall, what is required is a clear national framework that would include a universal minimum entitlement for older people and their carers. The report concludes that the market for social care needs reform before levels of state funding can be determined. (RH)

From : The Resolution Foundation, 2 Broomhouse Lane, London, SW6 3RD. Email: info@resolutionfoundation.org Download at: <http://www.resolutionfoundation.org>

Social representations of barriers to care early in the careers of caregivers of persons with Alzheimer's disease; by Normand Carpentier, Francine Ducharme, Marie-Jeanne Kergoat (et al).

Research on Aging, vol 30, no 3, May 2008, pp 334-357.

The first signs of cognitive impairment in older people generally elicit much concern among family members. Reactions range from denial to the active search for information. Some families manage to set up relatively well-organised networks of informal support to help both caregivers and older relatives. However, little is known about the processes underlying the different pathways that families follow on the onset of Alzheimer type dementia in older relatives. To gain a better understanding of barriers to care early in the caregiving career from the first signs of illness to diagnosis, the authors conducted interviews with 32 caregivers recruited in two cognition clinics in Montreal, Canada. Barriers to help resources were analysed from the viewpoint of social representations. This approach allowed the consideration of a broad range of individual and group phenomena capable of fashioning caregivers' representations of this period. The results confirmed the importance of the symbolic dimension of experience in steering social practice. (RH)

ISSN: 01640275

2007

A commentary on the emerging literature on advocacy for older people; by Peter Scourfield.

Quality in Ageing, vol 8, no 4, December 2007, pp 18-27.

This paper comments on emerging themes derived from recent official publications on older people's advocacy in the UK. There is an examination of relevant policy documents and the responses from service user groups.

Discussion includes: clarity in defining advocacy services; the nature of the advocacy relationship; sustained and reliable financing of advocacy services; the uneven nature of provision; lack of inter-agency connectivity; the need to establish national standards for advocacy; problems of mental capacity; and advocacy for care home residents and for minority groups. The need for and direction of further research is proposed. (KJ/RH)

ISSN: 14717794

From : <http://www.pavpub.com>

Dementia advocacy; by Sally Wells.

Working with Older People, vol 11, issue 1, March 2007, pp 25-27.

How do you advocate for someone with dementia? How can advocates be confident that they are making the right decisions on behalf of their clients? The author explores the underlying issues, and describes the necessary skills to practise this specialised form of advocacy. (RH)

ISSN: 13663666

From : (Fuller information on the Act can be obtained from : www.dca.gov.uk/legal-policy/mental-capacity/index.htm)

The first legal right to advocacy; by Teresa Gorczynska.

Working with Older People, vol 11, issue 1, March 2007, pp 17-20.

The Mental Capacity Act 2005 places a duty on local authorities and the National Health Service (NHS) to refer people who may lack capacity to make decisions about medical treatment and other important life issues to an independent mental capacity advocate (IMCA) service. This article describes the experiences and lessons learnt in Croydon, where one of the seven IMCA has taken place. The reader is directed to www.dh.gov.uk/imca for further information about these pilots. (RH)

ISSN: 13663666

From : (Fuller information on the Act can be obtained from : www.dca.gov.uk/legal-policy/mental-capacity/index.htm)

Helping older people in residential care remain full citizens; by Peter Scourfield.

British Journal of Social Work, vol 37, no 7, October 2007, pp 1135-1152.

Older care home residents are services users, but as people, they should not be reduced to this role only. They are also citizens in the broadest sense and should not be cut adrift from debates on issues that concern them. This paper examines how moves to bring older people into deliberative democratic processes have tended to focus on those in their "Third Age". Those in institutional settings, being in the "Fourth Age", occupy a much more marginal position. This effective disenfranchisement is yet another reason why, for many, the move in to residential care - a difficult transition for a variety of reasons - becomes regarded as the "last refuge". It contributes to the sense of loss of identity, lowering of self-esteem and a reduced sense of personhood. This paper accepts that there should be more effective involvement of care home residents in decision making about their personal care. However, there are dangers in adopting a too narrowly consumerist approach. This can reinforce a reductionist view of care home residents simply as "service users" - a form of "othering" in itself. As citizens and members of a wider community, they should be included in consultations about any community and wider political debates that affect them. Such a proposal implies a widening and deepening of advocacy services available to this group. As most older people in residential care are there following the intervention of a social care professional, then ensuring that they have access to advocacy must surely be a key task. This paper argues that this is frustrated by the lack of suitable services. Without significant investment by the Government in independent advocacy services, not only is the social work task with one of social care's core client groups rendered impossible, but the Government cannot deliver on its own agenda of empowerment, active citizenship and inclusion. (RH)

ISSN: 00453102

From : <http://bjsw.oxfordjournals.org>

The new independent mental capacity advocate service; by Andy Bradley.

Working with Older People, vol 11, issue 1, March 2007, pp 13-16.

The Department of Health (DH) funded the social care organisation, Turning Point, to write and disseminate guidance for commissioners of the new independent mental capacity advocate service (MCA) service. The author of that guidance summarises its content, outlines some of the key challenges for commissioners, and highlights particular issues for advocacy organisations and older people. (RH)

ISSN: 13663666

From : (Fuller information on the Act can be obtained from : www.dca.gov.uk/legal-policy/mental-capacity/index.htm)

Person centred thinking with older people: practicalities and possibilities; by Helen Bowers, Gill Bailey, Helen Sanderson (et al), Helen Sanderson Associates (HSA); Older People's Programme - OPP. Heaton Moor, Stockport: HSA Press, for Helen Sanderson Associates, 2007, 94 pp (+ pack).

The book is about person centred thinking to enable older people to have much greater control and say over what they need and want, in order to be full and active citizens. It summarises what is being learnt about self-directed support and older people, and introduces each of the person centred thinking tools. These are: appreciations; relationships; what is important to and for people; communication; histories; wishing; good days and bad days; and working or not working. The book explores how these tools provide the foundation for support planning. The pack provides real life examples for using these person centred thinking tools. The materials on learning centred thinking were developed by the Learning Community for Person Centred Practices and are used with permission. The book was supported by the Care Services Improvement Partnership (CSIP) and In Control. (RH)

From : Helen Sanderson Associates, 34 Broomfield Road, Heaton Moor, Stockport, Cheshire SK4 4ND.
www.helensandersonassociates.co.uk

Person-centred advocacy for people with dementia; by Mike Fox, Lesley Wilson.

Journal of Dementia Care, vol 15, no 2, March/April 2007, pp 17-19.

In the first of two articles on advocacy for people with dementia, the authors describe an advocacy project based in a residential home. Among the issues and themes they identified are isolation, autonomy and privacy. (RH)

ISSN: 13518372

From : Email: shital@hawkerpublications.com

The role of the independent mental capacity advocate in adult protection; by Teresa Gorczynska, David Thompson, Advocacy Partners.

The Journal of Adult Protection, vol 9, no 4, November 2007, pp 38-45.

The Mental Capacity Act 2005 introduced the role of the independent mental capacity advocate (IMCA). This is essentially a new safeguard for adults when they lack the capacity to make critical health and welfare decisions, particularly those without family or friends to represent them. IMCAs can have a statutory role in adult protection cases that is detailed in this paper. Advocacy Partners (AP) was one of seven organisations piloting this service in England before its introduction nationally in April 2007. AP is now commissioned to provide the IMCA service in 10 local authorities in south-east England. Of the 270 cases referred to Advocacy Partners that have met the criteria for an IMCA since the Act was implemented, 38 were referred as part of adult protection proceedings. The early experience of IMCA involvement in adult protection cases is discussed. (RH)

ISSN: 14668203

From : Website: <http://www.pavpub.com>

Seizing the day on person-centred thinking and planning with older people: speech by Dame Denise Platt, Chair, Commission for Social Care Inspection, [at the] 'Practicalities and Possibilities' Conference, Birmingham, 9 July 2007; by Denise Platt, Commission for Social Care Inspection - CSCI.: Commission for Social Care Inspection, 2007, 10 pp.

The conference included the launch of 'Person centred thinking with older people: practicalities and possibilities' (Helen Sanderson Associates, and the Older People's Programme, OPP), a book which offers ideas for promoting person-centred care to all older people. The Chair of the Commission for Social Care Inspection (CSCI) comments on the differences between what services offer and what older people say they want from social care. Personalised care is central to public services, personalisation being "the process by which services are tailored to the needs and preferences of citizens". To bring about "quality personalised care" requires transferring good practice from one area of care to another, and changes in how services are commissioned. (RH)

From : Link to download: http://www.csci.org.uk/about_us/speeches/seizing_the_day_on_person-cent.aspx

Short-term contracts hamper take off for advocacy services; by Sally Gillen, Caroline Lovell.

Community Care, issue 1692, 27 September 2007, pp 4-5.

Exclusive report on the current state of play with regard to independent mental capacity advocacy services. A poll of 28 councils across England revealed that 14 contracts for Independent Mental Capacity Advocate (IMCA) services were for one year only, while seven had been awarded three year contracts. This is making it difficult to fully develop such services. Department of Health (DH) guidance does not stipulate the length of such contracts, but a governmental third sector review is quoted as saying "that three-year funding relationships between the state and the voluntary sector should become the norm rather than the exception". These findings are pertinent in the light of the implementation of much of the Mental Capacity Act 2005 on 1 October 2007.

The IMCA service, which was introduced under the Act, was implemented early in April 2007. See IMCA website: (<http://tinyurl.com/yqlk51>) (KJ/RH)

ISSN: 03075508

From : <http://www.communitycare.co.uk>

The use of lay assessors; by Cheryl Simmill-Binning, Roger Clough, Ian Paylor.

British Journal of Social Work, vol 37, no 8, December 2007, pp 1353-1370.

This paper reports on some findings from a research study conducted by the authors for the Commission for Social Care Inspection (CSCI). It examines the reasons for the involvement of lay assessors and perceptions of the effectiveness of lay assessors in specific regulatory functions. (KJ/RH)

ISSN: 00453102

From : <http://bjsw.oxfordjournals.org>

Voices for Older People's Advocacy: 3 stories ... 5 voices [DVD]; by Older People's Advocacy Alliance - OPAAL; Acting Up. Stoke-on-Trent: OPAAL, 2007, 1 DVD (+ 12 pp pamphlet).

There is little material about how independent advocacy draws directly on the experiences of people who use it. In 2006, the Older People's Advocacy Alliance (OPAAL) began talking to older users, with the aim of establishing a user network to improve awareness of advocacy. This DVD comprises interviews and focus groups carried out (mostly in London with Kilburn Older Voices Exchange, KOVE), by Mel Wright. The project has been funded by the Big Lottery and Help the Aged, and the material was directed and produced by Acting Up. A small pamphlet provides background to the project and an introduction to the work of OPAAL (UK). (RH)

Price: £1.50

From : Older People's Advocacy Alliance, Parkfield House, 64 Princes Road, Stoke-on-Trent, ST4 7JL. E-mail: admon@opaal.org.uk Website: <http://www.acting-up.org.uk/opaal.htm>

2006

Advocacy the key to stopping elder abuse in Wales: News release, 14 December 2006; by Age Concern Cymru. Cardiff: Age Concern Cymru, 2006, 3 pp.

Enabling older people in Wales to access independent advocacy services is the key to reducing elder abuse. Age Concern Cymru has launched an Elder Abuse Project, funded by Comic Relief, to help reduce the various levels and types of abuse faced by older people in Wales. The project seeks to raise awareness of elder abuse among older people themselves, and advising on where to find help and guidance. (RH)

From : Website: <http://www.ageuk.org.uk/cymru/>

An economic and social evaluation of the Senior Help Line in Ireland; by Eamon O'Shea.

Ageing and Society, vol 26, part 2, March 2006, pp 267-284.

The Senior Help Line in Ireland provides a confidential telephone listening service for socially excluded older people and is operated by older volunteers. The service has grown rapidly in recent years and is highly regarded. This paper provides a systematic examination and assessment of the service from the perspectives of costs, outcomes and best practice. The study uses personal interviews, focus groups and postal questionnaires to elicit information about the service and its impact on volunteers and callers. The Senior Help Line has made a significant contribution to the health and well-being of older people in Ireland at relatively low cost. The service demonstrates the positive effects of volunteering for older people, and the value and effectiveness of peer-to-peer communication for vulnerable callers. The help-line is a model project in terms of accountability and best practice, but requires additional resources, particularly for publicity and training. It needs to become a branded national service for vulnerable older people to meet the level and need for a service of this kind. The help-line also needs to be linked more formally to existing health and social care provision for older people, to become part of a holistic model of healthy ageing. For the service to reach its manifest potential, the efforts of volunteers need to be supported by higher and sustained levels of public spending, through more widespread and substantial public-voluntary partnership arrangements. (RH)

ISSN: 0144686X

From : http://www.journals.cambridge.org/jid_ASO

Global social justice for older people: the case for an international convention on the rights of older people; by Kwong-Leung Tang, Jik-Joen Lee.

British Journal of Social Work, vol 36, no 7, October 2006, pp 1135-1150.

Older people are beginning to represent a large proportion of the general population and have become a major area for social programming in many parts of the world. However, neglect or violation of older people's rights is

common. Until recently, there has been a surprising lack of advocacy on the part of non-governmental organizations (NGOs) and human rights activists for a legally effective international convention on the rights of older people, as compared with other vulnerable groups such as children and women. This paper argues that the introduction of an international convention on the rights of older people is long overdue. Such an international convention should contain comprehensive and legally binding provisions which would require ratifying states to promote older people's rights. It should be reinforced by a strong monitoring system that would involve key members of the international community. This paper outlines the arguments in favour of the creation of a transnational human rights agreement for older people and proposes that international NGOs and human rights advocates should work toward creating such a convention. (KJ/RH)

ISSN: 00453102

From : <http://bjsw.oxfordjournals.org>

Mapping older people's advocacy in the English regions; by Gary Kitchen, Get Heard; Older People's Advocacy Alliance (OPAAL) UK. Stoke-on-Trent: Older People's Advocacy Alliance (OPAAL) UK, July 2006, 162 pp.

The Older People's Advocacy Alliance (OPAAL) UK had identified a lack of information on the extent of independent provision of advocacy schemes for older people, and led to this mapping exercise. Gary Kitchen of the Get Heard consultancy compiled this report and directory for OPAAL, the aim of which is to provide a comprehensive picture of older people's advocacy in the English regions. Results are presented region by region for 138 organisations. (RH)

From : Older People's Advocacy Alliance (OPAAL) UK, Beth Johnson Foundation, Parkfield House, 64 Princes Road, Stoke-on-Trent, ST4 7JL. E-mail: info@bjf.org.uk Website: <http://www.opaal.org.uk>

The role of advocacy in our adventure with Alzheimer's; by Jenny Knauss, Don Moyer.

Dementia: the international journal of social research and practice, vol 5, no 1, February 2006, pp 67-72.

Following Jenny Knauss's diagnosis of dementia, the authors show how their reaction to the diagnosis was advocacy, and explain how this gives positive meaning to their lives in the Alzheimer's establishment. They give examples of advocacy projects in the US, and indicate factors that have led them to initiate, inform and act as jury for activities that affect them. (RH)

ISSN: 14713012

From : <http://www.dem.sagepub.com>

Scoping study [on the expectations, needs and wishes of older people in care settings]; by John Wyllie, Fife Elderly Forum Executive. Kirkcaldy: Fife Elderly Forum Executive, 2006, 70 pp.

Fife Council Social Work Services commissioned this report, to establish the expectations, needs and wishes of older people in care settings. The sample was to be small, and consist of those residents in care settings who had no friends or relatives to offer them support. The report presents findings from questions asked on issues such as personal support aids, friendship and spiritual links, hobbies and local community activities. Recommendations that emerged include the provision of independent advocacy, paid of voluntary, for all who require it, and the provision of adequate training for those involved. An information leaflet on the Fife Elderly Forum Executive and a laminated card on independent advocacy accompany this report. (RH)

From : Fife Elderly Forum Executive, Office 2, Fraser Buildings, Millie Street, Kirkcaldy KY1 2NL.

<http://www.fife-elderly.org.uk/>

Senior mentorship in basic medical education: developing programs for the teaching of aging; by G Paul Eleazer, Darryl Wieland (eds).

Gerontology & Geriatrics Education, vol 27, no 2, 2006, pp 1-103 (whole issue).

A recent innovation in US medical education has been to use older people living in the community to convey geriatric content to medical students. The American Association of Medical Colleges and John A Harford Foundation grant program have together developed this concept, referred to as "senior mentorship programs" or SMPs. Articles in this special issue of *Gerontology & Geriatrics Education* are from eight US medical schools with established SMPs, and are by way of description and evaluation, highlighting what works well, and might be considered by other SMPs or medical schools thinking of setting up SMPs. (RH)

ISSN: 02701960

From : <http://www.tandfonline.com>

Should care managers be brokers?: [Arguments for and against this role being carried out by existing care managers]; by Martin Green, Ray Jones.

Community Care, no 1635, 10 August 2006, pp 32.

The adult care Green Paper, "Our health, our care, our say" (Cm 6737), proposes that care brokers or navigators should help people buy their own care. Martin Green, Chief Executive of the English Community Care

Association (ECCA) argues the case for this role being carried out by existing care managers, while arguing the case against is Ray Jones, Chair, British Association of Social Workers (BASW). Green suggests that the Commission for Social Care Inspection (CSCI) and its successor merged commission should implement something based on the Financial Services Authority (FSA) model. This idea is not reassuring to Jones, bearing in mind recent mis-selling scandals. Rather, a range of community and commercial services should be involved. (RH)

ISSN: 03075508

From : <http://www.communitycare.co.uk>

Spoken for: [the role of advocates]; by Anita Pati.

Community Care, issue 1637, 24 August 2006, pp 30-31.

The role of advocates is poorly understood, but they do prevent many older people dropping off the social care radar. This article features the mapping exercise undertaken for the Older People's Advocacy Alliance UK (OPAAL UK). The report ("Mapping older people's advocacy in the English regions", by Gary Kitchen; OPAAL, July 2006) found that advocacy services for older people were patchy in England. Of 136 age-specific projects, Age Concern ran 57, with London being the best resourced area. The article and report describe the valuable work carried by advocates for older people, some of whom work with people with dementia. (KJ/RH)

ISSN: 03075508

From : <http://www.communitycare.co.uk>

Support brokerage: a discussion paper; by Commission for Social Care Inspection - CSCI. London: Commission for Social Care Inspection, March 2006, 31 pp (CSCI-137).

The idea of brokerage, explained in this report, is a way of helping or enabling people to choose the social care that would best suit their needs. Support brokerage seems to suggest a sort of advocacy or advice service that offers help in choosing care. This paper aims to stimulate discussion arising from ideas in the Green Paper, "Independence, well-being and choice" (Cm 6499; TSO, 2005) and the White Paper, "Our health, our care, our say" (Cm 6737; TSO, 2006) about giving people independence, choice and control in their lives. It suggests how brokerage might change the current system of finding care or support services. It identifies problems that brokerage would need to tackle: access to and information about care services; person-centred assessment and planning; and flexibility of services. It outlines issues about brokerage from a joint CSCI and the Office of Fair Trading (OFT) seminar in November 2004. (RH)

From : Commission for Social Care Inspection, 33 Greycourt Street, London SW1P 2QF. Free copies from: Admail 3804, Newcastle NE99 1DY. Orderline: 0870 240 7535 E-mail: enquiries@csci.gsi.gov.uk Website: www.csci.gov.uk

2005

Adding value through advocacy: report of an investigation to find the benefits WASSR brings to the community and to statutory service providers in Westminster; by Jill Jones, Westminster Advocacy Service for Senior Residents - WASSR.: Westminster Advocacy Service for Senior Residents - WASSR, March 2005, 42 pp.

WASSR provides an independent advocacy service for older people in Westminster. A specific motivation for this study was the growing perception among those providing advocacy services in WASSR and nationally, that the work of advocates is not only supporting the individual client but is also making a significant contribution to the effectiveness, quality and workload of staff in the statutory sector. This study was compiled using information from interviews with referrers and others associated with statutory service providers or other supporting agencies, as well as cases (including those relating to statutory service provision), and discussions with WASSR staff and other voluntary sector advocacy providers. (RH)

From : WASSR, 55 Dean Street, London W1D 6AF. <http://www.wassr.org>

Advocacy in practice: the troubled position of advocates in adult services; by Liz Forbat, Dorothy Atkinson.

British Journal of Social Work, vol 35, no 3, April 2005, pp 321-336.

This paper is a review, and critical appraisal, of the theory and practice of advocacy. Advocacy is not social work, but its principles and values resonate closely to those espoused by the British Association of Social Workers (BASW, 2002). In this paper, the authors interrogate the assumption that advocacy is necessarily always a positive and enabling experience. Indeed, they suggest that the use of advocacy can be contested from the point of the view of the service user (the advocacy partner), the advocate and from professionals working with advocates (or positioning themselves as advocates). Drawing on recent research that evaluated advocacy services in Nottinghamshire, some of the key tensions are discussed. In particular, the reality of the advocate's role is considered, where it relates to and differs from social work, and the issue of whether advocacy can be part of what a social worker does anyway. (KJ/RH)

ISSN: 00453102

From : <http://bjsw.oupjournals.org>

Age Concern's response to the Department of Health Consultation on the Independent Mental Capacity Advocate Service: summary; by Age Concern England - ACE. London: Age Concern England - ACE, November 2005, 3 pp (Policy Response - summary, ref: 3205(S)).

The Department of Health (DH) consultation referred to makes proposals about whether to increase the amount of time an advocate could spend on a decision, whether to include people who have friends or family, or whether an advocate should be provided on request by any party involved in the decision. Age Concern England (ACE) calls for a strategy to ensure that there is capacity to provide a full range of advocacy services in the context of the emphasis of choice and independence. ACE expresses concern that many people will have no right to an advocate. A full version of the response is available on ACE's website. (RH)

Price: FOC

From : Age Concern England, Astral House, 1268 London Road, London SW16 4ER. Download document at <http://www.ageconcern.org.uk>

Benefits of volunteering for older adults mentoring at risk youth; by Elizabeth Larkin, Sheila E Sadler, Joy Mahler.

Journal of Gerontological Social Work, vol 44, nos 3/4, 2005, pp 23-37.

"At risk" is defined by Big Brothers Big Sisters of America (BBBS) as those children aged 6-18 who live in single-parent households without significant contact from the absent parent; live in households with no parent with grandparents or extended family fulfilling parental roles; are disadvantaged (by poverty and low income); or have poor academic record, poor school attendance or unacceptable social behaviour. This multiple-case study explores the benefits for older volunteers who are mentoring at-risk youth in one-to-one pairings, either in schools or in family environments. The authors of this article wanted to learn more about the specific outcomes of working in these programmes for the older adult volunteer since, in their community, older people are an important source of new mentors who can serve the large pool of young applicants waiting to be matched. Research has shown that younger generations benefit from mentoring; and this study adds to that knowledge base by showing that benefits are mutual. The mentoring experiences allow opportunities for older people to renew positive emotions and reinforce meaning in their lives. (RH)

ISSN: 01634372

From : <http://www.tandfonline.com>

Consultation on the Independent Mental Capacity Advocate Service; by Department of Health - DH. London: Department of Health, July 2005, 63 pp (Ref 269342).

The Department of Health (DH) is working with the Department of Constitutional Affairs (DCA) to implement the Mental Capacity Act 2005 by April 2007. The Act creates a new service, the Independent Mental Capacity Advocate Service (IMCA), the purpose of which will be to help vulnerable people who lack capacity and who face important decisions by the NHS and local authorities about serious medical treatment and changes of residence. The Act sets out minimum requirements for the IMCA service. This consultation seeks views (by 30 September 2005) on some of the important operational details and main functions of the service, and on how to define "serious medical treatment", one of the triggers for appointing an IMCA. The consultation also asks whether the service should be extended to other groups and situations. (RH)

Price: FOC

From : DH Publications Orderline, PO Box 777, London SE1 6XH. tel 08701 555 455. E-mail: doh@prolog.uk.com Also available on request in braille, audio cassette tape, disk, or large print.

Consultation on the Independent Mental Capacity Advocate Service: have your say: an easyread version; by Department of Health - DH. London: Department of Health, July 2005, 19 pp (Ref 269441).

The Mental Capacity Act 2005 sets up a new service, the Independent Mental Capacity Advocate (IMCA), who will help people with no family or friends, also when important decisions are made involving health services and local authorities. These include decisions about serious medical treatment or moving to a hospital or care home. The IMCA may become involved in other types of decision as well. This booklet asks questions about how the IMCA should be run, its funding, standards, the training and skills required, and making sure it is being run properly. It also covers the meaning of serious medical treatment. The consultation runs until 30 September 2005.(RH)

Price: FOC

From : DH Publications Orderline, PO Box 777, London SE1 6XH. tel 08701 555 455. E-mail: doh@prolog.uk.com Also available on request in braille, audio cassette tape, disk, or large print.

Developing the role of personal assistants: researched and compiled for OPARATE - a Skills for Care pilot project examining new and emerging roles in social care; by Margaret Flynn, New Types of Worker Project, Skills for Care; University of Sheffield.: Electronic format only, October 2005, 50 pp.

"Personal assistants" describe those who are employed by direct payments recipients (DPRs) - that is, people with assessed community care needs who are receiving direct payments to buy support for themselves under the Community Care (Direct Payments) Act 1996. This study focuses on the circumstances of 16 such people in north-west England (9 men, 7 women), 2 of whom were older people. Of 14 personal assistants interviewed, 12 were women. The report outlines findings on people's direct payments experiences, and on their perceptions of what skills and knowledge their personal assistants should possess (e.g. personal care and household tasks, listening, and sharing activities). The study also gathered information about DPRs' views about training, personal development and accountabilities of personal assistants over time, and how personal assistance is defined and what is expected of it. Occasional references were made indicating "unsought" (i.e. undesirable) characteristics. Recommendations reflect the positive and negative aspects (e.g. inadequate pay and conditions) of the study's findings. (RH)

From : Download document : <http://www.skillsforcare.org.uk>

Effects of a health advocacy, counselling and activation programme on depressive symptoms in older coronary heart disease patients; by Marika Salminen, Raimo Isoaho, Tero Vahlberg (et al).

International Journal of Geriatric Psychiatry, vol 20, no 6, June 2005, pp 552-558.

A health advocacy, counselling and activation programme aimed at increasing knowledge about coronary heart disease (CHD) and social activities, contacts, roles, support and performing light exercises reduced depressive symptoms among older Finnish male CHD patients suffering from a moderate or high amount of depressive symptoms. Primary health services, social services and voluntary organisations should develop and implement interventions including educational, physical and psychosocial activities for older chronically ill and disabled individuals with different physical diseases in order to get evidence-based data for treating older people with minor depression in primary care. The study was based on patients aged 65+ with CHD from the longitudinal epidemiological Lieto study in Finland in 1998-1999. 116 were randomly assigned to an intervention group and 106 to a control group. Changes in depressive symptoms were measured by the Zung Self-rating Depression Scale (ZSDS). (RH)

ISSN: 08856230

From : <http://www.interscience.wiley.com>

Explaining about ... advocacy and care home residents; by Fay Wright.

Working with Older People, vol 9, no 1, March 2005, pp 9-12.

Advocacy can empower care home residents. The author explains how advocacy services are currently being provided, and argues that better funding is required. (RH)

ISSN: 13663666

From : <http://www.pavpub.com>

Guidance on the Mental Capacity Act 2005; by Simon Chapman, National Council for Palliative Care. London: National Council for Palliative Care, October 2005, 25 pp.

When it comes into force on 1 April 2007, the Mental Capacity Act 2005 will have a profound impact on decision-making in palliative care. This guidance explains what the Act says and comments on how it will operate, to enable individuals and organisations in palliative care to understand how they should prepare for its implementation. (RH)

ISBN: 1898915474

Price: £15.00

From : National Council for Palliative Care, The Fitzpatrick Building, 188-194 York Way, London N7 9AS. E-mail: enquiries@ncpc.org.uk Website: www.ncpc.org.uk

Information, advice and advocacy for older people: defining and developing services; by Andrew Dunning, Joseph Rowntree Foundation - JRF; Beth Johnson Foundation. York: Joseph Rowntree Foundation - JRF, 2005, 75 pp.

Services providing information, advice and advocacy are crucially important for promoting the independence, involvement and interests of older people. The Joseph Rowntree Foundation (JRF) commissioned this short report, in order to shape the thinking of its Older People's Programme, and to suggest areas for further research and development on our understanding of information, advice and advocacy. The focus is on five key themes that have emerged strongly within the literature and fieldwork: accessibility, independence, involvement, strategy, and standards. The report critically examines different ways of thinking about the development of

information, advice and advocacy for older people, and examples of good practice are highlighted throughout. (RH)

ISBN: 1859353711

Price: £9.95

From : York Publishing Services Limited, 64 Hallfield Road, Layerthorpe, York YO31 7XZ. <http://www.yps-publishing.co.uk> Also available as pdf (185935372X) at <http://www.jrf.org.uk/bookshop>

Lay assessors and care home inspections: is there a future?; by Fay Wright.

British Journal of Social Work, vol 35, no 7, October 2005, pp 1093-1106.

Lay people have been included in many care home inspections for the past decade. The Board of the short-lived National Care Standards Commission (NCSC) controversially decided to dispense with such lay involvement in their inspection process. The replacement body, the Commission for Social Care Inspection (CSCI), intends to include lay people in the inspection of support services in the community, but is hesitating about reintroducing them into care inspections. This paper reports on research funded by the Nuffield Foundation exploring the role of lay assessors in the inspection process at 13 care homes for older people and for adults with learning disabilities in England and Wales. The research concludes that lay assessors had a significant role in communicating with residents and staff, and in observing care home life. Their role was particularly important, as inspectors were often involved with paperwork and checking policy compliance with the national minimum standards that they were often able to spend little, if any time talking to residents or staff. It is argued that there is a considerable potential for a strengthened role for lay people in the care home inspection process. (RH)

ISSN: 00453102

From : <http://bjsw.oupjournals.org>

Making change happen for black and minority ethnic disabled people; by Joseph Rowntree Foundation - JRF. York: Joseph Rowntree Foundation - JRF, November 2005, 4 pp.

Findings, 0495, November 2005, 4 pp.

Four grassroots development projects were supported by the Joseph Rowntree Foundation (JRF) to generate practical learning about how to make change happen for black and minority ethnic disabled people. EQUALITIES (based in Waltham Forest) aimed to increase the local voice of black and minority ethnic disabled people and carers. The International Somali Community Trust (ISCOM, based in Hackney) employed direct advocacy and set up a user forum for Somali-speaking disabled people. People in Action (based in Leeds), supported by ROOOTS, six African Caribbean people with learning difficulties, to deliver training for local service providers. Tassibee (a project in Rotherham) trained Pakistani Muslim women with experience of mental health difficulties to run self-help groups. Becca Singh, a freelance researcher, was commissioned to work with these projects to identify common lessons. These findings are based on her full report, "Improving support for black disabled people: lessons from community organisations on making change happen". (RH)

ISSN: 09583084

Price: FOC

From : Joseph Rowntree Foundation, The Homestead, 40 Water End, York YO30 6WP. <http://www.jrf.org.uk>
Full report (ISBN 1859353908) £7.95 (+£2.00 p&p) from York Publishing Services, 64 Hallfield Road, Layerthorpe, York YO31 7ZQ.

Nursing home administrators' views of their own and volunteer resident advocates' enhancement of long-term care; by Pat M Keith.

Journal of Elder Abuse & Neglect, vol 17, no 1, 2005, pp 75-87.

Volunteers perform much of the work of federally mandated US state ombudsman programmes which may include review of resident care in nursing facilities to protect against abuse and neglect. Although volunteers' activities may take place in the nursing facility, nursing home administrators' (NHAs) view of their work are seldom studied. Data from questionnaires completed by 199 NHAs predicted enhancement (i.e. improvement) of long-term care by volunteer resident advocates. Administrators also described their advice for improvement of care. NHAs' perceptions of residents' pleasure and families' satisfaction with volunteers' visits were associated with enhancement of long-term care. Answers to a number of remaining questions could enhance the efforts of volunteers in ombudsman programmes, improve long-term care, and diminish opportunities for abuse. (RH)

ISSN: 08946566

From : <http://www.tandfonline.com>

Representing pensioners: a report of research carried out by BMRB on behalf of the DWP; by Helen Barnard, Karen Whiting, BMRB; Department for Work and Pensions - DWP. Leeds: Corporate Document Services, 2005, 147 pp (Department for Work and Pensions Research report no 248).

The Pension Service Customer Survey (PSCS) in 2003 found that one fifth of customers contacting pension centres did so on behalf of someone else. This report presents findings of a qualitative study designed to explore the roles, views and experiences of those who have acted as representatives for pensioners in their dealings with the Pensions Service. The research also looked at reasons pensioners required representation, and how satisfied they were with their experiences of accessing services and the support they received. The report outlines the findings of a literature review carried out by Gill Valentine and Deborah Sporton of the Department of Geography, University of Sheffield. Having discussed why pensioners felt the need to be represented, the report explores the level of choice of both pensioners and representatives and the process of becoming a representative; examines the role of the representative; and discusses the impacts of being a representative. The experiences of contacting other organisations, including private companies, charities and support groups are discussed. (RH)
ISBN: 1841238244

From : Corporate Document Services, 7 Eastgate, Leeds LS2 7LY. E-mail: orderline@cds.co.uk Website: <http://www.cds.co.uk>

Review of the Mental Capacity Act 2005; by Rowena Jones.

Psychiatric Bulletin, vol 29, no 11, November 2005, pp 423-427.

Legislation to protect those with incapacity has built up in a piecemeal fashion, leading to concerns about abuse, particularly of the enduring power of attorney (EPA) system. Healthcare and welfare decisions are not covered by statute law, although gaps are partially filled with case law examples. Those making such decisions on behalf of the incapacitated rely on a common law defence of necessity to justify their actions. Professional bodies and voluntary organisations dealing with mental disability have lobbied the government for years to produce clear legislation; and the Mental Capacity Bill followed 16 years of consultation. The Mental Capacity Act received the Royal Assent in June 2005. However, it is not clear as yet when the Act will come into force, and further legislative procedure is still required. The author considers the extent to which the Act is likely to be effective with issues such as decision-making, advance directives and advocacy. It is unclear, though, whether cases such as "Bournewood" (R v Bournewood Mental Health NHS Trust ex parte L) would be resolved any more satisfactorily. (RH)

ISSN: 09556036

From : <http://pb.rcpsych.org>

Rights-based advocacy in long-term care: geriatric nursing and long-term care ombudsmen; by H Wayne Nelson, Priscilla D Allen, Donna Cox.

Clinical Gerontologist, vol 28, no 4, 2005, pp 1-16.

In the US, both long-term care (LTC) ombudsmen and nurses are committed to advocacy, but often find themselves at odds, due to fundamentally divergent orientations to patient care and advocacy issues within the nursing home setting. This paper compares these advocacy alignments, identifies areas of potential conflict, and provides grounds for cooperation and mutual support. Specifically, the authors argue that nursing advocacy - despite a theoretical bow to autonomy - is typically beneficent and can be limited by employment status, professional orientation and subordination by dominant physician and administrative authorities. Conversely, LTC ombudsmen are guided by the autonomy principle, and, by law, are free of any conflict of interest with the resident. The paper concludes with a discussion of common goals that should be adopted by care nurses and ombudsmen in order to improve mutual understanding and communication that is essential to building partnerships that effectively and creatively solve issues that emerge for resident physical and socio-emotional problems. (RH)

ISSN: 07317115

From : <http://www.tandfonline.com>

Tackling domestic violence: providing advocacy and support to survivors of domestic violence; by Alpa Parmar, Alice Sampson, Alana Diamond, Research, Development and Statistics Directorate, Home Office; University of East London. London: Research, Development and Statistics Directorate, Home Office, 2005, 12 pp (Development and practice report 34).

Domestic violence can be physical, psychological, emotional, sexual or financial. This report provides concise guidelines to those practitioners who work directly with female victims of domestic violence. The role of these specialist practitioners is to provide information, advice and support to enable women (and their children) to access a range of legal and non-legal resources and services that ultimately leads towards violence-free lives. The report draws on the independent evaluation of a number of multi-agency projects, which aimed to support

female victims of domestic violence, and which were funded under the remit of the Home Office's Crime Reduction Programme (CRP) Violence Against Women Initiative (VAWI). (RH)

From : Home Office, Research, Development and Statistics Directorate, Communications Development Unit, Room 264, 50 Queen Anne's Gate, London SW1H 9AT. E-mail: publications.rds@homeoffice.gsi.gov.uk

Tackling domestic violence: providing advocacy and support to survivors from Black and other minority ethnic communities; by Alpa Parmar, Alice Sampson, Alana Diamond, Research, Development and Statistics Directorate, Home Office; University of East London. London: Research, Development and Statistics Directorate, Home Office, 2005, 12 pp (Development and practice report 35).

Domestic violence can be physical, psychological, emotional, sexual or financial. This report aims to provide concise guidelines to those practitioners who work directly with female victims of domestic violence who are from Black and minority ethnic (BME) communities. The role of these specialist practitioners is to provide advice and support to victims and their children to ultimately lead towards violence-free lives. The report draws on the independent evaluation of a number of multi-agency projects which aimed to support female victims of domestic violence and which were funded under the remit of the Home Office's Crime Reduction Programme (CRP) Violence Against Women Initiative (VAWI). (RH)

From : Home Office, Research, Development and Statistics Directorate, Communications Development Unit, Room 264, 50 Queen Anne's Gate, London SW1H 9AT. E-mail: publications.rds@homeoffice.gsi.gov.uk

Urban black women at midlife: a counseling perspective; by Lynn Calhoun Howell, Linda McEvatt.

Journal of Women & Aging, vol 17, no 4, 2005, pp 43-58.

This naturalistic study explores the midlife experiences of Black women, some of whom identified as Caribbean emigrants and some as African American. An initial focus group of 13 women met in New York City. Two subsequent meetings were each attended by 7 of the original 13 women. Data were analysed using a grounded theory approach. Results were compared with those of three similar studies: one with rural Caucasian women; one with a group of women who identified as lesbians; and one with a racially mixed group of urban women. Counselling implications of shared and differing experiences are discussed. (KJ/RH)

ISSN: 08952841

From : <http://www.tandfonline.com>

2004

Advocacy 2004; by International Longevity Center, Japan. Tokyo: International Longevity Center, 2004, 36 pp. Advocacy, 2004, 2004, 36 pp.

The Japanese language version of Advocacy began in November 2002 and is published in Japan every other month, with an English version being published annually. This 2004 issue is a compilation of the Japanese issues 4, 5, 6 and 7, and comprises proposal from advocates in diverse fields: elder abuse; reclaiming the "village commons"; housing for "real families"; and restoring Japan's identity with IT. (RH)

From : International Longevity Center, 1-12-1 Takaido-Nishi, Suginami-ku, Tokyo 168-8510, Japan.

Championing older people - making a difference: findings from 209 older people's champions; by Jill Manthorpe, Better Government for Older People (BGOP); Social Care Workforce Research Unit, King's College London. London: Better Government for Older People - BGOP, 2004, 30 pp (BGOP research series: no 1).

The National Service Framework for Older People (NSF) set out the organisational responsibilities for its implementation. It included the idea of NHS bodies and local local authorities having older people's champions to raise the profile of older people's services. This report reveals the many varied perspectives and experiences of 209 such individuals: 71 clinical NHS champions (mainly nurses); 64 NHS Trust non-executive director champions; 7 NHS Trust patient forum champions; 5 NHS Trust manager champions; 38 local authority elected member (councillor) champions; 16 local authority manager/officer champions; and 8 champions from the private or voluntary sectors. The aim was to find information about their role, skills and experiences, networks and support. BGOP wanted to find out whether champions considered their roles effective, and whether they made a difference. A summary of the survey findings is also available. (RH)

Price: -

From : Better Government for Older People, 207-221 Pentonville Road, London N1 9UZ. www.bgop.org.uk
Email: information@bgop.org.uk

Edith's weekend away: issues for advocates in dementia care; by Sally Wells.

Journal of Dementia Care, vol 12, no 4, July/August 2004, pp 18-19.

The advocate's role is avowedly to represent the interests of the client. Sometimes, however, knowing the client well suggests a more flexible approach, as described in this article. (RH)

ISSN: 13518372

From : Email: shital@hawkerpubs.demon.co.uk

Effects of a caregiver intervention on negative caregiver appraisals of behavior problems in patients with Alzheimer's disease: results of a randomized trial; by Mary S Mittelman, David L Roth, William E Haley (et al). Journals of Gerontology: Series B, Psychological Sciences and Social Sciences, vol 59B, no 1, January 2004, pp P27-P34.

Behavioural problems are among the most challenging aspects of caring for a person with Alzheimer's disease (AD). A sample of 406 spouse-caregivers of patients with AD in New York was randomised to an active multi-component counselling and support intervention condition, or to a usual care condition. Caregivers reported on the frequency of troublesome patient behaviours and their reactions to them at baseline and regular follow-up interviews. Random effects regression models over the first 4 years after randomisation revealed that, although the intervention did not affect the frequency of patients behavioural problems, it did significantly reduce caregivers' reaction ratings. Because caregiver appraisals have been found to mediate the impact of caregiving stress on depression and to predict nursing home placement rates, they deserve greater attention as an important target of intervention services. (RH)

ISSN: 10795014

From : <http://www.geron.org>

"Feeling the way": understanding how advocates work with people with dementia; by Caroline Cantley, Kay Steven.

Dementia: the international journal of social research and practice, vol 3, no 2, June 2004, pp 127-144.

Dementia advocacy is a new and evolving field. There is a small, and growing, body of practice-based knowledge about dementia advocacy, but limited research-based evidence about what works and what constitutes good practice. This article draws on data collected as part of a project on the development of dementia advocacy in the UK. The authors explore how those providing dementia advocacy services describe and explain the basis on which they work in areas of consent, instruction, representation and advocacy relationship. They show that although service providers are clear about the principles of advocacy, everyday practice is complex. There are many dilemmas, ambiguities and uncertainties. The implications for practice, policy and research are discussed. (RH)

ISSN: 14713012

From : <http://www.sagepublications.com/ejournals>

Generations in action: final evaluation report (2004); by S W Ellis, Centre for Intergenerational Practice - CIP, Beth Johnson Foundation - BJF; Institute of Education, Manchester Metropolitan University. Stoke-on-Trent: Beth Johnson Foundation - BJF, 2004, 38 pp.

The benefits of 'generations in action' (GIA), as set up and managed through the Salford Business Education Partnership (BEP), are demonstrated. GIA's main aim is to encourage the transfer of skills and experiences of older people to younger people who are identified as needing extra support which is offered as mentoring or other one-to-one activities. This report describes the qualitative and quantitative methods and data, and presents results obtained from using the Short Form Health Survey (SF12) and the quality of life measure CASP-19 (Control, Autonomy, Self-realisation and Pleasure). The report also highlights the many ways in which volunteering by older people (aged 50+) could be promoted or encouraged. (RH)

ISBN: 0907875262

From : Centre for Intergenerational Practice, Beth Johnson Foundation, Parkfield House, 64 Princes Road, Hartshill, Stoke-on-Trent, ST4 7JL. <http://www.centreforip.org.uk>

The importance and availability of peer support for people with learning difficulties accessing direct payments; by Joseph Rowntree Foundation - JRF. York: Joseph Rowntree Foundation - JRF, December 2004, 4 pp. Findings, D64, December 2004, 4 pp.

New regulations which came into force in 2003 (and similar measures in Wales in 2004) mean that local authorities do not just have the power to offer direct payments, they now have a duty to offer them to eligible people. In theory, this should mean many more people receiving direct payments, including those with learning difficulties. However, key to take-up is the availability of effective support in accessing direct payments. Research by Values Into Action (VIA) looked at the availability of peer support for and by people with learning

difficulties. The full report, "Helping ourselves: direct payments and the development of peer support", by Catherine Bewley and Linsay McCulloch, is published by VIA. (RH)

ISSN: 09583084

Price: FOC

From : Joseph Rowntree Foundation, The Homestead, 40 Water End, York YO30 6WP. <http://www.jrf.org.uk>

Information for older people: the contribution of local authority websites; by Norma Raynes, Dimitri Pagidas, Pat Margiotta (et al).

Journal of Integrated Care, vol 12, issue 4, August 2004, pp 35-41.

Older people do not currently view websites as a preferred source of information. This may not be a view held in the future. An exploration of local authority websites suggests room for improvement and collaboration with others to shape a future in which websites are joined up and informative for older people. The findings reported in this article relate to the authors' study, "Are you listening? current practice in information, advice and advocacy services for older people", which has been funded by the Joseph Rowntree Foundation (JRF). (RH)

ISSN: 14769018

From : <http://www.pavpub.com>

Information, advice and support for older people living in residential care: an exploratory survey of advocacy; by Ruth Northway, Jamal Ameen, Anne Marie Coll (et al), School of Care Sciences, University of Glamorgan. Pontypridd: University of Glamorgan, 2004, 105 pp.

Older people living in residential care may require information, advice and support in order to ensure that their interests are safeguarded, represented and promoted. Advocacy can have an important role to play in this process. This exploratory study aimed to increase understanding of the factors that influence the type of advocacy used, and the impact such assistance has on older people living in residential care. Research was undertaken in seven residential homes for older people. This report outlines the study's methodology. It presents the results of interviews with 102 residents, and of postal questionnaires completed by 40 family members and 28 care staff, noting how each group understood advocacy. The report notes some limitations to the study, but it concludes that there is a need to raise people's awareness concerning the role of independent advocates. Family members and care staff also need support in their role as providers of information, advice and support. Appendices include the documentation used for the three surveys. (RH)

ISBN: 1840541156

From : Unit for Development in Intellectual Disabilities, School of Care Sciences, University of Glamorgan, Pontypridd CF37 1DL. Website: www.glamorgan.ac.uk

NOVATURA EQUAL Partnership best practice manual: a trans-national approach to addressing the needs of individuals and communities; by Centre for Sheltered Housing Studies - CSHS; Observatore Regionale Siciliano per l'Ambiente (EURO) (Italy); Junta da Andalucia FILON Project (Spain); Institute for Service Development (Denmark).: EQUAL 2001-2004 Andalucia, 2004, 128 pp.

The NOVATURA EQUAL Transnational Cooperation Partnership was established in 2002 as part of the first round of the European Union's EQUAL Programme. This manual is based on projects of the four partners who validated the Transnational Cooperation Agreement (TCA). The objective of the UK's Centre for Sheltered Housing Studies (CSHS) project "Lifelong Learning, Active Ageing" was to develop and test innovative approaches and models for promoting lifelong learning and regeneration in disadvantaged communities through the active participation of residents in sheltered housing schemes. The Institute for Service Development (ISU) in Odense, Denmark has been developing a management system to enable marginalised groups and individuals to tackle their social and economic exclusion. The Observatore Regionale Siciliano per l'Ambiente (EURO) in Palermo, Sicily has developed new models to promote the social and economic integration of excluded groups (e.g. ex-prisoners). The Junta da Andalucia FILON Project (Spain) has looked at ways of involving unemployed people and women in the labour market. This manual covers some of these projects' cross-cutting themes such as mentoring and lifelong learning. (RH)

From : Centre for Sheltered Housing Studies, First floor, Elgar House, Shrub Hill Road, Worcester WR4 9EE.

State long term care ombudsman programs: factors associated with perceived effectiveness; by Carroll L Estes, Donna M Zulman, Sheryl C Goldberg (et al).

The Gerontologist, vol 44, no 1, February 2004, pp 104-115.

Since 1978, all US states are required to develop a long term care ombudsman program (LTCOP) for identifying and resolving complaints made on behalf of LTC residents. This article reports from a nationwide study on factors associated with the perceived effectiveness of state LTCOPs. The study used telephone interviews with ombudsmen and data from the National Ombudsman Reporting System. Several factors limit the perceived effectiveness of state LTCOPs, including insufficient funding and insufficient autonomy. Despite such

problems, state ombudsmen report that their programmes meet statutory mandated requirements with varying degrees of effectiveness. Findings show significant positive associations between programme funding and paid and volunteer staff levels, and between the ratio of long-term care beds per ombudsman and the percentage of nursing facilities visited. Sufficient funding is positively associated with perceived effectiveness of work with nursing facilities. The article concludes that sufficient resources, sufficient organisational autonomy, and a supportive political and social environment are key elements in achieving varying types of perceived effectiveness in the state LTCOPs. However, research is needed to extend this work to local ombudsman programmes. (RH)

ISSN: 00169013

From : <http://www.geron.org>

The victim's voice : how is it heard?: issues arising from adult protection case conferences; by Katharine Jeary. The Journal of Adult Protection, vol 6, no 1, April 2004, pp 12-19.

The requirement is examined that victims of abuse should always be invited to attend case conferences or to nominate an advocate on their behalf to represent or hear their views. This article explores the issues raised and the ethical dilemmas arising from how to hear the victim's voice when dealing with adult protection. The author's observations are based on the views of more than 50 adult protection case conference participants or policy-makers, representing a wide range of public, private and voluntary sector organisations. (RH)

ISSN: 14668203

From : Website: <http://www.pavpub.com>

2003

Are you listening?: current practice in information, advice and advocacy services for older people; by Pat Margiotta, Norma Raynes, Dimitri Pagidas (et al), Joseph Rowntree Foundation - JRF; University of Salford. York: Joseph Rowntree Foundation - JRF, 2003, 60 pp.

Older people have an interest in services concerned with the availability of clear, timely and relevant information, advice and advocacy. This study reports on a critical review of current practice in services designed to provide information about, and advocacy to, older people. The information is derived from a literature search, a search of local authorities' and voluntary organisations' websites, and three focus groups involving older people from four different local authorities: Salford, Manchester, Stockport and Trafford. Examples of good practice are highlighted, and recommendations are made accordingly. The findings indicate a strong need for older people to be involved in the development, implementation and monitoring of such services. (RH)

ISBN: 1859351050

Price: £8.95

From : York Publishing Services, 64 Hallfield Road, Layerthorpe, York YO31 7ZQ. www.jrf.org.uk

"Hear what I say": developing dementia advocacy services; by Caroline Cantley, Kay Steven, Monica Smith, Dementia North, Northumbria University. Newcastle upon Tyne: Dementia North, 2003, 66 pp.

Although an important means of enabling people with dementia to have much more self-determination, hitherto advocacy has largely been unavailable to them. This report is based on a project by Dementia North that has mapped dementia advocacy nationally and undertaken 7 case studies of community and hospital based advocacy services. The report is in six chapters, the first of which sets the scene and the policy context in which advocacy schemes operate. Chapter 2 discusses the practice of dementia advocacy, highlighting the ethical and operational challenges. Chapter 3, on setting up an advocacy service, covers the initial identification of need through the early stages of generating support, and determining the parameters of the service. Later chapters focus on management structures and tasks, staffing, and issues in ongoing service development. An appendix lists services offering general and dementia advocacy support, and the organisations comprising the Dementia Services Development Centres network. (RH)

ISBN: 1861353081

From : Dementia North, Allendale House, Northumbria University, Coach Lane Campus, Newcastle upon Tyne, NE7 7XA. hs.dementianorth@unn.ac.uk

Independent advocacy with older people: a national conference hosted by the Older People's Advocacy Alliance (OPAAL) UK, 25 July 2002; by Help the Aged; Older People's Advocacy Alliance (OPAAL) UK. London: Help the Aged, 2003, 24 pp.

Independent advocacy is needed so that older people can secure and exercise their rights and choices; ensure that their voices are heard when decisions are made concerning their care and quality of life; and to combat age discrimination and abuse. This report outlines workshops and presentations at the conference on themes including: advocacy and the pensioners' movement; the need for person-centred care; dementia care based on

listening to people's needs; advocacy, abuse and adult protection; information, advice and advocacy services; and advocacy, accreditation and standards. Also included is an annual report from OPAAL's Chair, Andrew Dunning. (RH)

ISBN: 1904528066

From : Help the Aged, 207-221 Pentonville Road, London N1 9UZ. E-mail: info@helptheaged.org.uk

Website: www.helptheaged.org.uk

Interests and skills of volunteers in an ombudsman program: opportunities for participation; by Pat M Keith.

International Journal of Aging and Human Development, vol 57, no 1, 2003, pp 1-20.

Volunteers' reasons for interest in and skills they could employ as resident advocates in American nursing facilities under the auspices of an ombudsman programme were obtained from applications of 778 individuals. A unique feature of this research was that interests and skills were assessed prior to volunteer participation. In contrast to motivations for volunteering, skills of volunteers are infrequently studied, yet they have implications for training and performance. Age, education, employment and previous volunteer experience affected reasons for interest and skills. Less education, unemployment, older age and fewer prior volunteer experiences may identify those with greater obstacles to participation who may benefit from additional education and training. Data from application forms may be used to suggest needed areas of interaction. (RH)

ISSN: 00914150

From : <http://baywood.com>

Older people doing it for themselves: accessing information, advice and advocacy; by Laurie Kerr, Vivien Kerr, Joseph Rowntree Foundation - JRF. York: Joseph Rowntree Foundation, 2003, 24 pp.

The current literature on information, advice and advocacy for older people was examined, and provision in the London Borough of Barnet was mapped with help from the older people's forum in the borough. The research on which this report is based is part of the Signpost Project, which was funded by the Joseph Rowntree Foundation (JRF), with the aim of establishing the perceived and actual needs and requirements of those who are currently pensioners, and those who will become pensioners in the next 15-20 years. The report looks at how older people find out about what they need to know, the diversity and breadth of information, advice and advocacy available, and whether older people can find it and manage it once found. The authors also report their personal experiences as older people in finding information, advice and advocacy both in the UK and in New Zealand. They suggest individual strategies for older people to find out what they need to know, and list a few examples of good practice. (RH)

ISBN: 1859351530

Price: £11.95 (+ £2 p&p)

From : York Publishing Services Ltd., 64 Hallfield Road, Layerthorpe, York YO31 7ZQ. Website:

www.jrf.org.uk

Older people's perspectives: devising information, advice and advocacy services; by Ann Quinn, Angela Snowling, Pam Denicolo, Department of Health and Social Care, University of Reading; Joseph Rowntree Foundation - JRF. York: Joseph Rowntree Foundation, 2003, 33 pp.

The UK government has acknowledged the need for improved information and advice services, with an increasing emphasis on the importance of service providers working in partnership with older people. In a project supported by the Joseph Rowntree Foundation (JRF), researchers from the University of Reading worked with the Slough Older People's Forum and service providers. They explored the barriers in accessing information, advice and advocacy faced by the multi-ethnic communities of older people in Slough, especially in becoming aware that there was a service that could help them. The report considers older people's views on what services they want, and their key priorities; how older people perceive service providers' distinctions between information, advice and advocacy; the challenges faced by current services in attempting to give accurate and comprehensive information to older people; and the impact of resource limitations (e.g. short-term funding and staff shortages) in providing new services. While no single solution meets all the needs expressed, the library is recommended as the host for providing and co-ordinating a database that is accessible to both service providers and service users. (RH)

ISBN: 1859351077

Price: £11.95

From : York Publishing Services Ltd., 64 Hallfield Road, Layerthorpe, York YO31 7ZQ. Website:

www.jrf.org.uk

Older people's views on information, advice and advocacy; by Joseph Rowntree Foundation - JRF. York: Joseph Rowntree Foundation - JRF, June 2003, 4 pp.

Findings, 623, June 2003, 4 pp.

The needs and problems of diverse communities of older people in Slough in relation to information, advocacy and advice are explored. A Project Working Group of organisations run by and for older people in Slough worked in partnership with a research team from the University of Reading. Older people were interviewed individually and within focus groups, as were service providers. Recommendations for services that would meet the needs expressed by older people were developed, and solutions then prioritised. These findings outline the study's results with regard to older people's preferred styles of service, and the difficulties perceived by older people and service providers. The full report, "Older people's perspectives: devising information, advice and advocacy services" by Ann Quinn, Angela Snowling and Pam Denicolo, is published on behalf of the Joseph Rowntree Foundation (JRF) by York Publishing Services. (RH)

ISSN: 09583084

Price: FOC

From : Joseph Rowntree Foundation, The Homestead, 40 Water End, York YO30 6WP. Website: www.jrf.org.uk

Report of the evaluation of the pilot project to provide advocacy in a residential home for elderly people; by Jill Jones, Westminster Advocacy Service for Senior Residents - WASSR. London: Westminster Advocacy Service for Senior Residents - WASSR, January 2003, 20 pp.

WASSR provides an independent advocacy service for older people in Westminster. This report points to the need for independent, local, skilled and objective advocacy in residential accommodation. The value of involving care home staff, residents and relatives in the review mechanisms for such a service is emphasised. (RH)

From : WASSR, 55 Dean Street, London W1D 6AF. <http://www.wassr.org>

2002

Advisers, advocates, counsellors and mediators in elder abuse casework; by Yvonne Craig.

Quality in Ageing, vol 3, no 2, June 2002, pp 39-46.

Complex conflicts in elder abuse, its causes, typology, protection and prevention, suggest that co-operation by multidisciplinary social services should be a major consideration in policy decision-making, planned intervention and support. Casework of the Elderly Mediation Project (EMP for empowerment) and related agencies provides evidence for this view. There are shared casework values and similar as well as different skills. However, when service user interests are paramount, the professional concerns of service providers for defined roles and boundaries raise ethical issues. Are there conflicts between older people's needs for trusting, confidential relationships with one worker, and case co-ordinators' promotion of varied specialist input? Brief anonymised case notes suggest that practitioners may face professional conflicts about social interventions as casework diversifies and service user involvement in decision-making increases, but some guidelines to good practice are offered. (RH)

ISSN: 14717794

Advocating advocacy; by John Dow.

MCC: Building knowledge for integrated care [Managing Community Care] vol 10, no 6, December 2002, pp 28-31.

Sections 1-3 of the Disabled Persons (Services, Consultation and Representation) Act 1986 provide for the appointment of a person to represent the disabled person in dealings with local authorities in relation to that person's need for services. This article looks at the legal and policy context for the development of advocacy services, and considers the legal issues which arise when developing standards and codes of practice for advocacy services, in particular capacity, consent and confidentiality. (KJ/RH)

ISSN: 14615436

Behind closed doors: an investigation into elder abuse in north east Essex, in residential, sheltered and private accommodation, to explore the need for a specialist, local abuse telephone help-line; by Susan Greaves, North Essex Advocacy Teams for older people (NEAT): unpublished, May 2002, 82 pp.

Set up originally in 1982 as the Tendring Advocacy Scheme, the scheme now covers all of North Essex as North Essex Advocacy Teams (NEAT). This qualitative research project was funded by the Essex Community Foundation and the East of England Development Agency's Rural Development Small Grants Programme. The aim was either to support or refute the perceived need by NEAT for a small, specialist local help-line dealing with all aspects of elder abuse. In-depth interviews were conducted with 67 older people, living either in

residential or nursing homes, sheltered housing, or their own homes. Also interviewed were 40 residential/nursing home care staff, 3 social workers, 2 general practitioners (GPs), a practice manager, 4 district nurses, 3 area managers from a private care agency, a solicitor, and a police constable. Of 83 residential and nursing homes contacted in the Tendring and Colchester areas, only 20 agreed to take part in the research. The report comprises: a literature review; methodology; research design and activity; findings for each group interviewed; and conclusions and recommendations. Of the 122 people interviewed, 87 said that they would use a confidential local help-line if one were available. (RH)

Price: -

Coordination and Advocacy for Rural Elders (CARE): a model of rural case management with veterans; by Christine Ritchie, Darryl Wieland, Chris Tully (et al).

The Gerontologist, vol 42, no 3, June 2002, pp 399-405.

As a response to the US Veterans Health Administration's emphasis on community- and home-based services, the Coordination and Advocacy for Rural Elders (CARE) programme was begun in 1997. Veterans aged 75+ who scored at risk of repeated hospital admission on the PRA-Plus telephone questionnaire were targeted and visited by evaluators who administered a comprehensive health questionnaire prior to being assessed at home by CARE clinical teams. Nurse-social worker teams then performed in-home standardised assessments using the Minimum Data Set - Home Care (MDS-HC), developed patient-specific care plans, and mobilised family, community and VHA resources to implement plans. On average, 8 problems were identified for each patient, most commonly fall risk, social needs, pain, and needs related to IADL disability. As a result of the initial assessment, two-thirds of care participants received referral or linkage to formal services, more than half to medical providers. Through CARE, the VHA is learning more about unmet needs of older rural veterans. Further development and evaluation should guide the VHA toward providing efficient, effective community-based services to all frail older veterans. (RH)

ISSN: 00169013

Expected and actual difficulties of volunteer resident advocates in an ombudsman program; by Pat M Keith, Robert B Schafer.

Journal of Applied Gerontology, vol 21, no 4, December 2002, pp 421-436.

The activities of the office of the ombudsman in the US include investigating and resolving complaints made by long-term care residents. The office's mandate also includes training for volunteers, and promoting the development of citizen organisations to participate in the Ombudsman programme. This research analysed application forms of 694 applicants and a short questionnaire answered by 700 existing volunteers to compare anticipated difficulties of volunteer resident advocates to an ombudsman programme prior to their participation with those they actually experienced. Applicants substantially underestimated the amount and type of difficulties they would experience. Incongruities between applicants' anticipated difficulties and those they later reported suggest areas for training and implications for practice. (RH)

ISSN: 07334648

Living the life of another: the need for public guardians of last resort; by Pamela B Teaster, Karen A Roberto.

Journal of Applied Gerontology, vol 21, no 2, June 2002, pp 176-187.

This was a project funded by a grant from the Virginia Department of Aging. Self-report surveys were sent to pre-identified representatives of Adult Protective Services and other US related bodies, to assess the need for public guardianship. The agencies estimated the need for a total of 2,881 surrogate decision makers (including powers of attorney and payees) and in particular, 1425 guardianships. Events most likely to precipitate guardianship included third-party behaviour, mental health, and cognitive impairment. Virginia's trajectory for establishing explicit public guardianship is useful for other authorities seeking to establish or refine public guardianship statutes. As a result of information obtained from the needs assessment and a companion evaluation of two demonstration projects, the Virginia Public Guardian and Conservator Program became law in 1998. (KJ/RH)

ISSN: 07334648

Past caring; by Alex Dobson.

Care and Health Magazine, issue 23, 30 October 2002, pp 14-16.

Why older people should be given a voice through effective advocacy services, in order to protect them from abuse and neglect. The author discusses this in the context of developments in Wales including: the findings of "Everybody's concern", a Social Services Inspectorate for Wales (SSIW) review into residential homes run by Cardiff and the Vale of Glamorgan councils; and "When I'm 64", a report on services for older people, commissioned by the Welsh Assembly. (RH)

ISSN: 14779994

From : <http://www.careandhealth.com>

2001

Advocacy and ageing; by Henry Sorensen, Barbara Black.

Australasian Journal on Ageing, vol 20.3, supplement 2, September 2001, pp 27-34.

Advocacy is the very ordinary process of standing up for the rights of others who are unfairly treated. This paper explores the role of advocacy in working towards creating more positive images of older people in society. The way in which advocacy is used to support the rights and best interests of the most vulnerable people in society is discussed in relation to inequality, ageism, those receiving Aged Care Services in Australia, and elder abuse. (RH)

ISSN: 07264240

Dementia advice and support: a new service initiative; by Alisoun Milne, Jayne Lingard.

Journal of Dementia Care, vol 9, no 3, May/June 2001, pp 28-32.

The development is explored of a UK-wide Dementia Advice and Support Service (DASS), launched by the Mental Health Foundation. The project comprises pilot schemes, evaluation of the pilot schemes, research projects, and a web-based 'learning network', which are briefly outlined in this article. (RH)

ISSN: 13518372

Evaluation of the Beth Johnson Foundation Advocacy and Dementia Project 1998-2001; by Charlie Murphy, Beth Johnson Foundation. Stoke-on-Trent: Beth Johnson Foundation, 2001, 28 pp.

This report is an independent evaluation by the Dementia Services Development Centre, University of Stirling of the project that was launched in May 1998. The report found both good work and areas for improvement and helped refocus the project for a further piece of work. This evaluation could be useful to other projects working with advocacy for older adults with complex needs. (KJ)

From : Beth Johnson Foundation, Parkfield House, 64 Princes Road, Hartshill, Stoke-on-Trent ST4 7JL.

Evaluation of the impact of a volunteer ombudsman program: the Rhode Island experience; by Rachel Filinson.

Journal of Elder Abuse & Neglect, vol 13, no 4, 2001, pp 1-20.

The research assessed the impact of a major innovation in Rhode Island's Long-Term Care Ombudsman Program in 1997 - the introduction of a volunteer component, in which community members were trained and certified as advocates for residents in long-term care. Based on reports to the state ombudsman office, the findings indicated that the placement of volunteer ombudsman was associated with the generation of more complaints and more serious complaints about the facilities in which they were placed, some of which could not be resolved despite the greater intensity of interventions applied in these cases. Data derived from nursing home inspections revealed a negative and significant correlation between the length of time a volunteer had been at a facility and the number of deficiencies. (KJ/RH)

ISSN: 08946566

From : <http://www.tandfonline.com>

Funeral advisers: is there a need?: pilot study; by Rose Heatley, National Funerals College. Long Ashton, Bristol: National Funerals College, 2001, 50 pp.

The funeral adviser would be someone who would, on request, provide independent funeral information to dying people and/or those closest to them. This role was first outlined by the National Funerals College (NFC) in its 1998 "Dead citizens charter". The NFC carried out a development research project to test the concept of funeral adviser. The project was designed to take place either in a long-term care setting or sheltered housing. The project's 28 participants - ranging from home managers to care assistants and volunteers - came from Anchor Trust and MHA Care Group residential homes, Brunelcare, and two hospices. This report describes the project, the central part of which was the development of a training programme for funeral advisers. Recommendations are made on how long term care organisations need to consider training for their staff around death, dying and bereavement. (RH)

Price: £5.00

From : The National Funerals College, 75 Long Ashton Road, Long Ashton, Bristol BS41 9HY. Tel 01275 393275.

Good practice with vulnerable adults; by Jacki Pritchard (ed). London: Jessica Kingsley, 2001, 317 pp (Good practice series, 9).

The "No secrets" guidance from the Department of Health (DH, 2000), together with the Home Office's "Action for justice" (1999) provide the context for this multi-disciplinary guide for professionals and care staff working with vulnerable adults. Contributors consider the needs and problems of those who have suffered from abuse in earlier life, domestic violence, neglect, mental health problems, and alcohol-related problems. The problems and dilemmas of those working to protect these groups - the police, general practitioners (GPs), medical practitioners, registration and inspection officers, and social workers - are discussed. The importance is highlighted both of inter-agency working and of the role of citizen advocacy. (RH)

ISBN: 1853029823

Price: £16.95

From : Jessica Kingsley Publishers, 116 Pentonville Road, London N1 9JB.

Mentoring between and within generations of gerontology students; by Dana Burr Bradley, James R Peacock, Dena Shenk.

Gerontology & Geriatrics Education, vol 22, no 2, 2001, pp 1-14.

The use of mentoring during the implementation of an intergenerational service-learning project is examined. An intergenerational mentoring model was developed, to include the students in two required courses in the undergraduate model, with the assistance of a student from the MA in Gerontology programme. Students were asked to work together in designing and implementing a programme focused on combining learning with meeting community needs. Three kinds of mentoring roles were identified in both group and individual mentoring. These include the roles of "door openers", "information providers" and "role models". This paper discusses the value of mentoring to engage undergraduates in gerontology, to provide a measure of advanced undergraduates' competence and ability to use gerontological knowledge, and to extend unpaid faculty resources in a gerontological programme. (KJ/RH)

ISSN: 02701960

From : <http://www.tandfonline.com>

Preparing future aging advocates: the Oklahoma Aging Advocacy Leadership Academy; by Patricia Baker, Judy Leitner, William J McAuley.

The Gerontologist, vol 41, no 3, June 2001, pp 394-400.

The Oklahoma Aging Advocacy Leadership Academy was designed to ensure the continuation of future cohorts of advocates and volunteers for ageing programmes and services. Curriculum for the 10-week course incorporates age-related content and advocacy, leadership, and voluntary skills training. Evaluation consisted of: a pre-post assessment of perceived familiarity with advocacy and voluntary leadership issues; post-Academy participant assessments of the quality of the Academy's work; post-Academy written statements about areas that were valuable or needed changing; and a compilation of student and volunteer activities. Evaluation results indicate that the OAALA led to significant increases in perceived familiarity with issues, and very positive participant assessments of quality. Many participants also spontaneously initiated advocacy and volunteer activities while enrolled in the Academy, confirming the OAALA's success in preparing people as old-age advocates and volunteer leaders. (RH)

ISSN: 00169013

Rights focused advocacy and elder abuse; by David Cripps.

Australasian Journal on Ageing, vol 20.1, March 2001, pp 17-22.

The Aged Rights Advocacy Service (ARAS) in Adelaide provides an advocacy service for older people who are experiencing, or believe they are at risk of experiencing, abuse. The effectiveness of the Rights Focused Advocacy Model in supporting older people to overcome such situations is examined. 100 case records were analysed retrospectively, representing some 20% of clients over an 18-month period (November 1997-June 1999). Data recorded included type of abuse, risk factors (for older person and abuser), and outcome (i.e. whether or not abuse had ended). 100 older people experienced 267 situations of abuse. The Rights Focus Advocacy Model enabled older people to take steps to stop abuse in 50% of those situations, and to take some action in 34% of situations. No change was recorded in 16% of situations, and comprised those who did not wish to take their case beyond the initial contact phase. The Model thus demonstrated its effectiveness in helping people to take steps to overcome abuse. (RH)

ISSN: 07264240

Role orientations, attributions to nursing facility personnel, and unresolved complaints of volunteers in an ombudsman program; by Pat M Keith.

Journal of Gerontological Social Work, vol 34, no 4, 2001, pp 33-46.

This research linked volunteers' orientations to their work in an ombudsman programme, their attributions of support to facility personnel, and unresolved complaints. A significant feature of the research was relating volunteers' attitudes and an objective indicator of their practices. Data were analysed from 481 volunteers' responses to a questionnaire, with unresolved complaints were coded from records. Advocates differed from mediators and therapeutic supporters, having significantly more unresolved complaints and more negative attributions to facility personnel. Attributions to facility staff influenced the magnitude of unresolved complaints only among advocates. (RH)

ISSN: 01634372

From : <http://www.tandfonline.com>

Social exclusion; by Centre for Policy on Ageing - CPA. London: Centre for Policy on Ageing, 2001, 2 pp (CPA briefings 2001).

This briefing summarises work undertaken by the Centre for Policy on Ageing (CPA) on social exclusion: a study, to be published in 2002, "Hard times: life on a low income in retirement"; and the report, "Citizen advocacy with older people: a code of good practice", by Andrew Dunning (CPA, 1995). (RH)

From : CPA, 19-23 Ironmonger Row, London EC1V 3QP.

The social worker-ombudsman partnership: using a resident-centered model of situational conflict tactics; by H Wayne Nelson, F Ellen Netting, Ruth Huber (et al).

Journal of Gerontological Social Work, vol 35, no 3, 2001, pp 65-82.

A tactical protocol is presented, to guide social workers and ombudsmen in explaining their conflict behaviour in fundamentally imbalanced power structures like nursing homes. It is argued that efficient case advocacy requires the selection of tactics based on the confluence of two conditional factors on a low to high continuum in the following priority: the urgency and severity of the resident's needs; and the facility's level of resistance. Seven possible influence tactics are presented within the broad strategies of relation-building, campaign/collaboration and contest. (KJ/RH)

ISSN: 01634372

From : <http://www.tandfonline.com>

Support from others and efficacy of volunteer ombudsmen in long-term care facilities; by Pat M Keith.

International Journal of Aging and Human Development, vol 52, no 4, 2001, pp 297-310.

The work of a US ombudsman has been described as the most difficult in the field of ageing. Hypotheses about support from ten sources, relationships with peers, and efficacy were tested using questionnaire data from 607 nursing home volunteer ombudsmen. Whereas help from other volunteers had a negative effect, support from managers and residents contributed to efficacy. Committed peers, however, contributed to the perception of a job well done. Efficacious ombudsmen believed their needs were taken into account, suggesting the importance of caring for volunteers who in turn care for others. (RH)

ISSN: 00914150

Training as a vehicle to empower carers in the community: more than a question of information sharing; by Nicholas Clarke.

Health & Social Care in the Community, vol 9, no 2, March 2001, pp 79-88.

There has been a tendency to treat empowerment as synonymous with participation in decision-making, with little attention given to the "ecological" model of empowerment where linkages have been found between community participation and measures of psychological empowerment. Training has been suggested as a means whereby carers might be empowered. This study investigated whether attendance on a training programme to empower carers resulted in improvement of their levels of perceived control, self-efficacy and self-esteem as partial measures of psychological empowerment. Whereas carers' knowledge of services and participation increased as a result of the programme, no changes were found in measures of their empowerment. The most likely explanation for this is the failure to consider how training should be designed to achieve change in individual competence and self-agency. It is suggested that community care agencies should focus greater energies in determining how the policy objectives of empowerment are to be achieved through training, and in so doing make far more explicit the supposed linkages between training content, design and its posited impact on individual behaviour or self-agency. (RH)

ISSN: 09660410

2000

Challenging behaviour in older persons: the use and abuse of mediation; by Yvonne Craig.

EAGLE Journal, vol 8, no 5, April/May 2000, pp 8-9.

How can we care compassionately for older people and uphold their rights, when their behaviour distresses or harasses residents and managers in sheltered housing? The author outlines cases of challenging behaviour in older people which may affect their suitability as tenants of sheltered housing. Ethical principles and practice of mediation mean that confidential prior information cannot be disclosed without permission. (RH)

ISSN: 1360239X

Correlates of primary orientations of volunteer ombudsmen in nursing facilities; by Pat M Keith.

Journal of Aging Studies, vol 14, no 4, December 2000, pp 373-384.

This research, based on data from 745 US volunteer ombudsmen (mean age 69) in nursing homes, hypothesises about relationships between background, social psychological characteristics, in-service training, and four orientations (advocate, mediator, therapeutic supporter, and undifferentiated). Most ombudsmen identified a primary orientation, and their lives as volunteers were affected by this choice. Orientations of ombudsmen were differentiated by the resources that each brought to the task, how their skills were developed after they became volunteers, and their eventual strategies. Advocates were distinguished from others by their relative youth, formal education, in-service training, and greater hindrances. Perhaps extending traditional conceptions of gender roles, women more often practised skills as therapeutic supporters. Those without a primary orientation had the most negative experiences. (RH)

ISSN: 08904065

Dignity on the ward : advocacy with older people in hospital: a report; by Andrew Dunning, Older People's Advocacy Alliance (OPAAL) UK; Help the Aged. London: Help the Aged, 2000, 23 pp (Dignity on the ward campaign).

Advocacy can be of great benefit to older people in hospital as a means of getting and using information, being heard and making decisions, providing protection against abuse, and challenging discrimination. This report uses case studies to describe the setting up and running of advocacy schemes for older people in hospital. It outlines the barriers, problems and pitfalls facing advocacy schemes, and how such difficulties might be overcome. It provides policy, practice and research recommendations which would improve the scope and quality of advocacy in hospital. (RH)

ISBN: 090585232X

Price: £5.00

From : Help the Aged, St James's Walk, Clerkenwell Green, London EC1R 0BE.

Injustice and conflict in nursing homes: toward advocacy and exchange; by H Wayne Nelson.

Journal of Aging Studies, vol 14, no 1, March 2000, pp 39-62.

This article examines the relational dynamics and patterns of conflict exhibited in the relationship between staff and patients in nursing homes. In the framework of the social exchange theory of structural power, it explains how the asymmetrical structure of dependence and control in nursing homes eliminates the possibility of fair bargaining - normal conflict - between staff and patients. In the absence of any opportunity for reciprocal rewards and punishment, patients tend to adopt submissive influence strategies, whereas staff members tend to neglect, exploit, or abuse difficult or resistant patients. The author examines the exchange dynamics of adversarial tactics and the prevalence of third-party conflict in the nursing home, and shows that a partisan, patient-directed ally (advocate) could rebalance power and eliminate inequities in the nursing home environment. (AKM)

ISSN: 08904065

The Institute for Senior Action: training senior leaders for advocacy; by Dorothy Epstein, Amy J West, Deborah Grayson Riegel.

Journal of Gerontological Social Work, vol 33, no 4, 2000, pp 91-99.

Since 1977, the US Joint Public Affairs Committee for Older Adults (JPAC) has been educating and encouraging older people to take an active role in the public policy decisions affecting their lives. In 1994, JPAC founded the Institute for Senior Action, an advocacy leadership training course. The 10-week course integrates critical ageing policy issues with practical grassroots applications for action. The Institute also serves as a vehicle for retirees and others to become more involved in social action. (RH)

ISSN: 01634372

From : <http://www.tandfonline.com>

Interpreting the meaning of ombudsman data across states: the critical analyst-practitioner link; by Ruth Huber, Kevin Borders, F Ellen Netting (et al).

Journal of Applied Gerontology, vol 19, no 1, March 2000, pp 3-22.

The authors report data from four US states that have computerised their long-term care ombudsman databases, to explore differences in their interpretation of the data. The link is considered between those who collect and report data and those who analyse and interpret these data. (RH)

ISSN: 07334648

Most successful intervention strategies for abused older adults; by Daphne Nahmiash, Myrna Reis.

Journal of Elder Abuse & Neglect, vol 12, no 3/4, 2000, pp 53-70.

In this Canadian study of Project CARE (Community Action to Reach the Elderly), intervention plans for 83 cases with a total of 473 strategies are analysed using a qualitative content analysis method. The strategies are designed and implemented by an abuse-trained, multidisciplinary health and social service agency home care team. Each strategy is rated by the team for its acceptance or refusal by clients, and by levels of success. The most accepted and successful strategies for abused older adults are: nursing and other medical care and home-making assistance, followed by empowerment strategies e.g. information about rights and resources. Less successful are referrals to general community activities and programs. For caregiver abusers, individual supportive counselling to reduce anxiety, stress and depression, and education and training are most successful. Interventions should focus services and strategies on abusers, not just on abused older people. For abused care receivers, home-based services, help from volunteers, and support group activities can offer the necessary support out of an abuse situation. (KJ/RH)

ISSN: 08946566

From : <http://www.tandfonline.com>

Time to decide: a seminar at the Oxford Centre on Population Ageing, 21 September 1999; by Sarah Harper (Chair), Community Care Division, Nuffield Institute for Health; Oxford Centre on Population Ageing, University of Oxford; Help the Aged. London: Help the Aged, 2000, 14 pp.

"Staying in control of one's life" is a key priority for older people, coupled with dignity, choice, autonomy and the opportunity to lead an ordinary life. However, the right to autonomy and self-determination can sometimes be overridden by other people's concerns, fears and priorities. Discussions about decision-making and autonomy more usually take place in relation to those with learning disabilities, mental ill health, or cognitive impairment. This seminar focused on older people in general who may face a crisis in their lives due to illness, accident or bereavement, or because they find it progressively harder to look after themselves. The seminar discussed the legal and professional frameworks for decision-making, in circumstances where older people are competent to take their own decisions. (RH)

ISBN: 0905852281

Price: FOC

From : Help the Aged, St James's Walk, Clerkenwell Green, London EC1R 0BE.

Training and educational activities, efficacy, and worry among volunteer ombudsmen in nursing facilities; by Pat M Keith.

Educational Gerontology, vol 26, no 3, April-May 2000, pp 249-260.

Training and educational activities for volunteers are thought to benefit both the volunteers and the organisations they serve. Questionnaire data from 754 volunteer ombudsmen in nursing homes (i.e. mediators; mean age, 69) were used to test hypotheses about relationships between initial and in-service training, assessment of initial training, preferences for 8 specific educational training activities, demographic characteristics, efficacy, and worry about performing mediation tasks. A positive assessment of early training, rather than actual training, contributed directly to greater efficacy and less worry. In-service training enhanced efficacy. Most preferences for training and educational activities were not associated with well-being, but when they were, expressed needs were related to less efficacy and more worry. From the practice standpoint, one focus should be on factors that increase feelings of efficacy, a powerful resource for well-being of volunteers and ultimately for those whom they serve. (RH)

ISSN: 03601277

1999

Advocacy: a review; by Dorothy Atkinson, Joseph Rowntree Foundation - JRF. Brighton: Pavilion Publishing, on behalf of the Joseph Rowntree Foundation, 1999, 45 pp (Research into practice).

Advocacy at its simplest means "speaking up", on one's own behalf or on behalf of others. The overall purpose of this review was to look at advocacy across the board and across all user groups. In particular it aimed to:

explore recent and current developments; identify good practices; clarify strengths and weaknesses; locate gaps in provision; draw out key themes and issues; and suggest changes in policy and practice. Suggestions arising directly from the review included: a legal right to advocacy; a national advocacy network; long-term funding to support advocacy; guidelines for advocacy organisations, including codes of practice for recruitment, selection, training and supervision; recognised and accredited training in advocacy leading to a qualification; legal status for advocates; and involving users at every level. The Joseph Rowntree Foundation (JRF) has supported this project as part of its programme of research and innovative development projects, which it hopes will be of value to policy makers and practitioners. (RH)

ISBN: 1841960039

Price: £12.95

From : Pavilion Publishing (Brighton) Ltd., 8 St George's Place, Brighton, East Sussex BN1 4GB.

Decision making [on behalf of mentally incapacitated adults]: [Part 2]; by Barbara Beaton.

EAGLE Journal, vol 7, no 3, Dec 1998/Jan 1999, pp 4-7.

This is the second of two articles about making decisions on behalf of mentally incapacitated adults, and which formed the basis of a talk to the Conference organised by Legal Action entitled Community Care Law - Current Concerns, Future Issues, held in London on 7 October 1998. This article covers specific proposals, including continuing powers of attorney, appointment of managers, supervision of medical and research procedures, the new court structure, and public protection of vulnerable adults (POVA). (RH)

ISSN: 1360239X

People with learning difficulties and their access to direct payments schemes; by Joseph Rowntree Foundation - JRF. York: JRF, June 1999, 4 pp.

Findings, 649, June 1999, 4 pp.

The Community Care (Direct Payments) Act 1996 came into force on 1 April 1997. It empowers local authorities to make cash payments to people so they can purchase their own support services, instead of arranging community care services for them. Recent research has found that few people with learning difficulties know anything about direct payments. A project undertaken by Values Into Action (VIA) has set out to inform as many people with learning difficulties as possible about direct payments. A second part of the project, led by Andrew Holman, looked at the progress people have made in their attempts to gain a direct payment. A major part of the study concerned the provision and advice to self-advocacy groups. The research concludes that if people with learning difficulties are truly to have access to direct payments, then they need to be involved at the outset. "Funding freedom 2000: people with learning difficulties using direct payments" by Andrew Holman and Catherine Bewley is the detailed report containing this and other related research, and is published by VIA. (RH)

ISSN: 09583084

From : JRF, The Homestead, 40 Water End, York YO30 6WP.

Rights focussed advocacy and abuse prevention: paper ... presented ... at the Aged Care Australian and the Australian Association of Gerontology National Conference titled "The Age of Celebration and Expectation", Tuesday 7th September 1999, Sydney; by David Cripps, Abuse Prevention Program, Aged Rights Advocacy Service (ARAS), Adelaide. Adelaide: Aged Rights Advocacy Service, Abuse Prevention Program, 1999, 5 pp.

Paper written and presented by author at the Aged Care Australian and the Australian Association of Gerontology national conference titled 'The Age of Celebration and Expectation', Tuesday 7th September 1999, Sydney. The paper is based on the work carried out by the Abuse Prevention Program of the Aged Rights Advocacy Service in Adelaide, Australia. The Program conducted a retrospective analysis of the first 100 cases where the outcome was known, in order to assess what was effective in enabling the older person to stop abuse and why. The author argues that the rights advocacy model that is used is effective in enabling South Australians to overcome the abuse they have experienced. (KJ/RH)

From : Aged Rights Advocacy Service, Abuse Prevention Program, 45 Flinders Street, Adelaide 5000, Australia.

Speaking up: advocacy for people with dementia; by Claire Goodchild.

Journal of Dementia Care, vol 7, no 6, November/Dec 1999, pp 19-20.

Advocacy can help older people with dementia to have more control over their lives, to exercise choice, and represent their own interests. The author describes the Westminster Advocacy Service's 2-year pilot project (funded by Bridge House Estates Trust). The project has been independently evaluated and guidelines for further work in this area have been produced. (RH)

ISSN: 13518372

1998

Advocacy, empowerment and older people; by Andrew Dunning. London: Centre for Policy on Ageing, 1998, pp 200-221.

IN: The social policy of old age: moving into the 21st century; edited by Miriam Bernard and Judith Phillips, 1998, pp 200-221.

Advocacy generally involves people making a case for themselves and advancing their own interests, or representing others and supporting them to secure and exercise their rights individually or collectively. The concept is particularly important where people are disadvantaged or discriminated against, and are at risk of mistreatment or marginalisation. This chapter outlines the factors influencing the need for advocacy, and describes its various forms: professional advocacy, lay advocacy, and self advocacy. The author explores the use of advocacy as a process of empowerment, leading on to highlight consumerism and citizenship as key approaches to advocacy with older people.

ISBN: 1901097005

Price: £14.00

From : Central Books, 50 Freshwater Road, Chadwell Heath, Dagenham, RM8 1RX.

Ageing in the inner city: advocacy for the voiceless; by Brenda J Hill, Margaret L Basser.

Australasian Journal on Ageing, vol 17, no 1, February 1998, pp 16-17.

This short article reports on the South Eastern Sydney Area Health Promotion Service's Healthy Older People Program, which has begun a long-term multifaceted approach to improving the quality of life of disadvantaged older people in insecure accommodation. This work is based on qualitative research undertaken during needs assessment for a health promotion programme for older people, which takes account of their views and respects their autonomy. Advocacy for policy and environmental change is the principal strategy, working with local, State and Federal governments. The project is also examining issues such as pedestrian safety, access to fresh food, affordable housing, and health and welfare services. (RH)

ISSN: 07264240

Anyone for advocacy?; by Catherine Powloski, Nizam Chowdhury.

Working with Older People, vol 2, no 2, April 1998, pp 20-23.

An advocacy scheme, involving project workers and volunteers in one of the most deprived inner-city areas of the country, is bringing benefits to many older people from various ethnic backgrounds. Two project workers describe why the Age Concern Tower Hamlets Advocacy Project was launched, and how it has won the co-operation of professionals in health and social services. (RH)

ISSN: 13663666

Citizen Advocacy Information and Training (CAIT) [information pack]; by Citizen Advocacy Information and Training (CAIT). London: Citizen Advocacy Information and Training, 1998, various (information pack).

Citizen advocacy's objective is to encourage people to become more involved with the welfare of vulnerable people who live in the community. This information pack provides a brief introduction to citizen advocacy. (RH)

From : CAIT, 164 Lee Valley Technopark, Ashley Road, London N17 9LN.

Forgotten people: positive approaches to dementia care; by Jonathan Parker, Bridget Penhale. Aldershot: Ashgate, 1998, 237 pp.

The purpose of this book, aimed at those involved in social work for people with dementia and their carers, is to promote social work practice that sees the person first and starts from a clear value base of respect. Part one looks at the context and background to dementia care, focusing on traditional and developing models of dementia, the development of community care and the characteristics of care management, and the knowledge, skills and values needed in dementia care. In part two, a range of methods and approaches for social work practice with dementia clients are presented, including the following: crisis intervention; cognitive-behavioural approaches; task-centred practice; counselling and psychotherapy; reminiscence and life review; working in groups; dementia and elder abuse; networks and community interventions; and empowerment and advocacy. Case studies from practice situations are used to highlight the usefulness and drawbacks of the various interventions. The book also includes interactive learning in the form of activities and reflections that can be undertaken individually or in small groups. (AKM)

ISBN: 185742414X

Price: £37.50

From : Ashgate Publishing Ltd., Gower House, Croft Road, Aldershot, Hants GU11 3HR.

From isolation to inclusion: a survey into the needs of older people, people living in rural areas, people receiving Direct Payments and how citizen advocacy can meet those needs; by James Edge, Frances Presley, Citizen Advocacy Information and Training (CAIT). London: Citizen Advocacy Information and Training (CAIT), 1998, 24 pp.

Citizen advocacy provides support and representation for disadvantaged people, by encouraging others in their neighbourhood to become advocates. The main objectives of this survey were to research the needs of older people, and how citizen advocacy could best meet those needs. The survey also asked questions about two other groups who had not received sufficient attention: people living in rural areas, and those in receipt of Direct Payments. The problems of those living in rural areas are exacerbated by lack of provision of voluntary and statutory services. The results of the three strands of the survey will be used to evaluate and redesign CAIT's training and information programme, so that it can support citizen advocacy work with people in these groups more effectively. The results will also be used to promote the importance of independent advocacy with statutory service providers. (RH)

From : Citizen Advocacy Information and Training, 164 Lee Valley Technopark, Ashley Road, Tottenham Hale, London N17 9LN.

Mediation and managed care; by Nancy Neveloff Dubler.

Journal of the American Geriatrics Society, vol 46, no 3, March 1998, pp 359-364.

Managed care in the US has not only intensified existing conflicts between patient and provider, it has, by its very nature, changed the shape and scope of the healthcare enterprise and introduced an entirely set of disputes. This article argues that, because of its cost containment origins and orientation, managed care increases the likelihood that misunderstandings, disagreements and disputes will develop into full-blown conflicts. If managed care is to succeed financially and operate with integrity, it must develop techniques for managing the increasing conflicts that inevitably arise between and among organisations, physicians and patients. The patient's voice needs to be strengthened within the new complex decision-making, review, and appeals procedures. Mediation is the most appropriate method of dispute resolution, as it balances the disparities of power, and refocuses the interests of various parties. Using bioethics consultation as a model for dispute mediation provides a set of principles and guideline tasks that can be applied effectively to managed care. The aim for all parties should focus on the common goal of ensuring quality health care. (RH)

ISSN: 00028614

Older people in control: accounts of projects run by older people; by Les Bright, Jackie Hollands, Jef Smith, Counsel and Care. London: Counsel and Care, 1998, 47 pp.

This report looks at six projects funded by the Nuffield Foundation's Phoenix Fund in various locations in the UK, in which older people play key roles in their running and development. The projects described are: the Sefton Pensioners Advocacy Centre (SPAC); the Hackney Pensioners Press, a community newspaper; a computer network based in Bath, under the auspices of the University of the Third Age (U3A); an oral history project in Liverpool - the Women's History for School Children; the Mobile Resource Unit (MRU) providing footcare for older people in the Lake District; and the Sheffield Lunch Clubs Group (SLCG). The older people's expertise and learning capacity in their work on these projects; the cost effectiveness and voluntary aspects; and the benefits to and control by participants are discussed. Older people have been given a sense of empowerment, and the aim of publicising their work is to encourage similar projects to be undertaken. (RH)

ISBN: 1898092273

Price: £6.00

From : Counsel and Care, Twyman House, 16 Bonny Street, London NW1 9PG.

Preparing participants for intergenerational interaction: training for success: Part II; by Melissa O Hawkins, Francis A McGuire, Kenneth F Backman (eds).

Activities, Adaptation & Aging, vol 23, no 2, 1998, pp 69-134.

This issue is the second of three parts of "Preparing participants for intergenerational interaction: training for success". The purposes of this three-part manual are to provide a brief introduction to intergenerational programmes and to present a manual designed to assist in training volunteers. This second part puts the case for sensitivity and knowing one's audience, particularly with regard to the "generation gap". Chapters focus on understanding and mentoring at-risk youth; ageing sensitivity; and racial and ethnic understanding. (RH)

ISSN: 01924788

From : <http://www.tandfonline.com>

Project CARE: a model for establishing neighborhood centers to increase access to services by low income minority elders; by Royda Crose, Mark Minear.

Journal of Gerontological Social Work, vol 30, nos 3/4, 1998, pp 73-82.

As a method to help low-income, frail older adults access services in the community, Project CARE (Community Action to Reach the Elderly) was developed as part of the US National Eldercare Campaign of the Administration on Aging. A description of the development, implementation and evaluation of the three year project is provided. The developmental process proceeded in three distinct phases, culminating in operation of two advocacy centres in African American neighbourhoods. Evaluation of the process and the outcomes was conducted through interviews with the project's administrators, volunteers and clients. Several themes emerged from these interviews which illustrate the success of the project. Project CARE serves as a model for other communities which have difficulties reaching frail older people in minority neighbourhoods. (RH)

ISSN: 01634372

From : <http://www.tandfonline.com>

Training in aged care advocacy for primary health care workers in central Australia: an evaluation; by Komla Tsey, Sue Morrish, Alison Lucas (et al).

Australasian Journal on Ageing, vol 17, no 4, November 1998, pp 167-171.

Concern felt by advocates for frail, aged Aboriginal people in central Australia that residents are in nursing homes against their wishes led to a project to promote the process of obtaining informed consent. A Trainer's Manual was developed for workshops to help health care providers - especially remote area nurses - learn about this process and about respecting the rights of older people. This paper reports the findings of an evaluation of the Trainer's Manual. Although the manual challenged the basis of decision-making of health professionals looking after the care needs of older Aboriginal people in remote areas, it was not entirely successful with all the target audience partly because a perceived lack of Aboriginal input at many levels of the project and partly, too, because of a lack of input to the process by remote area nurses. (AKM)

ISSN: 07264240

1997

Advocacy; by Centre for Policy on Ageing - CPA. London: Centre for Policy on Ageing, October 1997, 2 pp (CPA briefings, no 1).

This briefing summarises two CPA (Centre for Policy on Ageing) projects on the theme of advocacy. First, Citizen advocacy with older people, by Andrew Dunning (published by CPA, 1995) established a code of practice, highlighting the main legal, ethical and practical issues. More recently, the CPA has been working in collaboration with Age Action Ireland and DaneAge Denmark, part funded by the European Commission, on research and practice on policies and provision for advocacy with older people across Europe.

Price: FOC

From : CPA, 19-23 Ironmonger Row, London EC1V 3QP.

Advocacy in Africa; by John Mensah, HelpAge Ghana.: HelpAge International, November 1997, pp 19-20.

Ageways, 46, November 1997, pp 19-20.

HelpAge Ghana (HAG) is the only agency in Ghana that seeks to promote the welfare of older people, especially those who are poor and disadvantaged. To ensure that older people's needs are taken into account at community and national levels, HAG has incorporated advocacy targets in its development plan. This paper formed the basis of a session about advocacy at the HelpAge International Regional Meeting in Uganda in September 1997. (RH)

ISSN: 14696223

Choices in empowerment: the advocacy needs of older persons; by Julie Lunt, Choices Advocacy. Southampton: Choices Advocacy, 1997, 16 pp.

This report presents the findings from a piece of research, funded by Social Services, Southampton area, into the advocacy needs of older people in Southampton. Four groups of people were interviewed: older people, carers, staff working with older people, and other advocacy services. All groups were asked to describe events or experiences which made them, or another older person, feel disempowered. In addition they were asked about their views on the desired skills and personal qualities of advocates. Findings showed that many older people found it difficult to ask for help or to speak out, especially in cases related to personal care and giving up their home. Different types of advocacy would be needed to meet the varied needs of older people, including crisis advocacy (short term advocacy) and self-advocacy. The personal characteristics of advocates cited to be important included understanding, patience and tolerance. The report concludes with recommendations

regarding the training of advocates, the funding of advocacy schemes, and the need for advocacy schemes to be independent of services.

From : Choices Advocacy, Portman House, 53 Millbrook Road East, Southampton SO15 1HN.

Elder abuse and mediation: exploratory studies in America, Britain and Europe; by Yvonne Joan Craig. Aldershot: Avebury, 1997, 218 pp.

The first part of this book examines theories on mediation and elder abuse, and how they have come together to contribute in preventing elder abuse. Part 2 focuses on American elder care, in particular Long Term Care Ombudsmen (LTCO) who use mediation as well as advocacy and other skills in their work. The third part describes the development of the British Elder Mediation Project and its acronym, EMP for EMPOWERment; an elder abuse project in Oslo; and considers relevant current British social experience and policy issues in the context of European developments.

ISBN: 1859726151

Price: £35.00

From : Avebury, Ashgate Publishing Limited, Gower House, Croft Road, Aldershot, Hants. GU11 3HR.

Empowerment in action: the story of the Empowerment Project; by Justina Murray, Age Concern Scotland; Poverty Alliance; Greater Glasgow Health Board. Edinburgh: Age Concern Scotland, 1997, 42 pp.

This report tells the story of the Empowerment Project, funded by Charity Projects to work with patients, relatives and nursing staff in a continuing care ward of a long stay hospital in Glasgow from November 1992 until February 1995. The Project's story is told by exploring both theory and practice, and reflects different aspects of empowerment. The Project's roots, motives, context, culture, and early influences are critically examined. Practical work is discussed in relation to: actors and roles; focus of practice; critical points in development; key issues, themes and tensions; barriers and challenges; and the impact of empowerment. Conceptual tensions are explored by examining language, preconditions of empowerment, aims, form, transferring empowerment, evidence, and dynamics of empowerment. The report's conclusion suggests that the Project's vision was unrealisable within the cultural and organisational constraints of long term institutional care and partnership working, and led to frustration and the feeling of an opportunity lost.

ISBN: 1874399301

Price: £6.00 (2 companion volumes)

From : Publications Unit, Age Concern Scotland, Leonard Small House, 113 Rose Street, Edinburgh EH2 3DT.

Empowerment in action: practising empowerment; by Lorna Ahlquist, Age Concern Scotland; Poverty Alliance; Greater Glasgow Health Board. Edinburgh: Age Concern Scotland, 1997, 31 pp.

The Empowerment Project was set up by Strathclyde Poverty Alliance (now the Poverty Alliance), and ran from November 1992 to February 1995. The Project's aim was to empower frail older people in continuing care wards of long stay hospitals, and to consider problems of institutionalisation. This is a manual based on the experiences of the Project. It aims to give the reader an understanding of the process of empowerment and ways forward. The guidelines given are intended as a framework, to be related to a specific context and type of empowerment work. They cover definitions, explanations, examples, models, principles, check lists, and ground rules.

ISBN: 1874399298

Price: £6.00 (2 companion volumes)

From : Publications Unit, Age Concern Scotland, Leonard Small House, 113 Rose Street, Edinburgh EH2 3DT.

Enabling people to be themselves in residential care; by Joy Bounds, Helen Hepburn.

Elders: the Journal of Care and Practice, vol 5, no 4, March 1997, pp 5-17.

There are particular challenges for staff in residential homes if they wish to empower people, as there is a natural tendency for any large establishment to be run for its staff rather its residents. This article is an excerpt from the authors' new book 'Empowerment and older people' (PEPAR Publications). It examines disempowering factors such as institutionalisation; and empowerment strategies: giving information; finding time to talk to or help residents; seeing the whole person; offering choices; sharing power; and making it easy to complain.

ISSN: 09646914

Family advocacy roles and highly dependent residents in nursing homes; by C Tilse.

Australian Journal on Ageing, vol 16, no 1, 1997, pp 20-23.

A developing critique has questioned the practical utility of user rights policy initiatives for highly dependent residents of nursing homes in Australia. This paper seeks to extend this critique to the advocacy roles that families have been accorded within policy initiatives. The discussion is based on qualitative research study of

family participation in six aged care units. The paper argues that the capacity of families to act as advocates for highly dependent nursing home residents is limited by their weak position within the organisations, and the complexity of their relations with staff. It questions both the applicability and the appropriateness of rights models which take insufficient account of the structure and meaning of care.

ISSN: 07264240

Intergenerational mentoring: a viable strategy for meeting the needs of vulnerable youth; by Anita M Rogers, Andrea S Taylor.

Journal of Gerontological Social Work, vol 28, no 1/2, 1997, pp 125-139.

Over 14 million youth in the US are growing up at risk of dropping out of school, abusing drugs, becoming involved in criminal activities, or exhibiting other problem behaviours. Older Americans make up the fastest growing segment of the population, and many seek opportunities for continuing to lead useful lives, for example as mentors who act as advocates or role models. This article reports on two programmes run by the Center for Intergenerational Learning at Temple University: Linking Lifetimes, a national programme using older people as mentors to at-risk middle school students and young offenders in nine cities; and Across Ages, a school-based Philadelphia project that matched older mentors with middle school students. It considers reasons why older people are mentors to youth, project goals, what makes a successful relationship, and the outcomes for youth. It concludes that mentoring must be viewed as part of a broad social strategy recognising the importance of adult relationships in young people's lives. Specifically, older mentors, because they have the time, patience and experience, are in an ideal position to be a valuable support to youth.

ISSN: 01634372

From : <http://www.tandfonline.com>

Nursing home reform: fait accompli or frontier?; by Iris C Freeman.

Journal of Aging & Social Policy, vol 9, no 2, 1997, pp 7-18.

The key events of nursing home reform in the United States (US) between 1986 and 1996 are summarised, and successful nursing home advocacy initiatives are examined in this commentary. The current efforts to slow or dismantle nursing home regulation is also discussed, as is the changing political imagery of nursing home residents and their advocates. (AKM)

ISSN: 08959420

From : <http://www.tandfonline.com>

A personal advocacy model for serving older adults; by Christine A Hyduk, David Moxley.

Journal of Gerontological Social Work, vol 28, no 4, 1997, pp 75-90.

The feasibility of enriching traditional advocacy to further enhance empowerment of older people is examined in this paper. The proposed process provides the community-based older person with an opportunity to actively participate in overcoming environmental barriers and maintaining their independence. Personal advocacy is defined and linked to the empowerment perspective. Further discussion includes the helping conditions of personal advocacy and the steps in the process for helping older adults. A proposed programme for older adults using this strategy is then presented. Implications for gerontological social work practice are also identified. (AKM)

ISSN: 01634372

From : <http://www.tandfonline.com>

1996

Advocacy and dementia; by Jan Killeen, Alzheimer Scotland - Action on Dementia. Edinburgh: Alzheimer Scotland - Action on Dementia, 1996, 65 pp.

Examines why people with dementia need advocacy, and explores the different ways in which advocacy may be provided, and raises issues for public policy.

ISBN: 0948897244

Price: £5.00

From : Alzheimer Scotland - Action on Dementia, 8 Hill Street, Edinburgh EH2 3JZ.

Advocacy efforts on behalf of the elderly in long-term care facilities; by Jordan I Kosberg, Juanita L Garcia, Iryna M Dulka.: International Institute on Ageing (United Nations - Malta), May 1996, pp 2-5.

BOLD, vol 6, no 3, May 1996, pp 2-5.

Discusses the need for advocacy for older people in long-term care facilities in all countries, and looks at examples of advocacy, including the Ombudsman programme in the United States, private advocacy organisations, and resident and consumer councils.

ISSN: 10165177

Advocacy in later life: an ethical analysis?; by Kevin David Kendrick.

Health Care in Later Life, vol 1, no 4, November 1996, pp 253-259.

Advocacy has become a central theme in the language and practice of contemporary health care. Principally, the key role of a patient advocate is to represent, safeguard and promote the interests of patients during all aspects of care delivery. Traditionally, the need for advocacy is closely linked to respect for, and the preservation of, patient autonomy. On first reading, such themes seem well focused and beneficent; however, closer analysis reveals a more insidious agenda that must be addressed. This paper critically explores and deconstructs some of the philosophical and motivational themes that have given focus and direction to the existence of advocacy as a potent force in the delivery of health care to older people. It argues that the very need for advocacy indicates a health care system that is based on power and paternalism. Further, it maintains that placing advocacy at the centre of health care's professional creed promotes a theme that threatens the very essence of patient self-governance.

ISSN: 13587390

Advocating for the rights of vulnerable nursing home residents: creative strategies; by Diane A Menio.

Journal of Elder Abuse & Neglect, vol 8, no 3, 1996, pp 59-72.

This article describes how advocates continued to work to effect change after the criminal prosecution of one nursing home corporation, which was found guilty of involuntary manslaughter of two nursing home residents. The impact was felt not only by that corporation but also by area nursing home providers, policy makers, and regulators in long-term care. (AKM)

ISSN: 08946566

From : <http://www.tandfonline.com>

Closing a home for dementia sufferers: Birmingham City Council and Bourn House: a report by The Friends of Bourn House; by Friends of Bourn House; Birmingham Citizen Advocacy. Birmingham: Birmingham Citizen Advocacy, 1996, 22 pp.

Account of a campaign to save a residential home for people with dementia from closure, following cuts in Birmingham City Council's Social Services budget.

Price: £1.30 (inc P&P)

From : Dave Stamp, Birmingham Citizen Advocacy, 249 Ladypool Road, Sparkbrook, Birmingham B12 8LF.

Educating health and social service professionals in the detection and management of mistreated nursing home residents; by Elizabeth Capezuti, Eugenia L Siegler.

Journal of Elder Abuse & Neglect, vol 8, no 3, 1996, pp 73-86.

A paucity of literature and educational materials addresses the mistreatment of nursing home residents. After serving as an expert witness in the successful criminal prosecution of a nursing home corporation charged with involuntary manslaughter of two nursing home residents, the authors recognised the need to improve recognition and prevention of institutional mistreatment. This article describes their involvement in post-trial advocacy efforts to improve the quality of care of nursing home residents through community education efforts. (AKM)

ISSN: 08946566

From : <http://www.tandfonline.com>

Elder Mediation Project; by Yvonne Craig.

Elders: the Journal of Care and Practice, vol 5, no 2, July 1996, pp 16-24.

Describes case histories from the Elder Mediation Project, which aims to help older people to deal with difficulties and disputes.

ISSN: 09646914

A guide to counselling and support services for older people; by Counsel and Care. London: Counsel and Care, September 1996, 9 pp (Fact Sheet No 21).

This fact sheet aims to explain what counselling is and how to arrange it.

Price: FOC (SAE)

From : Counsel and Care, 16 Bonny Street, London NW1 9PG.

Independent living: the right to choose; by Linda Ward, Peter Kinsella, Ken Simmons, Mandy Neville (et al).

Inside (Community Care, no 1109), 29 February - 6 March 1996, 8 pp.

Explores issues relating to people with learning difficulties and independent living. Includes sections on advocacy, collective action, supported living and supported employment.

ISSN: 03075508

Patient decision-making: medical ethics and mediation; by Yvonne J Craig.

Journal of Medical Ethics, vol 22, no 3, June 1996, pp 164-167.

Considers the importance of patient participation in decision making, and explores the way in which American medical ethics is viewing the process of mediation as a practical problem-solving approach to the tensions of patient-doctor relationships.

ISSN: 03066800

Setting the stage: the advocates' struggle to address gross neglect in Philadelphia nursing homes; by Alison E Hirschel.

Journal of Elder Abuse & Neglect, vol 8, no 3, 1996, pp 5-20.

Advocates for nursing home residents in Philadelphia began discovering gross neglect in facilities owned or managed by the largest nursing home corporation in the area in 1989. This paper describes two of the cases and how the corporation's policies promoted consistently substandard care. The paper then discusses the advocates' frustrating efforts to ensure the appropriate regulatory agencies addressed the on-going neglect in these facilities and their eventual decision, on behalf of their clients, to turn to the criminal justice system for assistance. (AKM)

ISSN: 08946566

From : <http://www.tandfonline.com>

Speaking out for advocacy; by Jan Killeen.

Journal of Dementia Care, vol 4, no 3, May/June 1996, pp 22-24.

Looks at the principles of advocacy in relation to community care, and considers the benefits of advocacy for people with dementia.

ISSN: 13518372

Theorising empowerment: individual power and community care; by Richard Servian. Bristol: Policy Press, 1996, 77 pp.

Explores individual perceptions of power. By investigating the meaning of empowerment, the author argues that community care is another policy which has failed to help empower vulnerable people.

ISBN: 1861340060

Price: £11.95

From : The Policy Press, University of Bristol, Rodney Lodge, Grange Road, Bristol BS8 4EA.