

New Literature on Old Age

EDITOR

Gillian CrosbyVOLUME
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AGE DISCRIMINATION

- 176/1 Promoting age equality; by Suzanne Wait, Eric Midwinter, Alliance for Health & the Future, International Longevity Centre UK - ILCUK.: Electronic format only, 2005, 67 pp.
The status of age discrimination across different areas of social policy in the European Union (EU) is reviewed for the five largest older EU Member States - France, Germany, Italy, Spain and the UK - and the three largest accession countries - the Czech Republic, Hungary and Poland. The analysis looks across different aspects of social policy, specifically: civic and public participation; healthcare; social care; labour markets; pensions and other financial services; and training, education and leisure. Appendices include a demographic overview of the EU and the Member States discussed. Ten themes are identified as important foundations for advancing age equality: cohesive social and economic policies; a binding legal framework; reversing negative stereotypes; personalising services; cultural awareness at all ages; productive engagement (particularly equal opportunities in employment); health promotion for all ages; evidence-based, appropriate care for all; sensitising future professionals to the needs of ageing populations; and life-long learning and training. Background research reports are available on the Alliance for Health & the Future website. (RH)
From : <http://www.healthandfuture.org>

AGEING (GENERAL)

(See 176/29, 176/47, 176/49, 176/50, 176/51, 176/53)

ANXIETY

- 176/2 The effects of anxiety on attentional processes in older adults; by L S Fox, B G Knight. *Aging & Mental Health*, vol 9, no 6, November 2005, pp 585-593.
The effects of anxiety on attentional processes have not previously been studied in older people under laboratory conditions. This study explored selective attention to threat - a cognitive component of anxiety - in older people. A novel age-appropriate mood induction technique was piloted for use with older participants. 68 older people were randomly assigned to neutral or anxious mood induction conditions, and completed emotional Stroop and dot-probe tasks. Significant selective-attention effects were found in older people induced into an anxious mood. Results suggest that anxious older people are at least as hyper-vigilant to mood congruent threatening information as has been shown with younger adults in other studies. These findings provide support for the application of these theories to older people. (RH)
ISSN: 13607863
From : <http://www.tandf.co.uk/journals>

ASSESSMENT

(See Also 176/74)

- 176/3 Mental capacity assessments and discharge decisions; by Robert Stewart, Pater Bartlett, Rowan H Harwood. *Age and Ageing*, vol 34, no 6, November 2005, pp 549-550.
Discussion of this topic is in the context of the Mental Capacity Act 2005 and the "Bournewood" case with regard to how hospitals and care homes deal with assessing mental capacity and an individual's autonomy. (RH)
ISSN: 00020729
From : <http://www.ageing.oupjournals.org>

ASSISTIVE TECHNOLOGY

- 176/4 Improving the provision of information about assistive technology for older people: summary of research commissioned and funded by the Helen Hamlyn Foundation; by Fay Wright, Claudine McCreadie, Anthea Tinker, Institute of Gerontology, King's College London.: Institute of Gerontology, King's College London, June 2005, 55 pp.

Older people and their families have difficulty in obtaining information about products and services that can assist in maintaining independence, often referred to as "assistive technology" (AT). In recent years, there has been a huge growth in the availability of AT. The focus of this research is on information provision: how older people, their families and advisers can get information about AT; what information older people have about ATs and how they think the situation should be improved; and what information carers have about AT and how they think the situation could be improved. This report outlines the multi-method approach used in the research, and presents key messages from older people, their carers, professionals (occupational therapists, physiotherapists and community nurses), care home residents, and housing providers. Also included is information about AT in three Scandinavian countries, Denmark, Finland and Sweden. Recommendations made point to the importance of information provision on assistive technology, (RH)

ISBN: 1872342329

From : Institute of Gerontology, King's College London, Waterloo Bridge Wing, Franklin-Wilkins Building, Waterloo Road, London SE1 8WA. www.kcl.ac.uk/acig

ATTITUDES TO AGEING

176/5

Stereotypes of ageing: messages promoted by age-specific paper birthday cards available in Canada; by Shannon R Ellis, Todd G Morrison.

International Journal of Aging and Human Development, vol 61, no 1, 2005, pp 57-73.

Birthday cards are a ceremonial token that may purposefully or unintentionally transmit stereotypes about the ageing process. In this study, the authors examined 150 age-specific paper birthday cards sold in retail outlets in Red Deer, a small town in Alberta, Canada. Results suggest that a greater proportion of the cards' textual messages represented ageing in a negative manner (66.7%). Further, the negativity of these written messages did not appear to vary as a function of the intended recipient's chronological age or sex. These findings are compared to those of previous studies conducted on this subject. (RH)

ISSN: 00914150

From : <http://baywood.com>

BLACK AND MINORITY ETHNIC GROUPS

(See Also 176/68, 176/70)

176/6

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

Findings, 0495, November 2005, 4 pp.

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

ISSN: 09583084

Price: FOC

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

CARE MANAGEMENT

- 176/7 Filtering the facts: [care home management and the Data Protection Act 1998]; by Shelagh Gaskill.
Community Care, no 1605, 12 January 2006, pp 36-37.
Care home managers are among those who need to comply with the Data Protection Act 1998 when dealing with personal requests. This article looks at the principles of the Act with which all care homes in the UK have to comply. It gives advice to managers of care homes on how they have to comply with these principles, and outlines the requirements when dealing with personal data. (RH)
ISSN: 03075508

CARERS AND CARING

(See Also 176/35)

- 176/8 Depressive disorders in caregivers of dementia patients: a systematic review; by P Cuijpers.
Aging & Mental Health, vol 9, no 4, July 2005, pp 325-330.
Although depressive symptomatology has been well studied in caregivers of patients with dementia, depressive disorders have been examined much less. This article reports a systematic literature search of major databases (Medline, Psycinfo, Dissertation Abstracts), and included studies examining caregivers of dementia patients that reported prevalence of a major depressive disorder, according to diagnostic criteria as assessed with a standardised diagnostic interview. Ten studies with a total of 790 caregivers were identified (sample sizes 22-147). Only one study used a representative community sample. A total of 176 subjects (22.3%) had a depressive disorder. In the three studies reporting differential prevalence rates for men and women, somewhat smaller prevalence rates were found for men than for women. In six studies, caregivers were compared to a (mostly matched) control group. The relative risks of having a depressive disorder in caregivers ranged from 2.80-38.68 (all RRs were significant). In the three prospective studies, relatively high incidence rates were found (0.48). It is clear that prevalence and incidence of depressive disorders are increased in caregivers of dementia patients, and more research is needed on this population. (RH)
ISSN: 13607863
From : <http://www.tandf.co.uk/journals>

- 176/9 Duty, love and sacrifice: [carers and carers allowance]; by Graham Hopkins.
Community Care, no 1606, 19 January 2006, pp 47-48.
About 25% of carers in the UK are aged 60+, and some 8,000 are in their nineties. The author examines the difficulties that this often overlooked group of people face in their daily lives. A case study describes the situation of parents who have cared for 42 years for a daughter who has learning difficulties, without receiving support from social services. In recent years, three major Acts have been passed which should benefit carers: the Carers (Recognition and Services) Act 1995, the Carers and Disabled Children Act 2000, and the Carers (Equal Opportunities) Act 2004. Many older carers continue to be unaware of their entitlements. A short feature in this issue of Community Care (p 39) also outlines how the carer's allowance is going unclaimed by older carers, because of its complexity. (RH)
ISSN: 03075508

CONSUMER PERSPECTIVES

- 176/10 When age is no barrier: [model of consultation in south London]; by Graham Hopkins.
Community Care, no 1606, 19 January 2006, pp 38-39.
The author reports on a model of consultation with older people in the London Borough of Sutton, which also involves Age Concern Sutton and a local primary care trust (PCT). The project was originally funded by a health improvement (Himp) grant, and a major feature is that older people themselves have volunteered and do the work. This article reports on lessons from the project. (RH)
ISSN: 03075508

DEMENTIA

(See Also 176/8)

- 176/11 Alzheimer: a journey together; by Federica Caracciolo. London: Jessica Kingsley, 2005, 108 pp. More than 600,000 people in Italy suffer from Alzheimer's disease (AD), one of whom was Francesco Caracciolo, the author's husband. This is the author's personal account of her experience of caring for her husband. She recounts the progression of the disease, and the special relationship that developed between carer and patient. She also offers strategies for coping with a mental illness, and not losing sight of the partner's personality. (RH)
ISBN: 1843104083
Price: £8.99
From : Jessica Kingsley Publishers, 116 Pentonville Road, London N1 9JB. Email: post@jkp.com Website: www.jkp.com
- 176/12 Alzheimer's dementia in persons with Down's syndrome: predicting time spent on day-to-day caregiving; by Mary McCarron, Michael Gill, Philip McCallion (et al).
Dementia: the international journal of social research and practice, vol 4, no 4, November 2005, pp 521-538.
The Caregiving Activity Survey - Intellectual Disability (CAS-ID) was completed by caregivers in Ireland of 63 people with Down's syndrome (DS) and Alzheimer's dementia (AD) and 61 people with DS without AD. Data was also gathered on co-morbid conditions. Regression analysis was used to understand predictors of increased time spent on day-to-day caregiving. Significant differences were found on average time spent in day-to-day caregiving for people with and without AD. Mid-stage and end-stage AD and co-morbid conditions were all found to predict increased time spent caregiving. The nature and tasks of day-to-day caregiving appeared to change as AD progressed. The study concluded that staff time to deal with day-to-day caregiving needs appeared to increase with onset of AD, and did so more dramatically for those with moderate intellectual disability. Equally, while the tasks for staff were different, time demands in caring for people at both mid- and end-stage AD appear similar. (RH)
ISSN: 14713012
From : <http://www.dem.sagepub.com>
- 176/13 Awareness in dementia: (special section); by Murna Downs (ed).
Aging & Mental Health, vol 9, no 5, September 2005, pp 381-429.
Researchers variously from the Universities of Wales (Bangor), Hull, Maastricht (the Netherlands), and Edinburgh, and North Dublin Psychology Service have collaborated to produce five papers that review research conducted on awareness and dementia in the past 15 years. The first paper presents neurological, psychiatric and psychoanalytical perspectives from which awareness of dementia is conceptualised. Other papers review assessment methods and measures, clinical correlates of awareness in dementia, and ethical and legal issues in relation to people with dementia. An editorial article introduces and sets the context for these papers. (RH)
ISSN: 13607863
From : <http://www.tandf.co.uk/journals>
- 176/14 Dementia care in England and the social model of disability: lessons and issues; by Jane Gilliard, Robin Means, Angela Beattie (et al).
Dementia: the international journal of social research and practice, vol 4, no 4, November 2005, pp 571-586.
The development and potential value of a social model of disability as a framework to support a better understanding of dementia care is the focus of this article. The social model has not yet fully included cognitive impairment, although considerable work has been carried out with regard to learning disability. By applying this model to dementia care, those who surround people with dementia can review the impact that they as "non-demented" people have on others; can reconsider the value of hearing and responding to personal experiences; can reframe the focus to consider abilities instead of losses; and can better understand the impact of public policy. The article also considers the present shortcomings of a disability model in terms of how it relates to

dementia care, and concludes with some thoughts for future consideration. This article draws heavily on the findings of a research project conducted by Dementia Voice and the University of the West of England (UWE), to consider the needs of two sub-groups of people with dementia: younger people (i.e. those under the age of 65) and those from minority ethnic groups. (RH)
ISSN: 14713012

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

176/15

GP attitudes to early diagnosis of dementia: evidence of improvement; by Alisoun J Milne, Kate Hamilton-West, Eleni Hatzidimitriadou.

Ageing & Mental Health, vol 9, no 5, September 2005, pp 449-455.

This paper offers a comparative analysis of the attitudes of general practitioners (GPs) towards early diagnosis of dementia in 1997 and 2001. It draws on data from two studies conducted in the same area (East Kent) using the same research instrument. Overall, findings reveal a significantly greater commitment to early diagnosis at Time 2 than at Time 1. More GPs hold positive attitudes and consider early diagnosis to facilitate a number of practical and therapeutic benefits for users and carers. Further, fewer GPs regard early diagnosis as having negative consequences. Findings also support existing evidence about attitudes being underpinned by drivers and barriers. Those GPs who are committed regard it as an opportunity to offer preventive treatment and plan for the future; barriers include limited treatment options. Primary reasons for the attitudinal shift are greater accessibility of psychiatric colleagues, additional investment in support services, and enhanced policy and clinical emphasis on the value of early diagnosis. (RH)

ISSN: 13607863

From : <http://www.tandf.co.uk/journals>

176/16

The Kingston Dementia Café: the benefits of establishing an Alzheimer café for carers and people with dementia; by Jane Capus.

Dementia: the international journal of social research and practice, vol 4, no 4, November 2005, pp 588-591.

Dementia cafés - which are the subject of two reviews of innovative practice in this issue of *Dementia* - have become more numerous since they were first launched in the Netherlands; the first one in the UK was at Farnborough, Hampshire, in 2000. The Kingston Dementia Café brings together people with dementia, their carers and concerned professionals in an informal environment where they can socialise, share information and provide support to each other. This review outlines an evaluation carried out by Dorothy Cameron as part of her studies to become a family therapist, to find evidence about the Café's usefulness. The findings are based on the taped transcription of an hour-long group discussion, the main theme of which was the comparison of experience between participants. (RH)

ISSN: 14713012

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

176/17

A systematic review of prevalence and incidence studies of dementia with Lewy bodies; by Julia Zaccai, Chere McCracken, Carol Brayne.

Age and Ageing, vol 34, no 6, November 2005, pp 561-566.

Substantial variation in the prevalence of dementia with Lewy bodies (DLB) has been reported with estimates ranging from 0 to 26.3% of all dementia cases, potentially making it the second most common dementia subtype. The aim of this study was to review systematically and critically for the first time previous studies of the clinical prevalence and incidence of DLB in the population. PubMed was used for the literature search. Selected articles had to describe an original study that provided a prevalence and/or incidence number for the whole population for DLB as defined by pre-set clinical criteria and findings. Six studies reporting the prevalence of DLB and one reporting the incidence of DLB met the inclusion criteria. Prevalence estimates, depending on case criteria, range from 0 to 5% with regard to the general population, and from 0 to 30% of all dementia cases. The only estimate for DLB incidence is 0.1% a year for the general population, and 3.2% a year for all dementia cases. The number of available studies was too small to hypothesise on the potential effect of age, sex and genetic background on the results. There is a general consensus that DLB must be considered in the range of neurodegenerative conditions in older people. (RH)

ISSN: 00020729

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

DEMOGRAPHY AND THE DEMOGRAPHICS OF AGEING

(See Also 176/30)

- 176/18 Ageing assets: implications of population ageing for the South East region: a report prepared by Population Ageing Associates for the Social Inclusion Partnership South East (SIPSE) Older People Action Group; by Population Ageing Associates; Social Inclusion Partnership South East (SIPSE) Older People Action Group, Government Office for the South East - GOSE. London: Population Ageing Associates, October 2005, 39 pp (executive summary available 13 pp). The number of people in the south east aged 60+ is already greater than the number of children under 16. This report aims to inform regional and local planning by setting out key information and projections relating to the older population of the region in the coming years. The report discusses the implications of population ageing in the south east in relation to issues including: the labour market; housing; transport; culture, leisure and tourism; health and social care; consumer expenditure; rural issues; and social inclusion and involvement of older people generally. The report also provides demographic analyses of the region. (RH)
Price: FOC
From : SIPSE, c/o RAISE, Berkeley House, Cross Lanes, Guildford GU1 1UN. Email: mail@raise-networks.org.uk
Download documents: <http://www.gose.gov.uk>

DEPRESSION

(See Also 176/8)

- 176/19 "They're all depressed, aren't they?": a qualitative study of social care workers and depression in older adults; by N McCrae, J Murray, S Banerjee (et al).
Aging & Mental Health, vol 9, no 6, November 2005, pp 508-516.
In the UK, statutory and voluntary social services provide care and support for vast numbers of vulnerable older people, yet little is known about how social care practitioners respond to depression in this high risk population. This study elicited the perceptions and conceptualisations of this condition among social care staff, and views on how the response of social care and other agencies might be improved. Qualitative interviews were conducted with 20 social care practitioners working in generic services for older people in south London. Depression was perceived to be remarkably common among clients, a phenomenon largely attributed to the adverse circumstances of old age, particularly social isolation. A key message from participants was that social causes indicate a need for social interventions. While primary care was criticised for not taking depression seriously in older people, mental health services were generally praised. Expansion of social, recreational and psychological interventions was advocated. (RH)
ISSN: 13607863
From : <http://www.tandf.co.uk/journals>
- 176/20 Incidence and risk factors for depression and anxiety disorders: results from a 34-year longitudinal Swedish cohort study; by G Samuelsson, C McCamish-Svensson, B Hagberg (et al).
Aging & Mental Health, vol 9, no 6, November 2005, pp 571-575.
This study is based on a total cohort of 192 people born in 1902 and 1903 and living in southern Sweden. Subjects were assessed at baseline when aged 67 and on eight further occasions over 34 years or until death. The participation in the nine examinations ranged from 78% to 100%. Interviews, psychological tests and medical examinations were used as well as information on medical diagnoses from primary health care records and hospital records. The cumulative probability for the development of clinical depression during the follow-up was 8% and for anxiety 6%. The incidence rate for depression and for anxiety was highest during the period 67-81 years. The poor were more likely to be diagnosed with depression during the follow-up period, females more often than men. Therefore, the strongest risk factors for the development of depression were perceived economic problems. (RH)
ISSN: 13607863
From : <http://www.tandf.co.uk/journals>

176/21 Social, health and age differences associated with depressive disorders in women with rheumatoid arthritis; by Sandra K Plach, Linda Napholz, Sheryl T Kelber.
International Journal of Aging and Human Development, vol 61, no 3, 2005, pp 179-194.
Depression in women with rheumatoid arthritis (RA) may be related to social role experiences, physical health and age. This study examined the social and health factors contributing to depression in two age groups of women with RA. 138 midlife and late-life women with a diagnosis of RA participated in this cross-sectional study. Multiple regression analysis indicated that social role balance, functional status, number of co-existing health problems, and age were significant predictors of depression in midlife and late-life women with RA. Role balance was among the strongest factors contributing to women's depression score. Compared to midlife women, late-life women reported significantly higher role balance and lower depression scores, despite poorer functional status and more concomitant health problems. (RH)
ISSN: 00914150
From : <http://baywood.com>

DIGNITY

176/22 Views on dignity in providing health for older people; by Michael Calnan, Gillian Woolhead, Paul Dieppe (et al).
Nursing Times, vol 101, no 33, 16 August 2005, pp 38-41.
The salience and meaning of dignity and dignified care for care providers is explored, also the implications for the provision of care. The project described forms part of the European Commission's Fifth Framework (Quality of Life) Programme, an international study being undertaken in different European countries comparing health and social care workers' views on dignity. 12 focus groups were carried out involving a total of 52 participants representing a range of occupational groups. All participants stated that dignity and respect were important for people of all age groups. The evidence that emerged from the focus groups showed that, in spite of the appropriate intentions of providers, older people were not consistently provided with dignified care. In order to ensure dignity in providing care for older people, tasks need to be organised around older people's needs. Without such changes, there is a danger that "institutional ageism" will persist in the health service. (RH)
ISSN: 09547762
From : <http://www.nursingtimes.net>

DISABILITY

(See Also 176/6)

176/23 Labour market disadvantage amongst disabled people: a longitudinal perspective; by John Rigg, ESRC Centre for Analysis of Social Exclusion - CASE, Suntory-Toyota International Centres for Economics and Related Disciplines - STICERD, London School of Economics and Political Science. London: STICERD, 2005, 35 pp (CASEpaper 103).
Considerable cross-sectional evidence has highlighted the lower employment rates and earnings for disabled people in Britain. This study uses data from the Labour Force Survey (LFS) to examine disabled people's labour market progression in Britain along several dimensions: growth; low pay transition probabilities; changes in labour market participation; the rate of training; and the rate of upward occupational mobility. The analysis also explores the extent of heterogeneity in the labour market progression of disabled people with respect to differences in age, education, occupation and disability severity. The evidence indicates that the earnings trajectories of disabled people lag behind those for non-disabled people, especially for men. The median annual change in earnings is 1.4% lower for disabled men and 0.6% lower for disabled women, compared to non-disabled men and women respectively. Moreover, disabled people are approximately three times more likely to exit work than their non-disabled counterparts, a difference that increases markedly for more severely disabled people. The evidence highlights the need for policy to tackle the barriers that disabled people face in the workplace, not merely in access to jobs. (RH)
Price: FOC
From : Centre for Analysis of Social Exclusion, London School of Economics, Houghton Street,

London WC2A 2AE. <http://sticerd.lse.ac.uk/case>

- 176/24 Mobility disability in the middle-aged: cross sectional associations in the English Longitudinal Study of Ageing; by David Melzer, Elizabeth Gardener, Jack M Guralnik. *Age and Ageing*, vol 34, no 6, November 2005, pp 594-602.
Mobility disability is an early sign of the disability process in older people. The authors used cross sectional interview data for 11,392 community-living respondents aged 50+ from the 2002 English Longitudinal Study of Ageing (ELSA): Mobility status, based on reported difficulty walking a quarter of a mile. In the middle aged, 8% of women and 9% of men reported having much difficulty or being unable to walk that distance, equating to 787,000 people in England. Factors which at least doubled the odds of mobility disability for those aged 50-64 were chronic obstructive lung disease, angina, stroke, recently treated cancer, comorbidity, and lower-limb or back pain. Factors associated with mobility disability in older groups were similar. 38% of mobility disability in the middle-aged population was related to high levels of lower limb pain and 15% in high levels of back pain. Given these factors, prevention of later disability progression may require more attention being paid to mobility difficulties and its causes in the middle-aged. (RH)
ISSN: 00020729
From : <http://www.ageing.oupjournals.org>

EMPLOYMENT

(See Also 176/23, 176/73)

- 176/25 "At this point now": older workers' reflections on their current employment experiences; by Anne E Noonan.
International Journal of Aging and Human Development, vol 61, no 3, 2005, pp 211-242.
The current employment situations of a sample of 37 older workers is examined in this qualitative study, which uses thematic content analysis to reveal a wide range of their concerns and experiences, having been actively involved in all the traditional stages of work-life development. Findings suggest a deepened or more nuanced view of the principal meanings of work - particularly identity and social interaction - and highlights several negative aspects of later-life employment such as pension insecurity, unemployment, age discrimination, not having found one's "notice", and chronic interpersonal difficulties with co-workers. Findings are discussed against the backdrop of a rapidly changing workplace and dramatically shifting work-retirement trajectories in which job suitability and predictable retirement are less common. (RH)
ISSN: 00914150
From : <http://baywood.com>

- 176/26 Age positive business case studies: a report of research carried out by IFF Research Ltd on behalf of the Department for Work and Pensions; by Karen Bunt, Lorna Adams, Katie Carter (et al). London: Department for Work and Pensions - DWP, 2005, 103 pp (Issue no. APG 3).
IFF Research Ltd was commissioned by the Age Partnership Group (APG) and the Department for Work and Pensions (DWP), as part of a National Guidance Campaign, to undertake a series of case studies drawn from the Age Positive champion employers. The aim is to assist in policy development in this area, and to provide more practical guidance to other employers looking to change their policies to ensure an age positive approach. More specifically, the study aimed to secure more information about: policies that have been implemented and the changes in working practices that were necessary as a result; the difficulties encountered and how these have been overcome or could be avoided; and the business benefits of age positive policies. 31 case studies were conducted with a cross-section of the 100 Age Positive employer champions. This report covers findings and comments from these case studies on issues around: recruitment policies; selection; promotion and progression; training and development; redundancy; and retirement. The questionnaire used is included in the appendices. (RH)
ISBN: 1843884364
Price: FOC
From : Download copies : <http://www.agepositive.gov.uk/agepartnershipgroup>

- 176/27 Britain's hidden brain drain - final report: the EOC's investigation into flexible and part-time working; by Equal Opportunities Commission - EOC. Manchester: Equal Opportunities Commission - EOC, 2005, 52 pp.
Flexible working is defined as variations in work patterns. This investigation looks at the benefits of flexible working, whether at full- or part-time hours (more or less than 30 hours respectively), and at the relationship between the two issues. It sees flexible working as key to unblocking the hidden brain drain, particularly among part-time and older workers. The report suggests that the world of work need to respond to changes in population, the economy and society, which current arrangements for flexible or part-time working fail to do so adequately. Three key barriers are identified: managers do not have the rights skills and attitudes to implement flexible working, while employees can be unrealistic about what can be achieved; labour market inflexibility; and inflexible views of the nature of work. The report recommends Government to extend the existing right to flexible working to all employees; enable training and advice to managers in how to manage flexible employees; and provide a financial incentive for small employers to open up flexible working. The full evidence base can be found at www.eoc.org.uk/flexible (RH)
ISBN: 1842061631
Price: FOC
From : EOC, Arndale House, Arndale Centre, Manchester M4 3EQ. Email: info@eoc.org.uk
- 176/28 Examples of international case law on age discrimination in employment: report prepared for the Department for Work and Pensions; by George W Leeson, Sarah H Harper, Oxford Institute of Ageing, University of Oxford; Age Partnership Group, Department for Work and Pensions - DWP. London: Department for Work and Pensions - DWP, 2005, 47 pp (Issue no. APG 13).
This research is one of a number of projects commissioned by the Department for Work and Pensions (DWP) on behalf of the Age Partnership Group (APG) as part of the National Guidance Campaign (NGC). The objective of the study has been to collect information on the most common employment-related reasons for legal action on the grounds of age discrimination. The search for cases has focused on countries with explicit age discrimination legislation in place, but it has also included countries where age discriminatory practice is covered by wider legislation. This report indicates steps towards implementing the European Employment Directive in the UK and the situation in other EU member countries.
Examples of case law from Australia, Canada, Ireland and South Africa variously cover: termination of employment, including retirement; redundancy packages; promotion; recruitment; recruitment advertising; pay and benefits; and working environment. The report notes that age discrimination in employment represents a very small proportion of all discrimination cases brought in other countries, with few cases settling in favour of the claimant. (RH)
ISBN: 1843884461
Price: FOC
From : Download copies : <http://www.agepositive.gov.uk/agepartnershipgroup>
- 176/29 Facts and misunderstandings about age, health status and employability; by Kirsten Benjamin, Sally Wilson, Science Group: Human Factors, Age Partnership Group, Department for Work and Pensions - DWP. London: Department for Work and Pensions - DWP, 2005, 41 pp (Issue no. APG 9).
Older people are often discriminated against in the workplace on the basis of stereotypes about ageing. This report considers some of the common "myths" about older workers. Where possible, it provides evidence and arguments that aim to dispel inaccurate perceptions about older people, and demonstrates that health and safety cannot be used as an "excuse" to justify the use of older workers. The report uses information and data from a variety of sources, for example statistics from the Office of National Statistics (ONS), published journal articles and reports. The report highlights facts about older people and cognitive capacity, physical strength and endurance, sensory abilities, adaptability to change, learning new information, levels of sickness absence, accidents in the workplace, and productivity. In all, organisations will benefit from efforts to maintain the ability to work of all employees at any age. This research is one of a number of projects commissioned by the Department for Work and Pensions (DWP) on behalf of the Age Partnership Group (APG) as part of the National Guidance Campaign (NGC). (RH)
ISBN: 1843884429

Price: FOC

From : Download copies : <http://www.agepositive.gov.uk/agepartnershipgroup>

176/30

Facts and misunderstandings about demography and the workforce: commissioned by the Department for Work and Pensions on behalf of the Age Partnership Group; by Tony Warnes, Alex John, Sheffield Institute for Studies on Ageing, University of Sheffield; Age Partnership Group, Department for Work and Pensions - DWP. London: Department for Work and Pensions - DWP, 2005, 54 pp (Issue no. APG 11).

This paper introduces the processes and manifestations of population ageing and how this relates to the changing age structure of the labour force. It presents demographic evidence regarding variations in age-specific participation in the labour force. Sections on age and performance in work, and stereotypes about older workers aim to dispel the myths and misconceptions as to older workers' capabilities. Lastly, a literature review presents summaries of UK primary research on attitudes towards older workers published since 1990. While these empirical research findings are largely consistent, they imply inconsistent consequences for the most efficient use of the population's work skills. This research is one of a number of projects commissioned by the Department for Work and Pensions (DWP) on behalf of the Age Partnership Group (APG) as part of the National Guidance Campaign (NGC). (RH)

ISBN: 1843884445

Price: FOC

From : Download copies : <http://www.agepositive.gov.uk/agepartnershipgroup>

176/31

Managing age diversity in employment: a distance learning course for employers and managers: [cover title]: APG Age diversity training open learning package; by Age Partnership Group, Department for Work and Pensions - DWP. London: Department for Work and Pensions - DWP, 2005, 64 pp (Issue no. APG 15).

This distance learning course is a useful tool to support employers to manage age diversity in employment. The course comprises five individual modules, and can be used either as a self-taught learning programme or as a reference guide. Module 1, Age auditing, explores the relevance of workforce culture, attitudes and communication in tackling ageism. Module 2, Age profiling, looks at monitoring the make-up of the workforce. Module 3, Better recruitment, concerns maximising the labour pool to fill vacancies. Module 4, Improved retention, is about realising and retaining workforce potential. Module 5, Retirement, examines the business benefits and challenges of having a flexible retirement strategy. This course was originally developed by Strathclyde University and Age Concern Training as part of the SME (small and medium-sized employers) age diversity project which ran in Scotland during 2003. The Department for Work and Pensions (DWP) worked in Scotland as a partner of the EQUAL Theme A (Employability) Development Partnership for Scotland, Equal Access, which is part funded by the EQUAL Community Initiative. (RH)

ISBN: 1843884771

Price: FOC

From : Download copies : <http://www.agepositive.gov.uk/agepartnershipgroup>

176/32

A new deal for welfare: empowering people to work: presented to Parliament by the Secretary of State for Work and Pensions; by Department for Work and Pensions - DWP. London: TSO, January 2006, 101 pp (Cm 6730).

This Green Paper on welfare reform sets out proposals for achieving an 80% employment rate for people of working age. It notes that by 2024, some 50% of the population will be aged 50+, but at present, employment rates for those aged 50 to State Pension Age (SPA) are lower than for the population as a whole. A summary and an introductory chapter put the case for welfare reform. Other chapters cover: helping ill or disabled people; helping lone parents; helping older workers; delivering welfare reform; Housing Benefit; and long-term benefits reform. On helping older people, two major challenges are identified. The first is how to support the growing numbers of pensioners in retirement, given the decreasing proportion of workers; and how to enable people to build up an income for retirement. The second is the aim is to support and encourage people over 50 to stay in work, but noting the structural, personal and cultural barriers they face. Also discussed are improving labour market interventions, communicating choices on working and when to retire, and flexible working. A concluding chapter outlines arrangements for the

consultation, responses to which are invited by 21 April 2006. (RH)
ISBN: 0101873027

From : TSO, PO Box 29, Norwich, NR3 1GN. Also audio, Braille, Easy Read, large print and Welsh from: The Welfare Reform Team, Level 2, The Adelphi, 1-11 John Adam Street, London WC2N 6HT. Tel 020 7712 2521. Web version: www.dwp.gov.uk/aboutus/welfarereform/

176/33

Practical tips and guidance on training a mixed-age workforce; by Becci Newton, Jennifer Hurstfield, Linda Miller (et al), Institute for Employment Studies (IES); For Extending Working Lives, Age Partnership Group, Department for Work and Pensions - DWP. London: Department for Work and Pensions - DWP, 2005, 75 pp (Issue no. APG 5).

This report is aimed at UK employers and policymakers, and provides information relating to those currently in the UK workforce. The report reviews the policy and academic literature to identify the issues as they apply to younger and older workers, particularly barriers in access to personal and professional development. It examines trends in training based on secondary analysis of the Labour Force Survey 2004 (LFS) and the National Adult Learning Survey 2002. It provides advice and guidance for employers who are seeking to adopt age positive training strategies, based on case studies of five organisations who train a mixed-age workforce (B&Q, ClinPhone, Lyreco UK Ltd, Macphie, and the Royal Bank of Scotland). Lastly, it gives a practical overview of training schemes, advice and guidance available to employers and employees. This research is one of a number of projects commissioned by the Department for Work and Pensions (DWP) on behalf of the Age Partnership Group (APG) as part of the National Guidance Campaign (NGC). (RH)

ISBN: 1843884380

Price: FOC

From : Download copies : <http://www.agepositive.gov.uk/agepartnershipgroup>

176/34

Reasons for working and their relationship to retirement attitudes, job satisfaction and occupational self-efficacy of bridge employees; by Veronica M Dendinger, Gary A Adams, Jamie D Jacobson.

International Journal of Aging and Human Development, vol 61, no 1, 2005, pp 21-35.

Although the baby boomers are the fastest growing segment of the US population and they are now approaching retirement age, research has widely neglected to look at the reasons why many of them are intent on opting for "bridge employment" (gradual withdrawal from the workforce, a bridge between career and retirement) as opposed to retiring completely. This study examined the relationship between four reasons for working (social, personal, financial and generative) and three attitudinal responses to bridge employment (job satisfaction, retirement attitudes, and occupational self-efficacy). In a sample of 108 recent retirees holding bridge employment positions, it was found that generativity served as a reliable predictor of job satisfaction and attitudes towards retirement, whereas the social reason for work was only a reliable predictor of attitudes towards retirement. (RH)

ISSN: 00914150

From : <http://baywood.com>

GRANDPARENTS

176/35

Diversity among grandparent caregivers; by Bert Hayslip, Julie Hicks Patrick, Esme Fuller-Thomson (eds).

International Journal of Aging and Human Development, vol 60, no 4, 2005, pp 269-359 (whole issue).

Articles in this special issue of the International Journal of Aging and Human Development draw attention to the range of research being conducted on grandparents as caregivers. Four of the articles investigate populations that have previously received little attention in the grandparent caregiver literature: American grandfather caregivers; Native Canadian grandparents; Latino grandmothers in Southern California; and grandmothers raising grandchildren in rural Kenya. Other articles are notable for methodology used - for example, participants keeping health diaries for a few weeks. (RH)

ISSN: 00914150

From : <http://baywood.com>

HEALTH SERVICES

- 176/36 Increased use of emergency services by older people after health screening; by Lesley Walker, Konrad Jamrozik, David Wingfield (et al).
Age and Ageing, vol 34, no 5, September 2005, pp 480-484.
Evaluation of the Keep Well At Home (KWAH) project in west London indicated that a programme of screening people aged 75+ had not reduced rates of emergency attendances and admissions to hospital. However, coverage of the target population was incomplete. The present analysis considers "efficacy" - whether individuals who completed the screening protocol as intended did subsequently use Accident and Emergency (A&E) services less often. The analysis found that there was an increase of 51% in the crude rate of emergency admissions in the year after the first phase screening, compared with the 12 months before assessment. This was most obvious in individuals deemed at high risk who also underwent the second phase assessment. The available data do not allow us to distinguish between several possible explanations for the paradoxical increase in use of emergency services. However, what seem to be sensible policies do not necessarily have their intended effect when implemented in practice. (RH)
ISSN: 00020729
From : <http://www.ageing.oupjournals.org>
- 176/37 Meeting the challenges of oral health for older people : a strategic review 2005: commissioned and funded by the Department of Health; by Gerodontology Association; Department of Health - DH.
Gerodontology, vol 22, supplement 1, December 2005, 48 pp (whole issue).
It is the underlying principle of this strategic review that oral healthcare should be available to all older people, regardless of their age or circumstances. The review includes 32 recommendations, which are grouped under these headings: education and training; Department of Health (DH); primary care trusts (PCTs) and strategic health authorities (SHAs); care homes, hospitals, and voluntary and community sectors; and research. The Strategy Review Group was chaired by David Davis, Chief Dental Officer's Office, Department of Health. (DH)
ISSN: 07340664
From : <http://www.dentistry.blackwellmunksgaard.com/ger>
- 176/38 Road to freedom: [individual budgets and expansion of low level preventive health services]; by Jennifer Rankin.
Community Care, no 1604, 5 January 2006, pp 32-33.
The government's proposals on individual budgets challenge stereotypes about age and have a lot to offer in delivering better services. However, an emphasis on choice should be accompanied by a clearer focus on improving health and promoting well-being of older people. The author refers to the Green Paper, "Independence, well-being and choice" (Cm 6499), and puts the case for offering more choice via individualised budgets, together with an expansion of low level preventive health services. (RH)
ISSN: 03075508

HOME CARE

- 176/39 Home Care Practice Licence (HCPL): a pilot project to explore the potential of a test to validate the practice of home care workers in the UK: a report of pilot study findings; by Noni Cobban, Ozlem Dincarslan, Dementia Services Development Centre - DSDC, University of Stirling. Stirling: University of Stirling, 2005, 77 pp.
A research team, based at the University of Stirling, has developed a model to validate the practice of home care workers, which has been tested in a pilot study with 120 participants in seven home care provider organisations. This model has drawn on the components used in the UK driving licence as moderated by the Driving Standards Agency. The Home Care Practice Licence (HCPL) process was considered relatively easy to administer, the average time taken to complete the test being 8 weeks per home care worker. Participants indicated that they found the test process useful, and that taking part increased their confidence and stimulated their interest in taking further training and qualifications. The test process also enabled gaps in knowledge, competence and

training to be identified. This report includes examples of the forms and questionnaires used, and describes the methodology, materials and procedures. (RH)

ISBN: 1857692039

Price: £25.00

From : DSDC, Department of Applied Social Science, Iris Murdoch Building, University of Stirling, Stirling FK9 4LA.

HOSPITAL SERVICES

176/40

A multi-centre European study of factors affecting the discharge destination of older people admitted to hospital: analysis of in-hospital data from the ACMEplus project; by Susan E Campbell, D Gwyn Seymour, William R Primrose (et al), ACMEplus Project, University of Aberdeen.

Age and Ageing, vol 34, no 5, September 2005, pp 467-474.

ACMEplus is the Admission Case Mix system for the Elderly plus, a standardised method of recording hospital outcome. Previous research has shown that case-mix systems based on diagnostic data recorded at the end of hospital admission have limited ability to explain variations in hospital outcomes in older patients admitted with medical problems. In the present study, the importance of physical and cognitive function on Day 3 of hospital admission in predicting discharge destination has been quantified through ACMEplus, a Europe-wide project that is much larger in size and scope than earlier studies. After 90 days, of 1,626 patients aged 65+ in the study's 8 centres in 6 European countries, 84.7% were discharged to home, 6.4% were discharged to an alternative residence or were still in hospital, and 8.9% had died in hospital. Diagnosis was less important than physical or mental function in determining outcome, but the data suggested that the predictive ability of presenting problems of the GG type needs to be further explored. The study shows the potential for a small set of clinical variables, collected on Day 3 of a non-elective medical admission, to be used as the basis for a case-mix system for comparing risk-adjusted outcomes in older hospital patients. (RH)

ISSN: 00020729

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

176/41

Transitional care facility for elderly people in hospital awaiting a long term care bed: randomised controlled trial; by Maria Crotty, Craig H Whitehead, Rachel Wundke (et al).

British Medical Journal, vol 331, no 7525, 12 November 2005, pp 1110-1113.

Older patients in hospital who are waiting for a residential care bed are often stigmatised as "bed blockers". Transitional care units where patients wait and receive low levels of treatment following discharge from hospital are often proposed as an alternative solution, but such units are controversial. The authors assessed the effectiveness of a 30-bed transitional care facility serving three hospitals in Adelaide, Australia, compared with usual care (waiting in hospital). Study participants were 320 patients (mean age 83) in acute hospital beds (212 randomised to the intervention, 108 to control). From admission, those in the intervention group stayed a median of 32.5 days in hospital. In the control group, the median length of stay was 43.5 days. Patients in the intervention group took a median of 21 days (6-27 days) longer to be admitted to permanent care than those in the control group. In both groups, few patients went home (14 from the intervention group, 9 from the control group). There were no significant differences in death rates (28% vs 27%) or rates of transfer back to hospital (28% vs 25%). While an off-site traditional care unit can reduce length of stay in hospital without adverse effects for patients, this is at the cost of an overall increase in time taken to gain permanent long-term care. (RH)

ISSN: 09598138

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

HOUSING

176/42

Delivering housing for an ageing population: informing housing strategies and planning policies; by Lorna Easterbrook, Housing and Older People Development Group (HOPDEV).: Housing and Older People Development Group (HOPDEV), October 2005, 21 pp.

The ageing of the population affects every aspect of life in the UK, and is particularly true when planning for housing. This report sets out the key issues facing all those involved in planning the

housing supply, and in planning for communities, for an ageing Britain in the next ten years or so. It is intended for use primarily by planners, commissioners and housing providers - and by older people, whose housing needs are considered. The report concludes with a summary and checklist for action, and suggests websites for further information. The report has been funded though the overall support provided to HOPDEV by the Office of the Deputy Prime Minister (ODPM) and the Department of Health (DH). (RH)

Price: FOC

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

176/43

Right to buy: exclusion of elderly persons' housing: an update of Part II of DoE Circular 13/93; by Office of the Deputy Prime Minister - ODPM. London: TSO, 2005, 7 pp (ODPM Circular 07/2004).

Paragraph 11 of Schedule 5 of the Housing Act 1985 provides that the right to buy does not arise if a property is particularly suitable for occupation by older people and had been let for occupation by a person who was aged 60+. This Circular provides an overview of the procedure for dealing with appeals from tenants against being denied the right to buy under Paragraph 11. It provides revised guidance to landlords on the criteria which the Secretary of State will normally expect to be satisfied when determining whether a property has been correctly excluded from the right to buy under Paragraph 11. (RH)

ISBN: 0117539368

Price: £6.50

From : TSO, PO Box 29, Norwich, NR3 1GN. www.tso.co.uk/bookshop

INFORMATION

176/44

Information about the information: navigating services and supports for older people; by Alison Ballantyne, Julianne Cheek, David Gillham (et al).

Quality in Ageing, vol 6, no 3, November 2005, pp 17-23.

Having an ageing population is an issue facing many countries, particularly western nations. With governments and service providers focusing on healthy ageing and ageing in place, notions of choice and active participation of older people in selecting services appropriate to remaining in the community are also emphasised. Central to this is the issue of information navigation: knowing what services are available and how to get that information, for older people and those who support them. Based on a series of Australian qualitative studies of service provision and using perspectives from older people, their families and those who provide services for them, this paper argues that greater attention needs to be paid to the process of information navigation as opposed to providing even more information content. (RH)

ISSN: 14717794

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

INTERMEDIATE CARE

176/45

Someone to expect each day: [intermediate care time limit]; by Michelle Cornes, Jill Manthorpe. Community Care, no 1602, 8 December 2005, pp 36-37.

Intermediate care is often seen as a lifeline to establishing older people's independence after leaving hospital. The authors describe the findings of a research project for Help the Aged, "Older people's experiences of intermediate care: building a case for continuous care". The project suggests that the forthcoming White Paper on care outside hospital will need to address how more intensive short-term support - such as that provided by intermediate care - can be cushioned by a tier of low-level continuous voluntary sector support which guarantees older people "someone to expect each day". (RH)

ISSN: 03075508

176/46

A whole system study of intermediate care services for older people; by John B Young, Mike Robinson, Sue Chell (et al).

Age and Ageing, vol 34, no 6, November 2005, pp 577-582.

Intermediate care (IC) services have been widely introduced in England and have the strategic objectives of reducing hospital and long-term care use. There is uncertainty about the clinical outcomes of these services and whether their strategic aims will be realised. The Health Authority and City Council in Leeds jointly developed a commissioning framework for older people's services to provide support and rehabilitation either at home or through short term care home placements. A quasi-experimental study compared a group of 800 older people before introduction of the IC service (control group) with a similar group of 848 recruited and followed up after introduction of IC. Clinical outcomes, hospital and long-term care use were similar for both groups. Uptake of IC was lower than anticipated at 29%. An embedded case control study comparing 246 patients who received IC with a matched sample from the control group demonstrated similar clinical outcomes but increased hospital bed days used over 12 months. Thus, this city-wide IC service did not achieve its strategic objective of reducing long-term care and hospital use. (RH)

ISSN: 00020729

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

INTERNATIONAL AND COMPARATIVE

(See Also 176/34, 176/40)

176/47

Ageing and vulnerable elderly people: European perspectives; by Emily Grundy.

Ageing and Society, vol 26, part 1, January 2006, pp 105-134.

The processes and circumstances that create vulnerability among older people, specifically to a very poor quality of life or an untimely or degrading death, are considered. Models of ageing processes are used to define vulnerable older people as those whose reserve capacity falls below the threshold needed to cope successfully with the challenges they face. Compensatory supports may intervene to mitigate the effects of the challenges and to rebuild reserve. The dimensions of reserve, challenges and compensation are discussed, with emphasis on demographic and other influences on the availability of family and social support. Policy initiatives to reduce vulnerability can focus on each part of the dynamic process that create vulnerability, namely ensuring that people reach later life with reserve, reducing the challenges they face in later life, and providing adequate compensatory supports. The promotion through the life-course of healthy lifestyles and the acquisition of coping skills, strong family and social ties, active interests, and savings and assets, will develop reserves and ensure that they are strong in later life. Some of the physical and psychological challenges that people may face as they age cannot be modified, but others can. Interventions to develop compensatory supports include access to good acute care and rehabilitation when needed, substitute professional social and psychological help in times of crisis, long-term help and income support. Our knowledge of which interventions are most effective is, however, limited by the paucity of rigorous evaluation studies. (RH)

ISSN: 0144686X

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

176/48

Changes in the living arrangements of elderly people in Greece : 1974-1999; by Eleni Karagiannaki, ESRC Centre for Analysis of Social Exclusion - CASE, Suntory-Toyota International Centres for Economics and Related Disciplines - STICERD, London School of Economics and Political Science. London: STICERD, 2005, 28 pp (CASEpaper 104).

During the period 1974-1999, the percentage of older people living with their adult children in Greece reduced from 55% to about 32%. This paper examines determinants of this decrease in intergenerational co-residence and its implications for economic well-being. The main factor that has contributed to this change in living arrangements has been the increase in pension incomes. Although income was the most important force driving the increase in independent living among older Greeks throughout the period examined, its contribution to the change reduced significantly during the 1990s. As the importance of incomes in accounting for changes in older people's co-residence rates reduces over time, so the contribution of the unobserved year effect rises. This finding points to the role of changing preferences to determining intergenerational co-residence. Despite the substantial decrease in intergenerational co-residence, the family in Greece still plays a very significant role in protecting poor older people. (RH)

Price: FOC

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

- 176/49 A framework for understanding vulnerabilities in old age; by Elisabeth Schröder-Butterfill, Rūly Marianti.
Ageing and Society, vol 26, part 1, January 2006, pp 9-35.
Identifying vulnerable older people and understanding the causes and consequences of their vulnerability is of human concern and an essential task of social policy. To date, vulnerability in old age has mainly been approached by identifying high risk groups, like the poor, childless, frail or isolated. Yet vulnerability is the outcome of complex interactions of discrete risks, namely of being exposed to a threat, of a threat materialising, and of lacking the defences or resources to deal with a threat. The authors review approaches to vulnerability in various disciplines, in order to develop a systematic framework for approaching vulnerability. This framework distinguishes and examines the interactions among the domains of exposure, threats, coping capacities and outcomes. Drawing in European and Asian gerontological literature, the authors discuss what might be meant by these domains and their place in the understanding of vulnerability to old age. Two case studies are presented - one on homelessness in Britain, the other on familial care provision in Indonesia - to illustrate the ways in which specific vulnerabilities are created and distributed over the life course. (RH)
ISSN: 0144686X
From : <http://journals.cambridge.org/>
- 176/50 Identifying vulnerable older people: insights from Thailand; by Peter Lloyd-Sherlock.
Ageing and Society, vol 26, part 1, January 2006, pp 81-103.
The usefulness of the "asset vulnerability framework (devised by Caroline Moser, 1998) for assessing the economic well-being of older people living in poor rural and urban communities is explored for Thailand. Gaining an accurate view of older people's material situation is essential for the development of policies that target the needs of older people in contexts of resource scarcity. The paper shows the limitations and potential biases of assessments based purely on reported income levels. It then sets out the key principles of the asset vulnerability framework which seeks to combine information about exposure to different economic risks with the relative capacity to deal with them. Drawing on survey data, the paper maps resilience to economic risk, and finds that the very old and those living in rural communities are in the most precarious position, whereas gender differences are less apparent. The asset vulnerability framework is then applied to specific forms of risk: catastrophic health expenditure and the death of a child caused by HIV/AIDS. Patterns of vulnerability revealed by the framework roughly accord with those revealed by reported income, but there are important differences, such as the size of the vulnerability gap between rural and urban populations. The framework provides a much fuller picture of why some groups of older people are in a more precarious economic situation than others. The paper recommends that future surveys draw on Moser's framework, and place emphasis on identifying the risks that older people consider most important. (RH)
ISSN: 0144686X
From : <http://journals.cambridge.org/>
- 176/51 Old-age vulnerability, ill-health and care support in urban areas of Indonesia; by Peter van Eeuwijk.
Ageing and Society, vol 26, part 1, January 2006, pp 61-80.
The epidemiological health transition in Indonesia has led to a substantial ageing of its population and a rapid increase in the prevalence of chronic progressive illnesses in advanced age that, in most cases, require some sort of care. This shift from 'cure' to 'care' necessitates new paradigms in both healthcare delivery and research on older people in less developed countries. Care involves both attitudes and practice, and is a dynamic interaction between giver and recipient. The vulnerability of frail older people is strongly related to the resources, capability and willingness of kin and non-kin to act as care-givers for extended periods. Normative filial piety and kinship obligations are no longer undisputed. This paper reports a study of the care and support received by chronically ill close family members, most often a wife or a daughter (or both), to provide treatment, care and support. The main care activities are support with activities of daily living (ADLs) and therapies for specific illnesses. Caregivers experience manifold burdens when

providing care for frail older people, and tend to reduce their support as the severity and duration of their relative's illness increases. It is shown that an older person's vulnerability to inadequate care provision, or its withdrawal, is associated with marital status and gender (unmarried women and widows being most at risk), poverty, weak support networks, and having caregivers who are themselves vulnerable. (RH)

ISSN: 0144686X

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

176/52

Psychological dispositions and self-reported health among the 'oldest-old' in China; by Zheng Wu, Christoph M Schimmele.

Ageing and Society, vol 26, part 1, January 2006, pp 135-151.

This study's objective is to further our knowledge about what constitutes 'health' for the 'oldest-old' (people aged 80+) in China. It is recognised that apart from the absence of disease, good health is a subjective experience, and it is posited that self-reported health is associated with psychological disposition, or in other words, that an individual's personal attitudes, motivations and beliefs condition their perception of health and illness. The authors use data from China's Longitudinal Healthy Longevity Survey (1998 and 2000 waves) to examine whether psychological disposition had an independent effect of self-reported health in 2000. The study is based on a stratified random sample of 4,366 people aged 80+. After controlling for health status and socio-demographic variables, the multivariate longitudinal results demonstrate that a robust psychological disposition was indeed associated with good short-term, self-reported health. The findings also illustrate that the effect differed by age, for the relationship was significant for octogenarians and nonagenarians, but insignificant for centenarians. Data limitations prevented an empirical investigation of the processes that underlie the relationship between psychological disposition and self-reported health. (RH)

ISSN: 0144686X

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

176/53

Understanding vulnerabilities in old age: papers from a workshop supported by the Asia-Europe Foundation and the European Alliance for Asian Studies; by Elisabeth Schröder-Butterfill, Rully Marianti (guest editors).

Ageing and Society, vol 26, part 1, January 2006, pp 3-134.

The workshop, Old-age Vulnerabilities: Asian and European Perspectives, took place in Malang, Indonesia in July 2004. The aim was to examine the outcomes that older people feel vulnerable to, the circumstances that contribute to their vulnerability, and the coping capacities that mitigate the consequences. The intention of papers presented in this themed issue of Ageing and Society is to highlight aspects of insecurity and lack of well-being in old age. The guest editors draw together the various overarching themes (pp 3-8); and in the first paper, consider different "ingredients" of vulnerability and their interactions. Other papers are case studies that illustrate the cultural contexts of disadvantaged and marginalised groups: the effects of migration, social structure and old-age support in three Indonesian communities; ill health and care support in urban areas of Indonesia; identifying vulnerable older people in Thailand; and European perspectives on ageing and vulnerable older people. (RH)

ISSN: 0144686X

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

LEARNING DIFFICULTIES

(See 176/12)

LONG TERM CONDITIONS

176/54

Chronic pain as perceived by older people: a qualitative study; by B Sofaer, A P Moore, I Holloway (et al).

Age and Ageing, vol 34, no 5, September 2005, pp 462-466.

There seems to have been little or no information on how to improve the quality of life for older people who suffer chronic pain, or on the resources available to them. This study's aim was to ascertain from older people the practical, physical and psychosocial limitations they faced because

of chronic pain, and the strategies they used to deal with them. A qualitative approach to generating data was chosen, using a Grounded Theory approach and unstructured interviews with 63 people ranging on age from 60 to 87. Audio tapes were transcribed verbatim. The material was coded and collapsed into themes. Two main themes emerged: the desire for independence and control; and adaptation to a life with chronic pain. The valuing of independence is in line with previous findings. With only three exceptions, none of the participants were certain on where to get help with practical issues and so they lived in fear of loss of their independence. Sub-categories forming the theme on adaptation were: acceptance and non-acceptance; pacing oneself; helping other people; the use of prayer; and "looking good and feeling good". Where independence and control is effective, older people may adapt better to chronic pain. The interview data informed the development of a booklet designed to meet the needs of older people with chronic pain. (RH)

ISSN: 00020729

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

MEDICAL ISSUES

176/55 Effects of comorbidities and post-operative complications on mortality after hip fracture in elderly people: prospective observational cohort study; by J J W Roche, R T Wenn, O Sahota (et al). British Medical Journal, vol 331, no 7529, 10 December 2005, pp 1374-1376.

Mortality is high after surgery for hip fracture in older patients. In a study over a 4-year period of 2448 consecutive patients admitted to hospital with an acute hip fracture, mortality was 9.6% at 30 days and 33% at one year. The most common postoperative complications were chest infection (9%) and heart failure (5%). In patients who develop postoperative heart failure, mortality was 65% at 30 days and 92% within one year. In those who developed postoperative chest infection, mortality at 30 days was 43%. Patients with multiple comorbidities, especially respiratory disease and malignancy before surgery for hip fracture were at a higher risk of mortality. Such patients offer a clear target for specialised medical assessment. (RH)

ISSN: 09598138

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

176/56 Recognising heart failure in elderly patients with stable chronic obstructive pulmonary disease in primary care: cross sectional diagnostic study; by Frans H Rutten, Karel G M Moons, Maarten-Jan M Cramer (et al).

British Medical Journal, vol 331, no 7529, 10 December 2005, pp 1379-1382.

51 primary care practices in the Netherlands participated in this study of 1,186 patients aged 65+ with chronic obstructive pulmonary disease (COPD) diagnosed by their general practitioner (GP) who did not have a diagnosis of heart failure confirmed by a cardiologist. 405 patients underwent systematic diagnostic investigation, which resulted in 83 receiving a new diagnosis of concomitant heart failure. Independent clinical variables for concomitant heart failure were a history of ischaemic heart disease, high body mass index (BMI), laterally displaced apex beat, and raised heart rate. The addition of natriuretic peptide measurements and electrocardiography further increase the accuracy of the diagnosis. (RH)

ISSN: 09598138

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

MEDICATION

176/57 Handled with care?: managing medication for residents of care homes and children's homes - a follow-up study; by Commission for Social Care Inspection - CSCI. London: Commission for Social Care Inspection - CSCI, February 2006, 44 pp (CSCI-SSR-34-5000-DWP-022006).

In its report, "The management of medication in care services 2002-03" (TSO, 2004), CSCI's predecessor organisation the National Care Standards Commission (NCSI) identified deficiencies in care homes' practice in managing medication. The present report considers whether homes are getting better at meeting standards for the management of medication, and indicators for good and poor practice. It shows that while there has been some slight improvement in performance overall (with the exception of nursing homes for older people), homes still do not place enough importance on this area of care. Key areas of poor performance identified are: wrong medication

being given to residents; poor recording of medicines received and administered; medicines being inappropriately handled by unqualified staff; and medicines being stored inappropriately. Accordingly, the report makes recommendations for councils, primary care organisations, the National Patient Safety Agency, as well as for the homes themselves. Appendices include: national minimum standards on medication; summary of the 2004 NCSC report; and questionnaires for regulatory inspectors and pharmacist inspectors. (RH)

Price: FOC

From : Commission for Social Care Inspection, 33 Greycoat Street, London SW1P 2QF. Copies from: Admail 3804, Newcastle, NE99 1DY. E-mail: csci@accessplus.co.uk
http://www.csci.org.uk/publications/national_reports/default.htm

MENTAL HEALTH

(See Also 176/2, 176/3, 176/52)

176/58 The experience of shame in older psychiatric patients: a preliminary enquiry; by D Crossley, K Rockett.

Aging & Mental Health, vol 9, no 4, July 2005, pp 368-373.

Shame is a complex set of attitudes, feelings and behaviour that tend to motivate hiding and, if provoked, can lead to conflict with others. It is also related to the exercise of power within the relationship of care, and therefore may be a relevant factor if older people are forced to accept increased dependency. There are no systematic enquiries into shame processes and older psychiatric patients. The experience of trait and situational shame and psychopathology was explored with 50 older psychiatric patients, using a range of questionnaire measures. As predicted, trait shame correlated significantly with anxiety and depression scores. There was preliminary evidence to suggest that being in need of others may be shame-provoking for some patients, and may have a bearing on why some patients fear dependency, conceal symptoms and have conflicting relationships with carers. (RH)

ISSN: 13607863

From : <http://www.tandf.co.uk/journals>

MENTAL HEALTH SERVICES

(See 176/58)

MENTAL ILLNESS

176/59 Beliefs about mental illness and willingness to seek help: a cross-sectional study; by D L Segal, F L Coolidge, M S Mincic (et al).

Aging & Mental Health, vol 9, no 4, July 2005, pp 363-369.

Evidence indicates that older people under-utilise mental health services, but little is known empirically about the perceptions older people have about mental illness and the attitudes about seeking professional help for psychological problems. This study examined beliefs about mental illness and willingness to seek help among 96 younger (ages 17-26) and 79 older (ages 60-95) people. Participants completed the Beliefs Towards Mental Illness Scale and the Willingness to Seek Help Questionnaire. Both age groups had generally similar perceptions of mental illness, except that older people were more likely to perceive the mentally ill as being embarrassing and having poor social skills. Older people also did not report a lower willingness to seek psychological help. Correlational analyses showed that, among older people, increases in negative attitudes about mental illness (specifically, the view that the mentally ill have poor interpersonal skills) are associated with decreases in willingness to seek psychological services. An implication is that negative stereotypes about mental illness held by some older people could play a role in their under-use of mental health services. Other barriers to mental health care are also discussed. (RH)

ISSN: 13607863

From : <http://www.tandf.co.uk/journals>

- 176/60 Deliberate self-harm in older people revisited; by H C Lamprecht, S Pakrasi, A Gash (et al). *International Journal of Geriatric Psychiatry*, vol 20, no 11, November 2005, pp 1090-1096. This was a retrospective observational study which reviewed 97 episodes of deliberate self-harm (DSH) involving 82 patients aged 65+ referred to the Liaison Psychiatric Service of the Tees and North East Yorkshire NHS Trust South locality from 2000 to 2002. There was a year-on-year increase in the number of older people presenting with DSH, especially in men. 21% of the older men had no discernible psychiatric diagnosis. There was a small number of people who repeated DSH within a year. Males were as likely to be repeaters as females. 23% of all patients saw a general practitioner (GP) in the seven days before the episode of DSH, and this increased to 58% in the 4 weeks preceding the episode of DSH. More males (56%) than females (26%) who presented with DSH were married. The most common method of DSH was medication overdose (93%) of which 66% used prescribed medication. DSH in older people may start to mirror some of the characteristics seen in younger adults with DSH; and while numbers are small compared to younger adults, the observations suggest an increase in DSH in men. Marriage may no longer be a protective factor in prevention of DSH in older men. Longer term observational studies of DSH in older people are required to confirm these changing patterns. GPs may have an important role to play in prevention of DSH in later life. (RH)
ISSN: 08856230
From : <http://www.interscience.wiley.com>
- 176/61 New guidelines for schizophrenia in the elderly; by Chris McWilliam. *Geriatric Medicine*, vol 35, no 12, December 2005, pp 19-25. Older people with schizophrenia and their carers have complex medical, psychiatric and social problems, and their care needs have been poorly defined. Guidelines for schizophrenia have resulted in the development of extensive services for patients aged under 65. However, it is only recently that government initiatives have acknowledged the needs of older schizophrenic patients, which the author reviews in this article. (RH)
ISSN: 0268201X
From : <http://www.gerimed.co.uk>
- 176/62 Older people with chronic schizophrenia; by S Karim, R Overshott, A Burns. *Aging & Mental Health*, vol 9, no 4, July 2005, pp 315-324. Older people with chronic schizophrenia are a numerically small but important group with complex clinical and service needs. Along with a reduction in positive schizophrenic symptoms with increasing age, a majority suffer from negative symptoms, cognitive deficits, depression, side effects due to long-term use of antipsychotics and comorbid medical problems. They may have social disabilities making them vulnerable to poverty, isolation and poor quality of life. Evidence suggests that judicious use of antipsychotics combined with psychotherapy and psychosocial interventions are effective. There are shortcomings in the standard of both hospital and community care, and the cost implications of providing adequate services are high. This literature review aims to give an overview of the characteristics and needs of older people with chronic schizophrenia, to stimulate research and raise issues of concern. (RH)
ISSN: 13607863
From : <http://www.tandf.co.uk/journals>

MIGRATION

- 176/63 Migration, social structure and old-age support networks: a comparison of three Indonesian communities; by Philip Kreager. *Ageing and Society*, vol 26, part 1, January 2006, pp 37-60. Contemporary trends in population ageing and urbanisation in the developing world imply that the extensive out-migration of young people from rural areas coincides with, and is likely to exacerbate, a rise in the older share of the rural population. This paper draws on the results of anthropological and demographic field studies in three Indonesian communities, to examine the impact of migration on vulnerability at older ages. The methodology for identifying vulnerable older people has a progressively sharper focus, beginning first with important differences between the communities, then examining variations by socioeconomic strata, and finally the variability of older people's family networks. Comparative analysis indicates considerable heterogeneity in

past and present migration patterns, both within and between villages. The migrants' contributions are a normal and important component of older people's support, often in combination with those of local family members. Higher status families are commonly able to reinforce their position by making better use of migration opportunities than the less advantaged. Although family networks in the poorer strata may effect some redistribution of children's incomes, their social networks are smaller and insufficient to overcome their marked disadvantages. Vulnerability thus arises where several factors - including migration histories - result in unusually small networks, and when migrations are within rural areas. (RH)

ISSN: 0144686X

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

NUTRITION

176/64

Recipe for Life : Helping older people who live alone to eat well: final report of research, September 2005; by Chris Jones, Belinda Dewar, Caroline Donaldson, Royal Bank of Scotland Centre for the Older Person's Agenda, Queen Margaret University College, Edinburgh. Edinburgh: The Royal Bank of Scotland Centre for the Older Person's Agenda, 2005, 111 pp.

Recipe for Life is a 3-year project which aims to find better ways to support older people to eat well. The project is being undertaken by the Royal Bank of Scotland Centre for the Older Person's Agenda at Queen Margaret University College, in partnership with the Dementia Services Development Centre (DSDC) at the University of Stirling and Age Concern Scotland. The main aim is to identify action that can be taken to improve the physical and social well-being of older people who live alone and have difficulty leaving home in relation to their nutritional and food-related needs, from the perspective of older people, family members, friends and social work staff. This report describes the researchers' approach to the project, and what they found on: the range of food-related services available; difficulties experienced by frail older people; assessing food-related needs; the meaning of "eating well"; factors affecting appetite or motivation to eat; and support and barriers to eating well. Appendices include examples of documentation used in relation to the data collection which was carried out in two Scottish local authorities. The project was funded by Zurich Financial Services Community Trust under their Zurich Cares Older People Programme. (RH)

Price: FOC

From : Queen Margaret University College, Corstorphine Campus, Edinburgh, EH12 8TS.
website: <http://www.qmuc.ac.uk/opa>

PENSIONS AND BENEFITS

(See Also 176/32, 176/73)

176/65

The challenge of pension reform; by David Laws.

Quality in Ageing, vol 6, no 3, November 2005, pp 4-7.

Pension reform is now probably our main social welfare policy challenge. For too long, it has been an issue that successive governments have failed to address, and urgent reform is needed now. The author is the Liberal Democrat Shadow Secretary of State for Work and Pensions, and on 30 November 2005 (his 40th birthday), the Government's independent Pensions Commission, chaired by Adair Turner, will report to Parliament on its conclusions for reform of the UK pensions system. The author outlines problems with the current UK pensions system, as he sees them, and what the Liberal Democrats propose on the subject. These include: a citizen's pension; a higher basic state pension; greater freedom for people to choose how they would save; and looking at how society views retirement. The author accepts that too few people are saving for their retirement. Nonetheless, the system needs to be fair and to be sustainable. (RH)

ISSN: 14717794

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

176/66

Facts and misunderstandings about pension and retirement ages; by Ann V Salvage, Hannah Zeilig, Anthea Tinker (et al), Institute of Gerontology, King's College London; Age Partnership Group, Department for Work and Pensions - DWP. London: Department for Work and Pensions - DWP, 2005, 31 pp (Issue no. APG 7).

Debate in the media about pensions and retirement ages in the UK in the media is characterised by confusion about the present arrangements and how these are likely to change. This guide aims to provide employers with clear and accurate information on pension ages and retirement ages as they currently exist in the UK. It highlights ways in which they are likely to change in the future, and suggests further sources of information and guidance. This guide has been commissioned by the Department for Work and Pensions (DWP) on behalf of the Age Partnership Group (APG) as part of the National Guidance Campaign (NGC). (RH)

ISBN: 1843884402

Price: FOC

From : Download copies : <http://www.agepositive.gov.uk/agepartnershipgroup>

176/67

Waiting for Gordon: [review of The Turner Commission's proposals]; by Mark Ivory.

Community Care, no 1605, 12 January 2006, pp 30-31.

The Turner Commission's proposals have re-ignited the debate about how best to tackle pensioner poverty, the means test and the impact of inequality. This article notes that the Chancellor of the Exchequer, Gordon Brown, will not be pleased that the Commission is against expanding the Pension Credit means test, and instead favours state pension increases linked to earnings. Adair Turner's report makes clear the need to end health inequalities, but differences in life expectancy between deprived and wealthy areas will lead to further disparities if the state pension age (SPA) is raised to 67. This article also comments that although the report is helpful to carers who are out of work, it does not say anything about carers who want to work part-time. (RH)

ISSN: 03075508

POVERTY

(See 176/67)

REMINISCENCE

176/68

The Holocaust as a context for telling life stories; by Brian de Vries, Peter Suedfeld, Robert Krell (et al).

International Journal of Aging and Human Development, vol 60, no 3, 2005, pp 213-228.

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

ISSN: 00914150

From : <http://baywood.com>

176/69

Psychosocial benefits of solitary reminiscence writing: an exploratory study; by H Elford, F Wilson, K J McKee (et al).

Aging & Mental Health, vol 9, no 4, July 2005, pp 305-314.

It has been claimed that reminiscence has benefits for older people's psychological well-being, and that writing memories may be a therapeutic process. This paper is part of the study, "Evaluating the impact of reminiscence on quality of life of older people", for the Economic and Social Research (ESRC) Growing Older programme (GO). It describes an exploratory study in which five nursing home residents engaged in a process of writing their memories by themselves in a series of booklets containing memory prompts and photographs over a 4-week period. Completed booklets were typed up by researchers and returned to participants the following week.

Participants were also given a bound copy at the end of the study period. Analysis focuses on two sets of data: an in-depth case study of one participant; and a thematic analysis of field notes, researcher reflections, and the written material produced by the other study participants. The case study revealed three main themes: views on the past; sharing the past; and confidence in writing about the past. The field note analysis indicated the presence of four themes: proof and maintenance of skills; psychological or internal processes; social contact; and pleasure in reminiscence. The writing was seen as cathartic and provided a meaningful purpose, an opportunity to exercise writing skills and memory, and a focus for participants to share key stories with others. This exploratory study suggests there is potential in using solitary writing within a reminiscence framework to improve psychological well-being in older people. However, caution should be exercised when encouraging older people to write their stories. Issues of confidentiality, audience, support and appropriateness of the activity for the individual need to be considered. (RH)

ISSN: 13607863

From : <http://www.tandf.co.uk/journals>

176/70 Telling it in time: interpreting consistency and change in the life stories of Holocaust survivors; by Brian Schiff.

International Journal of Aging and Human Development, vol 60, no 3, 2005, pp 189-212.

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

ISSN: 00914150

From : <http://baywood.com>

176/71 Uses of reminiscence : functions and benefits: editorial; by Peter G Coleman.

Aging & Mental Health, vol 9, no 4, July 2005, pp 291-294.

Reminiscence work was generally discouraged thirty to forty years ago, but has since come to the fore in local and oral history. This editorial introduces three further papers in a special section on reminiscence in later life in this issue of Aging & Mental Health. The author reviews literature on previous work on the types and functions of reminiscence and on reminiscence work. He notes the "Making Memories Matter" project of the European Reminiscence Network coordinated by Pam Schweitzer as a fine example of work aimed at involving older participants in different European countries. (RH)

ISSN: 13607863

From : <http://www.tandf.co.uk/journals>

RESIDENTIAL AND NURSING HOME CARE

(See Also 176/7)

176/72 An analysis of allied health professional training in care homes for older people in Glasgow; by Jeanette Clelland, Danny Scott, Donna McKenzie.

Quality in Ageing, vol 6, no 3, November 2005, pp 24-36.

The training of care staff in care homes for older people is important to ensure the maintenance of evidence-based and effective care. Moreover, training can assist in changing attitudes and

promoting improved quality of care for residents. To this end, the Allied Health Professional (AHP) Care Homes Training Team provides training to care staff throughout the greater Glasgow area. This study sought to elicit service user views and opinions about the team's current provision to assist in informing prospective developments and enhancing future performance. Many of the responses discussed training in general in care homes, so should be of interest to all AHPs. Ten semi-structured interviews were undertaken with home management staff, which were thematically analysed. The response rate was 100%. 648 care staff had received training from the team in the 10 care homes. However, only 36% of these staff remained employed by the homes at the time of the study. Only these remaining staff received postal semi-structured questionnaires; 14% responded. A range of service users' views and opinions were elicited. Topics covered included: induction training; career progression through training; training records; team training and support provision; changes implemented as a result of training; barriers to implementing training; structure, times, content and delivery of training sessions; training gaps; information and training for managers; and appropriate topics for training. Feedback was extremely positive, but the study raised wider implications for older people's care in care homes, which merit further research and debate. (RH)

ISSN: 14717794

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

RETIREMENT

(See Also 176/34)

176/73

The state retirement age: common misconceptions about retirement and the state pension; by Hannah Zeilig, Anthea Tinker, Ann V Salvage.

Quality in Ageing, vol 6, no 3, November 2005, pp 8-16.

The Age Partnership Group (APG) and the Department for Work and Pensions (DWP) asked the Institute of Gerontology at King's College, London to examine recurrent misconceptions about pension ages and retirement ages. These take the form of misunderstandings, confusions, and in some instances even fictions that are perpetrated via the media and sometimes by organisations in the pensions field. The work was aimed at a professional audience, and was part of a campaign to raise employers' awareness of flexible employment and retirement opportunities prior to implementation of the age discrimination regulations in October 2006. This article focuses predominantly on practical rather than theoretical issues. However, the policy and practice implications that arise, when the most basic topics associated with pensions and retirement are not properly understood, are profound. These can affect people on the verge of pension age, as well as those who are attempting to plan for their retirement, also their employers. Without a clear understanding of the facts about entitlement to a basic state pension, for instance, individuals and their employers may not pursue the opportunities open to them. In this article, the most salient of these misconceptions are examined and redressed. This was undertaken through an extensive literature review, which examined not only a wide range of media reports, but also encompassed government documents and academic papers. The Pensions Policy Institute (PPI) in particular gave guidance. (RH)

ISSN: 14717794

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

SHELTERED HOUSING

176/74

Explaining about ... sheltered housing and the Single Assessment Process; by Peter Huntbach, Jilly Alexander.

Working with Older People, vol 9, issue 4, December 2005, pp 8-11.

The authors explain in this article, that for many professionals within the sheltered housing sector, this is a time of real change and opportunity. There are benefits to be reaped for residents and staff by connecting health, housing and social care professionals through the Single Assessment Process and this article outlines how SAP does work in practice within the sheltered housing service and where it sits with the assessments and support plans already undertaken. It concludes that sheltered housing providers will have to adapt their working practises to incorporate needs assessments and support plans, as required by Supporting People. To do so will help both

residents to be at the centre of the process and establish the role of staff within the whole system of care management. (KJ)
ISSN: 13663666

SOCIAL NETWORKS

(See 176/63)

SOCIAL SERVICES

(See 176/38)

TRAINING

(See 176/72)

TRANSPORT

176/75

Missing the bus: a study of travel concessions for older people in Eastleigh's southern parishes by Eastleigh Southern Parishes Old People's Forum; by David Andrewes, Diane Andrewes, Jackie Charles (et al), Eastleigh Southern Parishes Old People's Forum - ESPOPF. Old Bursledon, Southampton: Eastleigh Southern Parishes Old People's Forum - ESPOPF, 2006, 32 pp.

Travel concessions (travel tokens or mandatory bus passes) contribute greatly to maintaining older people's independence and quality of life. This study undertaken by older people themselves aimed to inform and influence national and local travel concession policies. Of 2,366 questionnaires delivered to older people in southern parishes in the Borough of Eastleigh, 343 (14.5%) were returned by post. The report presents findings regarding factors influencing people's choice of travel concession; 99% of respondents support the National Pensioners Convention (NPC) Campaign for a Nationwide Free Travel Pass. The report also includes respondents' comments on the survey. The report makes recommendations about free or concessionary travel to the government, Hampshire County Council, and the Borough Council; also to transport operators about services. The appendices include a copy of the questionnaire. (RH)

From : Download report: <http://www.espopf.org.uk>

For further information, contact: Diane Andrews, Orchard Hill, Salterns Lane, Old Bursledon, Southampton SO31 8DH. Email: diane.andrewes@virgin.net

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.

4 April 2006

Wanless Social Care Review: Future options for older people

The King's Fund commissioned a social care review last year, led by Sir Derek Wanless, examining the long-term demands for and supply of social care for older people in England. The findings of the Review will be explored at a one-day conference. This will be the first opportunity for delegates to explore the Review findings, hear the reactions of key stakeholders, ask questions of Sir Derek Wanless and social care leaders, and debate the implications with peers and senior figures in the world of social care.

Organised by: King's Fund

Venue: Inmarsat Conference Centre

Location : central London, England

Details : Customer Services, Neil Stewart

Associates, PO Box 39976, 2nd Floor, 1 Benjamin Street, London, EC1M 5YT

Fax : +44 (0)20 7490 8830

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.

18-24 April 2006

Managing Violence across Care Settings

This two-day conference with an optional day's workshop will examine current approaches in managing violence and aggression across a number of care settings and will provide a platform for exploring the benefits of adopting innovative evidence based practices versus the more traditional approaches.

Organised by: Studio3Events

Venue: Intercontinental Hotel

Location : Malta

Details : Graeme Brady, Studio III, 32 Gay Street, Bath BA1 2NT

Tel : +44 (0)1225 334111

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

IPA European Regional Meeting. Symposia and workshops - 31 December 2005. Orals and posters - 28 February 2006.

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

4-5 May 2006

Time Banks UK National Conference

This conference has the theme 'community engagement and older people' and will provide an opportunity to: Keep informed about developments and hot issues; Network with other timebrokers, influencers and stakeholders; Attend workshops, info sessions and interactive exchanges; Learn more about co-production. Mashie Blech will be speaking and running a workshop - she has run the elderplan time bank in New York City for sixteen years.

Organised by: Time Banks UK

Venue: The Future Inn, Cardiff Bay

Location : Cardiff, Wales

Details : Stella, City Works, Alfred Street, Gloucester, GL1 4DF

Tel : 01452 541439

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. Keynote speaker: Professor Bernard Crump (Chief Executive, NHS Institute for Innovation and Improvement) and Dr David Colin-Thome (National Clinical Director for Primary Care - DH).

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

9 May 2006

Developing and Co-ordinating an End-of-life Strategy

Speakers: Chairman: Eve Richardson (CE, National Council for Palliative Care).

Organised by: HSJ Conferences

Venue: Earls Court Exhibition Centre

Location : London, England

Details : 33-39 Bowling Green Lane, London, EC1R 0DA

Tel : 0845 056 8299, *Fax :* +44 (0)20 7505 6001

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

16-18 May 2006

Pensioners' Parliament 2006

Organised by: National Pensioners Convention (NPC)

Venue: Winter Gardens, Blackpool

Location : Blackpool, England

Details : Alison Purshouse, 19-23 Ironmonger Row, London, EC1V 3QN

Tel : +44 (0)20 7553 6510, *Fax :* +44 (0)20 7553 6511

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

20-26 May 2006

Adult Learners' Week

Organised by: NIACE

Location : England

Details : Renaissance House, 20 Princess Road West, Leicester, LE1 6TP

Tel : +44 (0)116 204 4200, *Fax :* +44 (0)116 285 4514

23 May 2006

Older Women in Film Study Day

This study day celebrates the culmination of a joint project between the BRI and U3A. It sees the launch of a new online research guide on Older Women in Film and questions the scarcity of roles for older women in films.

Organised by: BFI jointly with University of the Third Age

Venue: NFT1, London

Location : London, England

Details : NFT Box Office

Tel : +44 (0)20 7928 3232

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

26 May 2006

East Midlands & Trent Falls Symposium

Organised by: Nottingham City Hospital NHS Trust

Venue: Nottingham's Conference & Exhibition Centre - The Albert Hall

Location : Nottingham, England

Details : Sue Pinkett, Conference Office, Post Graduate Education Centre, Nottingham City Hospital, Hucknall Road, Nottingham, NG5 1PB

Tel : +44 (0)115 8402608, *Fax :* +44 (0)115 9627937

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

1 June 2006

Commissioning - Getting it right for everyone

To identify the challenges facing commissioners and to determine how these might best be addressed using examples of current good practice.

Speakers: Chair: Martin Green (Chief Executive, ECCA).

Organised by: Pavilion and English Community Car Association (ECCA)

Venue: The Manchester Conference Centre, University of 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

8 June 2006

Housing for an Ageing Population - the Agenda for the Future

The ageing of the population affects every aspect of society - this is particularly true of housing. 30% of all UK households are currently headed by someone aged 60 or over and this is set to increase. This conference will look ahead to how to meet the housing challenges and opportunities presented by our ageing society, as well as making improvements to the housing and support available today.

Speakers: Chair: Helena Herklots. Malcolm Dean (The Guardian); Sue Adams (Director, Care & Repair England); Jane Minter (Housing 21); David Gardiner (BGOP); John Galvin (Director, EAC) and others.

Organised by: HOPDEV organised by FOUNDATIONS

Venue: Royal College of Surgeons, London

Location : London, England

Details : S Collins, FOUNDATIONS, Bleaklow House, Howard Town Mill, Glossop, Derbyshire, SK13 8HT

Tel : +44 (0)1457 891909, The Housing and Older People Development Group (HOPDEV) is the group charged with advising Government on housing and older people. Its members include housing providers, older people, voluntary organisations, local authorities, and other experts on housing and related issues. Baroness Andrews OBE, Parliamentary Secretary at the Office of the Deputy Prime Minister, will open this conference

with the keynote address on Government policy on housing and older people. The Government has announced that it will be developing a new housing strategy for older people, and delegates will have the opportunity to hear about the latest thinking on this. HOPDEV will launch two new reports at the conference. The conference will conclude with an expert panel debating the major challenges in housing, and delegates will be invited to ask questions.

8 June 2006

Medicine for an Ageing Population

Organised by: Royal College of Physicians (RCP) London and British Geriatrics Society (BGS)

Venue: Royal College of Physicians, Regent's Park
Location : London, England

Details : The Conference Department, RCP, 11 St Andrews Place, Regent's Park, London, NW1 4LE

Tel : +44 (0)20 7935 1174 ext 300/252/436, *Fax :* +44 (0)20 7224 0719

9 June 2006

Getting PPI (Patient & Public Involvement) working - practical approaches for improved care and "mirror meetings"

The Healthcare Commission process requires healthcare organisations to report on how they have been achieving (or not) the core standards from Standards for Better Health. This workshop looks at the requirements of the patient focus domain and examines various approaches of PPI. Three approaches, with examples of better practice, will be highlighted and discussed.

Speakers: Caroline Powell - Picker Institute Europe; Maria Mul - Academic Medical Centre Amsterdam, the Netherlands; Gary Brough - Bloomsbury Patient Representative; Gonny Pol, Facilitator

Organised by: Institute of Quality Assurance - IQA
Venue: IQA Headquarters, London

Location : London, England

Details : 12 Grosvenor Crescent, London, SW1X 7EE

Tel : +44 (0)20 7245 6722, *Fax :* +44 (0)20 7245 6788

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

19-21 June 2006

Young and Old in a Changing Europe : 14th European Social Services Conference

Organised by: European Social Services Conferences

Location : Vienna , Austria

Details : European Social Network, 19 Park Lodge, Dyke Road, Brighton, BN3 6NF

Tel : +44 (0)1273 549 817, *Fax :* +44 (0)1273 549 317

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

Tel : +61 3 9919 7249, *Fax :* +61 3 9919 7199

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

13-15 July 2005

PSIGE Annual Conference : Equality and Diversity in the Third Age

Choice of workshops on one day and two days of four parallel academic streams.

Speakers: Keynote speakers: Prof. Simon Biggs, Prof. Sara Arber.

Organised by: PSIGE - Psychologists' Special Interest Group Working with Older People

Venue: University of Sussex

Location : Brighton, England

Details : Tina Lakin, PSIGE 2006 Conference Office, BPS, St Andrews House, 48 Princess Road East, Leicester, LE1 7DR

Tel : +44 (0)116 252 9555, *Fax :* +44 (0)116 255 7123

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

25-26 July 2006

AEA International Conference : Later life learning - fit for purpose?

The aim of the conference on later life learning is to bring together academics, practitioners and older people in a meaningful and mutually beneficial way in order to:

Organised by: Association for Education and Ageing - AEA In association with: Institute for Employment Studies, University of Sussex; National Institute of Adult Continuing Education 'Celebrating Age' - Brighton Festival and Conference

Venue: Brighton Conference Centre

Location : Brighton, Sussex, England

Details : Jo Walker, Education Centre, Cathedral, Guildford, GU2 UP

Fax : +44 (0)1483 450 424, Hear about research and other forms of evidence about the benefits of learning in later life, Interact with the material presented and with each other to build on 'the case' for later life learning, and how it could be presented, Hear the voice of older people concerning their experience of learning, as a reality check on theory and practice, and to consider the impact of policy and practice on learners.

18-19 August 2006

16th Annual CME Conference: Caring for the Frail Elderly

Organised by: School of Medicine, Office of Rural Health Programs, Continuing Medical Education (CME), University of Missouri-Columbia

Venue: Holiday Inn Select Executive Center

Location : Columbia, MO, USA

Details : Shirley Walters, Office of Continuing Education and Extension, 2401 Lemone Industrial Blvd, DC345.00, Columbia MO 65212, USA
Tel : 573/882-0366, *Fax :* 573/882-5666

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 Herfordshire

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

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