Centre for Policy on Ageing
Information Service

Selected Readings

Older People from Black and minority ethnic groups

July 2017
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The problem of how to conceptualise elder mistreatment goes back several decades, and is especially important for ethnic minority populations, who may have perspectives that differ from the dominant society. This community-based participatory research study, which examined perceptions of mistreatment by family among 100 urban and rural older American Indians, permits a rare glimpse into how Native elders themselves understand this issue. Here, good treatment was conceptualised in terms of being taken care of, having one's needs met, and being respected. The authors found relatively high standards for how elders should be treated, such as the belief that an elder's needs should be anticipated and met without the elder needing to ask. This finding was despite widespread accounts of the mistreatment of elders within the community, largely through various acts of financial exploitation and neglect. Substance abuse and culture loss were blamed for much of the elder mistreatment that occurred in contemporary Native communities. (RH)
ISSN: 08946566
From: http://www.tandfonline.com


People from South Asian backgrounds present to dementia services relatively late, often responding to crises. The authors aimed to devise and validate a theory of planned behaviour questionnaire to measure attitudes that predict medical help-seeking for UK-based South Asian people, to assess the effectiveness of future interventions promoting earlier help-seeking. Focus groups were used to establish the content validity of culturally relevant questionnaire items, then participants were asked to complete the questionnaire. The authors analysed reliability and validity and established the concurrent validity of questionnaire attitudes through correlation with willingness to seek help from a doctor for memory problems. They also correlated the scale with knowledge of dementia. The strongest predictor of willingness to seek help was perceived social pressure from significant others around help-seeking; these attitudes were associated with beliefs about the views of family members and embarrassment around help-seeking. Willingness to seek help was also strongly associated with attitudes about the benefits of seeing a doctor for memory problems, attitudes that were related to specific beliefs about what doctors can do to help. Attitudes in the questionnaire predicted 77% of variance in willingness to seek help, but no relationship was found with dementia knowledge. The authors present the Attitudes of People from Ethnic Minorities to Help-Seeking for Dementia (APEND) questionnaire, a valid and reliable measure of attitudes that influence help-seeking for dementia in people from South Asian backgrounds, which could assess the impact of intervention studies. It is suggested that interventions target attitudes specified here, rather than dementia knowledge. (JL)
ISSN: 08856230
From: www.orangejournal.org


This study examined the impact of everyday discrimination (both racial and non-racial) on the mental health of older African Americans. This analysis was based on the older African American subsample of the National Survey of American Life. The authors examined the associations between everyday discrimination and both general distress and psychiatric disorders as measured by the Diagnostic and Statistical Manual of Mental Disorders (DSM-IV). Six dependent variables were examined: lifetime mood disorders, lifetime anxiety disorders, any lifetime disorder, number of lifetime disorders, depressive symptoms as measured by the 12-item Center for Epidemiological Scale of Depression (CES-D), and serious psychological distress as measured by the Kessler 6 (K6). Overall racial and non-racial everyday discrimination were consistently associated with worse mental health for older African Americans. Older African Americans who experienced higher levels of overall everyday discrimination had higher odds of any psychiatric disorder, any lifetime mood disorder, any lifetime anxiety disorder and more lifetime DSM-IV disorders, in addition to elevated levels of depressive symptoms and serious psychological distress. These findings were similar for both racial discrimination and non-racial discrimination. This study documents the harmful association of not only racial discrimination, but also non-racial (and overall) discrimination with the mental health of older African Americans. Specifically,


Despite the rapidly ageing population and a predicted sevenfold increase in the prevalence of dementia in minority ethnic communities, people from these communities remain under-represented in specialist dementia services. Leventhal's Model of Self-Regulation suggests perceptions of illness facilitate help-seeking behaviours such as the use of services. This scoping exercise uses the model to explore perceptions of dementia in British Indian, African and Caribbean, and East and Central European communities in the United Kingdom. Between August 2013 and April 2014, culturally specific dementia awareness roadshows were attended by people living with dementia, carers and members of the public. During the roadshows, 62 British Indian, 50 African and Caribbean, and 63 East and Central European attendees participated in discussion groups and a dementia knowledge quiz. Thematic and framework analysis were conducted on the discussion group data. Three main themes are presented: perceptions of dementia, awareness of dementia in the wider family and community, and awareness and use of services. The findings suggest that although groups attributed a biological basis for memory loss, a number of misconceptions prevailed regarding the cause of dementia. Groups also made use of religion, as opposed to medical healthcare services, as a form of personal and treatment control. Seeking help from healthcare services was hindered by lack of awareness of services, and culturally specific barriers such as language. The findings have a number of implications for policy and practice, including the development of public health interventions and the need to focus further on reducing barriers to accessing services. (RH)

ISSN: 09660410


As Chinese immigrants in the United Kingdom age, they experience an increasing need to access health and care services. However, it has been reported that older Chinese immigrants have difficulties in accessing these services. This study explored the experiences of this population in using health and care services and the strategies that they adopted to address their difficulties. A grounded theory method with a two-staged research design was used. Stage 1 explored the participants’ experiences of ageing and use of health and social care services through focus group interviews. Stage 2 investigated the strategies individuals used to support access to and use of services through individual interviews. Forty-four older Chinese people and 15 supporters participated in interviews during August 2011 and May 2013. These older Chinese immigrants were challenged in knowing about and in accessing services. Their difficulties were attributed to language barriers, lack of information and instrumental support, and emotional and cultural issues regarding use of health and care services. Their supporters facilitated access to services and acted as a bridge between the service and the user; therefore, they were given the title 'Bridge People'. Bridge People have different backgrounds: family and friends, public sector workers and staff from community-based Chinese organisations. The defining attributes of these supporters were: bilinguality, bicultural, multifunctionality and accessibility. There is no charge for this support; and the relationship between the Bridge Person and recipient involves trust and influence over decisions regarding use of health and care services. Bridge People should be recognised and identified by health, social care and housing services to promote engagement and use of services by older immigrant Chinese people. (RH)

ISSN: 09660410

American Indian/Alaska native elders: a growing demographic that is changing how we view aging; by Jordan P Lewis.: Taylor and Francis, May-June 2016, pp 277-280.


Today, American Indian and Alaska native (AIAN) Elders are more actively engaged in their families and communities, encouraging the development of intergenerational programmes, language and cultural revitalisation, being stewards in research conducted in their communities, as well passing on their knowledge and experiences on how to live as healthy Native people. Elders have traditionally been quiet and observant of
their environment. However, the current and future cohorts of Elders are advocates, leaders, and culture bearers for their families and communities, and they are now in positions of leadership. Western society acknowledges the value of traditional knowledge: and AIAN Elders are viewed as exemplars of healthy ageing, and their lessons and experiences can be attributed to our own lives. This commentary highlights the paradigm shift in how society views older adults, specifically AIAN Elders and their role in health and well-being. It is one of four articles in this issue of Journal of Gerontological Social Work which focus on indigenous Elders. (RH)
ISSN: 01634372
From: http://www.tandfonline.com

Following service user requests, a culturally adopted version of Cognitive Stimulation Therapy (CST, A L Spector et al, 2001) was delivered in Punjabi at Slough Memory Clinic between May and August 2014. As far as the authors know, this was the first time CST had been delivered in a non-English language within a UK memory clinic (S Sharma, 2014). In a live, symbiotic manner, Punjabi group members led the adaptation process of the CST programme to suit their cultural requirements. This article highlights the importance of service user involvement in both the planning and adaptation stages of Punjabi CST. (RH)
ISSN: 20528914
From: http://www.bps.org.uk/newtworks-and-communities/member-microsite/dcp-faculty-psychology-older-people-fpop

Communities can't be left to 'look after their own'; by David Truswell.: Hawker Publications, November-December 2016, pp 26-28.
Black and minority ethnic (BAME) families are known to play a key role in providing social support and care for their older relatives: they 'look after their own'. There is evidence, though, that there are higher rates of vascular dementia and early onset dementia in this population, compared with UK White people. The author and colleagues describe how the organisation Culture Dementia UK works to raise awareness about dementia in the Afro-Caribbean and other UK minority ethnic communities, and to improve support through partnership working. (RH)
ISSN: 13518372
From: www.careinfo.org

Dementia among gypsies and travellers; by Mary Tilki.: Hawker Publications, July/August 2016, pp 12-14.
Journal of Dementia Care, vol 24, no 4, July/August 2016, pp 12-14.
This is the first of two articles looking at the impact of dementia on gypsies and travellers. It looks at the difficulties and challenges for services, which include: a shortage of sufficient, decent traveller sites; a culture of self-reliance; negative experience of trying to obtain social care; and barriers to access to health and social care services in general for this group. (RH)
ISSN: 13518372
From: www.careinfo.org

The experiences of Indian migrant care home staff working with people with dementia: a pilot study exploring cultural perspectives; by Brandon Ow Yong, Jill Manthorpe.: Emerald, 2016, pp 3-13.
Little is known about migrant Indian care workers working in long-term care facilities for people with dementia in England. In the light of political interest in immigration to the UK and continued staff shortages in parts of the social care sector, this paper aims to remedy such lack of information. This pilot study investigated the experiences of workplace acculturation among 12 migrant Indian care workers who were employed in English care homes. Qualitative face-to-face interviews were conducted in 2013. Analysis of the interviews was conducted using principles of interpretative phenomenological analysis. Five themes emerged from the analysis along an acculturation timeline. First, during the first six months of their employment, the migrant care workers recalled feeling vulnerable, seemingly marked by a sense of insecurity and an overwhelming state of cognitive burden within an unfamiliar cultural context. Second, simultaneously, the migrants felt perturbed about their new role as direct care workers. Third, few had been able to draw on their networks of friends and relatives to build up knowledge of their new work environments before starting care home employment. Fourth, two years into the work, although they reported feeling better adapted, psychological and socio-cultural adjustments were still thought to be needed. Fifth, most participants retained their ambition to be recognised as a qualified nurse in the UK, and to pursue a nursing career outside the social care sector. As this is a pilot study in which 12 migrant
Indian care home workers were interviewed, further interviews might provide a greater range of views and experiences. The care homes that participated in this research were in the London region, where staff shortages are common in dementia services such as care homes. The findings suggest a need for employers and human resource managers to respond to the specific needs of Indian and other migrants working with older people resident in care homes. Such responses should reflect the timeline of their acculturation; and employers need also to acknowledge and address aspirations to move on to NHS work. To the best of the authors’ knowledge, this study is unique in considering Indian care workers specifically as a substantial part of the migrant care workforce in the UK. It offers information about their perceptions, and suggests practical human response and managerial initiatives. (RH)

From: www.emeraldgrouppublishing.com/wwop.htm

Haudenosaunee grandmothers caring for their grandchildren: the process of assuming the caregiving role; by Lori Hill.: Taylor and Francis, May-June 2016, pp 281-295.
This grounded theory study aims to understand the processes, motivations and reasons for Aboriginal grandmothers in Canada assuming the full-time caregiving role for their grandchildren. Fifteen Haudenosaunee grandmothers who were from the Six Nations community (an area some 25km southwest of Hamilton, Ontario) participated in this study. The results indicate that a series of complex factors, circumstances and processes contributed to them caring for their grandchildren. Of particular significance is that, prior to assuming their full-time caregiving roles, they had intermittently cared for their grandchildren as a means of preventing family breakdown. Many of them were accustomed to this type of care arrangement, as over half of the grandmothers had been cared for by their grandmothers or great-grandmothers. Ultimately, they cared for their grandchildren as a means of “keeping the state's hands off” their grandchildren and avoiding child welfare involvement. Furthermore, the women in this study served important, vital roles for healing in Aboriginal families and communities. This is one of four articles in this issue of Journal of Gerontological Social Work which focus on indigenous Elders. (RH)

From: http://www.tandfonline.com

The health of older Aboriginal and Torres Strait Islander peoples; by Dina LoGiudice.: Wiley, June 2016, pp 82-85.
The health of Aboriginal Australians is poorer than that of all other Indigenous cultures in developed nations, and recent studies suggest high rates of dementia and other conditions that are common in old age. This has implications for health promotion, provision of services and planning for older age in these communities. This article provides an overview on the health of older Aboriginal Australians. (JL)

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

Indigenous peoples around the world endure health and social disparities. In the United States, such disparities are typically ameliorated through conventional care services and organisations. This ethnographic multi-site study was conducted over 12 months of fieldwork across urban, rural and remote village sites in Alaska, to examine points of tension that characterise culturally pluralistic care services in the United States, specifically Alaska, within context of Indigenous colonial histories. This work incorporates relational and participatory action research principles with Alaska Native Elders. Ethnographic evidence was collected through multiple methods, including field notes, documents and interviews, with ethnographic analysis involving atlas.ti. Alaska Native Elders describe salient points of tension that characterise Alaska’s conventional care services through the following insights: generational curses - a pain; prejudice on both sides - wounded; and value-systems clash - fighting. This article concludes with discussion about collective anxieties and implications for care services. This is one of four articles in this issue of Journal of Gerontological Social Work which focus on indigenous Elders. (RH)

From: http://www.tandfonline.com

Health and Social Care in the Community, vol 24, no 6, November 2016, pp 769-778.

In the UK, stroke is the third most common cause of death for women, and the incidence in African Caribbean women is higher than that in the general population. Stroke burden has major consequences for the physical, mental and social health of African Caribbean women. In order to adjust to life after stroke, individuals affected employ a range of strategies which may include personal, religious (church) or spiritual support (i.e. prayer), individual motivation or resignation to life with a disability. This study explored these areas through the coping mechanisms that African Caribbean women utilised post stroke, in the context of stroke recovery and lifestyle modification efforts needed to promote healthy living post-stroke. A qualitative approach using interpretative phenomenological analysis was adopted. Seven women were recruited to the study. Semi-structured, in-depth interviews were audio recorded and were transcribed verbatim. Data were analysed using a four-stage framework: familiarisation, sense making, developing themes, and data refinement and analysis. Three main themes on coping emerged: the need to follow medical rules to manage stroke; strength and determination; and the use of religion and faith to cope with life after stroke. These findings illustrate both a tension between religious beliefs and the medical approach to stroke, and highlight the potential benefits that religion and the church can play in stroke recovery. Implications for practice include acknowledgement and inclusion of religion- and church-based health promotion in post-stroke recovery. (RH)

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From: wileyonlinelibrary.com/journal/hsc


The authors examined structures of (trans)national mother_child relationships in adulthood among non-Western immigrants in the Netherlands, and assessed the impact of acculturation on these intergenerational ties. Turkish, Moroccan, Surinamese and Antillean respondents to the Netherlands Kinship Panel Study (NKPS) were selected, whose mother lived in the Netherlands (N = 360) or abroad (N = 316). First, extending a previous typology of immigrant mother_child relations in the Netherlands, Latent Class Analysis was conducted for transnational relations. As expected, combining information about given and/or received emotional and financial support resulted in an emotional-interdependent and detached transnational mother_child relationship. Second, acculturation effects were estimated by using relationship assignment as a dependent variable, performing Logistic Regressions on the uni-national and transnational sample. Findings were mixed, suggesting acculturation impacts differently on family relations within and across borders. Overall, the results demonstrate the importance of reciprocal affective ties in a transnational context (also in the absence of financial or practical support), and show the relevance of distinguishing different facets of acculturation. (RH)

ISSN: 0144696X
From: journals.cambridge.org/aso


Ageing and Society, vol 36, no 7, August 2016, pp 1459-1482.
Immigration disrupts the bonding process in families. Maintaining close relationships with adult children can be an important protective factor for older immigrants' health and well-being. This quantitative study examined factors associated with close parent-child relationships in a purposive sample of 236 older Chinese immigrants in Los Angeles who provided information regarding 365 children. Two-level regression models were estimated to investigate factors contributing to cohesive parent-child relationships among these older adults. The findings showed that co-residence, a characteristic that distinguishes immigrant families from most non-immigrant families, was associated with lower parent-child relationship quality. Frequent contact was associated with closer relationships. While receiving instrumental and monetary support from children was associated with favourable ratings of relationships with children, providing such support to children was not related to parents’ assessment of relationship quality. Parental perceptions of children being respectful was also associated with better relationship quality ratings. Overall, the findings demonstrate how family-related changes in the immigration context shape parent-child relationships in later life. Implications for future research and practice are provided. (RH)

ISSN: 0144686X
From: journals.cambridge.org/aso

This pilot project asked, 'How do ethnically diverse older adult residents of assisted living (AL) facilities in British Columbia (BC) experience quality of life? And, what role, if any, do organisational and physical environmental features play in influencing how quality of life is experienced?' The study was conducted at three AL sites in BC: two ethnoculturally targeted and one non-targeted. Environmental audits at each site captured descriptive data on policies, fees, rules, staffing, meals, activities, and the built environment of the AL building and neighbourhood. Using a framework that understands the quality of life of older adults to be contingent on their capability to pursue 5 conceptual attributes – attachment, role, enjoyment, security and control – the authors conducted 3 focus groups with residents (1 per site) and 6 interviews with staff (2 per site). Attributes were linked to the environmental features captured in the audits. All dimensions of the environment - especially organisational - influence tenants’ capability to attain the attributes of quality of life, most importantly control. Although many tenants accept the trade-off between increased safety and diminished control that accompanies a move into AL, more could be done to minimize that loss. Social workers can advocate for the necessary multi-sectoral changes. (RH)

ISSN: 01634372
From: http://www.tandfonline.com

Reaching out effectively to gypsies and travellers; by Mary Tilki.: Hawker Publications, September-October 2016, pp 12-14.


In the second of two articles on the impact of dementia on gypsy and Traveller communities, the author and colleagues look at how service commissioners and providers can reach out effectively. The article draws attention to the available evidence and suggests other useful information resources. (RH)

ISSN: 13518372
From: www.careinfo.org

Risk and protective factors for depressive symptoms among indigenous older adults: intimate partner violence (IPV) and social support; by Soonhee Roh, Catherine E Burnette, Kyoung Hag Lee (et al).: Taylor and Francis, May-June 2016, pp 316-331.


Research on depression and intimate partner violence (IPV) experienced by Indigenous older adults is virtually non-existent. Given the associations between IPV and depression and their disproportionately high rates among Indigenous peoples in a context of historical oppression, this inquiry examines how IPV and social support are associated with depressive symptoms for Indigenous older adults. The authors expand the knowledge base on IPV in later life, which primarily focuses on female samples, by including older men. It was predicted that: IPV will be positively associated with depressive symptoms; and levels of social support will be negatively associated with depressive symptoms. Hierarchical regression analyses of data from a sample of Indigenous older adults (N = 233) in the Upper Midwest of the US indicated that physical aggression (but not psychological aggression, sexual coercion, injury or negotiation) was positively associated with depressive symptoms, whereas social support was negatively associated with depressive symptoms. This is one of four articles in this issue of Journal of Gerontological Social Work which focus on indigenous Elders. (RH)

ISSN: 01634372
From: http://www.tandfonline.com

Satisfaction with social care services among South Asian and White British older people: the need to understand the system; by Rosalind Willis, Priya Khambhaita, Pathik Pathak, Maria Evandrou.: Cambridge University Press, August 2016, pp 1364-1387.

Ageing and Society, vol 36, no 7, August 2016, pp 1364-1387.

National surveys show that people from minority ethnic groups tend to be less satisfied with social care services compared with the white population, but do not show why. Research indicates that barriers to accessing services include lack of information, perceptions of cultural inappropriateness, and normative expectations of care. Less research has examined the experience of minority ethnic service users after they access services. This study conducted in-depth interviews with 82 South Asian and White British service users and family carers, the majority of whom were older people. Thematic analysis was used. The key theme was understanding the social care system. Participants with a good understanding of the system were more able to adapt and achieve control over their care. Participants with a poor understanding were uncertain about how to access further care, or why a service had been refused. More White British than South Asian participants had a good understanding of the system. There was more in common between the South Asian and White British participants’ experiences than
might have been expected. Language was an important facilitator of care for South Asian participants, but ethnic matching with staff was less important. Recommendations include better communication throughout the care process to ensure service users, and carers should have a clear understanding of social care services and hence a better experience. (RH)

ISSN: 0144686X
From: journals.cambridge.org/aso

Upon learning from the community: surveying dementia awareness in South East Asian communities; by Ian Scott, Faye Barrow, Serena Sharma.: British Psychological Society, January 2016, pp 50-57.


The Department of Health (DH) has highlighted the need to increase early diagnosis of dementia, increase the uptake of intervention following diagnosis, and reduce stigma of this debilitating condition (National dementia strategy, DH, 2009). Further, previous authors have highlighted the need to deliver culturally tailored services (C’M Geibel et al, 2014; V Seabrooke & A Milne, 2004). An opportunity arose to learn about the perspective of dementia from a cross-section of the local Punjabi community who were attending a Dementia Information Group. Over a 5-week programme, the authors conducted a short dementia survey to members of the local Punjabi community. Results indicate that respondents hold some positive constructions of dementia and services, although some perspectives reflecting stigma and concerns about help-seeking were evident. Limitations of this study and recommendations for further research are briefly discussed. (RH)

ISSN: 20528914
From: http://www.bps.org.uk/newtworks-and-communities/member-microsite/dcp-faculty-psychology-older-people-fpop

What keeps you strong?: A systematic review identifying how primary health-care and aged-care services can support the well-being of older Indigenous peoples; by Carol Davy, Elane Kite, Graham Aitken ... (et al).: Wiley, June 2016, pp 90-97.


The objective of this systematic review was to identify primary health care or aged care strategies that have or could support the well-being of older Indigenous peoples, with a particular focus on Australia and Canada. A search was undertaken of relevant databases in which papers which reported on the perspectives of older Indigenous peoples, community members and provider participants were included. Findings were pooled using a meta-aggregative approach. Three high-level synthesised findings _ maintaining Indigenous identity, promoting independence and delivering culturally safe care _ were believed to be important for supporting the well-being of older Indigenous peoples. As physical independence often diminishes with age, having the support of culturally safe primary health care and aged care services that understand the importance of maintaining an Indigenous identity and promoting independence will be crucial for the well-being of older Indigenous peoples. (JL)

ISSN: 14406381
From: http://www.wileyonlinelibrary.com/journal/ajag

"You don't know what you are saying 'Yes' and what you are saying 'No' to": hospital experiences of older people from minority ethnic communities; by Jo Ellins, Jon Glasby.: Cambridge University Press, January 2016, pp 42-83.

Ageing and Society, vol 36, no 1, January 2016, pp 42-83.

Improving responsiveness to the needs of older people from minority ethnic communities has been emphasised as a goal in England since the publication of the National Service Framework for Older People (NSF) in 2001. Despite this, people from minority ethnic groups consistently give poorer ratings of their health services than 'majority' populations, both in England and across many other health-care systems. Language barriers have been shown to play a particularly important role, and appear to be a stronger predictor of perceived quality of care than ethnic origin per se. This paper reports findings from a larger study exploring older people's experiences of care transitions, focusing on the findings from one case study area which explored the hospital and discharge experiences of older people from minority ethnic communities. A participatory approach was adopted, with older people from the local area collaborating in the design, delivery and analysis of the research as 'coresearchers'. Twenty-four in-depth narrative interviews were carried out with people who had experienced a recent hospital stay as a patient or a family member providing care and support. Our findings show that many aspects of the hospital experience, including the desire for personalised and humanistic approaches to care, are important to older people irrespective of ethnic background. However, older people from minority ethnic communities can also face language and cultural barriers which negatively affect the quality and experience of care. People who had limited English proficiency struggled to understand, communicate and participate in their care. Where professional services were not available or requested, interpreting was provided informally by other
patients, family members, hospital staff in clinical and domestic roles, or not at all. We conclude that targeted strategies are required to ensure appropriate and effective hospital services for a multicultural population. (RH)

ISSN: 0144686X
From: journals.cambridge.org/aso

2015

The (mis)matching of resources and assessed need in remote Aboriginal community aged care; by Di Bell, Melissa A Lindeman, John Binda Reid.: Wiley, September 2015, pp 171-176.


The aim of the present study was to examine processes of aged care needs assessment for Aboriginal people in remote central Australia to assist development of appropriate models of aged care. This was a qualitative study involving 11 semistructured interviews with aged care assessors and two focus groups with Aboriginal community members. The study reported four major themes concerning how needs assessments relate to realities of service delivery: cultural perspectives on aged care, context of service delivery, equity and access to services, and programme (mis)alignments. Disparities were found to exist between assessment recommendations and service availability, with a potential mismatch between Aboriginal understandings of needs, interpretations by individual assessment staff and programme guidelines. Incorporating a conceptual framework, such as the International Classification of Functioning, Disability and Health, into service guidelines to ensure structured consideration of a person's holistic needs may assist, as will building the capacity of communities to provide the level and type of services required. (JL)

ISSN: 14406381
From: wileyonlinelibrary.com/journal/ajag

Barriers to access and minority ethnic carers' satisfaction with social care services in the community: a systematic review of qualitative and quantitative literature; by Nan Greenwood, Ruth Habibi, Raymond Smith, Jill Manthorpe.: Wiley Blackwell, January 2015, pp 64-78.

Health and Social Care in the Community, vol 23, no 1, January 2015, pp 64-78.

As populations age, the numbers of carers overall and numbers of carers from minority ethnic groups in particular are rising. Evidence suggests that carers from all sections of the community and particularly carers from minority groups often fail to access care services. This may relate to barriers in accessing services and service dissatisfaction. The aim of this systematic review was to identify and summarise minority ethnic carers' perceptions of barriers to accessing community social care services and their satisfaction with these services if accessed. The following databases were searched from their start until July 2013: Social Care Online, Social Policy and Research, Scopus, PsychINFO, HMIC, ASSIA, MEDLINE, Embase, CINAHL Plus and AMED. Thirteen studies met the inclusion criteria. Most investigated either barriers to access or satisfaction levels, although three explored both. Only 4 studies investigated minority ethnic carers' satisfaction with social care, although 12 studies reported perceived barriers to accessing services. Few studies compared minority ethnic carers' perceptions with majority ethnic groups, making it difficult to identify issues specific to minority groups. Most barriers described were potentially relevant to all carers, irrespective of ethnic group. They included attitudinal barriers such as not wanting to involve outsiders, or not seeing the need for services and practical barriers such as low awareness of services and service availability. Issues specific to minority ethnic groups included language barriers and concerns about services' cultural or religious appropriateness. Studies investigating satisfaction with services reported a mixture of satisfaction and dissatisfaction. Barriers common to all groups should not be underestimated; and a better understanding of the relationship between perceived barriers to accessing services and dissatisfaction with services is needed before the experiences of all carers can be improved. (RH)

ISSN: 09660410
From: wileyonlinelibrary.com/journal/hsc


Hospice UK and Together for Short Lives commissioned this report with the aim of learning how hospices and British Muslim communities can mutually strengthen engagement, so that hospices may provide the support needed by children and adults. Using research carried on over a 6-month period, the report looks at what is important to Muslims towards the end of life, and the barriers to engagement between hospices and Muslims in Britain. It also covers learning from national workshops, from the data, and from examples of best practice. Recommendations focus on three core areas. First, hospices and service providers should include information on religion and ethnicity in their records, to be used at registration of death and in preparing burial services. Second, hospices need to communicate and engage with local Muslim organisations, for example through
community radio and television. Third, hospices, service providers and clinicians should seek specialist training programmes to better understand the "last journey" protocols and services. Joint training with mosques and Muslim burial services would also help in understanding what is needed from when a patient dies to the completion of burial rites of passage. (RH)

From: https://www.hospiceuk.org/what-we-offer/publications?kwrd=Bridging%20the%20gap


Research on care managers' experiences of the needs assessment process is scarce, even though the literature on needs assessment practice is relatively extensive. One of the research areas that has not received attention yet is the way in which care managers experience the challenges that are presumably posed by increased ethnic, cultural, linguistic and religious diversity among prospective elder care recipients. This article addresses this research gap. It is based on a project that aims to shed light on care managers' experiences of the needs assessment process in general and cross-cultural needs assessment meetings in particular. The data derive from focus group interviews with 60 care managers in Sweden (N=60). This article focuses on care managers' experiences of needs assessment with older people who have immigrated late in life, who come from cultures considered different from the Swedish one and who have not mastered the Swedish language. This was the group of older people that the care managers mostly thought of when asked to describe their experiences of cross-cultural needs assessment meetings. The interviewed care managers discussed the challenges that these meetings present, which were related to communication due to language barriers, different demands and expectations, insecurity regarding what is customary in such meetings, as well as perceived passivity among late-in-life immigrants. The article discusses the contributions of the findings to research on care management practices in general, as well as to needs assessment practice in particular. (RH)
ISSN: 0144686X

From: journals.cambridge.org/aso

Contracts and commissioning: what's happening to social care services for black and minority ethnic older people; by Valerie Lipman.: Emerald, 2015, pp 85-93.

Working with Older People, vol 19, no 2, 2015, pp 85-93.

This paper reports a mixed method study exploring current provision of targeted social care services for the growing populations of black and minority ethnic (BME) older people in England and Wales. Following a review of the policy and research literature, 12 semi-structured interviews were undertaken in 2013/2014. Most participants were recruited from BME policy and service provider organisations and organisations focusing on older people. There is some evidence that BME voluntary organisations are experiencing disproportionately greater funding cuts than mainstream voluntary service providers. Moreover, some mainstream providers reported reducing services targeted at BME older people, while others expressed the view that choices for BME older people are likely to become more limited following recent health and equalities policy changes. Practitioners should therefore contribute to data collection about protected characteristics, such as race/ethnicity to establish whether older BME people's needs are being assessed equitably; whether access to care and support is easy; and how market-shaping at local levels can ensure a range of providers. This study provides an overview of voluntary sector provision for the growing numbers of BME older people in need of care and support, which should be useful to practitioners and service commissioners. (RH)
ISSN: 13663666

From: www.emeraldgrouppublishing.com/wwop.htm


The purpose of this paper was to reflect on how qualitative approaches can improve a prevalence study on older adults' violence. The paper describes how qualitative data can help frame a complex and multidimensional problem, such as older adults' violence, within the culture where it happens and therefore prevent two risks present in prevalence studies: underestimation and overestimation. In order to measure violence and violent behaviours accurately, the authors first conducted four focus groups with the target population _ older adults aged 60 and over _ and 13 in-depth interviews with older adult victims of violence. Through content analysis of focus groups and in-depth interviews the authors sought to understand how violence is perceived, defined and limited by the general population and by victims. By employing qualitative methods the authors were able to operationalise violence and then decide upon and select specific behaviours to measure, rephrase questions and develop strategies to approach the general population through telephone interviews. These qualitative
approaches helped reduce participant bias in the prevalence study and therefore to minimise the risks of underestimation and overestimation. (JL)
ISSN: 14668203
From: www.emeraldinsight.com/jap.htm

Ethnic/racial minority older adults and recovery: integrating stories of resilience and hope in social work; by Atsuko Karin Matsuoka. Oxford University Press, December 2015, pp i135-i152.
Although a recovery approach is relevant to older adults, a significant gap exists in social work literature regarding mental health recovery among ethnic/racial minority older adults. This paper explores the meaning of 'recovery' and the applicability of the Wellness Recovery Action Plan (WRAP), a recovery-based programme, to Japanese-Canadian older adults through qualitative data collected as part of an evaluation of two WRAP workshop series in a metropolitan city in Canada, 2010-12. All eight workshop participants (two male and six female, all Japanese speakers, aged 64-89 years) took part in the study. A strength-based critical social work approach, which incorporates the understanding of resilience and hope and the intersectionality of oppression, was used to facilitate the programme. Qualitative data analysis identified key themes of the participants' workshop experiences, including reaffirming self-worth, being positive (hope), being self-reflective and mindful, supporting each other and advocating for themselves. The participants experienced positive changes in line with Jacobson and Greenley's (2001) internal and external conditions for recovery. In particular, it found an unexpected long-term outcome: the formation of a peer support group by participants. Social work practice in recovery is discussed. (RH)
ISSN: 00453102
From: www.bjsw.oxfordjournals.org

Using data from the UK Household Longitudinal Study, this article explores patterns of employment and the odds ratios of membership in an employer's pension scheme among working-age individuals from minority ethnic groups and the White British population, taking into account factors such as migration history and public or private sector employment. Findings show that ethnicity remains a strong determinant of a person's pension protection prospects through being in paid work, being an employee and working for an employer who offers a pension scheme. However, for those working for an employer who does offer a pension scheme, the effect of ethnicity on their odds of being a member of that scheme reduces, except among Pakistani and Bangladeshi people for whom the differentials remain. Information is also given on the pension protection of Polish workers. (NH)
ISSN: 01445596
From: http://wileyonlinelibrary.com/journal/spol

The globalisation of international migration has increased the ethnic diversity of most ageing populations across the Western world. This has implications for gerontological research, policy and practice, and puts our understandings of ethnicity to the test. This paper presents the different perspectives that inform ethnicity scholarship (the essentialist/primordial perspective, the structuralist/circumstantialist perspective and social constructionism). It suggests that the way in which we regard ethnicity has implications for how gerontological research is designed, how policies for old age are formulated, and how gerontological practice is shaped. Through a review of contemporary gerontological research on ethnicity published in some of gerontology's main journals, the paper discusses some of the trends observed, and concludes that most research seems to be informed by essentialism and structuralism. This suggests that the gerontological imagination on ethnicity has yet to be informed by the latest developments in ethnicity scholarship. The author urges gerontologists to broaden their understanding of ethnicity, and suggests that much could be gained if we were to let the social constructionist perspective on ethnicity and the notion of intersectionality be sources of inspiration for the gerontological imagination on ethnicity. (RH)
ISSN: 0144686X
From: journals.cambridge.org/aso
Exploring gender, age, time and space in research with older Pakistani Muslims in the United Kingdom: formalised research ‘ethics’ and performances on the public/private divide in ‘the field’; by Maria Zubair, Christina Victor. Cambridge University Press, May 2015, pp 961-985.


Reflecting on the authors’ experiences of undertaking fieldwork for the Economic and Social Research Council (ESRC) New Dynamics of Ageing study of ‘Families and Caring in South Asian Communities’, this paper maps out the key methodological and ethical challenges for researching ageing ethnic minority populations. The paper highlights the importance of developing socially appropriate research methodologies and ethical frameworks for carrying out research. Using a reflexive approach, the paper explores the significance of gender, age, time and space to the fieldwork processes and ‘the field’ relationships formed at various stages of the research process. In particular, it focuses on three key emergent issues which presented particular challenges for the authors and their older Pakistani Muslim participants: (a) structuring of time in daily life; (b) gendered use of public and private spaces; and (c) orality of informal social contexts and relationships. Using illustrations from fieldwork and performativities of public/private identities, the authors highlight important tensions between formalised ethical and methodological dimensions of conducting funded research and the realities of being in ‘the field’. The paper concludes by emphasising the need to explore further not only the ways in which researchers can adopt more socially and culturally sensitive data collection processes and methodologies at the micro level of their interactions with research participants, but also contextualising the particular challenges experienced by researchers and their participants in terms of the wider research frameworks and agendas as well as the broader social contexts within which they live and work. (RH)

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From : journals.cambridge.org/aso


The term elder, when used in the Aboriginal context, describes an older person who is a cultural and spiritual guide and has insights and understanding to transmit the wisdom of previous generations. Aboriginal seniors also have important roles in their communities, albeit without the special status awarded to elders. Both Aboriginal seniors and elders are a growing population in Canada and their numbers are expected to increase. The aim of the present study, based in Toronto, was to highlight the strengths and resiliency of 12 female Aboriginal elders and seniors as they aged together. For these women, being actively involved in their families and the Aboriginal community gave them a solid grounding in who they were, what their roles were and how they contributed to the whole. Of particular significance was the support and friendship the women offered each other through their commonalities, activities and sense of humour. (JL)

ISSN: 01634372
From : http://www.tandfonline.com

‘Health is their heart, their legs, their back’: understanding ageing well in ethnically diverse older men in rural Australia; by Harriet Radermacher, Susan Feldman. Cambridge University Press, May 2015, pp 1011-1031.


Older men from ethnic minority communities living in a regional town in Australia were identified by a government-funded peak advocacy body as failing to access local health and support services and, more broadly, being at risk of not ageing well. A qualitative study was undertaken to explore the health and well-being of ethnic minority men growing older in a rural community, and to identify the barriers they faced in accessing appropriate services from a range of different perspectives. Individual interviews were conducted with key informants (service providers and community leaders), followed by focus groups with older men from four ethnic minority communities. The men in this study showed signs that they were at risk of poor mental and physical health, and experienced significant barriers to accessing health and support services. Furthermore, environmental, technological, social and economic changes have brought challenges for the older men as they age. Despite these challenges, this study demonstrated how work, family and ethnic identity was integral to the lives of these older men, and was, in many ways, a resource. Key informants’ perspectives mostly confirmed the experiences of the older men in this study. The discrepancies in their views about the extent of health-promoting behaviour indicate some key areas for future health intervention, services and research. (RH)

ISSN: 0144686X
From : journals.cambridge.org/aso

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The impact of migration experiences and migration identities on the experiences of services and caring for a family member with dementia for Sikhs living in Wolverhampton, UK; by Karan Jutlla.: Cambridge University Press, May 2015, pp 1032-1054.


This article is based on qualitative research carried out with members of the Sikh community caring for a person with dementia. The aim of the research was to explore how migration experiences and life histories affect perceptions and experiences of caring for a family member with dementia for Sikhs living in Wolverhampton in the West Midlands. The research sought to provide an in-depth understanding of the experiences of Sikhs caring for their family member with dementia using narrative interviews. Twelve Sikh carers of a family member with dementia were interviewed. The findings highlight that migration experiences and migration identities are important for understanding participants' experiences of services and experiences of caring for a family member with dementia. Person-centred dementia care as a model for practice highlights the importance of understanding life histories to support people to live well with dementia, including their family carers. This paper reinforces this message, demonstrating the impact of specific migration experiences on the experiences of caring for a family member with dementia. (RH)

ISSN: 0144686X
From : journals.cambridge.org/aso


Over the last century Inuit have experienced rapid social changes that have greatly impacted their way of life, health and intergenerational traditions. Although there is a growing body of research concerning Inuit youth, relatively little is known about older Inuit. In an effort to bridge this knowledge gap, a systematic review of peer-reviewed journal articles was conducted. This review identified a dearth of research on older Inuit and highlighted limitations in service provision to this primarily rural and isolated population. Implications for policy and practice and recommendations for future research are also discussed. (JL)

ISSN: 01634372
From : http://www.tandfonline.com

The language needs of residents from linguistically diverse backgrounds in Victorian aged care facilities; by Susannah J Runci, Barbara J Eppingstall, Eva S van der Ploeg ... (et al).: Wiley, September 2015, pp 195-198.


The present study aimed to investigate the language needs of residents of aged care facilities within the State of Victoria, Australia, and to determine what language resources were accessible to them. Postal questionnaires were sent to 586 aged care facilities, enquiring about residents' and staff members' languages and language-specific resources. The response rate was 38%. The majority of facilities had residents who spoke non-English languages, and 55 different languages were represented. Three-quarters of the facilities employed staff members who spoke to residents in non-English languages and employed language-specific resources. The metropolitan and ethnospecific facilities had a greater presence of non-English-speaking residents and staff and more commonly used language-specific resources in comparison with regional and mainstream facilities. Overall the study found a large number of languages used by many residents from non-English-speaking backgrounds, with evidence of a large unmet language resource need. Unmet need was greatest in rural areas. (JL)

ISSN: 14406381
From : wileyonlinelibrary.com/journal/ajag

Living arrangements and loneliness of South Asian immigrant seniors in Edmonton, Canada; by Cheuk Fan Ng, Herbert C Northcott.: Cambridge University Press, March 2015, pp 552-575.


This paper examines the relationships between self-reported loneliness and living arrangements. A structured questionnaire with some open-ended questions was administered face-to-face in English, Hindi or Punjabi to a sample of 161 South Asian immigrants aged 60+ living in Edmonton, Alberta, Canada in 2003. The majority of respondents said that they never felt lonely. More than one in three (37.3%) respondents indicated that they felt lonely occasionally, frequently or all of the time. Those living alone were significantly more likely to report feeling lonely at least occasionally than were those living with others, especially those living with their spouse in an extended family. The fact that South Asian immigrant seniors typically lived with others, often in an extended family with or without their spouse, and rarely lived alone protected them to some extent from loneliness. However, the findings showed that among those living with others, it was the amount of waking time spent alone at home and the quality of family relationships rather than living arrangement per se that significantly predicted self-reported loneliness. Nevertheless, living in a larger household was associated with
spending less time alone. The authors discuss plausible influences of culture on expectations regarding family and social relationships and on the meaning of being alone, as well as practical implications for addressing loneliness in a multi-cultural society. (RH)

ISSN: 0144686X
From: journals.cambridge.org/aso

Mental health and service issues faced by older immigrants in Canada: a scoping review; by Sepali Guruge, Mary Susan Thomson, Sadaf Grace Seifi.: Cambridge University Press, December 2015, pp 431-444.
Canadian Journal on Aging, vol 34, no 4, December 2015, pp 431-444.

An ageing population and immigration-based population growth necessitate research, practice and policy focusing on the mental health of older immigrants in Canada, especially, because their mental health appears to deteriorate over time. This review focuses on what is known about the social determinants of mental health for older immigrants in Canada, and what are the barriers they face in accessing mental health services? Findings reveal, first, that the key social determinants of mental health are culture, health services and gender. Second, older immigrants use fewer mental health services than their Canadian-born counterparts, due to cultural beliefs, lack of culturally and linguistically-appropriate services, financial difficulties, and ageism. Third, regardless of the subcategories within this population, older immigrants experience mental health inequities. The research evidence provides a clear message that addressing mental health service gaps for older immigrants should be a policy and practice priority for Canada’s health care system. (RH)
ISSN: 07149808
From: journals.cambridge.org/cjg


With the on-going ageing of the United States population, resolving health disparities continues to be a prominent and worthwhile goal, particularly in the areas of promoting minority health and reducing racial/ethnic disparities. This analysis employs the 2004 and 2005 Household Component records from the Medical Expenditures Panel Survey (MEPS), which correspond to data files H89 and H97, to examine utilisation by race across the entire distribution function. More specifically, the analysis applies the behavioural model of health services utilisation, and employs a Quantile Regression (QR) framework. This is a noteworthy contribution, because the conditional mean may not be the best approximation for a skewed-location distribution. In contrast, QR is robust to outliers and scale effects, since the estimation minimises least absolute deviation. The sample consists of 2,525 older adults at least 65 years of age, with 303 corresponding to Black and 2,222 corresponding to White. Results suggest older Blacks continue to utilise health services (i.e. office or clinic visits with a physician or medical provider) at lower levels, and this is more pronounced at and below the median quantile (i.e. below the 50th cut-off). Usual source of care (USC) continues to play an important role. Beliefs surrounding the need for insurance and medical intervention are also significant and explain some of the racial disparities. Although utilisation disparities persist for older Blacks, collaborative and flexible models of care can reach this group. (RH)
ISSN: 0144686X
From: journals.cambridge.org/aso

Perspectives on ageing, later life and ethnicity: ageing research in ethnic minority contexts; by Maria Zubair, Meriel Norris.: Cambridge University Press, May 2015, pp 897-916.

This special issue of Ageing and Society focuses broadly upon questions and themes relating to the current conceptualisations, representations and use of ‘ethnicity’ (and ethnic minority experiences) within the field of social gerontology. Among its aims is to explore the issue of ‘otherness’ within the predominant existing frameworks for researching those who are ageing or considered aged, compounded by the particular constructions of their ethnicity and ethnic ‘difference’. The range of theoretical, methodological and empirical papers included in this collection provides some critical insights into particular facets of the current research agendas, cultural understandings and empirical focus of ethnic minority ageing research. The main emphasis is on highlighting the ways in which ethnic cultural homogeneity and ‘otherness’ is often assumed in research involving older people from ethnic minority backgrounds, and how wider societal inequalities are concomitantly (re)produced, within (and through) research itself - for example, based on narrowly defined research agendas and questions; the assumed age and/or ethnic differences of researchers vis-à-vis their older research participants; the workings of the formalised ethical procedures and frameworks; and the conceptual and theoretical frameworks employed in the formulation of research questions and interpretation of data. The papers examine and challenge the simplistic categorisations and distinctions often made in gerontological research
based around research participants' ethnicity, age and ageing and assumed cultural differences. The papers presented reveal instead the actual complexity and fluidity of these concepts, as well as the cultural dynamism and diversity of experiences within ethnic groups. (RH)

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From: journals.cambridge.org/aso


Research on minority ethnic ageing remains a neglected area within mainstream race and ethnicity studies as well as that of social gerontology. This paper examines the background and reasons for this, arguing that a focus on minority ethnic issues provides a reminder of the complexity of the life course, and of the diversity of ageing as a cultural, economic and social construction. The discussion reviews definitions of ethnicity and their relevance to work in social gerontology. The paper provides an account of early studies of minority ethnic ageing, identifying the strengths and limitations of this research. Later work is then considered, notably that which focuses on issues connected with the rise of transnational communities and the changing character of neighbourhoods in urban environments. The paper argues that developing research on minority ethnic ageing has become especially important for understanding the impact of globalisation on re-defining communities, relationships and identities, within and beyond nation states. It is suggested that globalisation can be seen as a product of the movement of ethnic groups. Equally, ethnic groups are themselves transformed by the possibilities created by global change. The paper concludes with suggestions for embedding work on ethnicity within research in social gerontology. (RH)

ISSN: 0144686X
From: journals.cambridge.org/aso

South Asian older adults with memory impairment: improving assessment and access to dementia care; by Clarissa M Giebel, Maria Zubair, David Jolley ... (et al).: Wiley Blackwell, April 2015, pp 345-356.

With increasing international migration, the mental health care of migrants and ethnic minorities is a public health priority. South Asian older adults experience difficulties in accessing services for memory impairment, dementia and mental illness. This review aimed to examine barriers and facilitators in the pathway to culturally appropriate mental health care. A literature search of appropriate databases was carried out covering the period from 1984 through to 2012. 18 studies met the eligibility criteria for the review. South Asians and health professionals highlighted several difficulties which deterred help seeking and access to care: a lack of knowledge of dementia and mental illness and of local services; stigma; culturally preferred coping strategies; and linguistic and cultural barriers in communication and decision making. To improve access for these groups, service users and providers need to be better informed: services need to be more culturally tailored, sometimes employing staff with similar cultural backgrounds; health professionals can benefit from dementia education and knowledge of local services. These factors are key to the delivery of the National Dementia Strategy in England. (JL)

ISSN: 08856230
From: www.orangejournal.org


Communicating well with people from ethnic minorities who have dementia is essential. The authors discuss how interpreters can help and hinder. They offer some guidelines on working with interpreters in a dementia care setting regarding when to use an interpreter; and things to consider before booking an interpreter, and before, during and after the appointment. Maintaining patient confidentiality and having an interpreter who can be impartial throughout (so not a family member) is essential. The authors conclude that attention to guidelines for working with interpreters can ensure that such interactions are both effective and culturally sensitive. (RH)

ISSN: 13518372
From: http://www.careinfo.org/journal-of-dementia-care/


This study examined care managers’ perspectives on facilitating advance care planning (ACP) with ethnically diverse older people enrolled in Wisconsin Family Care, a care programme that coordinates medical and long-term care for frail, poor older people. Seven in-depth interviews and two focus groups were conducted with 24 lead supervisors and care managers of care management teams between July and August 2008; data were analysed with qualitative thematic analysis method. Participants identified four main sources of challenges: death and dying are taboo discussion topics; the dying process is beyond human control; family and others hold decision-making responsibility; and planning for death and dying is a foreign concept. Participants’ recommendations coping with these challenges were to: develop trust with elders over time; cultivate cultural knowledge and sensitivity to respect value orientations; promote designating a healthcare proxy; recognise and educate families and community leaders as critical partners in ACP; and provide practical support as needed throughout the illness experience. These findings suggest important practice implications for care managers working with increasingly diverse cultural groups of older people at the end of life. (RH)

ISSN: 09660410
From: wileyonlinelibrary.com/journal/hsc


The Bangladeshi and Pakistani communities are characterised by high levels of morbidity, deprivation and social exclusion compared with both other minority groups and the more general population. Participants in this project had moved to the UK for either work (men) or marriage (women). Most never anticipated ‘growing old’ in the UK, but only a few intended to return to Bangladesh/Pakistan when they retired. The 110 participants were 60 Pakistani (60) and 50 Bangladeshi (50 men and 60 women, all aged 50+). Data were collected by in-depth interviews lasting about an hour; only 5 interviews were conducted in English. Strong links with the local community were found to be the norm, providing vital resources in coping with growing old in a foreign land, a focus for social engagement, and support in times of celebration (weddings) or stress (bereavement).

Expectations of their children providing care for old age were strong and ‘state’ care services were viewed as being used only as a last resort. However, some participants were uncertain if their expectations would be realised in the future; and others were ambivalent about having such expectations of their children. (RH)

From: NDA Research Programme, Department of Sociological Studies, University of Sheffield, Elmfleet, Northumberland Road, Sheffield S10 2TU. www.newdynamics.group.shef.ac.uk


Despite the long-held view that Latinos' value and reliance on family leads to greater involvement of extended family in caring for sick members and reduced perception of burden, some research reports low levels of social support and high levels of distress among Latino caregivers. The author explores this seeming discrepancy in a qualitative study of 41 Latino caregivers of family members with Alzheimer's disease (AD) interviewing them regarding the role of familism in their caregiving experience. For some it facilitates caregiving in the traditional, expected manner. Other caregivers disavow its current relevance. Yet others feel a contrast between familism, which they may value in a general, abstract way and more personal, immediate negative feelings they are experiencing from caregiving. The author discusses these complex, multidimensional findings, the variation among caregivers, and presents implications for practice, policy, and research. (RH)

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From: roa.sagepub.com


Ageing and Society, vol 34, no 5, May 2014, pp 859-875.

A group of 141,345 immigrants from the Netherlands Antilles, a former Dutch colony in the Caribbean, live in the Netherlands. An increasing number of these migrants are at or above retirement age; and for them, the question of where they want to grow old becomes relevant. It is important for people to age in a place where they feel at home, as attachment to place increases well-being in old age. In this article, the authors discuss how
older Antillean migrants in the Netherlands make their house and immediate living environment into a home. The article focuses on home-making practices in a broader cultural context, and in relation to well-being. These topics are examined by drawing on qualitative life-history interviews with Antillean older people who live in a co-housing community for older adults. It turns out that objects which remind the participants of their home country play an important role in making a home. Also, the community, with people from similar backgrounds, contributes to a sense of home. Finally, the presence of children and other family members is a key motivation for a participant's decision to age in the Netherlands. (RH)

ISSN: 0144686X
From: journals.cambridge.org/aso


Ageing and Society, vol 34, no 5, May 2014, pp 877-903. Despite international growth in policies to increase the identification and response to elder abuse and neglect, there remain considerable barriers to treating the problem. Some of these barriers may be attributed to how older adults from different racial/ethnic backgrounds define, experience and seek to remedy elder mistreatment. Using focus group discussions based on case vignettes, this paper examines how older adults from different racial and ethnic backgrounds in the United States of America perceive elder mistreatment. Five focus groups were conducted with African Americans, English-speaking Latinos, Spanish-speaking Latinos, non-Latino Whites, and African American care-givers for older adults. While similar definitions and meanings of elder abuse were expressed across the different racial/ethnic groups, Latino participants introduced additional themes of machismo, respect, love and early intervention to stop abuse, suggesting that perceptions or beliefs about elder mistreatment are determined by culture and degree of acculturation in addition to race/ethnicity. Most differences in attitudes occurred within groups, demonstrating that perceptions vary by individual as well as by culture. In identifying scenarios that constitute elder mistreatment, some participants felt that certain cases of abuse are actually the persistence of intimate partner violence into old age. Participants also indicated that victims may prefer to tolerate mistreatment in exchange for other perceived benefits (e.g. companionship, security); and out of fear that they could be placed in an institution if mistreatment is reported. Findings suggest the need for person-centred intervention and prevention models that integrate the cultural background, care needs and individual preferences of older adults. (RH)

ISSN: 0144686X
From: journals.cambridge.org/aso


Journal of Adult Protection, vol 16, no 5, 2014, pp 307-321. The purpose of this paper was to explore US Chinese older adults' views regarding elder abuse interventions in order to understand barriers to and facilitators of help-seeking behaviours. The study design was qualitative, using a grounded theory approach to data collection and analysis. A community-based participatory research approach was implemented to partner with the Chicago Chinese community. A total of 37 community-dwelling Chinese older adults aged 60 and above participated in focus group discussions. Participants viewed many benefits of intervention programmes. Perceived barriers were categorised under cultural, social and structural barriers. Facilitators to implement interventions included increasing education and public health awareness, integrating social support with existing community social services, as well as setting an interdisciplinary team. Perpetrator intervention strategies were also discussed. This study has wide policy and practice implications for designing and deploying interventions with respect to elder abuse outcomes. Modifying the cultural, social and structural barriers that affect the health behaviour of Chinese older adults contribute to the salience of elder abuse interventions in this under-served population. (JL)

ISSN: 14668203
From: www.emeraldinsight.com/jap.htm


Journal of Adult Protection, vol 16, no 5, 2014, pp 264-275. The purpose of this paper was to examine the prevalence and psychosocial correlates of fear of crime in an older Chinese population. An attempt was made to test a theoretical model which integrated the vulnerability model, 'broken windows' theory, victimisation theory and risk interpretation model. A cross-sectional survey was conducted with 453 older adults from a representative sample recruited from the city of Kunming using
stratified sampling methods. More than half of the study participants reported fear of one or more types of depicted common crime. By comparison, a smaller percentage reported fear of domestic violence (FDV). Correlational analysis indicated different correlates for fear of common crime (FCC) and FDV. Female gender, a younger age, poor financial and health statuses, perception of greater social instability and neighbourhood disorder, direct and/or indirect victimisation and perception of a higher risk of victimisation were significantly associated with higher levels of FCC. Limited social networks, perception of greater neighbourhood disorder, direct and/or indirect victimisation and perception of a higher risk of victimisation were salient correlates of FDV. The results of hierarchical regression analyses showed that the integrated model explained 37 and 43 percent of the variance in FCC and FDV, respectively. This study found diverse patterns in terms of the prevalence and risk factors for FCC and FDV. The findings have important implications for policy, practice and research. (JL) ISSN: 14668203 From: www.emeraldinsight.com/jap.htm

Understanding elder abuse and neglect in aging Chinese immigrants in Canada; by Daniel W L Lai, Gabrielle D Daoust, Lun Li.: Emerald, 2014, pp 322-334. The purpose of this paper was to review and discuss existing literature and available research findings related to understanding elder abuse and neglect in culturally diverse communities, particularly the Chinese immigrant community in Canada. The conceptual understandings of elder abuse were examined, based upon the socio-cultural context and challenges faced by ageing Chinese immigrants. Previous literature and research publications related to elder abuse and neglect related to Chinese in Canada were reviewed and synthesised. Findings showed that from a culturally diverse perspective, influence of race, ethnicity, immigrant status and cultural norms on the recognition, identification, prevention and intervention of elder abuse and neglect are important to consider. A key message for professionals working with the ageing population, particularly older immigrants from ethno-cultural minority backgrounds, is that understanding the social cultural context in which elder abuse or neglect emerges is critical. For many of the ageing Chinese immigrants in Canada, the socio-cultural circumstances that they have experienced, their social environment, and various barriers and challenges further prevent them from being aware of this emerging concern. Cultural norms and practices have played a critical role in their access to preventive and intervention services. This paper is a first attempt in the research community to synthesise a few critical issues related to elder abuse and neglect in the ageing Chinese immigrant community in Canada. In order to provide culturally competent services, service providers should be aware of cultural differences in attitudes towards elder mistreatment, including the ways in which specific types of abuse (e.g. financial abuse) are defined within ethno-cultural communities. (JL) ISSN: 14668203 From: www.emeraldinsight.com/jap.htm

2013

Access and acceptability of community-based services for older Greek migrants in Australia: user and provider perspectives; by Catherine Hurley, Georgia Panagiotopoulos, Michael Tsianikas ... (et al.).: Wiley, March 2013, pp 140-149. Health and Social Care in the Community, vol 21, no 2, March 2013, pp 140-149. In most developed nations, ageing migrants represent a growing proportion of the older population. Policies that emphasise care in the community depend on older migrants having access to formal services along with informal support, yet little is known about how older migrants experience community-based formal services. By examining the views of both Greek elders in Australia and those of formal service providers, this research fills an important gap in the literature around access to and acceptability of formal community-based services for older migrants. A research team including two Greek background researchers used existing social groups and a snowball sampling method to conduct face-to-face interviews and focus groups with 70 older Greeks in Adelaide, Australia. In addition, 22 community-based service providers were interviewed over the telephone. Results from users and providers showed that while many older Greeks experience service access issues, they also relied heavily on family for support and assistance at home. Reliance on family was both in preference to formal services or where formal services were used, to locate, negotiate and monitor such services. Common barriers identified by both groups included cost, transport and availability, but additional challenges were posed by language, literacy and cultural attitudes. Demographic changes including greater employment mobility and female workforce participation among adult children would have implications for both formal and informal care providers. Formal service providers need to ensure that services are promoted and delivered to take account of the important role of family in informal support while also addressing the access challenges posed by language
and literacy. Research conducted by researchers from the same cultural background in the respondent's native language can further advance knowledge in this area. (JL)

ISSN: 09660410
From: www.wileyonlinelibrary.com/journals/hsc

The accommodation experiences of older gypsies and travellers: personalisation of support and coalition policy; by Nicky Hodges, Sarah Cemlyn.: Cambridge University Press, April 2013, pp 205-219.
This article reports on a study exploring the accommodation experiences of older Gypsies and Travellers and how specialist Supporting People services can enhance their wellbeing and social inclusion. The findings suggest that through development of pro-active, culturally appropriate services, flexible tailored support and joint working, these services have contributed to their users' wellbeing. Cuts to Supporting People funding pose a serious threat, especially in the context of loss of other services and changes to accommodation policy under the banner of localism. Targeted funding to sustain these specialist services could be important to redress risks of further marginalisation of Gypsy/Traveller communities. (JL)
ISSN: 14747464
From: http://journals.cambridge.org/action/displayJournal?jid=SPS

The purpose of this briefing is to examine the ageing of the ethnic minority populations of England and Wales as revealed by the 2011 Census. It complements the 2010 CPA/Runnymede report, 'The future ageing of the ethnic minority population of England and Wales', which used the 2001 Census as a base, to project ethnic minority ageing for England and Wales to 2051. The ageing characteristics of individual ethnic groups are examined and compared through key statistics and 'population pyramids' for each group. (RH)

Australian-Chinese families caring for elderly relatives; by Lia Bryant, Suzane Lim.: Cambridge University Press, November 2013, pp 1401-1421.
Ageing and Society, vol 33, no 8, November 2013, pp 1401-1421.
Caring for older relatives has predominately been explored from the standpoint of the needs and experiences of the hegemonic culture in multicultural countries like Australia, Canada and the United States of America. Australia, in particular, has paid scant attention to cultural and linguistically diverse groups in relation to caring for the aged. In this paper, the authors focus on Chinese-Australian families caring for ageing relatives. They explore the traditional value of filial piety which is said to underpin social norms and beliefs about caring for aged parents in Chinese cultures. Specifically, they draw on four in-depth interviews with Chinese-Australian care-givers of older relatives to identify meanings of filial piety and practices of filial piety. Findings indicate that while filial piety is still an important value in caring for the aged, meanings about how to practise filial piety are changing and vary across families. (RH)
ISSN: 0144686X
From : journals.cambridge.org/aso

Care relationships, quality of care and migrant workers caring for older people; by Kieran Walsh, Isabel Shutes.: Cambridge University Press, April 2013, pp 393-420.
Ageing and Society, vol 33, no 3, April 2013, pp 393-420.
Migrant care workers make a substantial contribution to older adult care in Ireland and the United Kingdom (UK). However, little is known about the relational aspects of care involving migrant care workers and older people. Given that the care relationship is closely linked to quality of care, and that the Irish and UK sectors are increasingly restricted by economic austerity measures, the lack of information is a concern for care practice and policy. This paper explores the relationship between migrant care workers (in this instance registered nurses and care assistants) and older people in Ireland and the UK. It draws on data collected in both countries, including focus groups with older people (n=41), interviews with migrant care workers (n=90) and data from a survey of and interviews with employers. The findings illustrate the complexity of the migrant care workers-older person relationship; the prevalence of need-orientated, friendship and familial-like, reciprocal, and discriminatory interlinking themes; and the role of the individual structural and temporal factors in shaping these relationships. (RH)
Coping strategies and social support-seeking behaviour among Chinese caring for older people with dementia; by Alma Au, Steven M Shardlow, Yue Teng (et al.).: Cambridge University Press, November 2013, pp 1422-1441.

Ageing and Society, vol 33, no 8, November 2013, pp 1422-1441.
The study reviewed coping and help-seeking behaviour among Hong Kong Chinese family care-givers of older people diagnosed with dementia. A convenience sample of those caring for family members with dementia (N=11) was recruited in Hong Kong. Semi-structured interviews were conducted, transcribed and analysed using NVivo. The study found evidence of distinct Chinese coping strategies that focused on internal self-regulation, forbearance and family obligations. In terms of help-seeking behaviour, these care-givers expressed great concern about bothering their family members. When there is a desperate need for help, they turn to community services. Results are discussed in the context of both traditional Chinese cultural values as well as the modern transformations of Chinese society. In particular, Eastern philosophical teachings tend to focus on changing personal inner perception and thoughts rather than attempting to change the environment. Although family obligations have been traditionally upheld, many parts of modern Chinese society are undergoing social and demographic changes, resulting in marked decline in multi-generational households. These findings can have applications not only for Chinese cities, but also may have implications to the West as strong well-established Chinese communities are widespread. (RH)


International Psychogeriatrics, vol 25, no 4, April 2013, pp 517-530.
Many minority ethnic (ME) older adults face several culturally associated and systemic barriers to timely dementia diagnoses that may result in delays to dementia care-seeking. The present study aimed to develop and propose a model illustrating variables that influence dementia care-seeking among ME older adults. The authors conducted a literature review on the effects of these barriers on diagnostic delays and impairment levels at initial evaluation. They also aimed to provide a basis for the Sociocultural Health Belief Model (SHBM) to guide future research and service planning pertaining to culture and dementia care-seeking. Study findings revealed consistent evidence that ME older adults with dementia tended to have greater diagnostic delays and higher levels of cognitive impairment and psychological symptoms of dementia at initial evaluation than their non-Hispanic White counterparts. Also several barriers to dementia care-seeking were found among ME groups. These barriers included lower levels of acculturation and accurate knowledge about dementia, more culturally associated beliefs about dementia, such as the perception of memory loss as normal ageing and stigma associated with dementia, and health system barriers. The SHBM provides an empirically based conceptual framework for examining cross-cultural differences in dementia care-seeking among diverse groups. The authors outline recommendations for future research, such as the need for research with more diverse ethnic subgroups and the examination of group-specific cultural values. The study concludes with a discussion of the clinical and service implications of this review, including potential interventions aimed at facilitating timely dementia diagnoses among ME older adults. (JL)


This inquiry brings together evidence and understanding about the experience of people with dementia from black, Asian and minority ethnic (BAME) communities. It finds that high quality services are few and far between, and many people receive too little support from the National Health Service (NHS) or local authorities. Service providers need to be sensitive to the cultural needs of communities who are assumed to "look after their own". An appendix provides case studies illustrating good practice examples of services that have been tailored to the needs of people with dementia from BAME communities. (RH)
In this review, the author identifies research which could offer insights into the challenges and experiences of people living with dementia and their family carers for black and minority ethnic (BME) communities. The article highlights evidence to support good practice for staff working these individuals and their families. (RH)
ISSN: 13518372
From : www.hawkerpublications.com

Mental health services for black and minority ethnic elders in the United Kingdom: a systematic review of innovative practice with service provision and policy implications; by Sarmishtha Bhattacharyya, Susan Mary Benbow.: Cambridge University Press, March 2013, pp 359-373.
The proportion of older people from black and minority ethnic (BME) groups in the United Kingdom is increasing steadily as the population ages. The numbers with dementia, depression and other mental health problems are predicted to increase. Government policy documents have highlighted gaps in services for BME elders and/or the need to develop culturally appropriate services in order to prevent people from BME communities from becoming socially excluded and finding services hard to access. This paper reviews published examples of innovative services and key learning points from them. Sixteen relevant papers and reports were identified and were analysed to identify learning points and implications for clinical practice and policy. Commissioning issues included were forward planning for continuing funding and mainstreaming versus specialist services. Provider management issues included were employing staff from the communities of interest, partnership and removing language barriers. Provider service issues included were education for service provider staff on the needs of BME elders, making available information in relevant languages, building on carers' and users' experiences and addressing the needs of both groups. A model for structuring understanding of the underutilisation of services by BME elders is suggested. The main emphasis in future should be to ensure that learning is shared, disseminated and applied to the benefit of all communities across the whole of the UK and elsewhere. Person-centred care is beneficial to all service users. (JL)
ISSN: 10416102
From : www.journals.cambridge.org/ipg

The objective of the present study was to describe the nutritional status of older Indigenous Australians, barriers to achieving optimal nutrition and the effectiveness of programmes aimed at improving nutrition in older Indigenous people in remote communities. A comprehensive literature review was undertaken including grey literature. Findings indicated that there is a scarcity of representative data on nutritional status and risk in older Indigenous people, and nutrition support programmes have not been evaluated. The study concludes that older Indigenous Australians suffer from poorer overall health and higher levels of overweight and obesity, and are at increased risk of poor nutritional status and malnutrition than the general population. This risk may be higher in remote areas. More representative data are needed to determine the nutritional status of older Indigenous people, including levels of malnutrition. Support programmes also need to be evaluated. (JL)
ISSN: 14406381
From : wileyonlinelibrary.com/journal/ajag

Palliative and end of life care for Black, Asian and minority ethnic groups in the UK: demographic profile and the current state of palliative and end of life care provision; by Natalia Calanzani, Jonathan Koffman, Irene J Higginson, Cicely Saunders Institute, King's College London. London: Marie Curie Cancer Care; Public Health England; King's College London, June 2013, 77 pp.
The End of Life Care Strategy highlights that inequalities still exist in the care that different groups of people receive at the end of life. This report uses data from the 2001 and 2011 Censuses to look at the current and projected profile of Black, Asian and Minority Ethnic (BAME) populations living in the UK by ethnicity, religion, language and characteristics of the foreign born population. Figures are provided separately for England, Wales, Scotland and Northern Ireland. The report examines the extent to which the BAME populations are expected to increase and grow older in the next few decades according to the most recent population projections. The report then draws on a review of the current literature on the state of palliative and end of life care provision for BAME groups. The focus is on access to, and receipt of care; also a recognition of the importance of social inequalities when analysing unmet needs. The report was commissioned by Marie Curie.


This study aimed to evaluate ethnic group differences in concerns, knowledge and beliefs about Alzheimer's disease (AD) in three ethnic groups of older adults - i.e. white, latino and black. The study was part of the Health and Retirement Study, a US national representative study of older adults over the age of 50 years and their spouse of any age. The study was based on the 2010 wave. Analysis was based on data from 939 white, 120 latino and 171 black respondents who completed a special module about AD concerns, knowledge and beliefs. There were significant ethnic differences on seven of 13 items. However after adjustment for education, gender, age, having a family member with AD, depressive symptoms and medical comorbidity, only four items showed significant ethnic group differences. Relative to white respondents, black respondents were less likely to report that having a parent or a sibling with AD increased the chance of developing AD and that genetics was an important risk for AD. In addition, relative to white respondents, both black and latino respondents were more likely to perceive stress as a potential risk for AD. Latino respondents were less likely to perceive mental activity as a protective factor. The study found limited ethnic group differences, with most items showing a similar pattern across groups. Nevertheless the nature of the ethnic group differences found might be associated with a differential pattern of health service use. (JL)

ISSN: 08856230
From: www.orangejournal.org


Ageing and Society, vol 33, no 3, April 2013, pp 437-464.

The authors use an intersectionality theoretical lens to interrogate selected findings of a scoping review of published and grey literature on the health and healthcare access of ethnic minority older adults. Their focus was on Canada and countries with similar immigrant populations and healthcare systems. Some 3,300 source documents were reviewed covering the period 1980-2010, of which 816 met the eligibility criteria; 183 were Canadian. Summarised findings were presented to groups of older adults and care providers for critical review and discussion. In this article, the authors discuss the extent to which the literature accounts for the complexity of categories such as culture and ethnicity. They recognise the compounding effects of multiple intersections of inequity that include social determinants of health, as well as the specificities of immigration; and they place the experience of these inequities within the context of systematic oppression. They found that Canada's two largest immigrant groups - Chinese and South Asians - had the highest representation in Canadian literature; but, even for these groups, many topic remain unexplored and the heterogeneity within them is inadequately captured. Some qualitative literature - particularly in the health promotion and cultural competency domains - essentialises culture at the expense of other determinants and barriers, whereas the quantitative literature suffers from oversimplification of variables and their effects, often due to the absence of proportionally representative data that captures the complexity of experience in minority groups. (RH)

ISSN: 0144686X
From: journals.cambridge.org/aso


Ageing and Society, vol 33, no 3, April 2013, pp 511-538.

Spirituality is positively linked to health and well-being in later life, particularly among older adults of black ethnic groups. However, definitions of spirituality in the literature have largely been theoretically informed, rather than based on the views of older people themselves. The authors examined the spiritual perspectives of Black Caribbean and White British older adults based on in-depth interviews with 34 individuals aged between 60 and 95 years. Their aim was to develop a spiritual typology to add to an understanding of the process of spirituality in later life. Findings showed that Black Caribbean older individuals mostly defined spirituality in relation to their belief in a transcendent God, whereas White British older individuals tended to draw upon a wider range of spiritual, religious or secular notions. A spirituality typology in later life captured four categories of relationship, between 'God to self', 'self to God', 'self to universe', and 'self to life'. The typology highlights the central role of ethnicity in shaping spiritual perspectives in later life, and identifies the multidimensional
nature of spirituality among older adults, reflecting in part a developmental process, albeit a process which is socially and culturally constructed. (RH)
ISSN: 0144686X
From: journals.cambridge.org/aso

2012

Cultural diversity and the mistreatment of older people in black and minority ethnic communities: some implications for service provision; by Alison Bowes, Ghizala Avan, Sherry Bien Macintosh.: Taylor and Francis, July/September 2012, pp 251-274.
Previous research on mistreatment of older people in black and minority ethnic communities has identified limited service responses and the need to consider mistreatment as an issue not only for individuals but also for families, communities and institutions. This study included qualitative interviews conducted with 28 service providers and with 58 people from a wide range of BME communities in Scotland. Following analysis of these interviews, a series of 7 focus groups involving community members and one involving service providers were conducted to explore the fit and gaps between the service providers' views and the community experiences. The findings show that clear gaps exist between service provision and people experiencing mistreatment due to structural and contextual factors; cultural factors had a relatively minor impact. (RH)
ISSN: 08946566
From: http://www.tandfonline.com

The author reports on the challenges and small breakthroughs of working with the south Asian community in Surrey, to increase awareness and understanding of dementia. The Friends with Dementia began at the Bradbury Resource Centre in Woking in 2009. (RH)
ISSN: 13518372
From: http://www.careinfo.org/

The authors review evidence indicative of the lack of awareness about dementia in black and minority ethnic (BME) communities. This lack of awareness appears to prevent help-seeking and for BME communities to be under-represented in dementia services. The Time to Change campaign (www.time-to-change.org.uk) is a national campaign launched in 2007 that aims to reduce stigma against mental health problems. The Older People's Mental Health service in Hampshire has been working with the campaign to target older adults, and has been developing ideas on how to tackle stigma and attitudes towards dementia and memory problems in the county's largest BME group, South Asians. (RH)
ISSN: 13603671
From: http://www.psige.org.uk

Diversity in older people and access to services: an evidence review; by Jo Moriarty, Jill Manthorpe, Age UK.: Age UK, 2012, 97 pp.
Age UK commissioned the Social Care Workforce at King's College London to complete a literature review on equality and diversity issues relevant to older people and access to services in the UK. The review was structured around the experiences of older people in terms of their protected characteristics as defined by the Equality Act 2010. The report covers the following service areas: falls prevention, home from hospital services, handyperson schemes, befriending and day opportunities. Each service area looks at equalities legislation and discrimination in relation to age and ageism, disability, gender reassignment, race, religion, gender and sexual orientation. The key conclusion of this scoping review is that despite the longstanding nature of equalities legislation in terms of sex, race and disability, the number of studies specifically designed to measure inequality in terms of these characteristics remains small. (JL)


This project explored the usability of the World Health Organisation, International Classification of Functioning, Disability and Health (ICF) for describing older Maori and non-Maori people's self-nominated important activities. Within a feasibility-for-cohort study, 112 participants, 33 Maori, aged 75-79 years, and 79 non-Maori, aged 85 years, nominated their three most important activities. Verbatim responses were coded using the ICF classifications and described using non-parametric statistics. Men and women mostly named domestic life, interpersonal relationships and recreation and leisure activities. While Maori frequently named extended family relationship activities as being most important, non-Maori named more recreation and leisure activities. The ICF is useful for classifying older New Zealanders' important activities, although some activities of older Maori were not specified in the original version used. While important activity patterns were similar for men and women, those related to ancestral connectivity and community collectivity were most important for Maori. (JL)
ISSN: 14406381
From: wileyonlinelibrary.com/journal/ajag

Perspectives on ageing in Gypsy families; by Pauline Lane, Siobhan Spencer, Muzelley McCready, Joseph Rowntree Foundation - JRF. York: Joseph Rowntree Foundation - JRF, January 2012, 12 pp (Perspectives).
This paper explores the views and experiences of older Gypsies, offering a glimpse into the past and reflecting on how the non-Gypsy community has influenced the Gypsy way of life. It forms part of a series of Perspectives commissioned to support the Joseph Rowntree Foundation (JRF) five-year research programme, A Better Life. The programme investigates what will improve quality of life for some of the most marginalised and least heard people in the UK - people with high support needs. (RH)

This paper explores the experiences and views of South Asian elders and their families living in Wolverhampton. It highlights cultural expectations and the challenges this community faces in terms of ageing and support needs. The paper forms part of a series of Perspectives commissioned to support the Joseph Rowntree Foundation (JRF) five-year research programme, A Better Life. The programme investigates what will improve quality of life for some of the most marginalised and least heard people in the UK - people with high support needs. (RH)

Productive activities and perceived well-being in an African American older adult urban sample; by Heehyul Moon.: Taylor and Francis, April-June 2012, pp 107-130.
Activities, Adaptation and Aging, vol 36, no 2, April-June 2012, pp 107-130.
Few studies have examined the relationship between productive activities and well-being among urban lower-income African American older adults. The purpose of this study was to examine (1) the pattern and prevalence of types and specific kinds of productive activities and (2) the association among sociodemographic data, individual capacity, kinds and levels of productive activity and well-being at the individual level. Approximately 12% of 531 respondents participated in employment, whereas 20% participated in volunteer activities. The majority of the respondents (99.4%) joined in leisure activities. More than 75% engaged in religious activities. The respondents also reported that they participated in various kinds of productive activities. Age, physical health status, perceived social support and perceived neighbourhood satisfaction were the most important regression predictors of perceived well-being. Higher levels of involvement in religious activities and leisure activities were related to a greater perceived well-being. (JL)
ISSN: 01924788
From: http://www.tandfonline.com

Racial/ethnic differences and correlates of binge drinking among older adults; by Ami N Bryant, Giyeon Kim.
This study looked at how the prevalence and correlates of binge drinking among older adults vary by race/ethnicity. A sample of adults aged 60 and above were selected from the 2007 California Health Interview Survey. Binge drinking was measured dichotomously based on whether individuals reported consuming five or more drinks in a single day (four or more for females) in the previous year. Prevalence rates for binge drinking
in the past year were calculated by race/ethnicity. A hierarchical logistic regression analysis was conducted using binge drinking in the past year as the dependent variable. Significant racial/ethnic differences were found in prevalence rates: the presence of binge drinking was most common among non-Hispanic Whites (11.9%), followed by Latinos (10.8%), American Indian/Alaska Natives (9.8%), Blacks (8.0%), and Asians (4.2%). Being a current smoker was found to be the strongest predictor of binge drinking and significant main effects were also found for being Black, being Asian, younger age, being male, being unemployed, having a higher poverty threshold, having better self-rated health, and having more psychological distress. Significant interactions between race/ethnicity and age, sex, employment status, educational attainment, smoking status, and self-rated health were found. These findings indicate that certain correlates of binge drinking vary significantly by race/ethnicity among older adults. Apparent racial/ethnic differences existed in the prevalence and correlates of binge drinking among older adults. Identification of more racial/ethnic specific predictors may be important for the development of ethnically appropriate intervention programmes. (JL)

ISSN: 13607863
From: http://www.tandfonline.com

2011

Assessment of dementia in ethnic minority patients in Europe: a European Alzheimer's Disease Consortium survey; by T Rune Nielsen, Asmus Vogel, Matthias W Riepe ... (et al).
A survey was conducted in clinical dementia centres in 15 European countries. Questionnaires focusing on different points in the clinical assessment of dementia in ethnic minority patients were mailed to leading dementia experts of the European Alzheimer's Disease Consortium. 36 centres from 15 countries responded to the survey. Ethnic minority patients were seen on a regular basis in 69% of these centres. The diagnostic evaluation was in accordance with evidence-based clinical guidelines in 84-100% of the centres, but most centres performed cognitive assessment with instruments that are only validated in Western cultures and frequently relied on family members for interpretation. Diagnostic evaluation of the patients was considered to be challenging in 64% of the centres, mainly because of communication problems and lack of adequate assessment tools. In general, there were few indicators of culturally sensitive dementia services in the centres. Results from this study show that the most challenging issues are communication problems and assessment of cognitive function where there is a need to develop specific tests for ethnic minority patients. (JL)
ISSN: 10416102
From: http://www.journals.cambridge.org/ipg

Care concerns for elders in Korean and Korean American communities; by Melen McBride, Gwen Yeo (guest editors).
Special issue featuring an editorial followed by five articles. Topics covered include community service use among Korean Americans with dementia; elder abuse and help seeking among Korean Americans; Korean American adult children's views on end of life care; Korean versions of the Lubben Social Network Scale; and the involvement of Korean American family caregivers in dementia research. (JL)
ISSN: 07317115
From: http://www.tandfonline.com

The challenges of conducting focus-group research among Asian older adults; by Kalyani K Mehta.
Ageing and Society, vol 31, part 3, April 2011, pp 408-421.
Last of four articles that together make up a special issue on research methodology and ageing. This paper investigates the value of focus groups as a data collection method in studies of older people with particular reference to those living in large cities in Asia. Some of the method's strengths derive from the interaction among older people with a shared history and lived experiences. Focus-group exchanges have the potential for inter-personal learning and reminiscence benefits. One difficulty with the method, however, is that many Asian people are inhibited about sharing personal problems in a group context. The paper draws from a number of studies in Singapore, and highlights the challenges of conducting focus groups with older participants. Ethical issues such as confidentiality, cultural sensitivities such as language and respect for religion and tradition are discussed. Also, lessons learnt from conducting research using the group setting are discussed. Culturally relevant responses to these challenges are offered which could be useful for future researchers in Asia. (JL)
ISSN: 0144686X
From: http://www.journals.cambridge.org/aso
The effect of kin, social network and neighbourhood support on individual well-being; by Bertha M N Ochieng. Health and Social Care in the Community, vol 19, no 4, July 2011, pp 429-437.
The research explored the effects of kin, social networks and the neighbourhood on an individual's well-being. The material was drawn from a broader study of Afro-Caribbean families on healthy lifestyles. Participants were a convenience sample 24 adolescents and 18 adults. Data was collected using in-depth ethnographic interviews conducted in the participants' homes. Findings indicated that the participants believed that being a member of a kin network provided protective support for their health and well-being. In addition, they preferred to live in neighbourhoods with a high concentration of people of the same ethnicity, despite the effects of neighbourhood deprivation such as poor housing and lack of services. However, participants believed that ethnic segregation led to marginalisation and further deprivation. The study concludes that health and social care practitioners need to incorporate ways to promote social support and community well-being models that emphasise family and community strengths. (JL)
ISSN: 09660410
From: http://www.ingentaconnect.com/content/bsc/hscc

The chief aim of this longitudinal study was to test and refine a new 22-item measure of computer technology attitudes designed specifically for older adults. Another aim was to replicate, on a much larger scale, the successful findings of a preliminary study that tested a computer technology training programme for older adults. 96 older men and women, mainly from ethnic minority backgrounds, were randomly assigned to the waitlist/control or the experimental group. The same six-week, one-on-one training was administered to the control subjects at the completion of their post-test. The revised (17-item) version of the Older Adults' Computer Technology Attitudes Scale (OACTAS) showed strong reliability: the results of a factor analysis were robust, and two analyses of covariance demonstrated that the training programme induced significant changes in attitudes and self-efficacy. Such results encourage the recruitment of older persons into training programmes aimed at increasing computer technology attitudes and self-efficacy. (JL)
ISSN: 0144686X
From : http://www.journals.cambridge.org/aso

Formerly: Ethnic Britain. The objective of this Directory is for people from all sections of the community to find employers, education and service providers that are committed to promoting equality and diversity. Equality Britain covers all aspect of equality: age, gender, disability, transgender status, race, religion and belief, sexual orientation. (KJ)
From : Pearson Press Limited, 2nd Floor, 42 Whitechapel, Liverpool L1 6DZ. Website: www.equalitybritain.co.uk/2010editorial.asp

Ethnicity and access to an inner city home treatment service: a case-control study; by Matthew Bookie, Martin Webber. Health and Social Care in the Community, vol 19, no 3, May 2011, pp 280-288.
Evidence suggests that people from black and minority ethnic groups are more likely to be diagnosed with a mental health problem and are disproportionately represented in mental health inpatient services. The aim of this study, undertaken in a large inner London borough, was to establish whether people of black ethnic origin had equal access to home treatment in a mental health crisis. The researchers selected a random sample of 240 inpatient episodes and compared them with a sample of 77 home treatment episodes over a 12 month period, comparing the circumstances and characteristics of people using the home treatment team and inpatient services. The study found no association between ethnicity and the likelihood of receiving home treatment as opposed to a hospital admission whilst in a mental health crisis, although the findings showed that when admitted to hospital people from black ethnic groups experienced significantly longer admissions than people of white British origin. The authors suggest that further research is required for the early discharge function of home treatment teams to evaluate whether this aspect of care is experienced differently by different ethnic groups. (JL)
ISSN: 09660410
From : http://www.ingentaconnect.com/content/bsc/hscc
Over- and under-diagnosis of dementia in ethnic minorities: a nationwide register-based study; by T R Neilsen, A Vogel, T K T Phung (et al).


The belief is held among dementia professionals in many European countries that dementia is under-diagnosed and under-treated to a greater extent among ethnic minorities than in the native population. This study compared the prevalence of register-based dementia in the largest ethnic minority groups in Denmark with the prevalence of register-based dementia diagnoses in the general Danish population. The study population consisted of 68,219 people aged 20+. A total of 1,734 dementia cases were identified. The mean age at diagnosis was 57.7 years (SD 16.2). Compared to the general population, there was a higher prevalence of dementia among those younger than 60 years, and a markedly lower prevalence of dementia among those aged 60+. Dementia is under-diagnosed to a greater extent among ethnic minorities in the age group 60+, but is over diagnosed in those younger than 60. Several factors may contribute to this pattern, including cultural differences in help-seeking behaviour and problems in navigating the healthcare system. Furthermore, cross-cultural assessment of dementia can be difficult because language barriers and cultural differences. (RH)

ISSN: 08856230

From: http://www.interscience.wiley.com/journal/gps

Partner or perish?: exploring inter-organisational partnerships in the multicultural community aged care sector; by Harriet Radermacher, Yoshitha Karunarathna, Nicci Grace, Susan Feldman.

Health and Social Care in the Community, vol 19, no 5, September 2011, pp 550-560.

This study examined the experiences of partnership between organisations and small community groups from Melbourne, Australia, who delivered community based support services to older people from culturally diverse backgrounds. It identified key factors that facilitated or hindered the formation, maintenance and effectiveness of partnerships within the ethnic and multicultural community aged care (EMCAC) sector. Participants included 14 individuals representing nine community and health service organisations who took part in semi-structured interviews. Interviewees reported that partnerships between organisations were necessary and beneficial within the EMCAC sector. Organisational capacity, access to information and guidelines, and the inequality experienced by smaller organisations were key issues identified by participants. The authors conclude that increasing organisational capacity and a reduction of the inequalities experienced through partnerships could be addressed through training and education about the nature of partnerships. (JL)

ISSN: 09660410

From: http://www.ingentaconnect.com/content/bsc/hscce

A systematic review of ethnicity and pathways to care in dementia; by Naaheed Mukadam, Claudia Cooper, Gill Livingston.


The purpose of the study was to review literature that explored the help seeking behaviours of people from minority ethnic (ME) groups with dementia and their families. Three quantitative and 10 qualitative papers were found to meet the inclusion criteria. Barriers to accessing specialist help for dementia included: not conceptualising dementia as an illness; believing dementia was a normal consequence of ageing; thinking dementia had spiritual, psychological, physical health or social causes; feeling that caring for the person with dementia was a personal or family responsibility; experiences of shame and stigma within the community; believing there was nothing that could be done to help; and negative experiences of healthcare services. The authors conclude that there are significant barriers to help seeking for dementia in ME groups. (JL)

ISSN: 08856230

From: http://www.interscience.wiley.com/journal/gps

Theorising about ageing, family and immigration; by Lynn McDonald.


This paper explores the ways in which social gerontological theories have explained the effect of ethnicity and immigration on older people. It explores how these theories can be used for further theory advancement without modifications to existing theories. The paper suggests that current theories do not have the capacity to capture the effects of immigration at the structural level and its link to the social, psychological and family levels, let alone ageing. The overriding complexity of ageing and immigration requires a long-term view and an integrating framework with multiple levels that can accommodate a variety of theoretical interests. The conclusions are that a life-course perspective can be used in different ways to further this theoretical agenda. These approaches allow everyone with the possibility for interdisciplinary theory building to advance the understanding of the lives of immigrant families. (JL)
Why do ethnic elders present later to UK dementia services?: a qualitative study; by Naaheed Mukadam, Claudia Cooper, Behzad Basit, Gill Livingston.

The study explored the link between attitudes to help-seeking for dementia and the help-seeking pathways among the minority ethnic (ME) versus indigenous populations in the UK. ME carers, in contrast to the indigenous population, tended to delay help-seeking until they could no longer cope or until others commented on the problems. They often thought that families should look after their own older relatives and a diagnosis alone was purposeless. This appeared to relate to beliefs about the etiology of cognitive impairment, negative beliefs about psychiatry and their sense of familial responsibility. ME carer beliefs were found to be an important barrier to early diagnosis. Further work should explore whether an intervention can modify these attitudes, so that families understand that a diagnosis may allow planning and avoidance of crises. (JL)

ISSN: 0144686X
From: http://www.journals.cambridge.org/aso

2010

Age, ethnicity and equalities: synthesising policy and practice messages from two recent studies of elder abuse in the UK; by Jill Manthorpe, Alison Bowes.

Social Policy & Society, vol 9, pt 1, April 2010, pp 255-266.

Two recent studies of elder abuse in the UK are located in current policy contexts of adult safeguarding. After describing the studies, the discussion draws out their central messages and identifies the challenges that the studies present to recent policy debates and innovations. These relate to the need to properly integrate both wider older people’s issues and issues of racism and ethnicity within developments in adult safeguarding policy, as well as social care services as the personalisation agenda advances. (KJ/RH)

ISSN: 14747464
From: http://www.journals.cambridge.org/spsdoi:10.1017/S1474746409990388

Black and minority ethnic older people and mental well-being: possibilities for practice; by Jill Manthorpe, Jo Moriarty, Martin Stevens (et al).


There is a shortage of examples of arrangements and practice approaches that focus on mental well-being in black and minority ethnic (BME) older people. This article draws on a practice enquiry bringing together accounts of social care practice across different social care settings from four parts of the UK, away from highly populated areas that have been the focus of most previous research. Over 80 practitioners, managers, older people and carers were interviewed over 2009-10. They described and reflected on the support for older people from BME backgrounds, particularly focusing on how they might promote mental well-being. (JL)

ISSN: 13663666
From: http://www.pierprofessional.com/wwopflyer/index.html

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

Care implications of an ageing ethnic population; by Jill Manthorpe.

Community Care, issue 1842, 4 November 2010, pp 32-33.

The aim of this study was to describe the likely changes in the age structure of black and other minority groups in England and Wales. This report uses data on fertility, mortality and migration to make some projections of the number and profile of older people from ethnic minorities. Findings reveal that The ethnic minority population of England and Wales will continue to be younger than the majority white population but by 2051 this difference will be less pronounced. There are already important differences between minority groups, with the Irish and Indian populations having "mature population structures", for example, and these differences may
increase. In contrast, the Bangladeshi population looks set to keep its comparatively young population profile. Despite the problems of making predictions, on the basis of this evidence there will be 2.4 million black and ethnic minority people aged 50 and over in 2016 in England and Wales; rising to 3.8 million by 2026 and 7.4 million by 2051. These are not all older people of course; indeed among them are likely to be many carers. But over the same time spans, there will be just over half a million black and minority ethnic people aged 70 and over by 2016, more than 800,000 by 2026 and that figure escalates to 2.8 million by 2051. In conclusion then, although it is difficult to make population predictions, we can use projections to think about the types and amount of support that may be needed by the growing numbers and proportions of BME older people and the contributions that they may make. (KJ)

ISSN: 03075508
From: www.communitycare.co.uk

A cross-sectional population-based study of elder self-neglect and psychological, health, and social factors in a biracial community; by XinQi Dong, Melissa Simon, Todd Beck (et al.).: Taylor & Francis, January 2010, pp 74-84.

Aging & Mental Health, vol 14, no 1, January 2010, pp 74-84.

Elder self-neglect is an important public health issue; however, its association with psychological, health, and social factors remains unclear. This study aimed to (1) examine the associations between self-neglect severity and psychological, health, and social factors; and (2) examine the racial/ethnic differences in these associations. The authors conducted a biracial population-based study in a geographically defined community in Chicago as part of the Chicago Health Aging Project (CHAP). The authors identified 1094 people who had been identified by the social services agency as suspected elder self-neglect from 1993 to 2005. Self-neglect severity was assessed on a 0-45 scale. The psychological, health, and social factors were assessed using Center for Epidemiological Studies of Depression (CESD), poor mental health, health status, unhealthy days, poor physical health, days away from usual activities, social network, and social engagement. Linear regression was used to assess associations between self-neglect and psychological, health, and social factors. Interaction terms (Self-neglect times Race) were used to assess the black (non-Hispanic black) and white (non-Hispanic white) differences in these associations. There were significant associations between self-neglect severity with health and social factors. After adjusting for confounders, greater self-neglect severity was associated with lower health status (PE = 0.001, p = 0.002), higher unhealthy days (PE = 0.139, p < 0.001), poor physical health (PE = 0.141, p < 0.001), and more days away from usual activities (PE = 0.120, p = 0.030). Interaction term (Self-Neglect times Race) indicates black compared with white older adults, had more days away from usual activities (PE = 0.321, p = 0.045) and lower social engagement (PE = -0.04, p = 0.003). Greater self-neglect severity is associated with lower levels of health and social wellbeing. These associations may be stronger for black than white older adults. (KJ/RH)

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From: http://www.tandfonline.com

Daily spiritual experiences in a biracial, community-based population of older adults; by Kimberly A Skarupski, George Fitchett, Denis A Evans (et al.).: Taylor & Francis, September 2010, pp 779-789.


The objectives of this study were to describe the levels of daily spiritual experiences (DSEs) in community-dwelling older adults, to compare the levels of spiritual experiences with the levels of prayer and religious service attendance, and to examine the demographic and psychosocial correlates of spiritual experiences. The data came from 6534 participants in the Chicago Health and Aging Project, an ongoing population-based, biracial (65% African American) study of the risk factors for incident Alzheimer's disease among older adults. A 5-item version of the Daily Spiritual Experiences Scale (DSES) was used in the study. Multivariable linear regression models were used to examine the relationship between sociodemographic and psychosocial factors and DSES scores. The majority of the participants reported having spiritual experiences at least daily. In the bivariate analyses, African Americans and women had higher DSES scores than Whites and men, respectively. Prayer and worship were moderately associated with DSES scores. In the multivariable analyses, African American race, older age, female gender, better self-rated health, and greater social networks were associated with higher DSES scores, while higher levels of education and depressive symptoms were associated with lower DSES scores. The authors observed high levels of spiritual experiences and found that the DSES is related to, but distinct from the traditional measures of religiosity. We found associations between DSES, demographic, and psychosocial factors that are consistent with the findings for other religiosity and spirituality (R/S) measures. Future research should test whether DSES contributes to our understanding of the relationship between R/S and health in older adults. (KJ)


Previous research in 2007 found that an in-home behavioural management programme, derived conceptually from cognitive behavioural theories (CBT), was effective in reducing caregiver related stress and depressive symptoms in Chinese American dementia caregivers (CGs). Results were promising, but a more cost-effective intervention is needed to serve this growing population. Past work also found that a psycho-educational videotaped training programme based on CBT was effective in reducing stress due to caregiving in Caucasian and African American dementia family CGs. To date, no research has been conducted using a technological medium to deliver a similar kind of intervention to Chinese American caregivers. The present study evaluated the effectiveness of a similar but culturally "tailored" programme in which 70 CGs were randomly assigned to a 12-week CBT skill training programme delivered on a DVD, or to a general educational DVD programme on dementia. Both were available in Mandarin Chinese or English as preferred. Pre- and post-change analyses indicated that CGs did not differ on change in level of negative depressive symptoms, but positive affect was higher, and patient behaviours were appraised as less stressful and bothersome, for CGs in the CBT skill training program. They were also more satisfied with the program overall and reported that they believed they were able to give care more effectively. Results encourage further development of theoretically based interventions, delivered using modern technology, for this ever-increasing group of CGs. (KJ/RH)

Ethnic differences in self-harm, rates, characteristics and service provision: three-city cohort study; by J Cooper, E Murphy, R Webb (et al).


Studies of self-harm in Black and minority ethnic (BME) groups have been restricted to single geographical areas, with few studies of Black people. The aim of this study was to calculate age- and gender-specific rates of self-harm by ethnic group in three cities and compare characteristics and outcomes. A population-based self-harm cohort presenting to five emergency departments in three English cities during 2001 to 2006. A total of 20574 individuals (16-64 years) presented with self-harm; ethnicity data were available for 75%. Rates of self-harm were highest in young Black females (16-34 years) in all three cities. Risk of self-harm in young South Asian people varied between cities. Black and minority ethnic groups were less likely to receive a psychiatric assessment and to re-present with self-harm. In conclusion, despite the increased risk of self-harm in young Black females fewer receive psychiatric care. These findings have implications for assessment and appropriate management for some BME groups following self-harm. (KJ)

Ethnic population projections for the UK and local areas, 2001-2051; by Pia Wohland, Phil Rees, Paul Norman (et al), School of Geography, Leeds University. version 1.03: Electronic publication, 12 July 2010, 185 pp (Working paper 10/02).

This is a revised version of a report presented on Monday 22 March 2010, at City Hall, Greater London Council to the Stakeholder Group for the ESRC Research Award, RES-165-25-0032 "What happens when international migrants settle? Ethnic group population trends and projections for UK local areas, 1 October 2007 to 31 March 2010." This Working Paper is an online publication and may be revised. The results described in this report are both provisional and experimental and should be cited as such. A BBC webpage (as at 13 July 2010) reports on the findings of the report (http://news.bbc.co.uk/1/hi/uk/10607480.stm).(KJ/RH)


This report, estimating the future older Black and minority ethnic population (BME), is part of a three-year Runnymede research programme on financial inclusion among older BME people funded by the Nationwide Foundation. Following an introduction on alternative projection methods, the report looks at the ethnic minority population of England and Wales 2007-10 and its age structure in 2007-12. Next, mid-year population estimates for 2001-2007 from the Office for National Statistics (ONS) are used to extrapolate and derive ethnic population
projections to 2026. The elements of ethnic minority cohort component population projection are examined, namely fertility, mortality, migration and transgenerational transfer. Next, starting from a base of the 2001 Census, ethnic minority cohort component population projections for 2016, 2026 and 2051 are made; these rely on assumptions previously made about fertility, mortality and migration. Population pyramids, tables and charts illustrate the likely composition of each ethnic group for these dates. Projections are made for the older ethnic minority population by age group (from age 50+) for every five years from 2001 to 2051. While the projections of ethnic minority numbers in this report are projections and not predictions, according to the author, by 2051, there will be 7.3 million ethnic minority residents of England and Wales aged 50+, with 3.8 million aged 65+, 2.8 million aged 70+, and more than a quarter of a million (259,000) aged 85+. However, given the large variation in the distribution of this population, this raises important issues for policy-makers and planners in those localities with greater concentrations. (RH)

From: Download available at: http://www.cpa.org.uk/information/reviews/reviews.html

Is there 'a' mixed race group in Britain?: The diversity of multiracial identification and experience; by Miri Song.
In contemporary British society, references to 'mixed race' people and to various forms of mixing abound. But to what extent can we say that there is 'a' mixed race group in Britain today? If such a group exists, what commonalities underlie the experience of being mixed? In addressing this question, the author draws on a study of the racial identifications of different types of mixed young people in Britain. Song finds that the meanings and significance of race and mixedness in these young people’s lives can vary considerably, both across and within specific mixed groups. In conclusion, Song argues that while there is evidence of a growing consciousness and interest in being mixed, we cannot (yet) speak of a coherent mixed group or experience in Britain. (KJ/RH)
ISSN: 02610183

Ready for retirement?: Pensions and Bangladeshi self-employment; by Phil Mawhinney, Runnymede Trust.
Many Black and minority ethnic (BME) people in the UK are in low income self-employment. They face challenges to saving and contributing to a decent pension and enjoying a retirement free from poverty. This report looks at the relationship between BME self-employment and pensions. It examines the level and type of pension provision people have and the barriers they face in light of reforms in the Pensions Acts 2007 and 2008. These reforms have been in response to an ageing population, lower annuities offered by company pension schemes, and the fact that people are less likely to prioritise personal savings than in the past. Automatic enrolment of employees into workplace pension schemes and changes to the state pension age (SPA) are central features of these reforms. Key issues are illustrated with examples from Runnymede’s research among Bangladeshi and other BME communities, as well as from official sources published by the Department for Work and Pensions (DWP) and the Office for National Statistics (ONS). This publication is part of the Runnymede Financial Inclusion Programme and funded by the Nationwide Foundation. (RH)
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The sensitivity of United Kingdom health-care services to the diverse needs of Chinese; by Ruby C M Chau, Sam Wai-Kam Yu.
This paper is a contribution to the debate on how to make health-care services in the United Kingdom more responsive to the needs of older people who are members of recent immigrant groups. The focus is on the Chinese-origin elders, and the objective is to demonstrate their diverse migrant histories, cultural backgrounds and attitudes to both ‘traditional’ and Western health-care practices. The underlying argument is that if National Health Service staff had a better understanding of the diversity of Chinese older people, this would make an important contribution to making the service more sensitive to their needs. To develop this argument, this paper carries out three main analytical tasks. The first is to discuss the range of strategies adopted by Chinese people in general and Chinese older people in particular to improve their health. The second is to study Chinese people’s heritage of exploring different methods to organise health in response to foreign culture. The third considers the ways in which the sensitivity of British health-care services to the needs of ethnic-minority groups can be improved, with a focus on the culturagram health screening instrument and procedure. Three contrasting examples are presented. (KJ/RH)
Social intervention for British Pakistani women with depression: randomised controlled trial; by R Gater, W Waheed, N Husain (et al).

British Pakistani women have a high prevalence of depression. There are no reported psychosocial interventions for depression in ethnic minorities in the UK. The aim of this research was to determine the efficacy of a social group intervention compared with antidepressants, and whether the combination of the two is more efficacious than either alone. A total of 123 women with depression participated in the primary care-based cluster randomised controlled trial (ISRCTN19172148). Outcome measures were severity of depression (Hamilton Rating Scale for Depression), social functioning and satisfaction at 3 and 9 months. Greater improvement in depression in the social intervention group and the combined treatment group compared with those receiving antidepressants alone fell short of significance. There was significantly greater improvement in social functioning in the social intervention and combined treatment groups than in the antidepressant group at both 3 and 9 months. Pakistani women with depression found the social groups acceptable and their social function and satisfaction improved if they received social treatment compared with the receipt of antidepressants alone. (KJ)

Towards an understanding of the cultural health needs of older gypsies; by Pauline Lane, Rachel Tribe.

This paper offers an introduction to understanding some of the issues that health and care practitioners might like to consider when supporting the health and well-being of gypsy elders. The significance of nomadic life and the implications of planning laws on the reported quality of life experienced by gypsy elders is essential to understanding their health needs. The paper also offers an introduction to understanding some of the aspects of health and social care provision that currently impact on the take up of health and care services by gypsy elders. It then makes suggestions about ways of offering services and working with gypsy elders in ways that are culturally appropriate and respectful of their traditions. The authors had the privilege of working with the Derbyshire Gypsy Liaison Group as part of a larger national project on working with black and minority ethnic elders to help improve their mental health. The authors do not claim to be experts on gypsy health, but are offering to share their learning as an introduction to understanding and meeting some of the cultural needs of gypsy elders when providing health and social care. (KJ/RH)

African American caregivers: an exploration of pathways and barriers to a diagnosis of Alzheimer's disease for a family member with dementia; by Travonia Hughes, Kenneth Tyler, Deborah Danner (et al).

Despite the significance of an early diagnosis of Alzheimer's disease (AD), African Americans are diagnosed in later stages of the disease and present with greater cognitive impairment at the time of diagnosis when compared to Euro-Americans. To this end, there exists a paucity of research on diagnostic pathways among African Americans with dementia. The present study examined the retrospective experiences of 17 African American caregivers who were given a diagnosis of Alzheimer's disease for a family member with dementia. Participants completed face-to-face semi-structured interviews. Study findings revealed a complex interplay between the patient with dementia, entities that comprise their social support network, and clinicians. (RH)

Ageing, ethnicity and psychiatric services; by Geetha Oommen, Jon Bashford, Ajit Shah.

In 2001, the Royal College of Psychiatrists (RCP) produced Council Report DR 103 which concluded that services for Black and minority ethnic (BME) elders had received little attention. The report also called for an urgent need to establish a reliable and informative database of good practice and increased research. It is currently under review by the College. This article attempts to set out some of the issues that remain, as well as newly identified ones. In particular, the article hopes to heighten awareness and raise debate about these issues and to link these with the College's Race Equality Action Plan. (RH)
Black-white disparities in disability among older Americans: further untangling the role of race and socioeconomic status; by Esme Fuller-Thomson, A Nuru-Jeter, Jack M Guralnik.


Data from the 2003 American Community Survey were used to examine the associations of education and income, stratified by race and gender, with functional limitations and activities of daily living (ADLs), in a sample of 16,870 non-Hispanic Blacks and 186,086 non-Hispanic Whites aged 55 to 74. Sequential logistic regressions were used to examine the relative contribution of income and education to racial disparities. 90% of the Black-White difference in disability rates for men and 75% of the difference for women aged 55 to 64 were explained by income and education. The greatly elevated risk of disability among Blacks aged 55 to 74 is largely explained by differences in socioeconomic status. Reductions in Black-White health disparities require a better understanding of the mechanisms, whereby lower income and education are associated with functional outcomes in older people. (RH)

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From: http://www.sagepublications.com

Comparison of elderly suicide rates among migrants in England and Wales with their country of origin; by Ajit Shah, James Lindsay, Mick Dennis.


Only two studies, both more than 10 years old, have compared suicide rates in black and minority ethnic (BME) groups in England and Wales with those of their country of origin. This study was conducted using the latest available suicide data from the Office for National Statistics (ONS) and the World Health Organization (WHO). There were wide variations in standardised mortality rates (SMRs) for suicides of older people among migrants from different countries compared with those born in England and Wales and their country of origin. There was convergence towards older suicide rates for England and Wales for some migrant groups in males in the age bands 65-74 and 75+ years and for females in the age band 75+ years. However, males aged 75+ from most migrant groups had higher rates than those born in England and Wales. A more detailed analysis of suicides of older people from migrant groups is required to determine vulnerability and protective influences. (RH)

ISSN: 08856230
From: http://www.interscience.wiley.com/journal/gps

Differences in psychological morbidity among Australian and Chinese caregivers of persons with dementia in residential care; by Helen Zong Ying Wu, Lee-Fay Low, Shifu Xiao (et al).


The aim of the present study was to determine the effects of culture on caregiver psychological morbidity among informal caregivers of institutionalised persons with dementia in three different populations: Shanghai, Australian-Chinese, and Australian mainstream (non-Chinese). Caregivers and residents with dementia were recruited from a dementia hospital in Shanghai, three ethno-specific Chinese nursing homes in Sydney, and four mainstream nursing homes in Sydney. Psychological morbidity was assessed using the Geriatric Depression Scale (GDS), mental health component (MHC) of the RAND-36 Health Status Inventory and a guilt scale. There were no significant differences between the three groups as measured by the guilt scale and MHC. Shanghai caregivers had higher mean depression scores than Australian-Chinese caregivers (p < 0.001), who in turn had higher mean depression scores than Australian mainstream caregivers (p = 0.015). Higher depression scores were found to be inversely associated with the caregiver’s education level and physical health status, and
associated with increased frequency of nursing home visits, but not with levels of behavioural and psychological symptoms of dementia (BPSD). Levels of depression in caregivers of institutionalised persons with dementia differ by culture and country of residence. (KJ/RH)

The different faces of care work: understanding the experiences of the multi-cultural care workforce; by Martha Doyle, Virpi Timonen.

An increased demand for long-term care services coupled with the decreased availability of informal (family) carers in many industrialised countries has led to the employment of growing numbers of ‘migrant care workers’. Little is known about this heterogeneous group or of their experience of employment in long-term care. Providing an important insight into a hitherto little researched and poorly understood topic, this article presents the findings of a qualitative study in Ireland that sought greater understanding of migrant carers’ experience of care work and of the intra-group differences among them. The findings suggest that some members of the workforce are more likely to confront obstacles and discrimination than others. The data indicate that the experiences of European, South Asian and African carers are significantly different, and that relationships may exist between carers’ region of origin and their experience of care work, employment mobility and long-term plans for remaining in the sector. The findings underscore the significance of acknowledging the unique barriers and obstacles faced by particular populations of care workers. A better understanding of the changing demographic profile and needs of both care recipients and their paid (migrant) care-givers is required to ensure that appropriate policy and practical interventions are developed to support both groups. (KJ/RH)

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

Early intervention in dementia care in an Asian community: lessons from a dementia collaborative project; by Viniti Seabrooke, Alisoun Milne.

The number of older Asians in the UK is increasing, placing greater numbers at risk of developing dementia. The emerging need to address early diagnosis is especially prominent in areas where Asian communities are long established. This was the specific focus of a Dementia Collaborative Project in North West Kent. The project, working through a primary care practice, aimed to raise awareness of dementia and to facilitate early intervention and access to specialist dementia services. Using an evaluation methodology adopted by the Collaborative and working through a multi-agency steering group, the pilot project successfully identified an appropriate primary care practice, established a link with a specially trained Asian nurse and devised a set of project materials. By inviting older Asian patients with memory problems to make an appointment with the nurse, and enclosing a culturally relevant information leaflet, older people were encouraged to come forward. Although the number of individual patients identified was small, the project outcomes include: significantly increased referral rates from black and minority ethnic communities to specialist services; and greater awareness of dementia-related issues in both primary care and Asian care services. Overall, the evaluation suggests that by engaging with a committed primary care practice it is possible to engage a hitherto marginal group of older people in early intervention in dementia and raise awareness about its benefits. That this approach underpins the development of a larger scale five year project in the same area additionally endorses its relevance for the mainstream population. (KJ/RH)

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From : Website: http://www.pierprofessional.com

Factors influencing the physical activity levels of older people from culturally-diverse communities: an Australian experience; by Stephen Bird, Harriet Radermacher, Susan Feldman (et al).

Ageing and Society, vol 29, part 8, November 2009, pp 1275-1294.
Inactivity has been identified as a major contributor to the burden of disease among older Australians, particularly those in culturally-diverse communities. This study assessed the facilitators and barriers to physical activity in older people from culturally-diverse communities, and investigated the predictors of physical activity participation by recruiting 333 older people from seven different communities in the western suburbs of Melbourne, Australia. A survey questionnaire that recorded physical activity and the barriers to and facilitators of activity was interviewer-administered in the participants’ preferred language. The data were analysed using bivariate and multivariate inferential statistical methods. Personal barriers to physical activity, such as poor health, lacking the energy to exercise, being too tired and low motivation, were highly prevalent in all groups. Specific factors, such as ‘being self-conscious about my looks’, were more prevalent among the Vietnamese, as were concerns about the weather among Macedonians and Croatians. Across all groups, perceptions of health
and safety strongly influenced physical activity behaviour, more so than the external environment. Some of the barriers can be addressed with a common approach, but others in some communities will require particular strategies. (KJ/RH)

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

An overview of the Equality Bill notes how the Bill, when enacted, will strengthen equality law on matters that include: reducing socio-economic inequalities; putting a new Equality Duty on public bodies; banning age discrimination outside the workplace; protecting carers from discrimination; and strengthening protection from discrimination for disabled people. Part 2 of this document outlines what the Bill means for people including those from ethnic minorities, disabled people, older people, and lesbian, gay, bisexual and transsexual people. (RH)

From: Government Equalities Office, 9th Floor, Eland House, Bressenden Place, London SW1E 5DU.

Focus group study of ethnically diverse low-income uses of paid personal assistance services; by Joseph T Mullan, Brian R Grossman, Mauro Hernandez (et al).
Home Health Care Services Quarterly, vol 28, no 1, 2009, pp 24-44.
This study examined the experiences of ethnically diverse, low-income consumers of paid personal assistance services (PAS) to understand the successes and problems they faced setting up and maintaining their assistance. A thematic analysis was conducted with transcripts from eight focus groups of 67 ethnically homogeneous consumers: African American, Latino, Chinese, Native American, and non-Hispanic white. These experienced consumers were generally satisfied with their current PAS but noted significant difficulties: getting access to appropriate care; obtaining enough paid care to avoid unmet need; and dealing with confusing bureaucracies and cultural differences between them and agency staff or attendants. They desired more control over their care, including the use of paid family attendants when possible. Respondents recommended improved screening and training of attendants, more attendant time, higher wages for attendants, improved cultural sensitivity of attendants and agency staff, and greater consumer control over PAS. Although these low-income PAS consumers are ethnically and geographically diverse, the similarity of findings points to their ongoing struggle to access adequate high quality assistance. The burden they have in obtaining and maintaining services is substantial. (KJ/RH)

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From: http://www.tandfonline.com

The influence of the built environment and other factors on the physical activity of older women from different ethnic communities; by Stephen Bird, William Kurowski, Susan Feldman (et al).
Inactivity has been identified as a major contributor to the burden of disease in older women. The aims of this study were: to assess the personal, social and environmental facilitators and impediments to physical activity in older women from different ethnic communities; and to determine the factors associated with physical activity participation. Older women (aged 60-84) were recruited from the local Italian (n=20), Vietnamese (n=26) and Anglo-Celtic (n=26) communities in the western suburbs of Melbourne, Australia. A survey questionnaire was administered in the participants' preferred language. The most common barriers were: "I am not in good health", "I am self-conscious about my looks", "I am too tired", "I don't have time", and "The weather is bad". When comparing the ethnic groups, the Vietnamese women reported fewer barriers than the Italian women (2.6 vs 5.9). While the Vietnamese women were much more likely to report being "self-conscious about my looks", the Italian women more commonly reported poor health, being too tired, and not liking exercise as barriers. Overall, those living alone were more likely to be active and those who reported fear of injury, less active. Recognising ethnoscopic differences in the prevalence of barriers may be important when devising strategies to increase older women's activity levels. (RH)

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From: http://www.tandfonline.com

Journal of Dementia Care, vol 17, no 4, July/August 2009, pp 16-18.
Religious beliefs and cultural norms can determine what medicines are acceptable to individuals and the circumstances in which they should or should not be taken. The authors offer some considerations for
Negotiating candidacy: ethnic minority seniors' access to care; by Sharon Koehn.
The Barriers to Access to Care for Ethnic Minority Seniors (BACEMS) study in Vancouver, British Columbia found that immigrant families torn between changing values and the economic realities that accompany immigration cannot always provide optimal care for their elders. Ethnic minority seniors further identified language barriers, immigration status, and financial awareness of the roles of the health authority and of specific service providers as barriers to health care. The configuration and delivery of health services and healthcare providers' limited knowledge of the seniors' needs and confounded these problems. To explore the barriers to access, the BACEMS study relied primarily on focus group data collected from ethnic minority seniors and their families, and from health and multicultural service providers. The applicability of the recently developed model of "candidacy", which emphasises the dynamic, multi-dimensional and contingent character of health care access to ethnic minority seniors, was assessed. The candidacy framework increased sensitivity to ethnic minority seniors' issue and enabled organisation of the data into manageable conceptual units, which facilitated translation into recommendations for action, and revealed gaps that pose questions for future research. It has the potential to make Canadian research on the topic more co-ordinated. (RH)
ISSN: 0144686X
From: http://www.journals.cambridge.org/aso

Older Latina women are one of the least studied American demographic groups with regard to social, health or sexual behaviour. This could leave social workers and other professionals unprepared for dealing with HIV/AIDS in this population. Currently older Latina women are one of the fastest growing groups of new AIDS cases. 22% of all women ever diagnosed are Latina, and 5.5% of Latinas infected with the virus are older. The number of diagnosed infections is increasing in older women, including Latinas, in spite of recent declines in infection rates with younger population groups. There is also a potentially large number of cases that go misdiagnosed or undiagnosed. This article also addresses risk and protective factors related to gender roles, traditional Latino family values, religion, socioeconomic factors, health and health care, with special attention to the triple jeopardy faced by this population by virtue of being female, seniors and minorities. The article concludes with recommendations for the development of culturally competent practices with older Latinas and the development of a research agenda to better understand their risk-related and health-seeking behaviour. (KJ/RH)
ISSN: 01634372
From: http://www.tandfonline.com

Older women's perceptions of elder maltreatment and ethical dilemmas in adult protective services: a cross-cultural, exploratory study; by Emily Dakin, Sue Pearlmutter.: The Haworth Press, Inc., 2009, pp 15-57.
IN this study, older African American, Latina and Caucasian women from varying socioeconomic backgrounds participated in eight focus groups that examined their perceptions of elder maltreatment and three ethical dilemmas within adult protective services work: mandatory reporting, involuntary protective services, and criminalisation of elder maltreatment. Participants espoused a broad and inclusive view of elder maltreatment. In responding to illustrative case scenarios, participants strongly favoured protection over freedom, by supporting mandatory reporting and involuntary protective services. Also supported was criminalisation of elder maltreatment. This article presents results of each scenario and broad themes across the study, with attention paid to areas of consistency and difference across ethnicity and socioeconomic categories. (RH)
ISSN: 08946566
From: http://www.tandfonline.com

The authors used data from the older African American subsample of the National Survey of American Life (n = 837) to examine the sociodemographic and denominational correlates of organizational religious involvement
among older African Americans. Six measures of organizational religious participation were used, including two measures of time allocation for organized religious pursuits. Significant gender, regional, marital status, and denominational differences in organizational religiosity were found. Of particular note, although older Black women generally displayed higher levels of religious participation, older Black men spent more hours per week in other activities at their places of worship. The findings are discussed in relation to prior work in the area of religious involvement among older adults. New directions for research on religious time allocation are outlined. (KJ/RH)

ISSN: 01640275
From: http://www.sagepub.com

Perceptions of active ageing in Britain: divergences between minority ethnic and whole population samples; by Ann Bowling.
Age and Ageing, vol 38, no 6, November 2009, pp 703-710.
Perceptions of, and associations with, active ageing among ethnically diverse and homogeneous samples of older people in Britain were identified, using cross-sectional and longitudinal surveys of older people living at home in Britain. Measures used were active ageing, health, psychosocial, socio-economic circumstances, and indicators of quality of life. Respondents defined active ageing as having health, fitness, and exercise; psychological factors; social roles and activities; independence, neighbourhood and enablers. The ethnically diverse sample respondents were less likely to define active ageing as having physical health and fitness, and were less likely to rate themselves as ageing actively, than more homogeneous sample respondents. The lay-based measure of quality of life used was independently and consistently associated with self-rated active ageing in each sample. Policy models of active ageing were reflected in lay views, although the latter had a more multidimensional focus. Lay definitions of active ageing were also more dynamic, compared with definitions of quality of life and successful ageing. Differences in self-rated active ageing and perceptions of this concept by ethnic group need further exploration. (KJ/RH)

ISSN: 00020729
From: http://www.ageing.oxfordjournals.org

Race differences in emotional adaptation of family caregivers; by Kimberly A Skarupski, Judy J McCann, Julia L Bienias (et al.).: Taylor & Francis, September 2009, pp 715-724.
This study compares black and white caregivers of people with Alzheimer’s disease (AD) on two general measures of negative and positive emotion (depressive symptoms, positive mood) and two caregiving specific measures of negative and positive emotion (caregiver burden, caregiver satisfaction). The authors hypothesised that black caregivers would exhibit lower levels of negative emotion and higher levels of positive emotion over time than whites. 396 caregivers were recruited from the Rush Alzheimer’s Disease Center in Chicago, Illinois, as part of a longitudinal study of people with AD. The analyses for this report are based on data from 307 caregivers who were interviewed quarterly over approximately 4 years from 1999 to 2002, an average of nine observations per person. The results showed that black caregivers reported fewer depressive symptoms over time than whites, but this finding was only for those caregivers living with the care recipient with AD. No race differences were found for measures of positive emotion. The data adds to the growing body of evidence that black people have better emotional outcomes when exposed to the stress of providing informal care to a disabled family member. (KJ/RH)

ISSN: 13607863
From: http://www.tandfonline.com

Racial-ethnic differences in subjective survival expectations for the retirement years; by Jennifer Roebuck Bulanda, Zhenmei Zhang.
Previous research finds a race anomaly in subjective life expectancy, such that Blacks expect to live longer than Whites, even though their actual life expectancy is lower, but it does not include other racial-ethnic groups. Using data from the 1998 (US) Health and Retirement Study (n = 8,077), the authors find that the race anomaly in subjective survival expectations can be extended to Mexican Americans. Mexican Americans, regardless of their nativity, expect a lower chance of living to ages 75 and 85 than do Whites net of age and gender, even though their actual life expectancy is higher. In addition, foreign-born Mexican Americans expect a lower chance of survival to older ages than native-born Mexican Americans, which is also the opposite of actual mortality patterns. The authors also find that education and wealth interact with race and ethnicity to influence subjective survival expectations. (KJ/RH)
Religiousness, social support and reasons for living in African American and European American older adults: an exploratory study; by Andrea June, Daniel L Segal, Frederick L Coolidge (et al.).: Taylor & Francis, September 2009, pp 753-760.
This study examined the relationship between religiousness, perceived social support, and reasons for living among 37 European American (mean age 67.7 years) and 35 African American (mean age 71.1 years) older adults, where ethnicity was predicted to behave as a moderator. Community-dwelling participants completed the Brief Multidimensional Measure of Religiousness/Spirituality, the Multidimensional Measure of Perceived Social Support, and the Reasons for Living Inventory. As expected, high religiousness was associated with more reasons for living. Ethnicity alone did not meaningfully account for variance differences in reasons for living, but significant interactions indicated that the relationship between religiousness and reasons for living was stronger for African Americans, whereas the relationship between social support and reasons for living was stronger for European Americans. The present findings may be valuable for understanding potentially modifiable pathways to suicide resilience in diverse populations of older adults. (KJ/RH)
ISSN: 13607863
From: http://www.tandfonline.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

The objective of this study was to collate evidence regarding the prevalence and predictors of dementia or relative cognitive impairment in older, African-Caribbean people in Britain, as compared to their white, British peers. A systematic literature review was undertaken by searching electronic databases, contacting experts in the field and searching the references of identified papers for studies fulfilling the predefined inclusion criteria. They were divided into those measuring the prevalence or incidence of dementia or cognitive impairment, and those investigating risk factors. Each study selected for inclusion was evaluated by two of the three authors using a standardised checklist and assigned a numerical score for quality. Eleven papers fulfilled the selection criteria. Two cross-sectional surveys had calculated prevalence of dementia in a sample of British African-Caribbean people. A further prevalence study had estimated dementia prevalence in a mixed sample of African and African-Caribbean participants. All the comparative studies found an excess of dementia in African-Caribbean people when compared to the indigenous white population, but in one study, this was not statistically significant. Seven studies investigated potential predictive factors for cognitive impairment or cognitive decline. One study investigated the association between hypertension, dementia and country of birth. The published
research in this area is limited. The available studies consistently indicate an excess of dementia in older African-Caribbean people when compared to the indigenous white population. However, the magnitude of this difference and the associated risk factors are not clear, and warrant further investigation. (KJ/RH)
ISSN: 08856230
From: http://www.interscience.wiley.com/journal/gps

Theory-based policy development for HIV prevention in racial/ethnic minority midlife and older women; by Robin J Jacobs, Michael N Kane.
In 2008, there were more than a million people with HIV/AIDS in the United States. The Centers for Disease Control (CDC) 2007 estimates that 15% of people with HIV/AIDS are aged over 50. At greater risk are women of colour. Most intervention efforts have focused on intrapersonal aspects of an individual and his or her sexual-risk behaviours, with little or no attention directed towards interpersonal and socio-environmental considerations of risk and prevention. This paper considers the limitations of current US national policies relating to HIV prevention in minority populations, especially among midlife and older women of colour. In particular, it examines the risk and prevention policies in light of ecological perspectives, social capital and dialogical theories. (RH)
ISSN: 08952841
From: http://www.tandfonline.com

Understanding older men and their male friendships: a comparison of African American and white men; by Geoffrey L Greif.
Friendships can lead to longer and healthier lives. Yet little is known about how older men, particularly African American men, define and carry out their friendships with other men. This article presents the findings from qualitative interviews with 23 African American and 23 White older men who were part of a larger study. The subjects were asked whether friendships are important; whether they have enough male friends; how they define, carry out, and maintain their friendships; and the nature of their fathers’ friendships. Comparisons are drawn between the African American and White men. Implications for social work practice are included. (KJ/RH)
ISSN: 01634372
From: http://www.tandfonline.com

Using the Barnes Language Assessment with older ethnic minority groups; by Victoria Ramsey, Susan Stevens, Karen Bryan (et al).
There are many issues concerning the assessment of older people from ethnic minority groups, the most significant being the language barrier experienced by those whose English is an additional language (EAL). This study aimed to test the hypothesis that EAL participants would score less well than those with English as a first language (EFL) on the sub-texts of the Barnes Language Assessment (BLA), elucidate the reasons for any such differences, and discuss the implications. The BLA was administered to 144 participants divided into subgroups with respect to age, gender and educational background, most of whom had a working diagnosis of dementia. Subjects with English as a first language (EFL) and English as an additional language (EAL) perform differently on the Barnes Language Assessment. The differences are mainly related to levels of education. Difficulties were found in recruiting subjects from ethnic minority groups. The consequences of this and other factors are discussed. (RH)
ISSN: 08856230
From: http://www.interscience.wiley.com/journal/gps

'We are not blaming anyone, but if we don't know about amenities, we cannot seek them out': black and minority older people's views on the quality of local health and personal social services in England; by Jill Manthorpe, Steve Iliffe, Jo Moriarty (et al), Older People Researching Social Issues (OPRSI).
Improving access to culturally-appropriate services and enhancing responses to the needs of older people from black and minority ethnic backgrounds were among the aims of the National Service Framework for Older People (NSFOP) that was introduced in England in 2001. Progress in meeting the aims of the NSFOP was evaluated by a mid-term independent review led by the Healthcare Commission, the body responsible for regulating health-care services in England. This paper reports the consultation with older people that underpinned the evaluation. It focuses on the views and experiences of older people from black and minority ethnic (BME) groups and of the staff that work in BME voluntary organisations. A rapid appraisal approach was
used in 10 purposively selected local councils, and plural methods were used, including public listening events, nominal groups and individual interviews. In total 1839 older people participated in the consultations and 1280 (70%) completed a monitoring form. Some 30% defined themselves as of a minority ethnic background. The concerns were more about the low recognition of culturally-specific and language needs than for the development of services exclusively for BME older people. (KJ/RH)

ISSN: 0144686X
From: http://www.journals.cambridge.org/aso

What do community-dwelling Caucasian and South Asian 60-70 year olds think about exercise for fall prevention?: by Maria Horne, Shaun Speed, Dawn Skelton (et al).
To identify salient beliefs that influence uptake and adherence to exercise for fall prevention among community-dwelling Caucasian and South Asian 60-70 year olds in the UK, the authors undertook an ethnographic study using participant observation, 15 focus groups (n=87; mean age 65.7), and 40 Individual semi-structured interviews (mean age 64.8). This qualitative study showed that both Caucasian and South Asian young older adults are generally not motivated to initiate or maintain exercise purely to help prevent falls. Both Caucasian and South Asian young older adults tend not to acknowledge their risk of falls. More similarities than dissimilarities seem to exist between Caucasian and South Asian older adults in their beliefs about falls and exercise for fall prevention. Fall prevention should not necessarily be the focus of health promotion strategies, but the peripheral benefits of exercise and leading active, healthy lifestyles should be promoted. (RH)
ISSN: 00020729
From: http://www.ageing.oxfordjournals.org

In this volume, eight essays by academics point to the paradoxical and hypocritical ways in which the ruling classes speak for the white working class on the one hand, and how they speak about them on the other. Themes examined are: class in the 21st century; education and educational underachievement; the racialisation of "chav" and "hoodie" youths by the media; social class relations; social and council housing provision; and representations of the "indigenous white working class". The last essay considers to whom the white working class is losing out in housing, health and other service provision - and it is to the wealthier rather than to migrants or other minority ethnic groups. (RH)

Working towards promoting positive mental health and well-being for older people from BME communities; by Rachel Tribe, Pauline Lane, Sue Heasum.
Working with Older People, vol 13, issue 1, March 2009, pp 35-40.
This article identifies some of the key issues that need to be considered when trying to promote positive mental health and well-being in older people from black and minority ethnic (BME) communities. The authors say that while developing a cultural understanding is important for providing good care for BME elders, it is also important to recognise that a number of structural and organisational issues that go beyond language or culture can affect health and access to care. The article also promotes the significant role of voluntary sector organisations in developing culturally appropriate mental health promotion services for BME elders. Two such projects are described: the 'Meri Yaadan' Dementia Project which raises awareness and promotes access to mental health services for South Asian elders in Bradford; and the Bangladeshi Mental Health Promotion Project in Tower Hamlets. (RH)
ISSN: 13663666
From: http://www.pavpub.com

Working with older people from black and minority ethnic groups who have depression: from margin to mainstream; by Jill Manthorpe, Jo Moriarty.
Despite the growing evidence base about depression and anxiety and its application to service settings and practice, we are short of practice examples about what works and for whom. This applies to older people in general but particularly to groups, such as people from black and minority ethnic backgrounds. This article discusses policy and legislative encouragements to think about equality of access and diversity issues in mental health services and wider mental health promotion activities. It analyses recent research and policy documents in the context of demographic change and practice. It argues that the context of personalisation in England may provide new opportunities to consider what older people will find most acceptable and effective in meeting their
needs, but notes the challenges that this will bring to community-based organisations and specialist services. (RH)

ISSN: 14717794
From: http://www.pavpub.com

Your home, your choice: your options, where to get help and what to do next; by Age Concern England - ACE. London: Age Concern England, [January 2009], 11 pp (ACIL31).
Age Concern publishes free information on a range of issues affecting older people. This leaflet explains some of the main issues around housing for older people in South Asian communities. It identifies what help or accommodation, and suggests questions to ask when considering moving house. The information in this leaflet is applicable to people aged 60+ who live in England and Wales. (RH)
Price: FOC

2008

This paper reports the evaluation of the effectiveness of incentives (viz points and prizes) and of peer-group organisers (older people's champions) in the outcomes of a health promotion programme for people aged 50+ in Sandwell, a multi-ethnic metropolitan district of the West Midlands. Health promotion activities were provided, and adherence, outcome variables and barriers to adherence were asked over 6 months, using a "passport" format. Those aged in their fifties and of Asian origin were under-represented, but people of Afro-Caribbean origin were well-represented and proportionately most likely to stay in the project. Those of greater age and with more illness were most likely to drop out. There were significant improvements in exercise, diet and the uptake of influenza vaccines and eyesight tests, but slighter improvements in well-being. Positive outcomes related to the incentives and to liking the format. The number of reported barriers was associated with lower involvement and lack of change, as was finding activities too difficult, the level of understanding, and transport and mobility problems, but when these were controlled, age did not predict involvement. Enjoying the scheme was related to positive changes, and this was associated with support from the older people's champions. (RH)
ISSN: 0144686X
From: http://www.journals.cambridge.org/ASO

According to the 2001 Census, there are some 6.7 million minority ethnic people living in the UK (11.8% of the total population). The relatively young age structure of minority ethnic groups means that they are the fastest ageing groups within the population. The number of minority ethnic older people in the UK is also set to increase quite rapidly, as those who migrated to the UK in the 1960s and 1970s reach retirement age. This digest focuses on specific themes: health and social care; housing; and income security, employment, poverty and pensions. It also identifies four cross-cutting issues relevant to these themes: discrimination and racism; information, isolation and access; financial inequality; and consultation and engagement. (RH)
Price: £9.99
From: PRIAe, 4th Floor, 31-32 Park Row, Leeds LS1 5JD. E-mail: info@priae.org Webstie: www.priae.org

Family carers are the most important source of dementia care, especially among ethnic minority populations, who are less likely to access health or social services. The evidence base on the carer experience in these communities is profoundly limited. The aim of this study was to explore the caregiving attitudes, experiences and needs of family carers of people with dementia from the three largest ethnic groups in the UK. It was a qualitative study, using a grounded theory approach. In-depth individual interviews were conducted with 32 carers of people with dementia (10 Black Caribbean, 10 south Asian, 12 White British). Results showed that carers were identified as holding 'traditional' or 'non-traditional' caregiver ideology, according to whether they conceptualised caregiving as natural, expected and virtuous. This informed feelings of fulfilment, strain, carers' fears and attitudes towards formal services. The majority of the south Asian, half of the Black Caribbean and a minority of the White British participants were found to possess a traditional ideology. The findings suggest that
specific cultural attitudes towards the caregiving role have important implications for how carers can best be supported. (KJ/RH)
ISSN: 00071250
From: http://bjp.rcpsych.org

Back to work after incapacity benefit: differences between ethnic minority and native Dutch workers; by Erik Snel, Frank Linder.
Contemporary pleas for an activating welfare state and social security system emphasize that getting benefit claimants back to work is more important than providing income compensation for social risks connected with unemployment or illness. The Dutch system of incapacity benefits, however, is far removed from this normative ideal of a proactive social security system. Resumption of work after a spell of incapacity benefit is the exception rather than the rule. This article examines possible ethnic differences in resumption of work following incapacity benefit. A unique register data file is used from Statistics Netherlands that contains information about all incapacity benefit claimants in the Netherlands in 1999. In the analysis, these benefit claimants are followed for three years and their labour market position examined as in 2002. It was found that resumption of work after incapacity benefit is even more the exception for migrant workers with a Turkish or Moroccan ethnic background. Contrary to the authors' assumption, this difference from native Dutch workers can be explained by unfavourable personal characteristics of Turkish or Moroccan benefit claimants - their personal characteristics (gender, age, low educational level) appear to be rather favourable for resumption of work. In the current literature, these differences in outcomes between ethnic groups are often attributed to certain 'ethnic-specific' or cultural factors. This article argues that we should be careful of explaining different outcomes between ethnic groups by (alleged) cultural phenomena. There are other explanations possible such as differences in work motivation, lack of 'transition facilities' in companies, and differential treatment by employers or social security officials. (KJ/RH)
ISSN: 01445596

Belonging in Britain: black older people's experiences of a sheltered housing scheme in London; by Audrey Allwood.
The author's research entitled “The negotiation of belonging among long-term West Indian migrants residing in a sheltered housing scheme in Brixton, London”, examined the intricacies of identity and placement. The Supporting People Framework governs this BME supported housing scheme within the Council's equalities ethos. Allwood's research sample of 26 women and men aged between 60 and 86 were working-class migrants who had moved to England in the 1950s and 1960s. Influenced by Gramsci's (1990) ideas about the involvement of ordinary people in social change, and Bhabha's (1994) idea of placement, Allwood investigated how the elders, assisted by others who acted on their behalf, negotiated their place in British society as recipients of support services, and engaged in consultation and user involvement processes. Both conflicting and supportive service provision arose. This created shifting boundaries in relation to belonging that emerged between the elders, their place of birth, their formative culture and their on-going engagement with new experiences, other groups and the state. (KJ/RH)
ISSN: 14608790
From: Website: http://www.pavpub.com

Challenges of recruitment and retention of older people from culturally diverse communities in research; by Susan Feldman, Harriet Radermacher, Colette Browning (et al).
The substantial and increasing number of older Australian people from culturally diverse backgrounds justifies the investigation and inclusion of their experiences in ageing research. However, few empirical studies have examined culturally diverse issues in the older population, in part because of the particular challenges in recruiting and retaining people from different cultural backgrounds. This article reflects on a research team's experience of recruiting participants from seven cultural groups into a study that sought to explore the links between physical activity and the built environment. Three key issues from recruiting and retaining participants were identified: having access to key local informants; the central role of paid and trained bilingual interviewers; and supporting the research partners in recruitment activities. Furthermore, it appeared that a "one size fits all" approach was not appropriate and that a flexible recruitment strategy may be required to ensure successful recruitment from all cultural groups. The differences observed in this study relating to recruitment and retention rates may be more dependent on the skills and characteristics of those responsible for the recruitment and interviewing, rather than the specific cultural group itself. Older people from some cultural
backgrounds may be less likely to respond to traditional recruitment methods. Researchers need to be more assiduous and strategic to improve participants' rates in research. (RH)
ISSN: 0144686X
From: http://www.journals.cambridge.org/ASO

Familism is considered to be a cultural value shared by different Hispanic groups. The familism scale (FS) was developed in 1987 as a self-report measure of this construct, and three dimensions were obtained through exploratory factor analysis: family obligations, perceived support from the family, and family as referents. This study assesses the underlying factor structure of the FS using confirmatory factor analysis (CFA) in a sample of 135 Spanish caregivers. The original model did not fit the data well. Five items with factor loadings below 0.40 were trimmed. The fit indexes for the remaining items suggest a good fit of this model and an acceptable internal consistency index. The results suggest that the modified factor model for the FS has acceptable psychometric properties for a sample of dementia caregivers. (RH)
ISSN: 13607863
From: http://www.tandfonline.com

Depressive symptoms in four racial and ethnic groups: the Survey of Older Floridians (SOF); by Yuri Jang, David A Chiriboga, Giyeon Kim (et al).
Responding to the need for research on the mental health of older people from ethnic and racial minority groups, the present study explored determinants of depressive symptoms using a statewide sample of African Americans, Cubans, non-Cuban Hispanics and Whites from the Survey of Older Floridians (SOF). The investigators focused on direct and interactive effects of demographic variables and stressful life conditions (chronic health conditions, functional disability, and negative life events) on depressive symptoms. A hierarchical regression model showed that lower income, more chronic health conditions, greater disability, and more life events were common risk factors for depressive symptoms across all groups. The impacts of age and education were found to be group specific. Significant interactions were also obtained among predictor variables for each group, identifying risk-reducing and risk-enhancing factors within each group. The findings of race-specific risk factors and within-group variability should be taken into consideration when developing and implementing services for diverse older populations. (RH)
ISSN: 01640275
From: http://www.tandfonline.com

Ethnic differences in patterns of social exchange among older adults: the role of resource context; by Katherine L Fiori, Nathan S Consedine, Carol Magai.
Using social capital and social exchange theories, this investigation examined ethnic variation in patterns of social exchange in two heterogeneous racial groups - Blacks and Whites in the US - and the effects of education and income on these patterns. The sample was 1043 people aged 65-86 from four ethnic groups (US-born European-Americans, immigrant Russians or Ukrainians, US-born African-Americans, and immigrant English-speaking Caribbeans) who had provided details of their instrumental and advice exchanges with kin and non-kin. Hierarchical multinomial logistic regressions were used to predict patterns of social exchange, variations by ethnicity, income and education, and the interactions. Ethnic differences to patterns of social exchange were found, but almost all were qualified by interactions. Those with income showed within-group heterogeneity: African-Americans and Russians/ Ukrainians with higher income were more likely to engage in reciprocal instrumental kin exchange, whereas among English-speaking Caribbeans and European-Americans such exchanges were not associated with income. Unlike among European-Americans and English-speaking Caribbeans, Russians/ Ukrainians with higher income and education were more likely to engage in reciprocal non-kin exchange. The findings suggest that ethnic variation in social exchange reflects both aspects of ethnic group membership and the radical context, as well as the enactment of reciprocity values in varying resource contexts. (RH)
ISSN: 0144686X
From: http://www.journals.cambridge.org/ASO


The Telephone Interview of Cognitive Status (TICS) and the Short Portable Mental Status Questionnaire (SPMSQ) are compared and contrasted. The empirical questions considered are whether the TICS over-represents African American (AA) cognitive impairment (CI) relative to the SPMSQ, if there are age differences in CI prevalence between younger subjects (ages 50-64) and older ones (age 65+), and on accuracy to detect CI in individuals with higher levels of education (13 or more years) versus those with lower education levels (less than 13 years). A secondary data analysis was performed on 396 AA participants from the Carolina African American Twin Study on Aging (CAATSA). The SPMSQ measured CI prevalence at 10.3% and the TICS at 45%. Within the younger group, TICS and CI prevalence was 49.3%, and 80% in the older group. Within the younger group, SPMSQ and CI prevalence was 14.5%, and 53.8% among the older group. Within the higher educated group, TICS and CI prevalence was 36.7%, and 51.4% among the lower educated. Within the higher educated group, SPMSQ and CI prevalence was 7.7%, and 14.5% among the lower educated. Findings are consistent with the authors' hypothesis that the TICS would be a less accurate assessor of CI in African Americans. (RH)

ISSN: 13607863

From: http://www.tandfonline.com

The extent and impact of depression on BME older people and the acceptability, accessibility and effectiveness of social care provision; by Nadira Sharif, Walt Brown, Deborah Rutter, Social Care Institute for Excellence - SCIE; Social Care Workforce Research Unit at King's College London.: Social Care Institute for Excellence - SCIE, December 2008, 94 pp (Adults' services systematic map report 03).

Systematic maps aim to describe the existing research literature on a broad topic area and also highlight any gaps. This report focuses on depression in older people from black and minority ethnic (BME) communities to consider three map questions. First, what is the extent and impact of depression in older people from BME communities in the UK? Second, are there barriers to recognition of depression for these groups? Lastly, what social care provision is available for BME older people with depression; and is this provision acceptable, accessible and effective, and does it promote well-being? From an initial 3,038 unique records identified in searches of databases covering health, the 60 studies included in the map were focused on depression, implied depression or maintaining mental health. More than half had been undertaken in urban locations such as London and Bradford; and 43 were about exploration of relationships or correlations between different factors. The authors find that, despite the coverage of broad issues on depression in BME older people, the map highlights considerable gaps. For example, there were no evaluations of the effectiveness of social care interventions. The appendices include: definitions of key map terms; the inclusion/exclusion criteria; the search strategies employed for each database used; keywording tools (i.e. other attributes); and a list of references used in the systematic map. The systematic map is available as a searchable database of citations (http://epiioe.ac.uk/webdatabases) and has been developed in partnership between SCIE information managers and research staff, and a team from the Social Care Workforce Research Unit at King's College London. (RH)

From: SCIE, Fifth floor, 2-4 Cockspur Street, London SW1Y 5BH. www.scie.org.uk
Financial inclusion and ethnicity: an agenda for research and policy action; by Omar Khan, Runnymede Trust.

Education, employment and housing are identified as the key areas relevant to black and minority ethnic (BME) communities' experiences of disadvantage that may affect their financial inclusion. Discussion of five aspects of financial provision - banking, credit, insurance, savings and advice - serves to help in distinguishing between poverty-related exclusion and ethnicity-related exclusion. This review also considers whether some financial products and services are compatible with social justice. The author lists 24 points for further research and policy action involving the aforementioned points, together with issues around pensions, risk and assets. International case studies are presented as appendices. (RH)

Price: £11.95
From: The Runnymede Trust, 7 Plough Yard, Shoreditch, London EC2A 3LP. E-Mail: info@runnymedetrust.org Electronic version available at: www.runnymedetrust.org


Depression is typically considered relative to individuals, and is thought to originate from both biological and environmental factors. However, the environmental constraints and insults that African Americans experience likely influence the concordance by age and gender for depression scores among older African American twins. 102 monozygotic (MZ) and 110 dizygotic (DZ) twins aged 25-88 in the Carolina African American Twin Study of Aging (CAATSA) were examined using the 11-item version of the CES-D measure of depressive symptomatology. Those participants with scores above 9 were considered depressed. Overall, the MZ pairs had a higher concordance than the DZ pairs, implying genetic influence. Both DZ and MZ males had higher concordance than either female zygotic groups. The differences between the concordance rates for MZ and DZ twin pairs was greater in males than females. By age group, the difference between concordance rates for younger MZ and SZ twin pairs was much larger than for older pairs. The results suggest that even though African Americans may be at risk for depression due to contextual environmental factors, genetic influences remain important. (RH)

ISSN: 13607863
From: http://www.tandfonline.com

"Get active today": a culturally sensitive physical activity programme for BME elders: end of project report; by PRIAE - Policy Research Institute on Ageing and Ethnicity. abridged version: PRIAE (Electronic format only), 2008, 6 pp.

The Policy Research Institute on Ageing and Ethnicity (PRIAE) has published the report of a three-year project to promote physical activity among black and minority ethnic (BME) elders. It recommends that: BME elders are offered support by professionals, carers and families; easily accessible information is provided; needs of different faiths and cultures are considered; and community champions are identified. A DVD demonstrating a range of culturally sensitive physical activities for older people can be ordered online. (KJ/RH)


The health and social care experiences of black and minority ethnic older people; by Jo Moriarty, Race Equality Foundation - REF. London: Race Equality Foundation - REF, July 2008, 8 pp (Better Health Briefing 9).

In their own ways, the National Service Framework for Older People (NSF) and the Race Relations (Amendment) Act 2000 have required public bodies to improve services to black and ethnic minority (BME) communities. This briefing paper reviews literature and research conducted in the last ten years which comment on the barriers to using services and attitudes of professionals experienced by ethnic groups. It also points to a growing body of evidence about what BME groups want from services: good quality services and more engagement with users. Although good services exist, it has been difficult to bring them into the mainstream. The briefing suggests other online resources on research, policy and practice relevant to BME older people's needs. (RH)

Price: FOC

In this secondary data analysis of the US Primary Care Research in Substance Abuse and Mental Health for the Elderly (PRISMe) study, it was hypothesised that older minorities who received mental health services integrated in primary health care settings would have greater service use and better mental health outcomes than older minorities referred to community services. 2022 primary care patients aged 65+ were identified (48% minorities), who met study inclusion criteria and had either alcohol misuse, depression and/or anxiety. They were randomised to receive treatment for these disorders in the primary care clinic or to a brokerage case management model that linked patients to community-based services. Service use and clinical outcomes were collected at baseline, 3 months and 6 months post randomisation on all participants. Access to and participation in mental health substance abuse services was greater in the integrated model than in referral; there was no treatment by ethnicity effects. There were no treatment effects for any of the clinical outcomes. Whites and older minorities in both integrated and referral groups failed to show clinically significant improvement in symptoms and physical functioning at 6 months. While providing services in primary care results in better access to and use of these services, accessing these services is not enough for securing adequate clinical outcomes. (RH)
ISSN: 08856230
From: http://www.interscience.wiley.com

The author notes the main reports on housing for black and minority ethnic older people that have been published since 1984. A recurrent theme has been the lack of awareness of BME older people’s housing needs, and that the requirement for specialist sheltered housing fulfils only part of such need. One possible solution is the provision of extra care housing, and this article cites a few examples of good practice in meeting minority ethnic housing needs. Further information sources are suggested. (RH)
ISSN: 14608790
From: Website: http://www.pavpub.com

Outcome-focused services for older people from minorities; by Social Care Institute for Excellence - SCIE. Community Care, issue 1729, 3 July 2008, pp 34-35.
Reviews of Asian and other minority ethnic people in care homes and of social care for blacks show that older people from minority ethnic groups value services that respect their cultural background. The Social Care Institute for Excellence (SCIE) analyses some research findings behind social work practice and their outcomes in respect of change, maintaining health, well-being and quality of life, and service process outcomes. Short abstracts are presented for four items that have a focus on older people from minorities, published variously by the Policy Research Institute on Ageing and Ethnicity (PRIAE), the Improvement and Development Agency (I&DEA), the Care Services Improvement Partnership (CSIP), and the journal, Health and Social Care in the Community. (RH)
ISSN: 03075508
From: http://www.communitycare.co.uk

Consistent observation of raised rates of psychoses among black and minority ethnic (BME) groups may possibly be explained by their lower socio-economic status. The East London First Episode Psychosis Study (ELEEP), a 2-year population-based study of DSM-IV psychotic disorder in individuals aged 18-64 in East London tested whether risk of psychoses remained elevated in BME populations compared with the White British. All BME groups had elevated rates of a psychotic disorder, after adjusting for age, gender and socio-economic status. For schizophrenia, risk was elevated for people of black Caribbean and black African origin, and for Pakistani and Bangladeshi women. Mixed White and Black Caribbean, and White other groups had elevated rates of affective psychoses and other non-affective psychoses. Elevated rates of psychoses in BME groups could not be explained by socio-economic status, even though current socio-economic status may have overestimated the effect of the confounder given potential misclassification as a result of downward social drift in the prodrome phase of psychosis. These findings extended to all BMR groups and psychotic disorders, though heterogeneity remains. (RH)
Race, socioeconomic status, and health in life-course perspective: special issue; by Scott M Lynch (ed).
Research on racial inequalities in health has increasingly linked socioeconomic status (SES) and health. For a long time, it has also been assumed and now established that a large proportion of Black-White disparity in health is attributable to SES differences between races. The five articles in this special issue of Research on Aging apply statistical techniques to longitudinal data (cross-sectional or panel) in order to test the cumulative disadvantage hypothesis - the propensity for health inequalities to increase across the life course because of the double disadvantage of age and minority status. The first article, by Jason L Cummings and Pamela Braboy Jackson, describes results of a descriptive investigation of trends in self-rated health by sex, race and SES in the US General Social Survey (GSS). Next, Katrina L Walsemann et al used a longitudinal study investigating the relationship between educational advantage in youth and health in middle age. The third article (Kim M Shuey and Andrea E Willson) uses data from the US Panel Study of Income Dynamics (PSID) to examine cumulative disadvantage and Black-White SES disparities in health. Fourthly, Miles G Taylor uses the Duke Established Populations for Epidemiological Studies of the Elderly (EPESE) to focus on disability differentials by race and to some extent SES in later adulthood. Lastly, Li Yao and Stephanie A Robert use the Americans' Changing Lives Study (ACL) to examine the contributions of race, individual SES and neighbourhood socioeconomic context on older people's self-rated health trajectories and mortality. Overall, the articles demonstrate that the relationship between race, SES and health are complex, and that this complexity is increased because the interrelationships are dynamic across age and time. (RH)

ISSN: 01640275

The effects of arthritis-related stress and chronic life stress on depressive symptoms were examined among African Americans and Whites with arthritis. Participants included 155 African American and White women aged 45-90 who completed structured questionnaires assessing arthritis-related stress (i.e. pain, functional impairment, perceived stress), chronic life stress (i.e. discrimination, financial stress, life stressors) and well-being (i.e. depressive symptoms). African Americans reported more functional impairment and lower perceived arthritis stress, but more life stressors, financial stress, and discrimination, than Whites. Arthritis strain accounted for similar proportions of variance in depressive symptoms across African Americans and Whites. However, chronic stressors explained significantly more variance among African Americans. Findings demonstrate the importance of considering contextual factors influencing women's health and well-being, particularly for those women with a chronic illness, including arthritis. Although arthritis-related stressors may be the predominant factors affecting well-being for Whites with arthritis, well-being for African Americans with arthritis is also closely tied to broader life stressors. Results suggest the importance of looking beyond illness-specific stressors when studying ageing and health. (RH)

ISSN: 10795014

Racial differences in suicidality in an older urban population; by Carl I Cohen, Yolonda Coleman, Robert Yaffee (et al).
Epidemiological data for older African American and Caucasians living an urban community were used to compare those factors associated with active or passive suicidal ideation in each racial group. The authors used 1990 census data for Brooklyn, New York and they attempted to interview all cognitively intact adults aged 55+ in randomly selected block groups, a sample comprising 214 White and 860 Blacks. George's social antecedent model was adapted to examine 19 independent variables; the dependent variable was based on lifetime history of active or passive suicidal ideation (hereafter suicidality). The sample was weighted by race and gender; and to control for sampling design effects, SUDAAN was used for data analysis. White reported higher prevalence than Blacks for current suicidality (5.8% vs 2.3%) and lifetime suicidality (14.8% vs 10.2%). None of the differences were significant. In logistic regression analysis conducted for each race, four variables were associated with suicidality for both races: higher depressive symptom scores; higher anxiety symptom scores; copes by using medications; and lower religiosity. Two variables were associated with suicidality only among Whites: higher use of spiritualists; and copes by keeping calm. One variable, greater use of doctors for mental health problems, was significant only among Blacks. There were no racial differences in the prevalence of
suicidality. Virtually all the factors associated with suicidality are potentially ameliorable - by tackling anxiety and depression, and when appropriate, by encouraging various coping strategies or religiosity. (RH)

ISSN: 00169013
From: http://www.geron.org

The relationship between reported problems falling asleep and cognition among African American elderly; by Alyssa A Gamaldo, Jason C Allaire, Keith E Whitfield.
Analyses were conducted on 174 older independently living, community dwelling African Americans (mean age 72.74; range 65 to 90), to examine the relationship between their cognitive performance and self-reported trouble falling asleep. Cognitive performance was measured using the Mini Mental State Examination (MMSE), Forward Digit Span task, Backward Digit Span task, Alpha Span task, and California Verbal Learning Test. Results suggest that individuals who reported trouble falling asleep tended to perform significantly worse than those not reporting trouble with falling asleep on measures tapping short-term memory and working memory after controlling for age, education, gender, depression, and current health. These results demonstrate that a self-report of sleep difficulty may be a unique predictor of cognitive performance. (RH)

ISSN: 01640275

Strategic approaches for older people from black and minority ethnic groups; by Jill Manthorpe, Jess Harris, Sheila Lakey, Social Care Workforce Research Unit, King's College London; Better Government for Older People - BGOP. London: Better Government for Older People - BGOP, July 2008, 78 pp.
In 2004, Better Government for Older People (BGOP) reported on a survey of UK local authority strategies for black and minority ethnic (BME) older people. The survey found that only a third of local authorities had approaches underway to meet BME older citizens' needs and interests; an additional third were considering the first steps and would welcome assistance, whilst the remainder had no plans. This guide is part of BGOP's commitment to developing work in this area, and has been produced with the support and involvement of Help the Aged and the Care Service Improvement Partnership (CSIP). It is adapted from the framework offered by the Audit Commission and BGOP in 'Older people - independence and well-being: the challenge for public services' (2004) for developing comprehensive strategic approaches to all older people. It consists of seven inter-related dimensions: a strategic approach; commitment and leadership; partnership and whole systems working; a picture of the local population of older people; involving older people; communication and information; and evaluation and impact. In common with other BGOP publications, the guide is based on the values of citizenship. (RH)

ISBN: 0954648161
From: Better Government for Older People, 25-31 Ironmonger Row, London EC1V 3QP.Website: www.bgop.org.uk

Suicidal thoughts among elderly Taiwanese Aboriginal women; by Cheng-Sheng Chen, Mei-Sang Yang, Ming-Jan Yang (et al).
1347 older Taiwanese aboriginal women were enrolled, and their suicidal thoughts within the previous month, demographic data, adverse life events, emotional social support and depressive state were assessed. The 1-month prevalence of suicide thoughts among these community-dwelling older aboriginal women was calculated as 17.8%. Also estimated were the risks of suicide thought based on individual, family and community aspects. Those subjects with poorer self-perceived health, difficulty in accessing medical resources or experiencing marital discord were at higher risk of having suicidal thoughts. After controlling for depression, the odds ratio of self-perceived health and marital discord remained statistically significant. The odds ratio of interaction of marital discord and emotional social support was 0.41. Suicidal thoughts are common among the community-dwelling older Aboriginal women in Taiwan. Risk factors for suicidal thoughts comprise individual (depression and physical condition), family (marital discord) and community (medical resources) aspects. Better emotional and social support and effectively buffer the effect of marital discord. (RH)

ISSN: 08856230
From: http://www.interscience.wiley.com

Depression and lower cognitive functioning are common conditions in older populations. While links between psychopathology and neuropsychological performance have been studied in the White majority population, little is known about such links in the American Indian population. 140 American Indians aged 60+ completed
structured interviews that included a depression screener and two cognitive screening measures, the Mini Mental State Examination (MMSE) and the Morris Dementia Rating Scale (MDRS). Participants had mean values of 26.7/30 on the MMSE and 125.8/144 on the MDRS. The depression screen was not associated with the MMSE or MDRS total scores. However, older American Indians who screened positive for depression scored lower than did those American Indians who screened negatively for depression (27.7 versus 29.8 respectively) on the MDRS conceptualisation sub-scale after adjusting for the sociodemographic and health variables. The combined effects of psychopathology and cognitive impairment are likely to adversely affect the health and welfare of American Indians and their families. More research is needed to provide a better understanding of the relationship between psychopathology and cognition that will help inform clinical treatment for psychopathology in older ethnic minorities. (RH)

ISSN: 13607863
From: http://www.tandfonline.com

The aim of the Runnymede Perspectives series is to engage with government and other initiatives through exploring the use and development of concepts in policymaking, and analysing their potential contribution to a successful multi-ethnic Britain. This report explores the reporting - and the semantic meaning transmitted through reporting - of violent crime in relation to the ethnicity of both victim and perpetrator. It is divided into two sections, the first of which deals with the methodology and theoretical perspectives relevant to the data - particularly the concepts of culture, community and ethnic identity. Section II comprises analysis of "race" and violent crime in the media, 1 May - 30 June 2007. It inspects leaders, comments and opinion; examines press coverage of reports from the House of Commons Home Affairs Committee and the Metropolitan Police Authority (MPA); explores how notions of "culture" and "community" inform violent crime reporting; and narrows the focus to gangs and teenage murders. The influence of the media on the criminal justice system (CJS) as a whole is discussed. (RH)

'They ought to do this for their parents': perceptions of filial obligations among immigrant and Dutch older people; by Helga A G de Valk, Djamila Schans.
Filial obligation refers to a societal attitude that prescribes a duty of (adult) children to meet the needs of their ageing parents. This paper first questions how and to what extent perceptions of filial obligation are determined by ethnic background, or are attributable to socio-demographic factors. Second, the authors study how filial obligations among immigrant older people differ by level of acculturation. Data from the main and migrant samples of the Netherlands Kinship Panel Study (1002-2003) for respondents aged 50-80 in five ethnic groups are used. The analysis sample included 470 Dutch, 70 Turks, 70 Moroccans, 125 Surinamese and 59 Antilleans. Immigrant background was found to be an important determinant of the perception of a child's obligations towards parents. Immigrant elders generally expected more weekly visits and care from their children, and more facilitation of co-residence to parent than was the case for the Dutch. Among older people in all ethnic groups, including the Dutch, the attained level of education was related to perceptions of filial obligation, but marital status and current health status were not. Finally, it was found that different aspects of acculturation were related to the perception of filial obligations among older people with Mediterranean and Caribbean background. (RH)
ISSN: 0144686X
From: http://www.journals.cambridge.org/ASO

This research has been commissioned by the Equality and Human Rights Commission (EHRC) to examine the likely future pension incomes of disabled people and people from ethnic minorities. Overall, it finds that disabled people and people from ethnic minorities have many of the characteristics that are associated with lower pension incomes. If current trends continue, they are likely to have lower pension incomes in future than the traditionally-employed median-earning male. The research uses data from the Family Resources Survey 2005/06 and the Quarterly Labour Force Survey, April to June 2007 (both supplied by the UK Data Archive, University of Essex). (KJ/RH)
From: Download from website:
The White-Black disability gap revisited: does an incident heart attack change this gap?; by Mihaela A Popa, Laurence G Branch, Ross Andel.

A myocardial infarction (MI) results typically in abrupt functional deterioration immediately post-event, followed by recovery. The post-MI health disparities experienced by black older people may be attributable to the social and health correlates of race. The authors explored patterns of change in functional status in a community-based sample of 342 older whites and blacks admitted to hospital for an incident MI, drawn from the Established Populations for Epidemiologic Studies of the Elderly (EPESE). All those who had been hospitalised between the first two wave of data collection were followed up yearly for two additional years. Although there were no non-linear differences in activities of daily living (ADL) trajectories, there was a faster non-linear rate of change in functional limitation (FL) in older blacks compared to white, independent of other social and health factors. The baseline white-black gap in FL widened after the MI by the first follow-up, continued to widen at a less accelerated pace until the second follow-up, and narrowed by the third follow-up. Disparities in relevant social and health factors did not account for the more abrupt deterioration in FL post-event or for the more substantial recovery in older blacks compared to whites. Disparities in therapeutic strategies and the "survival of the fittest" may underlie the pattern of this white-black gap in FL after an incident MI. (RH)
ISSN: 10795006
From: http://www.geron.org

2007

Adaptation to chronic vision impairment: does African American or Caucasian race make a difference?; by Charla A McKinzie, Joann P Reinhardt, Dolores Benn.
The purpose of this research was to determine whether race had a significant unique impact on adaptation to a common late-life impairment, age-related vision loss, after accounting for socio-demographic, health, functional disability, and personal and social resource variables. Older visually impaired African American (n=61) and Caucasian (488) applicants for vision rehabilitation service were interviewed in their homes. The results demonstrated that race accounted for unique variability in the domain-specific indicator of adaptation to age-related vision loss. The results support the importance of further work examining race differences in adaptation to specific chronic impairments in later life. (RH)
ISSN: 01640275

This briefing report was commissioned by Age Concern England (ACE) on behalf of the BME Elders Forum. The aim is to provide an overview of the black and minority ethnic (BME) population in England and Wales focusing on specific characteristics - age, gender, geographical distribution, religion and informal carers. For the age 65+ BME population, the report also considers health status (including the incidence of diabetes). Projected future trends in the BME population are assessed for BME people aged 50-65. The report gives a breakdown of ethnic differences for the age 65+ population. The report has been compiled primarily using data from the Standard Tables from the 2001 Census. (RH)
From: Age Concern England, Astral House, 1268 London Road, London SW16 4ER.
http://www.ageconcern.org.uk/bmeelders

Alone and confused: community-residing older African Americans with dementia; by Dorothy F Edwards, John C Morris.
Dementia: the international journal of social research and practice, vol 6, no 4, November 2007, pp 489-506.
Despite significant increases in the number of adults who live alone, little is known about adults with cognitive impairment who live without co-resident caregivers. In this study, the authors examined demographic, cognitive, and functional characteristics and service use patterns of a sample (n=343) of older community-residing African Americans with dementia who were referred for assessment. Of this group, 179 (52%) lived alone. Adults who lived alone were compared with those who had co-resident caregivers to determine differences in cognitive and functional status and formal service use. Comprehensive multidisciplinary assessment included diagnosis and staging of dementia, status evaluation of activities of daily living (ADLs) and instrumental activities of daily living (IADLs), and informal and formal support. Adults living alone had significantly more caregivers than those with co-resident caregivers. Neighbours and friends were more common primary care providers for live-
alone adults. A significant proportion of adults had inadequate care, given their cognitive and functional deficits. Although formal service use was low in both groups, live-alone adults were more likely to receive social services than were adults with a co-resident caregiver. Predictors of formal service use included the presence of a caseworker, Medicaid certification, mild dementia and living alone. The results indicate the need for better identification of, and supportive services for, older African Americans with dementia who live alone. (KJ/RH) ISSN: 14713012

From: http://dem.sagepub.com/

"Beyond silent organisations": a reflection of the UK Chinese people and their community organizations; by Chak Kwan Chan, Bankole Cole, Graham Bowpitt.

The UK Chinese community has long been perceived as having a high degree of solidarity and self-sufficiency. On the other hand, it is argued that the sense of community and mutual help among Chinese people has been weakened by their competitive approach to business. This study is based on an ESRC-funded national study of UK Chinese people's help-seeking behaviour, "The UK Chinese people: diversity and unmet needs". It found that Chinese people - both where their populations are dispersed or concentrated - actively formed organisations to meet their social and cultural needs. However, Chinese organisations were weakened by inadequate resources and the diverse needs of different Chinese groups. Thus, the UK Chinese people were neither self-sufficient nor isolated from each other. The experiences of Chinese organisations further show that in spite of government expectations of community organisations, state input has been mainly in terms of regulations and control. Without financial support, UK Chinese organisations will slip from being weak organisations into "silent" ones. (RH) ISSN: 02610183

From: http://csp.sagepub.com

Black and minority ethnic people and mental health in Britain: an holistic approach; by Parveen Marrington-Mir, Annette Rimmer.

This paper challenges the medically dominated mental health orthodoxy in Britain. It advocates an integrated community development approach underpinned by anti-racist, empowering practice. It offers successful practice examples of a holistic, self-governed mental health system for black people in Britain. The paper draws on the philosophy of social action and Ubuntu, the African model of collective support, and arguments for empowerment and participation. Together, these influences form the basis of community development work in Britain and globally. (KJ/RH) ISSN: 14769018

From: http://www.pavpub.com

Cross-cultural validation of the London Handicap Scale and comparison of handicap perception between Chinese and UK populations; by Raymond See Kit Lo, Timothy Chi Yui Kwok, Joanna Oi Yue Cheng (et al).

The concept of handicaps of limitation in participation is universally recognised. Utility ratings of most handicap scenarios apply consistently across mainland Chinese, Hong Kong and UK populations. Cultural and socio-economic differences in valuation of perceived handicap have been noted. The authors report on validation of the London Handicap Scale (LHS) with 201 Sichuan Chinese (mean age 63.3) comprising healthy (31.8%) and disabled individuals with stroke, fracture, cancer or other chronic conditions (69.2%) recruited to the study. Overall ratings for health scenarios were found to be highly correlated between Sichuan Chinese and UK subjects and between Sichuan Chinese and UK Chinese subjects, with one exception. Interesting differences in valuation were also observed between Sichuan sub-groups in three scenarios. Self-perceived health status of the Sichuan Chinese can be accurately reflected by the severity of their handicap as measured by the LHS. For Sichuan Chinese, the economic domain of handicap was related with poorer scores compared with the other domains. Overall, the LHS proved to be valid and applicable in the older population of mainland China. (RH) ISSN: 00020729

From: http://www.ageing.oupjournals.org

Equality, diversity and housing: future prospects; by Darshan Matharoo, Sarah Davis.

This article looks at the importance of community-based organisations in delivering culturally sensitive services to black and minority ethnic (BME) groups, and how the pressures of efficiency may challenge this approach and the viability of small providers. It explores some ways in which providers and commissioners are trying to
In a study based on the 1983 and 1996 waves of the Aging in Manitoba study, a self-report measure of ethnic background was used to categorise participants into four groups: British/Canadian, Northern/Central European, Eastern European, and Other. In both 1983 and 1996, older Eastern Europeans had significantly reduced odds of rating their health as good or excellent relative to British/Canadians. Controlling for demographic variables, socioeconomic status, language spoken, and health status attenuated but did not eliminate the difference. Global, subjective ratings of health are frequently used to measure health. The ethnic differences found here suggest, however, that ratings may be influenced by cultural factors, which may warrant some caution in making comparisons across ethnic groups. (RH)
ISSN: 08982643
From: http://www.sagepublications.com

Research by Ken Clark of the University of Manchester and Stephen Drinkwater of the University of Surrey examines the labour market performance of Britain's ethnic minorities. The emphasis is on the diversity of experience and the dynamic change in the relative positions of ethnic groups between 1991 and 2001. The study uses microdata from the 1991 and 2001 Census, supplemented by Labour Force Survey (LFS) data, focusing on the following ethnic groups: white, Black Caribbean, Black African, Indian, Pakistani, Bangladeshi and Chinese. While some groups have improved their labour market position relative to white people, substantial disadvantage remains, both in access to jobs and in earnings once in employment. These findings outline the results on employment, self-employment, and occupational attainment and earnings. The researchers' full report (same title) is published by the Policy Press on behalf of the Joseph Rowntree Foundation (JRF). (RH)
ISSN: 09583084

Ethnicity, health and health care: understanding diversity, tackling disadvantage; by Waqar Ahmad, Hannah Bradby (eds).
As an area of study, the sociology of ethnicity and health has developed more rapidly in Europe than in the US. This issue of Sociology of Health & Illness presents papers which have ethnicity as a theme. The editors' introductory article discusses contexts of ethnicity, health and care. James Nazroo and colleagues' secondary analyses of data-sets for England and the US indicate that comparisons are possible between Black Caribbean and White people, and that there are similarities in the inequalities experienced in both countries. Other articles examine issues of health inequalities by ethnic group with regard to nutrition, depression, end-of-life care, diabetes, long-term health conditions and Disability Living Allowance, and routines observed in general practice. (RH)
ISSN: 01419889
From: http://www.blackwellpublishing.com

Holistic thinking and integrated care: working with black and minority ethnic individuals and communities in health and social care; by Philomena Harrison.
The purpose of this paper is to introduce a series of articles which explore the theme of holistic care and integrated practice with black and minority ethnic (BME) individuals and communities who access health and social care services. (KJ/RH)
ISSN: 14769018
From: http://www.pavpub.com
Hospice or home?: expectations of end of life care among white and Chinese older people in the UK; by Jane Seymour, Sheila Payne, Alice Chapman (et al).
This paper presents findings from two linked studies of white (n=77) and Chinese (n=92) older adults living in the UK, which sought their views about end-of-life care. The authors focus particularly on experiences and expectations in relation to the provision of end-of-life care at home and in hospices. White elders perceived hospices in idealised terms which resonate with a 'revivalist' discourse of the 'good death'. In marked comparison, for those Chinese elders who had heard of them, hospices were regarded as repositories of 'inauspicious' care in which opportunities for achieving an appropriate or good death were limited. They instead expressed preference for the medicalised environment of the hospital. Among both groups these different preferences for institutional death seemed to be related to shared concerns about the demands on the family that may flow from having to manage pain, suffering and the dying body within the domestic space. These concerns, which appeared to be based on largely practical considerations among the white elders, were expressed by Chinese elders as beliefs about 'contamination' of the domestic home (and, by implication, of the family) by the dying and dead body. (KJ/RH)
ISSN: 01491889
From: http://www.blackwellpublishing.com

The impact of health service use on racial differences in mortality among the elderly; by Darren E Sherkat, Barbara S Kilbourne, Van A Cain (et al).
Black-White differences in rates of mortality and mortality associated with specific diagnoses were investigated in relation to socio-economic conditions, patterns of morbidity and health service use. Accordingly, longitudinal data from the Center for Medicare and Medicaid Services (CMS) Physician billing data and Medicare Enrollment Database (EDB) were analysed for 665887 Medicaid beneficiaries in Tennessee, using proportional hazards models. Racial differences in physician visits explain the largest portion of mortality differentials between Black Americans and Whites. Race disparities in mortality associated with particular forms of morbidity are also partly a function difference in health service use. The authors' findings suggest that Black-White mortality differences could be narrowed by increasing Black Americans' access to physician services. (RH)
ISSN: 01419889

This study builds on two previous projects, the first being "The caring needs of Chinese older people" (1997-1999). The second, "Shared expectations, shared commitment", an action-oriented and older people-led study, took place from 2003 to 2005. The project team worked with Chinese older people to influence local practices or specify policy areas. Three local groups were set up in South Yorkshire, Manchester and London. These findings comment on the project's participant-focused qualities with regard to older people as a service provider (South Yorkshire), older people working in partnership (Manchester), and older people as researchers (London). The full report, "The involvement of Chinese older people in policy and practice: aspirations and expectations", by Ruby C M Chau, is published by the Joseph Rowntree Foundation (JRF). (RH)
ISSN: 09583084
Price: (Full report £14.95)
From: York Publishing Services, 64 Hallfield Road, Layerthorpe, York YO31 7ZQ. (ISBN-13: 9781859354513) PDF download available - http://www.jrf.org.uk Alternative formats from Communications Department, Joseph Rowntree Foundation - The Homestead, 40 Water End, York YO30 6WP. Email: info@jrf.org.uk

Is it racism?: skepticism and resistance towards ethnic minority care workers among older care recipients; by Håkan Jönsson.
Twelve representatives of caregiver organisations in a municipality in Sweden were interviewed about their experiences of scepticism and resistance towards ethnic minority care workers by older care recipients. Three additional interviews were conducted with ethnic minority care workers. Representatives described the problem as rare and mostly occurring as language difficulties or as a temporary problem characterised as a fear of the unknown among some care recipients. They tended to apply a pragmatic or pathologising approach when talking about causes of and solutions to the problem. These approaches enabled care providers to comply with "potential racism" without challenging an official ideology of anti-racism. In contrast, staff of foreign descent
described the problem as more frequent and severe, particularly for short-term employees who experience many first-time encounters with care recipients. (RH)

Knowledge of dementia among South Asian (Indian) older people in Manchester, UK; by Nitin Purandare, Vikram Luthra, Caroline Swarbrick (et al).


Attendees, not known to suffer from dementia, of one South Asian and two predominantly Caucasian day centres for older people in Manchester were asked to complete the Dementia Knowledge Questionnaire (DKQ). The DKQ was translated into Gujarati and Urdu by professional translators. 191 DKQs from Indian and 55 DKQs from Caucasian (White UK/Irish/European) people were included in the analyses. Knowledge of dementia was poor in both groups, especially so in Indian older people. The median (25th-75th percentile) total DKQ scores were 3 (2.5) in Indians and 6 (3.5-9) in Caucasians. Indian older people showed significantly less knowledge about basic aspects and epidemiology of dementia when compared to Caucasian older people. Both groups fared equally badly on questions about aetiology and symptomatology. Indian older people were less aware of personality, reasoning and speech being affected in dementia. These factors may account for Indian people's relative absence from local dementia treatment clinics. (RH)

The lived experience of depression in elderly African American women; by Helen K Black, Tracela White, Susan M Hannum.


Data on depression emerged from research that qualitatively explored experiences of depression, sadness and suffering in 120 community-dwelling people aged 80+, stratified by gender, ethnicity and self-reported health. The narratives of 20 African American women were placed into three themes, in which depression was: linked diminishment of personal strength; related to sadness and suffering; and preventable and resolvable through personal responsibility. Brief accounts illustrate how themes emerged in women's discussion of depression. African American women created a language for depression that was rooted in their personal and cultural history and presented in vivid vignette through their life stories. Their belief systems and the language they used to describe depression are integral aspects of the lived experience of depression. (RH)


Findings, 2060, April 2007, 4 pp.

Qualitative and quantitative methods were used in this research on Pakistani, Bangladeshi, Ghanaian and white English working-age people living with long-term ill health. This study was carried out by researchers at the University of Sheffield, Sheffield Hallam University, the University of Essex, the London School of Hygiene and Tropical Medicine, and Social Action for Health, led by Sarah Salway. They examined why there are links between ill health and poverty, and why the consequences appear to be worse among minority ethnic groups. They used secondary analysis of the the Labour Force Survey (LFS) 2001 to 2005, the Citizenship Survey 2001, and tables from the 2001 Census, coupled with an extended period of fieldwork in the East End of London from April 2004 to February 2006. These findings comment on the consequences of health problems, including: attitudes to ill health; attitudes and access to support; social networks; and ill health and employment. Among the findings in this summary are that overall, carers were more likely than those with long-term ill health to miss out on social participation. (RH)


There is not yet a consensus regarding people of mixed race and their identity, and even less agreement about the right policy or practice responses. This is a compilation of eleven articles by researchers, starting with analysis of key data from the 2001 Census, followed by discussions on diversity versus group experiences of 'mixedness'. Policy and practice is considered regarding educational needs, health and social care policy, and
family policies. Three final papers reflect on the actions of community organisations, for example in community
development and spaces for people to share their experiences of mixedness and mixing. The aim of the
Runnymede Perspectives series is to engage with government and other initiatives through exploring the use and
development of concepts in policymaking, and analysing their potential contribution to a successful multi-ethnic
Britain. (RH)

Older people from white-British and Asian-Indian backgrounds and their expectations for support from their
children; by Chih Hoong Sin.
Quality in Ageing, vol 8, no 1, March 2007, pp 31-41.
The importance of ties between older people and their children has been widely documented as a fundamental
component in the provision and receipt of support. Most existing British research on the family support of older
people has concentrated on those from the white-British majority, with little cross-group comparison. This
article reports on in-depth qualitative research with 17 and 21 older people from white-British and Asian-Indian
backgrounds respectively. It demonstrates how gender, ethnicity, migration history and a range of other factors
interweave in complex manners to affect individuals' expectations for support from their adult children. The
findings reveal commonalities and differences within and between groups and demonstrate that the association
between expectations of support and resultant sense of well-being is complicated and is often conditional.
Stereotypes within and across groups need to be examined, given the observation that white familial norms may
be played out differently in different cultural contexts, individuals make sense of and rationalise their
expectations to support to take into account the dynamics of changing structures and attitudes. (RH)
ISSN: 14717794
From: http://www.pavpub.com

Poverty and ethnicity in the UK; by Joseph Rowntree Foundation - JRF.: Joseph Rowntree Foundation, April
2007, 4 pp.
Findings, 2059, April 2007, 4 pp.
In a wide-ranging review of the literature, Lucinda Platt of the University of Essex summarises the findings of
poverty and ethnicity research since 1991. Of the thousands of studies screened for potential inclusion, around
350 were selected for review in her final report (same title), published by the Policy Press on behalf of the
Joseph Rowntree Foundation (JRF). Most of the studies identified used the Census categories for distinguishing
ethnic groups; there was little distinct analysis of white groups. These findings summarise the main points of the
research, which prioritised an income measure of poverty as being the most transparent, and allowing
consideration of different components of income. Deprivation was seen as stemming from lack of income, at
least in the long term. However, evidence of material deprivation measures was also included and reviewed to
the extent that it was available. (RH)
ISSN: 09583084
From: Joseph Rowntree Foundation, The Homestead, 40 Water End, York YO30 6WP. Findings and full report
available as free downloads from http://www.jrf.org.uk

Poverty rates among ethnic minorities in Great Britain; by Joseph Rowntree Foundation - JRF.: Joseph
Findings, 2057, April 2007, 4 pp.
As part of its monitoring of poverty and social exclusion (see www.poverty.org.uk), the New Policy Institute
has analysed how the rates of income poverty differ between ethnic groups, and the reasons for some of these
differences. These findings outline the results of research by Guy Palmer and Peter Kenway, whose full report,
"Poverty among ethnic groups: how and why does it differ?" is published by the Joseph Rowntree Foundation
(JRF). They used data - notably from Households Below Average Income for 2002/03 to 2004/05 (Department
for Work and Pensions, DWP) - to ascertain income poverty rates. Their analysis suggests that differences in
age, family type and family work status account for only half of the "excess" income poverty rates suffered by
minority ethnic groups compared with white British people. Differences in work rates were ascertained using
data from the 2001 Census. (RH)
ISSN: 09583084
From: Joseph Rowntree Foundation, The Homestead, 40 Water End, York YO30 6WP. Findings and full report
available as free downloads from http://www.jrf.org.uk
Race and gender differences in perceived caregiver availability for community-dwelling middle-aged and older adults; by David L Roth, William E Haley, Virginia G Wadley (et al).

Informal family carers are increasingly recognised as critical for meeting the needs of individuals with chronic diseases associated with ageing. Cross-sectional data were collected in structured interviews with 32,999 participants from the REasons for Geographic and Racial Differences in Stroke (REGARDS) study. Participants were asked if they believed that someone was available to provide care for them in the event of a serious illness or disability, and if so, to describe that person. While more than 80% reported having an available caregiver, variables associated with lower perceived availability from a multivariate logistic regression analysis included: being female, White or unmarried; living alone; being older than 85; and having worse self-rated health. Spouses were the most likely caregivers for all racial and gender groups except for African American women who identified daughters as the most likely caregivers. African American women also showed the smallest differential in perceived caregiver availability between married and unmarried (82.8% vs 75.5%), whereas White men showed the largest differential (90.9% vs 60.4%). Increased efforts are needed to anticipate future caregiving needs, particularly for individuals who perceive a lack of available informal caregivers and may require more formal care services. (RH)

ISSN: 00169013
From: http://www.geron.org

The National Survey of American Life (NSAL) is a nationally representative household study of African Americans, Caribbean Blacks and non-Hispanic Whites living in areas at least 10% African American. The authors examined demographic correlates of 16 measures of organisational, non-organisational, and subjective religiosity, as well as religious coping and spirituality. The findings indicate that African Americans and Caribbean Blacks reported higher levels of religious participation, religious coping and spirituality than older Whites. The authors observed few significant differences between older African Americans and older Caribbean Blacks. Gender, age, marital status, income, education and region all exhibited significant influences on religious participation and spirituality. Racial groups within the older population present distinctive profiles of religious participation and spirituality. The demographic correlates of religious involvement and spirituality are consistent across a variety of diverse dimensions and measures. (RH)
ISSN: 10795014
From: http://www.geron.org

Data from the older Black Caribbean sub-sample of the National Survey of American Life (NSAL) - a nationally representative household study of African Americans, Caribbean Blacks and non-Hispanic Whites living in areas at least 10% African American - were used to examine selected measures of organisational, non-organisational, and subjective religious participation. The findings indicate important demographic differences in the correlates of religious participation among older Black Caribbeans. In particular, gender, marital status, income, immigrant status and denomination were associated with religious participation. Study findings are discussed in relation to available ethnographic data on Black Caribbeans and previous survey research on religious participation among older African Americans. Although there were several similarities in the research on older African Americans and religious involvement (e.g. marital status, gender, denomination), noted departures from previous research findings (e.g. income effects) may indicate the influence of ethnic group membership and the importance of the immigration experience in shaping distinctive life experiences for older Black Caribbeans. (RH)
ISSN: 10795014
From: http://www.geron.org

Travellers' checks: [reducing hospital admissions amongst older travellers]; by Louise Tickle.
Community Care, no 1676, 7 June 2007, pp 36-37.
A project to break down prejudice against travelling communities and to improve their well-being is reducing hospital admissions. This article outlines work for the Travellers Project carried out by the older people team in
Billericay and Wickford, Essex in developing care and dealing with medication problems of older travellers. The importance of engaging with travellers as a community to find out what they want before delivering the services you think they need is stressed. (RH)
ISSN: 03075508
From: http://www.communitycare.co.uk

Veiled entrapment: a study of social isolation of older Chinese migrants in Brisbane, Queensland; by David Ip, Chi Wai Lui, Wing Hong Chui.
This paper presents the findings of a study of the support and service needs of older Chinese people in Brisbane, the capital city of Queensland, Australia. There were two specific objectives: to ascertain the problems encountered by older Chinese-Australians in their daily lives and social activities; and to develop policy and service development recommendations, with a view to mitigating their problems, meeting their unmet needs, improving their quality of life, and enhancing their participation in Australian society. The study used multiple methods, including a literature review, focus group meetings, and a community survey. The findings indicate that older Chinese people, and particularly women, experience significant restrictions in their activity patterns, social isolation and loneliness. Their lack of proficiency in the English language, and the difficulties they have in accessing language-support and interpretation services, limit their autonomous mobility and make them heavily dependent on their adult children, not least for transport. Their physical and psychological well-being is affected further by strained relations with their adult children, and these are compounded by financial concerns. The implications of the findings for welfare policy and practice are discussed. (KJ/RH)
ISSN: 0144686X
From: http://www.journals.cambridge.org/jid_ASO

Welfare state without dependency: the case of the UK Chinese people; by Chak Kwan Chan, Bankole Cole, Graham Bowpitt.
Using the welfare practices of UK Chinese people, this study contests the myth of welfare dependency of ethnic minorities and discusses their social and moral foundation of self-reliance. The study is based on data from 100 face-to-face interviews, supplemented by findings from 316 respondents in a national postal survey, and part of an Economic and Social Research Council (ESRC) funded research project by Chen and colleagues at Nottingham Trent University. The study shows these UK Chinese respondents to be family-oriented and self-reliant, having low expectations of public welfare, thus challenging the myth of welfare dependency of ethnic minorities. Also, compared with Chinese welfare practices based on strong moral values and duties towards other people, New Labour’s welfare culture lacks a solid social and ethical base for nurturing the concepts of duty and self-reliance. (RH)
ISSN: 14747464
From: http://www.journals.cambridge.org

Within-family differences in mothers' support to adult children in black and white families; by J Jill Suitor, Jori Sechrist, Karl Pillemer.
Data collected from a sample of 157 Black and 394 White older women in greater Boston are used to explore within-family differences in mother-to-child support. High rates of differentiation in both black and White families were found. Within-family analyses revealed more similarities than differences in the effects of adult children’s characteristics or mothers’ likelihood of providing support. For both groups, mothers were most likely to provide support to children who had fewer resources, greater need, and who provided their mothers with support. Children’s health problems were better predictors of support among Black than White mothers, whose children’s gender played a larger role in White than Black mothers’ provision of support. However, both groups of mothers favoured daughters and children with poor health. In sum, these patterns provide little support for the argument that family solidarity is substantially more important in explaining intergenerational exchanges in Black than White families. (RH)
ISSN: 01640275
Accessibility and equity of health and social care services: exploring the views and experiences of Bangladeshi carers in South Wales, UK; by Joy Merrell, Faye Kinsella, Fiona Murphy (et al).


The proportion of older people from minority ethnic communities will dramatically increase in the next 20 years, which will be accompanied by increasing health and social care needs and an increased demand for carers. A qualitative, exploratory study was conducted to identify the health and social care needs of informal carers who were caring for a dependent adult from a Bangladeshi community in South Wales. This paper focuses on Bangladeshi carers' access to formal support services provided by the statutory, private and voluntary sectors to assist them with their caring responsibilities. The findings are based on data from face-to-face, focused interviews with 20 Bangladeshi carers. Purposive and snowball sampling were used to recruit the sample. Data were analysed using thematic content analysis. The dimensions of accessibility and equity of quality of care were drawn upon to aid understanding of the findings. Bangladeshi carers faced a number of barriers in accessing health and social service provision, which impeded uptake of these services. There was evidence, too, of inequality in service provision. Recommendations for improving the accessibility of health and social care services are proposed, which may assist in promoting more equitable services for carers from the Bangladeshi community. (RH)


It has long been accepted that lack of social participation in wider society is one aspect or one definition of poverty. Concerns with the extent and distribution of social capital as both a measure of a good society and a means to upward mobility also emphasises the importance of social contacts and networks to the well-being of individuals and communities. It has been argued that social interaction is conducive to better outcomes for those with health problems. The author uses the Home Office Citizenship Survey 2001 to explore the impact of lack of social engagement of long-term illness, caring for someone with such an illness, and ethnicity. Controlling for a range of characteristics and examining the relationships separately for men and women, there is evidence that between them, the four measures reveal an underlying propensity for reduced social contact. Other things being equal, illness has little association with reduced social participation, but caring does seem to affect opportunities for sociability. Members of some ethnic groups are less likely to engage in neighbourly social visiting than others, and these differences are little affected by income level. By contrast, differences in "going out" across groups can largely be explained by differences in income. Overall, social engagement among male Bangladeshis and to a lesser extent Pakistanis is high, whereas Black Africans and Black Caribbeans, especially women, are notable for their lack of opportunities for social engagement compared with their otherwise similar peers. They would appear to be particularly at risk of social isolation, with consequences for their current and future welfare. (RH)

AT HOME: audit tool for housing and related services for older minority ethnic people; by Housing and Older People Development Group (HOPDEV): Housing and Older People Development Group (HOPDEV), 2006, 1 CD.

The AT HOME toolkit has been designed with the housing needs of black and minority ethnic (BME) older people in mind, and how individual organisations, service commissioners and providers might respond. It comprises six separate modules, and it also provides additional resources to help make the application of the tool as effective as possible, and foster information sharing and joint working practices. (RH)

Price: FOC

From: Elderly Accommodation Counsel (EAC), 3rd Floor, 89 Albert Embankment, London SE1 7TP. E-mail: enquiries@eac.org.uk (quoting title in full). Downloads: http://hopdev.housingcare.org

From: Centre for Analysis of Social Exclusion, London School of Economics, Houghton Street, London WC2A 2AE. http://sticerd.lse.ac.uk/case
Changing cultural and social environments: implications for older East Asian women; by Lee Ann Mjelde-Mossey, Emily Walz.
The world is ageing and the trend is towards a global feminisation of ageing. In the Asia Pacific region, which already contains approximately 50% of the world's population over age 60, the number of older women exceeds that of older men in most countries. This article explores the changes that are occurring in East Asian social and cultural traditions for ageing, and the implications of those changes for women in that culture. However, various factors, such as migration to urban areas and demographic shifts, have precipitated alterations to traditional culture. These cultural shifts are relevant to the United States where, according to the 2000 US Census, 71% of Asian and Pacific Islander Americans over the age of 65 are foreign-born. Immigration can prompt an immediate cultural shift and create a fast forward insight into the slower cultural evolution currently occurring in East Asian societies. (KJ/RH)
ISSN: 08952841
From: http://www.tandfonline.com

Childbearing history and self-reported well-being: contrasting older African American and white women; by S Sudha, Elizabeth J Mutran, Ishan C Williams (et al).
Data from Atherosclerosis Risk in Communities (ARIC), a large US prospective study with substantial minority ethnic representation, was used to examine how numbers of live births and pregnancy losses affected the self-rated health and depressive symptoms of women aged 50+, contrasting African Americans (n=1505) and Whites (n=4115). The authors tested hypotheses that childbearing history variables would influence self-rated well-being among older women, and that perceived social support would mediate the associations. The authors also tested whether these associations would be stronger among older African Americans versus White women. The results suggest that the impact of childbearing history is greater among older African American than White women. Pregnancy loss worsened depressive symptoms and self-rated health among African American women; the effect was reduced by social support variables. High parity was associated with worse self-rated health among African American women, mediated by social support. Having no live births was not associated with diminished well-being among older women of any race. (RH)
ISSN: 01640275
From: http://www.sagepublications.com

Cultural attitudes and caregiver service use: lessons from focus groups with racially and ethnically diverse family caregivers; by Andrew E Scharlach, Roxanne Kellam, Natasha Ong (et al).
Focus groups were conducted with caregivers from eight racial-specific or ethnic-specific populations: African-Americans, Chinese, Filipinos, Hispanics, Koreans, Native Americans, Russians, and Vietnamese. The aim was to examine cultural variations in caregiving experiences, care-related beliefs and values, care practices, and factors contributing to decisions about the use of caregiver support services. Analysis of focus group transcripts revealed three cross-cutting constructs: familism, group identity, and attitudinal and structural barriers to service use. These findings are discussed in terms of their implications for existing knowledge regarding family responsibility, resource utilisation, and programme development for racially and ethnically diverse family caregivers. (RH)
ISSN: 01634372
From: http://www.tandfonline.com

Delivering housing care and support services for Asian elders; by Manna Santokhee.
Housing, Care and Support, vol 9, no 1, April 2006, pp 6-9.
Changes in Asian communities leave some older people in need of support from outside the family. This article describes Aashna House - a home for frail older Asians run by ASRA Greater London Housing Association - which has succeeded in making community living for older people both acceptable and attractive. This and other articles in this issue of Housing, Care and Support has as its theme meeting the needs of black and minority ethnic (BME) communities. (RH)
ISSN: 14608790
From: Website: http://www.pavpub.com

Disrespect and isolation: elder abuse in Chinese communities; by Sandra Tam, Sheila Neysmith.
Canadian Journal on Aging, vol 25, no 2, Summer 2006, pp 141-152.
Based on a qualitative study of home care workers, this paper aims to understand elder abuse of Chinese Canadians. The findings show disrespect is the key form that elder abuse takes in Chinese communities. as a
Does having children extend life span?: a genealogical study of parity and longevity in the Amish; by Patrick F McAr dul, Toni I Pollin, Jeffrey R O'Connell (et al).
The relationship between parity and longevity is uncertain, with evidence of both positive and negative relationships being reported previously. The authors evaluated this issue by using genealogical data from an Older Amish community in Lancaster, Pennsylvania, a population characterised by larger nuclear families, homogeneous lifestyle, and extensive genealogical records. The analysis was restricted to a set of 2015 individuals who had children, were born between 1749 and 1912, and survived until at least age 50. Pedigree structures and birth and death dates were extracted from Amish genealogies, and the relationship between parity and longevity were examined using a variance component framework. Life span of fathers increased in linear fashion with increasing number of children (0.23 years per additional child), while life span for mothers increased linearly up to 14 children (0.32 years per additional child), but decreased with each additional child beyond 14. Among women, but not men, a later age at last birth was associated with longer life span. Adjusting for age at last birth obliterated the correlation between maternal life span and number of children, except among mothers with ultra high (14 children) parity. The authors conclude that high parity among men and later menopause among women may be markers for increased life span. Understanding the biological and/or social factors mediating these relationships may provide insights into mechanisms underlying successful ageing. (RH)
ISSN: 07149808
From: http://www.utpjournals.com

Elderly African Americans as intragenerational caregivers; by Michael Udo Mbanaso, Jeffrey Shavelson, John Ukawuilulu.
A growing number of older Americans serve as caregivers for their ageing spouses, partners, relatives and/or friends. Yet, little research has considered the impact and implications of this trend among African Americans. This article describes the results of a qualitative study examining the intergenerational caregiving experiences and perspectives of two cohorts of African Americans (urban and rural, n=129) aged 58-89. Its findings reveal important differences and commonalities associated with older African American caregivers and their caregiving in rural and urban settings. Additionally, the study suggests that volunteer caregivers can often fill the void left by partners and relatives who predecease or fail to assume responsibility for the care of their older relatives. Their efforts do not displace those of friends and family members, but rather fulfill unmet needs in available care. The discussion focuses on the implications of study findings for public policy and practice. (RH)
ISSN: 01634372
From: http://www.tandfonline.com

Expectations of support among White British and Asian-Indian older people in Britain: the interdependence of formal and informal spheres; by Chih Hoong Sin.
Discourse surrounding community care characterises informal support being superior to and preferred over formal sources of support. This article argues that an individual's experiences and expectation of one type of support is often made in relation to his or her understanding, expectation and experience of other sources of support. It reports on findings from part of the ESRC Growing Older (GO) study exploring the relationship between quality of life and the social networks and support of older people from different ethnic groups. The data relate to a sample of 7 White British men, 10 White British women, 12 Asian-Indian men, and 9 Asian-Indian women aged 55+ derived from the Family Resources Survey (FRS). Findings reveal that the high level of expectation for family support among Asian-Indian respondents coexists with a high level of expectation for state support and acknowledgement that the ideal of family support may not always materialise. Among White British respondents, the high level of expectation for state support exists regardless of whether the respondent has satisfactory informal social support networks. This expectation is commonly expressed in terms of rights and entitlement by White British respondents, but not by Asian-Indians. Associated with this, Asian Indian respondents display a consistently lower level of awareness and usage of a range of health and social care services. Regardless of the extent of current and past service usage, however, respondents from both groups...


Australia has one of the most diverse migrant populations in the world. This pattern of cultural diversity is also reflected in the older population, with increasing numbers of older people from culturally and linguistically diverse (CALD) backgrounds. This review examines the evidence base related to health and social needs and existing support systems for older Australians from CALD backgrounds. It is difficult to generalise the issues and challenges associated with these groups because of their heterogeneity, both between and within groups.

However, their health and social needs may be particularly acute as a result of cultural and language barriers; and their geographical location and the circumstances of migration can impact on their financial circumstances as well as their psychosocial health. Whilst there is a range of community and government stakeholders involved with these issues, the evidence base for policy and practice is not well understood. (RH)

ISSN: 14406381

Higher church attendance predicts lower fear of falling in older Mexican-Americans; by C A Reyes-Ortiz, H Ayele, T Mulligan (et al).

Several studies have shown that involvement in religious activity appears to benefit health. To estimate the association between church attendance and fear of falling, the authors used a sample of 1541 non-institutionalised Mexican-Americans aged 70+ from the 1998-1999 wave of the Hispanic Established Population for the Epidemiological Study of the Elderly (Hispanic EPESE), followed until 2000-2001. Baseline potential predictors of fear of falling were church attendance, socio-demographics, history of falls, summary measure of lower body performance (random balance, 8-foot walk, and repeated chair stands), functional status, depressive symptoms, cognitive status, and medical conditions. Fear of falling at the 2-year follow-up was measured as no fear, somewhat afraid, fairly afraid, and very afraid. Chi-square test and multiple logistic regression analysis were used to estimate associations between the outcome and the potential predictors. Multiple logistic regression analysis showed that frequent church attendance was an independent predictor of lower fear of falling 2 years later. Other independent predictors of fear of falling were female gender, poorer objective lower body performance, history of falls, arthritis, hypertension, and urinary incontinence. (RH)

ISSN: 13607863
From: http://www.tandfonline.com

Mainstreaming equality: implications of the provision of support at home for majority and minority ethnic older people; by Alison Bowes.

This paper explores the potential impact and practical difficulties of mainstreaming equalities in support at home for minority and majority ethnic older people, drawing on two linked empirical research projects. Social care providers have long faced difficulties in catering for diversity of need. Recently, diversity within minority ethnic groups has increased, and there is now a statutory duty to promote equality. Research findings illustrate the overwhelmingly indicate an expectation for the continued provision of such services as they would like to be able to use one or more of these at some stage. (RH)

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complexity of exclusionary processes, with particular reference to the example of health care. There is a gap between the high-level commitment to mainstreaming equality and people's lived experiences. Autonomy and choice are central to community care legislation, policy and practice guidance but, in reality, the research shows that choices are limited for minority and majority older people. More user-focused approaches and grassroots involvement may offer ways forward, despite some limitations of current models. In conclusion, the potentiality of a broad mainstreaming equality perspective is highlighted, but challenges include a need for a more grounded approach, better engagement with user groups, and a need to focus on understanding issues of implementation. (KJ/RH)

ISSN: 01445596
From: http://www.blackwell-synergy.com

Meeting the needs of black and minority ethnic communities; by Gary Lashko.
Housing, Care and Support, vol 9, no 1, April 2006, pp 2-4.
Articles in this issue of Housing, Care and Support look at housing care and support mainly from the viewpoint of black and minority ethnic (BME) communities, service providers and clients. This introductory article outlines the issues explored: commissioning services; the Supporting People Strategy proposals; reducing barriers for refugees; discrimination in service provision; and support for homeless and vulnerable people. (RH)
ISSN: 14608790
From: Website: http://www.pavpub.com

Physical activity, older immigrants and cultural competence: a guide for fitness practitioners; by Marianne Rogerson, Claudia Emes.
Increasingly, fitness practitioners (FPs) are required to provide exercises for older immigrants from diverse cultural backgrounds. Providing appropriate physical activity interventions is a complex undertaking, especially if the practitioner has little knowledge of the client's cultural expectations. This article presents a framework to assist FPs in the design and delivery of culturally competent physical activity programming for older immigrants. Examples from the Muslim culture describe the four dimensions of caring, cultural sensitivity, cultural knowledge and cultural skills. By working through each of the four dimensions, practitioners will be better equipped to identify the types of skills and behaviours required to develop culturally appropriate programmes. (RH)
ISSN: 01924788
From: http://www.tandfonline.com

"Pressure of life": ethnicity as a mediating factor in mid-life and older peoples' experience of high blood pressure; by Gina Marie Awoko Higginbottom.
Hypertension is a common condition which disproportionately affects African Caribbean people in England. The meaning and consequences of hypertension for African Caribbean people living in England is explored through a qualitative study informed by the ethnographic tradition. Study methods include two focus group interviews with 10 participants, 21 in-depth interviews, and 5 vignette interviews. In all, 36 people (men and women aged 37-82, median age 59.9) from two English cities participated. The sample was generated by contacting GP surgeries, community groups and associations, and included economically active and retired people. The narrative accounts provided illuminate the personal biographies of the mid-life and older people in the study, providing evidence as to how issues such as ethnicity, migration, cultural adaptation, racism and discrimination may impact on the chronic illness experience. Participants' understandings of their self-defined condition of hypertension differed greatly from medical conceptualisations of the condition of hypertension. The implications of the study are that in order to provide effective health and social care for individuals of African Caribbean origin with hypertension, care providers require insight into how migration and cultural adaptation may create major disruption to an individual's life trajectory, to which the subsequent diagnosis of chronic illness are relative in terms of the individual's response and adaptation. (RH)
ISSN: 01419889
From: http://www.blackwellpublishing.com

Racial and ethnic differences in use of assistive devices for mobility: effect modification by age; by Linda Resnik, Susan Allen.
The extent to which mobility device use differ by race or ethnicity is investigated, also whether the effect is modified by age. The authors identified 7,148 impaired adults from Phase II of the US National Health Interview Survey on Disability (NHIS-D). Logistic regression models provided estimates of race/ethnicity,
adjusting for predictors of device use. Blacks were 1.2 times more likely as non-Hispanic Whites to use assistive devices. Differences were attenuated by age: there was a 40% increased likelihood of use attributable to being Black and aged 45 to 75; a 30% increased likelihood attributable to being Hispanic and aged 65 to 75, and a 130% increased likelihood attributable to being Hispanic and older than 75. Disentangling the observed pattern of mobility device use will provide direction for development of interventions that promote assistive device use. (RH)

ISSN: 08982643
From: http://www.sagepub.com

Stigma and dementia: East European and South Asian family carers negotiating stigma in the UK; by Jenny Mackenzie.
This article presents one strand of findings from a 3-year project funded through the Health Action Zone Innovations budget. The focus of this strand was to develop and deliver culturally appropriate support group materials for East European and South Asian family carers of relatives with dementia living in the UK. Analysis of interview and field note data revealed insights into how understanding of dementia in different cultural contexts can become operationalised through stigma processes and in turn influence the ways in which people with dementia and their family carers engage with formal and informal support. (RH)
ISSN: 14713012
From: http://www.dem.sagepub.com

A sweeter palliative: [responsive end of life care for ethnic population groups]; by Yasmin Gunaratnam.
Community Care, no 1642, 28 September 2006, pp 36-37.
As ethnic minority populations age in the UK, how can we ensure that they receive responsive end-of-life care? This article discusses findings from the Stories that Matter, a project that used narrative interviews to collect the experiences of life-limiting illness and care among ethnic minority elders, carers, and social and health care professionals. It highlights the ways in which social work can support the care choices of older people from ethnic minorities. The project was managed by the Policy Research Institute on Ageing and Ethnicity (Priae) and funded by the Department of Health (DH). (RH)
ISSN: 03075508
From: http://www.communitycare.co.uk

Pensioners living in households headed by someone from a minority ethnic group are more likely to live on a low income and may face significant barriers to accessing benefits. This qualitative research study was designed to examine the different factors that affect the work, saving and retirement decisions of ethnic minority groups. The aim of the research was to fill acknowledged gaps in existing research to ensure that policies are appropriate and sensitive to any cultural differences. The findings are based on 60 semi-structured interviews in autumn 2005 with people from the six main ethnic minority groups in the UK (Indian, Pakistani, black Caribbean, black African, Bangladesh and Chinese) and included both those above and below state pension age (SPA). The report describes the research aims and methodology; the topic guide used and a listing of sample participants attributes are included as appendices. The report presents findings on: work and education trajectories; household finances; planning for and financing retirement; and factors influencing retirement planning. (RH)
From: Corporate Document Services, 7 Eastgate, Leeds, LS2 7TY. Orderline tel: 0113 399 4040; e-mail: orderline@cds.co.uk  Summary available from website: http://www.dwp.gov.uk/asd/

There is recognition among Age Concerns working in the South West of the need for more awareness of the issues that affect older people from black and minority ethnic (BME) communities. This resource guide is a joint collaboration between Age Concern's Research and Development Unit and the South-West Regional Fieldwork Team. It was produced to accompany a 1-day training workshop held in the South West in April 2006, and is tailored towards the specific context of the region, building on previous work done by other organisations concerning issues around rural racism. It reviews examples of good practice that have been developed in rural areas with scattered BME populations, both in the South West and other parts of the UK. (RH)
2005

Acculturation and manifestation of depressive symptoms among Korean-American older adults; by Y Jang, G Kim, D Chiriboga.
Subjects in this study were 230 Korean-American older adults (mean age 69.8) in Florida. Given the cultural emphasis on modesty and self-effacement in traditional Korean society, the authors hypothesised that older Korean-Americans who were less acculturated in American culture, when compared to more acculturated ones, would be more likely to inhibit positive affects to depressive symptom reports. Using two validated measures of depressive symptoms, the short forms of the Geriatric Depression Scale (GDS-SF) and the Center for Epidemiologic Studies Depression Scale (CES-D), different response patterns for low and high acculturation groups were identified. First, there was low comparability in the factor structures for both the GDS-SF and the CES-D across low and high acculturation groups. A differential item function (DIF) analysis based on partial correlations indicated that older people in the low acculturation group inhibited endorsing positive affect items; one item of the GDS-SF ("feel happy") and two items of the CES-D ("felt hopeful" and "was happy"). The findings suggest the substantial cultural influences in expressing emotions, especially those related to positive affects. (RH)
ISSN: 13607863

From: http://www.tandfonline.com

African-American grandmothers as health educators in the family; by Jeffrey A Watson, Suzanne M Randolph, James L Lyons.
More than 18,000 adolescents die in road accidents every year in the US. This study sought to understand the role of African-American grandmothers as prevention-related health educators in the family. Full Model Fitted Regression Analyses were conducted on a sample of 105 African-American grandmothers with grandchildren aged 10-19. Findings suggest that grandmothers who adopt a proactive, teaching role with their grandchildren are more committed and confident, and with a context to do so. Grandmothers who co-reside with their grandchildren are more likely to teach them about how to prevent transport accidents. (RH)
ISSN: 00914150

From: http://www.tandfonline.com

Altruism relates to health in an ethnically diverse sample of older adults; by William Michael Brown, Nathan S Consedine, Carol Magai.
The existing literature indicates links between aspects of social network functioning and health outcomes. It is generally believed that networks that are larger or provide greater instrumental and emotional support contribute to improved health and, perhaps, greater longevity. Recently, it has been suggested that giving as well as receiving social support may be of benefit. On the basis of evolutionary theories of emotion and altruism, the current study sought to test this thesis with an ethnically diverse sample of 1,118 older people living in the community in Brooklyn, New York. As expected, levels of social support given were associated with lower morbidity, whereas levels of receiving were not. It is important that these relations held even when first: socioeconomic status, education, marital status, age, gender, ethnicity; and second, absolute network size and activity limitation were controlled for. Results are discussed in terms of their implications for theory regarding the relations among social exchanges, giving, and later life adaptation among older people. (RH)
ISSN: 10795014

From: http://www.geron.org

Arab-American immigrant elders' views about social support; by Kristine J Ajrouch.
Arab immigrants are a significant cultural presence in the United States and in this study's locale, the Detroit Metropolitan Area, yet their situations and experiences have rarely been examined. Six focus group interviews were conducted with both English-speaking and Arabic-speaking immigrants aged 60 years and older, to explore their descriptions of their ageing experiences with particular reference to expected and received social support. Tensions between cultural ideals and pragmatic realities were found about three topics: nursing home placements, expectations of children for care-giving, and state-sponsored support. Nursing homes were feared,
but, in a form that met their cultural needs, seen as places that should be built. On children's support, there was a clear preference for independence and a simultaneous appreciation of children's help whilst wishing not to burden them. The informants saw state-sponsored support as providing material resources that could support independence, and as a source of discrimination because of their national origins. The Arab-American elders' narratives revealed diverse attitudes and experiences. By documenting the ways in which they made sense of their situations, initial assertions of cultural ideals were seen to be modified by more realistic expressions of support expectations, and an understanding was reached of the support strategies that they utilised to alleviate the demands and stresses on both the older immigrants and their families. (KJ/RH)

ISSN: 0144686X
From: http://journals.cambridge.org/

Within a study of the use of carer assessment forms, Asian carers were given the opportunity to describe and comment on their perceptions and experience of community care assessment and support. Although their confidence in community care workers was not exclusively related to ethnicity, they relied a great deal on semi-informal contacts with minority ethnic workers through their own communities. The concept of "friendship" with professionals was important to many Asian carers. In common with the findings of other carer studies, many Asian carers were uncertain about their experience of formal assessment, and unclear about their entitlements and availability of community care support. "Outreach" contact and "befriending" support was greatly appreciated. Day care and sitting support were seen as a priority for formal services. Apart from contact with general practitioners (GPs), there was limited awareness or experience of community health care support. Most of these Asian carers were involved with care support groups. They spoke of the benefits in terms of social interaction and mutual support, counteracting feelings of isolation, and access to information and formal support. (RH)
ISSN: 00453102
From: http://bjsw.oupjournals.org

Racial disparities in older people's mental health are examined, with a specific focus on black-white differences in depressive symptoms. Subjects were 4,275 community-dwelling people aged 65+ (62% black) who participated in the Chicago Health and Aging Project (CHAP) over a 9-year period. Depression was measured using a summary score of the 10-item Center for Epidemiologic Studies Depression Scale (CES-D). Depressive symptoms were modelled using the method of General Estimating Equations and a Poisson error structure. A significant race effect was found at baseline: Blacks reported some 60% more symptoms than Whites. The differences were larger for men than for women. After controlling for age, sex, time, education, income and related interaction terms, the baseline race effect was reduced by almost half but remained robust. The racial differences increased slightly over time, these findings supporting heightened awareness of depression in older Black populations. (RH)
ISSN: 10795014
From: http://www.geron.org

Section 122 of the US Benefits Improvement and Protection Act 2000 (BIPA) requires that Centers for Medicare and Medicaid Services (CMS) conduct demonstration projects that explore how Medicare might reduce racial and ethnic group disparities in cancer prevention, treatment and outcomes. This book presents systematic reviews on nine demonstrations for projects that considered disparities in cancer in older African Americans, Latinos, Asian Americans, and American Indian / Alaska Native beneficiary populations living in both rural and urban communities, and a project in Guam. (RH)
ISBN: 0754642127
Price: £55.00
From: Bookpoint Ltd., 130 Milton Park, Abingdon, Oxon OX14 4SB. Ashgate website: http://www.ashgate.com
This single source is designed to help social service professionals provide effective services to America's vastly diverse and rapidly growing population of older people. The volume explores the impact of race/ethnicity, gender, sexual orientation, spirituality and geographical location on older people's strengths, challenges, needs and resources. The aim is to enhance professionals' knowledge of the US older population, in order to serve their needs more effectively. This monograph is co-published simultaneously as Journal of Human Behavior in the Social Environment, vol 9, number 4, 2004 and vol 10, no 1, 2004. (KJ/RH)
ISBN: 0789026767
Price: US$17.95 pbk (US$29.95 hbk)

Erikson's "Components of a healthy personality" among Holocaust survivors immediately and 40 years after the war; by Peter Suedfeld, Erin Soriano, Donna Louise McMurtry (et al).
The degree to which Holocaust survivors have dealt successfully with the eight psychosocial crises thought by E H Erikson (in "Growth and crises of the healthy personality", 1959) to mark important stages in life-span development is assessed. In Study 1, 50 autobiographical interviews of survivors videotaped 30-50 years after the war were subjected to thematic content analysis. Relevant passages were coded as representing either a favourable or an unfavourable outcome as defined by Erikson. Survivors described significantly more favourable than unfavourable outcomes for seven of the crises, the exception being Trust vs Mistrust. In Study 2, audiotaped Holocaust survivor interviews conducted in 1946 were scored in the same way and compared with the results of Study 1. There were several significant differences as well as similarities between the two data sets, the later interviews mostly showing changes in the positive direction. (RH)
ISSN: 00914150
From: http://baywood.com

Ethnic variation in the impact of emotion and emotion regulation on health: a replication and extension; by Nathan S Consedine, Carol Magai, David Horton.
Although emotion and emotion regulation are central to models linking personality and health, how these models can be generalised to diverse populations of older people remains untested. In this study, 1,364 community-dwelling women aged 50-70 living in Brooklyn, New York and from six ethnic groups, completed self-report measures of trait anger, inhibition, defensiveness, and health. As expected reports of trait anger and emotion inhibition predicted poorer health (and defensiveness better health) even when demographic and health behaviours were controlled. However, these characteristics related to outcome differently across ethnic groups; greater age was related to better health in all groups other than US born European Americans, and increased emotion inhibition was associated with better health among immigrant eastern European women. Results are discussed within a contextual model of emotion and health. (RH)
ISSN: 10795014
From: http://www.geron.org

Ethnicity and health disparities among the elderly in Taiwan; by Ho-Jui Tung, Elizabeth J Mutran.
Two measures of health - an index of functional and disability status, and global self-rated health - and their transitions over a 7-year period were compared across two ethnic groups of elders in Taiwan: Mainlanders and Taiwanese. This ethnic division is considered a salient dimension of social stratification, shaping the two groups of elders' pathways through life. The results showed that Taiwanese elders experience a disproportionate burden on the two measures of health, in part because of their lower socioeconomic status (SES). Also, Taiwanese elders are more likely to develop adverse health transitions than their Mainland counterparts, and variations in perceptions of chronic illness may exist across ethnicity. The results suggest that both ethnicity and SES play important roles in linking social status to health status in this cohort of elders. Ethnicity and SES affect health collectively, and different components of SES may not confer the same health benefits across ethnic groups. (RH)
ISSN: 01640275
From: http://www.sagepub.com
The UK's national population structure, in line with most Western societies, is ageing rapidly. The combination of falling fertility and increasing longevity is having an impact on family structures and resultant relationships, with the emergence of long vertical multi-generational families replacing the former laterally extended family forms. This is occurring at a time when UK government policy is placing increasing reliance on families to provide health and social care and support for the growing number of frail older people. While there has been extensive research on family care within the majority white population, there is less understanding of family care provision for the UK's growing older ethnic population. This paper discusses the changing demographics, new government policy on promoting independent living and its implications for family care provision. It reviews current understanding of family care and support for older people within the UK's varied ethnic minority families. (KJ/RH)
ISSN: 14747464
From : http://www.journals.cambridge.org

Among other things, TANF (Temporary Assistance for Needy Families) provides lump-sum federal block grants to US states to operate their own welfare and work programmes. In this article, the authors use symbolic interaction theory to understand the views and meanings attached to welfare, poverty and poor families, as well as to decipher grandmothers' policy recommendations. The culturally variant perspective provided a conceptual lens that placed grandmothers' adaptive behaviours in an historical, socio-political context. The authors used Grounded Theory methods to analyse 20 personal interviews from a larger multiple case study examining the influence of TANF on grandparent-led families in southwest Virginia. Grandparents' views create a continuum of beliefs toward poverty, TANF and personal responsibility with themes of individualistic, structural and fatalistic views. They made distinct policy recommendations to remove the penalties attached to kinship care, which continues to be an adaptive family feature. However, black grandmothers maintain some of the same societal and familial values as society generally. (RH)
ISSN: 00914150
From : http://baywood.com

Using a narrative approach, this study explores the role of the Holocaust in the life stories of survivors, contrasted with two comparison groups (one Jewish, one non-Jewish) whose direct experiences did not include surviving the Holocaust. Using the the technique of the life line and measures such as number and type of life events identified, as well as the events marking the beginning and ending of the life story, several differences were found between the three groups. Survivors identified an average of 10 life events, fewer than the 18 for the non-Jewish comparison group, but more than the 7 for the Jewish comparison group. Most of these life events were positive, although less so for the Jewish comparison group, with very few future events identified by any of the groups. The war marked the beginning of the life story for most of the survivors, and their stories ended at an earlier age than did those for the comparison groups. Further World War II events predominated in the survivors' stories, as did family births and relationship events. It is proposed that the pronounced effect of Holocaust in survivors' life stories serves as an anchoring and contextual influence on the nature and quality of life of stories told. (RH)
ISSN: 00914150
From : http://baywood.com

The author comments on the three preceding articles in this issue of the International Journal of Aging and Human Development: they present emerging psychological research focusing on the effects of the Holocaust on the lives of survivors as told through their life stories. (RH)
ISSN: 00914150
From : http://baywood.com
Latina grandmothers raising grandchildren: acculturation and psychological well-being; by Catherine Chase Goodman, Merrill Silverstein.


Grandparent involvement in raising grandchildren has become increasingly prevalent in the US and represents the family's strength in managing crises and transitions. This study examined acculturation, socioeconomic resources, and family factors related to well-being among 357 Latino caregiving grandmothers. Positive affect was related to greater language acculturation and factors suggesting participation in mainstream society - income and health. In contrast, higher life satisfaction and lower negative affect were more evident among the less acculturated. These relationships disappeared with controls, explained by greater social resources among less acculturated grandmothers, more were married, and had the parent at home. Fewer assumed care because of a parent's substance-related problems. The parent's presence in the household was related to a higher level of grandmother's well-being, and more sensitive family factors were considered. Furthermore, raising grandchildren with behaviour problems was related to the grandmother's negative affect. Results suggest that professions should target economic needs of new immigrants, as well as assisting with troubled grandchildren and dysfunctional parents. (RH)

ISSN: 00914150
From: http://baywood.com

The life stories of Holocaust survivors; by Brian de Vries, Peter Suedfeld.


The life stories of Holocaust survivors is the theme of this issue of the International Journal of Aging and Human Development. The authors set the context of articles in the existing literature, and reinforcing the relevance of the Holocaust in the field of gerontology. (RH)

ISSN: 00914150
From : http://baywood.com

Making change happen for black and minority ethnic disabled people; by Joseph Rowntree Foundation - JRF.


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
Full report (ISBN 1859353908) £7.95 (+£2.00 p&p) from York Publishing Services, 64 Hallfield Road, Layerthorpe, York YO31 7ZQ.

Minority ethnic elders in care homes: a review of the literature; by Freda Mold, Joanne M Fitzpatrick, Julia D Roberts.


Health and social care services are required to provide quality services to meet all older people's needs, including those specific to minority ethnic groups. The authors conducted systematic searches on the following online databases: Web of Science, Pub Med, Sociological Abstracts, Social Sciences Index, AMED, British Nursing Index, Medline, PsychInfo and CINAHL. International studies indicate possible differences in the preferences of care to minority ethnic elders, especially in relation to the nature of their care and their participation in care decisions. There is a paucity of UK literature and research specific to the care home sector: the existing literature highlights the need for greater cultural awareness, including communication issues, in order to enhance individualised care. Only those references referred to in the text are listed at the end of the article: the full list is available on the journal website (www.ageing.oupjournals.org) as Appendix 2. (RH)

ISSN: 00020729
From : http://www.ageing.oupjournals.org
Racial and ethnic differences in the relationship of caregiving stressors, resources and sociodemographic variables to caregiver depression and perceived physical health; by Silvia Sörensen, Martin Pinquart. 
Aging & Mental Health, vol 9, no 5, September 2005, pp 482-495.
Racial and ethnic differences in the association of stressors, resources and sociodemographic characteristics with depressive symptoms and perceived physical health were investigated. Data from 653 White non-Hispanic caregivers, 278 African American and 218 Hispanic Alzheimer's caregivers (209 men, 940 women) who were assessed at the baseline data collection of the REACH (Resources for Enhancing Alzheimer's Caregivers Health) study, a multi-site trial of caregiver interventions, was obtained. Multiple sample analysis, which allows testing whether a pattern of relationships is invariant across different samples, was used. Results support the hypothesis that, despite significant differences in resources and stressors, the predictors of depression and health are relatively uniform across groups. Ethnic differences were found for the effect of age, income, gender and care receiver's self-care impairments on caregiver depression. For perceived physical health, there were ethnic differences in the effect of income, gender and type of caregiver relationships. (RH)
ISSN: 13607863
From: http://www.tandfonline.com

Racial differences in formal long-term care: does the timing of parenthood play a role?; by Kathleen A Cagney, Emily M Agrée.
Differential effects of teen childbearing across American racial groups indicate differential vulnerability to long-term care (LTC) needs among early parents. Linking measures for the 1999 National Long-Term Care Survey with Medicare claims (1989-1993), the authors model age at first use of institutional (skilled nursing facility) use and home health as competing risks, using a Cox proportional hazards model. Early parenthood was found to accelerate first use of home health in Whites, but delays use in Blacks. The likelihood of any LTC use by race group converges as timing in parenthood increases. (RH)
ISSN: 10795014
From: http://www.geron.org

Racial disparities in self-rated health at older ages: what difference does the neighborhood make?; by Kathleen A Cagney, Christopher R Browning, Ming Wen.
Analyses incorporating individual and neighbourhood-level contextual indicators may further our understanding of the complex association between sociodemographic factors and health. The authors use the US 1990 Decennial Census, the 1994-1995 Project on Human Development in Chicago Neighborhoods - Community Survey, and selected years of the 1991-2000 Metropolitan Chicago Information Center - Metro Survey, to examine the impact of neighbourhood structure and social organisation on self-rated health for a sample of 630 Chicago residents aged 55+. They used multilevel modelling to examine both individual and neighbourhood covariates. Findings indicate that affluence - a neighbourhood structural resource - contributes positively to self-rated health, and attenuates the association between race and self-rated health. When the level of affluence in a community is low, residential stability is negatively related to health. Collective efficacy, a measure of neighbourhood social resources, is not associated with health for this older population. (RH)
ISSN: 10795014
From: http://www.geron.org

Racial disparities in self-rated health at older ages and the dangers of obfuscating neighborhood effects research: authors' reply [to: invited commentary: Subjective health and the dangers of absent individual effects and crude contextual proxies of causal mechanisms; by Stephen M Golant]; by Kathleen A Cagney, Christopher R Browning, Ming Wen.
In his commentary (pp S191-S192), Stephen Golant queried whether in their original article, the authors made sufficient use of the data at their disposal in linking neighbourhood characteristics to residents' health variables. In their response, the authors discuss the role of omitted individual-level measures, particularly related to psychological indices. They address concerns about the sophistication of neighbourhood-level measures; and they review the relevance of these comments for racial disparities to health. (RH)
ISSN: 10795014
From: http://www.geron.org

Resilience is an important adjunct to chronic illness management in later life. The authors examined older African Americans' philosophies about their chronic illnesses, also how those philosophies affected chronic illness management. Three to five in-depth interviews were conducted over the course of several years with 38 respondents aged 65-91. Both open-ended and semi-structured questions were asked. Respondents demonstrated determination, perseverance and tenacity, no matter how serious their illnesses were. Racism was instrumental in shaping the responses of these African Americans to their illnesses through cultural values that emphasised independence, spirituality and survival. Respondents demonstrated a resilient philosophy as they faced disabling illness. The research attests to the importance of examining racism in the analysis of how older ethnic minorities live with chronic illness. (RH)

ISSN: 10795014
From: http://www.geron.org


Diversity among 543 African-American grandmothers from the Woodlawn Longitudinal Study in Chicago is examined. Women were categorised on the basis of their household composition, degree of care provided to grandchildren, and status of primary caregiver to grandchildren during lifetime. Overall, 67.7% of the sample engaged in parenting and exchange behaviours at high or moderate levels. 27% co-resided with and provided care to grandchildren; 28% did not co-reside but had been primary caregivers in the past; and 45% did not co-reside and had never been primarily responsible for a grandchild. Heterogeneity was found among seven grandmother types on economic measures, life events and grandchild characteristics. Grandmothers with earlier primary responsibility and those currently in homes of three or more generations were associated with poor outcomes. Policy and practice can be informed by additional research on status, context and timing of assuming responsibilities for grandchildren. (RH)

ISSN: 00914150
From: http://baywood.com


The author inquires into the life of a single Holocaust survivor in order to give a "thick description" of the dynamics of talking about the past over time. David K, born in 1928 in Gheorgheni, Hungary, was deported to Auschwitz in 1944, where he spent one month before entering slave labour camps in Mühldorf and Mittergars. The author's reading of David's life is based on two interviews, the first from 1982 (at age 54) and the second from 1995 (at age 67). "Narrative mapping", a method of structural interpretation based on the work of Labov and Waletzky (1967) is used, in order to visualise the amount of overall consistency between the two interviews. The individual narratives that are repeated over time are also studied carefully. Schiff's reading of David's interviews suggests strong consistency along with significant changes. There is great consistency in the structure and content of narratives, but differences in the point of evaluations of narratives. Schiff also argues that David's later interview contains several new narratives and integrates historical insights into his account of the past. The merits of two explanations for this change, culture and time in development are discussed; and possible strategies for researchers interested in working with the vast archives of survivor interviews are suggested. (RH)

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From: http://baywood.com

2004

Consultations with groups of older people from black and minority ethnic (BME) communities found that older people often felt they had been "researched to death" over the past 15 years. Work by REU (formerly the Race Equality Unit) highlighted the need to move beyond traditional research issues, and move into ways about bringing change into practice. The Joseph Rowntree Foundation (JRF) published Jabeer Butt and Alex O'Niels full report, "Let's move on: black and minority ethnic older people's views on research findings." (RH)
The care and abuse of minoritized ethnic groups: the role of statutory services; by Liz Forbat.


Abuse in care relationships is an increasing concern in social policy and service provision. Attention has been drawn to the abuse of cared-for people in their own homes, the abuse of carers by family members and the abuse of people in institutional settings. Drawing on qualitative research with carers and carees from Asian and African-Caribbean backgrounds, this paper explores a different conceptualisation of abuse which moves away from an interpersonal understanding, to one that recognises structural inequalities as a form of 'institutional' abuse of carers and those who receive care. This reconceptualisation of abuse gives particular attention to forms of racism and discrimination in the provision of services to minoritised carers or cared for people. It therefore contributes significantly to discussions of caring and race equality in the health and social care fields. (RH)

ISSN: 02610183

From: http://www.sagepublications.com

The debate on ethnicity and dementia: from category fallacy to person-centred care?; by S Iliffe, J Manthorpe.


Ethnicity is a general concept that subsumes and conceals the impact of migration, education, health beliefs and socio-economic status on health, and therefore is problematic. Empirical research on dementia and ethnicity reveals that intra-ethnic group variation is greater than inter-ethnic group variation. Supporting the view that ethnicity is a category may not have great explanatory power and may foster a category fallacy. However, the experiences of people with dementia and their carers show that the important issues for service providers to consider are language, religious belief and observance, cultural practices (including food and personal care practices) and social support and coping mechanisms. In this position paper, the authors argue that these issues are applicable to all individuals with dementia, independent of apparent ethnicity, and that promotion of cultural competence in service provision should not be relegated to an ethnic minority agenda. The task for health and social care providers is therefore to recognise the diversity of users and to increase access to appropriate quality mainstream person-centred services, rather than to develop segregated or specialised services. (RH)

ISSN: 13607863

From: http://www.sagepublications.com

Depression in first generation labour migrants in Western Europe: the utility of the Center for Epidemiological Studies Depression Scale (CES-D); by J Spijker, F B van der Wurff, E C Poort (et al).


The number of older migrants of Turkish and Moroccan descent in Western Europe will increase sharply in the next decades. Identifying those who are depressed necessitates a screening instrument that is both acceptable and has good psychometric properties. This study examines the utility of Turkish and Arabic translations of the Center for Epidemiological Studies Depression Scale (CES-D) in older labour migrants of Turkish and Moroccan descent in the Netherlands. Data were derived from a community-based health survey of 304 native Dutch, 330 Turkish and 299 Moroccan migrants aged 55-75 living in Amsterdam. Acceptability of the CES-D was satisfactory, although Moroccan migrants and Turkish females had difficulty answering one or more of the (interpersonal) items from the CES-D. The utility of the Turkish and Arabic translations of the CES-D was found to be satisfactory for both Turkish and Moroccan older people. This fits the hypothesis that Turkish and Moroccan older migrants tend to somatize their depressive symptoms much more than their native Western counterparts. (RH)

ISSN: 08856230

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

Do they look after their own?: informal support for South Asian carers; by Savita Kathbamna, Waqar Ahmad, Padma Bhakta (et al).


Community care policy in the UK assumes that the care of frail older people with disabilities would be a joint responsibility for health and social care professionals, and family carers supported by people within their social networks. This paper is based on a qualitative study of the experiences of carers in South Asian communities that examined the quality and quantity of informal support available to different types of households. 33 male and 72 female carers were selected from the Punjabi Sikh, Gujarati Hindu, Bangladeshi and Pakistani communities. Participants were caring for people in all age groups with physical and/or mental distress, and in some cases with multiple or complex impairments. The analysis of carers' accounts suggested that for a variety
of reasons, the main carers, irrespective of gender, had limited support both in nuclear and extended households. Also, societal attitudes towards disability and the fear of obligation prevented the seeking and accepting of help from wider social networks. The evidence does not support the assumption about extended families and their willingness and ability to support carers. (RH)

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From: www.blackwellpublishing.com/hsc


A recent group of studies examined the mental health of older migrants in the UK. In the current study, a retrospective case note review of first contacts to the old age psychiatric service from 1997 to 2002 in Tower Hamlets identified cases of schizophrenia-like psychosis (SLP). Among the African- and Caribbean-born, but not the Bangladeshi-born, the odds ratio of being referred with SLP was significantly higher than for the British-born population. The usual female preponderance of SLP is not apparent in this older migrant population. In a 1-year review of first contacts for all diagnostic categories, there was a higher rate of referrals in organic disease in Bangladeshi men compared to Bangladeshi women and British-born men and women. Old age psychiatric services in the UK should take into account the increasing needs of Bangladeshi elders with dementia. (RH)

ISSN: 08856230
From: http://www.interscience.wiley.com


Race on the Agenda (ROTA) is a social policy think tank devoted to issues that affect London's black and minority ethnic (BME) communities. This supplement to ROTA's journal, Agenda, is published in the context of the government's proposals to set up a Commission for Equality and Human Rights (CEHR), as outlined in the White Paper "Fairness for all". It reviews evidence relating to BME elders' issues; describes forms of discrimination experienced by BME disabled people; and outlines BME communities' faith issues. It also examines the concerns of BME women's groups, and issues affecting London's BME lesbian, gay, bisexual and transgender communities. (RH)

From: http://www.rota.org.uk


Ethnic differences are examined in the key influences on quality of life for older people in the context of British older people's increasing health and wealth generally, and in the ageing of post-1945 migrants. This article is based on secondary multivariate analysis of the Fourth National Survey of Ethnic Minorities of England and Wales. Respondents aged 45-74 years belonging to four ethnic groups were included in the analysis, which focuses on differences by age and gender, using the white population as the reference group. Four dimensions (incorporating seven factors) that influence the quality of life were determined among this age group: quality of neighbourhood; social networks and community participation; material conditions; and health. For the factors based on conventional indicators of social inequalities, the white group ranked highest, the Pakistanis lowest, and the Indian and Caribbean groups ranked second and third. But factors that capture more immediate and subjective elements, such as frequency of family contact and the desirability of the residential neighbourhood, displayed a diametrically opposite rank order, with the Pakistani group ranked first and the white group fourth. The study highlights the value of examining separately the various influences on quality of life. Contradictory patterns are revealed in key influences that are hidden in global measures. The study also reveals the difficulty of identifying culturally neutral measures of quality of locality, with ethnic minority groups having a more positive perception of their area than rated by conventional measures of area deprivation such as the Index of Deprivation. (KJ/RH)

ISSN: 0144686X
From: http://journals.cambridge.org/


The needs of older Asians with dementia and their carers were examined in a project carried out in an area with an Asian majority population in the Dartford and Gravesham area of North West Kent. The focus is on the identification of need and on factors which block access to care and support. The project was funded by the
Mental Health Foundation and based at Alzheimer's and Dementia Support Services (ADSS), a local Kent charity. This article outlines the findings and general implications of the research. There are recommendations for practitioners and commissioners about raising awareness, service development and training. The report on the project, "Culture and care in dementia: a study of the Asian community in North West Kent", is published by Alzheimers and Dementia Support Services. (RH) 

ISSN: 14769018  
From: http://www.pavpub.com

Immigration, emigration and the ageing of the overseas-born population in the United Kingdom; by Michael S Rendall, Deborah J Ball. 
Data are used from the 1971 and 2001 Censuses together with the Labour Force Survey (LFS) of 1999-2003 and the International Passenger Surveys of 1977-2002 to investigate the migration processes contributing to the age structure and ageing of the UK's overseas-born population. Overall, almost half of recent decades' immigrants to the UK emigrate within 5 years of arrival, but with large variation of overseas country of birth. Between half and two-thirds of the immigrants born in the continental European Union (EU), North America and Oceania emigrate again within 5 years, while 15% of those born in the Indian sub-continent do so. Significant cumulative emigration more than 5 years after arrival is seen among earlier immigrants from the Indian subcontinent, the Caribbean Commonwealth and Europe. Large country-of-origin variations in the ratio of pension-age population to working-age population primarily reflect the country composition of immigration streams 30 or more years before. (RH) 
ISSN: 03074463  
From: http://www.statistics.gov.uk

Increasing the participation of older minorities in health research; by Diane R Brown, Mark Alexander. 
The US National Institute on Aging (NIA) of the National Institute of Health is behind a major initiative, the Resource Centers on Minority Aging Research (the RCMARs), and has encouraged projects in which recruitment of minority elders has been a critical component. A number of recurrent themes emerge from the articles in this special issue of the Journal of Aging and Health: the need to understand the perceptions of older minorities towards research and research participation; the necessity to build trusting relationships in minority communities; gathering systematic evidence on effective recruitment techniques; and retaining minorities in longitudinal studies. (RH) 
ISSN: 08982643  
From: http://www.sagepub.com

Inequalities in quality of life among older people from different ethnic groups; by Jo Moriarty, Jabeer Butt. 
British research on quality of life in old age has neglected the increasing ethnic diversity of the older population. Although studies of health and income inequalities have highlighted the contribution played by racism, analyses of the factors influencing the quality of life have rarely considered its effects. This paper discusses inequalities among older people from different ethnic groups, using data from a cross sectional survey of 203 White British, Asian, Black Caribbean, Black African and Chinese people aged 55+ living in England and Scotland. They were interviewed face-to-face in the language of their choice using a semi-structured schedule. Consistent with the existing literature, the study found differences in health, income and social support among ethnic groups. This paper suggests that future work should examine disparities in health and income within as well as between minority ethnic groups, and that a greater appreciation is required of the way in which such disparities may be accentuated by variations in health expectations, in the distribution of income within households, and in the willingness to discuss financial difficulties. The cumulative effects of health and material disadvantage and the experience of racism have implications both for future quality of life research and for government policies that aim to raise social inclusion and reduce inequalities. (KJ/RH) 
ISSN: 0144686X  
From: http://journals.cambridge.org/

"It's different from my culture; they're very different": providing community-based, "culturally competent" palliative care for South Asian people in the UK; by Alastair Owens, Gurch Randhawa. 
Health & Social Care in the Community, vol 12, no 5, September 2004, pp 414-421. 
The findings are discussed of a phenomenological study of service providers' attitudes to and experiences of caring for South Asian cancer patients in Luton. 10 semi-structured in-depth interviews were carried out with a range of staff who work in home- and community-based palliative care settings, including nurses, community
liaison personnel and representatives of non-statutory organisations. The authors consider how these service providers construct ideas of cultural difference, and how these relate to philosophies of palliative care. They examine attempts to deal with cultural diversity in everyday practice, focusing particularly on the social context of care in the home. The paper considers ways in which staff attempt to incorporate the cultural needs of patients, family, kin and community. Rather than criticising current working practices, the authors highlight the complexity of delivering culturally competent services from the perspective of those working directly with patients. In doing so, they contribute to ongoing debates about the development of anti-discriminatory practice in health and social care. (RH)

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From: www.blackwellpublishing.com/hsc


96 Anglo, 37 Latino, 30 Asian and 30 African American older people in San Francisco completed a short survey about Alzheimer's disease (AD). Results indicated that the Anglo older people are significantly more knowledgeable about AD than the other ethnic groups. Level of education partially accounted for differences in knowledge of AD between the Latinos and the Anglos. After controlling for age, number of years of speaking English was associated with knowledge of AD for the Asians. That certain ethnic groups have insufficient information about AD may explain their lack of AD service use. Extensive evaluation of barriers to knowledge of AD is needed in order to specifically target minority groups and educate them about AD and the importance of early intervention. (RH)

ISSN: 08856230
From: http://www.interscience.wiley.com


The views of black and minority ethnic older people are represented, based on an overview of research to 2001 and on a series of meetings with black older people in Leeds, Bristol and London, organised by REU in 2001. The authors explore the value of mainstream or community services in effectively meeting the needs of these older people, including the impact of funding. They consider the continuing problem of money in the lives of older people; continuity and change in family and community relationships; and the need to involve BME older people in planning and carrying out future research. The report notes that subsequent funding proposals have resulted in new projects starting in 2003 with BME communities in Leeds, Gloucestershire and Newham. The Joseph Rowntree Foundation (JRF) has supported this project as part of its Older People Programme of research and innovative development projects. (RH)

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www.jrf.org.uk/bookshop


MEC Minority Elderly Care is a UK-led research project with partners in Finland, France, Netherlands, Spain, Germany, Hungry, Bosnia-Hercegovina, Croatia and Switzerland. In this report, contributors from each country present information and data variously on demographic patterns, the socioeconomic situation of ethnic minorities, and health and social care service provision and take-up. For the first time, statistically significant research evidence is available on the circumstances and opinions of informants aged 50+ from more than 20 minority ethnic groups across Europe, considering as the report does, service issues from the points of view of both minority ethnic elders and health and social care professionals. The MEC project is supported by the European Commission's Fifth Framework Research Programme (the Ageing Population and Disabilities) under the Quality of Life and management of Living Resources Programme (1998-2002). (RH)

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Price: £30.00
From: PRIAE Head Office, 31-32 Park Row, Leeds LS1 5JD. E-mail: sam.turner@priae.org Website: http://www.priae.org

Minority elderly health and social care in Europe: summary findings of the Minority Elderly Care (MEC) Project ...; co-ordinated by Naina Patel at PRIAE; by Naina Patel, Kathryn Watson, Tasse Abye (et al), Minority
This Research Briefing provides an overview of key results from the MEC (Minority Elderly Care) study across the 10 participating countries: UK, Finland, France, Netherlands, Spain, Germany, Hungary, Bosnia-Hercegovina, Croatia and Switzerland. The MEC project was submitted as a research proposal in 2000 under the European Commission's Fifth Framework Research Programme (the Ageing Population and Disabilities). For the first time, statistically significant research evidence is available on the circumstances and opinions of informants aged 50+ from more than 20 minority ethnic groups across Europe, considering as it does services issues from three dimensions: minority ethnic elders; health and social care professionals; and the minority ethnic voluntary sector. (RH)

From: PRIAE Head Office, 31-32 Park Row, Leeds LS1 5JD. E-mail: sam.turner@priae.org  Website: http://www.priae.org

Older people from black and ethnic minority groups - local government strategies: survey findings from 128 UK local government bodies; 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, 14 pp (BGOP research series: no 2).

Paraphasias in Cognistat: pathognomic sign or ethnic-linguistic artifact?; by Mark Floyd, Clyde P Donahoe, Stephen L Holliday (et al).
Paraphasia refers to verbal impairments in aphasia, and pertains to the use of an unexpected word for the originally intended word. In this study, Paraphasias on the Cognistat (Northern California Neurobehavioural Group, 1995) memory sub-test were examined in a sample of geriatric veterans (average age 77). "Robert" and "parrot" were the most frequently occurring paraphasias for the target words robin, carrot, piano and green. Paraphasia frequency and type varied by ethnic group: European-Americans were less likely to have a paraphasia; Hispanic-Americans were more likely to have a "Robert" or "parrot" paraphasia; and African-Americans were more likely to have a paraphasia other than "Robert" or "parrot". Additional research is needed to determine the cause of paraphasias on the Cognistat and the clinical significance of paraphasias for each ethnic group. (KJ/RH)

ISSN: 07317115
From: http://www.tandfonline.com

"The place where I grew up": ethnic minority reminiscence comes of age; by Geoff Garvey, Age Exchange Reminiscence Centre, London.
The Age Exchange Reminiscence Centre in Blackheath, London is staging an arts festival to celebrate the life stories of people from ethnic minorities now living in the UK. The festival, called "The Place Where I Grew Up", is also being used to launch a book on reminiscence work with ethnic minority elders, including those with dementia. This article outlines the development of the reminiscence project that has received help from trained art workers for older people at community and day centres. (RH)
ISSN: 13518372
From: Email: shital@hawkerpubs.demon.co.uk

Race comparisons of the household dynamics of older adults; by Chuck W Peek, Tanya Koropeckyj-Cox, Barbara A Zsembik (et al).
Longitudinal studies have suggested that households are much more fluid than was once believed. Yet our understanding of changes in household composition is based on limited sets of transitions occurring across relatively long intervals. Furthermore, we know relatively little about ethnoracial variation in household dynamics. Using data from a sample of older Floridians, the authors describe race differences in longitudinal
patterns of household change that occurred during four 6-month intervals. About a quarter of respondents experienced some change in composition during the 24-month study. Older African Americans lived in larger and more dynamic households, and were more likely to form co-resident relationships with grandchildren and non-relatives. Age, gender, marital status, and disability were also associated with the likelihood of acquiring a new household member. Findings from this research provide additional insights in the processes through which race differences in the composition of households emerge and are maintained over time. (RH)

ISSN: 01640275
From: http://www.sagepub.com

The role of ethnicity and religion in the social support system of older Dutch Canadians; by Joanne van Dijk.
Ethnic and religious differences influence the kind of support available to older Dutch Canadians. This paper focuses on the role of religion and ethnicity in providing support for older Dutch Canadian Catholic and Calvinist parents, and in establishing ethno-religious retirement and long-term care facilities. The data come from a 1995 survey of 79 older Dutch Canadian immigrants and their adult children (n=364) examining intra-ethnic differences in ethnic persistence and parent care. Continuity theory provides a theoretical framework for this study. In the past few decades, second generation Dutch Calvinist immigrants have been busy establishing retirement and long-term care facilities to look after the needs of the older Calvinist generation. In contrast, Dutch Catholic immigrants have established very few retirement and nursing homes for their older members. (RH)

ISSN: 07149808
From: http://www.utpjournals.com

Sampling minority ethnic older people in Britain; by Chih Hoong Sin.
The study of minority ethnic older people in Britain is hampered by the lack of a reliable sampling frame. There are few national studies, and most research projects are small and involve localised samples. The infrastructure for doing research with such population groups is poorly set up. This article attempts to address the needs of practitioners by reviewing the use of common sampling frames and approaches, pointing out caveats and highlighting potential. More recent and innovative sampling approaches are also discussed. The article deals with issues of bias, reliability, perspective and geography. Recommendations for improved practice include being more transparent in reporting the derivation of samples, making more efficient use of existing data sets, better ways of working with community organisations, as well as more effective collaborative research. It is also argued that various authorities and funding bodies should increase investment in this area, especially given the projected absolute and proportionate increases in minority ethnic older people in Britain. (KJ/RH)

ISSN: 0144686X
From: http://journals.cambridge.org/

Screening for cognitive impairment among older people in black and minority ethnic groups; by Chris Parker, Ian Philp.
There is a well-documented tendency for cognitive tests to underestimate the abilities of older people in black and minority ethnic groups. This gives rise to a substantially higher risk of mistaken diagnosis of dementia. Reasons include differences in extent or focus of formal education, lack of familiarity with English, lack of literacy in own first language, and culture-specific factors related to individual test items. Translated and/or adapted versions exist for several standardised tests. This article summarises cultural modification and evidence of cross-cultural performance for traditional tests: the Mini-Mental State Examination (MMSE), Short Portable Mental Status Questionnaire (SPMSQ), Short Orientation-Memory-Concentration Test (OMC), Abbreviated Mental Test Score (AMTS), Clifton Assessment Procedures for the Elderly (CAPE), Clock Drawing Test (CDT), Mini-Cog, 7-minute screening battery, and Time and Change Test (T&C). There are promising results on such "culture free" tests, which are seen as less threatening and require little language interpretation; however, more evidence is needed. (RH)

ISSN: 00020729
From: http://www.ageing.oupjournals.org

The settlement patterns and residential histories of older Gujaratis, Punjabis and Sylhetis in Birmingham, England; by Vanessa Burholt.
Britain's minority ethnic groups are numerous and diverse. Among them there are complex relationships between their origins, the timing of their arrival by decade, and the age of the migrants, their geographical
distribution in Britain, and gender differences in their occupation status distributions. All these lifecourse attributes have implications for the migrants' situations as they reach old age. To advance our knowledge and understanding of these factors, this paper examines the lifecourse of a sample of 303 South Asian older migrants living in Birmingham: 103 Gujaratis, 100 Punjabis and 100 Sylhetis. The paper examines their living arrangements, education and language abilities, occupational status, and settlement and moves within the UK. The associations between ethnic group membership, gender and pre-migration histories are related to differences in their settlement patterns and residential mobility in Britain. The findings show variations in the timing, chronology and locations of each ethnic group's major lifecourse events; in the meanings associated with the events; and in the outcomes in late life. The similarities and differences between the ethnic groups and between men and women are discussed with regard to the current socio-economic situation of ethnic older people in the UK and the prospect for continuing inequalities. (KJ/RH)

ISSN: 0144686X
From: http://journals.cambridge.org/

Taking the community into the home; by Joy Notter, Truus Spijker, Koos Stomp.
Health & Social Care in the Community, vol 12, no 5, September 2004, pp 448-453.
The changing demographics of the population are such that there is an increasing need for care for frail older people with both physical and mental health problems. At the same time, the increased migration of workers and their families mean that care provision now has to embrace a range of cultures. This paper explores how the concept of cultural safety has importance for those planning and providing care for older people. The recognition that removing individuals with mental health problems from their own environment causes increased disorientation and confusion has led to some organisations trying to maintain the community aspects of life when independent living is no longer possible. This paper focuses on two such organisations in the Netherlands, demonstrating how they have changed their practice to improve and enhance quality of life of their clientele through “taking the community into the home”. These are: Hogewey, in Weesp, near Amsterdam, which caters for those with dementia; and De Schildershoek, a nursing home in a very deprived, multiethnic community in The Hague. (RH)
ISSN: 09660410
From: www.blackwellpublishing.com/hsc

People who speak little English need interpreters in order to use health, legal, social welfare and education services. Most evaluations of interpreting provision have been conducted from a service provider perspective. An in-depth study by researchers from London South Bank University, Salford University and the London School of Economics (LSE) examined the experiences of people who need interpreters. Semi-structured interviews were carried out with 50 people, ten from each of the following groups, in their first language: Chinese and Kurdish people living in Greater London; and Bangladeshi, Indian and Polish people living in Greater Manchester. These findings outline the main points on who is a good interpreter, the use of professional interpreters, and using family and friends as interpreters. The Joseph Rowntree Foundation (JRF) has published the full report, “Access to services with interpreters: user views”, by Claire Alexander and colleagues. (RH)
ISSN: 09583084
Price: FOC

Who do we trust?: review of the housing advice needs of black and minority ethnic elders; by Help the Aged.
The Office of Public Management was commissioned to conduct this review of housing and related advice needs of black and minority ethnic (BME) older people, with a particular focus on London. The report explores the demographics of BME groups in the UK, and outlines BME elders' housing circumstances and related advice needs. It considers four levels of advice provision, starting with government bodies that inform policy on social exclusion and advice services, such as the Office of the Deputy Prime Minister (ODPM) and Care Direct. Next, it highlights how mainstream service providers (older people's organisations and generalist advice services) engage with BMEs. Services provided in four London Boroughs are examined: Camden, Tower Hamlets, Lambeth and Brent. Lastly, the report outlines what BME and community groups need, in order to provide a more effective role in relation to the other three types of provision. The report shows that the triple discrimination of age, ethnicity and poverty means that BME elders are likely to be among the most socially excluded, with significant needs for advice, information and effective advocacy. A range of obstacles prevents them from accessing such help and support, and hence from exercising their rights and entitlements. (RH)
Working with elderly Asian clients; by Marian Liebmann.


The positive role is demonstrated of a weekly art therapy group at the Asian Day Centre in Bristol, which was part of the author's work with the Inner City Mental Health Team (ICMHT) in the late 1990s covering a multicultural client group in central Bristol. Her article outlines the work of the Centre and the range of art work produced. She also relates practice to the literature on multicultural applications of art therapy. This article is a short reworking of a short paper presented at the Theoretical Advances of Art Therapy Conference, 2000. (RH)

ISSN: 09652000

African American dementia caregivers: the duality of respect; by Jane Cloutterbuck, Diane Feeney Mahoney.

Dementia: the international journal of social research and practice, vol 2, no 2, June 2003, pp 221-244.

African American elders are more likely to develop dementia than other US ethno-cultural elders and non-Hispanic whites. This study explored the perceptions and experiences that African American caregivers of family members with dementia encountered on their journey towards obtaining a diagnosis of dementia for their relatives. An overall theme of respect emerged from a focus group session with seven family caregivers. Reports of respecting older family members through "normalisation", thereby delaying evaluation for dementia, then encountering a lack of respect from health care providers when one was finally sought, created a duality of respect versus disrespect. This tension constituted a subtle but profound form of caregiver stress that may be unique to African American caregivers, and one that has not been considered in standardised measures. Findings inform providers about important issues to consider when working with and studying dementia caregiving with African American families. (RH)

ISSN: 14713012

Age, vascular risk, and cognitive decline in an older, British African-Caribbean population; by Robert Stewart, Martin Prince, Anthony Mann.


Older African Caribbean people have a high risk of cerebrovascular disease, also high prevalence rates of hypertension and type II diabetes mellitus. 290 Caribbean-born people aged 55 to 75 were recruited for this study from seven primary care services in south London, and were reinterviewed after 3 years. Tests of verbal memory (immediate and delayed), orientation and attention were administered at baseline and at 3 years. A composite measure of cognitive change was derived through factor analysis. Cognitive decline was strongly associated with increased age, but not with sex, education or occupation. It was also directly associated with hypertension, diabetes mellitus or exercise, but the age-decline association was significantly stronger in those reporting vigorous physical exercise at baseline. When cognitive decline was investigated separately for individual tests, both these patterns of association were particularly strong for decline on delayed verbal recall. (RH)

ISSN: 00028614

Caregiver role strain: the contribution of multiple roles and available resources in African-American women; by S Wallace Williams, P Dilworth-Anderson, P Y Goodwin.


While the roles of spouse, parent and employee are normative for middle-aged people, strain associated with each role may increase when the role of caregiver is added. This study of 148 African American women providing care to older family members aimed to determine the relationship between the caregiver's other roles (marital, parental, employee), specific combinations of these roles, and role strata; and to determine the relationship between available resources (economic, social and personal) and role strain. A model using multiple linear regression was analysed. Caregivers with higher depressive symptomatology were more strained. However, neither additional multiple roles, nor a combination of roles were significantly related to role strain. It would be a disservice to African-American caregivers, though, to operate under the assumption that they provide care with little emotional cost. Continued within-group analyses are needed to understand differential outcomes of these caregivers. (RH)
Correlates of emotional support and negative interaction among older black Americans; by Karen D Lincoln, Robert Joseph Taylor, Linda M Chatters.


The present analyses are based on the responses of 519 older African American respondents (aged 55 to 96) from the Americans' Changing Lives Survey. Structural equation modelling was used to estimate the direct and indirect effects of sociodemographic variables (i.e. age, gender, education, income, marital status, and presence of children), social contact factors (i.e. frequency of face-to-face and telephone contact), and personality (i.e. extraversion and neuroticism) on emotional support and negative interaction with relatives and friends. Most of the Blacks in this sample participated in emotionally supportive relations with relatives and friends, whereas negative social interactions were reported with less frequency. Gender, marital status and extroversion were significantly associated with emotional support, while age, education, marital status, having a child and neuroticism were identified as correlates of negative interaction. The role of personality factors in these processes is thus emphasised. (RH)


The Department for Work and Pensions (DWP) commissioned BMRB Social Research to fill an important gap in the Department's knowledge regarding barriers to benefits take-up and access to services for pensioners from black and minority ethnic (BME) groups. The project consisted of case studies in seven different areas, each focusing on one minority ethnic group: Indian, Bangladeshi, Pakistani, Chinese, African, African-Caribbean, and Irish. Each case study involved interviews with staff in the local authority, and local voluntary and community groups, as well as with the older people themselves. Key themes identified across the study included: how services were provided; the desire for a simpler system; reaching isolated people; and providing services for women. Strategies suggested for overcoming barriers and targeting services included: partnership working; outreach and face-to-face services; language-specific communication; and a role and resources for the voluntary sector as well as DWP agencies such as the new Pensions Service. (RH)

Determinants of a sense of mastery in African American and white older adults; by Yuri Jang, Amy Borenstein-Graves, William E Haley (et al).


The association between predictor variables (sociodemographic variables, health conditions, social resources, and religiosity) and feelings of mastery was assessed, using representative community-dwelling samples of 250 African Americans (mean age 71.6) from the Hillsborough Elder African American Life Study (HEALS) and 452 Whites (mean age 73) from the Charlotte County Healthy Aging Study (CCHAS). Although the African Americans were found to have a lower sense of mastery than the Whites, their feelings of mastery were less likely to be diminished by old age and poor health, but more likely to be enhanced by feelings of religiosity. (RH)

Diverse expectations: [quality of life and social support among people from different ethnic groups]; by Mike George.


By 2030, the UK's minority elder population will have risen to around 1.7 million. This article examines research looking at the quality of life among Britain’s minority ethnic populations, and the challenges laid down by its findings. The research is based on a sample of 200 older people with different racial and cultural backgrounds who had participated in the Family Resources Survey (FRS). The resultant report, "Quality of life
Fit to care?: a comparison of informal caregivers of first-generation Black Caribbeans and White dependants with advanced progressive disease in the UK; by Jonathan S Koffman, Irene J Higginson. Health & Social Care in the Community, vol 11, no 6, November 2003, pp 528-536.

The main needs and problems experienced by informal caregivers of Black Caribbean and White native-born patients in their last year of life are described and compared. The survey took place in three inner London Boroughs. Of the 106 Black Caribbean and 110 White patients identified as dying during the survey period, 50 interviews per ethnic group were conducted. Of these, 31 respondents representing Black Caribbean and 28 representing White dependents said they bore the brunt of caregiving. Those who cared for Black Caribbean dependants were more likely to be women (84%, vs 46% White) and younger than 55 (73% vs 37%). The personal care tasks with which caregivers assisted their dependents were similar, as were the informal resources on which they drew. Many caregivers reported restrictions in their daily lives; this was more pronounced for those caring for Black Caribbean dependants. (RH)

ISSN: 09660410

Hispanic diversity and health care coverage; by Jacqueline L Angel, Ronald J Angel.: National Academy on an Aging Society, Summer 2003, pp 8-12.


The 2000 Census in the US has revealed a new and important aspect of American society: that Americans who trace their ancestry back to the countries of Latin America and the Caribbean outnumber African Americans, and that Latin American culture has extended its influence into every aspect of American life. Of course, Hispanics are of all races, so a good bit of this growth also represents an addition to the African American population. Whether Black or White, though, Hispanics are contributing to a growing ethnic and cultural diversity that is giving America a new and darker face. In this article, the authors ask what the changing face means for the US health care financing system. In the absence of universal health care, employment remains the main source of health insurance coverage for American families. Given the employment handicaps of large segments of the Hispanic population, many of these families are at risk of inadequate health care coverage. (RH)

ISSN: 10553037

"In our blood": respite services, family care and Asian communities in Leicester: summary report; by Nick Jewson, Syd Jeffers, Virinder Kalra, Department of Sociology, University of Leicester. Leicester: University of Leicester, 2003, 11 pp.

Older members of Asian communities are rapidly increasing in numbers and as a proportion of the total Asian population, both nationally and in Leicester. Hindu, Muslim, Sikh and white Christian carers and elders were interviewed between 1999 and 2001 in three areas of Leicester - Belgrave, Highfields and Evington - chosen for their contrasting ethnic and socio-economic characteristics. This summary outlines findings on the needs of these elders and carers for respite services. Specifically, the research suggests that many Asian carers and elders do not make use of respite care in proportion to their need; various institutional barriers to access are identified. Evidence was found both for a decline in and persistence of family care, by virtue of changes in family dynamics and in the lives of family members such as daughters-in-law. The availability of culturally appropriate
services which employ staff from the communities concerned, would make respite services more attractive for the Asian carers and elders in this survey. (RH)

Price: FOC
From: Department of Sociology, University of Leicester, Attenborough Building, Leicester LE1 7RH. Full report: www.le.ac.uk/sociology/respitecare/


In February 1998, President Clinton made a commitment on behalf of the US government to work toward the elimination of health disparities in racial and ethnic minority populations by 2010. The authors argue that this "call to arms" requires a better understanding of the current health problems experienced by America's major racial and ethnic groups. Racial and ethnic differences in mortality are one measure of health status that points to pervasive health disparities among older Americans. This article examines some of the health differences that segment the lives of the major racial and ethnic groups. Some of the challenges in understanding health disparities at a population level are reviewed, and some suggestions are offered in response to the lack of clarity about this problem. (RH)
ISSN: 10553037


Discussions of race often cause more heat than light. This is because race generates emotion, and emotion is often the antidote to reason. Race is the only variable that can turn otherwise disciplined rational scientists into irrational sloppy thinkers. Some have even suggested that we should simply stop studying race and health. Certainly, health disparities are a vexing problem, so perhaps it is understandable that one might conclude that a moratorium on race/health research might be in order. However, ignoring health disparities, ostrich-like, seems unlikely to be the best solution. This would do nothing for the more than 600,000 excess deaths that occur among American racial minorities each year. (RH)
ISSN: 10553037

Psychiatry services for ethnic elders; by Ajit Shah. Geriatric Medicine, vol 33, no 3, March 2003, pp 13-16.

It is apparent that the prevalence of dementia among ethnic elders of Indian subcontinent origin, "black" groups and the Chinese is essentially similar to that of the UK's indigenous population of older people. However, ethnic elders are poorly represented in many psychiatric services for geriatrics. The author considers why this discrepancy may have arisen, and what measures should be taken within both primary and secondary care to resolve it. (RH)
ISSN: 0268201X

Quality of life and social support among older people from different ethnic groups; by Jabeer Butt, Jo Moriarty, Michaela Brockmann (et al), Growing Older (GO) Programme, Economic & Social Research Council - ESRC. Sheffield: ESRC, October 2003, 4 pp.

This study set out to explore quality of life and social support among older people from different ethnic groups.
The authors carried out in-depth interviews with 203 older people from Caribbean, Asian (including Chinese), African and white communities aged 55 and over. The study suggests that ethnicity influences both collective and personal responses to perceptions of quality of life. At the same time, as a result of the experience of racism or because of poorer health, ethnicity may also have a negative or risk element. (KJ/RH)
Price: FOC
From: ESRC Growing Older Programme, Department of Sociological Studies, Elmfield, Northumberland Road, University of Sheffield, Sheffield S10 2TU. www.shef.ac.uk/uni/projects/gop/index.htm


This study determined whether the differences in assessed cognition between Black or African American and White older people was due to differential item functioning (DIF) and/or differences in the effect of background variables. Participants were 15,257 Americans aged 50+ surveyed in the Study of Asset and Health Dynamics in the Oldest Old (AHEAD) and the Health and Retirement Study (HRS). The cognitive measure was a modified version of the telephone interview for cognitive status. The analytic strategy was a multiple group structural
equation model grounded in item response theory. Results find that 89% of the group difference could be attributed to measurement or structural differences, the remainder being not significantly different from zero. Most items displayed racial DIF, accounting for most of the group difference. After controlling for DIF, the group difference that remained could be attributed to heterogeneity in the effect of background variables (e.g., educational attainment, income status). These findings underscore the importance of efforts to generate culture-fair measurement devices. However, culture-fair assessments may attenuate, but not eliminate, group differences in assessed cognition due to the incommensurate action of background variables. (RH)

ISSN: 13607863

From: http://www.tandfonline.com


It has been postulated that religious beliefs and spirituality may assist those caring for people with Alzheimer's disease (AD) in their caregiving efforts, and that coping strategies may also vary depending on ethnicity. The intent of this pilot study was to re-examine these theories by interviewing 5 African-American and 5 white caregivers of people with AD, using demographic and open-ended questions regarding spirituality, religious practices, and ethnicity. Five themes were identified: later-life development of beliefs, religious training and practice, family influences, impact of ethnicity on caregiving, and impact of spirituality and religion on caregiving. All caregivers felt their spirituality and/or religious practices shaped how they approached providing care; and all reported that they were influenced by their ethnic background. Most stated that religious practices and spirituality helped them deal with difficult challenges. This paper was originally presented at a symposium entitled "Spirituality and dementia: the search for meaning amid loss" at the 54th annual scientific meeting of the Gerontological Society of America held in Chicago in November 2001. (RH)

ISSN: 14713012

2002

Access to a community aged psychiatry service by elderly from non-English-speaking backgrounds; by Anne Hassett, Kuruvilla George.

A 12-month review of referrals to an older people's psychiatry service in Australia found that 48% of those referred were from non-English-speaking backgrounds (NESBs), and 78.8% of these were assessed with an interpreter. Taken as broad ethnic groups, older European migrants were similar to their representation in the local population, while those from Asian and other non-European backgrounds were under-represented. Socio-demographic differences were found for those from NESBs: they were more likely to be poorly educated, have a low proficiency in English, and have been employed in unskilled occupations. On the other hand, patterns of referral, diagnosis, past psychiatric history and outcome did not differ significantly between the two groups. Any lower utilisation of the service by certain ethnic groups may reflect obstacles in their pathway to care. Alternatively, strong family networks or a lower prevalence of mental illness may explain these findings. (RH)

ISSN: 08856230

Accessibility of health and social services to immigrant elders: the Islington Study; by G Livingston, G Leavey, G Kitchen (et al).

In this cross-sectional study, 1,085 people aged 65+ living in Islington were interviewed. Independent predictors of contact with a general practitioner (GP) included being born in Cyprus: Cypriots were the only immigrant population to report significantly more somatic symptoms than those born in the UK. Africans and Afro-Caribbeans used day care and other social services most frequently. While it would appear that older immigrants access primary and secondary health care and social care services, an under-reporting of contact with psychiatric services suggests a continued stigma. (RH)

ISSN: 00071250

Developing services for minority ethnic older people: the audit tool: Practice guidance for councils with social services responsibilities, in support of "From lip service to real service" (Department of Health, 2001); by Social Services Inspectorate, Department of Health - SSI, DH. London: Department of Health - DH, May 2002, 24 pp Cl(2002)3.
This audit tool has been prepared in the context of the National Service Framework for Older People (NSF), to act as practice guidance for all councils with social service responsibilities and other local stakeholders aiming to improve services for minority ethnic older people. The main part of the audit tool is a diagnostic
questionnaire covering: understanding minority ethnic older people's issues; minority older people and access; services; and providing a suitable workforce. (RH)

Price: FOC
From: DH Publications, PO Box 777, London SE1 6XH. NHS Resposeline: 08701 555 455

The effect of religious coping on caregiving appraisals of mothers of adults with developmental disabilities; by Helen B Miltiades, Rachel Pruchno.
71 Black and 71 White American women aged 50+ were matched on demographic characteristics to control for the association between race and socioeconomic status. Structural equation analysis was used to examine the relationship between race, religious coping and caregiving appraisals. Black women were more likely to use religious coping, which was associated with higher levels of caregiving satisfaction, but not with burden. Blacks experienced higher levels of caregiving satisfaction, but also experienced higher levels of caregiving burden due to their poor health. The needs of Blacks should be considered when developing "best practices" in service provision. Culturally sensitive outreach approaches should not ignore the importance of faith and faith-based organisations in the lives of Blacks. (RH)
ISSN: 00169013

Engaging with elders from ethnic communities; by T R Downes, B Allcock, A Symthe (et al).
Geriatric Medicine, vol 32, no 4, April 2002, pp 17-18, 21-22.
The NHS Plan and the National Service Framework for Older People (NSF) both identify a need for health and social services to be culturally sensitive to the needs of people from Black and ethnic minority communities. To this end, the Older Adult Directorate of South Birmingham Mental Health NHS Trust has adopted an outreach and partnership approach, to engage with ethnic communities. The development of partnerships with established local care services has been a key factor in the success of the community outreach team in ensuring accessibility of mental health services. (RH)
ISSN: 0268201X

The ethnic neighbourhood: a locus of empowerment for elderly immigrants; by Kathleen Valtonen.
Older immigrants still comprise a small percentage of Finland's total immigrant population. This article focuses on older Vietnamese immigrants in Finland who arrived as part of the first-generation refugee cohorts, and are now in their late 50s and 60s. From social integration and participation perspectives, the article uses the Varissuo area in the environs of Turku, to propose the ethnic neighbourhood as a spatial field of empowerment for this group. Culturally appropriate community development approaches are called for, as well as ongoing engagement with and support of informal circles which are already caring for older people. (RH)
ISSN: 00208728

"Long-term planning for British Jewry" is a JPR policy research programme with the aim of advancing development of policies and priorities for Jewish charities and voluntary agencies. "Facing the future" is part of this project, and brings together much of the key information needed for the effective strategic planning of services for older Jewish people. It reviews the current systems of formal social care provision for older Jews living in the UK; details key strategic issues faced by institutional care home providers; and investigates the needs and wants of older people. Future directions for the sector and how services for older people can be developed and improved are considered. (RH)
ISBN: 0901113298
Price: £10.00

Gender and racial inequities in retirement resources; by Thomas K Gregoire, Keith Kilty, Virginia Richardson.
Two waves of a US Social Security Beneficiary survey were analysed to consider differences in the retirement resources of women and men based on their marital status, race and ethnicity. Despite increased workforce participation, the economic situation of single women, including white women, worsened over time. A bifurcation in retirement resources was found: while men relied more on private income sources, women depended more on social security. Current retirement policies based on privatisation will continue to adversely impact women who work in low-paid jobs, receive lower wages, and live longer than men. (KJ/RH)
Gender, ethnicity and empowerment in later life; by Haleh Afshar, Myfanwy Franks, Mary Maynard (et al).
Studies of later life are increasingly emphasising the positive aspects at a time which is not successfully linked to decline and dependency. Gender is also accepted as an important variable in the experience of advancing years. However, the significance of ethnicity is less often emphasised. This article presents preliminary findings of a project in the ESRC Growing Older Programme. Based on preliminary analyses from research with older women from a variety of ethnic backgrounds, the article focuses on what they identify as important in terms of living their later years. The article emphasises migration and cultural differences in perceptions of ageing. It concludes with and discussion on the meanings of empowerment. (RH)

ISSN: 14717794

Issues of race, ethnicity and culture in caregiving research: a 20 year review (1980-2000); by Peggye Dilworth-Anderson, Ishan Canty Williams, Brent E Gibson.
59 articles on caregiving with particular reference to race, ethnicity and/or culture, and published between 1980 and 2000 are reviewed, based on a search of electronic databases, other review articles and reference lists. The review focuses on conceptual and theoretical approaches, sampling strategies, measurement techniques, and similarities and differences found among groups and across studies. Caregiving experiences and outcomes varied across racial and ethnic groups. However, the use of non-theoretical approaches, non-probability samples and inconsistent measures between studies has limited understanding of caregiving among diverse populations. Gaps identified in research point to the need for more attention to such issues as acculturation, assimilation, and cultural values, beliefs and norms, while also improving theoretical and methodological rigour. (RH)
ISSN: 00169013

A portrait of Jews in London and the south-east: a community study; by Harriet Becher, Stanley Waterman, Barry Kosmin (et al), Institute for Jewish Policy Research - JPR; National Centre for Social Research - NCSR.
This report on the findings of the largest piece of research within JPR's Long-term Planning for British Jewry programme (LTP) is based on 2,965 completed questionnaires, and aims to provide an accurate and current picture of relevant data on the Jewish population in the London metropolis and south-east England. Among the issues considered are; housing; lifestyle, health and illness; communication and leisure; participation in Jewish cultural activities; charitable giving and attitudes to voluntary work; and care for older people and the infirm. (RH)
ISSN: 13631306
Price: £10.00
From: Institute for Jewish Policy Research, 79 Wimpole Street, London W1M 7DD. Website: www.jpr.org.uk

Prioritising home care needs: research with older people from three ethnic minority community groups; by Bogusia Temple, Charlotte Glenister, Norma Raynes,
This paper draws on research with three minority ethnic community groups in Manchester, the aim being to prioritise social care needs. Focus groups were chosen as a way of beginning discussions about these issues. The findings suggest that some quality issues are relevant to all communities of older people. However, some were specific to the community groups. This paper describes some of the lessons learned about running focus groups with people whose first language is not English, and suggests some considerations for future research. (RH)
ISSN: 09660410

Relationship of race/ethnicity and blood pressure to change in cognitive function; by Arline D Bohannon, Gerda G Fillenbaum, Carl F Pieper (et al).
Longitudinal data for 1986/87 and 1989/90 on 2,260 African Americans and 1,876 whites from the Duke Established Populations for Epidemiologic Studies of the Elderly (EPESE), aged 65 to 105 at baseline, were used. While a relationship was found between systolic (but not diastolic) blood pressure levels and change in Short Portable Mental Status Questionnaire (SPMSQ) over a 3-year period in older white men and women, no
such relationship was found for older African Americans. There were no significant interactions between race and blood pressure on change in cognitive function. (RH)

ISSN: 00028614

Serving the needs of marginalised groups in dementia care: younger people and minority ethnic groups: summary of key findings and conclusions; by Gavin Daker-White, Angela Beattie, Robin Means (et al), University of the West of England; Dementia Voice. Bristol: Dementia Voice, 2002, 14 pp.

Funded by the Community Fund, the aim of the study was to examine the needs and provision of services to people with dementia aged under 65 years or from black and minority ethnic groups. Most of the report presents results of around 100 qualitative interviews with professionals, carers and people with dementia in the South West, those interviewed living or working in Bristol, Gloucestershire and Cornwall. Recommendations made concern information gathering for planning and organising appropriate care, provision of age-appropriate services, training, and flexible respite care. One of the main challenges noted is how the needs of marginalised groups with dementia can be met in rural areas, when services are provided at two regional specialist day care centres. (RH)

Price: FOC (Full report £5.00)

From: Dementia Voice, Blackberry Hill Hospital, Stapleton, Bristol BS16 1DD. Full report also available as an Adobe Acrobat file, http://www.dementia-voice.org.uk/Projects_Marginalised_Groups.htm


This special collection of articles serves as a timely response to the growing demand for a social work knowledge base on Asian American elders, who constitute a rapidly growing population group. Based on the US 2000 Census, the growth rate between 1990 and 2000 was 52.4%. According to US Bureau of Census projections, by 2050 Asian Americans will make up 6.3% of the older US population, compared to 9.3% Black Americans and 17.5% Hispanic. The Asian Americans are one of the most internally heterogeneous population groups in the US. Because a large proportion of them are foreign-born, first generation immigrants and most likely to adhere to the culture of their country of birth, their older people present the most variation in characteristics. As a result, all the articles are based on small samples of specific subethnic groups from geographically limited areas, and their findings may not be generalised to other such groups. These articles cover the five major ethnic groups (Chinese, Japanese, Korean, Indian and Vietnamese American elders) and deal with a limited number of problem areas. The aim is to enhance the knowledge of social workers, who need to become culturally competent with older Asian American population groups. (KJ/RH)

ISSN: 01634372

From: http://www.tandfonline.com


As part of the US Elderly Nutrition Program requirements, sociodemographic and functional status, also nutritional data were collected from a diverse sample of 729 older women, in order to assess indicators and correlates of high levels of nutritional risk. Results indicated that being black, having a low income, living alone and being in the age group 60-74 were associated with moderately high and very high levels of nutritional risk. With demographic projections of an increasingly numerous and diverse older population who may face health and nutritional challenges, researchers must strengthen efforts to assist policymakers and service providers to properly target nutrition services. (KJ/RH)

ISSN: 08952841

From: http://www.tandfonline.com


GO Findings: 10 - Research Findings from the Growing Older Programme, December 2002, 4 pp.

Studies of later life are increasingly emphasising its positive aspects as a time which is not necessarily linked to decline and dependency. While it is important not to underestimate the material and resource needs of older people and the very real constraints within which many live, it is also necessary to challenge negative stereotyping and examine the possibilities for pursuing satisfying lives. One relatively under-researched aspect of the ageing process relates to ethnicity. Although minority ethnic groups tend to have a smaller proportion of their population over 60 years, this is changing and commentators expect the current situation, where there are more minority ethnic men than women in the older population, to be reversed in the future. This project conducted interviews and focus groups with women aged 60+ from a variety of ethnic backgrounds. It focused
on quality of life, empowerment and what the women identify as enhancing or debilitating in terms of living their later years. (KJ/RH)

Price: FOC
From: ESRC Growing Older Programme, Department of Sociological Studies, Elmfield, Northumberland Road, University of Sheffield, Sheffield S10 2TU. www.shef.ac.uk/uni/projects/gop/index.htm

2001

Articles in this issue of Research on Aging focus on the ways in which ethnicity, a client's place of birth, and service providers interact to influence access to care and quality of care. Some studies suggest that similar conceptual models underpin the experience of diverse groups' interactions with the US health care system. Community-based organisations, on the other hand, often do well when they customise their services to clients of a specific ethnic or cultural sub-group. (RH)
ISSN: 01640275

In-depth interviews were carried out with 30 carers of a person with dementia of South Asian or African/Caribbean origin regarding their awareness, recognition and understanding of dementia symptoms. Maximum variation sampling was used to include carers with a broad range of socio-demographic characteristics. Most participants were aware of the condition “dementia”, but used different terms to describe the disorder. Many, however, had not heard of the condition before their relative developed it, suggesting that general awareness of dementia is low. Difficulties can arise in the caring relationship, due to a lack of understanding of the condition - in particular when family members place blame for the symptoms on the person with dementia. The research highlights the importance of raising dementia awareness, and emphasises the importance of health and social services providing clear and understandable information. (RH)
ISSN: 09660410

In a secondary analysis of routinely collected data on 245 participants of the home-delivered meals service from two rural North Carolina (NC) counties, blacks were 3.7 times more likely than whites to be at highest level of nutritional risk, with further increase in the odds when economic need was present. This underscores the importance of understanding racial and cultural differences in developing and delivering targeted and tailored nutrition services to older people. (RH)
ISSN: 01639366
From: http://www.tandfonline.com

Many "first generation" African Caribbean residents in the UK have now reached ages where risk of cognitive impairment and dementia starts to increase. Conditions such as hypertension, diabetes and stroke may also impair function in this population. Normative data are presented for a cognitive battery in a population of 285 African Caribbean participants aged 55-75 in south London. Tests used included: Boston Naming Test; verbal fluency (animal naming); CERAD word list; Clock Drawing Test; Trail-Making Tests A and B; and orientation (MMSE). Independent associations with age, education and social class were observed for scores on most (but not all) tests. Females scored worse on naming, verbal fluency and Clock Drawing. Compared with normative data for African populations, lower scores were observed for naming and verbal fluency, but scores on memory tests were comparable. (RH)
ISSN: 08856230

Using an innovative analysis, this article concocts an imagined 'dialogue' between hospice staff and minority ethnic service users. It mixes together narrative extracts about food from separate qualitative interviews,

This qualitative study, funded by the Joseph Rowntree Foundation (JRF), looked at the attitudes of Bangladeshis, Pakistanis and white men living in Oldham towards different types of retirement pension, and at their ability to make informed choices between alternative forms of second-tier pension provision. Low wages, financial responsibilities toward family and community, and unemployment were the main determinants for pension provision being a low priority for Bangladeshi and Pakistani men. These men also had little understanding of how different types of pension provision operated, but language itself was not a significant barrier to making pension choices. In the absence of compulsion, low-paid workers such as in this study who have not felt inclined to contribute to a second-tier pension scheme are unlikely to be attracted by a stakeholder pension. Indeed, the arrival of the new pension product may only serve to further complicate pension choices. (RH)

ISBN: 1902633180
Price: £14.95
From: York Publishing Services Ltd, 64 Hallfield Road, Layerthorpe, York YO31 7ZQ.


A discussion on the applicability of the shared care approach in the Chinese community in Britain is based on findings of two studies of family care of older people in London conducted respectively in 1991 and 1998. Both studies examined the needs of Chinese older people, and whether and how their needs were met by informal care. The findings show that there is a strong belief among Chinese families that older people should live with their sons. While the families were highly motivated to take care of their older family members, and many of them felt obliged to live with their parents and wanted to give assistance to them, not all were able to do so as much as they would have wished. Shortfall between what older people needed and the assistance they received was obvious, especially in relation to personal care. It is argued that traditional Chinese values still carry some influence in obliging the Chinese to look after their older family members. However, they are not sufficiently influential to guarantee sufficient care. A unique model of shared care is thus clearly and precisely called for by the findings of this study. (KJ/RH)

ISSN: 0144686X

Focus on services to black and minority ethnic older people [a series of six articles]. Working with Older People, vol 2, no 4, December 2001, pp 8-28.

Articles in this issue of Working with Older People describe how some organisations and areas are developing ethnic-sensitive services for older people. The Social Services Inspectorate (SSI) report "Improving older people's services" includes a chapter dealing mostly with services to minority ethnic communities; examples are cited from the report of culturally responsive services. Other articles consider: the role of Age Concern England (ACE) in providing access to advice and information for minority ethnic groups; Navijvan, a service to Asian elders in Leicester; services to black and ethnic elders by Brent Social Services Department (SSD); and three community projects in Manchester: Wai Yin Chinese Women's Society, the Elderly Asian Development Group in Manchester, and the Longsight / Moss Side Community Project. An almost identical series of articles is published in Care Plan, vol 8, no 2, December 2001. (RH)

ISSN: 13663666

Health survey for England 1999: The health of minority ethnic groups: volumes 1 and 2 : a survey carried out on behalf of the Department of Health; by Bob Erens, Paola Primastela, Gillian Prior (eds), Joint Health Surveys Unit - National Centre for Social Research; Department of Epidemiology and Public Health, Royal Free and University College Medical School; Department of Health - DH. London: The Stationery Office, 2001, 2 vols + summary of findings (Series HS no 9).

Previous research has shown significant differences between minority ethnic groups. The 1999 Health Survey has been designed to augment existing research, by interviewing a large-scale representative sample of 7,798 minority ethnic adults and 1,824 children throughout England, and by covering an extensive range of health issues. Volume 1 presents the findings, including: self-reported health and psychosocial well-being; prevalence...
of cardiovascular disease; smoking; alcohol consumption; anthropometry; blood pressure; physical activity; eating habits; use of health services; and non-fatal accidents. Methodological issues are covered in Volume 2. The summary volume presents selected findings from the survey, including comparisons between minority ethnic groups and the general population. Throughout the report, the oldest population is classified as those aged 55 and over. (RH)

ISBN: 0113224486
Price: £85.00
From: The Stationery Office, PO Box 29, Norwich NR3 1GN.

A project team from the Bradford Dementia Group describes the challenge of providing culturally appropriate services to people with dementia from ethnic minority cultures. Three models of service provision for minority ethnic groups are discussed: assimilation and integration, multiculturalism, and anti-racism. The examples used illustrate the difficulties of adopting an approach that considers the needs of a multi-cultural society. (RH)
ISSN: 13518372

This is by way of introduction to other articles in this issue of Research on Aging, which focus on ways in which ethnicity, a client's place of birth and service providers interact to influence access to care and quality of care in the US. The authors comment on the Clinton administration's health policy, and provide statistics illustrating trends in immigration to and emigration from the US and by ethnicity for over 65s. (RH)
ISSN: 01640275

In examining sources of race differences in cognitive functioning in older people, this study attempted to incorporate the clinical literature (emphasising biological correlates of cognitive functioning) and the social research literature (emphasising social inequalities and consequent health outcomes). Use of data from the Assets of Health Dynamics of the Oldest Old survey (AHEAD) demonstrates that race has a direct association with cognitive functioning, and indirect effects of race through the social risk factors of education and health insurance. There did not appear to be indirect effects of race through biological risk factors. (RH)
ISSN: 10795014

The effects are explored of racial differences between nursing home residents and nurses' aides. One third of residents exhibited race-related attitudes, which took the form either of "anachronistic racism", language not acceptable today, used in a context not intended to be offensive, and its opposite form, "malignant racism". Three-quarters of aides had experienced racism on the job. They distinguished the two forms of racism, and discounted racist comments by residents they judged to be mentally incompetent, but held others - competent residents, family members, and fellow staff - to a higher standard. In this way, they were able to maintain a caring attitude in their work. Foreign-born aides were more likely to experience racism on the job than were African American aides. They also experienced prejudice against immigrants; they interpreted it as such, because it sometimes came from people of their own race. (RH)
ISSN: 01640275

A review of voluntary sector funding in Scotland - particularly black and minority ethnic voluntary organisations - is a Ministerial priority. This research carried out by Reid-Howie Associates for the Scottish Executive explored the literature on sources of funding. The report outlines types of funding provision and who provides funding. Detailed qualitative information is presented in relation to experiences of funding provision and receipt. Gaps in and barriers to funding are identified. The conclusions point to a public policy focus in Scotland on promoting equality and tackling social exclusion which is not yet reflected in grant provision. Recommendations are made accordingly for a more strategic approach to funding of black and minority ethnic voluntary organisations. (RH)
Satisfaction with care among elderly African American and white residents of adult care facilities; by Elizabeth J Mutran, S Sudha, Tejas Desai (et al).
The quality of care in US homes generically termed rest homes or adult care homes is examined with a twofold purpose. First, ethnic differences in sources of satisfaction with care are explored, by investigating the way ethnicity interacts with characteristics of the homes. Second, the study sample is stratified by ethnicity, to examine the way ethnicity interacts with predictors of satisfaction. Thus, two major gaps in the literature are considered: older residents' satisfaction with key components of good quality care in adult care homes or their equivalent; and ethnic differences with satisfaction with this care. (RH)
ISSN: 01640275

Services to ethnic minorities [series of 7 articles].
The diverse nature of British society and the growth in numbers - particularly of ethnic minority elders - present health and social service with a special challenge. In this series of articles on care services to minority ethnic communities, reference is made to examples of culturally responsive services cited in the Social Services Inspectorate (SSI) report, "Improving older people's services". Other articles consider: the appointment by Age Concern England (ACE) of an ethnic minority development officer in North West London to provides access to advice and information; services to black and ethnic elders by Brent Social Services Department (SSD); and three community projects in Manchester: the Wai Yin Chinese Women's Society, the Elderly Asian Development Group in Manchester, and the Longsight / Moss Side Community Project. An almost identical series of articles is published in Working with Older People, vol 5, issue 4, December 2001. (RH)
ISSN: 13550454

Social exclusion of Chinese people in Britain; by Ruby C M Chau, Sam W K Yu.
The authors challenge the view that the problem of social exclusion experienced by Chinese people in the UK is caused by their cultural characteristics. They demonstrate that the main cause lies in the Chinese people's way of seeking social integration through market participation. The necessity for many Chinese families to secure their market position not only keeps them at a distance from mainstream society, but also from their own ethnic community. While they are not outsiders in either of these groups, they only have one foot in each of them (RH)
ISSN: 02610183

Stroke, vascular risk factors and depression: cross-sectional study in a UK Caribbean-born population; by R Stewart, M Prince, M Richards (et al).
Stroke, hypertension and diabetes are common in older Caribbean-born populations in the UK, who may be at risk of depression secondary to vascular disease. The association between stroke, vascular risk factors and depression was examined in a south London community-based Caribbean-born population aged 55-75. Vascular risk factors were identified by interview, examination and blood test. Depression was categorised using the Geriatric Depression Scale (GDS). Disablement was assessed as a potential mediating factor. Physical illness and disablement were strongly associated with depression, independent of disablement. Previous stroke was associated with depression, independent of disablement. No vascular risk factors were associated with depression. The risk of disablement associated with stroke was not explained by disablement. However, the hypothesis that vascular risk factors are important in the genesis of depression was not supported. (RH)
ISSN: 00071250

Towards dignity: BME [black minority ethnic] elders in hospital; by Ben Harding, Policy Research Institute on Ageing and Ethnicity; Help the Aged.
Geriatric Medicine, vol 31, no 8, August 2001, pp 10-12.
Going into hospital is a stressful time for everyone, but how much more traumatic is the NHS experience when the anxiety is compounded by a failure to communicate properly, a lack of understanding of cultural differences, or even the unavailability of appropriate food? This article outlines the findings of "Towards dignity - acting on the lessons from hospital experiences of black and minority ethnic older people", a report commissioned by Help the Aged (HTA). The reader is reminded of Standard 2 of the National Service Framework (NSF) for Older People which refers to "person-centred care": the individual must be respected, redesigning services around patient needs, not fitting patient needs around existing services. (RH)
ISSN: 0268201X

2000

The Bangladeshi Migrants Pilot Study establishes the feasibility of applying methods used to study older people's informal support networks, specifically the Wenger typology of support networks. The study sample consists of 98 Bangladeshi over 55s living in Tower Hamlets, and 51 living Sylhet, Bangladesh. The paper provides an ethnohistory of Bangladeshi immigration to the UK, a comparison of support networks in Tower Hamlets and Sylhet, and a comparison of Bangladeshi's support networks with urban and rural dwellers in the UK. The Practitioners Assessment of Network Typology (PANT) algorithm produces support network types in 99% of cases, and demonstrates that the instrument is applicable to different cultures. There is little difference between the support networks of Bangladeshis in Sylhet compared with London, but there are significant differences between support networks of the Bangladeshi samples and the rural and urban UK samples. (RH)
ISSN: 14717794

Black and white: ageing in cultural diversity; compiled and edited by Helena Scott; by Helena Scott, Age Concern Scotland. Edinburgh: Age Concern Scotland, 2000, unnumbered.
The photographers Anthony Bayliss, Jon-Paul Davis, Mick Lange and Annie Park participated in a project which was developed out of the recognition that images of older people in Scotland should reflect the cultural diversity of its society. This collection of photographs is part of a systematic approach by Age Concern Scotland and many other organisations in the UK and Europe in seeking new ways of challenging and changing negative attitudes to ageing, and for the social inclusion of older people from black and minority ethnic groups. The project also provided the opportunity for a partnership between Age Concern Scotland, and departments of photography at Stevenson College, Edinburgh and Glasgow College of Building and Printing, and the Department of Print Media, Publishing and Communication at Napier University, Edinburgh. (RH)
ISBN: 1874399425
Price: £14.99
From: Age Concern Scotland, Leonard Small House, 113 Rose Street, Edinburgh EH2 3DT.

Based on the belief that Chinese older people in the UK should have an opportunity to voice their views and to be listened to, this study (financed by the Joseph Rowntree Foundation) examines their caring needs from a user's perspective. 100 Chinese older people in South Yorkshire, London and Glasgow were interviewed, individually or in focus groups. In common with other ethnic minority groups, Chinese older people are vulnerable to a number of disadvantages in adjusting to retirement. Not only do they find access to social and public services difficult, but their own community is also not strong enough to provide them with the necessary care and support. The report looks at specific issues for women and middle-aged men; retirement and self-esteem; culture and traditional values; the social networks used by Chinese older people; lifelong learning; and participation. While the report applauds findings made by the House of Commons Home Affairs Committee in 1985, it also points to problems overlooked. Suggestions for integration into both the Chinese community and the mainstream population stress participation, visibility of needs, higher expectations, and lifelong learning opportunities. (RH)
ISBN: 186134242X
Price: £10.95
From: Marston Book Services, PO Box 269 Abingdon, Oxon OX14 4YN. e-mail: direct.orders@marston.co.uk

Cognitive function in UK community-dwelling African Caribbean and white elders: a pilot study; by Marcus Richards, Carol Brayne, Tom Dening (et al).
In recent years, there has been interest in risk of cognitive impairment and dementia in populations of African origin. Little is known about this risk in older African Caribbean residents in the UK, one difficulty being lack of consensus on an adequate test battery for this community. 45 African Caribbeans and 45 age and gender matched white community residents in a Southwark electoral ward were recruited. Participants were administered the MMSE during a screening interview, followed where possible with CERAD and CAMCOG tests, a medical examination, and a structured interview with an informant. Of 41 African Caribbeans, 18 (44%) were rated as cognitively normal, 9 (22%) cognitively impaired, and 14 (34%) demented. Of the 45 whites, 39
(87%) were rated as cognitively normal, 4 (9%) cognitively impaired, and 2 (4%) demented. African Caribbeans scored significantly lower than whites in most cognitive tests, which was not accounted for by their lower educational or occupational attainment, or their higher frequency of cardiovascular risk factors. (RH)

ISSN: 08856230

Comparison of informal caregiving by black and white older adults in a community population; by Judith J McCann, Liesi E Hebert, Laurel A Beckett (et al).
The study was conducted as part of the Chicago Health and Aging Project (CHAP) in a geographically defined community of 5924 residents (61.4% black; 38.6% white) aged 65 and over, who answered questions about informal caregiving responsibilities, and health and social factors. Compared with whites, blacks were 30% more likely to be caregivers, spent almost 13 more hours each week on caregiving activities, and were more likely to assist friends. Both the probability of, and time spent, caregiving increased significantly with age for married people, and was lower for men than women. (RH)

ISSN: 00028614

Ethnic inequalities in health in later life; by Maria Evandrou.
Following the McPherson Report and Acheson Inquiry, the Department of Health (DoH) has reaffirmed tackling ethnic inequalities in health and health care services as a priority. Analysis in this paper is based on all 12,368 ethnic minority respondents out of 139,800 from the General Household Survey (GHS) over a 6 year period (1991-1996). Differences are investigated in their health status, to assess the extent to which such differences can be explained by material resources. The findings indicate significant differences both between and within ethnic minority groups in health status and health risk behaviour such as smoking and drinking. Multivariate analysis suggests both that ethnic inequalities in socio-economic status make a significant contribution to ethnic inequalities in health, and that other factors also play a role in contributing to ethnic inequalities in health. Developing services which are culturally competent and acceptable to different groups remain a key priority. Research for this article forms part of the work of the ESRC Research Group on Simulating Social Policy for an Ageing Society (SAGE). (RH)

ISSN: 14651645

Ethnic inequality in later life: variation in financial circumstances by gender and ethnic group; by Jay Ginn, Sara Arber.
Education and Ageing, vol 15, no 1, 2000, pp 65-84.
The risk of social exclusion of ethnic minorities in later life is likely to be exacerbated if they lack financial resources and have to rely on means-tested benefits or on family members. Discriminatory processes in the labour market, particularly for women, also lead to problems with building up pensions and savings. The authors use the British Family Resources Survey (BFRS) from 1994 to 1996 to compare the income of older men and women from four ethnic groups - Indian, Black, Chinese/other, and Pakistani/Bangladeshi - with that of the white majority, focusing on individual income from private pensions, interest and earnings. The policy of increasing the role of private pensions and savings in providing later life income is likely to raise the risk of social exclusion, particularly for those with low incomes and women from ethnic groups. (RH)

ISSN: 13528580

Family support and community care: a study of South Asian older people; by Alison Bowes, Naira Dar, Scottish Executive Central Research Unit.
Social Research Findings, no 38, 2000, 4 pp.
The views of older South Asian people about home support needs and services in the context of a review of existing provision are explored. Interviews with 102 older people and 10 family carers were conducted in Glasgow and Edinburgh. 14 service providers from the statutory, voluntary and private sectors were also interviewed. The unmet needs of people living in family households tend to be hidden; and mainstream services tend not to be tailored to this minority ethnic group. South Asian older people had little knowledge of services and benefits; the home help service was used by 7% of respondents, and only one received a "package" of social services. This summary of the research report (same title, and published by the Stationery Office, Edinburgh) outlines the findings and implications for policy and practice for developing support at home. The research was also designed as a parallel study to "Support at home", research carried out by Charlotte MacDonald at the Social Work Research Centre, University of Stirling. (RH)

ISBN: 0748093400
Health and social care needs in minority communities: an over-problematized issue?; by K Blakemore.
Health & Social Care in the Community, vol 8, no 1, January 2000, pp 22-30.
For Britain's black and South Asian minority communities, the development of health and social care in the community is often perceived to be problematic. For some minority groups, or sections of groups, this view is justified, however, it is also argued that to a degree the issue of community care in minority ethnic communities is an over-problematized one. This paper examines the arguments by focusing on the care of older people. It accepts that problems of racism in the planning and delivery of health and social services are serious and lead to limited access to, and under-use of, social services by some. However, it is evident that some minority communities are in a much better position than others to meet the care needs of older people. (AKM)
ISSN: 09660410

Older people from minority ethnic groups are a growing proportion of London's population, comprising a wide social and cultural range, who experience disproportionate levels of poverty and deprivation. This report has been produced by a multi-agency Task Group supported by the Health of Londoners Project, a public health research and intelligence initiative. The report brings together information and research evidence on the population and socio-economic characteristics of ethnic groups in London, their health behaviours and health status, and current and future patterns of service use. Throughout, recommendations are made concerning the development of appropriate services, backed up by statistical evidence. The report notes important ethnic differentials in diabetes, heart disease, stroke, eye disorders, infectious and genetic diseases, and mental illness in older age groups. Prevention, treatment and rehabilitation for these conditions needs to be geared more specifically to minority ethnic groups. To promote good health requires equality of access to services, backed up by effective communication based on cultural sensitivity and good information. (RH)
ISBN: 0953125297
From: The Health of Londoners Project, Directorate of Public Health, East London & the City Health Authority, Aneurin Bevan House, 81-91 Commercial Road, London E1 1RD. Also available on website: www.elcha.co.uk/holp

Findings, no 920, September 2000, 4 pp.
Work with Chinese older people has found that many of them are isolated from both the Chinese community and mainstream society. This is a summary of Wai Kam Yu's report, "Chinese older people: a need for social inclusion in two communities" (Policy Press, 2000). The study examined the caring needs of Chinese older people from a user's perspective, and examined a number of aspects of life for the Chinese community as they affect older people. 100 Chinese older people in South Yorkshire, London and Glasgow were interviewed, either individually or in focus groups. Common causes of their detachment from the mainstream included: language barriers; insufficient knowledge of social and public services; lack of awareness of social rights; low expectations of their life in the UK; negative experience of retirement; poor mental and physical health; and poor self-image. Focus groups suggested that services needed to look at increasing Chinese older people's participation in society, raising the visibility of their needs, improving access to services, raising expectations of retirement, and encouraging life-long learning. (RH)
ISSN: 09583084

Policy matters, ethnic concerns: creating a culture of change; by Naina Patel.
The CNEOPSA Project - Care Needs of Ethnic Older Persons with Alzheimer's - was designed to provide a map of the current and future direction of dementia care for minority ethnic older people. The Project has been transnational in focus (UK, France, Denmark, Finland, and the Netherlands). The Policy Research Institute on Ageing and Ethnicity (PRIAE) has led the Project, with support from the European Commission (EC). In this second of three articles on the Project's findings, the problem of institutional racism is is examined. The author argues that care for black and minority ethnic (BME) elders requires root and branch policy changes. A guarded welcome is given to the Secretary of State for Health, Alan Milburn, and his proposals for modernising the NHS. (RH)
ISSN: 13518372
Quality of life satisfaction among black women 75 years and older; by Claire P Martin-Combs, Marcia Bayne-Smith.
Most of the research on older Blacks in the US ignores the existence of a middle class, and tends to be concerned with the level of their poverty or the incidence of morbidity or mortality. The findings of this study of 59 Black women aged 75+ indicates that satisfaction with quality of life is significantly associated with belonging to a family and social support network that includes church, as well as maintaining physical health, independence and personal safety. (RH)
ISSN: 01634372
From : http://www.tandfonline.com

Race, aging, and care: can differences in family and household structure account for race variations in informal care?; by M Kristen Peek, Raymond T Coward, Chuck W Peek.
There are substantial uncertainties about key dimensions of the caregiving process as it is experienced by older adults from different ethnic groups. This investigation explored the care received from family members among a stratified random sample of community-dwelling African American and White older persons who reported difficulties in performing daily living tasks. Findings support past research indicating that older African Americans are more likely to receive help from family members than are White older persons. However, this advantage does not extend across all types of family members but is only statistically significant with regard to the care received from grandchildren. The findings also suggest that co-residence may be a form of family caregiving among older African Americans. (AKM)
ISSN: 01640275

Racial patterns in disabled elderly persons’ use of medical services; by Shelley I White- Means.
The extent to which older people experience patterns of health service use varies by race are examined, using data from the the 1989 US National Long Term Care Survey (NLTCS) database. With similar medical conditions, Blacks are found to be less likely to use services, particularly prescription medications and general practitioner (GP) services. Use of some medical services is more likely by older Blacks living in rural areas, small cities, and Western states, or who have more instrumental activities of daily living (IADLs) and other problems. For reasons that are unrelated to financial assets, blacks remain vulnerable in their ability to access services commonly used by older people. To remedy these racial disparities, public policy must expand its focus beyond health finance issues, and consider differences in availability, accessibility and acceptability. (RH)
ISSN: 10795014

Racial variations in end-of-life care; by Faith P Hopp, Sonia A Duffy.
Differences between American whites and blacks aged 70 and over in their advanced care planning and end-of-life decision-making are identified, using the 1993 study, Asset and Health Dynamics Among the Oldest Old (AHEAD). Relatives (proxy respondents - 454 whites and 86 blacks) were interviewed at home by telephone. Whites were significantly more likely than blacks to discuss treatment preferences before death, to complete a living will, and to designate a Durable Power of Attorney for Health Care (DPAHC). Treatment decisions for whites were more likely to involve limiting care in certain situations and withholding treatment before death. In contrast, the treatment for blacks was more likely to be based on the desire to provide all care possible in order to prolong life. Logistic regression models revealed that race continued to be a significant predictor of advance care planning and treatment decisions, even after controlling for sociodemographic factors. Health care professionals need to be aware of and to understand the preferences of different ethnic groups, with regard to sensitive issues such as end-of-life decision-making. (RH)
ISSN: 00028614

Researching social care for minority ethnic older people: implications of some Scottish research; by A M Bowes, N S Dar.
On the basis of previous research suggesting that social work provision for minority ethnic older people continues to be ineffective and inappropriate, the authors explore through qualitative interviews issues concerning patterns of welfare and mutual care among older Pakistanis and their families in Glasgow. The organisation of services is discussed, with special reference to issues of power and control, the role of the voluntary (non-profit) and statutory sectors, the debate regarding the possible need for specialist services versus
generic services, and the role of minority-led initiatives. Issues of staffing are discussed, in particular the
dangers of marginalising minority services, and possible divisions of labour in provision. Methodology is
explored, including issues of linguistic and cultural communication and working with relatively powerless social
groups, whose views are sought. Examining the views of professional social care workers is problematical in
respect of their gate-keeping role. User perspectives are essential to the development of appropriate services for
minority ethnic groups. (RH)
ISSN: 00453102

Social conditions and distress in elderly persons: findings from the MacArthur Studies of Successful Aging; by
Laura D Kubzansky, Lisa F Berkman, Teresa E Seeman.
Journals of Gerontology: Series B, Psychological Sciences and Social Sciences, vol 55B, no 4, July 2000, pp
P238-P246.
The purpose of this study was to determine separate and joint associations of race or ethnicity and
socioeconomic status (SES) with psychological distress in high-functioning adults, and to examine two
psychosocial sources that may explain these associations. Participants were 1,189 Americans aged 70 to 79 in
the McArthur Studies of Successful Ageing programme, a 3-site study of community-dwelling men and women.
Although decreases in distress generally occur with ageing, findings suggest that social structural factors can
influence distress even more among older people. Blacks were less distressed than whites when SES was
controlled. There was a gradient between education and distress among whites but not among blacks. Measures
of social support and control did not mediate effects of race or ethnicity on distress. These results differ from
previous studies, and indicate that age and functional status should be considered in examining relationships of
race, ethnicity, SES, and distress. (RH)
ISSN: 10795014

Social inequalities in later life: the socio-economic position of older people from ethnic minority groups in
Britain; by Maria Evandrou.
There are now nearly a quarter of a million individuals aged 60 and over belonging to ethnic minority groups
living in Britain. As they continue to age, information regarding their circumstances in later life will be of
increasing importance for the development of appropriate services and policy. Analysis in this paper is based on
all 12,368 ethnic minority respondents out of some 140,000 from the General Household Survey (GHS) over a 6
year period (1991-1996). Differences are investigated of ethnic minority older people's household living
arrangements, lifestyle, socio-economic status, economic resources, and experience of multiple deprivation in
later life. The findings indicate significant differences both between and within ethnic minority groups in access
to material and social resources, which need to be taken into account by policy makers and planners. Research
for this article forms part of the work of the ESRC Research Group on Simulating Social Policy for an Ageing
Society (SAGE). (RH)
ISSN: 03074463

South Australia's ageing population and its increasingly multicultural nature; by Graeme Hugo.
Recent changes in the growth and distribution of the ethnic aged population in South Australia are analysed in
this paper, drawing on data from the 1996 Australian Census of Population and Housing. Whereas in 1971,19.7% of
the state's population aged 65 years and over were born overseas, this applied to 34% in 1996. The
proportion who were born in non-English-speaking countries has increased from 5.1% to 22.1%. Each of the
major birthplace groups among minority ethnic older people has a distinctive spatial distribution. The paper
concludes that this presents a major challenge to policy makers and service providers since the overseas-born
groups have some characteristics which mean that their needs for services are somewhat different to those of
the Anglo-Celtic majority. (AKM)
ISSN: 07264240

Support for majority and minority ethnic groups at home - older people's perspectives; by Alison Bowes, 
Social Work Research Findings, no 36, 2000, 8 pp.
A comparative analysis of the views of older people from different ethnic groups in Edinburgh and Glasgow is
presented. Two separate studies provide the basis for comparison, in which older people's perceptions of their
needs and the availability of support at home were investigated. The first study was based on a sample drawn
from the majority ethnic population: "Support at home: views of older people about their needs and access to
services" by Charlotte MacDonald (Edinburgh: The Stationery Office, 1999). The second was of South Asian
older people: "Perceptions of need and availability of support at home: a study of South Asian older people" by
Validating screening instruments for cognitive impairment in older South Asians in the United Kingdom; by Greta Rait, Alistair Burns, Robert Baldwin (et al).
Although numbers of older South Asians in the UK have been rising, investigation of their mental health has been neglected compared to their physical health. This study aimed to determine the sensitivity and specificity of modified versions of two screening instruments for cognitive impairment - the Mini-Mental State Examination (MMSE) and Abbreviated Mental Test (AMT) - in community-based populations in Manchester. Subjects were approached via their general practitioners (GPs) and interviewed at home. The main findings were that, for both Gujarati and Pakistani populations, modified screening tests for cognitive impairment were acceptable to the subjects and may have high sensitivity levels, and that ethnic background influences the cutoff score. However, the results' validity are limited by an overall response rate of 47%. (RH)
ISSN: 08856230

1999

This new edition has been published to coincide with the International Year of Older Persons 1999 and the Debate of the Age. The CRE and Age Concern England are continuing their work together on a strategy aimed at improving the quality of life of older ethnic minorities. This is being undertaken by: highlighting the rapidly growing number of older people from ethnic minority groups; raising issues affecting ethnic minority older people among service providers; influencing policy makers and planners, and encouraging working alliances between relevant local groups and the ethnic minority communities themselves. As with the 1996 edition, this pack comprises a declaration of action for interested organisations, lists of useful organisations and publications, and 6 pamphlets: overview of life for ethnic minority elders in Britain today; housing; health; income; social welfare; education and leisure. The pamphlets have been expanded and updated to reflect changes since the previous edition. (RH)
Price: £5.00
From: Age Concern England, Astral House, 1268 London Road, London SW16 4ER.

Issues concerning black and minority ethnic older people living in the UK are examined, within the context of recommendations of the five main themes of the Debate of the Age: age as a resource: values and attitudes; work and lifestyles; the built environment; health and social care; and paying for age. (RH)
ISBN: 0862423260
From: Age Concern England, Astral House, 1268 London Road, London SW16 4ER.

Carers and dementia among African/Caribbean and South Asian families; by Joy Adamson.
There has been a tendency to believe that ethnic minority families "look after their own", to the extent that little attention has been paid to carers, particularly those caring for a person with dementia. The exploratory study described used qualitative interviews with 30 carers - 12 of South Asian and 18 of African or Caribbean descent - from English cities with known high minority ethnic densities. This paper presents a brief overview of the findings concerning patterns of care, awareness of dementia, and service utilisation. (RH)
ISSN: 09652000
The UK’s ethnic older population is increasing; however, clinical, social and demographic characteristics of ethnic elders referred to and using psychogeriatric services are unknown. This study was designed to compare these characteristics between Indian subcontinent origin ethnic elders and indigenous older people newly referred to a psychogeriatric service at a district hospital (West Middlesex University Hospital) in London with a catchment area of 23,000 older people. Ethnic elders were younger, had more children, had more people living in their household, were more likely to be married, were less likely to live alone, were more likely to have schizophrenia and less likely to have dementia. There were no differences between the two groups with regard to use of almost all health and social services resources at the time of the referral and after the initial assessment. These findings do not support the traditional view that ethnic elders make insufficient use of psychogeriatric and social services and that they are primarily cared for by extended families. (RH) ISSN: 08856230

Attitudes toward rest homes among older African Americans and whites and their caregivers are examined. Dislike of rest homes, preference for family care, and unwillingness to consider rest home placement are analysed by linear structural equation and logistic regression models. Results show significant ethnic differences among older people and caregivers. African Americans are stronger in their desire for family care, but dislike rest homes less than whites do. African American elders are less willing than whites to consider rest home placement; caregivers’ differences are not as pronounced. Results suggest that the cultural preference for family care often attributed to ethnic differences is also partly determined by dislike of institutionalised care and social structural factors. The authors propose a theoretical framework that models attitudes toward health service use as outcomes of ethnicity and social structural factors. The results are interpreted against a backdrop of ethnic differences in historical and material conditions. (RH) ISSN: 01640275

Ethnogerocounselling is the counselling of older people from minority ethnic groups. Using examples from the four major ethnic groups in the United States (US) - American Indian/Alaskan Natives, Hispanic-Latino Americans, African Americans, and Asian Americans/Pacific Islanders - the author aims to highlight some principles of understanding and providing mental health services to older people from minority ethnic groups. Each section examines the psychological, spiritual, and social implications of each group’s culture, and how those factors affect late life issues. Descriptive cases, ethnogerocounselling strategies, and discussion questions are included in each section. (AKM) ISBN: 082611217X
From : Springer Publishing Company, 526 Broadway, New York, NY 10012, USA.

Using data from the US Health and Retirement Survey (HRS) 1992, the authors examine how middle-aged couples allocate household financial resources among competing claims from their ageing parents and offspring, and emphasising racial or ethnic differences in these behaviours. Transfer patterns are sensitive to parental health and wealth, to children being young or in school, as well as the donors' health and wealth. Controlling for these and other factors, including family size and structure, blacks and whites are the most likely, and Hispanics the least likely, to financially help their parents compared to assisting offspring. Black couples are the most likely to sacrifice their own consumption to assist parents financially. (RH) ISSN: 10795014

Health concerns and expectations of Anglo and ethnic older Australians; by Susan Quine. Journal of Cross-Cultural Gerontology, vol 14, no 2, June 1999, pp 97-111. Australia is a multicultural society in which the most rapidly ageing groups are immigrants whose first language is not English. Minimal research has been conducted to identify ethnic variations in health concerns and expectations of older Australians from non-English speaking backgrounds, necessary for culturally appropriate
services. This paper presents findings from 12 focus group sessions (4 Anglo, 3 Italian, 2 Chinese, 2 Arabic, 1 Greek) with older (aged 60 and over) Australians. Common areas of concern were inadequate medication information, labelling and instructions. Anglo participants differed from ethnic participants in their use of herbal remedies, language, relationship with pharmacist and doctor, and awareness of health rights. Other concerns and expectations were specific to a particular ethnic group. The findings should increase health professionals' awareness of similarities and differences between mainstream Anglo and ethnic Australians, and also between ethnic groups, thereby avoiding the use of a blanket approach when communicating with, or planning policies for, ethnic, older Australians. (RH)

ISSN: 01693816

As part of a project to identify what the continuing and future needs of Asian elders might be, ASRA (the Asian Sheltered Residents Association) commissioned a major London-wide survey of estimates of need, including in-depth interviews with more than 500 Asian elders in the London Boroughs of Newham, Hounslow, Waltham Forest and Greenwich. This article outlines the survey's findings concerning the culturally sensitive management of Asian elders' needs, and on the demographic profiles of black and minority ethnic communities. (RH)

ISSN: 00186651

If I had no choice: the housing needs of ethnic elders: based on research by Helen Carlin; edited by Jess Barrow; by Helen Carlin, Jess Barrow, Age Concern Scotland. Edinburgh: Age Concern Scotland, 1999, 21 pp.
This report, published with support from the Scottish Housing Associations Charitable Trust (SHACT), is based on research examining housing needs of minority ethnic older people in Scotland, with the primary aim of allowing their voices to be heard. The research also examined relevant literature, the Scottish policy context, and the attitudes of local authorities towards meeting the needs of older people from minority ethnic communities. The research indicates that although there is a low take-up of services for minority ethnic older people, there is a need for culturally sensitive services. The report confirms other studies which have shown there to be an increase in intergenerational tensions within families, leading to a desire on the part of the older person to live more independently. There was some difficulty with the concept of sheltered housing, which once explained, seemed an attractive option. Low levels of awareness of local authority services were confirmed. This implies a considerable amount of unmet need, and the report concludes with recommendations for sheltered housing providers, housing providers, care providers, and local authorities to promote their services more actively. (RH)

ISBN: 1874399352
Price: £2.00
From: Age Concern Scotland, 113 Rose Street, Edinburgh, EH2 3DT.

"If we could meet more, we would live longer"; by Eddie Sherwood. Working with Older People, vol 3, no 3, July 1999, pp 13-16.
The title of this article is a quote from a lonely Chinese elder making the case for a lunch club. The author, who is head of older people's services for Sheffield City Council, describes the development of social care services for black and minority ethnic communities achieved during an era of financial constraint. Services include those provided at a residential home, and home care services. Reference is made to recent reports: "Supportive services, effective strategies" (Race Equality Unit - REU); "They look after their own, don't they?" (Social Services Inspectorate - SSI); National standards framework for local authorities; and "Race, culture and community care". These provide a wealth of information, prompting social care organisations to consider their approach to service provision. (RH)

ISSN: 13663666

This directory, which was commissioned by Help the Aged, is the first attempt to collect and publish information about the wide range of services and groups working with older people from minority ethnic groups in London. It lists some 600 services providing advice and information, social groups, day care, home visiting, befriending, home care, lunch clubs and counselling. Included are services for Black people, African, African Caribbean, and Asian people, and people from the Middle and Far East. Also included are services for Irish and Jewish people, and groups for refugees and asylum seekers. The directory is organised into London-wide services, sections by Borough, social service department (SSD) contacts, and other other useful organisations. (RH)
Making room for family and the community; by Kalyani Gandhi, Eastwards Trust.

The ageing ethnic minority population of Britain is set to increase tenfold over the next decade, but inequality persists in almost all services. Among the suggestions put forward by the executive director of the Eastwards Trust (Services for Elders) is the provision of sheltered housing or extra care housing in areas close to the families and communities of ethnic elders. Although family structures in these communities are being eroded, older people still want their families to be part of their daily lives. This article is also published with the title "Making room for the community and family in care plans" in Care Plan, vol 6, no 1, September 1999 (pp 21-24). (RH)

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ISSN: 13550454

In a society which is becoming obsessed with youth, minority ethnic and white British older people feel increasingly undervalued. Elders are also concerned that new policies which they do not understand are eroding the services which have helped them to feel secure and on which they depend. Given that there are some 9 million older people in the UK today, and the numbers are expected to rise steadily, panic is being generated that the financial burdens on those in work will multiply as well. In this lecture, the author recounts the comments of 129 elders from ten communities to illustrate the issues faced by ethnic minority elders and what life is like for them. By way of response, Jovica Prastalo, Equal Opportunities Officer of Methodist Homes, describes how one Christian-based organisation has begun to take seriously some of the issues identified in the lecture. (RH)

ISBN: 1898092303
Price: £6.00
From: Counsel and Care, Twyman House, 16 Bonny Street, London NW1 9PG.

Older women of color: a feminist exploration of the intersections of personal, familial and community life; by Kate Conway-Turner.
This paper examines the lives of older American women of colour who represent the racial and ethnic heritages, and have a history of unequal access to sources of economic and political power in the US. These women exemplify women with vastly different cultural traditions, but are similar in that they face discrimination as women of colour. The combined impact of gender, age and racial and ethnic background is neglected in discussions of older women. This paper contributes to our understanding of older women of colour by examining the personal, familial and community aspects of their lives. This exploration challenges feminist gerontologists to bring the discussion of this intersection to the fore as we seek to comprehend the reality of older women's lives. (RH)

ISSN: 08952841
From: http://www.tandfonline.com

Research Matters: a digest of research in social services, issue 6, October 1998-April 1999, pp 66-68. Research into the provision for older people with dementia from ethnic minority groups has exposed limited identification and understanding of the disease among health and social care professionals. This article outlines the findings by Patel, Mirzal and Lindblad in ‘Dementia and minority ethnic older people’ (Russell House Publishing, 1998), which reports on three separate but related studies in Denmark, France and the UK. The development of a person-centred approach to care provision is highlighted, requiring a focus on the individual and his or her needs, and overcoming stereotypes and preconceived ideas. Organisations concerned with both dementia and minority ethnic groups should consider the advantages of staff with competences both in ethnicity and dementia. (RH)

ISSN: 13630105

From: Research Matters Subscriptions, FREEPOST CN2908, Reed Business Information, Quadrant House, Sutton, Surrey SM2 5BR.

The potential of the narrative genre in (re)imagining ageing lives of women in diaspora - spanning cultures as well as generations - is explored. Life narratives of two Ismaili Muslim Canadian women, part of a cohort of immigrants from East Africa, provide insights into the complex processes of reimagining lives in between spaces of home work and waged work, as well as in between action and repose (silence and stillness that complement mundane action-oriented activities) modes of the Ismaili tradition. The narratives are a living metaphor of lives engaged in recapturing meaning. As such, the creative endeavours of ageing women in diaspora have implications for a feminist ethnography in ageing. (RH)

ISSN: 01693816

The REU (formerly the Race Equality Unit at the National Institute for Social Work - NISW) is the leading national agency working to develop appropriate social care services for Britain's black and minority ethnic communities. These learning materials, comprising a written pack and a video, are designed to help social care staff to assess needs accurately and to respond appropriately. The materials will be particularly useful for care managers, home carers, day care staff and residential workers. The written pack is arranged in four modules. Module 1 introduces the materials and discusses the values informing them. Module 2 provides up-to-date information on the social, economic and family circumstances and the mental and physical health of black and minority ethnic older people. Module 3 looks at various aspects of practice: assessment; care planning; monitoring and review; communication; emotional care; personal care; protection and abuse; relationships; faith and spirituality; organisational issues; and ethnic record keeping and monitoring. Module 4 includes the complete list of exercises used throughout. The video provides "live" examples of good practice in service provision. (RH)

ISBN: 1873912803

From: REU, 27-28 Angel Gate, City Road, London EC1V 2PT.

The purpose of this study was to determine the impact of demographic, social, environmental, and health indicators on utilisation of community-based services among black and white older women. Existing data from a regional Area Agency on Aging was used and the sample included rural and low income women. Black and white women differed in use, and services most frequently used were case management, outreach, congregate meal, and home delivered meals. Multiple linear and logistic regression indicated that age, payment source, income adequacy, residence, health conditions, sensory impairment, and function were associated with the number and types of services used, but these differed between black and white older women. (AKM)

ISSN: 08952841

From: http://www.tandfonline.com
This is a guide for professionals and care providers who are developing culturally-based techniques for the care of older people suffering from dementia, relevant to the needs of ethnically diverse communities. The intent is to provide a working guide for the acquisition and/or refinement of intercultural engagement skills through the application of cultural mapping techniques. Cultural mapping can be described as a multi-faceted assessment strategy identifying the core linguistic-communication patterns, customs, coping strategies, and value frameworks. Part 1 spotlights the key elements of cultural mapping, including: language; interaction patterns, roles and relationships; values, beliefs and cultural norms; and sorting factors confused with culture such as low levels of literacy. Part 2 presents an overview of the knowledge and skill - and their assimilation - which practitioners require. Part 3 outlines the way in which an organisation's staff and managers can collaborate to develop intercultural competence. (RH)
ISBN: 1560325305
Price: £17.95
From: Taylor & Francis, 1 Gunpowder Square, London EC4A 3DE.

The community study of psychiatric disorders in elderly from the Indian subcontinent living in Bradford; by Ajit Shah.
While the study referred to makes an important contribution to transcultural geriatric psychiatry, no supportive evidence was provided to favour the assumption that Gujarati and Punjabi elders understood Hindi. Hindi and Gujarati are similar languages, but with subtle differences: many apparently similar words have very different meanings in the two languages. Factors such as this may explain poor agreement between the Geriatric Mental State (GMS) examination and the psychiatrist's ICD-9 diagnosis: the psychiatrist spoke Gujarati. The author of this letter suggests that it is possible to develop instruments in Gujarati to measure cognitive impairment.
ISSN: 08856230

Dementia and ethnicity; by Candida Graham, Robert Howard, Yvonne Ha.
Ethnic differences in rates of dementia nationally, within multi-ethnic communities, and internationally have important repercussions. The question whether ethnic differences exist in rates of dementia is a crucial one that has implications for service delivery and also offers opportunities for future research on possible aetiological factors. Epidemiological surveys suggest that ethnic and geographical differences do occur in rates of dementia, but cross-cultural surveys are fraught with problems. The need for further methodologically sound, cross-cultural comparative studies is paramount to confirm or disclaim the ethnic differences observed to date. (AKM)
ISSN: 10416102

The CNEOPSA - managing care needs for ethnic minority people suffering from Alzheimer's disease - project is a pilot project supported by the European Commission (DG V). The aim of this guide is to make a contribution within the individual countries considered as well as across Europe, by establishing the current level of progress in research, care developments, education and training in dementia and Alzheimer's disease as it concerns minority ethnic older people. The guide concentrates on three countries - the United Kingdom (UK), France and Denmark. Each country section comprises a country profile on the characteristics of the minority ethnic population, dementia and Alzheimer's disease (AD) information, including costs; and research and information available. In addition, the experience of various groups providing care in each country are explored, including the family, professional carers, and minority ethnic organisations. The guide concludes with recommendations on how to improve care for minority ethnic older people with dementia.
ISBN: 1898924333
From: Russell House Publishing Ltd, 4 St George's House, The Business Park, Uplyme Road, Lyme Regis, DT7 3LS.

In June 1998, the Government began the second phase of its New Deal programme, targeting older workers (aged over 25). This report looks at the implications for older (age 40 to retirement age) unemployed black
people (i.e. of non-white ethnic origin), and suggests proposals for ensuring that the New Deal is effective for their needs. (RH)

From: Trades Union Congress, Congress House, Great Russell Street, London WC1B 3LS.

Ethnic minority elders: issues and interventions; by Henry L Harris.

Because of the increasing older population in the United States (US), there are more persons from minority ethnic groups over the age of 65 than ever before. Therefore, mental health counsellors can expect to encounter minority ethnic older people and their families with more frequency. Developing an understanding of their cultural environment is critical for culturally responsive counselling. This article provides a brief overview of cultural and social issues concerning ageing Asian and Pacific Islanders, persons of Hispanic origin, and African Americans. In addition, the relationship between acculturation and ethnic identity is addressed to help mental health counsellors better understand minority ethnic older people. The article concludes with suggestions for counselling professionals. (AKM)

ISSN: 03601277

Food practices, service use, and dietary quality in elderly blacks; by Nancy L Cohen, Penny A Ralston, Mary Jane Laus (et al).

Nutrient intake, food practices, service use, and their relationship to dietary quality in black older people were examined in this study. A health and food questionnaire and three 24-hour food recalls were administered. Diets were low in energy, calcium and vitamin B6, slightly low in protein, thiamin, riboflavin and iron and adequate in vitamins A, C and niacin. Men consumed more energy, fat and cholesterol than women, and less vitamins C, B6 and thiamin. Food stamps and home helps were used more than other services. Dietary quality was related to gender, number of meals, and use of home helps. (AKM)

ISSN: 01639366

From: http://www.tandfonline.com

Genetic, cultural or socio-economic vulnerability?: explaining ethnic inequalities in health; by James Y Nazroo.

This paper uses data from the Fourth National Survey of Ethnic Minorities to examine three alternative approaches to ethnic inequalities in health. Epidemiological approaches are driven by empirical findings, make little explicit acknowledgement of theoretical understandings of ethnicity, and assume that ethnicity provides a natural and fixed division between population groups. Explanations for differences tend to be reduced to ahistoric and de-contextualised genetic and cultural factors. Structural approaches generally focus on material explanations for inequalities, but there are important methodological difficulties in assessing these. Other elements of structural disadvantage need to be considered, e.g. experiences of racism, or concentration in particular geographical locations. Approaches that focus on ethnic identity emphasise the importance of group affiliation and culture, while acknowledging the contingent and contextual nature of ethnicity. However, despite the promise carried by identity based approaches, very little empirical work has been undertaken. These approaches illustrate how important ethnic inequalities might be to a wider understanding of mechanisms producing inequalities in health. (RH)

ISSN: 01419889

History, race, and attachment to place among elders in the rural all-black towns of Oklahoma; by William J McAuley.

This research examines place attachment among older residents of the all-black towns (incorporated municipalities that were established by African Americans) in Oklahoma. Social-historical occurrences, personal experiences associated with race, and expressed differences between social-historical groupings of older African Americans influence the levels of social and autobiographical insideness among the older residents. The findings extend current conceptualisations of place attachment by showing that: place attachment is not constant, even among long-term residents; social-historical factors and race can play important roles in the level of place attachment; experiences outside the community, such as racial discrimination, can influence the level of social and autobiographical bonding to the community; and subgroup identity within minority groups can be associated with variations in community place attachment. The findings point to the value of carefully examining the issues of history and race in research focusing on older minority group members.

ISSN: 10795014
Interracial and intraracial differences in neuropsychiatric symptoms, sociodemography, and treatment among nursing home patients with dementia; by Carl I Cohen, Kathryn Hyland, Carol Magai.
Using an adaptation of a social antecedent model of psychopathology, this study examined interracial and intraracial differences in neuropsychiatric symptoms, sociodemography, and treatment among nursing home patients with dementia. The sample consisted of 164 US-born African Americans, 54 African Caribbeans, and 68 white Americans. Although there were appreciable interracial differences in sociodemographics, there were minimal clinical differences. This finding may reflect both racial differences in pathways to institutionalisation and the homogenisation of clinical characteristics created by new US governmental standards for nursing homes. No substantial differences were found between African Americans and African Caribbeans. Use of medication to treat neuropsychiatric symptoms was low, and may have reflected difficulties in diagnosis and concerns about the abuse of medications. (AKM)
ISSN: 00169013

MECOPP (Minority Ethnic Carers of Older People Project) is the result of a collaborative venture between VOCAL (Voice of Carers Across Lothian), MILAN (Senior Welfare Council), Edinburgh Chinese Elder Support Association, Pilmeney Development Project, Lothian Health, and City of Edinburgh Social Work Department. This brochure outlines MECOPP's mission statement and its focus on black and minority ethnic carers, and how it carries out its work. (RH)
Price: FOC
From: MECOPP, 8/9 Johnston Terrace, Edinburgh, EH1 2PW.

Is the diagnosis of dementia stable over time among elderly immigrant Gujaratis in the United Kingdom (Leicester)?; by Ajit Shah, James Lindesay, Carol Jagger.
Older Gujarati subjects, with a diagnosis of dementia ascertained during an epidemiological field study in Leicester, were re-examined at a median follow-up interval of 27 months, to establish stability of the original diagnosis and cognitive decline. Seven of eleven of the original subjects were alive at follow-up, and they were re-examined by a Gujarati psychiatrist. The diagnosis of dementia was reconfirmed in six of the seven, with concomitant cognitive decline on the CAMDEX dementia severity index. Informant history in three of the four deceased subjects provided evidence of cognitive decline between the original interview and death. Thus, diagnosis of dementia in older Gujaratis was stable at follow-up with concurrent evidence of decline. This also provided further support for the validity and performance of Gujarati MMSE (Mini-Mental State Examination) in the original study. (RH)
ISSN: 08856230

Later life, gender and ethnicity: changing theory for social policy research; by Gail Wilson, Social Policy Research Centre - SPRC, University of New South Wales.
The aim of this paper is to consider how developments in theories of gender and ethnicity might contribute to policy research on different aspects of later life. It argues that existing research puts too much reliance on chronological age as the key descriptor for "old" people, and thus provides an inadequate knowledge base for emancipatory policy, practice and theory building. The paper examines a range of discourses commonly used in discussion of ageing and later life, which tend often to disempower or render invisible certain groups, including older women and older people of other cultures. It also explores ways in which older men and women resist these exercises of power over them, by refusing to conform to stereotypes of behaviour or identity. This leads to potential conflicts between notions of universal rights and the need to take account of diversity and difference - which could be resolved by developing an approach based on capabilities. The paper concludes by arguing that research on older people needs to draw on developments in other branches of social science. It also calls for greater effective participation in such research by older people from all walks of life. (RH)
ISSN: 10372741

Bangladeshis have made their home in Camden since the 1960s, and now form the single largest ethnic group in the borough. This study, supported by the Esmée Fairbairn Charitable Trust, focused on the lives and everyday experiences of older Bangladeshis, with regard to education, language and literacy, religion, family structure, employment, voluntary work, housing, and health, participation, citizenship, inter-generational
relations, racism and elder abuse, and social isolation. It found that some factors, such as language, health and a local culture of racism, handicap the capacity of Bangladeshi older people to participate in the activities of the wider community, which results in social exclusion. In addition, the same factors hamper equal access to social provision, health care, education and other services. This gives the impression of a group which is inward looking and heavily dependent on its own support network. The report concludes with a number of recommendations to those living and working in and with the Bangladeshi community, focusing on strategies to combat social isolation among Bangladeshi older people, and on recognising and valuing their experience and skills. (AKM)

ISBN: 1901097102
Price: £8.00
From: Central Books, 50 Freshwater Road, Chadwell Heath, Dagenham, RM8 1RX.

Myths of minority care; by Daloni Carlisle.
Community Care, no 1212, 5-11 March 1998, pp 10-11.
Are black and ethnic minority older people getting the care they really need? This article discusses two new reports about services offered, and which dispel the myth that ethnic groups look after their older family members. First, a Social Services Inspectorate (SSI) report, 'They look after their own, don't they?' (Department of Health - DoH, 1998) reports on social services department provision for black and ethnic minority people in eight local authorities. The second, by Naina Patel and others, 'Dementia and minority ethnic older people: managing care in the UK, Denmark and France' (Russell House, 1998), found a reluctance to seek or accept help, leading to inappropriate services being offered once a diagnosis had been made. (RH)

ISSN: 03075508

Nursing older people from ethnic minority communities; by Race and Ethnicity Sub-Committee, Royal College of Nursing - RCN.
Elderly Care, vol 10, no 5, October/November 1998, pp 40-41.
As people from ethnic minority communities grow into old age, nurses must respond positively to their needs. This article summarises the main points of a resource guide, 'The nursing care of older patients from black and minority ethnic communities' recently published by a working group established by the Race and Ethnicity Sub-Committee of the Royal College of Nursing (RCN). It urges nurses to both understand the different health needs of ethnic groups, and to respect the involvement of older people in their own care. (RH)

ISSN: 09568115

Social determinants of psychiatric morbidity and well-being in immigrant elders and whites in East London; by Ellen R Silveira, Shah Ebrahim.
The social conditions under which migrants to the United Kingdom (UK) live may be more significant than the experience of migration itself in leading to increased risk of mental illness. This study aimed to compare the prevalence of mental, physical and social health problems in older Somali, Bengali and white persons living in Tower Hamlets, London, and to examine associations between environmental circumstances, social support, physical health status, mood and life satisfaction in the groups. In addition, the study aimed to test the hypothesis that differences in mental health between immigrants and whites are explained by social disadvantages rather than ethnicity. The outcome measures used were the Symptoms of Anxiety and Depression Scale (SAD) and the Life Satisfaction Index (LSI). Results showed that the highest SAD scores were found among Bengalis; lowest LSI scores were found among Bengalis and Somalis. The prevalences of depression were 25% in Somalis, 77% in Bengalis, and 25% in whites. The marked variations in mental health between the groups may be a reflection of socioeconomic and health differentials acting concomitantly and adversely. (AKM)

ISSN: 08856230

South Asian elders: a special group with special needs; by Partha Ghosh.
This article explains why providers and purchasers of health care should improve their understanding of the needs of ethnic elders from the Indian subcontinent. The author suggests that employing staff from predominating ethnic minority groups would improve access to health and social services. The statutory providers of care must not make false assumptions that family care will suffice; nor must they fall into the trap of thinking that 'no use of services implies no need of services.'

ISSN: 0268201X
They look after their own, don't they?: inspection of community care services for black and ethnic minority older people; by Social Services Inspectorate - SSI, Social Care Group, Department of Health - DoH. London: Department of Health - DoH, 1998, 75 pp.

The aim of this inspection was to assess the extent to which Social Services Departments’ arrangements for planning and delivering community care services appropriately addressed the needs of ethnic minority older people. The fieldwork was conducted in eight local authority areas which had significant ethnic minority groups. Findings revealed some good examples of practice and service delivery, however, the variety of services available offering choice to black older people was limited and the ethnocentric nature of service provision meant that many had difficulty in having their needs met. Key messages for Social Services Departments include: services targeted at black older people should be developed; ethnic record-keeping and monitoring should be developed; more innovative strategies for information and communication to be developed together with ethnic minority communities; joint arrangements for multi-agency and multi-disciplinary assessment and care management processes for black older people should be improved; generic elder abuse policies and procedures should be further developed to address racial abuse and harassment. The report also includes good practice checklists.

From: Department of Health, PO Box 410, Wetherby, LS23 7LN.


This paper is based on the findings of small group discussions with self-defined successful African-American women aged 60 years and over in Charlotte, North Carolina. These women lived through the period of Jim Crow legislation (segregation laws) which lasted until the 1940s and 1950s, and thrived in spite of the obstacles. The interviews shows that they continue to seek meaning in their lives through the roles they play in their families, churches and communities. They feel strongly that there is a core of key values that continue to hold meaning and struggle to impact these values to those whose lives they touch. The key values identified include education, religion, work, and giving back to the community, and illustrate the integration of both traditional and non-traditional definitions of success. Mentoring is proposed as an important concept for understanding the lives of African-American women in later life.

ISSN: 08952841

From: http://www.tandfonline.com


The London Borough of Tower Hamlets Housing Department, Labo Housing Association and Anchor Housing Trust commissioned this study, which was partly funded by the Housing Corporation's Innovation and Good Practice Programme. The report provides an insight into the history and experiences, family life, housing and care needs of Bangladeshi, Somali, Caribbean, and Chinese elders living in Tower Hamlets. Recommendations are made to improve and develop the provision of housing, social services and health care services to older people from minority ethnic communities, especially Bangladeshi and Somali elders who are currently the most disadvantaged. (RH)

From: Labo Housing Association Ltd., Suites 1 and 2, Dormers Court, 18-36 Thomas Road, London E14 7BJ.

'I forget myself': the case for the provision of culturally sensitive respite services for minority ethnic carers of older people; by Gina Netto. Journal of Public Health Medicine, vol 20, no 2, June 1998, pp 221-226.

This study investigated the need for, use of and preferences for respite services of 45 minority ethnic carers of older people in Lothian Region, Scotland. A detailed qualitative analysis of their need for respite services and preferences for service delivery was undertaken, the results of which have implications for other minority ethnic carers of older people in the UK. It was anticipated that similarities shared in caring for a person from a minority group would far outweigh differences arising from their ethnic origin. Findings suggest that many of these carers would be open to the use of respite services which would allow them a break from caring, evidenced by factors including: younger peak age of caring of 31-40 years; looking after 3 or more children under 16; and living with parents or parents-in-law. The low uptake of respite services may be accounted for by a general lack of awareness of availability of services. The service would have better uptake and be more appropriate to needs if the following were borne in mind: linguistic and communication ability; dietary needs; gender sensitivity; and other religious and cultural differences. (RH)
Asian older people: housing, health and access to services; by Waqar I U Ahmad, Reg Walker. 
The authors report the findings of a survey of 104 Asian older people in Bradford, a high proportion of whom were characterised by poverty, limited entitlements, inadequate housing, low levels of knowledge of health and social services, and problems of access to welfare benefits, health and social care. The situation of women was of particular concern. The study also highlights the problems of divided families, caused by restrictive immigration rules, resulting in many elderly people having no family support in this country. 
ISSN: 0144686x

This report uses a focus group approach, to obtain a high level of involvement, in examining issues of: survival, growth and community care in the black communities; funding and relationships with national bodies and local authorities; premises used by groups; and consultation and user participation. The report summarises information gathered from two focus groups held in London and Birmingham. 
Price: not yet available
From : The 1990 Trust, Southbank Technopark, 90 London Road, London SE1 6LN.

The characteristics of ethnic elders from the Indian subcontinent using a geriatric psychiatry service in West London; by J Redelinghuys, A Shah. 
The population of minority ethnic older people in the United Kingdom (UK) is increasing. This may lead to increase in psychiatric morbidity and utilisation of geriatric psychiatry services. A cross-sectional comparative study examining the demographic, social and clinical characteristics of Indian subcontinent origin older people with mental illness was undertaken in an established geriatric psychiatry service in West London. Of the patients in the study, 17% were of Indian subcontinent origin compared to 7% in the general population. Comparisons with indigenous patients revealed that minority ethnic older people were younger, had more children, had more people living in their household and were more likely to have schizophrenia. There were no differences with regard to use of health and social service resources between minority ethnic and white older people. The findings do not support the traditional myth that minority ethnic older people do not adequately access services and that these individuals are primarily cared for by extended families. 
ISSN: 13607863
From : http://www.tandfonline.com

This conference report presents the papers given at the conference and the findings from three workshops held. The aim of the conference was to look at the problems and issues facing voluntary organisations providing services to older black people since the introduction of the community care reforms. Topics covered include development of community care services and housing schemes for older black people; use of health services among older black people; the contract culture and funding; independent living with care support; and the changing health trends among black older people. 
Price: FOC
From : Eastwards Trust (Hostels) Ltd., 412/422 Green Street, Upton Park, London E13 9JN.

Global perspectives: a sensitive view; by Clare Hilton. 
Ageing in a multicultural society is a huge and complex topic with implications for the work of health practitioners. The author explains how cultural awareness and good communication skills can help to improve the quality of life of older people. 
ISSN: 09568115

Health status gender differences of newly admitted black nursing home residents; by Judy C Martin, Veronica F Engle, Marshall J Graney. 
A great deal of research has been carried out that focuses on the health status, health care and sociodemographic issues affecting black older people living in the community in the United States, but little information is
available about black nursing home residents, in particular, health status gender differences of black older men and women. This study investigated gender differences in health and functional status of newly admitted black nursing home residents. Results revealed that both men and women had health and social deficits, but that women were more impaired in six of eight activities of daily living (ADLs). The study concluded that black women nursing home residents have greater care needs than men, which illustrates the need to consider gender in planning nursing home care for older black people.

ISSN: 00028614

Housing options for ethnic elders; by Hanover Housing Group. Egham: Hanover Housing Group, 1997, unnumbered.

In 1996, the Hanover Housing Association conducted some preliminary qualitative research into the housing needs of older people, focusing on the role of relatives and other advisers, the sources of housing information, and the criteria used when choosing different types of housing. This document outlines the findings from a study using the same approach, that is, interviews with older people (24), their relatives (16), and professionals (7) in minority ethnic communities in England. Findings revealed that the main sources of information and communication were day centres, religious institutions, and family members. The traditional practice of families caring for their older relatives were still in place, although pressures on families have created a role for religious and community groups in providing services. A demand for extra care sheltered housing was found in some communities, although its appeal would depend on the incorporation of culturally appropriate facilities. Interviews with local authority professionals indicated a need for residential and sheltered housing.

Price: £15.00
From: Hanover Housing Association, Hanover House, 18 The Avenue, Egham, Surrey TW20 9AB.


The Mini-Mental State Examination (MMSE) is a standardised screening instrument for cognitive impairment, which has been translated and adapted for use with various populations internationally. However, few studies have examined the effects of translation on the psychometric properties of the MMSE. Educational level and differences in cultural factors, such as the meaningfulness of concepts such as date and seasons, have been found to affect MMSE performance. The aim of this study was to evaluate the performance of a Gujarati version of the MMSE as a screening instrument for dementia in an older immigrant Gujarati community in Leicester. Results showed that mean MMSE scores were lower in the Gujarati group than in the group of white older people, mainly due to the effects of age, education and visual impairment. Ethnic group had an independent effect on three orientation items. The study concluded that the Gujarati version of the MMSE performed adequately, but that further evaluation is required.

ISSN: 08856230


Ethnic minorities represent a growing percentage of the elderly population in the United States. In this book, contributors examine the socioeconomic, historical and cultural factors influencing the special health problems of a variety of populations: African Americans, Hispanics, Asian Americans, Pacific Islanders, and Native Americans. Specific issues on six general themes are reviewed: mortality and life expectancy; chronic diseases and disabilities; diet and nutrition; mental health; health services and long-term care; and health policy.

ISBN: 0803959745
Price: £22.00 (pbk), [£45.00 hbk]
From: Sage Publications Ltd., 6 Bonhill Street, London EC2A 4PU.

Need and unmet need for mental health care among elderly public housing residents; by Betty Smith Black, Peter V Rabins, Pearl German (et al). The Gerontologist, vol 37, no 6, December 1997, pp 717-728.

Epidemiological survey data from older residents of six public housing developments in Baltimore, MD, United States (US) were used to determine the prevalence of need and unmet need for mental health care. Thirty-seven percent of the predominantly African American sample needed mental health services, and 58% of those who needed care had unmet needs. Logistic regression analyses showed that males, older residents, those with no Medicare insurance, and those with more Activities of Daily Living (ADL) impairments were at greater risk of both needing mental health care and receiving no mental health services. Findings suggest the need for targeted interventions that would increase service utilisation and potentially reduce the likelihood of eviction or placement in more restrictive settings.
Promoting physical activity with black and minority ethnic groups: guidelines; by Active for Life, Health Education Authority - HEA. London: Health Education Authority, 1997, 20 pp (Active for Life campaign). This document provides guidance on developing local programmes to target minority ethnic groups, particularly Asians and African Caribbeans. It presents information on ethnic groups’ attitudes to physical activity, and offers general principles for effective planning and implementing of projects. Case studies of four projects highlight models of good practice in working with black and minority ethnic communities. From: Health Education Authority, Trevelyan House, 30 Great Peter Street, London SW1P 2HW.

Race differences in the health of elders who live alone; by Raymond T Coward, Chuck W Peek, John C Henretta (et al). Journal of Aging and Health, vol 9, no 2, May 1997, pp 147-170. The aim of this study was to determine whether older African Americans who live alone are in poorer health than their white counterparts who live under the same circumstances. Data on five measures of health were collected in telephone interviews with a stratified random sample of community-dwelling older people. Analysis of weighted data indicate that there were fewer differences in health by race among older persons who live alone compared to older persons who lived with others. Where racial differences in health did exist among older adults who lived alone, the differences could only sometimes be accounted for by population composition factors that are known to influence health. (AKM)

Reaching out: a study of black and minority ethnic single homeless people and access to primary health care; by Claire Small, Teresa Hinton, Health Action for Homeless People; Lambeth Health Care NHS Trust; NHS Ethnic Health Unit. London: Health Action for Homeless People, 1997, 42 pp. This research project maps the geographical spread and characteristics of single homeless people in Lewisham, Southwark and Lambeth, and identifies gaps in service provision and barriers in access to primary health care. The views of homeless people, hostel staff and community agencies, and the results of a consultation exercise are summarised. An outline strategy for the Three Boroughs Primary Health Care Team (PHCT) is presented: developing long-term working relationships with community groups; increasing expertise within the Team; working with hostels; working with mainstream primary health care services; and developing an information strategy. ISBN: 0952629925
Price: £3.00
From: Health Action for Homeless People, The Print House, 18 Ashwin Street, London E8 3DL.

Who will care for us?: aging and long-term care in multicultural America; by Ronald J Angel, Jacqueline L Angel. New York: New York University Press, 1997, 234 pp. The authors examine the great racial and ethnic diversity among older people in the contemporary United States in terms of living arrangements, well-being, and reliance on formal and family based sources of support. Their aim is to assess levels of need for long-term care among blacks, Hispanics and non-Hispanic whites, and to examine possible alternatives to institutionalisation. They explore the possibility of a long-term care policy that optimises choice in living arrangements and makes the best use of community support systems, controlling costs at the same time. In their opinion, a formal support system that offers assistance to the family in caring for an older relative is preferable to one which either provides inadequate services or forces an infirm older person into a nursing home. ISBN: 0814706290
Price: US$29.95
From: New York University Press, 70 Washington Square South, New York, NY 10012-1091, USA.

1996

Black grandparents: curriculum development; by Robert Strom, Shirley Strom, Pat Collinsworth (et al). International Journal of Aging and Human Development, vol 43, no 2, 1996, pp 119-134. Black grandparents commonly care for the pre-school and elementary school grandchildren. Later on, teenagers usually identify grandparents as trusted advisers. This long-term influence suggests that grandparents could be further helped in their role with some sort of education programme. This study sought to ascertain what was required, by means of the Grandparent Strengths and Needs Inventory, to a sample of grandparents, parents and grandchildren. All groups described aspects of grandparents’ success, and suggested areas of learning that grandparents should acquire to become more effective. These included helping to set goals and solve problems,
and sharing ways of coping with unfair treatment from other people. Classes that can support greater success for black grandparents will contribute directly to child development and ensure a better future.

ISSN: 00914150

Cancer and aging; by Anna H Zimmer, Rochelle Sax.
Describes a project which aimed to facilitate access to mammography services for ethnic minority women through health education and coordination of the ageing and health care networks.
ISSN: 01634372

From: http://www.tandfonline.com

Written specifically for those who commission and design care buildings, this book contains special guidance for all members of the design team. Detailed information is provided in the form of briefing check lists, anthropometric guidance, systems and service requirements, space planning data, site selection, access and landscape design. Also included are sections on project management, legislative issues and building procurement. Special attention is paid to the needs of ethnic minorities and those suffering from dementia.
ISBN: 0419201203
Price: £24.99
From: Chapman & Hall, 2-6 Boundary Row, London SE1 8HN.

Do racial differences in hypertension persist in successful agers?: findings from the MacArthur study of successful aging; by Deborah T Gold, Carl F Pieper, Ronald E Westlund, Dan G Blazer.
Examines ethnic differences in the prevalence of hypertension among black and white older people.
ISSN: 08982643

Elderly maltreatment and cultural diversity: when laws are not enough; by Oliver J Williams, Linner W Griffin.
Examines how present definitions of elder abuse could benefit from the inclusion of cultural diversity.

Ethnic differences in later life friendship; by Brian de Vries, Carole Jacoby, Christopher G Davis.
Canadian Journal on Aging, vol 15, no 2, Summer 1996, pp 226-244.
Data from the 1990 Canadian General Social Survey on Friends and Family were used to examine the relationship between ethnicity and patterns and characteristics of friendship in later life. Ethnicity (British, French, European, and a "multi-ethnic" category) was examined in relation to the number of friends reported, satisfaction with friendships, geographical proximity to and frequency of contact with the closest identified friend, and factors of age, gender, and marital status. Ethnicity emerged as the most consistent predictor. The French have fewer friends, but live closer and more frequent contact. The British live further from their friends, who are more numerous. British and French did not differ greatly in terms of satisfaction with friendship. The European and multi-ethnic groups were similar across comparisons made. These results indicate the importance of including ethnicity in studies of ageing and social relations.
ISSN: 07149808

Ethnic elders; by Shah Ebrahim.
This is the ninth in a series of 14 articles on the theme, Caring for older people. The numbers of older people from ethnic groups within Britain is rising rapidly as postwar immigrants age. Ethnic elders face problems owing to age-associated increased risks of common chronic diseases, racial discrimination, and poor access to many health services and social services. The myths that ethnic group family care suffices, that no use of services implies no need, and that assimilation into the population will occur must be discounted.
ISSN: 09598138

From a USA multicultural perspective, examines how ethnicity and cultural interpretations influence perception of dementias, including Alzheimer's disease. It covers assessment of cognitive status with different ethnic populations, and working with families of patients from ethnic populations, including: Asian / Pacific Island Americans; Hispanic Americans; African Americans; and American Indians.
Ethnicity in the 1991 census: volume 1: demographic characteristics of the ethnic minority populations; by David Coleman, John Salt, Office of Population Censuses and Surveys - OPCS. London: HMSO, 1996, 290 pp. This is the first volume in a series which records the results of the introduction of a direct question on ethnic origin in the British Census. It considers the demographic characteristics of the ethnic minority populations, focusing on their size, immigration patterns, age structure and ageing, and household and family structure.

ISBN: 0116916559
Price: £25.00
From: HMSO Publications Centre, PO Box 276, London SW8 5DT.

Faculty development in ethnogeriatrics; by Gwen Yeo, Debra David, Lela Llorens.
Describes conferences and training programmes designed to increase the competence of health professions faculty in preparing students to work with, and meet the needs of, older people from different ethnic groups.
ISSN: 03601277

Issues of race; by Rosaleen Bothamley.
This article discusses the barriers which exist preventing the satisfactory provision of health care services to black and ethnic minorities. These include institutionalised racism, problems of language and communication, and physical or mental ill health.

Living arrangements of minority elders; by Christine L Himes, Dennis P Hogan, David J Eggebeen.
Drawing on data from the 1990 Census of the United States, this study examines differences in the living arrangements of minority ethnic older people.
ISSN: 10795014

More than black and white: a study of black and ethnic minority elders’ concerns about care services; by Les Bright, Mariama Turay, Counsel and Care. London: Counsel and Care, 1996, 32 pp (including appendices).
Drawing on interviews with older people from ethnic minority groups in day centres and sheltered housing in London and the Midlands, this study explores their views on residential and nursing home care, and examines whether they are receiving the same level of care as white older people.
ISBN: 1898092184
Price: £6.00
From: Counsel and Care, Twyman House, 16 Bonny Street, London NW1 9PG.

On the margins; by Samantha Sherratt.
Examines why minority ethnic older people are particularly likely to be living on very low incomes.
ISSN: 02684543

Provides an introduction to contemporary issues surrounding the health care needs of minority ethnic populations within the context of community care, and presents case studies in community care, focusing on disability, mental health, social security, and voluntary sector provision.
ISBN: 0335194621
Price: £12.99
From: Open University Press, Celtic Court, 22 Ballmoor, Buckingham MK18 1XW.

Racial differences in the household composition of elders by age, gender, and area of residence; by Raymond T Coward, Gary R Lee, Julie K Netzer (et al).
Using census data and a technique for describing the composition of households from the perspective of elders, this research provides a more detailed description of race differences in living arrangements of older people than
has previously existed. Cross-tabulations of race with other factors known to influence household composition (gender, age, and areas of residence) are examined. While white women are more likely than black women to live alone, the reverse is true among men. Whites are more likely than blacks to live in married couple only households, and blacks are more likely than whites to live in multigenerational households, although these differences decrease with advancing age. Blacks are also more likely than whites to live with collateral kin or non-kin only, although these categories comprise small proportions of the population. Implications of these differences for caregiving and quality of life among older people are discussed.

ISSN: 00914150


This study examines how health care purchasers perceive and deal with the health of ethnic minorities, identifies obstacles to the effective delivery of services to minority ethnic groups, and suggests ways of improving purchaser capability in meeting their needs.

ISBN: 1898531048

From: Office for Public Management, 252 B Gray's Inn Road, London WC1X 8JT.

When I'm sixty-four: listening to what elderly people from ethnic minorities need; by Pushpa Gandhi.


Reports on a consultation meeting for minority ethnic older people in Liverpool set up to find out about their service needs.

ISSN: 13523112

1995


The CRE and Age Concern England are working together on a strategy aimed at improving the quality of life of older ethnic minorities. This is being undertaken by: highlighting the rapidly growing number of older people from ethnic minority groups; raising issues affecting ethnic minority older people among service providers; influencing policy makers and planners, and encouraging working alliances between relevant local groups and the ethnic minority communities themselves. This pack comprises a declaration of action for interested organisations, lists of useful organisations and publications, and 6 pamphlets: overview of life for ethnic minority elders in Britain today; housing; health; income; social welfare; education and leisure.

Price: £5.00

From: Age Concern England, Astral House, 1268 London Road, London SW16 4ER.

Data sources for aging research on racial and ethnic groups; by Thomas A LaVeist.


Examines ageing-related data sets collected or used by government agencies to determine the usefulness of the data for research on minority ethnic older people.

ISSN: 00169013

Ethnic trends in survival curves and mortality; by Charles G Go, Jennifer E Brustrom, Margaret F Lynch, Carolyn M Aldwin.


Examines trends in mortality differences among ethnic groups in the United States.

ISSN: 00169013

Strategies for sampling black and ethnic minority populations; by Anthony O Hughes, Steve Fenton, Christine E Hine.


Describes the design and sampling methods used in research into black and ethnic minority populations.
1994

Housing issues facing refugee communities in London: a survey; by Ayom Wol, Liz Firth, Reena Mukherji (eds), Housing Associations Charitable Trust. London: Housing Associations Charitable Trust, 1994, 24 pp. Reports on a study which investigated the housing issues facing refugee communities in London, and which examined the role of charitable funding in meeting the needs of those communities.

Price: FOC (up to 10 copies)

From: HACT, Yeoman House, 168/172 Old Street, London EC1V 9BP.