

Centre for Policy on Ageing
Information Service

Selected Readings

Pensioner Poverty

July 2018

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Centre for Policy on Ageing

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2018

Home-ownership and housing wealth of elderly divorcees in ten European countries; by Barend Wind, Caroline Dewilde.: Cambridge University Press, February 2018, pp 267-295.

Ageing and Society, vol 38, no 2, February 2018, pp 267-295.

Recent research has shown that divorce reduces the likelihood of home ownership. Even in later life, ever-divorced men and women display lower home ownership rates than their married counterparts. However, there is a lack of knowledge about the consequences of divorce for a majority of divorcees: those who remain in home ownership or move back into home ownership after an episode in rental housing. This paper investigates the economic costs of divorce. It focuses on the housing wealth of ever-divorced home-owners in later life (age 50 and over), against the background of changing welfare and housing regimes. The empirical analysis is based on data from ten European countries that participated in the third and fourth waves of the Survey of Health, Ageing and Retirement in Europe (SHARE 2007/8 and 2011/2). The countries were Austria, Belgium, Denmark, France, Germany, Italy, The Netherlands, Spain, Sweden and Switzerland. The authors' analyses support an association between divorce experience and lower housing wealth holdings for men and women who remain in home-ownership after a divorce, or re-enter home ownership after a spell in rental housing. This means that a divorce has negative housing consequences for a broader range of individuals than thus far assumed. In countries with a dynamic housing market and a deregulated housing finance system, ever-divorced home-owners are worse off than their married counterparts. In these countries, more older individuals with a weaker financial situation are able to remain in or regain access to (mortgaged) home-ownership, but at the cost of lower housing equity. Further research should focus on the implications (e.g. for wellbeing, or economic position) of such cross-country variations. (RH)

ISSN: 0144686X

From : <https://doi.org/10.1017/S0144686X16000969>

A physical activity intervention in a Bingo club: significance of the setting; by Josie M M Evans, Jenni Connelly, Ruth Jepson (et al).: Sage, April 2018, pp 377-384.

Health Education Journal, vol 77, no 3, April 2018, pp 377-384.

A Bingo club was selected for the design and delivery of a health intervention (Well!Bingo), to engage with older women living in areas of socio-economic disadvantage. In the light of their experience, the authors discuss the significance of the setting to a typology of health promotion settings in relation to the Well!Bingo physical activity intervention piloted in a Bingo club in Scotland. Eighteen women (55-92 years), half of whom lived in areas of socio-economic deprivation, were recruited face-to-face at a Bingo club over 2 weeks. The 12-week intervention consisted of three different structured exercise sessions per week, followed by refreshments, with trained instructors delivering a schedule of simple pre-defined health messages. Participants completed a baseline questionnaire, and in-depth qualitative interviews were carried out with participants and instructors post-intervention. The framework method was used to retrieve and analyse the data coded as relating to the setting. Practical and social familiarity with the setting (a sense of belonging and being with people like themselves) encouraged them to take part, and implicit features of the setting may have enhanced recruitment and effectiveness. In settings-based health promotion, a Bingo club could be seen as a 'passive' setting, simply facilitating access to a target population. It cannot be an 'active setting', because health promotion will never be a core activity and features cannot be drawn upon to influence change. However, calling it a passive setting overlooks the importance of characteristics that may enhance recruitment and effectiveness. This highlights the need to extend current concepts of 'passive' health promotion settings. (RH)

ISSN: 00178969

From : <http://www.journals.sagepub.com/home/hej>

Poverty in old age: evidence from Hong Kong; by Lih-Shing Chan, Kee-Lee Chou.: Cambridge University Press, January 2018, pp 37-55.

Ageing and Society, vol 38, no 1, January 2018, pp 37-55.

The Hong Kong population will age rapidly over the next three decades. The problem of old-age poverty will test the Hong Kong government, which has been using a solely income-based measurement. This study aims to assess poverty rates among Hong Kong's older population in terms of both income and consumption-based measurements, by using both relative and absolute concepts of poverty. It also examines the association of socio-economic and household characteristics with poverty rates among older people. A two-stage stratified sample design was adopted, in which a total of 4,306 older adults were personally interviewed in their homes (response rate 66.2 per cent). This study contributes to the larger study on poverty in Hong Kong, by revealing how income and consumption poverty rates may differ among older adults. Older adults who were both income and consumption poor were more likely to be female, widowed, living alone and to have received less than an elementary school-level education. They possessed very few assets and were most likely financially dependent

on family support and welfare payments. To fully understand older people's economic well-being in Hong Kong, this study proposes that joint distribution of income and consumption poverty can better identify and explain the demographic characteristics of poor older people. Implications of the study are discussed based on the neo-liberalist approach that the Hong Kong government has taken in welfare provisions. (RH)

ISSN: 0144686X

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

What about family in European old-age security systems?: The complexity of institutional individualisation; by Patricia Frericks, Julia Hoppner.: Cambridge University Press, March 2018, pp 594-614.

Ageing and Society, vol 38, no 3, March 2018, pp 594-614.

European welfare states used to be based on the principle of the family. Since the 1990s, however, 'individual responsibility' has been promoted, which fundamentally alters the traditional welfare-institutional framing of the family and the corresponding construction of the social citizen. One policy field that has been heavily influenced by this development is old-age security. The literature assumes a convergence towards institutional individualisation. However, the authors show this to be incorrect. They empirically analyse and classify welfare-institutional change in old-age security with regard to individualisation. An innovative methodological approach for institutional analysis allows a nuanced identification of the welfare-institutional trends towards individualisation of the social citizen above pension age both within and between welfare states. The authors conclude that there has been no general and no partial convergence towards individualisation. Instead, on average, family elements in old-age security have either increased or persisted. Also, the analysis suggests that welfare-institutional change with regard to family is far from being a linear process, and in part even displays contradictions. (RH)

ISSN: 0144686X

From : <https://doi.org/10.1017/S0144686X16001392>

2017

Active subjects of passive monitoring: responses to a passive monitoring system in low-income independent living; by Clara Berridge.: Cambridge University Press, March 2017, pp 537-560.

Ageing and Society, vol 37, no 3, March 2017, pp 537-560.

Passive monitoring technology is beginning to be reimbursed by third-party payers in the United States of America. Given the low voluntary uptake of these technologies on the market, it is important to understand the concerns and perspectives of users, former users and non-users. In this paper, the range of ways older adults relate to passive monitoring in low-income independent-living residences is presented. This includes experiences of adoption, non-adoption, discontinuation and creative 'misuse'. The analysis of interviews reveals three key insights. First, assumptions built into the technology about how older adults live present a problem for many users who experience unwanted disruptions and threats to their behavioural autonomy. Second, resident response is varied and challenges the dominant image of residents as passive subjects of a passive monitoring system. Third, the priorities of older adults (e.g. safety, autonomy, privacy, control, contact) are more diverse and multi-faceted than those of the housing organisation staff and family members (e.g. safety, efficiency) who drive the passive monitoring intervention. The tension between needs, desires and the daily lives of older adults and the technological solutions offered to them is made visible by their active responses, including resistance to them. This exposes the active and meaningful qualities of older adults' decisions and practices. (RH)

ISSN: 0144686X

From : cambridge.org/aso

Ageing well in the right place: partnership working with older people; by Judith Sixsmith, Mei Lan Fang, Ryan Woolrych (et al.): Emerald, 2017, pp 40-48.

Working with Older People, vol 21, no 1, 2017, pp 40-48.

The provision of home and community supports can enable people to successfully age-in-place by improving physical and mental health, supporting social participation, and enhancing independence, autonomy and choice. One challenge concerns the integration of place-based supports available as older people make the transition to affordable housing. Sustainable solutions need to be developed and implemented with the full involvement of communities, service organisations and older people themselves. Partnership building is an important component of this process. This paper details the intricacies of developing partnerships with low-income older people, local service providers and nonprofit housing associations in the context of a Canadian housing development. A community-based participatory approach was used to inform the data collection and partnership building process. The partnership building process progressed through a series of democratised committee meetings based on the principles of appreciative inquiry, four collaboration cafes with nonprofit housing providers, and four community mapping workshops with low-income older people. Data collection also

involved 25 interviews and 15 photovoice sessions with the housing tenants. The common aims of partnership and data collection were to understand the challenges and opportunities experienced by older people, service providers and nonprofit housing providers; identify the perspectives of service providers and nonprofit housing providers for the provision and delivery of senior-friendly services and resources; and determine actions that can be undertaken to better meet the needs of service providers and nonprofit housing providers in order to help them serve older people better. The partnership prioritised the generation of a shared vision together with shared values, interests and the goal of co-creating meaningful housing solutions for older people moving into affordable housing. Input from interviews and photovoice sessions with older people provided material to inform decision making in support of ageing well in the right place. Attention to issues of power dynamics and knowledge generation and feedback mechanisms enable all fields of expertise to be taken into account, including the experiential expertise of older residents. This resulted in functional, physical, psychological and social aspects of ageing in place to inform the new build housing complex. The findings confirm that the drive toward community partnerships is a necessary process in supporting older people to age well in the right place. This requires sound mechanisms to include the voice of older people themselves alongside other relevant stakeholders. (RH)

ISSN: 13663666

From : www.emeraldinsight.com/loi/wwop

Ageing, corporeality and social divisions in later life; by Chris Gilleard, Paul Higgs.: Cambridge University Press, September 2017, pp 1681-1702.

Ageing and Society, vol 37, no 8, September 2017, pp 1681-1702.

Although research on the social divisions of later life has focused on class, gender, and more recently, sexuality as sources of division in later life, the division between the fit and the frail has tended to be ignored or viewed as an outcome of these other divisions. This paper challenges this assumption, arguing that corporeality constitutes a major social division in later life. This in many ways prefigures a return to the 19th century categorisation of those 'impotent through age', whose position was among the most abject in society. Their 'impotence' was framed by an inability to engage in paid labour. Improved living standards during and after working life saw the impotence of age fade in significance, such that in the immediate post-war era, social concern turned towards the relative poverty of pensioners. Subsequent demographic ageing and the expanding cultures of the third age have undermined the homogeneity of retirement. Frailty has become a major source of social division, separating those who are merely older from those who are too old. This division excludes the 'unsuccessfully aged' from utilising the widening range of material and social goods that characterise the third age. It is this social divide, rather than those of past occupation or income, that is becoming a more salient line of fracture in later life. (RH)

ISSN: 0144686X

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

Attitudes towards intergenerational equity: preliminary Australian evidence; by Hal Kendig, Kate O'Loughlin, Rafat Hussain, Lisa Cannon.: Wiley, June 2017, pp 107-111.

Australasian Journal on Ageing, vol 36, no 2, June 2017, pp 107-111.

Australia is facing the distinct possibility that future generations could have worse lifelong economic prospects than their parents' generation now entering later life - i.e. the so-called 'baby boomer' generation. The post-World War II baby boom cohort includes many who accumulated substantial wealth during the economic boom of the 1980s. However there is growing evidence that these opportunities have been less available to very old people - i.e. those born before WW2 and during the 1930s Depression - as well as younger generations now entering adulthood. This article reports on national attitudes in Australia towards intergenerational equity and related policy responses drawing on a national survey. Overall findings revealed consistent views across all age groups that the baby boom generation has been advantaged in terms of their lifetime economic opportunities relative to the generation that came before them and also to the younger generation today. (JL)

ISSN: 14406381

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

Can't wait to get my pension: the effect of raising the female state pension age on income, poverty and deprivation; by Jonathan Cribb, Carl Emmerson, Institute for Fiscal Studies - IFS. London: Institute for Fiscal Studies, 2017, 28 pp (IFS working paper W17/10).

The earliest age at which women can receive a state pension in the UK (the state pension age - SPA) has been increasing since 2010. The authors use data from the Family Resources Survey (FRS) and a difference-in-differences methodology, exploiting the gradual increase from age 60 in 2010 to age 63 in 2016, to estimate the impact of the reform on women's incomes, income poverty rates and measures of material deprivation. On average, they find that increased earnings partially offset the loss of state pension income, leaving affected

women's household incomes on average £32 per week lower due to the reform. Proportionally, the reduction in household income is larger for lower-income women. These reductions in income lead to the absolute income poverty rate of women aged 60-62, who are now under the state pension age, increasing by 6.4 percentage points. However, the increased risk of poverty does not persist after the point at which they reach the state pension age. Moreover, the authors find no evidence that increasing the state pension age increases the probability of women reporting being deprived of important material items, at least for the items observed in our data. This potentially suggests that they have smoothed their consumption, and avoided increased levels of material deprivation, despite the large reduction in income caused by the reform. Funding by the Joseph Rowntree Foundation (JRF) is acknowledge, also support from the Economic and Social Research Council (ESRC) through the Centre for the Microeconomic Analysis of Public Policy at IFS (grant reference ES/M010147/1). (RH)

From : <https://www.ifs.org.uk/uploads/publications/wps/WP201710.pdf>

Golden years or retirement fears?: private pension inequality among Canada's immigrants; by Josh Curtis, Naomi Lightman.: Cambridge University Press, June 2017, pp 178-195.

Canadian Journal on Aging, vol 36, no 2, June 2017, pp 178-195.

Currently many immigrants are disqualified from Canada's public pension scheme because of residency requirements. In addition decades of low income and labour market exclusion prohibit many Canadian immigrants from building adequate private pension savings throughout their working life. Together these factors present serious concerns for immigrant seniors' economic well-being. Using Canadian census data spanning a 20-year period (1991-2011), this study found that income from personal savings plans and investments had declined sharply for both native-born and immigrant Canadians, with recent immigrant cohorts faring worst. However since 1991, native-born and immigrant men living in Canada for 40-plus years had major gains in private employer pensions (Registered Pension Plans, or RPPs). Yet RPP income for all other immigrant cohorts remained stable or declined during these decades. Thus the data demonstrate a worrisome growing private savings gap between native-born men and all others in Canada, with newer immigrants and women faring worst. (JL)

ISSN: 07149808

From : <http://cambridge.org/cjg>

Inequalities in later life: [scoping review]; by Thomas Scharf, Caroline Shaw, Sally-Marie Bamford, Brian Beach, Dean Hochiaf, Institute of Ageing, Newcastle University; Institute of Health and Society, Newcastle University; International Longevity Centre UK - ILC-UK; Centre for Ageing Better. London: Centre for Ageing Better, December 2017, 127 pp.

The Centre for Ageing Better commissioned this review from Thomas Scharf and Caroline Shaw from Newcastle University Institute of Ageing and Institute of Health and Society, with Sally-Marie Bamford, Brian Beach and Dean Hochiaf from the International Longevity Centre UK (ILC-UK). The aim was to understand the main factors that influence inequalities in later life and the nature of inequalities related to six identified outcomes: subjective well-being; physical and mental health; life expectancy and healthy life expectancy; financial security; social connections; and living environment (home and neighbourhood). For each outcome, inequalities were considered in respect of gender (including transgender), race, age, disability, sexual orientation, religion or beliefs, socioeconomic status, place of residence, and status as an informal carer. The report reviews research published from 2006 to 2016 inclusive relating to England only. Data published by national or local government departments and third sector organisations is not included. Methodology and search strategy used are covered in appendices. Overall, the evidence identified was of varying depth and quality. For example, on socioeconomic factors, only a few papers explored ethnicity; and there was little on the financial experiences of black and minority ethnic groups (BME), lesbian, gay, bisexual and transgender (LGBT) communities, those with disabilities, or with informal caring responsibilities. There was also a limited body of evidence on living environments: of 3,717 studies identified in the database search, 46 satisfied criteria for full text review, of which only 12 were included in the scoping review. These and the results for each of the other five outcomes are listed at the end of each section. (RH)

From : <https://www.ageing-better.org.uk/wp-content/uploads/2017/12/Inequalities-scoping-review-full-report.pdf>

Inequalities in later life: the issue and the implications for policy and practice; by Centre for Ageing Better. London: Centre for Ageing Better, December 2017, 16 pp.

The Centre for Ageing Better commissioned a scoping review on the nature of inequalities in later life in England. The review was conducted by Thomas Scharf and Caroline Shaw from Newcastle University Institute of Ageing and Institute of Health and Society, with Sally-Marie Bamford, Brian Beach and Dean Hochiaf from the International Longevity Centre UK (ILC-UK). This short report sets out key insights from the review and

the Centre for Ageing Better's view on their implications. The review illustrates stark contrasts in people's experiences of later life in terms of health, financial security and social connections. It also reports a lack of evidence in respect of black and minority ethnic groups (BME), lesbian, gay, bisexual and transgender (LGBT) communities, and those with disabilities. Failure to tackle the inequalities highlighted risks a future where smaller groups of people experience a good later life, on which this report aims to stimulate debate and action. (RH)

From : <http://www.ageing-better.org.uk/wp-content/uploads/2017/12/Inequalities-insight-report.pdf>

Inequalities in receipt of mental and physical healthcare in people with dementia in the UK; by Claudia Cooper, Rebecca Lodwick, Kate Walters ... (et al): Oxford University Press, May 2017, pp 393-400.

Age and Ageing, vol 46, no 3, May 2017, pp 393-400.

UK Dementia Strategies prioritise fair access to mental and physical healthcare. In this study the authors investigated whether there are inequalities by deprivation or gender in healthcare received by people with dementia, and compared healthcare received by people with and without dementia. The study investigated primary care records of 68,061 community dwelling dementia patients and 259,337 people without dementia (2002-13). It tested hypotheses that people with dementia from more deprived areas, and who are women receive more psychotropic medication, fewer surgery consultations, are less likely to receive annual blood pressure, weight monitoring and an annual review, compared with those from less deprived areas and men. Findings showed that only half of people with dementia received a documented annual review. Deprivation was not associated with healthcare received. Compared to men with dementia, women with dementia had lower rates of surgery consultations, of annual blood pressure monitoring and of annual weight monitoring. Men with dementia were less likely to be taking psychotropic medication than women with dementia. People with dementia had fewer surgery consultations and were less likely to have their weight and blood pressure monitored at least annually, compared to the non-dementia group. Overall people with dementia, and in particular women, appear to receive less primary healthcare, but take more psychotropic medication that may negatively impact their physical health. Reducing these inequalities and improving access of people with dementia to preventative healthcare could improve the health of people with dementia. (JL)

ISSN: 00020729

From : <http://academic.oup.com/ageing>

Marmot indicators briefing: [press release]; by Institute of Health Equity, Department for Epidemiology and Public Health, University College London. [London]: UCL Institute of Health Equity, 18 July 2017, 10 pp.

The Marmot indicators were set up following publication in 2010 of 'Fair society, healthy lives' (the Marmot review), a government commissioned review of health inequalities. The indicators track progress on key policy recommendations made to reduce health, social and environmental inequalities. The UCL Institute of Health Equity periodically analyses the indicators to monitor progress and raise issue of concern. This press release and a presentation ('Inequalities Update' by Michael Marmot, Angela Donkin, and Peter Goldblatt <http://www.instituteofhealthequity.org/file-manager/MarmotIndicators2017/life-expectancy-indicators-and-progress-since-the-marmot-review-july-latest.pdf>) highlight areas of interest and the Institute's reaction to the latest available data in 'Health profile for England' (Public Health England, PHE). These point to a squeeze on health services, an increase in dementia deaths as life expectancy increases falter, and inequalities within and between local authorities. The reader is also directed to Marmot Indicators on the PHE fingertips website (<https://fingertips.phe.org.uk/profile-group/marmot>), where there are links to Marmot Indicators for local authorities (2014 and 2015), the Wider Determinants of Health tool (2016-), and Indicators on healthy life expectancy and life expectancy, based on the 2011 Census. (RH)

From : <http://www.instituteofhealthequity.org/file-manager/MarmotIndicators2017/marmot-indicators-briefing-17-july-2017-final-copy.pdf>Contact: felicity.porritt@gmail.com Tel: 07739419219

A mid-life less ordinary?: Characteristics and incomes of low to middle income households aged 50 to State Pension age; by David Finch, Helena Rose, Centre for Ageing Better; Resolution Foundation. London: Centre for Ageing Better, May 2017, 35 pp.

Low to middle income households (LMIs) are defined as those in the bottom half of the income distribution. Their incomes are above the bottom 10%, and they receive less than one fifth of their income from means-tested benefits - in total, around 6 million working-age households and 10 million adults. This study's focus is older LMIs, in which the head of household is aged 50 to State Pension age (SPA), comprising 1.8 million households, almost a third of all LMIs. The authors use analyses by the Resolution Foundation of the Office for National Statistics' (ONS) Family Resources Survey (FRS) to examine: older LMIs and the labour market; composition of household income and long term trends; and spending and saving. It is concluded that older LMIs remain at risk of continued financial strain as they approach retirement. Their living standards are still no higher than in 2007-08: they struggle to maintain current living standards, or to save enough to support their

future living standards in retirement. Annex A mentions use of a related ONS series, Households Below Average Income (which seems not to be referred to elsewhere in the text). (RH)

From : <https://16881-presscdn-0-15-pagely.netdna-ssl.com/wp-content/uploads/2017/05/A-mid-life-less-ordinary.pdf>

Neoliberalism and austerity in Spain, Portugal and South Africa: the revolution of older persons; by Abigail Ornellas, María-Asunción Martínez-Román, Juan Tortosa-Martínez ... (et al): Taylor and Francis, October 2017, pp 535-552.

Journal of Gerontological Social Work, vol 60, nos 6-7, October 2017, pp 535-552.

In Portugal, Spain, and South Africa there has been a noted anti-neoliberal resistance, marked by the significant participation of the older generation in protest movements. Changing demographics, the global financial crisis, unemployment, poverty and the reliance of the family nucleus on the pensioner, coupled with neoliberal and austerity-based reductions to welfare programmes, pensions, health and social care, has caused the 'silver revolution'. As a population group that is often considered to be less politically active and robust, such resistance is a noteworthy moment in society that needs to be considered and responded to. (JL)

ISSN: 01634372

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

The present retirement crisis and how social workers can respond; by David B Miller, M Terry Hokenstad, Kristen Berg.: Taylor and Francis, July 2017, pp 395-407.

Journal of Gerontological Social Work, vol 60, no 5, July 2017, pp 395-407.

Research on Americans' retirement readiness indicates a wide range of preparedness for the golden years. Called a 'crisis' by researchers, retirement for some may include significant choices: continued employment or utilisation of social welfare services. This article describes factors contributing to the retirement crisis and roles social workers can play in assisting older retirees. Disparity in household retirement savings exists by ethnicity. On the front lines serving ageing individuals and their families, social work professionals are well situated to collaborate with individuals and other providers to address financial, social and emotional pillars necessary in facilitating a safe and secure retirement. (JL)

ISSN: 01634372

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

Public/private pension mix, income inequality and poverty among the elderly in Europe: an empirical analysis using new and revised OECD data; by Jim Been, Karen Caminada, Kees Goudswaard, Olaf van Vliet.: Wiley, December 2017, pp 1079-1100.

Social Policy and Administration, vol 51, no 7, December 2017, pp 1079-1100.

Previous studies have suggested that higher public pensions are associated with lower income inequality among older people. whereas the reverse is true for private pensions. In 2012, van Vliet et al used panel data from the OECD SOCX (Social Expenditure) and the EU-SILC (European Union Statistics on Income and Living Conditions) databases, to empirically test whether relative shifts from public to private pension schemes entail higher levels of income inequality among older people. Contrasting earlier empirical studies using either cross-sectional or time-series data, they do not find evidence that shifts from public to private pension provision are associated with higher levels of income inequality or poverty among older people. This article aims to extend the analysis of van Vliet et al by: adding additional countries; adding additionally available years; and using revised OECD SOCX data. In contrast to van Vliet et al, the authors find that a greater relative importance of private pensions is associated with higher levels of income inequality and poverty among older people. A central explanation of the difference in conclusions stems from the revision of OECD SOCX data. (RH)

ISSN: 01445596

From : https://www.netspar.nl/assets/uploads/P20160826_dp028_Been.pdf

Refining the push and pull framework: identifying inequalities in residential relocation among older adults; by An-Sofie Smetcoren, Liesbeth De Donder, Sarah Dury (et al): Cambridge University Press, January 2017, pp 90-112.

Ageing and Society, vol 37, no 1, January 2017, pp 90-112.

Older people consider moving home when there is a discrepancy between actual and desired living conditions. This study builds on the classic push and pull framework described in the early work of Lee and Wiseman, by identifying whether or not individual differences among older people can be predictive for certain push and pull reasons (such as housing, health, neighbourhood and social contact). On the basis of data from the Belgian Ageing Studies (N = 35,402), it was found that 13.9% of older respondents had moved in the last ten years (N = 4,823). An analysis of the movers revealed inequalities in the reasons for moving in later life and raises the question of whether a relocation is voluntary (being able to move) or involuntary (being forced to move).

Respondents with lower household incomes and poor mental health were significantly more likely to have moved, because of stressors pushing them out of their previous dwelling, whereas older people with higher household incomes or home-owners were mainly pulled towards a more attractive environment. (RH)

ISSN: 0144686X

From : journals.cambridge.org/aso

The regulatory welfare state in pension markets: mitigating high charges for low-income savers in the United Kingdom and Israel; by Avishai Benish, Hanan Haber, Rotem Eliahou.: Cambridge University Press, April 2017, pp 313-330.

Journal of Social Policy, vol 46, no 2, April 2017, pp 313-330.

How does the rising 'regulatory welfare state' address social policy concerns in pension markets? This study examines this question by comparing the regulatory responses to high charges paid by low-income workers in pension markets in the UK and Israel. In the UK, with the recognition that the market would not cater to low-income workers, the regulatory response was the creation of a publicly operated low-cost pension fund (the National Employment Savings Trust - NEST), a 'public option' within the market. This allowed low-income workers access to a low level of charges, previously reserved for high-income and organised workers. In Israel, regulation sought to empower consumers, while providing minimal social protection by capping pension charges at a relatively high level, thereby leaving most of the responsibility for reducing the charges with the individual saver. By comparing these two cases, the article develops an analytical framework for the study of the regulatory welfare state, making two contributions. First, it highlights different types of regulatory citizenship: minimal regulatory social protection as opposed to a more egalitarian approach. Second, it identifies an overlooked regulatory welfare state strategy: creating 'public option' arrangements, whereby a state-run (but not funded) service operates within the market. (RH)

ISSN: 00472794

From : cambridge.org/JSP

Resilience in low-income African American women living and aging with HIV; by Sailaja Subramaniam, Lizeth M Camacho, Marsha T Carolan (et al.): Taylor and Francis, 2017, pp 543-550.

Journal of Women and Aging, vol 29, no 6, 2017, pp 543-550.

Women are living with HIV into middle and older age and are likely to face multiple comorbidities and stressors as they age. This study focused on understanding how women who experience multiple forms of oppression and ongoing adversity are still able to adapt and stand strong. Using a theoretical framework of resilience and a feminist research ideology, interviews of eight middle-aged and older African American women living with HIV were analysed. Despite experiences of HIV-related discrimination, trauma and violence, these women demonstrated a remarkable ability to adapt and maintain support. Implications for research and practice are discussed. (RH)

ISSN: 08952841

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

Stress and subjective age: those with greater financial stress look older; by Stefan Agrigoroaei, Angela Lee-Attardo, Margie E Lachman.: Sage, December 2017, pp 1075-1099.

Research on Aging, vol 39, no 10, December 2017, pp 1075-1099.

Subjective indicators of age add to our understanding of the ageing process beyond the role of chronological age. The authors examined whether financial stress contributes to subjective age as rated by others and the self. The 228 participants (aged 26-75) were from a Boston area satellite of the Midlife in the United States (MIDUS) longitudinal study. Participants reported how old they felt and how old they thought they looked. Observers assessed the participants' age based on photographs from two different times, an average of 10 years apart. Financial stress was measured at Time 1. Controlling for income, general stress, health and attractiveness, participants who reported higher levels of financial stress were perceived as older than their actual age to a greater extent, and showed larger increases in other-look age over time. The authors consider the results on accelerated ageing of appearance with regard to their implications for interpersonal interactions and in relation to health. (RH)

ISSN: 01640275

From : <http://journals.sagepub.com/doi/abs/10.1177/0164027516658502?journalCode=roaa>

The supportive network: rural disadvantaged older people and ICT; by Steven Baker, Jeni Warburton, Suzanne Hodgkin, Jan Pascal.: Cambridge University Press, July 2017, pp 1291-1309.

Ageing and Society, vol 37, no 6, July 2017, pp 1291-1309.

The rapid development of Information and Communications Technologies (ICT) is profoundly transforming the social order, into what Spanish sociologist Manuel Castells calls the network society. Mobile technologies, such

as smartphones and tablet computers, are perhaps the definitive tools of the network society. However, cultural and economic barriers exist that restrict access to these transformative tools and to the information networks in which they operate. One group that is particularly at risk is rural older people from disadvantaged backgrounds. This paper reports on one aspect of a larger action research project that involved working with a small group of rural, socially isolated older Australians with histories of homelessness and complex needs (N = 7) and their social workers. This paper focuses on the older participants who, having been provided tablet computers, were then supported to use the device in their homes over the course of eight months. Despite most participants having never used a computing device of any kind prior to the research project, findings suggested that participants gained confidence, independence and social engagement as a result of their ICT use. Results also highlighted that they experienced challenges in utilising ICT, specifically technical, economic and social barriers. Findings highlight the individual and structural issues that must be addressed to enable all citizens to participate fully in the network society. (RH)

ISSN: 0144686X

From : cambridge.org/aso

UK poverty 2017: summary; by Helen Barnard, Ashwin Kumar, Andrew Wenham (et al), Analysis Unit, Joseph Rowntree Foundation - JRF. York: Joseph Rowntree Foundation, December 2017, 4 pp (Inspiring social change; Ref 3272).

Over the last 20 years, the UK has seen very significant falls in poverty among children and pensioners. In 1994/95, 28% of pensioners lived in poverty, falling to 13% in 2011/12. However, poverty rates have started to rise again, to 16% for pensioners in 2015/16. This is summary of the main report, 'UK poverty 2017: a comprehensive analysis of poverty trends and figures' (113 pp). It is based on analysis of a range of household surveys and published statistics, and examines how UK poverty has changed in the last 20 years, as well as more recent developments. Among key points are that and around one in six pensioners in the poorest fifth of the population, are socially isolated; and 70% of people in work are not contributing to a pension. The main fall in the pensioner poverty rate was among single pensioners between 1998/99 and 2004/05. This was helped by increased state support for low-income pensioners through the Pension Credit Guarantee (previously the Minimum Income Guarantee - MIG) and rising home ownership, which reduced the proportion having to meet rising rents. However, the Pension Credit Guarantee has failed to keep up with prices; and housing costs for those pensioners still renting have risen. (RH)

From : Link to download: <https://www.jrf.org.uk/report/uk-poverty-2017>

Understanding the vulnerability of older adults: extent and breaches in support systems in Uganda; by Valerie Golaz, Stephen Ojiambo Wandera, Gideon Rutaremwa.: Cambridge University Press, January 2017, pp 63-89. Ageing and Society, vol 37, no 1, January 2017, pp 63-89.

Older adults' vulnerability and resilience are a result of processes constructed throughout the lifecycle. In Uganda, older people almost always rely exclusively on their social networks for care and economic support when in need. These support systems are mainly family based, and play a role of safety net for their older members. However, localised in-depth studies have pointed out the limitations of family-based support systems, especially in the context of the HIV/AIDS epidemic. This paper uses 83 in-depth interviews conducted in various settings across Uganda with older people and their family members on the subject of their support systems. Over and above the lack of immediate or personal resources characterising most older people, the results highlight the importance of the extent of support systems and resource diversity. Most of the people in the case studies had lost descendants due to the civil war, the HIV/AIDS epidemic, or simply family break-ups, events which often create large breaches and gaps in support systems. Few older people can be resilient in this situation, primarily because there are often not enough resources available in their support networks to cover the needs of all, especially education for the young and health-care access for the old. (RH)

ISSN: 0144686X

From : journals.cambridge.org/aso

Walk the talk: characterizing mobility in older adults living on low income; by Anna M Chudyk, Joanie Sims-Gould, Maureen C Ashe ... (et al): Cambridge University Press, June 2017, pp 141-158. Canadian Journal on Aging, vol 36, no 2, June 2017, pp 141-158.

In this study the authors provided an in-depth description of the mobility (capacity and enacted function, i.e., physical activity and travel behaviour) of community-dwelling older adults of low socioeconomic status. 161 participants with an average age of 74 years completed interviewer-administered questionnaires and objective measures of mobility. Study findings did not generally indicate that older adults of low socioeconomic status had a reduced capacity to be mobile. Participants presented with positive profiles across physical, psychosocial and social environment domains that influenced the capacity to be mobile. They also made a high proportion of trips by foot, although these did not together serve to meet physical activity guidelines for most. Future research

should focus on innovative strategies to recruit this difficult-to-access population, to consider the influence of socioeconomic status across the lifespan, and the role of behaviour-driven agency when investigating the association between the person, environment and older adult mobility. (JL)

ISSN: 07149808

From : <http://cambridge.org/cjg>

"We don't do it for the money ...": The scale and reasons of poverty-pay among frontline long-term care workers in England; by Shereen Hussein.: Wiley, November 2017, pp 1817-1826.

Health and Social Care in the Community, vol 25, no 6, November 2017, pp 1817-1826.

Demographic trends escalate the demands for formal long term care (LTC) in the majority of the developed world. The LTC workforce is characterised by its very low wages, the actual scale of which is less well known. This article investigates the scale of poverty pay in the feminised LTC sector and attempts to understand the perceived reasons behind persisting low wages in the sector. The analysis makes use of large national workforce pay data and a longitudinal survey of care workers, as well as interviews with key stakeholders in the sector. The analysis suggests that there are at least between 10% and 13% of care workers who are effectively being paid under the National Minimum Wage in England. Thematic qualitative analysis of 300 interviews with employers, care workers and service users highlight three key explanatory factors for low pay: the intrinsic nature of LTC work; the value of caring for older people; and marketisation and outsourcing of services. (RH)

ISSN: 09660410

From : <http://onlinelibrary.wiley.com/doi/10.1111/hsc.12455/full>

2016

Ageing in squalor and distress: older people in the private rented sector: older people who privately rent their homes; by Age UK. London: Age UK, October 2016, 15 pp.

The number of older people renting in the private sector is set to rise in the coming years. This Age UK report reveals the reality of life for people aged 65+ at the bottom of the private rented sector. Information is based on frequently raised subjects of telephone calls to the charity's advice line about problems with privately rented accommodation. Age UK finds that many older private tenants are living in appalling conditions with disinterested landlords and negligent letting agents. (RH)

From : <https://www.housinglin.org.uk/Topics/type/Ageing-in-squalor-and-distress-older-people-in-the-private-rented-sector-Older-people-who-privately-rent-their-homes/>

Childhood living conditions, education and health among the oldest old in Sweden; by Hanna Berndt, Stefan Fors.: Cambridge University Press, March 2016, pp 631-648.

Ageing and Society, vol 36, no 3, March 2016, pp 631-648.

The objectives were to investigate the associations between social and financial living conditions in childhood, education and morbidity in old age. The study population (N = 591; 76+ years old) was assembled from two nationally representative Swedish surveys, in 1968 and 2011, that together made longitudinal analysis possible. Morbidity in old age comprised self-reported measures of musculo-skeletal disorders, cardiovascular disease, self-rated health and impaired mobility. There were no independent associations between adverse childhood living conditions and morbidity. However, adverse childhood living conditions were associated with an increased likelihood of low education. Moreover, low education was associated with a higher probability of health problems in old age. The results did not show any associations between adverse childhood conditions and late-life morbidity. However, adverse childhood conditions were associated with lower levels of education which, in turn, was associated with health problems and attrition from the study. These results suggest that adverse childhood conditions may indeed be associated with health and survival in old age, but mainly through mechanisms acting earlier in the lifecourse. (RH)

ISSN: 0144686X

From : journals.cambridge.org/aso

Differential health and social needs of older adults waitlisted for public housing or housing choice vouchers; by Paula Carder, Gretchen Luhr, Jacklyn Kohon.: Taylor and Francis, October-December 2016, pp 246-260.

Journal of Aging and Social Policy, vol 28, no 4, October-December 2016, pp 246-260.

Affordable housing is an important form of income security for low-income older people. This article describes characteristics of older people on waiting lists for either public housing or a housing choice voucher (HCV; previously Section 8) in Portland, Oregon. 358 people (32% response rate) completed a mailed survey with questions about demographics, health and housing status, food insecurity, and preference for housing with services. Findings indicate that many older people on waiting lists experienced homelessness or housing instability, poor health, high hospital use, and food insecurity. Public housing applicants were significantly more

likely to report lower incomes, homelessness and food insecurity than HCV applicants. The article concludes with policy implications for housing and health agencies that serve low-income older people. (RH)

ISSN: 08959420

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

Disability and poverty in later life; by Ruth Hancock, Marcello Morciano, Stephen Pudney, Joseph Rowntree Foundation - JRF; University of Essex.: Joseph Rowntree Foundation - JRF, August 2016, 44 pp (Inspiring social change; Ref 3205).

The relationship between disability and poverty among the older population is explored, using data from the Family Resources Survey (FRS) and the English Longitudinal Study of Ageing (ELSA) to examine the effectiveness of public support for older people with disabilities. This report emphasises the additional living costs that disabled people face, and the importance of taking disability costs into account when making poverty assessments in the older population. The authors comment on Britain's current dual system of public support for older disabled people: central government pays disability benefits - mainly Attendance Allowance (AA) and Disability Living Allowance (DLA), and local authorities manage the provision of social care services. The authors consider alternative directions of reform for the system of public support for older people with disabilities. They suggest that major reductions in the burden of deep poverty could be achieved: first, by matching amounts of benefits paid to the costs of disability more closely; and second, by increasing the reach of the system, particularly among the most disabled, thereby increasing take-up of entitlements and/or improving the quality of initial adjudication of claims. The Joseph Rowntree Foundation (JRF) has supported this project as part of its programme of research and innovative development projects. (RH)

From : <https://www.jrf.org.uk/report/disability-and-poverty-later-life>

Growing old in shelters and 'on the street': experiences of older homeless people; by Amanda Grenier, Tamara Sussman, Rachel Barker (et al).: Taylor and Francis, August-September 2016, pp 458-477.

Journal of Gerontological Social Work, vol 59, no 6, August-September 2016, pp 458-477.

Homelessness among older people in Canada is both a growing concern and an emerging field of study. This article reports thematic results of qualitative interviews with 40 people aged 46 to 75, carried out as part of a mixed-methods study of older people who are homeless in Montreal, Quebec, Canada. Participants included people with histories of homelessness (n = 14) and people new to homelessness in later life (n = 26). Interviews focused on experiences at the intersections of ageing and homelessness, including social relationships, the challenges of living on the streets and in shelters in later life, and the future. This article outlines the 5 main themes that capture the experience of homelessness for participants: age exacerbates worries; exclusion and isolation; managing significant challenges; shifting needs and realities; and resilience, strength and hope. Together, these findings underscore the need for specific programmes geared to the unique needs of older people who are homeless. (RH)

ISSN: 01634372

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

How important are state transfers for reducing poverty rates in later life?; by Debora Price, Karen Glaser, Jay Ginn, Malcolm Nicholls.: Cambridge University Press, October 2016, pp 1794-1825.

Ageing and Society, vol 36, no 9, October 2016, pp 1794-1825.

Financial welfare in later life is of prime concern as the funding of pensions and care rises up policy agendas. In this context, work and family histories are well-known for how they affect late-life income, generally reducing state and private pensions for women. In a political context where benefits are under threat as part of the retrenchment of the welfare state, the authors consider two key questions. First, how do state pension and benefit transfers interact with work and family histories to reduce poverty risks in later life? Second, who is kept out of poverty by state benefits and transfers? The authors use data from the English Longitudinal Study of Ageing (ELSA) to examine how work, family and health histories are associated with poverty in later life, and to estimate how far and in what ways state pensions, Income Support and disability benefits play a mediating role. The authors conclude that state support is key to maintaining incomes above official poverty lines for a substantial number of those whose work, family and health histories would otherwise have led to their incomes falling below these lines. While disability benefits are designed to compensate for the additional costs of disability, it is likely that many in receipt experience poverty (even though they are not captured in official poverty statistics); even more so for those incurring the costs of disability, but not in receipt of these benefits. (RH)

ISSN: 0144686X

From : journals.cambridge.org/aso

Income inequities in health care utilization among adults aged 50 and older; by Margaret J Penning, Chi Zheng.: Cambridge University Press, March 2016, pp 55-69.

Canadian Journal on Aging, vol 35, no 1, March 2016, pp 55-69.

Equitable access to and utilisation of health services is a primary goal for many health care systems, particularly in countries with universal publicly funded systems. Despite concerns regarding potentially adverse implications of the 1990s health care policy and other reforms, whether and how income inequalities in service utilisation changed remains unclear. This study addressed the impact of income on physician and hospital utilisation from 1992-2002 among adults aged 50 and older in British Columbia. Those with lower incomes were found less likely to access general practitioner and specialist services but more likely to access hospital services. Income-related disparities in physician care increased over time; hospital care declined. Volume of GP and hospital care was inversely associated with income, however these differences increased regarding GP services only. Findings of declines in hospital-care access, accompanied by increasing income-related disparities in physician-services access, show that inequities are increasing within Canada's health care system. (JL)

ISSN: 07149808

From : journals.cambridge.org/cjg

An investigation into inequalities in adult lifespan; by Les Mayhew, David Smith, Faculty of Actuarial Science and Insurance, Cass Business School, City University London; International Longevity Centre UK - ILC-UK. London: International Longevity Centre UK - ILC-UK, May 2016, 32 pp.

People in the UK are living longer than ever, but the gap between the oldest and shortest lived appears to be increasing. The authors use data from the Human Mortality Database to measure the differences in age between the first 10% of adult deaths and the top 5% of survivors. They find that in the period from 1879 to 1939, this gap steadily closed. They argue that this reduction in inequalities in age at death was due to the benefits of clean drinking water, mass vaccination and other public health improvements which were available to everyone; but such improvements were disproportionately shared by the poor relative to the rich. Although life expectancy continued to rise after 1950, the inequality gap remained roughly constant, and in recent years has started to widen again - more so for men than for women. A key difference between pre-1939 and now is that deaths are increasingly from chronic rather than infectious diseases or environmental causes. Since chronic disease is often attributable to life choices such as smoking and diet, the blame for the widening must be laid increasingly at the door of individual unhealthy lifestyles rather than ambient risks and hazards.

From : ILC-UK, 11 Tufton Street, London SW1P 3QB. Download at:

http://www.cass.city.ac.uk/_data/assets/pdf_file/0011/316100/ILCCASS-LEANDI-REPORT_final_25_04_16.pdf

Monitoring poverty and social exclusion 2016; by Adam Tinson, Carla Ayrton, Karen Barker, Theo Barry Born, Hannah Aldridge, Peter Kenway, New Policy Institute; Joseph Rowntree Foundation - JRF. York: Joseph Rowntree Foundation - JRF, December 2016, 6 pp (Inspiring social change; Ref 3229).

Researchers from the New Policy Institute use official data from a range of sources to look at trends and patterns in poverty and social exclusion across different indicators. This year's key themes are income, housing, life chances, social security and work and worklessness. This summary outlines findings from the main report (same title) on key themes of income, housing, life chances, social security, and work and worklessness. In 2014/15, there were 13.5 million people in poverty in the UK, 21% of the population. In 2004/05, there were 12 million people in poverty, 21% of the population. Compared with 2004/05, poverty in the 65+ age group (as measured after housing costs) has decreased from 1.9 million to 1.5 million in 2014/15. The full report (148 pp; ISBN: 9781910783764) is the nineteenth in the series (link at: https://www.jrf.org.uk/report/monitoring-poverty-and-social-exclusion-2016?utm_medium=email&utm_campaign=JRF%20weekly%20round-up%20wc%205%20December%202016&utm_content=JRF%20weekly%20round-up%20wc%205%20December%202016+CID_1d75b8b0ccf35e25f34b5d11db24534d&utm_source=Email%20marketing%20software&utm_term=Read%20the%20findings). (RH)

From : Link to download: [https://www.jrf.org.uk/report/monitoring-poverty-and-social-exclusion-](https://www.jrf.org.uk/report/monitoring-poverty-and-social-exclusion-2016?utm_medium=email&utm_campaign=JRF%20weekly%20round-up%20wc%205%20December%202016&utm_content=JRF%20weekly%20round-up%20wc%205%20December%202016+CID_1d75b8b0ccf35e25f34b5d11db24534d&utm_source=Email%20marketing%20software&utm_term=Read%20the%20findings)

[2016?utm_medium=email&utm_campaign=JRF%20weekly%20round-](https://www.jrf.org.uk/report/monitoring-poverty-and-social-exclusion-2016?utm_medium=email&utm_campaign=JRF%20weekly%20round-up%20wc%205%20December%202016&utm_content=JRF%20weekly%20round-up%20wc%205%20December%202016+CID_1d75b8b0ccf35e25f34b5d11db24534d&utm_source=Email%20marketing%20software&utm_term=Read%20the%20findings)

[up%20wc%205%20December%202016&utm_content=JRF%20weekly%20round-](https://www.jrf.org.uk/report/monitoring-poverty-and-social-exclusion-2016?utm_medium=email&utm_campaign=JRF%20weekly%20round-up%20wc%205%20December%202016&utm_content=JRF%20weekly%20round-up%20wc%205%20December%202016+CID_1d75b8b0ccf35e25f34b5d11db24534d&utm_source=Email%20marketing%20software&utm_term=Read%20the%20findings)

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Observational cohort study: deprivation and access to anti-dementia drugs in the UK; by Claudia Cooper, Rebecca Lodwick, Kate Walters ... (et al.): Oxford University Press, January 2016, pp 148-154.

Age and Ageing, vol 45, no 1, January 2016, pp 148-154.

UK National Dementia Strategies prioritise fair access to dementia treatments for the whole population. This study investigated for the first time inequalities in NHS national dementia prescribing and how they have varied

between UK countries and over time. The study investigated the association between Townsend deprivation score and anti-dementia drug prescribing in 77,045 dementia patients from UK primary care records from 2002 to 2013. Included were 77,045 patients with recorded dementia diagnosis or anti-dementia drug prescription. It was found that least deprived patients were 25% more likely to be initiated on anti-dementia drugs than the most deprived. This was driven by data from English practices where prescribing rates were consistently lower in more deprived patients compared with Scotland, Northern Ireland and Wales, where prescribing was not related to deprivation quintile. Compared with English practices, anti-dementia medication was prescribed more often in Northern Irish and less in Welsh practices, with a trend towards more prescribing in Scottish practices. Drug initiation rates were also higher in younger people and men. Four years after the English National Dementia Strategy, there is no evidence that the Strategy's key objective of reducing treatment inequalities is being achieved. Higher overall anti-dementia drug prescribing in Scottish and Northern Irish practices, and differing clinical guidelines in Scotland from other UK countries might explain greater equality in prescribing in these countries. Strategies to offer treatment to more deprived people with dementia in England are needed. (JL)

ISSN: 00020729

From : www.ageing.oxfordjournals.org

The other Victorians: age, sickness and poverty in 19th-century Ireland; by Chris Gilleard.: Cambridge University Press, July 2016, pp 1157-1184.

Ageing and Society, vol 36, no 6, July 2016, pp 1157-1184.

Drawing primarily on data from the various censuses conducted in Ireland after the Act of Union in 1800, this paper seeks to elucidate the changing position of older people in Ireland during the Victorian period. Following the Great Famine of 1845-1849, it is argued, Ireland was transformed from a young, growing country to one that, by the end of the 19th century, had become 'prematurely old'. By the end of Victoria's reign, not only had Ireland grown 'old', but its older population were more likely to be identified as paupers. Later-life expectancy decreased, and sickness and infirmity among the over-60s increased. By employing a stricter form of 'less eligibility' in the drafting and implementation of the Irish Poor Law, proportionately more older people received indoor relief than outdoor relief compared with the rest of the British Isles. Not until the Old Age Pensions Act in 1908 did these disparities begin to change, by which time many of these 'other' Victorians had passed away. (RH)

ISSN: 0144686X

From : journals.cambridge.org/aso

The overlooked over-75s: poverty among the 'Silent Generation' who lived through the Second World War; by Sue Arthur, Ciaran Osborne, Matt Barnes, Independent Age; Department of Sociology, City University. London: Independent Age, 2016, 32 pp.

The financial circumstances of the group of older people who lived through the Second World War - sometimes called the 'Silent Generation' is examined. This report uses incomes data from the Family Resources Survey (FRS) 2013-14 collected by the Office for National Statistics (ONS) and the National Centre for Social Research (NatCen) to look at the differences between groups of older people, and identifies those who are at risk of being forgotten on low incomes. Qualitative interviews were also conducted - presented as case studies - illustrating the experience of living on a low income in old age. The report looks at and defines poverty and material deprivation, and the role of state financial support. The analysis shows that, on average, those aged 75 and over live on lower incomes than younger adults. Many are living in poverty, and are unlikely to see significant increases in their income during their lifetime. Independent Age calls for a renewed government emphasis on Pension Credit to boost low take-up of this benefit, and to make sure its value is not eroded over time. The Government should also ensure that other benefits such as Winter Fuel Payment and the free bus pass are maintained for those most at risk of living in poverty, particularly single older people, older women and older renters. When Attendance Allowance is "reformed", the Government must guarantee that local councils will use it for its intended purpose, and that take-up does not decline. This report thus challenges recent stereotypes of "wealthy pensioners", and highlights the risk that the incomes of the over 75s will get overlooked in debates around intergenerational fairness and a policy focus on the new State Pension. (RH)

From : Download: http://www.independentage.org/media/1224217/pensioner-poverty-report_final_6516.pdf

Pension reform in China; by Tao Liu, Li Sun.: Taylor and Francis, January-March 2016, pp 15-28.

Journal of Aging and Social Policy, vol 28, no 1, January-March 2016, pp 15-28.

China has recently established a universal non-contributory pension plan covering urban non-employed workers and all rural residents, in addition to the pension plan covering urban employees that was already in place. In this latest reform, China has also discontinued the special pension plan for civil servants, and integrated this privileged welfare class into the urban old-age pension insurance programme. With these steps, China has achieved a degree of universalism and integration of its pension arrangements, which is unprecedented in the

non-Western world. Despite this radical pension transformation strategy, the authors argue that the current Chinese pension arrangement represents a case of "incomplete" universalism. First, its benefit level is low. Moreover, the benefit level varies from region to region. Finally, universalism in rural China has been undermined due to the existence of the "policy bundle". The authors also argue that the 2015 pension reform has created a situation in which the stratification of Chinese pension arrangements has been "flattened", even though it remains stratified to some extent. (RH)

ISSN: 08959420

From : <http://tandfonline.com>

Public pensions as the great equalizer?: decomposition of old-age income inequality in South Korea, 1998-2010; by Sun-Jae Hwang.: Taylor and Francis, April-June 2016, pp 81-97.

Journal of Aging and Social Policy, vol 28, no 2, April-June 2016, pp 81-97.

The redistributive effects of public pensions on old-age income inequality are examined, testing whether public pensions function as the "great equalizer". Unlike the well-known alleviating effect of public pensions on old-age poverty, the effects of public pensions on old-age income inequality more generally have been less examined, particularly outside Western countries. Using repeated cross-sectional data on older Koreans between 1998 and 2010, the author applied Gini coefficient decomposition to measure the impact of various income sources on old-age inequality, particularly focusing on public pensions. The findings show that, contrary to expectations, public pension benefits have inequality intensifying effects on old-age income in Korea, even countervailing the alleviating effects of public assistance. This rather surprising result is due to the specific institutional context of the Korean public pension system, and suggests that the "structuring" of welfare policies could be as important as their expansion for older people, particularly for developing welfare states. (RH)

ISSN: 08959420

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

Successful ageing and multi-dimensional poverty: the case of Peru; by Javier Olivera, Isabelle Tournier.: Cambridge University Press, September 2016, pp 1690-1714.

Ageing and Society, vol 36, no 8, September 2016, pp 1690-1714.

The determinants of successful ageing (SA) in a sample of 4,151 Peruvians aged between 65 and 80 years and living in poverty were investigated. A key contribution of this study is to combine the conceptual appeal of SA to measure wellbeing in old age with the multi-dimensional poverty counting approach developed in the economic literature. This setting allows for moving beyond the dichotomy of successful and usual ageing to take advantage of the full distribution of success along a set of dimensions of wellbeing. The data are drawn from the Encuesta de Salud y Bienestar del Adulto Mayor (ESBAM) survey, which is the baseline to evaluate the non-contributory public pension programme Pension 65. Nine indicators of SA have been used to assess the dimensions of physical health, functioning, cognition, emotional health and life satisfaction. The variables associated with a higher number of satisfied indicators were male gender, younger old age, literate, employed, low food insecurity, good nutritional status, normal blood pressure, absence of disabilities, non-smoker, empowerment, good self-esteem, absence of mental disability, and less frequent contact with a social network. From a policy perspective, the results of this study report a remarkably stable effect of three variables affecting SA that can be relatively easy to measure, monitor and influence by public intervention. These variables are food security, nutrition quality and self-esteem. (RH)

ISSN: 0144686X

From : journals.cambridge.org/aso

The under-pensioned 2016: a research paper; by Daniela Silcock, Shamil Popat, Tim Pike, Pensions Policy Institute - PPI. London: Pensions Policy Institute - PPI, March 2016, 86 pp.

In 2003 and again in 2008 the Pensions Policy Institute (PPI) explored current and future pension incomes of women, disabled people and people from ethnic minority groups. This third in the series explores outcomes for the "under-pensioned", defined as people who have characteristics associated with lower than average levels of pension savings and income. The report examines whether and by how much differences in state and private pension entitlements have changed since the 2003 and 2008 analyses, in light of reforms, and investigates how income differences may be reduced in future. It runs through the high-level results and methodology from the 2008 under-pensioned report, and looks at relevant policy developments since its publication. It uses Labour Force Survey (LFS) data for 2015, the Family Resources Survey (FRS) and the Wealth and Asset Survey to explore the labour market characteristics of different groups, particularly women, ethnic minorities, disabled people, carers, and the self-employed,. It considers what pension income and saving the under-pensioned have; also differences in eligibility for means-tested benefits between under-pensioned groups and the median earning male. Lastly, it considers how pension incomes of the under-pensioned might change in the future, and how

policies might affect differences in pension income. The report is sponsored by Age UK, the Joseph Rowntree Foundation (JRF), the People's Pension and the Trades Union Congress (TUC). (RH)

From : Pensions Policy Institute, King's College London, Virginia Woolf Building, 1st Floor, 22 Kingsway, London WC2B 6LE. Download at: <http://www.pensionspolicyinstitute.org.uk/press/press-releases/the-under-pensioned-2016>

Willingness to complete advance directives among low-income older adults living in the USA; by Eunjeong Ko, Jaehoon Lee, Youngjoon Hong.: Wiley, November 2016, pp 708-716.

Health and Social Care in the Community, vol 24, no 6, November 2016, pp 708-716.

Advance directives and related legal documents enable individuals to designate decision-makers in the event that they cannot make their own decisions about end-of-life treatment preferences. This study examines low-income older adults' willingness to complete such advance directives and legal documents, also the role of social support and other predictors that affect their willingness. This study was conducted as part of a larger study exploring behaviours of advance care planning among low-income older Americans. Of 255 participants from the original study, this study included 204 participants who did not complete an advance directive for data analysis. A cross-sectional study using probability random sampling stratified by ethnicity was used. Older adults residing in two supportive housing facilities, or who were members of a senior centre in San Diego, California, USA, were interviewed in person between December 2010 and April 2011. Hierarchical logistic regression analysis revealed that the majority of participants (72.1%) were willing to complete advance directives; and the factors significantly predicting willingness to complete included self-rated health, attitudes towards advance decision-making, and social support. Participants with a poorer health status (OR = 1.43, 95% CI = 1.07-1.90) were more willing to complete advance directives. Conversely, participants with higher positive attitudes (OR = 1.18, 95% CI = 1.00-1.39) and greater social support (OR = 1.07, 95% CI = 1.00-1.15) were also more willing to complete advance directives. The findings suggest the importance of ongoing support from healthcare professionals in end-of-life care planning. Healthcare professionals can be a source of support assisting older adults in planning end-of-life care. Initiating ongoing communication regarding personal value and preference for end-of-life care, providing relevant information, and evaluating willingness to complete as well as assisting in the actual completion of advance directives will be necessary. (RH)

ISSN: 09660410

From : wileyonlinelibrary.com/journal/hsc

2015

At a cross-roads: the future likelihood of low incomes in old age: a white paper from the ILC-UK; by Centre for later Life Funding; International Longevity Centre UK - ILC-UK. London: International Longevity Centre UK - ILC-UK, June 2015, 19 pp.

In this "White Paper", the ILC-UK argues for a strategy for later life funding to secure effective funding for adult social care; implement the Dilnot reforms; find ways of ensuring the provision of mass market financial advice; develop default options for those who 'sit on their pension pots and do nothing'; provide clarity around what constitutes the deliberate deprivation of assets within the context of the new pension freedoms; incentivise downsizing; support innovation in the equity release market; and support policy which extends working lives. A particular focus is on these effects for the post-war "baby boomer" and "post-boomer" generations, who will soon have to deal with these issues. This report is the first publication from the Centre for Later Life Funding, which is, in part, a continuation of the Care Funding Advice Network (CFAN), a coalition of organisations and individuals seeking to improve on provision of financial advice, as recognised by the Care Act 2014. (NH/RH)

From : Download at:

http://www.ilcuk.org.uk/index.php/publications/publication_details/at_a_cross_roads_understanding_the_future_likelihood_of_low_incomes

Eat smart, live strong intervention increases fruit and vegetable consumption among low-income older adults; by James C Hersey, Sheryl C Cates, Jonathan L Blitstein (et al).: Taylor and Francis, January-March 2015, pp 66-80.

Journal of Nutrition in Gerontology and Geriatrics, vol 34, no 1, January-March 2015, pp 66-80.

This study evaluated the impact of a four-session interactive nutrition education programme _ Eat Smart, Live Strong (ESLS) _ on the consumption of fruit and vegetables by low-income older adults. A pre-post quasi-experimental design study was conducted with a longitudinal sample of 614 low-income Supplemental Nutrition Assistance Program (SNAP) participants and those eligible for SNAP, aged 60 to 80 years, in 17 intervention and 16 comparison senior centres in Michigan. The study compared participants' self-reports of their consumption of fruit and vegetables using a modified version of the University of California Cooperative Extension Food Behavior Checklist. ESLS increased participants' average daily consumption of fruit by 0.2 cups

($P < 0.05$) and vegetables by 0.31 cups ($P < 0.01$). ESLS, a four-session, cognitive-behavioural nutrition education programme is an effective curriculum for helping low-income older adults eat more fruit and vegetables. (RH)

ISSN: 21551197

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

Economic well-being among older-adult households: variation by veteran and disability status; by Janet M Wilmoth, Andrew S London, Colleen M Heflin.: Taylor and Francis, May-June 2015, pp 399-419.

Journal of Gerontological Social Work, vol 58, no 4, May-June 2015, pp 399-419.

This analysis used data from the Survey of Income and Program Participation (SIPP) to examine whether veteran and disability statuses were jointly associated with poverty and material hardship among households that included an older adult. Compared to households that did not include a person with a disability or veteran, disabled nonveteran households were more likely to be in poverty and to experience home hardship, medical hardship and bill paying hardship. Disabled veteran households were not significantly different in terms of poverty but exhibited the highest odds of home hardship, medical hardship, bill paying hardship and food insufficiency. Implications for social work practice are discussed. (JL)

ISSN: 01634372

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

Fostering the human-animal bond for older adults: challenges and opportunities; by Keith A Anderson, Linda K Lord, Lawrence N Hill (et al).: Taylor and Francis, January-March 2015, pp 32-42.

Activities, Adaptation and Aging, vol 39, no 1, January-March 2015, pp 32-42.

Older people are at high risk for physical illness and emotional disorders, particularly those of lower socioeconomic status. Pet ownership has the potential to reduce the impact of these problems by providing companionship, reducing social isolation, and enhancing physical activity and well-being. Despite these potential benefits, older people face challenges in adopting and owning pets, including functional limitations, financial considerations, and concerns should the pet owner fall ill or die. In this article, the authors detail the literature on pet ownership for older people, hurdles they face in adopting pets, and steps that could be taken to address these challenges. (RH)

ISSN: 01924788

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

Improving later life: vulnerability and resilience in older people; by Susan Davidson, Phil Rossall (eds), Age UK. London: Age UK, [2015], 86 pp.

Eminent gerontologists present their observations on the key aspects of vulnerability in later life in respect of: social engagement; resources (financial, housing and age-friendly neighbourhoods); health and disability; cognitive and mental health; and cross-cutting themes (including carers and resilience). Among suggestions made is that, in general, we can all adopt a holistic view of all kinds of vulnerability in later life as the main focus, rather concentrating on parts of the problem or parts of the body. Also recommended are: making better use of the research evidence to identify problems earlier and to target resources; concentrating more on combating the effects of neighbourhood deprivation; working towards providing an age-friendly environment; facilitating home adaptations, aids and a better range of housing options; and rooting out ageism among professionals and society in general. (RH)

From : Age UK, Tavistock House, 1-6 Tavistock Square, London WC1H 9NA. Website: www.ageuk.org.uk

Job seekers' search intensity and wage flexibility: does age matter?; by An de Coen, Anneleen Forrier, Nele de Cuyper (et al).: Cambridge University Press, February 2015, pp 346-366.

Ageing and Society, vol 35, no 2, February 2015, pp 346-366.

Although studies on job search implicitly presume that relationships between antecedents and indicators of job search are similar for job seekers from different ages, few studies have tested this assumption, even though life-span theories state that individual motives and behaviour significantly change as people age. From this theoretical perspective, the authors examine how age moderates the relationships between re-employment efficacy, employment commitment and financial hardship, on the one hand, and job search intensity and wage flexibility, on the other hand. Path analysis on a sample of 240 Belgian job seekers who were at the start of an outplacement programme showed that re-employment efficacy relates positively to job search intensity and wage flexibility for older job seekers, while negative relationships for younger job seekers were found. For employment commitment and financial hardship, the authors do not find any interaction effects with age. Employment commitment relates positively to search intensity, whereas financial hardship relates negatively to wage flexibility, irrespective of age. The implications for theory, practice and future research are discussed. (RH)

ISSN: 0144686X

From : journals.cambridge.org/aso

Lifecourses, pensions and poverty among elderly women in Belgium: interactions between family history, work history and pension regulations; by Hans Peeters, De Tavernier Wouter.: Cambridge University Press, July 2015, pp 1171-1199.

Ageing and Society, vol 35, no 6, July 2015, pp 1171-1199.

The precarious financial situation of many older women in developed countries is well established. Nevertheless, in-depth insight into the persistent vulnerability of this group remains largely absent. In this article, the authors demonstrate how a specific focus on the interaction between work history, family history and pension regulations can provide greater insight into the mechanisms that produce poverty among older women in Belgium. To that end, the authors make use of register data on some 9,000 women aged 65-71. Data on the poverty risk of these women is linked to career and family data, spanning over 45 years. The authors find that pension policy can indeed account for the higher poverty risk of some groups of older women (e.g. divorcees) as compared to others (e.g. widows). Similarly, pension policy can, to a large extent, directly or indirectly explain how previous lifecourse events, such as marital dissolution or childbirth, affect old-age poverty risk. However, the study also reveals some unexpected findings. Most notably, pension regulations fail to account for the beneficial situation of married women. Indeed, the analyses that were conducted suggest that capital (income) may prove more decisive than pension rights in explaining the low poverty risk of married women when compared to other marital groups. The authors draw on their findings to suggest where pension policy should go from here. (RH)

ISSN: 0144686X

From : journals.cambridge.org/aso

Lived realities of local community: evidence from a qualitative case study in Leeds; by Katy Wright.: Cambridge University Press, October 2015, pp 555-568.

Social Policy and Society, vol 14, no 4, October 2015, pp 555-568.

This article draws on case study research of a low-income neighbourhood in Leeds to explore experiences of, and attitudes towards, place-based community. The ways in which community is embedded in everyday activities and social interactions, and the social impact of socioeconomic change on local neighbourhoods, is demonstrated, by tracing social relations in the neighbourhood over time, from the early twentieth century to the present day. The author argues that the relentless and nostalgic focus on local communities as an idealised form of social solidarity has meant that the reasons why place-based community has declined over time have been overlooked. Her article challenges the assumption that social fragmentation on neighbourhood levels necessarily indicates antisocial trends or a lack of a sense of duty towards others, and draws attention to the constraints people face in developing relationships with others. Questions are raised about the viability of top-down attempts to shape social relations in particular ways. (RH)

ISSN: 14747464

From : journals.cambridge.org/sps

Low-income retirees, financial capability and pension choices; by James Lloyd, Chris Lord, Strategic Society Centre; NatCen Social Research; Joseph Rowntree Foundation - JRF. York: Joseph Rowntree Foundation - JRF, July 2015, 4 pp (Inspiring social change; Ref: 3128).

This research looks at low-income retirees with Defined Contribution pension savings. It examines how choices are being made on pensions and the implications for retirement income since changes were implemented in April 2015, allowing retirees to opt to draw down or cash in their pension pots. It also examines the impact of individuals' financial capability. (NH)

From : <https://www.jrf.org.uk/report/low-income-retirees-financial-capability-and-pension-choices>

Monitoring poverty and social exclusion 2015; by Tom MacInnes, Adam Tinson, Ceri Hughes (et al), Joseph Rowntree Foundation - JRF. York: Joseph Rowntree Foundation - JRF, November 2015, 6 pp.

Findings, 3173, November 2015, 6 pp.

In 2013/14, over 13 million people in the UK lived in low income households. This figure was largely unchanged from the previous year and, as a proportion of the population, a decade earlier, but the mix has changed. Just over half of those in poverty live in working families. As many live in privately rented as in social rented housing and more people aged 16-24 are in poverty than those over 65. (NH)

ISSN: 09583084

From : <https://www.jrf.org.uk/mpse-2015>

Predictors of adherence in a community-based Tai Chi program; by Suhayb Shah, Chris Arden, Hala Tamim.: Cambridge University Press, June 2015, pp 237-246.

Canadian Journal on Aging, vol 34, no 2, June 2015, pp 237-246.

This study examined factors affecting adherence in a 16-week tai chi programme among multi-ethnic middle-aged and older adults living in a low socioeconomic environment in Toronto. Analysis was based on data collected from three tai chi programme cohorts that took place from August 2009 to March 2012. The main outcome variable, adherence, was measured by the total number of sessions attended by each of the participants. Total sample size was 210 participants (mean age, 68.1 ± 8.6). Based on the regression model, greater adherence was significantly associated with older age, greater perceived stress, higher education, and higher mental and physical scores of Short Form-36 components. Conversely, lower adherence was significantly associated with higher baseline weekly physical activity. The findings suggest that less-educated individuals with poor mental and physical health should be targeted, to optimize adherence for future community-based tai chi programmes. (RH)

ISSN: 07149808

From : journals.cambridge.org/cjg

The role of the housing allowance for the elderly in Norway: views of recipients; by Siri Ytrehus.: Taylor and Francis, January-June 2015, pp 164-179.

Journal of Housing for the Elderly, vol 29, nos 1-2, January-June 2015, pp 164-179.

This article concerns the housing allowance, an economic benefit provided to low-income households and older people in Norway. Ensuring a high quality of housing for older people has been a priority in the development of the Norwegian welfare state. This article is based on results from a qualitative study of older recipients of a housing allowance. The study shows that while these recipients viewed the financial support the allowance offered as crucial, they still felt impoverished. The study raises some questions about whether the housing allowance scheme encourages high-quality housing. (RH)

ISSN: 02763893

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

Trends in life expectancy and healthy life expectancy; by Carol Jagger, Foresight Future of Ageing project, Government Office for Science. London: Government Office for Science, 2015, 34 pp (Future of an ageing population: evidence review).

This evidence review has been commissioned as part of the UK government's Foresight Future of an Ageing Population project, and was conducted by Carol Jagger of the Institute for Ageing and Institute of Health and Society, Newcastle University. It reviews past trends in life expectancy (LE), healthy life expectancy (HLE) and disability-free life expectancy (DFLE) at various ages and in different regions of the UK, as well as regional inequalities in these trends. It identifies the major factors which will influence future trends, which are broadly chronic conditions, health behaviours, and socio-economic and environmental factors. (RH)

From : <https://www.gov.uk/government/publications/future-of-ageing-life-expectancy-and-healthy-life-expectancy-trends>

Urban social and built environments and trajectories of decline in social engagement in vulnerable elders: findings from Detroit's Medicaid home and community-based waiver population; by MinHee Kim, Philippa Clarke.: Sage, May 2015, pp 413-435.

Research on Aging, vol 37, no 4, May 2015, pp 413-435.

There is little knowledge on the relationships between neighbourhood environments and trajectories of social engagement among physically and economically vulnerable older adults. We examined the association between neighbourhood social and built environments (physical disorder, the presence of crime watch signs, and street conditions) and 36-month trajectories of social engagement among 965 older adults living in Detroit, Michigan. Social withdrawal was defined as a decline in social engagement without distress while social isolation was defined as a decline in social engagement with distress. The authors used data from Michigan's Minimum Data Set for Home Care (2000-2008), merged with contextual data collected through a virtual audit instrument using Google Earth's "Street View" feature. Results from multilevel multinomial analyses indicated that the presence of neighbourhood watch signs was associated with increased chance of social withdrawal and social isolation among frail older adults over time, highlighting the potential anxiety-provoking effect of precautionary measures against crime. (RH)

ISSN: 01640275

From : roa.sagepub.com

Work, pensions and poverty: a better deal under the next government; by Claire Turner.: Emerald, 2015, pp 22-26.

Quality in Ageing and Older Adults, vol 16, no 1, 2015, pp 22-26.

The author explores how the next government (from May 2015) could develop a better deal in relation to work, pensions and poverty. Her paper argues that given the changing face of poverty, the next government should focus on creating better jobs, if it is really to encourage people to work longer and save more for retirement. Furthermore, it could do more to support those who are currently under-saving for retirement. The paper draws on evidence from a number of recent qualitative and quantitative Joseph Rowntree Foundation (JRF) research reports and government statistical data. The paper suggests policy recommendations for the next government, focused on creating better jobs and helping those on lower incomes to increase their pension pots. This includes: ensuring that the minimum wage is set with regard to the changing price of essentials and changing average earnings; raising awareness of the Living Wage and playing a leadership role; industrial strategies for low-paid sectors; mid-life career reviews and increased rights for those aged 60 and over; the redistribution of tax relief on pension contributions; and the auto-escalation of workplace pensions. This paper thus looks at the issue of an ageing society, work and pensions through a poverty lens.(RH)

ISSN: 14717794

From : www.emeraldgroupublishing.com/qaoa.htm

Young against old?: What's really causing wealth inequality?; by James Lloyd, Trades Union Congress - TUC. London: TUC, 2015, 48 pp (Touchstone pamphlet, 14).

The idea that the fall in living standards experienced by some younger people in recent years are the result of 'older people hoarding all the wealth' is challenged. This discussion paper provides new insight and analysis for the UK debate on intergenerational fairness and how best to improve the long-term outlook for today's younger cohorts. It draws on research commissioned by the Trades Union Congress (TUC) from the Personal Finance Research Centre at the University of Bristol, using data from the UK Wealth and Assets Survey (WAS). It uses this evidence to critically examine some of the assumptions in public debate on intergenerational fairness and the wealthy old. For example, it asks whether pensioners are now the wealthiest group in society; whether age is the best predictor of household wealth; and can public spending on older people easily be cut or rationed? To sum up, would transfers from age-related public spending be an effective way of improving intergenerational fairness? The analysis concludes that although retirees are more likely to be wealthier than the youngest cohorts, it is adults in their 40s and 50s, high earners and homeowners who are most likely to be the wealthiest. Public policy should focus on measures that improve job security and earnings, and which distribute assets more fairly. (RH)

Price: £10.00 (Download FOC)

From : Trades Union Congress, Congress House, Great Russell Street, London WC1B 3LS. Download: <https://www.tuc.org.uk/sites/default/files/YoungagainstOld.pdf>

2014

Europe's ageing demography: ILC-UK 2014 EU factpack; by Helen Creighton, International Longevity Centre UK - ILC-UK. London: International Longevity Centre UK - ILC-UK, November 2014, 19 pp (Population patterns seminar series).

The ILC-UK Population patterns seminar series considers the evidence base of our changing demography and explores how policy-makers need to respond to demographic change. This factpack sets out the evidence on health and life expectancy, for example, that males born in Western Europe today can expect to live for 67.5 years in good health. It focuses on pensioner poverty, with evidence that more than 70% of Bulgarian pensioners live in material deprivation. It examines the employment and retirement prospects of older workers, and finds that on average only 1 in 2 55-64 year olds are employed across the region. Also investigated are the costs of ageing; and whereas Denmark spends the equivalent of more than 5,000 euros per person in old age, Latvia, Romania and Croatia spend only a tenth of this. (RH)

From : ILC-UK, 11 Tufton Street, London SW1P 3QB. Download also available at:

http://www.ilcuk.org.uk/images/uploads/publication-pdfs/Europes_Ageing_Demography.pdf

Facilitating advance care planning with ethnically diverse groups of frail, low-income elders in the USA: perspectives of care managers on challenges and recommendations; by Jung Kwak, Eunjeong Ko, Betty J Kramer.: Wiley Blackwell, March 2014, pp 169-177.

Health and Social Care in the Community, vol 22, no 2, March 2014, pp 169-177.

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

Mapping demographic change: a factpack of statistics from the International Longevity Centre UK; by Ben Franklin, David Sinclair, International Longevity Centre UK - ILC-UK. London: International Longevity Centre UK - ILC-UK, July 2014, 26 pp (Population patterns seminar series).

The ILC-UK Population patterns seminar series considers the evidence base of our changing demography and explores how policy-makers need to respond to demographic change. This second annual factpack explores the impact of demographic change at a micro level (i.e. to individuals) and at a macro level (i.e. to government finances and the wider economy). It sets out the latest evidence on how long we will live and how healthy we will be. It also highlights who will need care and what it will cost; employment prospects; and whether housing will meet our needs. It also consider the economic impact on ageing and how much government might need to spend on an ageing population. There is a particular focus on pensioner poverty and the current and likely sources of pensioner income. The publication provides links to other ILC-UK research published in the previous 12 months. (RH)

From : ILC-UK, 11 Tufton Street, London SW1P 3QB. Download also available:

http://www.ilcuk.org.uk/index.php/publications/publication_details/mapping_demographic_change_a_factpack_of_statistics_from_the_international_1

Poverty intervention in relation to the older population in a time of economic crisis: the Portuguese case; by Ines Gomes, Maria Irene Carvalho, Isabella Paoletti.: Hipatia Press, July 2014, pp 88-114.

Research on Ageing and Social Policy, vol 2, no 1, July 2014, pp 88-114.

In times of economic crisis, the distribution and impact of its effects vary greatly among social groups, due to the different level of exposure and the availability of resources. The authors conduct a policy analysis of the most important public policies and programmes for combating poverty in older people in Portugal in the last two decades. They critically analyse the actual social and political situation from three main perspectives: poverty approach, gender mainstream, and public-private partnerships. The latest restriction measures have been jeopardizing the fight against poverty in the last 15 years. Although poverty among older people is currently considered a political priority, no comprehensive policies are being developed. The policy interventions are directed towards extreme situations of poverty and dependency. Preventive measures are excluded from policies planning; and the state is increasingly delegating social care responsibilities to the social sector. (OFFPRINT.) (RH)

ISSN: 2014671X

From : <http://doi.org/10.4471/rasp.2014.04>

2013

Accounting for cross-country differences in wealth inequality; by Frank A Cowell, Eleni Karagiannaki, Abigail McKnight, ESRC Centre for Analysis of Social Exclusion - CASE, Suntory-Toyota International Centres for Economics and Related Disciplines - STICERD, London School of Economics and Political Science. London: STICERD, 2013, 35 pp (CASEpaper 168).

This paper adopts a counterfactual decomposition analysis to analyse cross-country differences in the size of household wealth and levels of household wealth inequality. The findings of the paper suggest that the biggest share of cross-country differences is not due to differences in the distribution of household demographic and economic characteristics, rather they reflect strong unobserved country effects. (RH)

Price: FOC

From : Centre for Analysis of Social Exclusion, London School of Economics, Houghton Street, London WC2A 2AE. <http://sticerd.lse.ac.uk/case>

Alcohol misuse among older adult public housing residents; by Sherry M Cummings, R Lyle Cooper, Catherine Johnson.: Taylor & Francis, July 2013, pp 407-422.

Journal of Gerontological Social Work, vol 56, no 5, July 2013, pp 407-422.

Low-income older adults living in public housing are at heightened risk for substance misuse. This study identified the prevalence of alcohol misuse among older public housing residents and explored predictors of problem drinking. Including weekly drinking levels and binge drinking, 23% of the sample engaged in problem drinking behaviours. Logistic regression analysis revealed that race, gender, employment status, years smoking and illegal drug use were significant predictors of problem drinking. No residents were receiving substance abuse treatment. As the number of older adults increase, training social workers to assess and treat alcohol misuse in older adults is critical. (JL)

ISSN: 01634372

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

Austerity and inequality: exploring the impact of cuts in the UK by gender and age; by Jay Ginn.: Hipatia Press, July 2013, pp 25-53.

Research on Ageing and Social Policy, vol 1, no 1, July 2013, pp 25-53.

Across Europe and North America, governments responded to the financial crisis of 2007-2008 by taking on the debt of banks and insurance companies. Subsequent austerity programmes to reduce that debt have cut the living standards of all but the richest. Yet governments insist cuts are necessary and that they are fairly distributed. In this review of austerity policies in the UK, these claims are challenged, first by assessing the impact on key population groups of cuts in welfare spending; and second by showing how specific reforms, including those planned before the financial crash, are likely to affect current and future pensioners, especially women and those living on low incomes. Finally, the author reviews the effectiveness of austerity policies in tackling the deficit, outlining alternative policies that have been put forward by critics. She concludes that the cuts are not only unfair, exacerbating the social division between the very wealthy and the rest of society, but are also counterproductive to the aim of restoring economic activity and reducing the deficit. (OFFPRINT) (RH)

ISSN: 20146728

From :

<http://dx.doi.org/10.4471/rasp.2013.02><http://hipatiapress.com/hpjournals/index.php/rasp/article/viewFile/491/648>

Changing social security in the US: rising insecurity?; by Madonna Harrington Meyer.: Cambridge University Press, January 2013, pp 135-146.

Social Policy and Society, vol 12, no 1, January 2013, pp 135-146.

Although poverty rates among older people in the US are at an all-time low, many face rising fiscal insecurity. The US welfare state is being remodelled in market-friendly ways that maximise individual choice, risk and responsibility, rather than family friendly ways that maximise shared risk and responsibility and reduce insecurity. This article analyses how each of the main sources of income for older people are being frozen or shrunk in ways that are likely to increase inequality and insecurity in the years ahead, particularly among those who are female, black and/or Hispanic, and unmarried. The article assesses various policy changes for their capacity to either increase or decrease financial insecurity and inequality, particularly for those with a lifetime of lower earnings, more labour force disruptions and greater responsibility for providing unpaid care work for the young, disabled or frail. (JL)

ISSN: 14747464

From : journals.cambridge.org/sps

Inclusion or exclusion?: exploring barriers to employment for low-income older adults; by Keith A Anderson, Virginia E Richardson, Noelle L Fields, Robert A Harootyan.: Taylor & Francis, May-June 2013, pp 318-334.

Journal of Gerontological Social Work, vol 56, no 4, May-June 2013, pp 318-334.

Faced with economic uncertainty and declining retirement security, older adults have increasingly tried to remain in or return to the workforce in recent years. Unfortunately a host of factors, such as ageism and changing skill requirements, present challenges for older adults seeking employment. Low income older adults in particular may lack necessary education and skills and have limited access to job opportunities and training. In this review, the authors looked at factors that inhibit and support employment for low-income older adults. They also explored the role of social work in facilitating their inclusion in the workforce. (JL)

ISSN: 01634372

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

Inequality of pension arrangements among different segments of the labor force in China; by Ling Wu.: Taylor & Francis, April-June 2013, pp 181-196.

Journal of Aging and Social Policy, vol 25, no 2, April-June 2013, pp 181-196.

Social security for older people in China today has been established institutionally. However, there are substantial problems such as coverage, affordability, fund management and corruption. This paper aims to provide a general picture of China's social security system for older people, and to argue that the inequality of pension arrangements among different segments of the labour force is one of the most conspicuous problems challenging the Chinese government. Four unequal aspects of the pension system concerning the financing resources and pension levels are examined in this paper: unequal institutional arrangements among different sectors; unbalanced governmental expenditure in pension provision; an increasing gap in pension levels between urban and rural areas; and uncovered groups such as the unemployed and self-employed. Historical, economic and political reasons all contribute to this unequal institution under transition from socialism to a market-oriented economy. At present, it is urgent for the central government to take measures to integrate the various pension arrangements into the unified Old Age Insurance, and to reduce the gaps among different regions. (RH)

ISSN: 08959420

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

Labour's record on cash transfers, poverty, inequality and the lifecycle, 1997-2010; by John Hills, ESRC Centre for Analysis of Social Exclusion - CASE, Suntory-Toyota International Centres for Economics and Related Disciplines - STICERD, London School of Economics and Political Science. London: STICERD, July 2013, 51 pp (CASEpaper 175).

Cash transfers (benefits and tax credits) are crucial to how inequalities develop over time. This paper looks at how the 1997-2010 Labour government's aims, policies and achievements on poverty and inequality related to its reforms of and spending on cash transfers. Labour's aims for poverty and inequality were selective. "Equality of opportunity" was the stated aim, rather than equality of outcome - with a focus on lifting the lowest incomes, not reducing the highest ones. Labour gave priority to reducing child and pensioner poverty, through a series of reforms. It increased the share of national income provided through cash transfers to children and pensioners, and increased the value of their cash transfers relative to the poverty line. By contrast, spending on other transfers to working-age adults fell as a share of national income from the level Labour inherited, while benefits for those without children fell further below the poverty line. By the end of the period, both child poverty and pensioner poverty had fallen considerably, in circumstances where child poverty would have risen without the reforms (and pensioner poverty would have fallen less far). However, poverty for working-age adults without children increased. The risks of poverty converged between children, their parents, pensioners, and other working age adults. Being a child or a pensioner no longer carried a much greater risk of living in poverty than for other age groups. Overall, income inequality was broadly flat, comparing the start and end of Labour's term in office. But differences in net incomes between age groups were much lower. The smoothing of incomes that occurred across the life cycle could be seen as a striking, if unremarkable, achievement. (RH)

From : Centre for Analysis of Social Exclusion, London School of Economics, Houghton Street, London WC2A 2AE. <http://sticerd.lse.ac.uk/case>

Micro-enterprise: community assets helping to deliver health and well-being and tackle health inequalities; by Sian Lockwood.: Emerald, 2013, pp 26-33.

Journal of Integrated Care, vol 21, no 1, 2013, pp 26-33.

This article explores the potential of micro-enterprises to assist local health and well-being boards in delivering their strategies, especially in relation to tackling health inequalities, prevention and community support. It draws on experience gained by Community Catalysts from its work supporting social care and health micro-enterprise across the UK. There has been little formal research into social care and health micro-enterprise and so the paper relies heavily on data gathered by Community Catalysts in the course of its work and uses local case studies to illustrate points. The article explains the importance of social care and health micro-enterprise to the work of health and well-being boards, emphasising its potential to help tackle health inequalities and contribute to effective health and well-being strategies. The author concludes that there are no examples as yet of imaginative health and well-being boards engaging effectively with micro-providers, but boards can draw on learning from local authorities actively stimulating and supporting local micro-enterprise. (JL)

ISSN: 14769018

From : www.emeraldinsight.com/jica.htm

Older women doing home care: exploitation or ideal job?; by Sandra S Butler.: Taylor & Francis, May-June 2013, pp 299-317.

Journal of Gerontological Social Work, vol 56, no 4, May-June 2013, pp 299-317.

The increased need for both personal assistance workers and meaningful employment opportunities for older workers results in growing numbers of older home care aides in the United States. This study examined lifetime financial security and perceived advantages of older age in this field through interviews with 31 older home care aides. Study participants experienced high levels of financial insecurity and perceived older workers as particularly well suited to the home care job. The consequences of this low-wage, low-status work are explored along with implications for social workers to advocate for improved conditions for these workers providing essential care to frail older people. (JL)

ISSN: 01634372

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

Problem debt among older people: Age UK's summary of research; by International Longevity Centre UK - ILC-UK; Age UK. London: Age UK, June 2013, 20 pp.

Age UK's definition of problem debt is based on unsecured debt, and where people are paying more than a specified proportion of their income. Age UK commissioned the International Longevity Centre - UK (ILC-UK) to analyse recent data on debt and older people. However, mortgage debt is not included because of missing data and/or variables. Three large national surveys were analysed: the British Social Attitudes Survey, Family Resources Survey (FRS), and the English Longitudinal Survey of Ageing (ELSA). Most of the analysis in this summary is from the five 'waves' of data published since 2002, which tracks individuals aged 50+. The research found that among those aged 50+, debt is more likely to affect younger age groups: increasing age is still associated with more negative views towards debt. The full research report by Dylan Kneale and Trinley Walker, 'Tales of the tallyman: debt and problem debt among older people' is available on ILC-UK's website (www.ilcuuk.org.uk). (RH)

From : Age UK, Tavistock House, 1-6 Tavistock Square, London WC1H 9NA. Download:

<http://www.ageuk.org.uk/documents/en-gb/professionals/research/problem%20debt%20in%20older%20people-report%20june%202013.pdf?dtrk=true>

Public policy and inequalities of choice and autonomy; by Tania Burchardt, Martin Evans, Holly Holder, ESRC Centre for Analysis of Social Exclusion - CASE, Suntory-Toyota International Centres for Economics and Related Disciplines - STICERD, London School of Economics and Political Science. London: STICERD, May 2013, 24 pp (CASEpaper 174).

"Choice" has been promoted in social policy across many developed welfare states, often on the grounds that it is instrumentally valuable: choice by service users is said to incentivise providers to enhance quality and efficiency. But egalitarian and capability-based theories of social justice support the idea that choice - understood in the deeper sense of autonomy - has an intrinsic value. This paper explores the conceptualisation of choice as autonomy using three components - self-reflection, active decision-making, and quality and range of options - and investigates empirical inequalities in autonomy, using newly-collected data for the UK. The empirical findings indicate that disabled people are most likely to experience constrained autonomy in all respects, while being from a low socio-economic group and/or lacking educational qualifications is a risk factor across several components. The fact that limited autonomy maps onto existing socio-economic disadvantage is not surprising, but points to the importance of taking into account underlying inequalities when developing choice-based policies. The authors conclude that improving the "choice" agenda for policy requires opportunities for people to reflect on their objectives throughout the life course and that the removal of barriers to active decision-making would require effective support and advocacy, especially for disabled people. The authors suggest that major structural inequalities associated with restricted autonomy should be addressed - poverty, ill health and geographical inequality - because they place significant restrictions on the autonomy of those who are already disadvantaged, as well as their immediate effects on living standards and quality of life. (RH)

From : Centre for Analysis of Social Exclusion, London School of Economics, Houghton Street, London WC2A 2AE. <http://sticerd.lse.ac.uk/case>

The relationship between EU indicators of persistent and current poverty; by Stephen P Jenkins, Philippe Van Kerm, ESRC Centre for Analysis of Social Exclusion - CASE, Suntory-Toyota International Centres for Economics and Related Disciplines - STICERD, London School of Economics and Political Science. London: STICERD, 2013, 35 pp (CASEpaper 169).

The current poverty rate and the persistent poverty rate are both included in the European Union's portfolio of primary indicators of social inclusion. Drawing on empirical analysis of the European Statistics on Income and Living Conditions (EU-SILC) and the European Community Household Panel survey (ECHP) data, the authors

show that there is a near-linear relationship between these two indicators across EU countries. Using a prototypical model of poverty dynamics, they explain how the near-linear relationship arises and show how the model can be used to predict persistent poverty rates from current poverty information. In the light of the results, they discuss whether the EU's persistent poverty measure and the design of EU-SILC longitudinal data collection require modification. (RH)

Price: FOC

From : Centre for Analysis of Social Exclusion, London School of Economics, Houghton Street, London WC2A 2AE. <http://sticerd.lse.ac.uk/case>

Small-area measures of income poverty; by Alex Fenton, ESRC Centre for Analysis of Social Exclusion - CASE, Suntory-Toyota International Centres for Economics and Related Disciplines - STICERD, London School of Economics and Political Science. London: STICERD, May 2013, 37 pp (CASEpaper 173).

This is the first of a series of papers arising from a programme of research called Social Policy in a Cold Climate, which examines the effects of the major economic and political changes in the UK since 2007, particularly their impact on the distribution of wealth, poverty, inequality and spatial difference. The analysis includes policies and spending decisions from the last period of the Labour government (2007-2010), including the beginning of the financial crisis, as well as those made by the Coalition government since May 2010. This paper considers techniques for measuring the prevalence of income poverty within small areas, or "neighbourhoods", in Britain. Some general criteria for small-area poverty measures are set out; and two broad methods, poverty proxies and modelled income estimates, are identified. Empirical analyses of the validity and coverage of poverty proxies derived from UK administrative data, such as social security benefit claims, are presented. The concluding section assesses a new poverty proxy that will be used within a wider programme of analysis of the spatial-distributional effects of tax and welfare changes and of economic trends in Britain from 2000 to 2014. Particular attention is paid to the relationship between the proxy values and other local poverty measures in different kinds of places. These suggest that the proxy is an adequate, albeit imperfect, tool for investigating changes in intra-urban distributions of poverty. (RH)

From : Centre for Analysis of Social Exclusion, London School of Economics, Houghton Street, London WC2A 2AE. <http://sticerd.lse.ac.uk/case>

The trajectory towards marginality: how do older Australians find themselves dependent on the private rental market?; by Alan Morris.: Cambridge University Press, January 2013, pp 47-59.

Social Policy and Society, vol 12, no 1, January 2013, pp 47-59.

For older Australians, being dependent on the private rental market is usually associated with serious financial hardship and insecurity. The article examines the housing careers of older Australians who are dependent on the private rental market. After sketching the policy context, it uses in-depth interviews and a biographical approach to explore their trajectory into the private rental market. Divorce, separation and widowhood were key factors, especially for women, as were poor employment histories and ill-health. The crucial factor was an inability to access social housing. The neglect of this housing tenure has meant that supply is very limited and is reserved primarily for people with complex needs. (JL)

ISSN: 14747464

From : journals.cambridge.org/sps

Understanding material deprivation among older people; by Anna Bartlett, Claire Frew, Jo Gilroy, Department for Work and Pensions - DWP.: Department for Work and Pensions, 2013, 45 pp (Department for Work and Pensions In-House research, no 14).

It is known that only a small proportion of pensioners living on a low income are materially deprived. This report is published alongside in-depth qualitative research which was commissioned by the Department for Work and Pensions (DWP) to understand more about the relationship between material deprivation and low income. It is based on data from a measure of pensioner material deprivation included in the Family Resources Survey (FRS) since May 2008 and reported in the Households Below Average Income (HBAI) report since 2009/10. It looks at the methodology behind the construction of the material deprivation indicator for older people, and the key characteristics of those in low income and material deprivation: 15 indicators relating to access to goods and services were identified by the FRS. The report analyses material deprivation in terms of type of deprivation (basic, financial, social and housing) and the reasons why people state that they lack an item or items. It considers the different depths of material deprivation that older people experience. (RH)

Price: download

From : <http://research.dwp.gov.uk/asd/asd5/ihs-index.asp>

Understanding the relationship between pensioner poverty and material deprivation: a report of research carried out by NatCen on behalf of the Department for Work and Pensions; by Mehul Kotecha, Sue Arthur, Steven

Coutinho, National Centre for Social Research - NatCen; Department for Work and Pensions - DWP. London: Department for Work and Pensions - DWP, 2013, 77 pp (Department for Work and Pensions Research report, no 827).

The National Centre for Social Research (NatCen) was commissioned by the Department for Work and Pensions (DWP) to provide qualitative insight into poverty and material deprivation among older people. The research is based on data from a measure of pensioner material deprivation included in the Family Resources Survey (FRS) since May 2008 and reported in the Households Below Average Income (HBAI) report since 2009/10. This data provides knowledge about older peoples' living standards, but other areas merit further exploration. This report examines the impact of key factors on material deprivation: housing; financial and material support; health and material circumstance; and financial management. Attitudes around living on a low income had a significant effect on how materially deprived individuals felt and also how they prioritised and organised their spending. The research took as its starting point a sample of respondents defined by the FRS as being in one of four groups: low income and materially deprived; low income and not materially deprived; just above low income and materially deprived; and just above low income and not materially deprived. Case studies illustrate some of the individual circumstances. (RH)

From : http://research.dwp.gov.uk/asd/asd5/report_abstracts/rr_abstracts/rra_827.asp

Understanding the relationship between pensioner poverty and material deprivation: a synthesis of findings; by Mehul Kotecha, Sue Arthur, Steven Coutinho (et al), National Centre for Social Research - NatCen; Department for Work and Pensions - DWP. London: Department for Work and Pensions - DWP, 2013, 5 pp (Department for Work and Pensions Research summary).

Although income is an important factor in determining living standards, other non-financial factors can affect living standards. The Department for Work and Pensions (DWP) publishes statistics on pensioners living on low incomes in the annual Households Below Average Income (HBAI) series. Since 2009/10, HBAI has also included a measure of pensioner material deprivation (from the Family Resources Survey - FRS), which helps broaden the analysis of poverty beyond income. In 2010/11, 1.2 million people aged 65+ (12% of pensioners) were living on a low income; a further 7% (600,000 individuals) were materially deprived; and 2% (200,000 individuals) were both materially deprived and living on a low income. The vast majority (around 80%) do not experience low income or material deprivation. This summary presents synthesised findings from two recent research reports which explored material deprivation among older people. It identifies four types of deprivation (social, financial, housing and basic); the relationship between low income and material deprivation; and the depth of material deprivation. While the research concludes that low income does not automatically result in a pensioner living in material deprivation, it confirms the need for a broader poverty measure which looks beyond low income. (RH)

From : http://research.dwp.gov.uk/asd/asd5/report_abstracts/rr_abstracts/rra_827.asp

'We can also make change': Voices of the Marginalised briefing; by Sightsavers; ADD International; HelpAge International; Alzheimer's Disease International. [Haywards Heath]: Sightsavers, 2013, 11 pp.

This is a briefing based on 'We can also make change', a report from Voices of the Marginalised, a research project in Bangladesh. It draws on the real-life stories of people with disabilities and older people in Bangladesh, as told to researchers. It finds that up to half of all people aged 60 and over live with disabilities. It recommends that policymakers must ratify and implement the United Nations Convention on the Rights of Persons with Disabilities, and support the elaboration of a UN convention on the rights of older people. Age and disability should be treated as cross-cutting themes in all post-2015 development goals. The full and equal participation of older people and people with disabilities in social and cultural life should be promoted. (RH)

From : http://www.sightsavers.org/in_depth/advocacy/20045_Voices_of_the_Marginalised_Briefing.pdf

2012

Choice, consumerism and devolution: growing old in the welfare state(s) of Scotland, Wales and England; by Suzanne Moffatt, Paul Higgs, Kirstein Rummery, Ian Rees Jones.

Ageing and Society, vol 32 part 5, July 2012, pp 725-746.

For the first time since the inception of the UK welfare state, there are now formal differences in entitlement for older people as a result of devolution. This article reviews how choice and devolution have impacted on people over state retirement age. It considers the extent to which a more consumerist approach to public services might redress or increase later-life inequalities. The article suggests that for many people over state retirement age, the prospect of becoming a consumer in these varied contexts is difficult and unwelcome, and that although it is too early in the devolutionary process for any significant impact of these divergent policies to materialise, continued policy divergence will lead to different experiences and outcomes for older people. The authors conclude that these divergent social policies offer significant research on later-life inequalities. (JL)

ISSN: 0144686X

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

The cost of cold: why we need to protect the health of older people in winter; by Age UK. London: Age UK, November 2012, 21 pp (Spread the warmth).

Launched in 2010, Spread the Warmth (<http://www.ageuk.org.uk/get-involved/spread-the-warmth/>) is Age UK's annual winter campaign, which aims to help stop unnecessary suffering and preventable winter deaths. In 'The cost of cold', Age UK calls for excess winter deaths to be made a health priority in England. If services are funded that enable older people to keep warm during the winter months, this will protect their health and save costs in the NHS and adult social care. Age UK also calls for the energy efficiency of older people's homes to be improved: to have an impact on excess winter death rates, the Government needs to provide substantial new investment in home energy efficiency, possibly funded from carbon revenues coming on-stream in 2013. This publication includes case studies illustrative of the problems discussed. (RH)

From : Age UK, Tavis House, 1-6 Tavistock Square, London WC1H 9NA. www.ageuk.org.uk

Evaluating the possible impact of pension reforms on future living standards in Europe; by Aaron George Grech, ESRC Centre for Analysis of Social Exclusion - CASE, Suntory-Toyota International Centres for Economics and Related Disciplines - STICERD, London School of Economics and Political Science. London: STICERD, 2012, 19 pp (CASEpaper 161).

Successive reforms enacted since the 1990s have dramatically changed Europe's pensions landscape. This paper tries to assess the impact of recent reforms on the ability of systems to alleviate poverty and maintain living standards, using estimates of pension wealth for a number of hypothetical cases. By focusing on all prospective pension transfers rather than just those at the point of retirement, this approach can provide additional insights on the efficacy of pension systems in the light of increasing longevity. CASE's estimates indicate that while reforms have decreased generosity significantly, in most countries poverty alleviation remains strong. However, moves to link benefits to contributions have made some systems less progressive, raising adequacy concerns for certain groups. In particular, unless the labour market outcomes of women and of lower-income individuals change substantially over the coming decades, state pension transfers will prove inadequate, particularly in Eastern European countries. Similarly, while the generosity of minimum pensions appears to have either been safeguarded by pension reforms, or improved in some cases, these transfers generally remain inadequate to maintain individuals above the 60% relative poverty threshold throughout retirement. CASE's simulations suggest that the gradual negative impact of price indexation on the relative adequacy of state pensions is becoming even more substantial in view of the lengthening of the time spent in receipt of retirement benefits. (RH)

Price: FOC

From : Centre for Analysis of Social Exclusion, London School of Economics, Houghton Street, London WC2A 2AE. <http://sticerd.lse.ac.uk/case>

Inequalities in old age: the impact of the recession on older people in Ireland, North and South; by Demi Patsios, Paddy Hillyard, Sarah Machniewski (et al.): Emerald, March 2012, pp 27-37.

Quality in Ageing and Older Adults, vol 13, no 1, March 2012, pp 27-37.

This paper reports on the first systematic, comparative study into the impact and consequences of the recession on older people - in particular the existing and unfolding inequalities in older age - in Northern Ireland (NI) and the Republic of Ireland (RoI). The research involved both quantitative and qualitative methods, including focus groups and analysis of existing data on social exclusion and poverty in NI and RoI. The analysis on publicly available data in the north and south of Ireland revealed few comparable measures on poverty and social exclusion. However, the study was able to establish key pre- and intra-recession differences between older people in both jurisdictions. The qualitative analysis (focus groups with older people, online surveys with financial advisors) detailed the similarities and differences in the impact of the recession in north and south. The paper makes recommendations for improving data collection on measures which would allow policy makers and researchers to examine the current and future impact of the recession on older people's living standards and well-being. (RH)

ISSN: 14717794

From : www.emeraldinsight.com/journals

Is social exclusion still important for older people?: executive summary; by Dylan Kneale, International Longevity Centre UK - ILC-UK. London: International Longevity Centre UK - ILC-UK, September 2012, 12 pp.

The concept of social exclusion among older people is examined using data from the English Longitudinal Study of Ageing (ELSA), and supported by Age UK as part of a three-year programme of work. The author

adopts a cross-sectional and longitudinal approach in analysing data collected in 2002 and 2008, and builds on Matt Barnes and colleagues' 2006 work, 'The social exclusion of older people: evidence from the first wave of the English Longitudinal Study of Ageing (ELSA)'. The author measures exclusion from the following domains: social relationships; cultural activities; civic activities and access to information; local amenities; decent housing and public transport; common consumer goods; and financial products. He suggests how policy-makers should respond to the problems, for example in relation to widowhood or carers. (RH)

From : ILC-UK, 11 Tufton Street, London SW1P 3QB. Download from:
<http://www.ilcuk.org.uk/index.php/publications/year/2012>

The life course and cumulative disadvantage: poverty among grandmother-headed families; by Anastasia H Prokos, Jennifer Reid Keene.

Research on Aging, vol 34, no 5, September 2012, pp 592-621.

Using multivariate techniques the authors investigated how age, family type and race/ethnicity affect grandmother-headed families' economic resources. The authors examined four grandmother-headed family types that were classified on the basis of two features: parents' presence and the caregiving relationship of the grandmother and grandchild. Using data from the 2000 census (Public Use Microdata Sample 5%) to predict grandmother-headed families' official and relative poverty statuses, analyses indicated that age, race/ethnicity and family configuration were major explanations for poverty differences. The effects of race/ethnicity on official and relative poverty were greater among older cohorts than among the youngest cohorts. Additionally the effects of age on poverty varied by family type: the lower chances of poverty that were associated with older cohorts were not as great among two-generation families as they were among three-generation grandmother-headed families. The authors interpret these findings using a life-course perspective and cumulative disadvantage theory and discuss the implications for grandmother-headed families' economic security. (JL)

ISSN: 01640275

From : <http://roa.sagepub.com/>

A minimum income for healthy living (MIHL) - older New Zealanders; by Jessica O'Sullivan, Toni Ashton.

Ageing and Society, vol 32 part 5, July 2012, pp 747-768.

This study, drawing on a methodology developed by the London School of Hygiene and Tropical Medicine, the 'Minimum Income for Healthy Living (MIHL): Older New Zealanders' investigated the retirement income needs of older New Zealanders living independently in the community. The MIHL was estimated for people living alone, couples, renters and debt-free home owners. Findings revealed that the MIHL estimates were noticeably higher than the universal state pension paid to older New Zealanders. People living alone and those renting their homes were shown to be worse off than couples and debt-free home owners, respectively. The results highlight that many older New Zealanders are living on an income which may not be enough to support a healthy life. This has important implications for the demand for health, residential and social services and questions the level of income needed for healthy retirement. (JL)

ISSN: 0144686X

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

Older adults who seek care in the home; by Frances Wilby, Cathy Chambless.: Emerald, 2012, pp 89-97.

Quality in Ageing and Older Adults, vol 13, no 2, 2012, pp 89-97.

Area Agencies on Aging (AAA) are a nationwide network that administers home- and community-based services (HCBS) monies in the United States. Following assessment to determine their needs, the AAA may refer individuals to programmes which offer support to keep medically needy lower income older adults independent in their homes and communities. This study aimed to identify the characteristics of the older adults who applied for services through an AAA, and to determine the conditions that resulted in referral to the state-funded Home and Community Based Alternatives Program (Alternatives) or the Medicaid Aging Waiver (Waiver) programme. The study used quantitative data from an existing database of older adults who sought home and community based services from Mountainlands AAA, Utah. The sample was 260 adults aged 65+ who had completed a phone screening for HCBS in 2006-2007. The results suggest that, although most of the sample lived at or near poverty levels, higher monthly income and living alone predicted referral to the Alternatives programme, whereas greater need for assistance with bathing and performing heavy housework were the primary determinants of referral to the Medicaid Waiver programme. (RH)

ISSN: 14717794

From : www.emeraldinsight.com/qaoa.htm

Older people also suffer because of the crisis; by AGE Platform Europe. Brussels: AGE Platform Europe, 2012, 26 pp.

Very many older Europeans have been experiencing the impact of the financial and economic crisis since 2008, and are as at risk of poverty and social exclusion as other populations or age groups. This publication builds on the work carried out by AGE Platform Europe and its member organisations in the field of social inclusion and social protection since the beginning of the financial crisis in 2008. It also presents recommendations from the seminar AGE organised with the Committee of the Regions on the impact of the crisis on older people on 19 June 2012 in Brussels. It considers the need to understand the impact of the crisis on older people on issues such as budget cuts; difficulties in accessing and affording health services and long-term care; shortage of adequate housing; energy poverty; and suicide. It looks at ways of preventing poverty and promoting social inclusion such as: guaranteeing adequate income in old age; combating age discrimination in employment and the growing poverty risk among older workers; preventing social isolation; tackling elder abuse; and enhancing rights of older Roma. (RH)

From : <http://www.age-platform.eu/images/stories/EN/olderpeoplealsosufferbcofthecrisis-en.pdf>

On 'consistent' poverty; by Rod Hick, ESRC Centre for Analysis of Social Exclusion - CASE, Suntory-Toyota International Centres for Economics and Related Disciplines - STICERD, London School of Economics and Political Science. London: STICERD, 2012, 18 pp (CASEpaper 167).

The measurement of poverty as 'consistent' poverty offers a solution to one of the primary problems of poverty measurement within social policy of the last three decades. Often treated as if they were synonymous, 'indirect' measures of poverty, such as low income measures, and 'direct' measures, such as indices of material deprivation, identify surprisingly different people as being poor. In response to this mismatch, a team of Irish researchers put forward a measure which identified respondents as being in poverty when they experienced both a low standard of living, as measured by deprivation indicators, and a lack of resources, as measured by a low income line. Importantly, they argued that the two measures required an equal weight. The author presents a reconsideration of the consistent poverty measure from both conceptual and empirical perspectives. In particular, he examines the claim that low income and material deprivation measures should be given an 'equal weight'. He argues that, from a conceptual perspective, the nature of the indicators at hand means that a deprivation-led measurement approach might be understood to align with the definition of poverty outlined by Nolan and Whelan; and, from an empirical perspective, that it is the material deprivation measure - and not the low income measure - which is particularly effective in identifying individuals at risk of multiple forms of deprivation. (RH)

Price: FOC

From : Centre for Analysis of Social Exclusion, London School of Economics, Houghton Street, London WC2A 2AE. <http://sticerd.lse.ac.uk/case>

Poverty in perspective: "the first step towards tackling poverty is to understand it better ..."; by Claudia Wood, Jo Salter, Gareth Morrell (et al), Demos. London: Demos, 2012, 316 pp.

Poverty is not just about income. As a lived experience, it is a complex, multi-dimensional phenomenon spanning one's social and economic life; but until now, we have never really understood how these different dimensions interact at household level. The way poverty is currently measured - by looking purely at income - is both too abstract to relate to people's everyday lives, and not informative enough to help practitioners tackle entrenched poverty. This report challenges established preconceptions about life in poverty. It develops a pioneering new model to fill a gap in policy makers' understanding, revealing how poverty manifests itself in different ways in different households. It dispels the assumption that those in poverty are a homogeneous group that can all be helped in the same way. The analysis applies 20 indicators - spanning health, housing, education, material deprivation and social networks - to the low income population, to develop different 'types' of poverty. Each type must be addressed by a different combination of services and interventions. Demos has also developed a website (<http://www.demos.co.uk/poverty/index>) to present its findings. (RH)

Price: £10.00

From : Demos, Magdalen House, 136 Tooley Street, London SE1 2TU. E-mail: hello@demos.co.uk Website: www.demos.co.uk

Red, Hot, Healthy Mommas: (un)conventional understandings of women, health, and aging; by Kimberly Field-Springer.

Research on Aging, vol 34, no 6, November 2012, pp 692-713.

There are 3.7 million people aged 65+ living in poverty in the United States; more than half are women. This article draws attention to what such women say about the aging process. It also critically examines issues regarding cultural/medical norms, mind/body duality, and healthcare advocacy. The author interviewed six women, ranging in age from 50 to 65, who frequently attended a healthcare programme called Red, Hot,

Healthy Mommas. The author uses narrative analysis to explore two types of counter-stories they told, to understand how these women re-identify and resist the ageing process. The author suggests a third counter-story called "negotiated", because findings point to elements that both combat oppression while simultaneously reinforcing dominant meta-narratives. Despite the edifying potentials of these strategies for women, the findings also indicate that patient autonomy and responsibility for one's own healthcare is not necessarily the best solution in combating discrimination that ageing women now face in American society. (RH)

ISSN: 01640275

From : www.roa.sagepub.com

UK indices of multiple deprivation: a way to make comparisons across constituent countries easier; by Rupert A Payne, Gary A Abel.

Health Statistics Quarterly, no 53, Spring 2012, pp 22-37.

Deprivation is multi-dimensional, and as such can be challenging to quantify. In the UK, each of the four constituent countries measures deprivation using their own distinct index of multiple deprivation (IMD), designed to facilitate targeting of policies within that particular country. Although these four IMD scores are not directly comparable, there are circumstances where comparison across the whole of the UK may be desirable. A method of generating a UK-wide IMD score was developed using publicly available data. An adjusted IMD score was generated using the employment and income domains of the individual country IMD scores, along with the coefficients and residual values from a linear regression of employment and income on the overall IMD score. The Scottish IMD was used as a baseline to generate an adjusted UK-wide score. The proportion of variance explained for the Scotland model was 0.972. The rank correlation coefficient (Kendall's tau) for the association between adjusted and original IMD was 0.97, 0.98 and 0.94 for England, Northern Ireland and Wales respectively. The absolute change in Welsh and English IMD scores was relatively small, although there was a considerable change in ranking in Wales. In contrast, the adjusted IMD score was considerably higher than the actual IMD score for Northern Ireland, but with minimal impact on the ranking within Northern Ireland. Overall, 4.9% (1606), 2.6% (23) and 10.3% (196) of areas were reclassified into different quintiles using the adjusted score for England, Northern Ireland and Wales respectively. An adjusted IMD score generated using this method might be used for UK-wide policy decisions, and allow tools developed for one country to be applied elsewhere. (RH)

ISSN: 20401574

From : www.ons.gov.uk

2011

The continuing importance of children in relieving elder poverty: evidence from Korea; by Erin Hye-Won Kim, Philip J Cook.

Ageing and Society, vol 31, part 6, August 2011, pp 953-976.

The population of South Korea is ageing rapidly and government provision for older people is meagre, yet little is known about the actual financial status of older Koreans or the amount of economic support they receive from children. This paper addresses these issues using data from the 2006 Korean Longitudinal Study of Ageing. The study found that almost 70% of Koreans aged 65 or more receive financial transfers from children and that the transfers account for about a quarter of an average older person's income. While over 60% of older people would be poor without private transfers, children's transfers substantially mitigate elder poverty. Furthermore, children's transfers tend to be proportionally larger to low-income parents, so elder income inequality is reduced by the transfers. Over 40% of older people live with a child and co-residence helps reduce elder poverty. In conclusion, Korean children still play a crucial role in providing financial old-age security. So it is highly important for the Korean government to design old-age policies that preserve the incentives for private assistance. (JL)

ISSN: 0144686X

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

Correlates of limitations in activities of daily living and mobility among community-dwelling older Singaporeans; by Angelique Chan, Chetna Malhotra, Truls Ostbye.

Ageing and Society, vol 31, part 4, May 2011, pp 663-682.

The study looked at the correlates of limitations in the activities of daily living (ADL) and mobility among older Singaporeans (aged 55 or more years), based on the 'disability frameworks' or pathways proposed by the International Classification of Functioning, Disability and Health. Data from the 2005 National Survey of Senior Citizens in Singapore was used. The weighted prevalence of ADL and mobility limitations was calculated, overall and in subgroups. Logistic regression models were used to assess predictors of ADL and mobility limitations and variation in involvement with family, society, work, use of services and perceived financial

adequacy, by ADL and mobility status was studied. The overall weighted prevalence of ADL and mobility limitation was found to be 5 and 8 per cent, respectively. Significant risk factors for ADL and mobility limitation were being older (aged 75 or more years), widowed, having diabetes, joint/bone problems, stroke, cancer and low income. Individuals with ADL and mobility limitations had lower involvement with family, society and work, and perceived financial adequacy, while use of services was higher. The findings underline the importance of improving elderly services for sustained integration of disabled elderly within the community. (JL)

ISSN: 0144686X

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

Depressive symptoms in old age: relations among sociodemographic and self-reported health variables; by Gloria Teixeira Nicolosi, Deusivania Vieira da Silva Falcao, Samila Satler Tavares Batistoni ... (et al). *International Psychogeriatrics*, vol 23, no 6, August 2011, pp 941-949.

Population-based cross-sectional research was undertaken using data from a study conducted in a poor area of Sao Paulo, Brazil. The participants were 303 older adults aged 65 years and over who attended a single-session data collection effort carried out at community centres. The protocol comprised sociodemographic and self-reported health variables, and the Geriatric Depression Scale. Most subjects reported five or fewer symptoms of depression (79.21%), reported one or two self-reported chronic diseases (56.86%), declared themselves to have one or two self-reported health problems (46.15%), and had good perceived health assessment (40.27%). The presence of depressive symptoms was associated with a higher number of self-reported health problems, poor perceived health assessment, and lower schooling levels, in the total sample and in analyses including men only. For women, depressive symptoms were associated with the number of self-reported health problems and family income. The presence of health problems, such as falls and memory problems, lower perceived health, and low education (and low family income for women) were associated with a higher presence of depressive symptoms. (JL)

ISSN: 10416102

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

Disability-free life expectancy: comparison of sources and small area estimates in England, 2006-08; by Michael P Smith, Olugbenga Olatunde, Chris White.

Health Services Quarterly, no 50, Summer 2011, pp 40-78.

The study aimed to explore the potential of the Annual Population Survey (APS) to provide robust estimates of disability-free life expectancy (DFLE) for men and women by clusters of area deprivation, English regions and local authority districts (LAs) in the period 2006-08. DFLE estimates for the UK were compared using the prevalence of limiting long-standing illness (LLSI) calculated using data from the APS and from the General Lifestyle Survey (GLF) covering Great Britain and equivalent data from the Continuous Household Survey (CHS) covering Northern Ireland, aggregated over the period 2006-08. The further use of APS data for England enabled the calculation of estimates of DFLE at age 16 and at age 65 for men and women by area deprivation quintiles (each quintile comprising a fifth of areas ranked according to their relative deprivation), English regions and LAs in order to measure inequality in DFLE between these population groupings. The prevalence of LLSI and estimates of DFLE at national level were broadly comparable using APS and GLF/CHS data. Substantial inequality in DFLE was present between clusters of areas defined by relative deprivation and between English regions and LAs. The scale of inequality increased markedly with each finer geographical scale analysed. The authors conclude that the APS is a viable data source to provide LLSI data for use in DFLE estimation across a range of areas and clusters of area deprivation. (JL)

ISSN: 14651645

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

Helping the poorest help themselves?: encouraging employment past 65 in England and the USA; by David Lain.

Journal of Social Policy, vol 40, part 3, July 2011, pp 493-512.

In the context of population ageing and low retirement incomes, the UK government has increasingly sought to encourage people to work longer. However UK means-tested benefits, that are lost as a result of working, mean that delaying retirement is a less attractive option for the poorest. In addition UK employees may have limited opportunity to delay retirement as line management decide whether individuals are allowed to work beyond the age of 65. In contrast in the US, benefits are meagre and difficult to access and age discrimination legislation protects individuals from forced retirement. This paper examines whether adopting a US policy approach in the UK would increase employment of the poorest over 65s and enhance their financial position. The study uses data from the English Longitudinal Study of Ageing and the US Health and Retirement Study to examine how wealth influences employment and how this is mediated by differences in health and education. It suggests that

extending UK age discrimination legislation and restricting benefits would increase overall employment past 65, although not necessarily to US levels. The poorest over 65s are more likely to work in the USA than in England, but employment amongst the poorest is still low, especially compared with wealthier groups. A US policy approach would most likely damage the financial position of the poorest in the UK, with increased employment not sufficiently compensating for lost benefits. (JL)

ISSN: 00472794

From : <http://journals.cambridge.org/action/displayJournal?jid=JSP>

Leisure activities and retirement: do structures of inequality change in old age?; by Simone Scherger, James Nazroo, Paul Higgs.

Ageing and Society, vol 31, part 1, January 2011, pp 146-172.

This study highlighted the relationship between old age, retirement and social inequalities, as represented by participation in leisure activities. It considered whether old age, and particularly the transition into retirement, have an effect on participation in three selected activities, namely: having a hobby, being a member of a club, and an index of participation in cultural events. It also looked at whether the social inequalities underlying these activities change with older age and retirement. The empirical investigation used data from the first two waves of the English Longitudinal Study of Ageing (ELSA). Findings suggested that different socio-economic backgrounds of different age groups explained a considerable part of the observed age differences in these activities. Respondents tended to continue their activities regardless of changes in work and age, with two exceptions: (a) retirement was positively related to having a hobby; and (b) those who stopped working because of an illness experienced a significant decline in all three of the examined categories of activity. (JL)

ISSN: 0144686X

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

No way out but working?: income dynamics of young retirees in Korea; by Yunjeong Yang.

Ageing and Society, vol 31, part 2, February 2011, pp 265-287.

Older people in Korea have a higher risk of poverty than younger adults. This paper attempts to examine changes in the level and sources of income around the time of retirement, with retirement being defined as separation from one's main lifetime employment. It uses longitudinal data from the Korean Labour and Income Panel Study's Waves 1-9, and follows 580 younger retirees aged at least 50 years who retired during 1998-2005. The paper demonstrates that the prevalence of low income across the retirement transition was related to gender, previous career status and current working status. In particular, there was a noticeable increase in the prevalence of low income among permanent retirees compared to those who continued working in retirement. Examines different factors associated with the individuals' economic wellbeing after retirement, and finds that working status in retirement is indeed the factor that most influences the probability of low-income entry among male retirees, while for women, the nature of co-residence with working household member(s) and household assets most mattered. Concludes that being in paid work after retirement remains an important substitute for the immature old-age safety-net in Korea. (JL)

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

Social inequalities in alcohol-related adult mortality by national statistics socio-economic classification, England and Wales, 2001-03; by Veronique Siegler, Alaa Al-Hamad, Brian Johnson ... (et al).

Health Services Quarterly, no 50, Summer 2011, pp 4-39.

This article is the first analysis of the social inequalities in adult alcohol-related mortality in England and Wales at the start of the 21st century. It presents the socio-economic patterns of alcohol-related mortality by gender, age and region, for England and Wales as a whole, Wales and the regions of England. Death registrations provided the number of deaths for working age adults, using the National Statistics definition of alcohol-related mortality. Population estimates for England and Wales in 2001-03 were used to estimate alcohol-related mortality rates by sex, age group and region. Inequalities were measured using ratios of alcohol-related mortality rates between the least and most advantaged classes. Results showed that there were substantial socio-economic variations in adult alcohol-related mortality, with the inequalities being greater for women than for men. The mortality rate of men in the routine class was 3.5 times those of men in higher and managerial occupations, while for women the corresponding figure was 5.7 times. Greater socio-economic inequalities in mortality were observed for men aged 25-49 than for men aged 50-64; however the highest mortality rate of men occurred for routine workers aged 50-54. Women in the routine class experienced mortality rates markedly higher than other classes. The highest mortality rate of women also occurred for routine workers, but at a younger age than for men (45-49). Within England, the North-West showed the largest inequalities, with particularly high rates in the routine class for both sexes. In general, there was no association between levels of mortality and socio-economic gradients in mortality across the English regions and Wales. Rates of alcohol-related mortality in England and Wales increased significantly for people between the early 1990s and early 21st

century, and were substantially greater for those in more disadvantaged socio-economic classes. There is also evidence that these socio-economic differences were greater at younger ages, especially for men at ages 25-49. (JL)

ISSN: 14651645

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

Subjective well-being poverty of the elderly population in China; by Xiaolin Wang, Xiaoyuan Shang, Liping Xu.

Social Policy & Administration, vol 45, no 6, December 2011, pp 714-731.

Poverty is represented not only by objective well-being indicators which include income and consumption levels, but also by subjective indicators which reflect what a person feels. It is estimated that the incidence of subjective well-being poverty (SWP) among the Chinese rural elderly population in 2006 was 9.7 per cent, about 4.2 times as much as that of the country's total rural population in the same year, which was 2.3 per cent. Over 16 per cent of the rural elderly population and 11.5 per cent of the urban elderly population rated their life satisfaction as poor or very poor. In terms of SWP, senior citizens, especially those who live in rural areas or who are women or very aged, have become a special group among the poor in China. This article suggests that China's social policies for the new stage take into account the issue of absolute poverty and also that of SWP. A multi-dimensional strategy system targeting the issue of poverty needs to be established, and a policy system to address poverty reduction as well as old age security and care should be implemented. (JL)

ISSN: 01445596

From : <http://www.wiley.com/bw/journal.asp?ref=0144-5596&site=1>

2010

Ageing, poverty and neoliberalism in urban South India; by Penny Vera-Sanso, V Suresh, M Hussain (et al), New Dynamics of Ageing Programme - NDA. Sheffield: New Dynamics of Ageing - NDA, 2010, 8 pp (NDA Findings 5).

Using the example of the metropolitan city of Chennai, India, the research examined the forces and processes shaping poverty and ageing in developing country cities under neoliberal policy regimes. Comparing the circumstances of Chennai's poor in 2007-2010 with that in 1990-1991, the research suggests that the neoliberal policy context exacerbated the difficulties of the poor and of the older poor in particular. It found that older people play a significant productive role in the urban economy but that this role is unrecognised by the state. Instead of facilitating work in old age, or providing pensions for anything more than a minority of the older urban poor, state policies reflect the assumptions that older people are dependent and that families provide for their aged. This approach does not take into account the impact of poverty, neoliberal policies and economic planning in constraining younger people's capacity to provide or care for the aged; instead of 'retiring' from work, the urban poor are forced to work deep into old age, both to support themselves and to help out younger relatives. They may do this through paid work or through unpaid work in a family business or by taking on the domestic and childcare work of younger women, thereby releasing younger women into the labour market. The state's failure to recognise older people's contribution to the economy, their needs as workers and their rights as citizens constrains their productivity and well-being and has a knock-on effect on their families and the economy. (KJ/RH)

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

Assessing the sustainability of pension reforms in Europe; by Aaron George Grech, ESRC Centre for Analysis of Social Exclusion - CASE, Suntory-Toyota International Centres for Economics and Related Disciplines - STICERD, London School of Economics and Political Science. London: STICERD, 2010, 36 pp (CASEpaper 140).

Spurred by the ageing transition, many governments have made wide-ranging reforms, dramatically changing Europe's pensions landscape. Nevertheless, there remain concerns about future costs, while unease about adequacy is growing. This study develops a comprehensive framework to assess pension system sustainability. It captures the effects of reforms on the ability of systems to alleviate poverty and maintain living standards, while setting out how reforms change future costs and relative entitlements for different generations. This framework differs from others, which just look at generosity at the point of retirement, as it uses pension wealth - the value of all transfers during retirement. This captures the impact of both longevity and changes in the value of pensions during retirement. Moreover, rather than focusing only on average earners with full careers, this framework examines individuals at different wage levels, taking account of actual labour market participation. The countries analysed cover 70% of the European Union's population and include examples of all system types. This study's estimates indicate that while reforms have decreased generosity significantly in most but not

all countries, the poverty alleviation function remains strong, particularly where minimum pensions have improved. However, moves to link benefits to contributions have made some systems less progressive, raising adequacy concerns for women and those on low incomes. The consumption smoothing function of state pensions has declined noticeably, suggesting the need for longer working lives or additional private saving for individuals to maintain pre-reform living standards. Despite the reforms, the size of entitlements of future generations should remain similar to that of current generations, in most cases, as the effect of lower annual benefits should be offset by longer retirement. Though reforms have helped to alleviate the financial challenge faced by pension systems, the pressures remain strong in many countries and further reforms are likely. (RH)

Price: FOC

From : Centre for Analysis of Social Exclusion, London School of Economics, Houghton Street, London WC2A 2AE. <http://sticerd.lse.ac.uk/case>

Behind the balance sheet: the financial health of low earning households; by Resolution Foundation. London: The Resolution Foundation (electronic format only), March 2010, 42 pp.

This report offers a fresh set of findings about how low earning households think about their money and make financial decisions. It uses current statistics, to find for example, that for the 14 million low earning adults living in 7.2 million households in the UK, housing, fuel, power and food account for around 26% of disposable income compared to 15% for high earners. However, the figures do not elaborate on the factors that drove financial decisions in these households. The report presents a statistical overview of the current financial health of low earners. It uses qualitative research to offer individual case studies, which highlight themes that cut across all the households met, one such being that small changes in circumstances can be very destabilising. It goes "behind the balance sheet" to capture the sometimes invisible factors that affect how people think about their money and manage their finances, such as hidden assets and liabilities, and participation in the informal economy. Three foundations are suggested for improving financial health and bringing about financial inclusion: resilience, behavioural economics, and financial capability. A short briefing, 'Financial health' outlines the work of the Financial Health Forum. (RH)

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

Contrasting approaches to old-age income protection in Korea and Taiwan; by Young Jun Choi, Jin Wook Kim. *Ageing and Society*, vol 30, part 7, October 2010, pp 1135-1152.

Old-age income security has become one of the most important social policy issues in two East Asian emerging welfare states, South Korea and Taiwan, as they transform at a remarkable pace into societies with a representation of older people approaching that of western countries. During the last two decades, the two countries have developed different forms of social protection for older people. South Korea has expanded social insurance pensions with means-tested benefits, whereas Taiwan has introduced flat-rate old-age allowance programmes that exclude the rich rather than target the poor. Much has been written about these programmes, but their actual performance in reducing old-age poverty has not been thoroughly examined. This paper analyses the anti-poverty effect of these programmes, firstly by describing recent developments in the two countries, and secondly by examining headcount poverty rates and the size and incidence of the 'poverty gap' using nationally-representative micro-household datasets. It is argued that while the programmes have increasingly reduced old-age income security, the different policy choices have resulted in distinctive welfare outcomes in the two countries. In the final section of the article, the researchers discuss the long-term implications of the recent policy reforms. (KJ)

ISSN: 0144686X

From : <http://www.journals.cambridge.org/asodoi:10.1017/S0144686X10000413>

Coronary heart disease from a life-course approach: findings from the Health and Retirement Study, 1998-2004; by Mary Elizabeth Bowen.

Journal of Aging and Health, vol 22, no 2, March 2010, pp 219-241.

Guided by a life-course approach to chronic disease, this study examined the ways in which childhood deprivation (low parental education and father's manual occupation) may be associated with coronary heart disease (CHD). Multilevel modelling techniques and a nationally representative sample of 18,465 Americans aged 50+ from the Health and Retirement Study (HRS) were used to examine childhood and CHD relationships over the course of 6 years (1998-2004). Having a father who had less than 8 years of education was associated with 11% higher odds of CHD, accounting for demographic characteristics, adult socioeconomic status (SES; education, income and wealth), CHD risks (diabetes, hypertension, cigarette smoking and obesity), and other factors (childhood health, exercise, stroke and marital status). Policies and programmes aimed at improving the conditions of poor children and their families may effectively reduce the prevalence of CHD in later life. (KJ/RH)

ISSN: 08982643

From : <http://jah.sagepub.com/doi:10.1177/0898264309355981>

Fair society, healthy lives: the Marmot Review; by Michael Marmot (Chair), Strategic Review of Health Inequalities in England post-2010; Commission on Social Determinants of Health (CSDH), World Health Organization - WHO; Department of Health - DH. London: The Marmot Review, 2010, 242 pp (+ executive summary, 32 pp).

In November 2008, Professor Sir Michael Marmot was asked by the Secretary of State for Health to chair an independent review to propose the most effective evidence-based strategies for reducing health inequalities in England from 2010. The strategy will include policies and interventions that address the social determinants of health inequalities. The Review reports on its main tasks: identifying for the health inequalities challenge facing England, the evidence most relevant to underpinning future policy and action; showing how this evidence could be translated into practice; and advising on possible objectives and measures, building on the experience of the current public service agreement (PSA) target on infant mortality and life expectancy. The review concludes that health inequalities result from social inequalities. Action on health inequalities requires action across all the social determinants of health. Therefore, reducing health inequalities will require action by central and local government, the NHS, the third and private sectors and community groups. National policies will not work without effective local delivery systems focused on health equity in all policies. The Review will be relevant for other countries developing strategies aimed at tackling health inequalities, following the recommendations of the Commission on Social Determinants of Health (CSDH), which was established to support countries and global health partners to address the social factors leading to ill health and inequities. Also available is an executive summary (32 pp). (KJ/RH)

From : UCL Institute of Health Equity, Department for Epidemiology & Public Health, University College London, 1-19 Torrington Place, London WC1E 7HB. Download from : <http://www.ucl.ac.uk/marmotreview>

The forgotten age: understanding poverty and social exclusion in later life: an interim report by the Older Age Working Group; by Sara McKee (chair), Older Age Working Group, Centre for Social Justice - CSJ. London: Centre for Social Justice, November 2010, 252 pp (Breakthrough Britain).

'The forgotten age' has been compiled by the Older Age Working Group comprising 15 experts and chaired by Sara McKee of Anchor Trust. This interim report attempts to serve two purposes: to celebrate, respect and champion older age; and to set out the reality of life for some of the UK's poorest older people. It outlines how loneliness, isolation and social breakdown have fuelled poverty in later life for millions of Britain's pensioners for too long. The core themes examined are money, community and lifestyle, housing, and care. The Centre for Social Justice (CSJ) is also highly critical of the way that the ageing debate - particularly in terms of social care - has descended into "undignified political squabbling" by political parties. It cites the anger and disappointment voiced by many older people consulted for the review. The report identifies unevenness of planning in all the themes that were considered. It notes that its next report will examine provision of public and core services within communities - such as welfare benefits, health and social care, transport and social housing - as well as use of the voluntary sector in meeting the needs of individuals and communities. (RH)

From : http://www.centreforsocialjustice.org.uk/client/downloads/20101122_Publications_Older%20Age.pdf
Centre for Social Justice, 1 Westminster Palace Gardens, Artillery Row, SW1P 1RL.

The forgotten age: understanding poverty and social exclusion in later life: executive summary [of an interim report]; by Sara McKee (chair), Older Age Working Group, Centre for Social Justice - CSJ. London: Centre for Social Justice, November 2010, 28 pp (Breakthrough Britain).

This executive summary of the Centre for Social Justice's (CSJ) Older Age review interim report attempts to serve two purposes: to celebrate, respect and champion older age; and to set out the reality of life for some of the UK's poorest older people. It outlines how loneliness, isolation and social breakdown have fuelled poverty in later life for millions of Britain's pensioners for too long. The core themes examined are money, community and lifestyle, housing, and care. The full report is downloadable from the CSJ's website. (RH)

From : Centre for Social Justice, 1 Westminster Palace Gardens, Artillery Row, SW1P 1RL. Full report: http://www.centreforsocialjustice.org.uk/client/downloads/20101122_Publications_Older%20Age.pdf

Gender differences in subjective well-being in Central and Eastern Europe; by Sylke Viola Schnepf.

Journal of European Social Policy, vol 20, no 1, February 2010, pp 74-86.

The literature suggests that the transition process from centrally planned to market economies in Central and Eastern Europe increased the gender gap in poverty. Evidence for women's higher poverty risk is scarce, given that most analyses use household-level data and assume equal sharing of income within households, an assumption that has been questioned in recent literature. This article uses individual data on subjective well-being to examine the extent of gender differences in welfare in transition countries. OECD countries serve for

benchmarking results. Findings show that the gender gap in subjective well-being is more predominant in post-communist than in OECD countries. Relatively little of the gender gap can be attributed to gender differences in socio-economic position in transition countries, but certain attributes, such as higher education and unemployment, impact differently on reported well-being for women and men. (KJ/RH)

ISSN: 09589287

From : <http://esp.sagepub.com/doi:10.1177/0958928709352542>

How can we make the housing market more stable for vulnerable households?; by Matthew Taylor, Philippa Stroud, JRF Housing Market Taskforce, Joseph Rowntree Foundation - JRF. York: Joseph Rowntree Foundation - JRF, March 2010, 8 pp (Ref: 2481).

Viewpoint, 2481, March 2010, 8 pp (Ref: 2481).

In July 2009, the Joseph Rowntree Foundation (JRF) established a taskforce to address the root causes of instability in the UK housing market. Whether in a boom or a downturn, the shortage of affordable housing hits the most vulnerable households first and worst. These Viewpoints - commissioned as part of a programme and aimed at stimulating debate - provide two different perspectives on the kinds of reforms needed to provide long-term, secure housing for those least able to afford it. First, Matthew Taylor, Chief Executive of the Royal Society for the Improvement of Arts, Manufactures and Commerce (RSA) argues that the UK's "obsession with home ownership" creates social and economic divisions and instability. We need a more balanced approach to different types of tenure. To meet demand, this will mean revamping the private rented sector. Philippa Stroud, co-founder and Executive Director of the Centre for Social Justice, believes that life tenancies and the benefits system have combined to create social immobility, worklessness and dependency. Social housing should be the first step on the ladder to home ownership, and housing and other benefits should be reformed to encourage claimants back to work. (RH)

ISSN: 09583084

From : <http://www.jrf.org.uk/publications/housing-market-stability>

Inequalities in cancer survival: Spearhead Primary Care Trusts are appropriate geographic units of analyses; by Libby Ellis, Michael P Coleman.

Health Statistics Quarterly, no 48, Winter 2010, pp 81-90.

'Spearhead' local authorities (LAs) and primary care trusts (PCTs) are those identified by the Department of Health as facing the greatest health challenges in England on the grounds of inequality and deprivation. The study looked at cancer survival rates in Spearhead LAs and PCTs, lower than the rest of England. (JL)

ISSN: 14651645

From : <http://www.statistics.gov.uk/hsq/>

Inequalities in disability-free life expectancy by area deprivation: England, 2001-04 and 2005-08; by Michael P Smith, Olugbenga Olatunde, Chris White.

Health Statistics Quarterly, no 48, Winter 2010, pp 36-57.

Life expectancy (LE) and disability-free life expectancy (DFLE) for males and females at birth and at age 65 were estimated using a combination of survey, mortality and population data. Survey data provided an estimate of the prevalence of limiting long-standing illness or disability (LLSI) used in the DFLE metric. The prevalence of LLSI among males and females rose incrementally with increasing levels of deprivation in both periods. Males and females at birth and at age 65 in the less deprived areas could expect longer, healthier lives than their counterparts in more deprived areas in both 2001-04 and 2005-08. This analysis suggests that the inequality in DFLE between deprived and affluent area clusters has increased during the first decade of the 21st century. (JL)

ISSN: 14651645

From : <http://www.statistics.gov.uk/hsq/>

Inequalities in disability-free life expectancy by social class and area type: England, 2001-03; by Chris White, Grace Edgar.

Health Statistics Quarterly, no 45, Spring 2010, pp 57-80.

Disability-free life expectancy (DFLE) is an important indicator which combines longevity with functional health status. This article examines inequalities in DFLE by socio-economic position in England, and between Local Authorities (LAs) in the deprived 'Spearhead group' and other LAs. Census and vital event data available from the ONS Longitudinal Study were used to calculate estimates of DFLE based on limiting long-term illness or disability status for each Registrar General's Social Class (RGSC) in 2001-03, in England as a whole and within the 'Spearhead group' and non-Spearhead LAs. A predominantly linear relationship was present, with DFLE increasing with rising social class, and the differences observed between people assigned to the professional and unskilled manual social classes were statistically significant and substantial, showing clear

social inequality in amount of life, functional health status during those years lived, absolute number, and relative proportion of life spent free from limiting long-term illness or disability. (KJ/RH)

ISSN: 14651645

From : <http://www.statistics.gov.uk>

Inequalities in healthy life expectancy by social class and area type: England, 2001-03; by Chris White, Grace Edgar.

Health Statistics Quarterly, no 45, Spring 2010, pp 28-56.

Healthy life expectancy (HLE) is an important indicator which combines longevity with health status. This article examines inequalities in HLE by socio-economic position in England, and between Local Authorities (LAs) in the deprived 'Spearhead group' and other LAs. (Department of Health's Spearhead Group of local authorities consists of those identified as the most deprived in England). Census and vital event data available from the ONS Longitudinal Study were used to calculate estimates of HLE based on general health status for each Registrar General's Social Class (RGSC) in 2001-03, in England as a whole and within the 'Spearhead group' and non-Spearhead LAs. The differences observed in HLE at birth and at age 65 between people assigned to the professional and unskilled manual social classes were statistically significant and substantial, demonstrating a clear social inequality in the amount of life, the quality of those years lived, the absolute number of healthy life years, and thus the relative proportion of life spent in 'Good' or 'Fairly Good' health. (KJ/RH)

ISSN: 14651645

From : <http://www.statistics.gov.uk/doi:10.1057/hsq.2010.3>

Inequalities in premature mortality in Britain: observational study from 1921 to 2007; by Bethan Thomas, Danny Dorling, George Davey Smith.

British Medical Journal, vol 341, no 7767, 7 August 2010, p 291.

Inequality in premature mortality has persisted and continues to increase, both for mortality under the age of 75 since 1990 and for mortality under the age of 65 since the 1920s, with geographical inequalities in mortality highest in the most recent time period. The authors did not examine migration; they only considered all-cause mortality; nor did they look at changes in the underlying causes of death. The results of this study apply only to the population of Great Britain. (KJ/RH)

ISSN: 09598138

From : www.bmj.com/BMJ2010;341:c3639

Informal finance and the urban poor: an investigation of rotating savings and credit associations in Turkey; by Sebnem Eroglu.

Journal of Social Policy, vol 39, part 3, July 2010, pp 461-481.

Rotating savings and credit associations (roscas) refer to a form of informal financial organisation composed of members who make periodic payments to a fund which is given to each contributor in turn. The term "rotation" indicates each member's turn to receive the fund or lump sum. This study focuses on the organisation among poor households of rotating savings and credit associations locally known in Turkey as *gün*. Based on a longitudinal study of 17 households, the research demonstrates the distinctive ability of various *güns* to operate smoothly under inflationary conditions. Unlike the predominant portrayal of *güns* as a leisure activity for middle-class women, they are shown to act as a self-welfare instrument, whereby poor households acquire the discipline of saving towards both their consumption and investment needs. Contrary to the conventional view, these households are found to use *güns* in circumstances where formal credit and savings options are available. (RH)

ISSN: 00472794

From : <http://journals.cambridge.org/action/displayJournal?jid=JSPdoi:10.1017/S0047279409990699>

Intelligence, education, and mortality; by G David Batty, Mika Kivimäki, Ian J Deary.

British Medical Journal, vol 340, no 7754, 8 May 2010, pp 989-990.

Intelligence, education and mortality are linked in several ways; so strategies to reduce inequalities should be broadly based. In 2005, the World Health Organization (WHO) took a lead on this with the launch of the Global Commission on Social Determinants of Health. This editorial notes two studies in the British Medical Journal. Strand and colleagues in Norway assessed the relation between educational equalities and mortality 1960 to 2000. Lager and colleagues investigated the association between early IQ, educational attainment and mortality in Sweden; they found a higher risk of mortality in older women with higher rather than lower intelligence in childhood. A 2004 study by Linda Gottfredson has proposed that intelligence might be "the epidemiologists' elusive 'fundamental cause' of social class inequalities in health". (RH)

ISSN: 09598138

From : [www.bmj.com/doi: 10.1136/bmj.c563](http://www.bmj.com/doi/10.1136/bmj.c563)

Life expectancy and disability-free life expectancy estimates for Middle Super Output Areas; England, 1999-2003; by Olugbenga Olatunde, Chris White, Michael P Smith.

Health Statistics Quarterly, no 47, Autumn 2010, pp 33-65.

There is increasing demand for health indicators at small area level to support healthcare monitoring and planning. This study compares disability-free life expectancy (DFLE) in England at the Middle Layer Super Output Area (MSOAs) level. An advantage of these areas for statistical purposes is their relative homogeneity in population size, with an average population of 7,200 people and range of 5,001 to 15,326 people. This article reports DFLE for MSOAs in England based on 2001 Census data. DFLE was generally higher among MSOAs in southern Government Office Regions (GOR) than in the north. About 30 years separated the MSOAs with the highest and lowest DFLEs. There was a clear deprivation gradient in DFLE, with significantly lower estimates in more disadvantaged areas. These findings, for the first time, illustrate the degree of health inequality present at MSOA level and provide useful information to healthcare planners to assist in more efficient targeting of resource allocation. (KJ)

ISSN: 14651645

From : <http://www.statistics.gov.uk/hsq/>

The long cold winter: beating fuel poverty; by Jenny Bird, Ron Campbell, Kayte Lawton, Institute for Public Policy Research - IPPR; NEA - National Energy Action. London: Institute for Public Policy Research - IPPR, March 2010, 36 pp.

The winter of 2009/10 has been one of the coldest the UK has experienced for decades. This cold weather will have caused much misery for people living in "fuel poverty", defined as an individual or household needing to spend more than 10% of income on fuel to maintain an adequate level of warmth (21 degrees Celsius for main living areas, 18 degrees for other unoccupied rooms). Indeed, more and more people are being affected by fuel poverty as energy prices rise. This report highlights trends in fuel poverty and its underlying causes, the main factors being low household incomes, high energy prices, and poor energy efficiency. It outlines the various policy measures that comprise the Government's current fuel poverty strategy; and examines the scale of the challenge if fuel poverty is to be eradicated permanently. It argues that a radical review of the entire fuel policy strategy is needed, with steps being taken for interim measures pending more lasting solutions. (RH)

From : Download from website: <http://www.ippr.org.uk>

The low earners audit: March 2010 update: low earners' finances March; by Resolution Foundation. London: The Resolution Foundation (electronic format only), March 2010, 175 pp.

The Resolution Foundation defines low earners to include all those with below median income (from all sources) who are not dependent on state support. This report considers the low earning group to comprise those households in income deciles 3, 4 and 5; that is, with equivalised gross annual income between £13,500 and £25,800. Around 7.2 million households fall into this category in the UK, accounting for around 14 million adults. The audit attempts to present a broad description of some of the pressures faced by those who are disadvantaged by the mixed economy, an experience which has been heightened by the recession. This update considers low earners' household finances during an economic downturn. Appendices provide economic indicators, a range of low earner data, the various technical definitions of low earners used, and brief details of a low earner focus group commissioned by the Foundation in June 2009. (RH)

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

Minimum income standards and household budgets: (Social Policy Association prize-winning paper); by Chris Deeming, Social Policy Association. Bristol: Policy Press, 2010, pp 97-117.

IN: Social Policy Review, 22, Chapter 5, 2010, pp 97-117.

This inquiry attempts to determine food poverty lines for an older population. The author uses data on household expenditure and food consumption from the Office for National Statistics' (ONS) Expenditure and Food Survey (EFS), a particularly useful source as each member of households participating uses 2-week diaries to record all food spending. 3 years of EFS data (2002-2005) provide a sample of 5,500 households aged 60+ (3,000 older singles and 2,500 older couples). The author aims to determine budget adequacy by considering the total level of household expenditure required to meet minimum dietary standards for good health. Using a logistic regression model, he finds that the budget line of £110 per week for singles corresponds to the point where 90% are expected to meet the minimum dietary standard; and for couples, £170 per week corresponds to nearly 80% predicted to meet the standard. Further modelling with discriminant function analysis (DFA) helped to confirm these findings. It is suggested that the Pension Credit guarantee could be sufficient to keep most

pensioners with low incomes out of "absolute" poverty. The author concludes by noting that ONS is integrating a number of national surveys including the EFS into a single household survey. This new Integrated Household Survey (IHS) should allow us to examine aspects of poor nutrition and other forms of material deprivation in more detail. (RH)

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

Monitoring inequalities in health expectancies in England: small area analyses from the Census 2001 and General Household Survey 2001-05; by Michael P Smith, Olugbenga Olatunde, Chris White. Health Statistics Quarterly, no 46, Summer 2010, pp 51-68.

This study explores the potential of the General Household Survey (GHS) to provide an inter-censal measure of Health Expectancies (HEs) in small areas grouped by area deprivation. The 2001 Census and GHS 2001-05 both show a decline in health status and HEs with increasing area deprivation. Consistency between them shows the latter is suitable in providing an inter-censal measure of HEs. Findings serve as a useful measure for the targeting of interventions to reduce health inequalities. (KJ)

ISSN: 14651645

From : <http://www.statistics.gov.uk/hsq/>

The Peter Townsend reader: edited by the Policy Press; by Alan Walker, David Gordon, Ruth Levitas (eds)(et al). Bristol: The Policy Press, 2010, 696 pp.

Peter Townsend, who died in June 2009, had a long career researching an exceptional range of topics within the social sciences and campaigning against social inequalities. This reader brings together for the first time a collection of his most distinctive work, allowing readers to review changes and continuities over the past six decades, and to reflect on social issues that have returned to the fore today. Seven editors edit eight themed sections: Sociology and social policy; From welfare state to international welfare; Poverty; Inequality and social exclusion; Health inequalities and health policy; Older people; Disability; and Social justice and human rights. A particular feature of the volume is in tracing the links between empirical evidence and both social theory and social policy, and how those disciplines intersect. This reader will provide a teaching and learning resource for students in different disciplines of the social sciences, and will also provide an insight into the development of one social scientist's entire intellectual approach. It is hoped it will be a fitting memorial to Peter Townsend's life and work. (KJ/RH)

Price: £24.99 (pbk); (hdbk £70)

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

Protect, support, provide: examining the role of grandparents in families at risk of poverty; prepared for Grandparents Plus and the Equality and Human Rights Commission (EHRC) ...; by Julia Griggs, Grandparents Plus; Equality and Human Rights Commission - EHRC; Department for Social Work, University of Oxford. London: Grandparents Plus, March 2010, 69 pp.

The Equality and Human Rights Commission (EHRC) and Grandparents Plus are working in partnership to examine the relationship between older and younger people's poverty through the grandparent-grandchild relationship. This report focuses on several groups particularly vulnerable to poverty (single parent families, families where a child or parent has a disability, black and minority ethnic families, and family and friend carers). It explores the shape and nature of deprivation for those grandparents and grandchildren. In particular, it considers the scale of grandparents' childcare contribution, and how the childcare they provide may increase the risk of poverty for themselves, given the evidence on intergenerational patterns of poverty (e.g. the higher incidence of lone motherhood from those who grew up in low income households). The report draws on analysis of British Social Attitudes (BSA) Survey data and other existing data. The remainder of the findings section comprises a synthesis of research evidence uncovered during the literature review. It therefore starts to fill in the gaps in our knowledge; priority areas for future research and policy making are highlighted. (RH)

From : Download (3/3/10):

http://www.grandparentsplus.org.uk/publications_files/Protect%20Support%20Provide%20Report.pdf

Shaping equality and fairness after the recession: a report of the Equality and Diversity Forum Seminar Series; by Equality and Diversity Forum; ORC Worldwide; Equality and Human Rights Commission - EHRC. London: Equality and Diversity Forum (electronic format), March 2010, 36 pp.

The Equality and Diversity Forum (EDF) held two seminars in late 2008 looking at how we deal with the current financial crisis; this report outlines the proceedings. The first seminar, 'Redefining equality and fairness', introduced a Joseph Rowntree Trust (JRF) report, 'Understanding attitudes to tackling economic inequality' by Tim Horton and Louise Bamfield. The report examined attitudes to welfare in the UK and the effect of

inequality on society. The second seminar, 'Vision of the future: polity, economy and inequality', bears in mind that a General Election will take place within 6 months. Three speakers from groups aligned respectively with a Labour, Liberal Democrat and Conservative outlook - Compass, Centre Forum, and Demos - each took a distinctive politic perspective. Debate at the seminars identified seven key issues: importance of awareness of the facts about inequality and poverty; whether equality, fairness, social mobility and diversity are the same or different; the lack of transparency and consensus on fairness; whether there is a long term global trend to increasing economic inequality; whether or not social hierarchies and segregation are growing; that it is vital to make equality legislation work effectively; and the relationship between the benefits system and inequality. (RH)

From : Equality and Diversity Forum, 207-221 Pentonville Road, London N1 9UZ.

Social inequalities in facing old age dependency: a bi-generational perspective; by Chiara Saraceno.

Journal of European Social Policy, vol 20, no 1, February 2010, pp 32-44.

Population ageing implies the ageing of family and kinship networks. Because the absolute number of the frail older people is set to increase, notwithstanding the increase in life expectancy in good health, a top-heavy intergenerational chain is likely both to put stress on the middle generation, and result in the older and younger generations competing for their support. Thus, issues of the redistribution of financial and time resources become relevant in the middle and younger generations when frailty emerges in the older generation. This article adopts a bi-generational perspective in order to examine not only whether social inequality affects resources available to the dependent elderly, but also whether and how a frail older person's demands impact differently on children's resources and life chances across gender and social classes, as well as what the impact of specific patterns of public care provision (other than healthcare) is on these inequalities. (KJ/RH)

ISSN: 09589287

From : <http://esp.sagepub.com/doi/10.1177/0958928709352540>

Towards a new political economy of pensions?: the implications for women; by Liam Foster.

Critical Social Policy, vol 30, no 1, issue 102, February 2010, pp 27-47.

This article employs a political economy approach to assess the changing nature of women's pension provision. Initially it provides an overview of the current context showing that many female pensioners are without access to significant pension entitlements in their own right. Then it examines the history of women's pensions over the last 30 years with reference to both state and private forms of provision. It considers the pension strategies of the Thatcher and New Labour governments and their impact on women's pension situation. This includes an evaluation of recent New Labour proposals, such as Personal Accounts, a raise in the basic State Pension age (SPA) and reintroduction of the link to earnings. Finally, the paper concludes that these proposals do not represent the emergence of a new political economy of pensions which better reflects the needs of female pensioners; rather, they are a response to the challenges of an ageing population. (KJ/RH)

ISSN: 02610183

From : <http://csp.sagepub.com/doi/10.1177/0261018309350807>

Trends in social inequalities in male mortality, 2001-08: intercensal estimates for England and Wales; by Ann Langford, Brian Johnson.

Health Statistics Quarterly, no 47, Autumn 2010, pp 5-32.

This article contributes to the debate on health inequalities by presenting for the first time, an annual series of mortality rates for men aged 25-64 for the period 2001-08 classified by the National Statistics Socio-economic Classification (NS-SEC). Previously, estimates have been based on socio-economic data from the census, and thus were restricted to 2001-03. The new method uses the Labour Force Survey (LFS) to estimate annual population by NS-SEC, whilst deaths by NS-SEC are extracted from the Death Registers. The results show that there has been a pattern of declining absolute inequalities but rising relative inequalities in men over the period 2001-08. In the future, this series could be used to monitor inequalities. (KJ)

ISSN: 14651645

From : <http://www.statistics.gov.uk/hsq/>

Variations in life expectancy between rural and urban areas of England, 2001-07; by Lynsey Kyte, Claudia Wells.

Health Statistics Quarterly, no 46, Summer 2010, pp 25-50.

This study investigated variations in life expectancy at birth between rural and urban areas of England for 2001-07, taking deprivation into account. The Rural and Urban Area Classification 2004 and the Index of Multiple Deprivation 2007 were used to categorise areas at the Lower Super Output Area level. Overall, life expectancy was higher in rural areas than urban areas. Within rural settlements, people living in village and dispersed areas had higher life expectancies than those in town and fringe areas. Deprivation had a considerable impact on the

results and wide inequalities were evident across all area types. The results demonstrated that it is important to examine differences in life expectancy in both area and deprivation contexts. (KJ)

ISSN: 14651645

From : <http://www.statistics.gov.uk/hsq/>

Work and mental health: the case of older men living in underprivileged communities in Lebanon; by Monique Chaaya, Abba Mehio Sibai, Nabil Tabbal (et al).

Ageing and Society, vol 30, part 1, January 2010, pp 25-40.

This paper examines the association between being in paid work and depression among older adults in three poor urban communities in Beirut, Lebanon. In view of the rapid ageing of Lebanon's population and the growing number of older persons, the deteriorating economic conditions and the lack of pension systems, paid work is an important source of income for older people and deserves special attention. The sample was 328 men aged 65 or more years. Depression was assessed using the 15-item Geriatric Depression Scale (GDS-15). The exposure variable was working for pay at the time of the survey, and the covariates included socio-demographic measures, health characteristics, financial resources and social capital. Around one-third of the men were working, and approximately the same fraction were depressed. Adjusted data showed a protective effect of work on depression (odds ratio 0.50, 95 per cent confidence interval 0.25-0.96). This study is an eye opener on the circumstances of disadvantaged older people in a relatively low-income Eastern Mediterranean Region country, a topic rarely addressed in this area of the world. Old age is viewed as a decline in abilities, while in reality many older adults are still able and ready to work. Social policies for older people should promote opportunities to work, not only pension schemes. (KJ/RH)

ISSN: 0144686X

From : <http://www.journals.cambridge.org/asodoi:10.1017/S0144686X09990171>

Would action on inequality have saved Labour?; by Gerry McCartney, Chik Collins, Danny Dorling.

British Medical Journal, vol 340, no 7761, 26 June 2010, p 1388 (Observations).

Had Labour narrowed rather than widened the mortality gap in the UK during its term of government, the balance of the current parliament might have been a bit different - possibly enough to have facilitated a coalition that would have seen Labour remain in power. The authors ponder the role of older voters in the 1997, 2001 and 2005 elections, and how many were still around to vote in 2010. One of New Labour's manifesto commitments in 1997 was to tackle the underlying causes of bad health and reduce health inequalities. However, national statistics show an increasing gap in life expectancy between the worst and best local authorities, from under 9 years in 1997 to almost 13 years by 2007. (RH)

ISSN: 09598138

From : www.bmj.comBMJ2010;340:c3294

2009

Ageing, income and living standards: evidence from the British Household Panel Survey; by Richard Berthoud, Morten Blekesaune, Ruth Hancock.

Ageing and Society, vol 29, part 7, October 2009, pp 1104-1122.

In Britain, older people have lower average incomes and a higher risk of income poverty than the general population. Older pensioners are more likely to be in poverty than younger ones. Yet certain indicators of their living standards suggest that older people experience less hardship than expected, given their incomes. A possible explanation is that older people convert income into basic living standards at a higher rate than younger people, implying that as people age, they need less income to achieve a given standard of living. Much existing evidence has been based on cross-sectional data and therefore may not be a good guide to the consequences of ageing. The authors use longitudinal data on people aged at least 50 years from the British Household Panel Survey (BHPS) to investigate the effects of ageing on the relationship between standard of living, as measured by various deprivation indices, and income. They find that for most indices, ageing increases deprivation and controlling for income and other factors. The exception is a subjective index of "financial strain", which appears to fall as people age. Evidence of cohort effects are also found. At any given age and income, more-recently-born older people in general experience more deprivation than those born longer ago. To some extent, these ageing and cohort effects balance out, which suggests that pensions do not need to change with age. (RH)

ISSN: 0144686X

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

Can financial incentives improve health equity?; by Adam Oliver.

British Medical Journal, vol 339, no 7723, 26 September 2009, pp 705-706.

Evidence shows that, if targeted appropriately, financial incentives might improve health equity. Two centres have been studying this subject: the Centre for the Study of Incentives in Health (CSI Health; website www.kcl.ac.uk/schools/biohealth/research/csinentiveshealth), a collaboration between King's College London, Queen Mary University of London and the London School of Economics; and the Center for Health Incentives at the University of Pennsylvania (www.med.upenn.edu/ldichi/). Appropriately targeted incentives could reduce inequalities in health outcomes for poorer people. (RH)

ISSN: 09598138

From : www.bmj.com

Closer to crisis?: How low earners are coping in the recession; by Resolution Foundation. London: The Resolution Foundation, 2009, 37 pp.

This report contains in-depth analysis about how the economic downturn is affecting low earning households - that is, the 14.3 million adults living in 7.2 million households on below median income, who remain broadly independent of state support. Low earners are more at risk of being hit by the effects of recession than other groups, by virtue of the industries and occupations in which they work, and the areas that they live in. The Resolution Foundation's analysis indicates that despite a swift response by government, further action is both necessary and feasible, so as to prevent a more stratified labour market and greater polarisation of income within society. (KJ/RH)

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

Comparisons between geographies of mortality and deprivation from the 1900s and 2001: spatial analysis of census and mortality statistics; by Ian N Gregory.

British Medical Journal, vol 339, no 7722, 19 September 2009, pp 676-679.

The geographical relation between mortality and deprivation in England and Wales at the start of the 20th and 21 centuries is examined. The evidence for a strengthening or weakening of this relation over the century, and the relation between the mortality and deprivation patterns of a century ago and modern mortality and causes of death are also explored. Census and mortality data for 634 districts from the 1900s were directly compared with interpolated ward level data from 2001. There was no evidence of a significant change in the strength of the relation between mortality and deprivation between the start and end of the 20th century. Modern patterns of mortality and deprivation remain closely related to the patterns of a century ago. Even after adjustment for modern deprivation, standardised mortality ratios for the 1900s show a significant correlation with modern mortality and most causes of death. Conversely, however, there was no significant relation between deprivation in the 1900s and modern mortality for most causes of death after adjustment for modern deprivation. Despite all the medical, public health, social, economic and political changes over the 20th century, patterns of poverty and mortality and the relations between these remain firmly entrenched. There is a strong relation between the mortality levels of a century ago and those of today. This goes beyond what would have been expected from the continuing relation between deprivation and mortality, and holds true for most major modern causes of death. (RH)

ISSN: 09598138

From : www.bmj.com

Coping with the crunch: the consequences for older people; by Age Concern and Help the Aged. London: Age Concern and Help the Aged, July 2009, 8 pp (Economy in crisis).

The effects of the recession are as important to older people as other age groups. Evidence in this research review is based on unpublished surveys for Age Concern and Help the Aged by ICM Research. It finds that 60% of older workers say that the economic downturn means they may need to work for longer than they had originally planned. However, more than one in five fear that the recession could force them to stop work sooner than they expected. As for people in retirement, 59% of those aged 60+ are not confident that the Government will help older people cope during the recession. This review cites examples from other research sources and newspapers concerning older workers in the recession; declining pensions and assets; older savers; the changing face of pensioner poverty; financial education and debt; struggling local economies; and crime and scams. Age Concern and Help the Aged believe that these challenges must be tackled urgently, before a short-term crisis leads to disadvantage for vulnerable older people. (RH)

From : Age Concern England, Astral House, 1268 London Road, London SW16 4ER. www.ageconcern.org.uk
Help the Aged, 207-221 Pentonville Road, London N1 9UZ. www.helptheaged.org.uk

Coronary heart disease mortality among young adults in Scotland in relation to social inequalities: time trend study; by Martin O'Flaherty, Jennifer Bishop, Adam Redpath (et al).

British Medical Journal, vol 339, no 7714, 25 July 2009, p 219.

Does the overall decline in coronary heart disease (CHD) mortality rates in Scotland between 1986 and 2006 differ by age and socioeconomic status? Overall (age-adjusted) coronary heart disease mortality rates have continued to decline in Scotland. However, this conceals a flattening in younger age groups, particularly the most deprived people. This is a summary of a paper that was published on bmj.com as BMJ 2009: 339:b2613, which used population data from Scotland for 1986-2006, and used the Scottish Index of Multiple Deprivation (SIMD) for 1986-2006 to categorise area level socioeconomic status. (RH)

ISSN: 09598138

From : www.bmj.com

Cultural preferences and economic constraints: the living arrangements of elderly Canadians; by Lisa Kaida, Melissa Moyser, Stella Y Park.

Canadian Journal on Aging, vol 28, no 4, December 2009, pp 303-314.

Using data from the 2001 Census Public Use Microdata Files on Individuals, the authors examine the role of cultural preferences and economic constraints in older Canadians' choice of living arrangements (living with one's children and/or other relatives versus living independently). They find that members of ethnic groups holding familistic cultural values (Italian, Chinese, South Asian, and East Indian) are more likely than their individualistic counterparts (British, German, and Dutch) to live with kin. Economic disadvantage also entails a greater likelihood of living with kin. However, the relative importance of cultural preferences and economic constraints as determinants of living arrangements depends on marital status. Among the married, cultural preferences explain a greater proportion of the variation in living arrangements; among the non-married, economic constraints do. This research contributes a more nuanced understanding of living arrangements among older Canadians than its predecessors, which neglected the role of marital status. (KJ/RH)

ISSN: 07149808

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

Economic inequality and population health: looking beyond aggregate indicators; by Petri Böckerman, Edvard Johansson, Satu Helakorpi (et al).

Sociology of Health & Illness, vol 31, no 3, April 2009, pp 422-440.

The sensitivity of various health indicators to income inequality as measured by regional Gini coefficients was studied, using individual microdata from Finland over the period 1993-2005. There is no overall association between income and health at the regional level. The authors discovered that, among men, there are no significant associations between income inequality and several measures of health status. Among women or among both sexes combined, there are some indications of associations in the predicted direction between income inequality and physical health, disability retirement, sick leave, and consumption of medicines, but none are robust to different model specifications. Only among populations aged under 30 is some indication that mental health is associated with inequality. These findings confirm that income inequality in small populations (not large enough to measure the overall class pyramid of the society) is often immaterial for health outcomes. (RH)

ISSN: 01419889

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

Embodying social class: the link between poverty, income inequality and health; by Stephen M Rose, Stephanie Hatzenbuehler.

International Social Work, July 2009, pp 459-472.

Poverty, income inequality and the inequitable distribution of health invariably co-occur. The strength of the relationship between wealth and health holds, even in countries with universal health care. A systematic literature review describes pathways from inequality of wealth to embodied diseases. The significance for social policy and social work practice is developed. (KJ/RH)

ISSN: 00208728

From : <http://isw.sagepub.com>

Engaging policy makers in action on socially determined health inequities: developing evidence-informed cameos; by Naomi Priest, Elizabeth Waters, Nicole Valentine (et al).

Evidence & Policy, vol 5, no 1, January 2009, pp 53-70.

This article describes an innovative translation project involving researchers and key stakeholders commissioned by the World Health Organization (WHO) for the Commission on Social Determinants of Health (CSDH). The project aimed to develop "cameo" reports of evidence-based policies and interventions, addressing

social determinants of health intended for use by leaders and advocates as well as policy and programme decision makers, to advance global action. The iterative process of developing the framework and content of the cameos, in the context of a limited evidence base, is described; and a number of issues related to the integration of multiple sources of evidence for knowledge translation action are identified. (RH)

ISSN: 17442648

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

Extending social security to the excluded: are social cash transfers to the poor an appropriate way of fighting poverty in developing countries?; by Lutz Leisering.

Global Social Policy, vol 9, no 2, August 2009, pp 246-272.

Formal social security in developing countries has long been centred on employees in the formal sector of the economy, and the majority of the population has been excluded. Since the turn of the 21st century, international organisations have called for extending the coverage of social social security. This article analyses a recent strategy of extending social security, social cash transfers (SCT) to the poor. The article traces the rise of SCT as a global issue; describes and classifies SCT in the global South; and inquires into the "appropriateness" of SCT in a development context (J Midgley, 2008). SCT is found to have spread to all world regions, and that SCT covers a highly diverse institutional landscape. Evidence on appropriateness is inconclusive at this early stage of SCT, As yet, the call for social security for all is largely "decoupled" (J W Meyer et al, 1997) from the realities of developing countries. But the semantics of "SCT" has opened up a new arena of consensus and conflict in global social policy. (RH)

ISSN: 14680181

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

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)

ISSN: 01621424

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

Income, wealth and financial fragility in Europe; by Dimitrios Christelis, Tullio Jappelli, Omar Paccagnella (et al).

Journal of European Social Policy, vol 19, no 4, October 2009, pp 359-376.

The article examines the distribution of income and wealth among the generation of Europeans aged 65 and over, using data drawn from the first wave of the Survey of Health, Ageing and Retirement in Europe (SHARE). It looks at how cross-country comparisons of income, wealth and debt are affected by differences in purchasing power, household size and taxation, and shows that some seemingly wide international differences appear less so when the proper adjustments are made. The article reveals wide differences in income, wealth and indebtedness of older households in Europe, and provides background information on social issues such as the adequacy of savings at retirement, and older people's financial fragility. (KJ/RH)

ISSN: 09589287

From : <http://esp.sagepub.com>

Inequalities in health and community-oriented social work: lessons from Cuba?; by Dave Backwith, Greg Mantle.

International Social Work, July 2009, pp 499-512.

This article argues that, in tackling health inequalities, lessons can be learned from the community-oriented social work which has helped Cuba to maintain population health comparable with that of much wealthier

countries. This is in contrast to the UK, where efforts to reduce the health gap between rich and poor have enjoyed limited success. (KJ/RH)

ISSN: 00208728

From : <http://isw.sagepub.com>

Inequalities in health at older ages: a longitudinal investigation of the onset of illness and survival effects in England; by Anne McMunn, James Nazroo, Elizabeth Breeze.

Age and Ageing, vol 38, no 2, March 2009, pp 181-187.

Previous studies have suggested a decline in the relationship between socioeconomic circumstances and health or functioning in later life, but this may be due to survival effects. The present study examined whether wealth gradients in the incidence of illness decline with old age, and, if so, whether the decline is explained by differential mortality. The study included participants from the first two waves of the English Longitudinal Study of Ageing (ELSA), a large national longitudinal study of the population aged 50+ in England, who reported good health, no functional impairment, or no heart disease at baseline. Wealth inequalities in onset of illness over 2 years were examined across age groups, with and without the inclusion of mortality. The study found that wealth predicted onset of functional impairment equally across age groups. For self-reported health and heart disease, wealth gradients in the onset of illness declined with age. Selective mortality contributed to this decline in the oldest age groups. Socioeconomic inequality in developing new health problems persists into old age for certain illnesses, particularly functional impairment, but not for heart disease. Selective mortality explains only some of the decline in health inequalities with age. (RH)

ISSN: 00020729

From : <http://www.ageing.oxfordjournals.org>

Just ageing? Fairness, equality and the life course: final report; by Michele Lee, Equality and Human Rights Commission - EHRC; Age Concern and Help the Aged. London: Equality and Human Rights Commission - EHRC; Age Concern and Help the Aged, December 2009, 32 pp (Just Ageing?: fairness, equality and the life course).

In 2009, the Equality and Human Rights Commission (EHRC), and the newly merged charity Age Concern and Help the Aged (Age UK from Spring 2010) jointly established a programme of research and policy seminars called 'Just Ageing?: Fairness, equality and the life course'. The aim was to create a deeper understanding of equality over the life course, and to build momentum for action on the disadvantage that accumulates at different stages of the life and results in inequality in old age. This report builds on the Equality Bill published in 2009. It presents key findings, drawing on new research commissioned by the programme and five seminars held in 2009. It provides background on why questions about ageing, equality and the life course are important and outlines different ways of thinking about these issues. It presents new findings relating to early, mid and late life course factors that affect equality in later life. It offers eight key insights from the research and the seminars, for example the need to increase the voices of older and younger people, and to pay more attention to unpaid carers. The weblink www.equalityhumanrights.com/justageing provides further information. (RH)

From : Age Concern and Help the Aged, 207-221 Pentonville Road, London N1 9UZ. Equality and Human Rights Commission, Arndale House, The Arndale Centre, Manchester M4 3AQ. Weblink: www.equalityhumanrights.com/justageing

Life regrets and pride among low-income older adults: relationships with depressive symptoms, current life stressors and coping resources; by Namkee G Choi, Jina Jun.: Taylor & Francis, March 2009, pp 213-225.

Ageing & Mental Health, vol 13, no 2, March 2009, pp 213-225.

The authors examined the contents and intensities of both life regrets and pride in a convenience sample of 213 low-income older Americans and the association between the contents and intensities of life regrets and pride on the one hand, and the older adults' current life stressors, coping resources and depressive symptoms on the other. Regrets about education, career and marriage were common, but intensities of regret were higher for issues related to finance or money, family conflict and children's problems, loss and grief, and health. Common sources of pride were related to children and parenting, career, volunteering or informal caregiving, long or strong marriage, and personal growth or self. Controlling for current life stressors of disability, money worries, loneliness and overdependence on others for management of daily life and coping resources for social support and religiosity, the intensities of loss- and grief-related regrets, and the pride in long or strong marriage were significant predictors of the Geriatric Depression Scale (GDS) scores. However, the regrets and pride explained a small amount of the variance in the GDS scores, while the current life stressors explained a large portion of the variance. (RH)

ISSN: 13607863

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

London : capital of debt: reducing the health consequences of personal debt; by London Health Forum. London: Electronic format - London Health Forum, 2009, 36 pp.

London has been particularly vulnerable to the rise in indebtedness since the mid-1990s, given the highest house prices and living costs in the UK. It is now widely accepted that the stress and anxiety associated with indebtedness lead to and accentuate health problems, both mental and physical. Further, early help in dealing with people's debt problems is often the most effective way of preventing and mitigating associated health problems. This report is part of a project initiated by the London Health Forum to ameliorate the health burden arising from the recession through early debt advice and other preventive measures. It highlights the scale of indebtedness in London and its consequences for health, so encouraging the Primary Care Trusts (PCTs) to work with London's boroughs to support early use of debt advice as soon as people have worries. (RH)

From : Download from website (17/09/09): <http://www.london-health.org/PDF/Debt%20and%20health%20report%20-%20FINAL.pdf>

Marmot review - Health inequalities strategy in England post 2010: consultation response; by Margit Phisant, Age Concern and Help the Aged. London: Age Concern and Help the Aged, August 2009, 5 pp (Consultation response, Ref: 4509).

Professor Sir Michael Marmot has been asked to advise the Secretary of State for Health on the future development of a health inequalities strategy in England post 2010. Age Concern and Help the Aged comment on issues raised in the consultation document on the first phase of the Strategic Review. First, it is suggested that the Review should consider 'financial capability' in order to reduce 'material inequalities. Second, implementing the Lifetime Neighbourhood strategy will contribute to reducing health inequalities. Third, older people should be considered as a vulnerable group. Fourth, equality legislation is essential to reduce health inequalities. Fifth, an ageing society should be considered as one of the cross-cutting challenges. The organisation has considered age discrimination in health and social care in more detail in its Response to the National Review of Age Discrimination in Health and Social Care call for evidence. (RH)

From : Age Concern England, Astral House, 1268 London Road, London SW16 4ER. www.ageconcern.org.uk Help the Aged, 207-221 Pentonville Road, London N1 9UZ. www.helptheaged.org.uk

Measuring and tackling health inequalities across Europe; by David McDaid (ed).: European Observatory on Health Systems and Policies, 2009, pp 1-35 (whole issue).

Eurohealth, vol 15, no 3, 2009, pp 1-35 (whole issue).

This issue of Eurohealth is largely devoted to health inequalities, drawing on discussions of a seminar held in May 2009 at the London School of Economics and Political Science, and organised in conjunction with the EU Directorate General for Employment, Social Affairs and Equal Opportunities. Many concerns over the extent and consequences of health inequalities between and within Member States have been raised by EU institutions, national governments and other stakeholders. These 12 articles look at a variety of health inequality issues across the EU and in the Netherlands, France, England, Sweden, Hungary, Germany and New Zealand. (KJ/RH)

ISSN: 13561030

From : Website: <http://www2.lse.ac.uk/LSEHealthAndSocialCare/LSEHealth/Home.aspxeurohealth@lse.ac.uk>

Monitoring poverty and social exclusion in Wales 2009; by New Policy Institute; Joseph Rowntree Foundation - JRF. York: Joseph Rowntree Foundation - JRF, June 2009, 6 pp.

Findings, 2366, June 2009, 6 pp.

This is the second update of Monitoring poverty and social exclusion in Wales, following the original report in 2005, but is the first to be published in a recession. After reviewing ten-year trends in low income statistics, its focus shifts to unemployment and problem debt. The study looks at progress on low income since the mid-1990s; examines unemployment and problem debt in the current recession; considers what action government could take to lessen the recession's impact on people in poverty. Among the statistical findings is that, single pensioners accounted for three-quarters of the reduction in the number of low-income pensioners over a ten year period from the mid-1990s. (KJ)

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/publications/monitoring-poverty-wales-2009>

Nutritional parameters and chronic energy deficiency in older adults of desert areas of Western Rajasthan, India; by N Arlappa, K Mallikarjuna Rao, K Venkaiah (et al).: Routledge, 2009, pp 61-71.

Journal of Nutrition for the Elderly, vol 28, no 1, 2009, pp 61-71.

Nutritional status was assessed in 212 older individuals (60+ years of age) in a cross-sectional study carried out in desert areas of western Rajasthan during 2003. Heights and weights were recorded and a family diet survey

(one-day, 24-hour recall) was carried out in 200 households (HHs) from 20 villages. Body Mass Index (BMI) was used to classify nutritional status. The prevalence of Chronic Energy Deficiency (CED = BMI < 18.5) was less than 40% in desert areas of India, indicating a "very high" public health problem. It was higher among older women (52%) compared with men (42.4%) and higher in those belonging to Scheduled Caste and Scheduled Tribes and in HHs of labourers, artisans, landless individuals, marginal farmers, and below poverty line families. CED did not differ (statistically) between the desert and plain areas of Rajasthan. CED prevalence among older adults in desert areas was actually lower ($p < 0.001$) than that found in their rural and tribal counterparts. Intervention programmes initiated by the government may explain this finding. The findings support the conclusion that regular nutritional monitoring of older adults in desert and drought prone areas is needed and can help to appropriately target the need for intervention measures. (KJ/RH)

ISSN: 01639366

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

Older women and poverty transition: consequences of income source changes from widowhood; by Martie Gillen, Hyungsoo Kim.

Journal of Applied Gerontology, vol 28, no 3, June 2009, pp 320-341.

Older single women are disproportionately vulnerable to poverty. Using data from the 2002 and 2004 waves of the US Health and Retirement Study (HRS) of 5,799 women age 65 or older, this study investigated the effect of change in income sources by recent spousal loss on poverty transition. The focus is on the effect of widowhood on income source change, and how such change affects poverty transition of recently widowed older women. Findings indicate that widowhood greatly decreases income from every source. Specifically, a \$10 increase in social security benefits decreased the probability of poverty transition for recently widowed older women by 67.2%. These findings call for reconsidering social security survivor benefit rules and women's education with regard to financial security in retirement. (KJ/RH)

ISSN: 07334648

From : <http://jag.sagepub.com>

Our right to heat and eat: a huge and growing problem; by Age Concern London. London: Age Concern London, November 2009, 8 pp.

Many older people in London face increasing difficulty in heating their homes. This pamphlet presents facts and figures on the extent of fuel poverty (defined as needing to spend more than 10% of income after housing costs on heating). Although a wide variety of advice and support is available to older people locally and through grant schemes, many older people do not claim benefits to which they are entitled that would help them pay their bills. Age Concern London calls on all London local authorities to raise older people's awareness of energy efficiency advice and help with welfare benefits. The Government's Warm Front scheme needs to be targeted more effectively to older people on lower incomes; and utility companies should publicise social tariffs more prominently. (RH)

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

The poor relation?: grandparental care: where older people's poverty and child poverty meet: interim report; by Julia Griggs, Grandparents Plus; Equality and Human Rights Commission (EHRC); Department for Social Policy and Social Work, University of Oxford. London: Grandparents Plus - electronic download, June 2009, 22 pp.

The author has used data from the British Social Attitudes (BSA) survey for 2007 to build a more comprehensive picture of Britain's grandparent population and the significant role played by grandparents in providing support for their children and care for their grandchildren. This interim report looks at changes in the last ten years in the socio-economic and income aspects of being a grandparent. It notes that working class grandparents are more likely than middle class grandparents to belong to four-generation families, and that working age grandmothers on low incomes are most likely to be providing the childcare. There is also a direct correlation between a mother's employment and whether her own mother is still alive. Overall, the grandparental contribution is being shaped by an ageing population, increased family diversification, and increased participation by mothers in the workforce. In turn, these changes affect grandparents own (financial) well-being. (RH)

From : Download (29/6/09): <http://www.grandparentsplus.org.uk/>

Population ageing: the implications for society: the living tapestry; by Paul Cann.

Quality in Ageing, vol 10, issue 2, June 2009, pp 39-46.

The dramatic ageing of societies will not be addressed successfully by generalised policies for all older people, but by concerted action to tackle major inequalities in income, health and well-being and social inclusion. Such approaches must form part of a life course strategy which deals with disadvantages owing to gender, ethnicity

and socio-economic origins, and uses mid-life and retirement as windows of opportunity. Paradoxically, the current economic difficulties cause the right conditions for a new drive to reduce unequal ageing. A concordat is needed across state, business, voluntary sector and media if it is to be a realistic possibility. (KJ/RH)
ISSN: 14717794

Reducing the risks to health: the role of social protection; by Howard Glennerster, Jonathan Bradshaw, Ruth Lister (et al), Social Protection Task Force for the Strategic Review of Health Inequalities in England Post 2010; ESRC Centre for Analysis of Social Exclusion - CASE, Suntory-Toyota International Centres for Economics and Related Disciplines - STICERD, London School of Economics and Political Science. London: STICERD, June 2009, 46 pp (CASEpaper 139).

At the end of 2008, the Government set in motion a Strategic Review of Health Inequalities in England, chaired by Sir Michael Marmot, which will report in December 2009. As part of its work, Task Groups have been set up to collect evidence and suggest policy options. Howard Glennerster chaired this Social Protection Task Force, whose report will be considered as part of the evidence for the review. As a way of reaching a wider audience, it was decided to make this report available as a CASEpaper. The findings demonstrate that the introduction of social protection systems as well as their generosity and coverage have significant impacts on health. The eligibility for and administration of benefits matters: the growth of means testing in the UK and its recent modifications are examined. The Task Group find serious difficulties facing those with long term medical conditions who are on the margins of the labour force; collaboration between health and social protection systems is poor. The causes of health inequalities are varied and complex and go far beyond the consequences of financial insecurity. The UK's social protection system is seriously deficient in many respects. (RH)

Price: FOC

From : Centre for Analysis of Social Exclusion, London School of Economics, Houghton Street, London WC2A 2AE. <http://sticerd.lse.ac.uk/case>

Self-neglect and neglect of vulnerable older adults: re-examination of etiology; by Namkee G Choi, Jinseok Kim, Joan Asseff.: The Haworth Press, Inc., 2009, pp 171-187.

Journal of Gerontological Social Work, vol 52, issue 2, 2009, pp 171-187.

Using assessment and investigation data from the reported APS (Adult Protective Services) in Texas, this study examines the types of elder self-neglect and neglect, including medical neglect. It then examines the association between self-neglect and neglect and individual economic resources as well as health care and social service provision for the poor. The findings show that older self-neglect or neglect is, in large part, attributable to frail older adults' and their families' lack of resources to pay for essential goods and services and the inadequate healthcare and other formal support programmes for the older adults and their caregivers. This inadequate public policy coverage, rather than individual and intra-family risk factors per se needs to be considered as a significant cause of elder self-neglect or neglect. (RH)

ISSN: 01634372

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

Shelter homes for the elderly in Malaysia; by A Zaiton, S G Sazlina, V Renuka.: International Institute on Ageing (United Nations - Malta), November 2009, pp 12-18.

BOLD, vol 20, no 1, November 2009, pp 12-18.

A cross-sectional study of 1681 residents for all nine shelter homes were interviewed from March to September 2003 for this study, which for the first time describes the residents of publicly-funded shelter homes in Peninsular Malaysia. The mean age of residents was 71.8. The majority were male (58.6%), had no formal education (64.1%), were from rural areas (81.1%), had no family members (61.7%), and received no visits at all (85.5%) from either friends or relatives. 295 (27.3%) had mild to severe disability, 226 (20.9%) had poor vision and 47 (4.3%) had reduced hearing. Only 447 (41.4%) of these older people were well-nourished, 707 (78.9%) were at risk of depression and 817 (75.6%) had probable cognitive impairment. 143 (14.1%) and 88 (8.1%) self-reported to have hypertension and coronary heart disease (CHD) respectively. It is clear that these residents have multiple co-morbidities. Effective management strategies are required to ensure maintenance if not improved quality of life. (The same article appeared in BOLD, vol 18, no 3, May 2008.) (RH)

ISSN: 10165177

From : <http://www.inia.org.mt>

Social inequalities in adult female mortality by the National Statistics Socio-economic Classification, England and Wales, 2001-2003; by Ann Langford, Brian Johnson.

Health Statistics Quarterly, no 42, Summer 2009, pp 6-21.

This analysis of mortality in women aged 25-59 in 2001-03 found that those in the least advantaged social economic class had a mortality rate around twice that of women in the most advantaged class. This article uses

the National Statistics Socio-economic Classification (NS-SEC), and examines the relative merits of classification based on a woman's 'own' occupation as opposed to a 'combined' classification which also takes into account the husband's NS-SEC class, where available. The results demonstrate a strong socio-economic gradient in mortality for adult women under both classification methods. Under the 'combined' classification, women in the least advantaged NS-SEC class had a mortality rate 2.6 times that of those in the most advantaged class. Based on the women's 'own' occupation, the comparable ratio was 1.9. These results set a benchmark for the future monitoring of socio-economic mortality inequalities in women, and also provide a comparison between inequalities affecting women and men. (KJ/RH)

ISSN: 14651645

From : <http://www.statistics.gov.uk>

Social inequalities in female mortality by region and by selected causes of death, England and Wales, 2001-03; by Ann Langford, Brian Johnson, Alaa Al-Hamad.

Health Statistics Quarterly, no 44, Winter 2009, pp 7-26.

This article is the first official compilation of detailed mortality statistics for women, aged 25-59, based on the National Statistics Socio-economic Classification (NS-SEC). It is the fifth in a series reporting on social inequalities in the working age population in England and Wales in 2001-03. The results demonstrate a strong socio-economic effect on the mortality of women in all regions. There were marked differences between the least and most advantaged classes in all causes studied, except for breast cancer. The least advantaged had a mortality rate three times as high for lung cancer and cerebrovascular disease, and over five times as high for ischaemic heart disease, all digestive diseases, and respiratory diseases. (KJ/RH)

ISSN: 14651645

From : <http://www.statistics.gov.uk>

Social security and the global socio-economic floor: towards a human rights-based approach; by Wouter van Ginneken.

Global Social Policy, vol 9, no 2, August 2009, pp 228-245.

This article shows that the commitment towards economic and social human rights (including the right to social security) will provide a strong force towards realising the global socio-economic floor. The right to social security has become realisable for a growing number of countries that have focused on the extension of social security coverage. This article shows that a global social security floor is affordable, including in low-income countries, with the initial support from the international community. This article explores how a global socio-economic floor could be better implemented through a human rights-based approach, and it reviews some of the recent initiatives undertaken by the United Nations' (UN) Human Rights Council. It suggests a number of steps to improve the effective implementation of its human rights-based approach. It concludes that such an approach can help achieve the Millennium Development Goals, and provide the framework for global policies for development and poverty eradication beyond 2015. (RH)

ISSN: 14680181

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

The socially excluded adults public service agreement; by Naomi Eisenstadt.

Housing, Care and Support, vol 12, no 1, April 2009, pp 6-8.

The Social Exclusion Task Force is based in the Cabinet Office, and works across government departments to ensure that the opportunities enjoyed by the vast majority of people in the UK today are extended to those whose lives have been characterised by deprivation and exclusion. The Task Force recognises that much has already been achieved through investment in public services, tax and benefit changes, and the national minimum wage. However, intensive collaborative support is needed for the most vulnerable individuals and families whose difficulties are complex and persistent. The Director of the Task Force comments on how development of the first public service agreement (PSA) to very vulnerable adults is a major step forward in tackling the needs of some of our most disadvantaged citizens. (RH)

ISSN: 14608790

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

Socio-economic inequalities in physical functioning: a comparative study of English and Greek elderly men; by Faiza Tabassum, Georgia Verropoulou, Cleon Tsimbos (et al).

Ageing and Society, vol 29, part 7, October 2009, pp 1123-1140.

The associations between socio-economic position (SEP) and physical functioning have frequently been investigated, but little is known about which measures of SEP are the best to use for older people. This study used data derived from Wave 1 of the English Longitudinal Study of Ageing (ELSA) and the Survey of Health, Ageing and Retirement in Europe (SHARE) study to examine how different SEP indicators relate to the

physical functioning of men aged 50+ in England and Greece. Self-reported physical functioning limitations and mobility difficulties were combined and categorised into "no disability", "mild disability" and "severe disability". The SEP indicators studied were wealth, educational level and occupational class. The findings indicate that respondents with less wealth, fewer educational qualifications and lower occupational class were more likely to experience mild or severe physical disability than those of high SEP. When all three measures of SEP were adjusted for each other, in both samples wealth maintained a strong association with mild and severe disability, while education was associated with severe disability, but only among English men. Occupational class was not strongly associated with physical disability in either case. Hence, among English and Greek older men, wealth was a more important predictor of physical functioning difficulties than either occupational class or education. (RH)

ISSN: 0144686X

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

Tackling inequalities in health: a global challenge for social work; by Paul Bywaters.

British Journal of Social Work, vol 39, no 2, March 2009, pp 353-367.

This paper presents arguments for recognizing and tackling health inequalities as a major new challenge for social work. Four underpinning points provide the building blocks for this case: that health inequalities are a matter of social justice and human rights; that the causes of health inequalities are primarily social; that poverty and poor health are common characteristics of social work service users; and that, therefore, health inequalities are a vital issue for social workers in all settings. A number of implications for social work practice and policy are outlined. The paper concludes that addressing health inequalities implies that social work has to become more actively engaged with critical global social, economic, environmental and political issues. (KJ/RH)

ISSN: 00453102

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

Unequal ageing: the untold story of exclusion in old age; by Paul Cann, Malcolm Dean (eds). Bristol: Policy Press, 2009, 179 pp.

Leading experts on social exclusion and poverty in old age provide strong evidence of the scale of current disadvantage in the UK, and suggest actions that could begin to change the picture of unequal ageing. They examine social class, followed by inequalities in income, health and well-being, and housing. Other contributors look at ageism and perceptions of age, quality of life in older age, and why ageing is so unequal. A concluding chapter suggests that although there has been progress in the last decade, major inequalities remain. The book is dedicated to Help the Aged and its work for older people over its lifetime from 1961 to 2009. (RH)

Price: £17.99 (pbk)

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

Unmet needs and depressive symptoms among low-income older adults; by Namkee G Choi, Graham McDougall.: The Haworth Press, Inc., 2009, pp 567-583.

Journal of Gerontological Social Work, vol 52, issue 6, 2009, pp 567-583.

Previous studies have found that declining health, decreased social interaction, and inadequate financial resources were significant risk factors for late-life depression, and social support from families and friends and religiosity were significant protective factors. In this study, the researchers examined if low-income older adults' perceived unmet need for home- and community-based services for many ageing-associated problems would be independently associated with their depressive symptoms, controlling for these known risk and protective factors. A total of 213 community-residing older adults were interviewed to assess their depressive symptoms, using the Geriatric Depression Scale (GDS). Respondents were asked about unmet needs in the areas of personal assistance, instrumental and environmental support, emotional support, and other facilitative/enabling services. It was found that the number of unmet needs was significantly positively associated with these older adults' depressive symptoms, although it explained only a small proportion of the variance of the GDS scores. Future research and practice implications are discussed. (KJ/RH)

ISSN: 01634372

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

The welfare of Sweden's old-age pensioners in times of bust and boom from 1990; by Björn Gustafsson, Mats Johansson, Edward Palmer.

Ageing and Society, vol 29, part 4, May 2009, pp 539-561.

Data from the Swedish Household Income Survey (HINK/HEK) was used to analyse the development of economic well-being of Swedes aged 65+ since 1990. This period was characterised by Sweden's deepest and most prolonged recession since the Great Depression, but was then followed by buoyant growth. In a series of

interventions from 1991 until 1998, pensions were cut and their full price indexation abandoned. In spite of these dramatic measures, this study shows that pensioners fared better than the working age population, but also that poverty among older Swedes increased in absolute terms. In contrast, during the following years of rapid economic growth, the growth of pensioners' income fell behind that of workers and their relative poverty increased. The analysis shows that the limited resources of many older Swedes put them close to a social poverty line. The study also shows that income inequality among older Swedes has grown with the increasing importance of capital income for the better off. The authors conclude that the increasing gap between better-off and worse-off older people raises issues about the future provision of expenditures on public services for them. The paper concludes that, overall, poverty among older people in Sweden remains low by international standards and that the Swedish welfare state has maintained its resilience. (RH)

ISSN: 0144686X

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

2008

Affordable clustered housing-care: a category of long-term care options for the elderly poor; by Stephen M Golant.: The Haworth Press, Inc., 2008, pp 3-44.

Journal of Housing for the Elderly, vol 22, nos 1/2, 2008, pp 3-44.

What we label as affordable clustered housing care options are making it increasingly possible for poor and frail older Americans to age in place comfortably and securely in residential-like settings combining both affordable shelter and long-term care. The hallmark of these housing arrangements is their sizeable population clusters of low-income frail people in need of supportive services. Despite their greater availability and the competing factors underlying their growth, the diversity of their supportive services and operations cloud their identity, resulting in uncertainty as to whether they have a common mission. In response to the need for a more careful delineation of this ageing in place option, this paper describes the distinguishing features of these hybrid settings and constructs a typology of their representative exemplars or prototypes. (RH)

ISSN: 02763893

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

Can welfare-rights advice targeted at older people reduce social exclusion?; by Suzanne Moffatt, Graham Scambler.

Ageing and Society, vol 28, part 6, August 2008, pp 875-900.

It is known that in general people of pensionable age have gained in income compared to other age groups in the British population over the last two decades, but that a substantial minority still experience relative poverty. This paper reports a small qualitative study into the effectiveness of a welfare-rights advice and acquisition service for men and women aged 60 or more years that was provided through a local primary health-care service. Additional financial and non-financial resources were obtained by accessing previously unclaimed state-welfare benefits. It was found that these significantly improved the participants' quality of life. Fourteen of the 25 participants received some type of financial award as a result of the service offered, with the median income gain being £57 per week. The impact of additional resources was considerable and included: increased affordability of necessities and occasional expenses; increased capacity to cope with emergencies; and reduced stress related to financial worries. Knowledge of and access to welfare-rights services also appeared to have a positive effect. It is argued that a level of material resources about a basic level is necessary for social relations and for accessing services and civic activities, and can reduce social exclusion among older people. (KJ/RH)

ISSN: 0144686X

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

The care crunch: [Low earners and social care]; by Resolution Foundation. London: The Resolution Foundation, 2008, 2 pp.

Research carried out by the Resolution Foundation demonstrates how low earners are caught in a "care crunch". This means that they are on "cliff edge" of care eligibility criteria, with around 70% of low earners likely to be ineligible for any state funding. Yet their low incomes (only just above those qualifying for free or subsidised care) mean privately purchased care can be unaffordable. Low earners are more likely to be informal carers of elderly relatives, with an increasing burden placed upon them due to local authority rationing. Cutting back or giving up work can have a huge impact on a low earning family's quality of life and future retirement prospects. This briefing is a summary of the Foundation's work to date. (KJ/RH)

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

Changing UK : the way we live now: [A report commissioned by BBC regions and nations]; by Danny Dorling, Dan Vickers, Bethan Thomas (et al), Social and Spatial Inequalities (SASI) Group, Department of Geography, University of Sheffield.: Electronic format only, December 2008, 105 pp.

As people have moved about Britain, neighbourhoods have become more socially distinct in 2008 compared to the more mixed picture of 40 years ago. This report uses census and other data to look at Britain divided in five ways. First, simple "geographical inequalities" such as population change and house prices. Second, "demographic segregation": from 1971 to 2006, the population by age between areas has become more segregated, and happened most quickly from 2001 to 2006. Third, "economic polarisation": geographical polarisation between rich and poor has increased since 1968. Fourth, "social fragmentation" indicates an increase in the degree to which people appear to be socially isolated by area in Britain since 1971. Lastly, "political disaffection" notes an increase in the proportion of the population abstaining from voting in general elections since 1966. The authors report results for Britain as a whole, for the 14 BBC TV areas, for 45 BBC Radio station areas, and large cities or areas of Scotland and Wales which do not have radio stations. Where possible, Radio Ulster and Northern Ireland TV are included. Maps (or cartograms) and graphs are used throughout the report to help explain the underlying data. (RH)

From : Download report from website: <http://sasi.group.shef.ac.uk/research/changingUK.html> BBC website: <http://news.bbc.co.uk/1/hi/uk/7755641.stm>

Debt and older people: executive summary; by Help the Aged; Personal Finance Research Centre (PFRC), University of Bristol. London: Help the Aged, 2008, 5 pp.

While the propensity to borrow money declines with age, there is increasing concern that problems arising from borrowing could have a negative impact on efforts to tackle pensioner poverty. Help the Aged, with financial support from Barclays, commissioned the Personal Finance Research Centre (PFRC) to undertake a detailed study of the extent and nature of borrowing and financial difficulties among people aged 50+. The research involved analysis of five nationally representative social survey datasets and a review of the existing research literature. This summary outlines findings on unsecured credit use, mortgage holding, and financial difficulties among older people. Help the Aged's recommendations include financial education for all; introducing age discrimination legislation covering goods and services; and efforts to tackle pensioner poverty through the Social Fund and the government's Public Service Agreement 17. This publication is part of the Help the Aged / Barclays Your Money Matters Programme, which is designed to improve the skills, confidence and financial situation of older people, by providing basic money management and debt advice. (RH)

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

Differences in mortality between rural and urban areas in England and Wales, 2002-04; by Andrea Gartner, Daniel Farewell, Frank Dunstan (et al).

Health Statistics Quarterly, no 39, Autumn 2008, pp 6-13.

This article examines differences in mortality between rural and urban areas in England and Wales in the years 2002-04 using the Rural and Urban Area Classification 2004. The analysis includes adjustment using the Index of Multiple Deprivation 2004 and Welsh Index of Multiple Deprivation 2005 to investigate whether mortality differences between rural and urban areas could be explained by differences in the distribution of deprivation. (KJ/RH)

ISSN: 14651645

From : <http://www.statistics.gov.uk>

Doing a bit more for the poor?: social assistance in Latin America; by Peter Lloyd-Sherlock.

Journal of Social Policy, vol 37, part 4, October 2008, pp 621-639.

Social assistance programmes involving cash transfers to poor and vulnerable households have become a major focus of development policy in recent years. This article compares the experiences of three such programmes in Latin America: Oportunidades in Mexico, Jefes y Jefas de Hogares in Argentina, and Brazil's social pension. Particular attention is given to each programme's administrative effectiveness, as well as their impacts on poverty, human capital, and household and gender dynamics. More broadly, the article assesses whether these schemes live up to their billing as 'best practice' for developing countries, and how they relate to wider shifts in the political economy of welfare provision. It concludes that experiences have been mixed, that claims about positive outcomes are sometimes exaggerated, and that the potential of these programmes to substantially re-orientate welfare systems and promote equitable public policies remains limited. (KJ/RH)

ISSN: 00472794

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

Effect of financial strain on mortality on community-dwelling older women; by Sarah L Szanton, Jerilyn K Allen, Roland J Thorpe (et al).

Journals of Gerontology: Series B, Psychological Sciences and Social Sciences, vol 63B, no 6, November 2008, pp S369-S374.

It is well established that low socioeconomic status is related to mortality. The authors used the US Women's Health and Aging Studies I and II of community-dwelling older women aged 70 to 79, to examine the extent to which financial strain was associated with increased mortality risk in older women, and whether the relationship differed by race. Cox proportional hazards models were used to estimate the effect of financial strain on 5-year mortality rates. Women who reported financial strain were almost 60% more likely to die within 5 years independent of race, education, absolute income, health insurance status and comorbidities than their counterparts who did not. Although race was not a predictor of mortality, the association between financial strain and mortality was stronger for African Americans than for Caucasians. (RH)

ISSN: 10795014

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

Effects of poverty and family stress over three decades on the functional status of older African American women; by Judith D Kasper, Margaret E Ensminger, Kerry M Green (et al).

Journals of Gerontology: Series B, Psychological Sciences and Social Sciences, vol 63B, no 4, July 2008, pp S201-S210.

The cumulative effects of poverty and family stressors to the later life functional status of African American women were investigated, using longitudinal data covering a 30-year period for a cohort of 553 African American women with common life experiences. Interviews were conducted with these women as young mothers, as mothers of adolescents, and in early old age (two thirds aged 60+). Women were classified as high, usual, or low functioning by using physical and mental health indicators. Both the timing and duration of poverty and family stressors were examined. Initially, these women were largely healthy, but health declines were steeper and occurred earlier for those who were low functioning in later life. Persistent poverty was detrimental to functioning at older ages, as was persistent family stress. Women who left poverty early did not differ in later life functioning from women who were never poor. Despite similar earlier life circumstances and health, there was substantial heterogeneity in functioning in early old age. Long-term poverty and family stress were strongly associated with being low functioning. Early poverty and transient family problems did not have lasting health effects, underscoring the plasticity of human development and the importance of interventions that can alter life course trajectories. (KJ/RH)

ISSN: 10795014

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

Employment hardship among older workers: does residential and gender inequality extend into older age?; by Tim Slack, Leif Jensen.

Journals of Gerontology: Series B, Psychological Sciences and Social Sciences, vol 63B, no 1, January 2008, pp S15-S24.

The realities of a rapidly ageing society make the employment circumstances of older workers an increasingly important social issue. The authors examine the prevalence and correlates of underemployment among older Americans, with a special focus on residence and gender, to provide an assessment of the labour market challenges facing older workers. Data was analysed from the (US) March Current Population Surveys for the years 2003, 2004 and 2005. Descriptive statistics were used to explore the prevalence of underemployment among older workers and developed multivariate models to assess the impact of age, residence, and gender on the likelihood of underemployment, net of other predictors. Results found clear disadvantages for older workers relative to their middle-aged counterparts, and particular disadvantages for older rural residents and women. Multivariate models showed that the disadvantages of older age held net of other predictors. The results also indicated that much of the disadvantage faced by older rural workers and women was explained by factors other than age, particularly education. In an ageing society, underemployment among older workers comes at an increasing social cost. Policies aimed at supporting older workers and alleviating employment hardship among them are increasingly in the public interest. (KJ/RH)

ISSN: 10795014

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

Engaging and empowering women in poverty; by Joseph Rowntree Foundation - JRF. York: Joseph Rowntree Foundation - JRF, July 2008, 2 pp.

Findings, 2219, July 2008, 2 pp.

The Voices of Experience project consisted of a series of workshops where women living in poverty came together to express their experiences of poverty and learn more about the policy-making process. It also enabled

them to develop policy proposals to improve their situations and present these to policy-makers. These findings outline the participatory research that was carried with women in poverty living in Birmingham, Cardiff and London. The full report, 'Women and poverty: experiences, empowerment and engagement' by the Women's Budget Group, is published by the Joseph Rowntree Foundation (JRF) and available as a free download on the JRF website. (RH)

ISSN: 09583084

Price: FOC

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

Financial inclusion in the UK: review of policy and practice; by Joseph Rowntree Foundation - JRF. York: Joseph Rowntree Foundation - JRF, July 2008, 4 pp.

Findings, 2234, July 2008, 4 pp.

Financial inclusion is the inability, difficulty and reluctance to access appropriate, so-called mainstream, financial services. The reduction of financial inclusion is a priority for the present government, because it can lead to social exclusion. This study was a review of current policies and practices aimed at reducing financial inclusion. The financial services covered include money and debt advice, financial capability, banking, affordable credit and insurance. The study concluded that, overall, the number of those without access to banking services will continue to fall, while the need to have a bank account will increase. These findings outline the study's aims and methods, and indicate those groups particularly vulnerable to financial exclusion and the services available to them. The full report (same title), by Lavinia Mitton, is published by the Joseph Rowntree Foundation (JRF) and available as a free download on the JRF website. (RH)

ISSN: 09583084

Price: FOC

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

Financial strain, negative social interaction and self-rated health: evidence from two United States nationwide longitudinal surveys; by Neal Krause, Jason T Newsom, Karen S Rook.

Ageing and Society, vol 28, part 7, October 2008, pp 1001-1024.

Three hypotheses concerning negative social interaction in later life were evaluated in this study. First, it was predicted that greater personal economic difficulty is associated with more frequent negative social interaction with social network members in general. Secondly, it was proposed that more frequent negative social interaction exacerbates the undesirable effect of personal financial strain on change in self-rated health during late life. Thirdly, an effort was made to see if some types of negative social interaction, but not others, accentuate the undesirable effects of personal economic problems on self-rated health. Data were from two nationwide US longitudinal surveys: the Late Life Study of Social Exchanges (LLSSE); and a study conducted by Krause in 1994. The data revealed that greater personal financial difficulty is associated with more interpersonal conflict. The findings further indicate that the undesirable effects of personal economic difficulty on change in self-rated health are more pronounced at progressively higher levels of negative social interaction. Finally, the data suggest that one form of negative social interaction (not getting help when it is expected) is more likely to intensify the unwanted effects of personal financial strain on self-rated health than other types of negative social interaction. (KJ/RH)

ISSN: 0144686X

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

Five types of inequality; by Ferdinand Mount, Joseph Rowntree Foundation - JRF. York: Joseph Rowntree Foundation - JRF, December 2008, 12 pp (Social evils series).

Viewpoint, 2289, December 2008, 12 pp (Social evils series).

Participants in the recent Joseph Rowntree Foundation (JRF) consultation 'What are today's social evils?' revealed a strong sense of unease about some of the changes shaping British society. This Viewpoint continues the discussion about modern "social evils" on the theme of "inequality". Ferdinand Mount takes a wide view of the causes and possible cures of injurious inequalities, looking at five overlapping types of inequalities and how to remedy them. These are: political equality (including civic equality and equality before the law); equality of outcome or result (meaning equality of income and wealth); equality of opportunity (equality of access or life chances); equality of treatment; and equality of membership in society. (RH)

ISSN: 09583084

Price: download

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

The fortune teller: a life expectancy intervention tool is now available for all local planning; by Andy Cowper. Health Service Journal, vol 118, HSJ and LGC Supplement [insert in issue 6117], 31 July 2008, pp 12-13.

A new online life expectancy intervention tool has been developed by the Association of Public Health Observatories with and for the Department of Health (DH). The tool builds on the Health Inequalities Information Tool, and is designed to support primary care trusts (PCTs) with their local delivery planning and commissioning. Specifically, the tool will help local authorities to estimate the effect on life expectancies if certain interventions - such as smoking cessation, or anti-hyperintensive or statin prescribing for those previously with undiagnosed or uncontrolled hypertension - are increased. This article looks at the tool's potential for tackling health inequalities, and draws attention to the link on the London Health Observatory's website (www.lho.org.uk/health_inequalities/health_inequalities_tool.aspx). (RH)

ISSN: 09522271

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

Globalization, women's migration, and the long-term-care workforce; by Colette V Browne, Kathryn L Braun.

The Gerontologist, vol 48, no 1, February 2008, pp 16-24.

Developed nations are increasingly turning to immigrant women to fill the need for qualified direct long-term care (DLTC) workers (i.e., those who provide personal care to frail and disabled older people). The authors examine the impact of three global trends - population ageing, globalisation, and women's migration - on the supply and demand for DLTC workers in the United States. Following an overview of these trends, the authors identify three areas with embedded social justice issues that are shaping the DLTC workforce in the US, with a specific focus on immigrant workers in these settings. The three areas are: world poverty and economic inequalities; the feminisation and colonisation of labour (especially in LTC); and empowerment and women's rights. The contradictory effects that both population ageing and globalisation have on immigrant women, source countries (e.g. the Philippines) and the LTC workforce in the US are discussed; and policy, practice and research implications and questions are raised. For policy-makers and LTC administrators in receiver nations such as the US, the meeting of DLTC worker needs with immigrants may result in greater access to needed employees, but also in the continued devaluation of eldercare as a profession. Source (supply) nations must balance the real and potential economic benefits of remittances from women who migrate for work with the negative consequences of disrupting family care traditions and draining the LTC workforce of those countries. (RH)

ISSN: 00169013

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

Growing old together: older CAB clients and debt; by Keith Dryburgh, Citizens Advice Scotland. Edinburgh: Citizens Advice Scotland, September 2008, 39 pp.

Pensioners have often struggled to live on their relatively small incomes, but many face the prospect of trying to finance large debts on a small income. The 'baby boom' generation is approaching retirement and bringing their many forms of credit and debt with them into their retirement years. This research was conducted with 64 clients in 7 Citizens Advice Bureaux across Scotland. It presents findings on the amount of debt, the impact of debt on health, debt by social grouping, debt to income ratios, and financial capability. Average total debt was £17,787. The survey questionnaire is included as an appendix. (RH)

From : Website: www.cas.org.uk

Identifying and supporting people most at risk of dying prematurely; by National Institute for Health and Clinical Excellence - NICE. London: NICE - National Institute for Health and Clinical Excellence, September 2008, 8 pp (Quick reference guide : NICE public health guidance, 15).

This quick reference guide presents the recommendations made in 'Reducing the rate of premature deaths from cardiovascular disease and other smoking-related diseases: finding and supporting those most at risk and improving access to services'. It identifies and makes recommendations regarding: adults who are disadvantaged or at risk; improving services for adults and retaining them; systems incentives; partnership working; and training issues. The recommendations have been developed for smoking cessation services and the provision of statins. (RH)

ISBN: 1846298008

From : National Institute for Health and Clinical Excellence, MidCity Place, 71 High Holborn, London WC1V 6NA. Website: <http://www.nice.org.uk/PH015>

The impact of benefit and tax uprating on incomes and poverty; by Joseph Rowntree Foundation - JRF.: Joseph Rowntree Foundation - JRF, April 2008, 4 pp.

Findings, 2218, April 2008, 4 pp.

Each year, the government decides by how much to raise benefits and tax allowances. The basis for these upratings is rarely debated, yet has major long-term consequences for the relative living standards of different groups and for public finances. A team of researchers from the London School of Economics (LSE) and the Universities of Essex, Oxford and East London considers the implications of present uprating policies, with the aim of stimulating debate on this hidden area of policy-making. The impact of different uprating systems is outlined in respect of the effects on poverty and the public purse, and the distributional effects of fiscal drag and benefit erosion. The full report (same title), is by Holly Sutherland, Martin Evans, Ruth Hancock, John Hills and Francesca Zentornio, published by the Joseph Rowntree Foundation (JRF), and also available as a free download (from www.jrf.org.uk). (RH)

ISSN: 09583084

Price: FOC

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

Johnson keeps the faith on inequalities: [life expectancy]; by Rebecca Evans.

Health Service Journal, vol 118, no 6130, 30 October 2008, pp 12-13 (Health Inequalities).

Alan Johnson has made tackling health inequalities one of his priorities. Rebecca Evans reports on an interview with the Secretary of State for Health, in which he comments on the target to improve life expectancy at birth by 10% by 2010. He is also of the opinion that age discrimination in health care should not be tolerated: everyone should be entitled to the same treatment. The value of joint working involving primary care trusts (PCTs) is emphasised. As for any future focus, Sir Michael Marmot has been commissioned to consider what the focus should be after 2010. (RH)

ISSN: 09522271

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

Life course social and health conditions linked to frailty in Latin American older men and women; by Beatriz E Alvarado, Maria-Victoria Zunzunegui, Francois Béland (et al).

Journals of Gerontology: Series A, Biological Sciences and Medical Sciences, vol 63A, no 12, December 2008, pp 1399-1406.

Gender, social conditions and health throughout the life course affect functional health in later life. This article tests two hypotheses: life course, social and health conditions are associated with frailty; and differential exposure and/or vulnerability of women and men to life course conditions may account for gender differences in frailty. Data originated from the SABE study (Salud, Bienestar y Envejecimiento - a study of health, well-being and ageing), a cross-national survey of older people living in five large Latin American cities (Bridgetown, Sao Paulo, Santiago and Havana). Frailty was defined as the presence of three or more of five criteria: unintentional weight loss (10 pounds during the past year); self-reported exhaustion or poor endurance; weakness (grip strength); function in lower extremities; and low physical activity. A pre-frail state was defined as the presence of one or two of the above criteria. Associations between frailty and social and health indicators were examined using a proportional odds ordinal logistic regression. Prevalence of frailty varied from 0.30 to 0.48 in women and from 0.21 to 0.35 in men. Childhood (hunger, poor health and poor socio-economic conditions), adulthood (little education and non white collar occupation), and current social conditions (insufficient income) were associated with higher odds of frailty in both men and women. Comorbidity and body mass index (BMI) were related to frailty, but their effect differed in women and men. Male/female age-adjusted odds of frailty varied from 1.55 (Bridgetown) to 2.77 (Havana). Differential exposure and vulnerability partially explained differences between men and women. Theoretical models to explain gender and social differences in frailty should use a life course perspective. (RH)

ISSN: 10795006

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

Livelihood Empowerment against Poverty programme in Ghana; by William Nyuni.: International Institute on Ageing (United Nations - Malta), August 2008, pp 27-29.

BOLD, vol 18, no 4, August 2008, pp 27-29.

The Livelihood Empowerment against Poverty (LEAP) programme in Ghana is a 5-year pilot programme begun in 2008 to provide social grants (direct cash transfer) to poor, vulnerable and excluded households. About one third of those benefiting are aged 65+, and this article looks at the initial impact of LEAP on those helped and their communities. (RH)

ISSN: 10165177

From : <http://www.inia.org.mt>

Lost in the money maze: how advice agencies and credit unions can help older people cope with today's financial systems; by Help the Aged; Citizens Advice Bureau; ABCUL - Association of British Credit Unions Ltd. London: Help the Aged, 2008, 20 pp.

Help the Aged has produced this toolkit as part of its "Now let's talk money" campaign, which is designed to increase awareness of the products and services available to financially excluded consumers. The campaign aims to encourage people to ask for help when they need it, as well as to inform and encourage advisers to work together to co-ordinate provision and raise awareness of such provision so that the needs of excluded people are met more effectively. This toolkit explores reasons why older people should be among the target groups for the work of advice agencies and credit unions; what barriers exist for older people accessing their services; and how service providers can break down these barriers. (RH)

Price: FOC

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

Low income elderly homeowners in very old dwellings: the need for public policy debate; by Stephen M Golant.

Journal of Aging & Social Policy, vol 20, no 1, 2008, pp 1-28.

This paper assesses whether the usually favourable depictions of older homeowners in the United States can be generalised to those who have extremely low incomes and occupy the oldest housing stock. Analysing 1999 American Housing Survey data, this paper finds that poor older homeowners in such dwellings are more likely to be demographically disadvantaged and to occupy physically deficient dwellings. This paper calls for public debate on the comparative benefits and costs of US governmental programmes that help these vulnerable older people to age in place, as opposed to offering them alternative affordable housing options. (KJ/RH)

ISSN: 08959420

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

The meaning and significance of self-management among socioeconomically vulnerable older adults; by Daniel O Clark, Richard M Frankel, David L Morgan (et al).

Journals of Gerontology: Series B, Psychological Sciences and Social Sciences, vol 63B, no 5, September 2008, pp S312-S319.

Improved understanding of the role of social context in expectations regarding ageing, and awareness of priorities for self-management could lead to improvement in self-management support and thus chronic care outcomes were this study's main findings. It was conducted using in-depth interviews in patients' homes, guided by identity theory. Analyses included reviewing audiotapes, creating and comparing field notes, coding transcripts, and identifying themes based on case summaries. Participants were 23 older vulnerable adults with incomes at or below 200% of the federal poverty level and no private insurance, and 12 older adults with private health insurance. The vulnerable sample had lower educational attainment and lower health literacy than the privately insured sample. Keeping doctor visits and taking prescription medication largely defined self-management for the vulnerable sample, but were just two of a number of roles noted by the privately insured group, who expressed health promotion as the key to healthy ageing. The vulnerable interviewees relayed few examples of healthy ageing and did not have expectations for healthful ageing. In contrast, the privately insured interviewees gave examples and had expectations of living long and healthfully into old age. (RH)

ISSN: 10795014

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

Measuring poverty in Britain as a multi-dimensional concept, 1991 to 2003; by Mark Tomlinson, Robert Walker, Glenn Williams.

Journal of Social Policy, vol 37, part 4, October 2008, pp 597-620.

While poverty is widely accepted to be an inherently multi-dimensional concept, it has proved very difficult to develop measures that both capture this multi-dimensionality and facilitate comparison of trends over time. Structural equation modelling appears to offer a solution to this conundrum, and is used to exploit the British Household Panel Study (BHPS) to create a multi-dimensional measure of poverty. The analysis reveals that the decline in poverty in Britain between 1991 and 2003 was driven by falls in material deprivation, but more especially by reduced financial stress, particularly during the early 1990s. The limitations and potential of the new approach are critically discussed. (KJ/RH)

ISSN: 00472794

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

A minimum income standard for Britain: what people think; by Joseph Rowntree Foundation - JRF.: Joseph Rowntree Foundation - JRF, July 2008, 6 pp.

Findings, 2244, July 2008, 6 pp.

For the first time, an income standard for Britain has been produced that is based on detailed research about what people said is needed to reach a socially acceptable standard of living and to participate in society. The study compiled household budgets to calculate the minimum income standard (MIS). Combining expert knowledge with in-depth consultation with members of the public, the MIS provides a new benchmark to inform future debates on poverty and public policy decisions affecting the incomes of those worst off. For almost all household types considered, the MIS is above the threshold used to measure relative poverty - 60% of average (median) income. The MIS budgets presented are based on detailed lists of what is required by different household types. For example, a pensioner couple needs £201 a week for a socially acceptable quality of life in 2008 (after tax and excluding housing costs). The research outlined in these findings was conducted by a team at the Centre for Research in Social Policy at Loughborough University, the University of York and the Family Budget Unit. (RH)

ISSN: 09583084

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

"Misunderstanding" chronic poverty?: exploring chronic poverty in developing countries using cross-sectional demographic and health data; by Shailen Nandy.

Global Social Policy, vol 8, no 1, April 2008, pp 45-79.

This article examines the issue of chronic (i.e long-term) poverty in developing countries. It presents a method for estimating chronic poverty that uses cross-sectional data for Uganda, and suggests that researchers need not rely solely on longitudinal or panel data. As such data are unavailable for most developing countries, the method outlined here provides an opportunity to expand our understanding of the distribution and pattern of chronic poverty in many more countries. The article also shows how the methods used to estimate the number of chronically poor in developing countries in the 2005 Chronic Poverty Report contain errors that render them serious underestimates. The problem of chronic poverty is therefore considerably more pressing and more widespread than is currently thought. (KJ/RH)

ISSN: 14680181

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

Monitoring poverty and social exclusion 2008; by Guy Palmer, Tom MacInnes, Peter Kenway, New Policy Institute; Joseph Rowntree Foundation - JRF. York: Joseph Rowntree Foundation - JRF, December 2008, 6 pp.

Findings, 2338, December 2008, 6 pp.

This report marks the tenth anniversary of the first edition of 'Monitoring poverty and social exclusion'. Built around a set of indicators constructed using the latest government data, the report assesses the record across a wide range of subjects, from low income to exclusion from services. It effectively provides a picture of the state of poverty and social exclusion in the UK just before the onset of the recent economic downturn. The authors conclude that while several headline indicators show early momentum has not been sustained, this pattern is by no means the norm. Eight of the 56 statistics measured over the last 10 years relate to older people. While performance has improved in that time on the indicators "single income pensions in low income households" and "low income households without a bank account", performance has worsened on the indicators "pensioners not taking up benefits to which they are entitled", and "people aged 75+ being helped by social services to live at home". The full report on which these findings are based, is published by the Joseph Rowntree Foundation (JRF), or available as a free download (at www.poverty.org.uk or www.jrf.org.uk). The first named website holds the latest data as well as detailed analyses for Scotland, Wales and Northern Ireland. (RH)

ISSN: 09583084

Price: FOC

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

Neighbourhood deprivation and incident mobility disability in older adults; by Iain A Lang, David J Llewellyn, Kenneth M Langa (et al).

Age and Ageing, vol 37, no 4, July 2008, pp 403-410.

Living in a deprived neighbourhood is known to have adverse effects on individual health and is associated with self-reported difficulties for older people. This study uses data for 4148 participants aged 60+ from the English Longitudinal Study of Ageing (ELSA); neighbourhood deprivation was measured using the Index of Multiple Deprivation (IMD), 2004. Neighbourhood deprivation had a statistically significant effect on physical function,

following adjustment for individual socio-economic factors, health behaviours and health status. Compared to those living in the least deprived 20% of neighbourhoods, those in the most deprived neighbourhoods had a high risk ratio (RR) of incident self-reported mobility difficulties of 1.75 and RR of incident-impaired gait speed of 1.63. In adjusted models, 4% of older people in neighbourhoods in the least deprived 20% had incident mobility difficulties over a 2-year period, whereas 13.6% of older people had incident mobility difficulties in neighbourhoods in the most deprived 20%. Older people living in deprived neighbourhoods are significantly more likely to experience incident mobility difficulties than those in less-deprived neighbourhoods. The mechanisms underlying this relationship are unclear and research to identify mechanisms and appropriate interventions is needed. (RH)

ISSN: 00020729

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

Old age pensions, poverty and dignity: historical arguments for universal pensions; by Nanna Kildal, Stein Kuhnle.

Global Social Policy, vol 8, no 2, August 2008, pp 208-237.

The article refers to studies indicating that universal old age pension programmes alone or in combination with earnings-related schemes are conducive to poverty alleviation and less income inequality. Universalism matters, but few countries in the world have introduced universal old age pension programmes. This article does not research this apparent paradox, but asks the empirical question of whether poverty was a prime concern and reflected in arguments used in favour of universal old age pensions when such programmes were introduced historically. The article looks at the arguments for establishing universal old age pensions in three selected countries, all belonging to the group of pioneer countries in this respect: Canada, Mauritius and Norway, which introduced universal pensions in the 1950s. Historical arguments for universal pension systems in these countries are presented and compared. The ambition to reduce poverty was an important motivation in two of the countries, but the main consideration cutting across all three countries was the moral aversion to means testing and the desire to achieve fairness and respect to human dignity. Another argument found in all three countries was the pragmatic one that a universal scheme would lead to a reduction of the administrative cost of old age provision compared with a system based on means testing. (RH)

ISSN: 14680181

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

Old-age pensions in Spain: recent reforms and some of their consequences for the risk of poverty; by Sebastián Sarasa.

Social Policy & Administration, vol 42, no 2, April 2008, pp 197-210.

The starting point of this study is based on the supposition that the successive reforms carried out on the Spanish system of old-age pensions since the 1980s have altered both the intergenerational distribution of income and the risk of poverty for the older population group. The first part of this article outlines how demographic factors and personal incomes affect the risk of poverty. The second part focuses attention on the mediating role played by the social security system in the distribution of intergenerational income, and underlines how the adoption of a longitudinal viewpoint of the intergenerational positions helps to understand the development of the risk of poverty. The third part describes in brief the successive reforms that were carried out on the Spanish retirement pensions regime. Finally, an analysis of the evolution of the personal incomes of older and younger generations has been made, based on the data collected by the European Community Household Panel from 1994 to 2001. This analysis suggests that the reforms have increased the risk of poverty among the over 60s owing to a combination of two factors. Firstly, there has been an increasing tendency among the over 60s to stop working completely, which has reduced job earnings especially for men aged between 60 and 70. Secondly, of more importance, there has been the failure of public pensions to keep pace with the increase in the standard of living, though it is true that they have helped maintain the average purchasing power of the less well-off old-age pensioners. (KJ/RH)

ISSN: 01445596

On eliminating social injustice: opinion; by Michael Marmot.

Health Service Journal, vol 118, no 6130, 30 October 2008, p 15 (Health Inequalities).

The author chaired the World Health Organization (WHO) Commission on the Social Determinants of Health (see www.who.int/social_determinants) which pointed to large disparities in life expectancy in Glasgow: there is a 28-year gap between the city's most and least salubrious areas. Although there have been improvements in health in the UK, a major challenge is to deal with persisting and increasing inequities. These should be tackled by universal access to high quality care; advocacy to promote health equity; and measurement, evidence and training. (RH)

ISSN: 09522271

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

Opportunity and aspiration: two side of the same coin?; by Chris Creegan, Joseph Rowntree Foundation - JRF. York: Joseph Rowntree Foundation - JRF, December 2008, 12 pp (Social evils series).

Viewpoint, 2285, December 2008, 12 pp (Social evils series).

Participants in the recent Joseph Rowntree Foundation (JRF) consultation 'What are today's social evils?' revealed a strong sense of unease about some of the changes shaping British society. This Viewpoint continues the discussion about modern "social evils" on the theme of "inequality". Chris Creegan is Deputy Director of the Qualitative Research Unit at the National Centre for Social Research (NatCen). He argues that until we can reconcile the problems of excessive individualism, consumerism and greed at the heart of contemporary society, life opportunities will continue to be lost, limited and wasted. Examples discussed include opportunities lost for older people, whose needs have become invisible compared to those at other stages of life; and the limited opportunities afforded to carers. (RH)

ISSN: 09583084

Price: download

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

(Also available at <http://www.socialevils.org.uk>)

Out of sight, out of mind: social exclusion behind closed doors; by Miranda Yates, Andrew Harrop, Patrick South (et al), Age Concern England - ACE. London: Age Concern England, 2008, 41 pp.

Age Concern England (ACE) commissioned Dr Panayotes Demakakos of University College London (ULC) to analyse data from the English Longitudinal Study of Ageing (ELSA), a recently established survey designed to track the ageing process from age 50+. The statistics in this report use the definition of social exclusion developed in the study, 'The social exclusion of older people: evidence from the first wave of the the English Longitudinal Study of Ageing (ELSA) - final report' (Social Exclusion Unit, 2006). This report uses data mainly from the first wave of ELSA (2002), to look at the characteristics of the 7% of people aged 50+ who are severely excluded, in three or more of seven dimensions identified in that study. Case studies are presented for four at-risk groups: those aged 80+ and living alone; the recently bereaved; those living in unfit housing; and those with limited capacity to make their own decisions. ACE makes recommendations that relate to independent advocacy, social contact and independence, and comments on the lack of government progress since 'A sure start to later life' was published. (RH)

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

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

Poverty and social development: special issue; by Imelda Dodds (ed).

International Social Work, vol 51, number 4, July 2008, pp 435-572 (whole issue).

In this special issue of International Social Work, the guest editor comments on recent statistics that indicate the scale of poverty worldwide, given the price increases for key food staples since the beginning of 2008. Articles review the long term and recent history of poverty alleviation. Examples discussed include: micro credit and microfinancing; and the Basic Income Earth Network (BIEN) and the basic income guarantee. Some articles are country studies of poverty alleviation: Nigeria, India and South Africa. Other articles provide critiques of specific issues: the Millennium Development Goals; the effect of globalisation on the unemployed in South Africa; neo-liberalism; and challenges by the poor to corrupt governance. The role that social workers can and should play in bringing the voice of people living in poverty into policy, planning and interventions is also discussed. (RH)

ISSN: 00208728

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

Poverty dynamics and social exclusion: an analysis of Norwegian panel data; by Espen Dahl, Tone Flotten, Thomas Lorentzen.

Journal of Social Policy, vol 37, part 2, April 2008, pp 231-250.

This article aims to examine the relationship between poverty and social exclusion in a dynamic perspective. The authors look at two dimensions of social exclusion (lack of friendship relationships and lack of participation in civic organisations), and scrutinise two aspects of poverty: poverty duration (that is, "previously poor, recently poor, recurrent poor and permanently poor"); and poverty graduation (defined as 50, 60 and 70 per cent of median income). For income, panel data for four waves of Statistics Norway's surveys of living conditions panel study (1997-2000) are used. For the social exclusion indicators, data are available only for one wave, the year 2000. It was found that poor people are more likely to see friends regularly than non-poor, but this is primarily caused by some third factor such as work activity or ethnicity, and not by poverty per se. With respect

to relationship to civic organisations, the poor are less likely to participate than the non-poor. This occurs regardless of where the poverty line is drawn and the duration of poverty. These results are discussed in light of current anti-poverty policies and recent theories and research on social exclusion and social capital. (KJ/RH)
ISSN: 00472794

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

Poverty indicators of the elderly in Russia; by Edward V Karyukhin.: International Institute on Ageing (United Nations - Malta), May 2008, pp 7-13.

BOLD, vol 18, no 3, May 2008, pp 7-13.

Various aspects of the social status of older people in Russia are presented: their financial condition, pension coverage, and ability to work. The article includes references to state sources of information and by commentators on poverty in Russia. (RH)

ISSN: 10165177

From : <http://www.inia.org.mt>

A qualitative perspective of family resources among low income, African American grandmother-caregivers; by Gaynell Marie Simpson.: The Haworth Press, Inc., 2008, pp 19-41.

Journal of Gerontological Social Work, vol 51, issue 1/2, 2008, pp 19-41.

This ethnographic study describes a group of 7 low-income, African American, grandmother-caregivers' perceptions of family resources. An ethnographic design, enhanced by a genogram, captured those who were available and unavailable to provide support to the grandmother. The analysis used a constant comparative method to thematically capture grandmothers' perceptions of family support resources as absent, unavailable, dependent, and reliable support, and the circumstances that led to that status. The findings reveal that many African American grandmothers are rearing children with little family support, owing mainly to the devastation of negative social and economic conditions. The results suggest areas for improvement in social work assessment and intervention. (KJ/RH)

ISSN: 01634372

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

Race, socioeconomic status, and health in life-course perspective: special issue; by Scott M Lynch (ed).

Research on Aging, vol 30, no 2, March 2008, pp 127-273.

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

Regional differences in male mortality inequalities using the National Statistics Socio-economic Classification, England and Wales, 2001-03; by Veronique Siegler, Ann Langford, Brian Johnson.

Health Statistics Quarterly, no 40, Winter 2008, pp 6-17.

This article represents the first use by the Office for National Statistics of the National Statistics Socio-economic Classification (NS-SEC) to analyse regional variations in inequalities in male mortality. It is part of a series of articles on social inequalities in mortality by NS-SEC. Deaths in the years 2001-2003 among men aged 25 to 64, from all causes and selected major cause groups, are examined in each of the Government Office Regions of England and in Wales. The results provide insights into both social gradients in mortality for each NS-SEC class. The socio-economic differences in mortality were more marked for men in Wales, the North East and the

North West. The regional differences in mortality were small for the most advantaged classes and greatest for the least advantaged classes. (KJ/RH)

ISSN: 14651645

From : <http://www.statistics.gov.uk>

Shelter homes for the elderly in Malaysia; by A Zaiton, S G Sazlina, V Renuka.: International Institute on Ageing (United Nations - Malta), May 2008, pp 25-32.

BOLD, vol 18, no 3, May 2008, pp 25-32.

In Malaysia, "shelter homes" are considered a place of last resort for those who are destitute, lacking financial or family support. This study describes for the first time the residents of publicly-funded sheltered homes in Peninsular Malaysia. A cross-sectional study of 1081 residents (mean age 71.8) from all 9 shelter homes were interviewed from March to September 2003. The majority of residents were males (58.6%), had no formal education (64.1%), were from rural areas (81.1%), had no family members (61.7%), and received no visits at all (85.5%) from either friends or relatives. 295 (27.3%) had mild or severe disability, 226 (20.8%) had poor vision, and 47 (4.3%) had reduced hearing. Only 447 (41.4%) were well-nourished. 707 (78.9%) were at risk of depression, and 817 (75.6%) had probable cognitive impairment. 143 (14.5) and 88 (8.1%) self-reported to have hypertension and coronary disease respectively. It is clear that these residents have multiple co-morbidities; and effective management strategies are required to ensure maintenance if not improved quality of life. (RH)

ISSN: 10165177

From : <http://www.inia.org.mt>

The solution is welfare reform; by Clare Bambra.

Health Service Journal, vol 118, no 6130, 30 October 2008, p 16 (Health Inequalities).

England has the highest health inequalities in Europe, and income inequality is the major cause. Only reform of the welfare state can achieve a fairer distribution of well-being. The author comments on differences of emphasis between the government's commitment to reducing health inequalities and the fact that the class gap in life expectancy has increased in the last 10 years. She outlines findings of a study by her institution (the Wolfson Research Institute, University of Durham) on income-related inequalities in limiting long-term illness. (RH)

ISSN: 09522271

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

Successful ageing among low-income older people in South Korea; by Soondool Chung, Soo-Jung Park.

Ageing and Society, vol 28, part 8, November 2008, pp 1061-1074.

The aim of this study was to investigate 'successful ageing' among low income elderly people in the Republic of Korea (South Korea). A sample of men and women aged 65+ who received welfare benefits and social welfare services from senior welfare centres and who had good cognition were identified and recruited by the staff of eight such centres in Seoul, the capital city of the country. Face-to-face interviews were conducted with a structured questionnaire using measures and instruments that were selected following a literature review and previous studies of low-income older people. The survey instrument was pre-tested with seven subjects to ensure the comprehensibility of the items, and 220 main interviews were conducted in the respondents' homes and at senior welfare centres during October and November 2006. Factor analysis identified three factors in successful ageing: 'a positive attitude towards life', 'success of adult children', and 'relationships with others'. Men reported higher scores on successful ageing than women. It was concluded that the concept of 'successful ageing' does apply to low-income older people in Korea, although its components have little to do with material or social success as conceived by previous studies of the general older population in either western or Asian countries. (KJ/RH)

ISSN: 0144686X

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

The time is now : towards a healthier London: London Health Commission seminar series 2007 : summary report; by Tracey Adamson, LHC Health Inequalities Forum, London Health Commission. London: London Health Commission, 2008, 6 pp (Briefing paper).

Timed to inform the London Health Commission's input to the Mayor of London's Health Inequalities Strategy, Health for London, a series of four seminars brought together academics, policy makers and practitioners to take a radical look at health inequalities, their underlying causes, and potential solutions. Themes examined by two of the seminars were: health inequalities and transport; and the measurement and promotion of well-being and evaluation of interventions designed to promote health and well-being in midlife. Full reports of the seminars and individual presentations are available on the LHC website (at <http://www.londonhealth.gov.uk/dhealth3.htm>). (RH)

ISBN: 1904340091

From : London Health Commission, City Hall, The Queen's Walk, London SE1 2AA. Email: health.commission@london.gov.uk

Towards world class commissioning?: new approaches to service delivery for people facing social exclusion; by Richard Kramer.

Journal of Integrated Care, vol 16, issue 3, 2008, pp 3-7.

Persistent and particular health and social care challenges face socially excluded groups and communities in the more deprived areas of the country. Involvement of communities in design and delivery of services, including those whose voices have traditionally not been heard, will help to shape services to meet better their health and well-being needs. Effective community-led commissioning can empower individuals and communities by giving them the chance to voice their needs, while local ownership of the process will increase the relevance of services and improve their uptake and sustainability. For commissioners, the "world class" commissioning agenda is about connecting development of services with the real requirements of communities, and increasing engagement and satisfaction with services. (RH)

ISSN: 14769018

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

The trade-off between home-ownership and pensions: individual and institutional determinants of old-age poverty; by Caroline Dewilde, Peter Raeymaeckers.

Ageing and Society, vol 28, part 6, August 2008, pp 805-830.

This article reports an analysis of European Community Household Panel (ECHP) data to test the hypothesis suggested by Kemeny (1981) and Castles (1998) of a trade-off between the extent of home-ownership and the generosity of old-age pensions. To this end, the impact is evaluated of a range of both pensions arrangements and housing policies on the risk of poverty in old age. The most important analytical innovation is the inclusion of social housing provision as an important policy alternative to the encouragement of home-ownership. Although substantial empirical support was found for the trade-off hypothesis, the findings raise several issues for discussion and further research. Firstly, it was found that neither generous pensions nor high ownership rates had the strongest poverty-reducing potential, for this was most strongly associated with the provision of social housing for older people. Furthermore, the analysis identified a group of older people who are faced with a double disadvantage, in the sense that in high home-ownership countries, those who did not possess their own homes also tended to receive low pension benefits. Although this effect arises at least partly as a result of selection - the larger the ownership sector, the more selective the group of people who do not own their homes - the high poverty risk among 'non-owners' was apparently not countered by the pension system. (KJ/RH)

ISSN: 0144686X

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

Treasury Committee's inquiry into Budget measures and low-income households: summary [of Age Concern's response]; by Age Concern England - ACE. London: Age Concern England, May 2008, 2 pp (Policy response - ref: 1208(S)).

Age Concern England (ACE) comments on issues around the impact of tax changes (e.g. abolition of the 10p tax rate) and budget measures on fuel poverty. This response to the House of Commons Treasury Committee focuses on the impact of the Budget for people aged 60+. (RH)

Price: FOC

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

Why do people think inequality is getting worse?; by Jeremy Seabrook, Joseph Rowntree Foundation - JRF. York: Joseph Rowntree Foundation - JRF, December 2008, 8 pp (Social evils series).

Viewpoint, 2288, December 2008, 8 pp (Social evils series).

Participants in the recent Joseph Rowntree Foundation (JRF) consultation 'What are today's social evils?' revealed a strong sense of unease about some of the changes shaping British society. This Viewpoint continues the discussion about modern "social evils" on the theme of "inequality". Jeremy Seabrook argues that, in the face of extraordinary imbalances in society, the myth that accumulating wealth is the supreme human purpose needs to be replaced before any improvement will occur. His paper asks how has less poverty led to more inequality; considers redefining wealth and poverty; looks at the ideology of consumerism; and asks if we can achieve sufficiency for all. (RH)

ISSN: 09583084

Price: download

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

Widening gap in life expectancy; by David Gordon, Diane Gibbs.

Health Service Journal, vol 118, no 6128, 16 October 2008, p 17.

Area-based inequalities in mortality is the most commonly used indicator of progress in reducing inequalities. This short article illustrates the continuing inequalities in life expectancy between England, Wales, Northern Ireland, the Republic of Ireland and Scotland, and points to a widening gap in life expectancy at birth between England and Scotland, based on data for 1991-93 and 2004-06. (RH)

ISSN: 09522271

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