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AGEING (GENERAL)

175/1 Beyond appearances: perspectives on identity in later life and some implications for method; by Simon Biggs.
Two areas of controversy are examined in this article, arising from contemporary debate on identity in later life. The first centres on whether adults are essentially similar regardless of age, or whether different stages of life confer different life priorities. The second addresses the management of self in later life, with specific attention being given to alternative interpretations of the relationship between interior and exterior experience. An increasing awareness of diversity in life course patterns suggests that issues concerning uniformity, distinctiveness and the uses of masquerade in intergenerational contexts should be revisited. Here, the influence of simple and complex states of mind is examined as a factor in intergenerational power, and the expression of agency in later life is discussed. These issues not only propel us forward in our understanding of gerontological phenomena, they also point to potential sources of research bias associated with specifically intergenerational contexts. Suggestions are made with respect to research training. (RH)
ISSN: 10795014
From: http://www.geron.org

ARTS AND MUSIC

(See 175/20)

ASSISTIVE TECHNOLOGY

175/2 Ten good reasons for assistive healthcare; by Tony Rice.
Developments in assistive technology and telecare are delivering real and tangible benefits to people with disabilities, and also to local authorities and healthcare providers. Evidence from the Audit Commission (contributed to the 2005 White Paper, "Opportunity age") and from the Commission for Social Care Inspection (CSCI) points to the great potential of technology in supporting independence. The author reviews ten reasons why assistive technology is key to the future of health and social care, with examples from a range of different organisations across the UK: cost savings for the National Health Service (NHS); MRSA and infections; people do not want to be institutionalised; falls; shortage of care home places; our litigious society; fitting care to the patient, not the patient to the care; early intervention; staffing costs; and solution for the future. (RH)
ISSN: 0268201X
From: http://www.gerimed.co.uk

ATTITUDES TO AGEING

(See Also 175/1, 175/15, 175/33, 175/42, 175/69)

175/3 Dignity and the older European: policy recommendations; by Andrew Edgar, Lennart Nordenfelt.
The Dignity and Older Europeans Research Group has produced a series of recommendations on policy. The authors propose that these recommendations should be considered by European legislators, national governments, professional organisations, and all institutions and practitioners who provide services for older citizens. Their policy recommendations are inspired by the data gathered from focus groups, as well as by the theoretical reflections on the concept of "dignity". This article introduces four core policy recommendations. The first concerns the rights of the older person; the second calls for the removal of ageism and ageist practices; the third concerns regulatory frameworks needed in service provision; and the fourth reflects older people's welfare entitlements. (RH)
ISSN: 14717794
From: http://www.pavpub.com
CARE MANAGEMENT


This paper reports on the organisation of care management from a longitudinal study of community care for people resettled from long-stay learning disability and psychiatric hospitals. The "12 years on" study followed up 275 people with learning disabilities and 125 with mental health problems across 12 learning disability and 8 mental health study services. The diversity of care management arrangements found at earlier points in the evaluation remained evident. Also, many of the former "care in the community" service users were excluded from mainstream care management arrangements in their localities. The difficulty of developing person-centred arrangements in learning disability and the lack of integration of the Care Programme Approach (CPA) and care management were evident. The findings and observations are placed in the wider policy and practice context, with suggestions for taking care management forward nationally and locally. (RH)

ISSN: 00453102
From: http://www.bjsw.oupjournals.org

CARERS AND CARING

(See Also 175/28)


Some 5.6 million people in Britain look after a relative or friend, and the government aims to support carers in their caring role. Many carers will be working when the need for care arises, and most wish to continue working. The Department for Work and Pensions (DWP) commissioned the Social Policy Research Unit at the University of York to conduct research designed to help ascertain what can be done to help carers to remain in work, or to return to work during and after caring responsibilities. This research summary outlines the elements of the study: a literature review was followed by qualitative research in-depth interviews with 80 carers, and focus groups with professionals from Jobcentre Plus, social services departments (SSDs) and carers organisations who work with carers. (RH)

From: Strategic Research and Modelling Division, 4th Floor, The Adelphi, 1-11 Robert Adam Street, London WC2N 8HT. Full report: Corporate Document Services, 7 Eastgate, Leeds LS2 7LY. E-mail: cds@cds.co.uk Download report: http://www.dwp.gov.uk/asd/

COMMUNITY CARE


The 1989 White Paper, "Caring for people: community care in the next decade and beyond" (Cm 849) had as the first of six objectives the provision of services to enable people to live at home whenever "feasible and sensible". This article explores who decides what is feasible and sensible, paying particular attention to power issues. It looks at decision-making when older people enter permanent care. Dementia and capacity are a specific focus. The complexities of the work for practitioners, together with their sometimes difficult working environments, engender a climate which can be counterproductive to protecting the self-determination of older people. (RH)

ISSN: 00453102
From: http://www.bjsw.oupjournals.org

CONTINENCE


Incontinence and falls are both common in older patients and account for many hospital admissions. Patients who need frequent toileting are at risk of falling. The authors suggest that while there appears to
be evidence to support an association between continence and falls, there are still a number of unanswered questions. (KJ)

DEMENTIA

(See Also 175/19, 175/37, 175/38, 175/44, 175/60)

175/8 Delirious about dementia: towards better services for patients with cognitive impairment by geriatricians; by Duncan R Forsyth (Chair), British Geriatrics Society - BGS. London: British Geriatrics Society - BGS, October 2005, 16 pp.
The British Geriatrics Society (BGS) and the Faculty of Old Age Psychiatry of the Royal College of Psychiatrists have formed a consensus group representing various specialties, with the objective of defining how geriatricians can play a more integral role in the recognition, diagnosis and management of patients with dementia. This is the group's consensus statement, which presents a model for the care of patients with dementia. It explains the need for consensus, since large and multidisciplinary teams are involved in patients management. It also covers: recognition of dementia by geriatricians; the case register system; champion-led memory services; the pharmacological treatments in Alzheimer's disease (AD); managing risk factors; and education and training. That information must cross boundaries between the different professional groups involved is emphasised. (RH)

The increased interest in issues concerning intellectual disabilities (ID) and their association with cognitive decline or impairment provides the focus for articles in this issue of Dementia: the international journal of social research and practice. Particularly reflected are issues on prevention and intervention research among people with ID who are affected by dementia in group home, care home and foster family care settings. Other articles offer a literature review of planning service provision, and using a therapy model in considering end-of-life care. (RH)

The guest editors of this issue of International Psychogeriatrics aim to renew people's interest and knowledge about some of the less frequent non-Alzheimer's causes of dementia. Papers cover a variety of topics: historical background and classification; uncommon genetic neurodegenerative disorders; infections; drugs; neurological and metabolic diseases; auto-immune and endocrinological conditions; toxic and psychiatric illnesses; and the perspective of carers of patients with dementia. (RH)

DEMOGRAPHY AND THE DEMOGRAPHICS OF AGEING

Because of declining fertility and mortality, the proportion of older people in the Indian population has risen. Although the rise has been modest - as shown by an increase in the population aged 60+ from 5.5% to 7% between 1951 and 1999 - by the latter date, India's experience with 65 million people of this age is unusual. This paper employs data on people aged 65+ drawn from the National Sample Survey, Sample Registration System and Census of India, subdividing analysis into three age groups, 60-64, 65-69, and 70+. It is shown that gender is a very important variable that influences quality of life at all ages. Of the
population aged 70+, more than 50% suffer from one or more chronic conditions. Lack of social support, the break up of the joint family system and changing lifestyles all aggravate health and nutritional problems in the oldest age group. While older people in India may have reasonable access to family care, they are inadequately covered by economic and health security. (RH)

ISSN: 09652000
From: (Editorial e-mail address) gr@ageing.ox.ac.uk

175/12 Leading causes of death in England and Wales: how should we group causes?; by Clare Griffiths, Cleo Rooney, Anita Brock.
Using routine data from deaths occurring in England and Wales, the authors examine how best to identify the leading causes of mortality, by grouping causes of death based on a list developed by the World Health Organization (WHO). The leading cause of death across all age groups depends on ways in which common diseases and external causes are aggregated or disaggregated into groups. Areas of particular debate are: the grouping or splitting of accidents by mechanism; and cancers by site within leading cause lists. These affect which causes appear in the top ten, and their order in different age groups. (RH)

ISSN: 14651645

175/13 Self reported health and mortality: ecological analysis based on electoral wards across the United Kingdom; by Dermot O'Reilly, Michael Rosato, Chris Patterson.
The authors derived three indicators of health for each of 10,604 UK electoral wards. Pooled all cause mortality rates for 2001/2 were generated for English, Scottish and Welsh wards; for Northern Ireland, data was pooled for 1998-2002. Two mortality indicators were derived from the self-report health questions in the 2001 Census: the proportion of ward respondents reporting limiting long-term illness, and the proportion reporting that their general health in the preceding year was "not good". Results obtained from this analysis suggest that self-reported health may be an unreliable way of comparing health needs between regions, and thus also raises concerns about using this indicator as a tool for resource allocation. (RH)

ISSN: 09598138
From: http://www.bmj.com

DEPRESSION

The purpose of the workshop was to help scheme managers and residents to: recognise the symptoms of depression; know what help is available; and explore the ways in which sheltered housing can reduce older people's vulnerability to depression, especially through mitigating stress factors and promoting social activity. Workshop sessions and presentations focused on the medical and social models of depression. The workshop was co-hosted by Mary Godfrey, a co-author of "Depression and older people" (Help the Aged, 2004); she provided two vignettes for participants to discuss and to identify obstacles and offer solutions. (RH)
Price: £3.00
From: Professor Peter Lloyd, School of Social Sciences, University of Sussex, Brighton BN1 9SN.

EDUCATION

175/15 The role of professional education in promoting the dignity of older people; by Janet Askham.
Quality in Ageing, vol 6, no 2, July 2005, pp 10-16 (Dignity and older Europeans, part 2).
This paper considers the education of social and health care professionals who work with and care for older people. It asks whether education can promote the dignity of older people, how this may be done, what factors may cause or impede the promotion of dignity within professional education, and what part education plays alongside other influences on care practices. Beginning with consideration of research on the nature or professional education, the paper reviews principles of professional education, cultures and methods of teaching and learning and processes of practical apprenticeship. The paper argues that there are
a number of challenges in the promotion of dignity within professional education, for example, inconsistencies in development of professional values, curriculum contradictions such as those between education and management and for direct care of older people, the balance between theory and practice, and education for practice changing real-world conditions. (RH)

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

EMPLOYMENT

(See Also 175/5)


Despite increases in the employment rate of older workers, substantial numbers still leave work ahead of the state pension age (SPA). This literature review was designed to assess the current state of knowledge about factors influencing older workers' participation in the labour market. The study analyses a range of qualitative and quantitative studies on work and retirement for those aged 50+, published in the UK between 1999 and 2005. The review identifies important gaps in the literature and policy issues to consider if the goal of extending working life is to be achieved. Such issues include minority ethnic groups, "cumulative" and "multiple" disadvantage, decision-making, training, and flexible working. For policies to be developed for extending working life, the review also suggests six areas in need of further discussion: improving choice and control in the work/retirement transition; improving training and lifelong learning; developing health interventions and improving the quality of work; improving support for women in the workplace; extending the scope of flexible employment; and providing integrated public policies to support older workers. (RH)

ISBN: 1841239178
From: Corporate Document Services, 7 Eastgate, Leeds LS2 7LY. Orderline tel: 0113 399 4040. E-mail: orderline@cds.co.uk Summary available from website: http://www.dwp.gov.uk/asd/


This qualitative study follows the 2003 quantitative research study, "Factors affecting the labour market participation of older workers" by Humphrey et al (DWP Research report, 200). This latest report presents the findings from in-depth interviews and focus groups with 30 working respondents and 41 non-working respondents aged 50-59 in three areas: Newcastle; Christchurch and East Dorset; and Walsall. The aim was to increase our understanding about older workers' decisions to leave, remain in or return to the labour market, as well as their attitudes to work, training, retirement planning and saving. Respondents identified barriers to labour market participation and re-entry, and they made suggestions as to what the government might do to encourage people work longer and promote work opportunities. Recommendations are made variously for the Department for Work and Pensions (DWP), Jobcentre Plus, and the Pension Service. The topic guides used at different stages of the research are included as appendices. (RH)

ISBN: 1841238805
From: Corporate Document Services, 7 Eastgate, Leeds LS2 7LY. Orderline tel: 0113 399 4040. E-mail: orderline@cds.co.uk Summary available from website: http://www.dwp.gov.uk/asd/

175/18 Longer working: imposition or opportunity?: midlife attitudes to work across the 1990s; by Jay Ginn, Sara Arber.


Population ageing has intensified the need to maximise employment rates among those aged 50-69, yet the perspective of middle aged men and women themselves concerning employment and retirement, and how these may shift in response to policy trends, is little understood. This research analyses attitudes to employment among British middle aged men and women, focusing on changes during the 1990s. Data from the British sample of two cross-sectional surveys of the International Social Survey Programme (ISSP), 1989 and 1997, that provide information on work orientations, are used to measure differences between
two cohorts in the same age groups. Where there were differences between the two cohorts, some indicated less positive orientation towards employment. Thus, the perceived importance of work declined significantly across the 1990s. However, the later cohort showed a slightly less instrumental attitude to work than the earlier, explained by their longer education. Those who were employed were more likely to show commitment to work, valuing a job irrespective of financial need, compared with those who were not employed. Among employed men, those in the later cohort were less likely to think their job was secure or their pay high, compared with the earlier cohort. (RH)

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

END OF LIFE CARE

175/19 Who cares?: contextual layers in end-of-life care for people with intellectual disability and dementia; by Liz Forbat, Kathryn Pekala Service.
The complexity of the relationship between intellectual disability (ID) and dementia is increasingly acknowledged. In order to operationalise a route towards person-centred care, the authors introduce W B Pearce's hierarchy model as a tool to focus the attention of policy and practice in all aspects of caregiving. This tool, which is taken from the family therapy literature, enables practitioners to examine the broad systems that impact on the delivery and receipt of care. The authors focus on its utility in scrutinising end-of-life and later stages of dementia by illustrating its use with three key areas of dementia care: nutrition, medical interventions, and the location of care provision. These areas provide some of the most challenging situations at the end stages, because of the possible treatment options. The model provides a focused approach to understanding how meaning is created within social interaction. The article draws on implications for practice and policy and has applications for practice internationally. (RH)
ISSN: 14713012
From: http://www.dem.sagepub.com

EPIDEMIOLOGY

(See 175/63)

EXERCISE

175/20 The social benefits of belonging to a "dance exercise" group for older people; by Susan Paulson.
Generations Review has highlighted the need for more research on the benefits of dance for older people. Using a combination of ethnographic and qualitative interviewing methods, this research study explored the experiences of older people who belonged to a "dance exercise" group. The social, physical and psychological benefits of participating in in such a group seem very important in older people's lives. This article focuses on the social benefits, which range from small acts of care and concern within the actual "dance exercise" sessions, to coffee mornings, shared meals and public performances of an "Item". The style of "dance exercise" besides the personality of the fitness instructor facilitated these social benefits. (RH)
ISSN: 09652000
From: (Editorial e-mail address) gr@ageing.ox.ac.uk

FALLS

(See 175/7)

GENDER ISSUES

175/21 The influence of life experiences on attitudes towards homosexuality, and their affects on the way gay men negotiate later life; by Adrian Lee.
The author synthesises and expands on his presentations at the 2004 conferences of the International Sociological Association (ISA) and the British Society of Gerontology (BSG). First, he addresses how the
life experiences of 15 older gay men (aged 57-84) have influenced their personal attitudes towards homosexuality and "coming out". He argues that non-disclosure of homosexuality can create barriers between individuals and others with whom they interact. These barriers are maintained using cover stories and developed passing and distancing techniques. It is further argued that the negative impact of these barriers contradicts established concepts in this field. Examples from interview data show how participants limit the capacity for successful ageing, by reducing the individual's ability to fully access and use health services, as well as affecting informal support networks. (RH)

HEALTH CARE

Increasing proportions of men and women are combining family (including caregiving) and work responsibilities in later life; but the relationship between role commitments and health in older age remains unclear. The authors apply logistic regression analysis to data from the Longitudinal Retirement Survey (1988-1989 and 1994), to investigate the relationship between multiple role occupancy: cross-sectionally in 1988-89 and health status in 1994; retrospectively over the respondent's lifetime up to 1988-89 and health outcomes in 1988-89; and retrospectively between 1988-89 and 1994, and health status in 1994. The health outcomes considered were: general health status; functional ability; and severity of disability. Overall, age does not appear to be associated with poor health. While a positive association is reported between employment and health, there were mixed results concerning the association between care-giving and health. Where adverse health outcomes were found, the parental role, alone or in combination with other roles, was most frequently related to poor health. Thus, for a nationally representative sample of mid-life men and women, the combination of caregiving with other family and work roles appears to have few negative health consequences. This research is part of a project for the Economic and Social Research Council (ESRC) Growing Older project (GO). (RH)

175/23 POPP Project profiles [Partnership for Older People]; by Department of Health - DH.: Electronic format only, 16 November 2005, 65 pp.
The Department of Health's Older People and Disability Division is leading a project 'Partnerships for Older People Projects' (POPP). The project's strategic aim is to test and evaluate innovative approaches that sustain prevention work, in order to improve outcomes for older people. Following a rigorous selection process, 19 pilot projects (to be established during 2006/07 and 2007/08) have been awarded funding. This document details the 19 pilot projects: Bradford, Brent, Camden, Dorset, East Sussex, Knowsley, Leeds, Luton, Manchester, Norfolk, North Lincolnshire, Northumberland, North Yorkshire, Poole, Sheffield, Somerset, Southwark, Worcestershire and Wigan. More details about POPP can be found on the DH website: (http://www.dh.gov.uk/PolicyAndGuidance/HealthAndSocialCareTopics/OlderPeoplesServices/OlderPeopleArticle/fs/en?CONTENT_ID=4099198&chk=5OV7NB) (KJ/RH)

HEALTH SERVICES

(See Also 175/31)

This is the second survey report based on DLA's survey of health and social care providers, results of which are given in a healthcare appendix. The emphasis is on the activity of the National Care Standards Commission (NCSC), on respondents' opinions of the inspection process, and on care providers' perceptions. The report makes recommendations on the inspection process, for example that the provision of feedback should be a legal requirement. (RH)

From: DLA Piper Rudnick Gray Cary UK LLP, India Buildings, Water Street,
HOMELESSNESS


The authors report a study of the causes of homelessness among newly homeless older people in Boston, Massachusetts, four English cities, and Melbourne, Australia. Interviews were conducted in each country with 122 or more older people who had become homeless during the last 2 years. Information was also collected from subjects’ key workers about the circumstances and problems that contributed to homelessness. Two-third had never been homeless before. Antecedent causes were: the accommodation was sold or needed repair; rent arrears; death of a close relative; relationship breakdown; and disputes with other tenants and neighbours. Contributory factors were physical and mental health problems, alcohol abuse, and gambling problems. Most subjects became homeless through a combination of personal problems and incapacities, welfare policy gaps, and service delivery deficiencies. Whereas there are nation-specific variations across the three countries, the principal causes and their interactions are similar. (RH)

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

HOUSING

(See 175/14, 175/60)

INCOME MAINTENANCE

175/26 Minimum income for healthy living: older people; by Jerry Morris, Alan Dangour, Christopher Deeming (et al), Policy Unit, Age Concern England - ACE; London School of Hygiene and Tropical Medicine, University of London. London: Age Concern Reports, September 2005, 57 pp.

A new goal for health and social policy in later life is proposed by researchers at the London School of Hygiene and Tropical Medicine. They suggest that minimum income should be guaranteed for all older people that will enable them to meet essential personal costs for healthy living, as objectively defined by current evidence. The objective of this study is to define, using available knowledge, the requisites for healthy living of people aged 65+ with no defined disability living in private households in England, and the minimum personal costs that would currently be entailed. The report considers the constituent parts of the Minimum income for healthy living (MIHL), and gives the total weekly costs for a single person or couple aged 65+. These constituent parts are estimated and assessed in turn: diet and nutrition; physical activity, health, anti-ageing and autonomy; housing; health care; psychosocial relations and social inclusion, active minds and autonomy; hygiene - personal care and the home; getting about and transport; and other costs (items such as clothing, footwear and household goods). A summary report (22 pp) is also available. (RH)

ISBN: 1903629373
Price: £10.00
From: Age Concern England, Astral House, 1268 London Road, London SW16 4ER, www.ageconcern.org.uk (Correspondence to Professor Jerry Morris, London School of Hygiene and Tropical Medicine, Keppel Street, London WC1E 7NT.)


The emergence of political economy perspectives in the 1980s led to issues of money and resources in older age being highlighted. This short article draws on secondary analysis of official statistics (e.g. the Family Expenditure Survey (FES) 2000-2001) obtained from the National Data Archive at Essex University, to explore how these issues are perceived and managed, and the implications of these management strategies for welfare policy. (RH)

ISSN: 09652000
From: (Editorial e-mail address) gr@ageing.ox.ac.uk
INFORMATION AND COMMUNICATION TECHNOLOGY

175/28 Carers' perspectives on the internet: implications for social and health care service provision; by Janet Read, Clare Blackburn.
To date, little is known about carers' experience of using online services and information. Data are reported from the Carers Online national postal survey of 3,014 adult carers and from an assisted access study involving 60 other adults who had been given training and cost-free Internet access at home. Half of the survey respondents reported having used the Internet on at least one occasion for a range of purposes related to both caring and other aspects of their lives. Major barriers to use identified by both users and non-users included lack of access to equipment and the Internet, difficulties with equipment and systems, cost, limitations on time, and lack of interest and skill. 14% of the whole sample said that nothing would encourage them to use the Internet. All of the assisted access group used the Internet for a similarly wide range of purposes. Key benefits identified included convenience, flexibility, speed and range of information available, while problems with equipment and systems and time constraints were major barriers to effective Internet usage. Findings suggest that while direct Internet access has some benefits for some carers, it should currently be only one of a range of ways of meeting their information needs. (RH)
ISSN: 00453102
From: http://www.bjsw.oupjournals.org

175/29 New technologies in the communication between grandparents and grandchildren in Spain; by Sandra Vidal, Johanna Menzinger.
New technologies in communication (NTC) - that is use of mobile phones and the internet - are not as widespread in Spain compared to other European countries. The authors report on two questionnaire surveys distributed to 180 grandchildren aged 9-19 at four different schools in Madrid, and to 118 grandmothers and grandfathers in different institutions for older people in Madrid. The study concerned the frequency and content of face-to-face indirect (i.e. telephone and NCT) contact between the two generations, and their opinions on using NCT with each other. Results indicate that the majority of communication between grandparents and grandchildren tends to be in a frequent and direct way, and less frequently by email. (RH)
ISSN: 09652000
From: (Editorial e-mail address) gr@ageing.ox.ac.uk

INSPECTION AND REGULATION

175/30 Lay assessors and care home inspections: is there a future?; by Fay Wright.
Lay people have been included in many care home inspections for the past decade. The Board of the short-lived National Care Standards Commission (NCSC) controversially decided to dispense with such lay involvement in their inspection process. The replacement body, the Commission for Social Care Inspection (CSCI), intends to include lay people in the inspection of support services in the community, but is hesitating about reintroducing them into care inspections. This paper reports on research funded by the Nuffield Foundation exploring the role of lay assessors in the inspection process at 13 care homes for older people and for adults with learning disabilities in England and Wales. The research concludes that lay assessors had a significant role in communicating with residents and staff, and in observing care home life. Their role was particularly important, as inspectors were often involved with paperwork and checking policy compliance with the national minimum standards that they were often able to spend little, if any time talking to residents or staff. It is argued that there is a considerable potential for a strengthened role for lay people in the care home inspection process. (RH)
ISSN: 00453102
From: http://www.bjsw.oupjournals.org
INTEGRATED CARE


There have been few economic evaluations of joint working between social and health care. This paper focuses on collaboration between professional providing care for people aged 75 and over, and examines the economic costs of contacts made by social workers with community nurses, GPs and older people or their carers. Two areas were studied, one where social care and primary care services were co-located, and the other with social work teams located separately from local health services. The two forms of social care location had an impact on contacts and costs but overall it was fairly small. Contact costs made up only a small amount of the overall costs of care. These findings suggest that altering the organisational arrangements for care delivery may improve the process of care delivery, but result in only minor changes to the proportion of overall resources directed to older service users. (KJ)

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


There are very few large population studies focusing on the characteristics of social care populations as a whole. This study examines a total social services adult care population, excluding residential care homes (n=646,239). 61% of this population were women (compared to the health authority population of 51%); and 62% were aged 65+ (compared to 23% of the health authority). Age groupings and gender patterns of service use are identified for different care groups. The study then examines care populations shared between social services and other agencies, identifying the amount of shared care and the characteristics of specific shared care sub-groups. 42% of the social service population were shared with the community health trust, and 19% with the mental health trust. The proportion of the social services population in contact with Criminal Justice and accident and emergency (A&E) was nearly twice that of the overall health authority population. The limitations of these data are examined and the potential of the method to inform inter-agency planning and shared care are discussed. (RH)

ISSN: 00453102
From: http://www.bjsw.oupjournals.org

INTERGENERATIONAL ISSUES

(See 175/29)

INTERNATIONAL AND COMPARATIVE

(See Also 175/3, 175/11, 175/29, 175/57, 175/64, 175/65)


The theoretical and empirical relationship between age identity and subjective well-being (SWB) is investigated in a cross-sectional context. Feeling younger than one's actual age is considered a self-enhancing illusion that contributes to SWB even beyond factors predicting age identities and SWB, such as health and socioeconomic status. As the US is more youth-oriented than Germany, age identities are expected to be more adaptive for American adults. Data are from respondents aged 40-74 who participated in the National Survey of Midlife Development in the US (n = 2,006) or the German Ageing Survey (n = 3,331). Analyses using the pooled sample reveal that feeling younger than one's actual age is related to higher levels of life satisfaction and positive affect and in lower levels of negative affect, even when controlling for sociodemographic variables. Country-specific analyses indicate that the relationship between age identity and negative affect holds only for the US. It is concluded that the cultural context needs to be included more explicitly in gerontological theories and...
research. (RH)
ISSN: 10795014
From: http://www.geron.org

This informative annual report of HelpAge International reviews their current work overseas. It carries brief articles focussing on the plight of older people in parts of sub-Saharan Africa, Tanzania, Darfur and countries across the Indian Ocean region. The respective articles on these projects are headed: "Reducing older people's poverty", "Responding to emergencies", "Raising standards of living", "Tackling the HIV/AIDS crisis", and "Strengthening civil society" in Argentina, Bolivia, Chile, Colombia, Peru; Uganda, Serbia and Albania. (KJ)
From: HelpAge International, PO Box 32832, London N1 9ZN. http://www.helpage.org

175/35 Care of Europe's older people; by Gertaud Dayé. Quality in Ageing, vol 6, no 2, July 2005, pp 21-25 (Dignity and older Europeans, part 2). The Director of EURAG (the European Federation of Older Persons) explores dignity from the viewpoint of older Europeans themselves. General recommendations concerning policies for older people are considered together with commitments included in action plans on ageing in relation to the question of to what extent these texts can be seen as a means to guarantee the dignity of the older person? The interrelatedness of recommendations concerning health, labour market and those on social protection policies are stressed, and the impact on older citizens' dignity is highlighted. The use of language is explored, as is the presentation of older people in the media and advertising and the impact on dignity. The paper also questions whether dignity, or rather the loss of dignity, is experienced similarly by all groups of older people. Is there a difference between men and women, those people from ethnic minorities and for people with a disability who are becoming old? Finally, the paper considers what kind of care we want when we are old: how do we wish to be taken care of once we are no longer able to live fully independent lives in our own homes? (RH)
ISSN: 14717794
From: http://www.pavpub.com

Asia is among the most rapidly ageing areas in the world, and contributors to this book describe how different countries are adapting to improved life expectancy. The book is arranged in five parts, the first of which looks at Asian ageing in social context - of demography, economic resources, politics and policies, and culture. Part II concerns economic status, work and retirement, variously in China, Japan, Malaysia and Korea. Contributors to Part III - on living arrangements, family caregiving and social support - focus on the situations in India, Taiwan, the Philippines and South Korea. Long-term care issues are the theme of Part IV, with papers on health insurance in South Korea, long-term care insurance in Japan, and healthcare and long-term care financing in Singapore. Part V comprises chapters on community care services in China, Australia and Japan. The inclusion of Australia is by virtue of the country's prominence in the Asia-Oceania region. The editors' introductory chapter notes that local circumstances greatly affect challenges facing older people, the influence of the major religions - Buddhism, Confucianism and Islam - should not be overlooked. (RH)
ISBN: 089503316X
Price: $74.50
From: Baywood Publishing Company, Inc., 26 Austin Avenue, PO Box 337, Amityville, NY 11701, USA. E-mail: baywood@baywood.com Web site: http://baywood.com

LEARNING DIFFICULTIES
(See Also 175/4, 175/9, 175/19)

The knowledge, experience and skills of direct care staff working in care home settings are essential to ensuring a good quality of life for a person with intellectual disability (ID) who develops dementia. Drawing on the findings of a wider study, the issues of training, support and the wider needs of staff when trying to support a resident who develops dementia are explored, specifically as relating to the role played by staff and the need to determine their experiences and related training needs. The article outlines the policy and practice context, and gives a brief description of the research methods. The authors discuss: the attitudes and practices of staff; supportive changes at an organisational level; and the knowledge and training needs of staff and specific gaps in knowledge. The authors argue that, within the policy and practice context of aiming to support residents to "age in place", support for staff is a crucial aspect of ensuring that such an approach is effective and provides a coordinated approach to planning, resourcing and support. (RH)

ISSN: 14713012
From: http://www.dem.sagepub.com

175/38 Group home care for adults with intellectual disabilities and Alzheimer's disease; by Matthew P Janicki, Arthur J Dalton, Philip McCallion (et al.).
The growing numbers of individuals with intellectual disabilities (ID) affected by Alzheimer's disease (AD) and related dementia has raised new challenges for community care providers. This article examines means of providing community group home-based care in a sample of care providers in five different countries. The aim is to identify trends that have emerged. Two samples of group homes for adults with ID affected by dementia were studied to determine: what are the physical characteristics of the homes; what physical environmental adaptations have been made in response to behavioural deteriorations expressed by residents with dementia; and what are the demands of staff resulting from dementia care. Findings revealed staffing and design of homes varied but generally abided by general practices of dementia care. Homes relied on existing resources to manage changes posed by dementia care. Programmatic and environmental adaptations were implemented to address progression of dementia, and residents with dementia presented more demands on staff time with respect to hygiene maintenance and behaviour management when compared to other residents not affected by dementia. (RH)
ISSN: 14713012
From: http://www.dem.sagepub.com

175/39 Planning ahead: meeting the needs of older people with intellectual disabilities in the United Kingdom; by Eleni Hatzidimitriadou, Alisoun Milne.
Despite the acknowledged increase in the number of older people with intellectual disabilities (ID) in the UK, the age-related health and social care needs of this population have yet to be fully understood and tackled. This article aims to review existing evidence regarding the older population with ID and their family carers, with a view to highlighting their health and social care needs, and exploring the policy and service context of their care. A particular focus will be upon identifying the core elements of effective service planning and development. Although there is some evidence of positive development, the current practice of service provision is characterised by fragmentation and limited choice of resources and specialist care. Policy aims are met variably and inconsistently applied. The research also suggests that service planning is often incoherent, with many older people with ID receiving poor quality, non-specialist care. Thus, incorporating users' and carers' perspectives in the planning process is an essential prerequisite, as is a commitment to the development of effective support across the life course of all individuals with ID. (RH)
ISSN: 14713012
From: http://www.dem.sagepub.com

LEGAL ISSUES

175/40 Review of the Mental Capacity Act 2005; by Rowena Jones.
Legislation to protect those with incapacity has built up in a piecemeal fashion, leading to concerns
about abuse, particularly of the enduring power of attorney (EPA) system. Healthcare and welfare decisions are not covered by statute law, although gaps are partially filled with case law examples. Those making such decisions on behalf of the incapacitated rely on a common law defence of necessity to justify their actions. Professional bodies and voluntary organisations dealing with mental disability have lobbied the government for years to produce clear legislation; and the Mental Capacity Bill followed 16 years of consultation. The Mental Capacity Act received the Royal Assent in June 2005. However, it is not clear as yet when the Act will come into force, and further legislative procedure is still required. The author considers the extent to which the Act is likely to be effective with issues such as decision-making, advance directives and advocacy. It is unclear, though, whether cases such as "Bournewood" (R v Bournewood Mental Health NHS Trust ex parte L) would be resolved any more satisfactorily. (RH)

ISSN: 09556036
From: http://pb.rcpsych.org

LEISURE

175/41 Are today's older people more active than their predecessors?: participation in leisure-time activities in Sweden in 1992 and 2002; by Neda Agahi, Marti G Parker.
For the older individual, leisure activities are a resource that helps to maintain health and engagement with life. This article investigates change over 10 years in the level of participation of older people in leisure activities in Sweden, and the factors associated with these changes. The data are from the Swedish Panel Study of Living Conditions of the Oldest Old (SWEOLD), nationally representative samples of Swedes aged 77 or more in 1992 and 2002. The level of participation was higher at the later date, and of four major groups of activities, social and cultural activities increased the most, while physical and intellectual activities increased only among women. Ordered logistic regressions enable variations in the level of participation by age, gender, level of education, disability and fatigue to be described. Participation in most kinds of activities, including the overall level, were more common at the younger ages (the late seventies and early eighties) and among those with full mobility and more education. Some average health was worse in 2002 than in 1992, but it cannot explain the higher level of participation. Other possible explanations, such as cohort differences, improved accessibility and changing gender roles and the implications for health promotion programmes are discussed. (RH)
ISSN: 0144686X
From: http://journals.cambridge.org/

LIFE-LONG LEARNING

175/42 Learning in later life: oldering or empowerment?: a third-age researcher's interpretation of some voices of third-age learners; by Mary Brown.
A small-scale study of learning in later life, involving in-depth interviews with three diverse sample groups (Open University students, members of the University of the Third Age, and learners in care settings) suggests that such learning can be empowering. While motives for, outcomes of, and meanings attached to, learning varied between groups, such learning can be seen as resistance to "oldering" - a Foucaultian concept, explaining how ageism is accepted by society, including by older people themselves. Such resistance was most evident among members of U3A and least in care settings. However, even there empowerment seemed a possibility. Meanings attached to learning differed between groups, suggesting an old person's way of knowing and of learning. (RH)
ISSN: 09652000
From: (Editorial e-mail address) gr@ageing.ox.ac.uk

A campaign developed by NIACE to support the DfES Skills for Life Strategy, which aims to understand the triggers and barriers adults face in starting to learn and to encourage learners to tell their story of their learning journey. This booklet is aimed at tutors of literacy, numeracy or ESOL to use with their learners. (KJ)
From: NIACE, Renaissance House, 20 Princess Road West, Leicester LE1 6TP.
LONG TERM CARE


Most people living in 24-hour care settings have dementia, and little is known about what makes long-term care a positive experience for them. This carer-led qualitative study examined working practices in 24-hour long-term care settings (including hospitals, nursing and residential homes) in North London and Essex. In semi-structured interviews, managers, nurses and care assistants were asked about work practices, such as how they coped with difficult behaviour, also about shifts, staffing levels, staff retention and training. Relatives of residents with dementia were asked about their role and perceptions of the care provided; and residents were asked for their opinions of their care. Staff reported that residents presented with increasingly challenging behaviour compared to the past, and that sometimes staffing levels and skills were inadequate. Of all the settings, hospitals had the most problems with staffing levels and retention, staff-relative relationships and staff support systems. Relatives saw their own role as positive. People with dementia of varying severity could usefully evaluate some of the services they received. Dementia-specific training and education of staff in all long-term care settings, including induction, should deal with the management of problem behaviour in dementia, and thereby improve staff fulfillment and relatives' satisfaction. The long-stay hospital may not be appropriate as a "home for life" for those with dementia. The authors recommend that long-term care settings should be able to cater flexibly for a range of residents' needs. (RH)

ISSN: 10416102
From: http://journals.cambridge.org

MEDICAL ISSUES


This paper examines the history of tools developed to assess an individual's risk of coronary heart disease. A close reading of the tools themselves is combined with an analysis of debates published in medical journals such as the British Medical Journal (BMJ) and The Lancet. These literary conversations between scientists and doctors reveal complex negotiations about the form and meaning of medical technologies that have yet to become fully "stable". Early tools were promoted as a response to the high costs of cholesterol-lowering drugs (statins), but came to embody broader attempts to shape medical practice. These include the promotion of what has been understood as evidence-based medicine and regulation by political and professional actors, as well as the spread of "risk thinking" more generally. Despite having a central place in recent British guidelines and policy, there is a surprising variety of tools in circulation, and ongoing uncertainty about their use and value. (KJ/RH)

ISSN: 01419889
From: http://www.blackwellpublishing.com


In the last 20 years, a new illness the male menopause has been introduced in popular magazines in Finland. This study investigates conceptions of the male menopause (also known as andropause) in the educational and professional literature of Finnish physicians from 1982 to 2002. The main point of interest was how the presentation of the male menopause and its treatments have changed. Published items for analysis were retrieved from the two main Finnish medical journals and from introductory gynaecology and urology textbooks using keywords for male ageing and hormones. There have been marked disagreements about the male menopause. While some authors describe it as a consequence of the decline in gonad functioning that comes with increased age, some argue that we are making a disease out of normal ageing, but its association with sexual problems has risen to prominence: libido and potency disorders have recently been identified as symptoms. The treatment provided for male menopause was androgens, about which opinions diverged, especially the effect of androgen therapy on
cardiovascular diseases and osteoporosis. New forms of testosterone treatment have been eagerly adopted, but opinions varied on the appropriate duration of the therapies. By the early 2000s, the male menopause was increasingly likened to the female menopause, with emphasis on the similar symptoms. While gerontological thinking largely sees the male menopause as an aspect of ageing and a normal condition, the andrological approach regards it as a treatable disease and its rapid adoption can be seen as a reflection of both private and public concerns about increased longevity. (RH)
ISSN: 0144686X
From: http://journals.cambridge.org/

MEDICATION

175/47 Appropriateness of use of medicines in elderly inpatients: qualitative study; by Anne Spinewine, Christian Swine, Soraya Dhillon (et al).
Quantitative studies have identified problems in the use of medicine for older patients, including inappropriate prescribing. Five acute wards for older people in five Belgian hospitals were selected for this qualitative study. 5 doctors, 4 nurses and 5 pharmacists were interviewed; two focus groups were conducted with 17 patients from two of the wards. Several factors contributed to inappropriate prescribing, counselling, and transfer of information on medicines to primary care. Firstly, review of treatment was driven by acute considerations, the transfer of information on medicines from primary to secondary care was limited, and prescribing was often not tailored to older patients. Secondly, some doctors had a passive attitude towards learning: they thought it would take too long to find the information they needed about medicines, and they lacked self-directed learning. Finally, a paternalistic doctor-patient relationship and difficulties in sharing decisions about treatment between prescribers led to inappropriate use of medicines. Several factors, such as the input of geriatricians and good communication between members of the multidisciplinary geriatric team, led to better use of medicines. (RH)
ISSN: 09598138
From: http://www.bmj.com

MENTAL HEALTH SERVICES

(See Also 175/4, 175/40)

175/48 Don't seize the day hospital!: recent research on the effectiveness of day hospitals for older people with mental health problems; by Juanita Hoe, Kunle Ashaye, Martin Orrell.
Day hospital (DH) care remains a core component of mental health services for older people. However, there has been an ongoing debate about the effectiveness and value for money of DHs in comparison to day centres (DCs). The quality and effectiveness of mental health DHs for older people was examined in a systematic search of relevant research literature (for 1995-2004) using the major electronic healthcare databases. Over the 10-year period, evidence for the effectiveness of DHs has continued to increase, but still lags behind research on DHs in general adult psychiatry and geriatric medicine. The review found that DHs appear effective at assessing and meeting needs, and that a systematic approach to evaluating quality can be used to improve services. (RH)
ISSN: 08856230
From: http://www.interscience.wiley.com

175/49 Everybody's business: integrated mental health services for older adults: a service development guide; by Care Services Improvement Partnership - CSIP, Department of Health - DH.: Electronic format only, November 2005, 68 pp (+ 5 information resources).
This set of documents is a web-based resource to support commissioners and health and social care practitioners. It should be used as a set: the Guide, five briefings and the Service Development Guide. The briefings are: Key messages for commissioners; Information for commissioners; Information for service users and carers; Information for health and social care professionals; and Information for providers. The aim of the Service Development Guide is not to develop new policies, but to improve health and social care practice at the front line, so that older adults with mental health problems, and their carers, have their needs met wherever they are in the system, without encountering discrimination.
or barriers to access. The Guide builds on the service models outlined in the National Service Framework for Older People (NSF, 2001) and supports the principles promoted in Securing Better Mental Health for Older Adults (2005). An Older People's Mental Health Mapping framework, launched in November 2005 to coincide with this Guide, will support local commissioning decisions, by providing national benchmarking for local services. This Guide is supported by a comprehensive web-based resource, which provides further information for anyone involved in health and social care for older people with mental health problems. The web site includes guidance on best practice, local service examples and links to relevant policy. (KJ/RH)

From: Download document: http://www.everybodysbusiness.org.uk

MENTAL ILLNESS

175/50 Hymns and arias: musical hallucination in older people in Wales; by Nick Warner, Victor Aziz. International Journal of Geriatric Psychiatry, vol 20, no 7, July 2005, pp 658-660. This is a phenomenological study of 30 consecutive referrals to an old age psychiatry service in South Wales of older people (aged 65+) with musical hallucinations. The study concentrates on the names of the melodies heard. Hymns and Christmas carols were the most common experience, with "Abide with me" being particularly frequent. (RH)
ISSN: 08856230
From: http://www.interscience.wiley.com

NUTRITION

175/51 Recognising under-nutrition in elderly patients; by Rajkumar Parikh, Sarah Moore. Geriatric Medicine, vol 35, no 6, June 2005, pp 27-32. Nutritional status is often a neglected aspect in the assessment and management of older patients. It is well recognised that under-nutrition makes illness more difficult to treat and prolongs recovery. In this article, the authors detail the scale and the causes of nutritional failure, and examine some methods that can help the multidisciplinary team spot those at risk. Special nutritional challenges apply, for instance, in stroke care and dementia patients. (RH)
ISSN: 0268201X
From: http://www.gerimed.co.uk

PENSIONS AND BENEFITS

175/52 A new pension settlement for the twenty-first century: the second report of the Pensions Commission; by Adair Turner (chairman), Pensions Commission. London: The Stationery Office, 2005, 459 pp. The Pensions Commission was appointed in December 2002 with the remit of keeping under review the adequacy of private pension saving in the UK, and advising of appropriate policy changes. This second report sets out the Commission's conclusions on how the UK pension system is likely to evolve if policy is unchanged, and recommendations for a new policy direction. The Commission concludes that policy is not fit for purpose and that a new settlement is needed. It therefore recommends: a new policy for earnings-related provision that recognises the inherent inadequacy of a voluntary approach, but stops short of full compulsion; and a reform of state pension provision to make it simpler to understand and less means-tested. An executive summary (pp 1-40) presents the overall conclusions and outline recommendations. The report discusses and assesses alternative policy options for redesigning the state and compulsory savings systems; tax relief as an incentive to employer and individual pension saving; facilitating later working and flexible retirement; implementing and communicating changes to the state system; and securing and maintaining a long-term consensus on pensions. (RH)
ISBN: 0117036021
From: TSO, PO Box 29, Norwich NR3 1GN. www.tso.co.uk/bookshop Also available at: http://www.pensionscommission.org.uk

policy changes. The second report sets out the Commission's conclusions on how the UK pension system is likely to evolve if policy is unchanged, and recommendations for a new policy direction. In these appendices to the report, Appendix A provides an update for Appendix A of the First report, and focuses on data developments related to pensions policy. The other appendices set out in more detail some of the analysis, research and consultation responses considered by the Commission. Also covered are: sectoral and national savings; uncertainties in life expectation projections; and models used by the Commission to inform its decisions. (RH)

ISBN: 011703603X
From: TSO, PO Box 29, Norwich NR3 1GN. www.tso.co.uk/bookshop Also available at: http://www.pensionscommission.org.uk

175/54 When do benevolent capitalists change their mind?: explaining the retrenchment of defined-benefit pensions in Britain; by Paul Bridgen, Traute Meyer. Social Policy & Administration, vol 39, no 7, December 2005, pp 764-785.
The politics of welfare retrenchment is explored. However, this paper differs from much of the current literature, by focusing not on the decisions of politicians, but those of private sector employers. In countries with a large private welfare sector, employers are major social policy players with a significant influence on the generosity of welfare provision, but the rationale behind their actions is not well understood. To explore these issues, a case study is used of the recent fundamental change in UK occupational pension provision, involving a rapid shift from defined-benefit to defined-contribution pensions. The paper shows by means of a micro-simulation of the relative performance of defined-benefit, defined-contribution and state pensions that this shift represents a significant retrenchment. It uses historical material, interview data and insights from behavioural economics to suggest that while existing explanations for this change are valuable, there are important gaps because they are based on too narrow a conceptualization of business motives. In this regard, the paper highlights the importance of herd behaviour. (KJ/RH)

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

The UK pensions system has its origins at a time when women were seen as dependent on men. While the system has evolved, changes have not kept up with women's social and economic position. This report is a compendium of evidence showing how existing systems are performing, or under-performing, and highlights the key influences on the level of women's retirement income. It examines how women's pensions have evolved and the reasons for differences between men's and women's pension entitlements. It analyses the effect on pensions of women's lifetime experiences and economic influences: education, employment and earnings; marriage and cohabitation patterns, and the demands and constraints of family and caring responsibilities; and financial planning and household decision-making. Other chapters examine women and the state pension, private pensions and investments; and the ethnic minority dimension. The report concludes with further questions to be asked in the context of the ongoing pensions debate and the forthcoming Pensions Commission proposals. (RH)
ISBN: 1843887630
From: E-mail: women-and-pensions@dwp.gsi.gov.uk
Website: http://www.dwp.gov.uk/resourcecentre/policy_strategy.asp

POLITICS

This paper looks at three key documents: the Universal Declaration of Human Rights (UDHR), the International Covenant on Civil and Political Rights, and the International Covenant on Economic, Social and Cultural Rights. Article 25 of the UDHR incorporates older people as "having the right to a standard of living adequate for the health and well-being ...", while the two International Covenants, both adopted in 1986, still make no reference to older people. The author outlines how concern by the United Nations (UN) for ageing issues came to the fore at the first World Assembly on Ageing in Vienna in 1982. Since then, the UN has included references to older people in other protocols and
covenants. In line with other conventions on the rights of the child, women, refugees and migrant workers, those on the Committee on Ageing are pressing for a convention on the rights of older people. Until then, the world's older people are broadly invisible in the human rights project. (RH)

ISSN: 09652000

From: (Editorial e-mail address) gr@ageing.ox.ac.uk

175/57 Towards an international political economy of ageing: 25th volume celebration paper; by Alan Walker. Ageing and Society, vol 25, part 6, November 2005, pp 815-839. Alan Walker’s “Towards a political economy of old age” was published in Volume 1 of Ageing and Society (part 1, pp 73-94). The present article mirrors it, and is an initial scoping exercise for a research agenda on the international political economy of ageing. It begins with a brief review of the various critiques of the political economy perspective over the 25 years since the first article. Remarkable for its absence has been criticism of the neglect of an explicit international perspective. The author argues that it is not globalisation per se that is problematic, but its dominant neo-liberal economic form. It is mainly because of this globalisation and the related growth in the power of international governmental organisations, such as the World Bank, that an international political economy of ageing is required. Most of the article is devoted to an outline of the eight key elements that might comprise a theoretical and empirical research agenda for social gerontology. These key elements are: global inequality in old age; development and ageing; globalisation and the power of international governmental organisations; transnational corporations; the nation state; supra-national regional structures; the United Nations (UN); and international non-governmental organisations (NGOs). In the spirit of the other articles that have celebrated the journal's 25th anniversary, this paper is intended to stimulate scientific debate. (RH)

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

POVERTY

(See 175/26)

QUALITY OF LIFE

175/58 The quality of life of older and younger people who receive renal replacement therapy; by Kevin J McKee, Stuart G Parker, Jennifer Elvish (et al). Ageing and Society, vol 25, part 6, November 2005, pp 903-923. The use of age as a criterion for the allocation of medical resources has been extensively debated internationally. This paper describes a study of the significance of age for the quality of life (QoL) of older and younger people with end-stage renal failure (ESRF) and in receipt of renal replacement therapy (RRT). The study has two components: a structured literature review to characterise the QoL and health status measurement instruments that have been developed for use with all or specifically older RRT patients, and a longitudinal survey of the QoL domains nominated by older RRT patients at the Sheffield Kidney Institute by their age and duration of treatment. The literature review found that no validated QoL instrument had been developed specifically for use with older RRT patients. Moreover, there was little correspondence between the QoL domains used in the instruments described in the published literature and those mentioned by the survey participants. Older and younger patients nominated different domains, and their nominations changed with the duration of treatment. No significant differences in QoL scores were found between older and younger patients, but the scores improved significantly between 6-12 and 18-24 months of treatment. The findings suggest that using older age as a criterion for refusing full access to healthcare and resources in ESRF as a simplistic and potentially erroneous strategy. (rh)

ISSN: 0144686X

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

RESEARCH

175/59 Including older people in clinical research: benefits shown in trials in younger people may not apply to older people; by Marion E T McMurdo, Miles D Witham, Neil D Gillespie. British Medical Journal, vol 331, no 7524, 5 November 2005, pp 1036-1037. Given the perception that older people are regarded as the "core business of the NHS", it might be
expected that researchers would be keen to involve older people in clinical trials. The evidence is widespread, however, that older people are excluded from clinical research. In 1997, the British Medical Journal reported that one third of research papers published in four major medical journals excluded older people without justification. The authors have repeated this analysis for papers published in 2004: almost 13% still unjustifiably excluded older people, and fewer than 5% of the papers were specific to older people. They suggest possible reasons: drop-out rates; the perception of older people as vulnerable and in need of protection from researchers; and general perceived difficulties in enrolling older people. As the greatest burden of disease falls on older people, the authors conclude that research activity should reflect that fact. (RH)

ISSN: 09598138
From: http://www.bmj.com

175/60 Researching older people with dementia in supported housing; by Simon Evans. Generations Review, vol 15, no 4, October 2005, pp 3-7. Despite calls for greater user involvement in service evaluation and development, the views and experiences of people with dementia are excluded from much research. Reasons include assumptions about levels of awareness, doubts about the validity of accounts, the challenge of informed consent and over-reliance on obtaining views by proxy from formal and informal carers. This paper explores the benefits of directly including the voices of people with dementia in research, and identifies a range of strategies for overcoming the methodological challenges of a more inclusive approach. Examples from a study that aimed to explore the characteristics and suitability of extra care housing from a user perspective illustrate ethical dilemmas and practical challenges, including the role of gatekeeper, gaining informal consent and meeting the specific needs of people with dementia as research participants. (RH)

ISSN: 09652000
From: (Editorial e-mail address) gr@ageing.ox.ac.uk

RESIDENTIAL AND NURSING HOME CARE
(See Also 175/30)

175/61 A daughter's battle: [personal struggle with a mother's right to remain in her residential home]; by Linda Goldsmith. Professional Social Work, January 2005, pp 8-9. The author describes her struggle to protect her mother's right to remain in the residential home where she has lived happily for eight years. The decision made by a social services department (SSD) that her mother should be moved to a nursing home was quashed by the Court of Appeal. The situation described relates to the artificial boundary between social and nursing care. This case highlights many important issues which the author hopes may benefit other older people, and will also be heeded by policy makers. (RH)

ISSN: 13523112
From: http://www.basw.co.uk

175/62 A review of cleanliness, hygiene and infection control in care homes for older people 2005: executive summary; by Scottish Commission for the Regulation of Care (Care Commission): Scottish Commission for the Regulation of Care, 2005, 32 pp. Why is hygiene and infection control important in care homes? What types of infections cause outbreaks within care homes for older people? And what is important to older people living in care homes? This review based on an inspection of care homes in Scotland provides answers to these questions. This report notes that most (72%) of the care homes appeared to be practising good infection control at the time of the inspection. Good practice is highlighted, for example: provision of aprons and gloves; use of disposable sacks; having clearly defined and monitored cleaning procedures; and having an identified member of staff or infection key worker who links in with the local NHS Infection Control Team. (RH)

From: Downloaded document: http://www.carecommission.com/documentuploads/142.pdf
RETIREMENT

(See Also 175/5)

175/63 Age at retirement and long term survival of an industrial population: prospective cohort study; by Shan P Tsai, Judy K Wendt, Robin P Donnelly (et al). British Medical Journal, vol 331, no 7523, 29 October 2005, pp 995-997. There is a widespread perception that early retirement is associated with longer life expectancy, and that later retirement is associated with early death. No consensus has been reached on the comparative survival or mortality of people who retire early or late. Subjects of this long-term study were past employees of Shell Oil in the US who retired at ages 55, 60 and 65 between 1973 and 2003. Those who retired early at 55 and who were still alive at 65 had a significantly higher mortality than those who retired at 65. Mortality was also significantly higher for subjects in the first 10 years after retirement at 55 compared to those who continued working. After adjustment, mortality was similar between those who retired at 60 and those who retired at 65. Mortality did not differ for the first 5 years after retirement at 60 compared with continuing work at 60. Thus, based on the evidence for this American cohort of petrochemical industry employees, early retirement at 55 or 60 is not associated with increased survival. (RH)
ISSN: 09598138
From: http://www.bmj.com

175/64 International retirement security survey: country summary - UK; by AARP Global Aging Program; Harris Interactive. Washington, DC: AARP, 21 October 2005, 28 pp. AARP has designed an international retirement security survey to explore issues that are central to retirement income security across various countries. This survey for the UK is one of ten, based on opinions about retirement security. More than 4,000 respondents aged 30-65 (about 400 in each country) were included in a telephone survey which was administered for AARP by Harris International in May/June 2005. The main aim of the study is to improve our understanding of attitudes and behaviours surrounding personal and national retirement issues, and to assess the public's confidence in having sufficient income to retire comfortably, attend to their health and long-term care needs, and live securely after leaving the workforce. Overall, results point to a lack of confidence in the government's ability to provide adequate health and retirement benefits, now or in the future. Rather, UK residents are more likely to support an across-the-board tax increase for all workers. The report includes graphs comparing UK survey results with those of the US, Canada, Australia, Germany, France, Italy, the Netherlands, Sweden and Japan. (RH)
From: Ladan Manteghi, AARP International Affairs, 601 E Street, NW, Washington DC 20049, USA. Email: lmanteghi@aarp.org Website: http://www.aarp.org

175/65 Retirement age preferences of women and men aged 55-64 years in Sweden; by Tiiu Soidre. Ageing and Society, vol 25, part 6, November 2005, pp 943-963. As people approach retirement age, many appear to reconceptualise their life outside the workplace more positively. This article presents an analysis of the factors that were associated with preferences for "early retirement" or "late exit" from paid work in Sweden. It draws upon special questions that were added to the country's Labour Force Survey of 2001 and were put to the sample of more than 1,000 self-employed people aged 55-64. Separate models of the factors influencing women's and men's preferred retirement age were calibrated, using variables that described current working conditions, whether the respondents perceived themselves as being appreciated as employees, and their attitudes to work and to private or home life. Among the findings, a positive attitude towards work motivated both men and women to stay in work beyond the normal retirement age, while positive attitudes towards private life promoted an early exit. Poor working conditions generated negative attitudes toward work (and vice versa). The strengths of various push and pull factors were gender-specific: for women, a trying job tended to push them out of the labour market; for men, a socially-rewarding job tended to keep them in the labour market. The more that men worked mainly for pecuniary reasons, the stronger their wish for an early exit. Men who felt they were unappreciated at work preferred early retirement: in some of these cases, the "push" factor was related to ageism. (RH)
ISSN: 0144686X
From: http://journals.cambridge.org/
SOCIAL EXCLUSION

175/66  Ageing in an inclusive society: a strategy for promoting the social inclusion of older people; by Office of the First Minister and Deputy First Minister, Northern Ireland. Belfast: Office of the First Minister and Deputy First Minister, Northern Ireland, 2005, 36 pp + appendices.
In June 2004, the Office of the First Minister and Deputy First Minister (OFMDFM) published a consultation document, "Ageing in an inclusive society", and this strategy document now sets out the approach to be taken to promote older people's social inclusion in Northern Ireland. It describes the need to target older people who are economically vulnerable by strengthening the support offered by Pensions Credit, employment opportunities, training and education.
The strategy highlights the importance of healthy ageing, and improving older people's lives at home. It describes the obstacles that older people experience accessing services and facilities; and identifies progress that has been made in tackling ageism (including proposed legislative protection). The strategy is accompanied by an action plan setting out actions to be taken by government departments to promote the inclusion of older people. Annex 1 notes equality issues, while Annex 2 draws attention to "rural proofing", a way of ensuring that the needs and special considerations of rural communities and areas are routinely and objectively considered as part of the policy development process. (RH)
From: Download document: http://www.ageinginni.gov.uk
OFMDFM, Corporate Services, Block E, Level 4, Castle Bldgs, Belfast BT4 3SR.

SOCIAL POLICY AND THEORY

(See Also 175/57)

Informal and formal provision of help and support to older people is discussed from a comparative welfare state perspective, with particular reference to the relationships between inter-generational family help and welfare state support. While the "substitution" hypothesis states that the generous provision of welfare state services in support of older people "crowds out" family help, the "encouragement" hypothesis predicts a stimulation of family help, and the "mixed responsibility" hypothesis predicts a combination of family and formal help and support. This paper reports from the Old Age and Autonomy: the Role of Service Systems and Inter-generational Family Solidarity (OASIS) research report. This created a unique age-stratified sample of 6,106 people aged 25-102 years from the urban populations of Norway, England, Germany, Spain and Israel. The analyses show that the total quantity of help received by older people is greater in welfare states with a strong infrastructure of formal services. Moreover, when measures of the social structure support preferences and familial opportunity structures were controlled, no evidence of substantial "crowding out" of family help was found. The results support the hypothesis of "mixed responsibility", and suggest that in societies with well-developed service infrastructure, help from families and welfare state services are accumulative, but that in familistic welfare regimes, similar combinations do not occur. (RH)
ISSN: 0144686X
From: http://journals.cambridge.org/

SOCIAL SERVICES

(See 175/24, 175/31, 175/32)

STATISTICS

175/68  Focus on older people; by National Statistics. 2nd ed: Palgrave Macmillan, 2005, (Focus On series). This report updates material in the first edition of "Social focus on older people" (TSO, 1999). This data from the 2001 Census and other sources are used to give a picture of the people aged 50+ in the UK. Charts and statistics accompany commentary on the following themes: population; living arrangements; the labour market; travel; health and caring; geographical distribution of older people in England, Scotland and Wales; housing; pensioner income; life expectancy; and lifestyles. There were
WOMEN

175/69   Older women's relations to bodily appearance: the embodiment of social and biological conditions of existence; by Alex Dumas, Suzanne Laberge, Silvia M Straka.

Our understanding of older women's relations to bodily appearance is examined and explored by looking at two different conditions of existence. Recent literature has touched on the experiences of older women in societies with youthful norms of beauty, but the diversity of older women's experiences has been little explored, and there has been little dialogue between theoretical writing and empirical research on the topic. This article is part of an empirical study of older women's relations to bodily appearance, in which Pierre Bourdieu's sociological theory is applied, particularly the concept of habitus to the body. Qualitative, semi-structured interviews were conducted with 51 francophone women aged 65-75 from working class and affluent neighbourhoods of Montreal (Quebec, Canada). The findings showed clearly that, despite the social differentiation associated with variations in economic and cultural capital, older women's relations to bodily appearance converged as they aged. Two previously unidentified and overlapping processes of attitudinal change were recognised: differentiation by social class; and convergence with increasing age. The embodiment of women's social and biological conditions of existence are discussed in the context of personal ageing. The notion of age-habitus is introduced to explain how older women maintain their social value in the context of omnipresent youthful ideals of beauty for western women. (RH)

ISSN: 0144686X
From: http://journals.cambridge.org/
CALENDAR OF COURSES AND CONFERENCES

All contributions to this section of New Literature on Old Age will be welcome.

There are now hundreds of courses, conferences, training events, workshops etc which are held throughout the year about older age issues. A fuller listing is available on AgeInfo CD-ROM/Web.

International Training Programmes 2006:
International Institute on Ageing, United Nations - Malta
Four short programmes are on offer between February 2006 - November 2006 in either: Social gerontology; Economic and financial aspects of ageing; Geriatrics; Demographic aspects of population ageing and its implications for socioeconomic development, policies and plans. There is also a post-graduate Diploma in Gerontology and Geriatrics run by the European Centre of Gerontology and Geriatrics, University of Malta, which will run from October 2006 to June 2007.
Organised by: International Institute on Ageing, United Nations - Malta
Venue: International Institute on Ageing, United Nations - Malta, United Nations - Malta
Location: Valletta, Malta
Details: The Director, International Institute on Ageing, 117 St Paul Street, Valletta VLT 07, MALTA
Tel: (356) 2124 3044/5/6, Fax: (356) 2123 0248

1-6 February 2006

3rd International Conference on Ageing, Disability and Independence
Organised by: University of Florida; AOTA - American Occupational Therapy Association
Location: St Petersburg, Florida, US

2 February 2006

Listening to Older People: Securing educational opportunities for older people
Older people have been the focus of the Government's attention as it strives to create coherent and joined-up policies and actions to improve their quality of life. Opportunity Age - meeting the challenges of ageing in 21st Century (March 2005) spelt out the Government's intentions.
Organised by: NIACE
Venue: The Resource Centre, 356 Holloway Road
Location: London, England
Details: Gurjit Kaur, NIACE Conferences and Courses Office, Renaissance House, 20 Princess Road West, Leicester, LE1 6TP
Tel: +44 (0)116 204 4291, Fax: +44 (0)116 254 8368, Among them is education! This event is relevant to all education & training funders, providers and policy makers, people from all the age movements and age representative organisations as well as older learners and older people wishing to engage in learning.

6 February 2006

The Political & Regulatory Environment for Care Homes & Homecare
This conference will shed light on the political and practical realities of the regulatory environment in which providers of care homes and home care services exist.
Speakers: Chair: Gillian Crosby (CPA Director). Jonathan Phillips (CSCI); Prof. Edward Peck (Univ. of Birmingham); Peter Grose (Lester Aldridge Solicitors); Colin Angel (UKHCA); Sukhvinder Stubbs (Better Regulation Taskforce); Daniel Blake (AEA); Mike Wardle (CSCC).
Organised by: Laing & Buisson
Venue: Mayfair Conference Centre, 17 Connaught Place W2
Location: central London, England
Details: Sally Houston, Laing & Buisson (Conferences) Ltd, 29 Angel Gate, City Road, London, EC1V 2PT
Tel: +44 (0)20 7923 5348, Fax: +44 (0)20 7841 0048

7 February 2006

Falls Prevention in Older People
A practical guide to developing a positive approach to falls prevention.
Speakers: Chairman: Professor Chris Todd (Director, ProFaNE and University of Manchester); Prof. Lucy Yardley (Southampton); Pamela Holmes
(HtA); Kina, Lady Avebury; Jackie Riglin (Cambridge PCT); Dr Andrew Burnett (Barnet PCT); Diane Brennan (S Liverpool PCT); and others

Organised by: Healthcare Events
Venue: The Royal Society
Location: London, England
Details: Healthcare Events, 2 Acre Road, Kingston, Surrey, KT2 6EF
Tel: +44 (0)20 8541 1399, Fax: +44 (0)8547 2300

7-8 February 2006

Your Future Workforce: Skills for Care Conference 2006
Bill Kilgallon Chief Executive, SCIE;
Speakers: Paul Snell Director of Inspection, Regulation & Review, CSCI;
Organised by: Pavilion
Venue: Jarvis Piccadilly Hotel, Manchester
Location: Manchester, England
Details: Customer Service Team, Freepost RLUZ-ATEU-RYUZ, Pavilion, Richmond House, Richmond Road, Brighton, BN2 3RL
Tel: 0870 890 1080, Fax: 0870 890 1081,
achieved more quickly, and how the strengthening of management development and better leadership training can support improvements to care provision., Liam Byrne MP Parliamentary Under Secretary of State for Care Services;, Andrea Rowe Chief Executive, Skills for Care;

8 February 2006

NAPA Sharing Day: The Whole Home Approach
A NAPA certificated training day, contents:
Motivating your colleagues, dealing with staff issues, showing and sharing.
Organised by: National Association for Providers of Activities for older people (NAPA)
Venue: Friends House, Euston Road
Location: London, England
Details: Sue Trischitta, NAPA, Bondway Commercial Centre, 5th Floor Unit 5.12, 71 Bondway, London, SW8 1SQ
Tel: +44 (0)20 7831 3320, Fax: +44 (0)20 7735 9634

9-12 February 2006

The Aging Male: 5th world Congress
Organised by: CSSAM/ISSAM North American Congress
Location: Salzburg, Austria
Details: The Secretariat of the Aging Male 2006 Congress, c/o Kenes International, 17 rue du Cendrier, PO Box 1726, CH-1211 Geneva 1,

Switzerland
Tel: +41 22 908 0488, Fax: +41 22 732 2850

17 February 2006

Ethical Issues in Patients with Dementia
Half day workshop led by Dr Donald Portsmouth and Bernie Keenan to look at the issues of individual autonomy and risk management involved in the care of patients with dementia. The implications of the Mental Capacity Act 2005 will also be considered.
Organised by: Institute of Ageing and Health (IAH) - West Midlands
Venue: Birmingham Medical Institute
Location: Edgbaston, Birmingham, England
Details: Administrator, Institute of Ageing and Health - West Midlands, Moseley Hall Hospital, Alcester Road, Moseley, Birmingham, B13 8JL
Tel: +44 (0)121 449 8360, Fax: +44 (0)121 442 3663

21 February 2006

Counsel and Care Annual Conference: Power to Older People, Making Advice and Independent Advocacy Available to All
This national one day conference will bring together all those who provide services to older people social services, care managers, pensions and benefits offices, advocacy groups, and charities to explore best practice to raise the quality and coherence of information and advice.
Speakers: Chair: Kim Catcheside (Social Affairs Correspondent, BBC). Speakers: Mark Heholt (DWP); Janet Walden (DH); Professor Norma Raynes (JRF); Stephen Burke (Counsel & Care CE); James Reilly (ADSS); Mervyn Eastman (BGOP); John Miles (OPAAL); Luke O'Shea (ODPM).
Organised by: Neil Stewart Associates supported by the DWP, DH and the ODPM
Venue: Inmarsat Conference Centre
Location: London, England
Details: PO Box 39976, 2nd Floor, 1 Benjamin Street, London, EC1M 5YT
Tel: +44 (0)20 7324 4330, Fax: +44 (0)20 7490 8830, Delegates will hear from a high calibre line up of speakers who will explore how to improve advice and advocacy services to support the delivery of individual budgets. The event will also examine recommendations set out in the Independence, Well being and Choice Green Paper and subsequent White Paper; as well as DWP s Opportunity Age. Speakers will also address issues of joint working, consultation, finding, quality and skills.
23 February 2006

**2006 Annual Extra-Care Housing conference**

Keynote presentation: Liam Byrne MP, Parliamentary Under Secretary of State for Care Services. Ninth annual Extra-Care conference aims to identify the key issues in integrated care and housing, to facilitate open discussion between speakers and delegates and to encourage informal contacts between different sectors throughout the day.

*Speakers:* Chair: John Belcher, Chief Executive, Anchor Trust.

*Organised by:* Laing & Buisson

*Venue:* Radisson SAS Portman Hotel

*Location:* London, England

*Details:* Laing & Buisson (Conferences) Ltd, 29 Angel Gate, City Road, London, EC1V 2PT

*Tel:* +44 (0)20 7923 5348, *Fax:* +44 (0)20 7841 0048

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24 February 2006

**Planning, Commissioning & Delivering Integrated Services for Older People**

Planning, Commissioning & Delivering Integrated Services for Older People is based on extensive research with those involved in planning, commissioning and delivering services for older people, and against the backdrop of the new policy context. This conference aims to examine through case studies, fine-grained analyses and high-level presentations how best to build a strategic, whole-systems approach to the integrated provision of older people's services.

*Speakers:* Chair - David Walden (Director of Strategy, CSCI). Ruth Eley (DH); Janet Crampton (DH), Jo Williams (Mencap); Eryl Davies (Bucks CC); Guy Robertson (POPP Lead, DH); Sheila Bremner (Cambridge City and South Cambs PCT).

*Organised by:* Capita Conferences in association with Centre for Policy on Ageing

*Venue:* central London (tba)

*Location:* central London, England

*Details:* 17 Rochester Row, London, SW1P 1LA

*Tel:* +44 (0)20 7808 5252 or 5283, *Fax:* +44 (0)870 165 8989

27 February 2006

**Building our Futures**

The event will culminate in the launch of our new planning Navigator for local and sub-regional planners tasked with creating housing and community strategies for tomorrow’s older people. The Navigator is a 20 page booklet which seeks to identify sources of local demographic data and facilitate conclusions as to older persons housing needs based on future population projections. We have drawn upon several datasets to create our demand models, including an analysis of the new Age Concern Lifeforce Survey of the over 50s in the UK. We believe it represents one of the leading templates currently available to planners for the interpretation of older people's future housing needs from existing local level demographic data.

*Speakers:* Baroness Greengross; Michael Murphy, President of British Society of Population Studies and Professor of Demography, LSE; Ed Harding, ILC-UK and David Waterhouse, Town and Country Planning Association; Natasha Thomas, McCarthy & Stone; Sue Adams, Director, Care and Repair;

*Organised by:* ILC-UK (International Longevity Centre UK)

*Venue:* BT Centre, 81 Newgate Street

*Location:* London, England

*Details:* Hodan Ali, 22-26 Albert Embankment, LONDON, SE1 7TJ

*Tel:* +44 (0)20 7735 7656, Opening address from Baroness Andrews OBE, Parliamentary Under Secretary of State, Office of the Deputy Prime Minister., Barbara Laing, Managing Director, Housing Services,The Anchor Trust.

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28 February 2006

**Older Peoples' Services : Promoting inclusion, wellbeing and independent living in your local authority**

Keynote address: Mark Heholt (Head of Ageing Society Division, Department of Work and Pensions).

*Speakers:* Chair: Mervyn Eastman (UK Director, BGOP). Phil Spence (Tameside MBC), Andrew Archibald (Dorset CC), Christine Ashdown (APG, DWP), Rita Cheatle (Thurrock Council & PCT), Gerry Calder (Thurrock Over Fifties Forum), Denise Murphy (Director RSVP)

*Organised by:* LexisNexus UK Conferences and Training endorsed by BGOP (Better Government for Older People)

*Venue:* Central London (tba)

*Location:* London, England

*Details:* LexisNexus UK Conferences and Training, Halsbury House, 35 Chancery Lane, London, WC2A 1EL

*Tel:* +44 (0)20 7347 3573, *Fax:* +44 (0)20 7347 3576

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February 2006

**Seminar series - Tackling Age Discrimination Beyond the Workplace**

Seminar 1: Ageism - what's the problem; 2 February, 2.00-4.30 pm

*Organised by:* Age Concern England
Venue: The Law Society, 113 Chancery Lane  
Location: London, England  
Details: Ellen Sharp, Age Concern England, Astral House, 1268 London Road, London, SW16 4ER  
Tel: +44 (0)20 8765 7200, Fax: +44 (0)20 8764 6594, Seminar 2: An age equality duty - shaping the framework; 15 February 2006, 2.00 - 4.30 pm, Seminar 3: Difference by design? The goods and services debate; 28 February 2006, 2.00-4.30 pm.

1 March 2006

Mental Health: Delivering the NHS modernisation agenda  
Keynote address: Delivering mental health services for the 21st century by Professor Louis Appleby (National Director for Mental Health, DH)  
Speakers: Chair: Emma Forrest (Health Service Journal)  
Organised by: HSJ Conferences  
Venue: Leeds Marriott Hotel  
Location: Leeds, England  
Details: Mental Health Conference Registration, HSJ Conferences, 3rd Floor, 151 Rosebery Avenue, London, EC1R 4GB  
Tel: +44 (0)20 7505 6044 or 0845 056 8299, Fax: +44 (0)20 7505 6001

1 March 2006

Reshaping Primary Care: Opportunities for the Independent Sector  
Keynote presentation: Gary Belfield, Head of Primary Care, Department of Health - "Implications of the White Paper".  
Speakers: Chair: Nick Bosanquet (Professor of Health Policy, Imperial College).  
Organised by: Laing & Buisson  
Venue: Mayfair Conference Centre  
Location: London, England  
Details: Laing & Buisson (Conferences) Ltd, 29 Angel Gate, City Road, London, EC1V 2PT  
Tel: +44 (0)20 7923 5348, Fax: +44 (0)20 7841 0048

1 March 2006

What do you expect at my age? Listening to the pastoral needs of older people  
This conference will explore the human and pastoral dimensions of growing older. It will offer both a theoretical and practical framework for enriching our understanding and practice in the care of older people. The day will be led by James Woodward who will offer three presentations in this area.  
Speakers: Convenor: Revd. Dr James Woodward.  
Organised by: Leveson Centre for the Study of Ageing, Spirituality and Social Policy  
Venue: Leveson Centre, Temple Balsall  
Location: Solihull, England  
Details: Temple House, Fen End Road, Temple Balsall, Knowle, Solihull, B93 0AN  
Tel: +44 (0)1564 778022, Fax: +44 (0)1564 778432

7 March 2006

The Future for Families in Scotland  
This one day conference covers in four sessions: Setting the scene; The needs of children; The shape of families to come; and, What does the future hold? As part of Session three, The shape of families to come - extended family members are considered. The Charter for Grandchildren is part of the policy context being considered.  
Organised by: Holyrood Events supported by Couple Counselling Scotland, Family Law Association, Family Mediation Scotland  
Venue: Our Dynamic Earth  
Location: Edinburgh, Scotland  
Details: Holyrood Events, 21-23 Slater's Steps, Holyrood Road, Edinburgh, EH8 8PB  
Fax: +44 (0)131 272 2116

7 March 2006

The Women's Library Annual Lecture 2006: Pensions - Paradise or Poverty?  
Following a lecture by Baroness Hollis of Heigham, Parliamentary Under-Secretary of State, DWP, Jenny Watson, Chair of the EOC and Kay Carberry,
Assistant General Secretary of the TUC will take questions and lead discussion. This event begins at 6.30pm and there is a small charge which includes a drinks reception.

Organised by: The Women's Library  
Venue: The Lecture Theatre, London Metropolitan University Law Building, Goulston Street  
Location: London, England  
Details: London Metropolitan University, Old Castle Street, London, E1 7NT  
Tel: +44 (0)20 7320 2222

8 March 2006

Implementing the Joint Health and Social Care White Paper  
Organised by: LGC Conferences  
Venue: Earls Court Conference Centre  
Location: London, England  
Details: 3rd Floor, 151 Rosebery Avenue, London, EC1R 4GB  
Tel: +44 (0)845 056 8339, Fax: +44 (0)20 7505 6001

13-14 March 2006

AEA's National Conference -  
Organised by: Action on Elder Abuse (AEA)  
Venue: University of Warwick  
Location: Warwick, England  
Details: Conference Admin, Astral House, 1268 London Road, London, SW16 4ER  
Tel: +44 (0)20 8765 7000, Fax: +44 (0)20 8679 4074

15 March 2006

Age-Old Prejudices: Research with older people in a discriminatory world  
Seminar 8 in the Representation of Older People in Ageing Research series.  
Speakers: Coordinators: Richard Ward and Bill Bytheway (CABS); Chih Hoong Sin (Disability Rights Commission); Rebecca Jones (CABS); Anthea Symonds (RoAD project); Myfanwy Franks and Mary Maynard (University of York).  
Organised by: Centre for Ageing and Biographical Studies, the Open University and the Centre for Policy on Ageing  
Venue: Centre for Policy on Ageing  
Location: London, England  
Details: Angela Clark, 25-31 Ironmonger Row, London, EC1V 3QP  
Tel: +44 (0)20 7553 6500, Fax: +44 (0)20 7553 6501. This seminar will consider ways in which research with older people; a) is constrained not just by ageism but by other prejudices and discriminations; b) can reveal the impact of prejudice and discrimination on later life; c) can contribute to the development of anti-discriminatory policies.

17 March 2006

The Future of Ageing: New Gerontologists and their Research Directions  
Organised by: NOGS - the Network of Gerontology Students, Student Section of the British Society of Gerontology  
Venue: Kings College  
Location: London, England  
Details: Kelly Fitzgerald or Karen Baker

19-20 March 2006

Social Care Association Annual Seminar - "The Future of Residential Care"  
The event is certificated for CPD.  
Speakers: Professor Daphen Statham CBE will lead the event.  
Organised by: Social Care Association - SCA  
Venue: De Vere Heron's Reach Hotel  
Location: Blackpool, England  
Details: Thornton House, Hook Road, Surbiton, Surrey, KT6 5AN  
Tel: +44 (0)20 8397 1411, Fax: +44 (0)20 8397 1436

21 March 2006

The Mental Capacity Act with Richard Jones  
The aim of this event is to equip delegates with an understanding both of the contents of the Act and its implications for practice. Richard Jones is the author of two manuals on the Act and a leading authority on the implementation of mental health law.  
Organised by: Leeds Mental Health Teaching NHS Trust  
Venue: Town Hall, Leeds  
Location: Leeds, England  
Details: Course Administrator, The Andrew Sims Centre, The Mount, 44 Hyde Terrace, Leeds, LS2 9LN  
Tel: +44 (0)113 305 5638, Fax: +44 (0)113 305 5632

22-23 March 2006

Managing New Realities 2006  
A two day conference to explore choice, sharing risk and promoting citizenship through integrated delivery of health, housing and social care services.  
Keynote address: Rt Hon Patricia Hewitt MP, Secretary of State for Health.
Speakers: Chair: David Brindle (Guardian).
Speakers from a variety of organisations including the King's Fund, Demos, ippr.
Organised by: Pavilion and The Guardian in partnership with Care Services Improvement Partnership, CSIP (Dept of Health)
Venue: Victoria Park Plaza Hotel
Location: London, England
Details: Customer Service Team, Freepost RLUZ-ATEU-RYUZ, Pavilion, Richmond House, Richmond Road, Brighton, BN2 3RL
Tel: 0870 890 1080, Fax: 0870 890 1081

23 March 2006

Does IT Work? Next Generation Care in the Information Age
Organised by: AARP Global Aging Program
Venue: Zola Restaurant, International Spy Museum, 800 F Street, NW
Location: Washington DC, USA
Details: Cherae Robinson, 601 E Street NW, Washington DC 20049, USA
Tel: +1 202 434 2402, Fax: +1 202 434 2454

February - May 2006

Pre-Retirement Course
A two day course that prepares employees for their retirement, in whatever form that may take.
Courses are being run in London, Slough, Godalming, Guildford, and Leeds.
Organised by: Life Academy (formerly PRA)
Venue: various throughout England
Location: various, England
Details: 9 Chesham Road, Guildford, Surrey, GU1 3LS
Fax: +44 (0)1483 300 981

28 March 2006

What Role can Telemedicine and eHealth Play in the Care of Older People?
Joint meeting of the Geriatrics & Gerontology Section and Telemedicine & eHealth Section. Prof. Anthea Tinker will be one of the speakers.
Speakers: Chairman: Dr Ann Blackburn, Prof. Paul Wallace, Dr Fiona Mair; Cicely Kerr; David Kelly; Dr Frank Miskelly.
Organised by: Royal Society of Medicine (RSM)
Venue: North Hall, RSM
Location: London, England
Details: Tori Bennett, Academic Department, Royal Society of Medicine, 1 Wimpole Street, London, W1G 0AE
Tel: +44 (0)171 290 2987, Fax: +44 (0)171 290 2989

30 March 2006

Ageing in the Workplace : A Win-Win
Four seminar sessions: Patterns of Training: the cost of manpower planning; Workforce Development and Skills; Work Patterns: down shifting and retaining status; Managing Transition: planning for retirement, meeting performance targets.
Organised by: Help the Aged (HtA)
Venue: One Birdcage Walk
Location: London, England
Details: Tina Chignoli, Conference Team, Help the Aged, 207-221 Pentonville Road, London, N1 9UZ
Tel: +44 (0)20 7843 1560, Fax: +44 (0)20 7239 1929

6 April 2006

Preventative care and sheltered/retirement housing - a workshop
This workshop will be led by Emeritus Professor Peter Lloyd, Convenor of the SGN Sheltered Housing Group and Imogen Parry, Part-time Director of Policy, ERoSH, and an independent Sheltered Housing Consultant.
Organised by: Sussex Gerontology Network Sheltered Housing Group, University of Sussex
Venue: Bramber House, University of Sussex
Location: Falmer, Brighton, England
Details: Professor Peter Lloyd, School of Social Sciences, University of Sussex, Brighton, BN1 9QN
Tel: +44 (0)1273 678035, Fax: +44 (0)1273 673563, The workshop is designed for those who manage sheltered/retirement housing, those who provide services, the residents and all who are interested in this type of accommodation for older people.

24-25 April 2006

Community Learning Representatives - A Ruskin Short Courses initiative
Two accredited short courses to train Community Learning Representatives, who are then able to offer continuing support to a person in an organisation or college, with their educational needs. The training is aimed at those mature students who have had a positive experience of education, who will then encourage others who might feel less confident.
Organised by: Ruskin College, Oxford
Venue: Ruskin College
Location: Oxford, England
Details: Katherine Hughes, Ruskin College, Oxford, OX1 2HE
Tel: +44 (0)1865 554331
25 April 2006

**A C Comfort Memorial Lecture and AGM**
Meeting of the Geriatrics & Gerontology Section. Professor Raymond Tallis, Division of Medicine and Neurosciences, Hope Geriatric Medicine will give the lecture "Meagre increments: the ultimate aims of medicine and the future of old age".

*Speakers:* Chairman: Dr Ann Blackburn.

*Organised by:* Royal Society of Medicine (RSM)

*Venue:* North Hall, RSM

*Location:* London, England

*Details:* Tori Bennett, Academic Department, Royal Society of Medicine, 1 Wimpole Street, London, W1G 0AE

Tel: +44 (0)171 290 2987, Fax: +44 (0)171 290 2989

26 April 2006

**Delivering Older People's Services**
Keynote speech by David Behan CBE, Chief Inspector, CSCI.

*Speakers:* Chairman: Jonathan Powell (CE, IndependentAge)

*Organised by:* LGC Conferences endorsed by Age Concern, IndependentAge, English Community Care Association

*Venue:* Cavendish Conference Centre

*Location:* London W1, England

*Details:* Delivering Older People's Services Conference Registration, 3rd Floor, 151 Rosebery Avenue, London, EC1R 4GB

Tel: +44 (0)845 056 8341, Fax: +44 (0)20 7505 6001

3 - 5 May 2006

**Bridges across aging: meeting primary care needs through specialization**

*Organised by:* International Psychogeriatric Association - Portuguese Psychogeriatric Association

*Venue:* tba

*Location:* Lisbon, Portugal

4 May 2006

"Alone in the City" - Dementia and Social Inclusion
To be officially opened by Liam Byrne MP.

*Organised by:* Alzheimer's Society

*Venue:* Austin Court, 80 Cambridge Street

Location: Birmingham, England

Details: Magnolia House, 73 Conybere Street, Highgate, Birmingham, B12 0YL

Tel: +44 (0)121 683 0808

9 May 2006

**Delivering Better Health Services : the fifth national SDO Conference**
The NHS Service Delivery and Organisation (SDO) Conference aims to promote discussion, highlight current thinking and raise awareness of ongoing research into the organisation and delivery of health care services. It is for those concerned with the delivery and management of effective, evidence-based healthcare.

*Speakers:* Numerous speakers from a variety of healthcare settings.

*Organised by:* Healthcare Events

*Venue:* Savoy Place

*Location:* London, England

*Details:* Healthcare Events, 2 Acre Road, Kingston, Surrey, KT2 6EF

Tel: +44 (0)20 8541 1399, Fax: +44 (0)8547 2300

16 May 2006

**A Sure Start to Later Life : A model for housing care and support**
Keynote speech: Phil Woolas MP, Minister of State (ODPM).

*Speakers:* Chair: Stephen Burke (Chief Executive, Counsel and Care). Prof. Ian Philp (National Director for Older People, DH); Julie Jones (President, ADSS); Terrie Alafat (ODPM); Ken Bartlett OBE (Hanover Housing Association); Roger Booker (Care UK Homecare); Sue Adams (Director, Care and Repair England); Stan Davison (Barnet Borough Senior Citizens' Forum).

*Organised by:* Social Exclusion Unit, Office of the Deputy Prime Minister (ODPM) supported by Counsel and Care, Care UK and Hanover Housing Association.

*Venue:* One Birdcage Walk

*Location:* London, England

*Details:* Westminster Advisers Ltd, 11a Westminster Palace Gardens, 1-7 Artillery Row, London, SW1P 1RL

Tel: +44 (0)20 7222 5090, Fax: +44 (0)20 7222 9501
18 May 2006

**My Life : My Plan - A one day conference providing a fresh perspective to Person Centre Planning**

*Organised by:* MacIntyre  
*Venue:* The Botanical Gardens  
*Location:* Birmingham, England  
*Details:* 602 South Seventh Street, Milton Keynes, Buckinghamshire, MK9 2JA  
*Tel:* +44 (0)1908 230100, *Fax:* +44 (0)1908 695643

23 May 2006

**Where is Elderly Care Going?**

Meeting of the Geriatrics & Gerontology Section.  
*Speakers:* Kalman Kafetz (RSM); Dr June Crown CBE; Ros Levenson; Stephen Burke (Counsel & Care).  
*Organised by:* Royal Society of Medicine (RSM)  
*Venue:* North Hall, RSM  
*Location:* London, England  
*Details:* Tori Bennett, Academic Department, Royal Society of Medicine, 1 Wimpole Street, London, W1G 0AE  
*Tel:* +44 (0)171 290 2987, *Fax:* +44 (0)171 290 2989

30 May - 2 June 2006

**The 8th International Federation on Ageing (IFA) Global Conference : Global Ageing : the North-South Challenge**

A diverse and inspiring forum for an exchange of ideas, information and examples of good practice which will help all in our continued work to ensure the optimal quality of life for older people worldwide.  
*Organised by:* DaneAge, IFA  
*Location:* Copenhagen, Denmark  
*Details:* ICS A/S Copenhagen, PO Box 41, Strandvejen 169-171, DK-2900 Hellerup, Copenhagen, Denmark  
*Tel:* +45 70 23 50 56, *Fax:* +45 70 23 50 57

15 June 2006

**World Elder Abuse Awareness Day**

The day will focus efforts across the globe to raise awareness of elder abuse in a coordinated fashion for the first time.  
*Organised by:* International Network for the Prevention of Elder Abuse (INPEA)

19-21 June 2006

**The Gathering 2006 : Scotland's Voluntary Sector Fair**

*Organised by:* SCVO supported by The Royal Bank of Scotland and The Herald  
*Venue:* Scottish Exhibition and Conference Centre, Glasgow

26-29 June 2006

**Connecting Intergenerational Communities through Creative Exchange**

This conference will extend the aims of ICIP through workshops and activities that provide a practical approach to intergenerational exchange within creative community environments.  
*Organised by:* International Consortium for Intergenerational Programmes - ICIP  
*Venue:* Conference Centre, Victoria University  
*Location:* Melbourne, Australia  
*Details:* Susan Feldman, Director, Alma Unit for Research on Ageing, Victoria University, Melbourne, Victoria, Australia

4 July 2006

**Direct Payments**

*Organised by:* Carers UK Training  
*Venue:* London  
*Location:* Central London, England  
*Details:* Carers Training Unit, Carers UK, 20-25 Glasshouse Yard, London , EC1A 4JT  
*Tel:* +44 (0)20 7566 7632, *Fax:* +44 (0)20 7490 8824

6-7 July 2006

**Policy & Politics second Conference : Reconnecting Policy & Politics**

'Reconnecting Policy and Politics' is the main theme of the conference with  
*Organised by:* Policy & Politics  
*Venue:* Kingsdown Conference Centre  
*Location:* Brighton, England, sub-themes: 'Inclusivity in policy and policy-making', 'Evidence, knowledge and power', 'Social or territorial justice' and 'Neoliberalism and economisation of policy'.  
*Details:* Ms Elaine Allenby-Parker
14-22 July 2006

**Advanced Health Leadership Forum: an international program to rethink health policy and health systems change**
A further conference is planned on the same topic during January 2007 in San Francisco, USA.  
*Organised by:* University of California, Berkeley  
*Venue:* Universitat Pompeu Fabra, Barcelona  
*Location:* Barcelona, Spain  
*Details:* Meg A Kellogg, Program Administrator, School of Public Health, 140 Earl Warren Hall, Dean's Office, Berkeley, CA 94720-7360, USA

15-20 July 2006

**10th International Conference on Alzheimer's Disease and Related Disorders, presented by the Alzheimer's Association**
This is the world's leading forum on dementia research. The conference brings together more than 5000 leading experts and researchers. Presentations cover the entire spectrum of dementia research including etiology, pathology, treatment and prevention of the disease.  
*Organised by:* Alzheimer's Association  
*Venue:* Centro de Convenciones  
*Location:* Madrid, Spain  
*Details:* Conference Service Team, 225 N. Michigan Ave., Fl. 17, Chicago, IL 60601-7633, USA  
*Tel:* +1 (312) 335 5790

6-7 September 2006

**INVOLVE 5th National Conference: People in Research**
A unique forum for people who are interested in public involvement in research and development to debate current practice, future challenges and opportunities.  
*Organised by:* INVOLVE (formerly: Consumers in NHS Research) supported by the Dept of Health  
*Venue:* De Havilland Campus, University of Hertfordshire  
*Location:* Hatfield, Herts, England  
*Details:* Professional Briefings, Registration Dept, 37 Star Street, Ware, Herts, SG12 7AA  
*Tel:* +44 (0)1920 487672, *Fax:* +44 (0)1920 462730

7-9 September 2006

**British Society of Gerontology Conference 2006 - THE AGEING JIGSAW:**
*Organised by:* British Society of Gerontology (BSG) hosted by the University of Wales, Bangor  
*Location:* Bangor, Wales  
*Details:* Becky Stanyard, BSG 2006 Conference Administrator

15-17 September 2006

**Ageing and Physical Activity: 2nd World Summit on Physical Education**
The University School of Physical Education in Poznan and the State School of Higher Vocational Education in Leszno, both in Poland, are organising the 14th Conference on Physical Education and Sport in Scientific Researches. Topic of this year's conference is ageing and physical activity.  
*Venue:* Rydzyna, Poland  
*Location:* Rydzyna, Poland  
*Details:* Dr Janusz Maciaszek, Akademia Wychowania Fizycznego, Zaklad Teorii Wychowania Fizycznego i Antropomotoryki, Ul. Kr
Listen to what I’m saying, commissioned by North West London Strategic Health Authority and the Department of Health, is produced by Bernie Arigho and Keith Strahan. Created by Age Exchange, the DVD and video are distributed, free of charge, by the Centre for Policy on Ageing.

The film shows health and social care professionals working directly with individuals and their carers. There are no actors, and no prepared scripts. It shows what a difference a person centred approach makes to individuals with many/complex needs.

The film links the Single Assessment Process, as the person centred health and social care framework, with other Department of Health policies e.g. Long Term Conditions with its emphasis on Case Management. It outlines key principles of person centred care that are evolving including holistic assessment, personalised care plans, sharing information, continuity and coordination and self care/self management.

A highlight of the film is to hear the views of the individuals and carers themselves in 3 Case Studies with a Social Worker, Community Matron and a Community Mental Health Nurse.

Supplementary documentation to accompany the DVD and video is available at http://www.cpa.org.uk/sap/dvd

The DVD (not the video) also includes 3 other films,

‘Patients as Teachers’ (Lewisham health and social care film with older people explaining how they wish to be assessed - the inspiration for ‘Listen to What I’m Saying’

‘Are We Being Heard?’ (Hounslow staff training film made by older people about older people with an emphasis on having control over their own lives e.g. using Direct Payments)

‘Cold Tea’ (Workforce Directorate, Cumbria and Lancashire Strategic Health Authority introductory film about the Single Assessment Process)

To obtain copies of the dvd or video write to Centre for Policy on Ageing, 25-31 Ironmonger Row, London EC1V 3QP  Telephone 020 7553 6500  Email dvd@cpa.org.uk or video@cpa.org.uk

We would also like to draw your attention to the SAP resource at http://www.cpa.org.uk/sap. The resource provides direct access to a substantial amount of material, provided by localities, useful to practitioners implementing the Single Assessment Process. In addition it provides links to key web sites and a lively discussion forum and glossary.

The Centre for Policy on Ageing also produces other resources on ageing and older age issues including the Ageinfo databases of publications, organisations and events and the National Database of Ageing Research (NDAR). These can all be found on our website. http://www.cpa.org.uk