

# New Literature on Old Age

EDITOR

**Gillian Crosby**VOLUME  
**30**NUMBER  
**179****2006**

The publications listed in this bulletin have been recently added to CPA's library. Readers who wish to obtain any of the documents cited should order from their usual bookseller (or direct from addresses given) or arrange to borrow them through public and academic libraries. In case of difficulty, CPA library staff will be pleased to advise.

CPA's full bibliographic collection can be accessed through **AgeInfo** on CD-ROM and on the web.

**New Literature on Old Age** is published and distributed by CPA to whom all orders should be sent. The subscription rate is £30.00 per annum in the UK (additional subscriptions to the same address £21 per annum) and £36 for overseas. Details of back issues are available from CPA.

To obtain more information about **AgeInfo** and access to CPA's library, please contact Gillian Crosby.

Centre for Policy on Ageing  
25-31 Ironmonger Row  
London EC1V 3QP

Telephone: +44 (020) 7553 6500  
Facsimile: +44 (020) 7553 6501  
Email: [cpa@cpa.org.uk](mailto:cpa@cpa.org.uk)  
Web: [www.cpa.org.uk](http://www.cpa.org.uk)

**CPA**  
Information  
Service



# Contents for vol 30 no 179, 2006

<b>Subject Headings</b>	<b>Page</b>
Advance directives	1
Advocacy	1
Age discrimination	1
Ageing (general)	2
Assessment	2
Assistive technology	3
Attitudes to ageing	4
Black and minority ethnic groups	4
Care management	4
Dementia	5
Demography and the demographics of ageing	8
Depression	8
Direct payments	8
Disability	9
Employment	9
End-of-life care	10
Extra-care housing	10
Falls	10
Family and informal care	11
Government and policy	13
Health care	13
Health services	14
Hospital care	14
Housing	14
Integrated care	15
Intergenerational issues	15
International and comparative	15
Learning difficulties	19
Long term care	19
Medical issues	20
Medication	20
Mental health	20
Mental health services	21
Migration	22
Older offenders	23
Palliative care	23
Pensions and benefits	24
Quality of life	25
Research	25
Residential and nursing home care	26
Retirement	26
Rural issues	27
Sexuality	27
Social care	27
Social networks	27
Social services	27
Stroke	28
Suicide	28
Training	28
Transport	28
Women	28
<b>Calendar of courses and conferences</b>	<b>29</b>



## ADVANCE DIRECTIVES

- 179/1 Living wills and the Mental Capacity Act: a postal questionnaire survey of UK geriatricians; by Rebekah Schiff, Peter Sacares, Jane Snook (et al).  
Age and Ageing, vol 35, no 2, March 2006, pp 116-120.  
In an anonymous postal questionnaire survey of all 1,426 British Geriatrics Society (BGS) members in England, Wales and Northern Ireland, 59% of questionnaires were returned. Of 811 geriatricians, 454 (56%) had cared for patients with living wills. Of the 280 who cared for patients when the living will had come into effect, 108 (38%) had changed treatment because of the living will and 84 (78%) of those felt that decisions had been easier to make. Living wills not already in effect made discussions with patients (171 of 178 patients) and families (135 of 178) easier. Of 779 geriatricians, 713 (92%) saw advantages of older people using living wills; 467 of these also expressed concerns. Only 16 geriatricians who had concerns said that there were no advantages. 214 (27%) were aware that their Trust had a form to help with discussions about cardiopulmonary resuscitation (CPR). Fewer (26 of 781) were aware of a Trust policy on living wills. The proposal, in the Mental Capacity Bill, for advance refusals of treatment were supported by 59% (476 of 801), yet the proposal for a lasting power of attorney (LPA) covering health care was only supported by 47% (382 of 806). Many geriatricians have positive experiences of caring for patients with living wills. Despite recognising potential problems, most geriatricians support the use of living wills by older people. However, most believe that their Trust does not have a policy to support advance health care planning. Geriatricians have reservations about LPAs covering health care. (RH)  
ISSN: 00020729  
From : <http://www.ageing.oxfordjournals.org>

## ADVOCACY

- 179/2 Mapping older people's advocacy in the English regions; by Gary Kitchen, Get Heard; Older People's Advocacy Alliance (OPAAL) UK. Stoke-on-Trent: Older People's Advocacy Alliance (OPAAL) UK, July 2006, 162 pp.  
The Older People's Advocacy Alliance (OPAAL) UK had identified a lack of information on the extent of independent provision of advocacy schemes for older people, and led to this mapping exercise.  
Gary Kitchen of the Get Heard consultancy compiled this report and directory for OPAAL, the aim of which is to provide a comprehensive picture of older people's advocacy in the English regions. Results are presented region by region for 138 organisations. (RH)  
From : Older People's Advocacy Alliance (OPAAL) UK, Beth Johnson Foundation, Parkfield House, 64 Princes Road, Stoke-on-Trent, ST4 7JL. E-mail: [info@bjf.org.uk](mailto:info@bjf.org.uk) Website: <http://www.opaal.org.uk>

## AGE DISCRIMINATION

- 179/3 Age discrimination in history; by John Macnicol, Social Policy Association. Bristol: The Policy Press, 2006, pp 249-268.  
IN: Social policy review 18, part 3, chapter 12, 2006, pp 249-268.  
The author offers an historical perspective on the age discrimination debate and the labour market problems of older workers. He links the new legislation to four discernible trends: declining economic activity rates; demographic trends post 2020 and the associated increased pension costs; skills shortages; and rising life expectancy. (RH)  
ISBN: 1861348436  
From : The Policy Press, University of Bristol, Fourth floor, Beacon House, Queen's Road, Bristol BS8 1QU.
- 179/4 Putting ageism in the past; by Emma Vere-Jones.  
Nursing Times, vol 102, no 38, 19 September 2006, pp 18-20.  
On 1 October 2006, new age discrimination laws came into force, making it illegal to discriminate on the basis of age. The author explores the impact that this will have on nurses and their employers. A research report undertaken by the Faculty of Health and Social Care, University of

Hull is cited as evidence of age discrimination practised in the nursing profession. (KJ/RH)  
ISSN: 09547762  
From : <http://www.nursingtimes.net>

- 179/5 Rights for real: older people, human rights and the CEHR [Commission for Equality and Human Rights]; by Frances Butler, Age Concern England - ACE. London: Age Concern England, May 2006, 72 pp.  
Hitherto, the Human Rights Act 1998 has been limited in its impact in tackling issues such as age discrimination and elder abuse. The new Commission for Equality and Human Rights (CEHR) promises to be a major catalyst both for enhancing older people's protection, and for using human rights as a tool for transforming public services. This report makes the case for embedding older people's human rights into the CEHR's work. The human rights issues covered as they relate to public services include health, social care and housing. Although this report concentrates on issues as they affect England, the content has relevance for other parts of the UK. (RH)  
ISBN: 1903629411  
Price: £10.00  
From : Age Concern England, Astral House, 1268 London Road, London SW16 4ER.  
[www.ageconcern.org.uk](http://www.ageconcern.org.uk)

#### **AGEING (GENERAL)**

- 179/6 Military service, the life course and aging; by Richard A Settersten Jr (ed).  
Research on Aging, vol 28, no 1, January 2006, 159 pp (whole issue).  
The six articles in this special issue use life-course principles to frame and explore the effects of early military service, especially during wartime, on outcomes in late life. The research represented in these articles targets a range of outcomes, some of the processes and mechanisms that produce them, and some of the consequences they bring for individuals, families and societies. Much remains to be learned about how wartime experiences have affected the lives of veterans and their families in the short and long terms. Wartime experiences may be important but largely invisible factors underneath contemporary knowledge of ageing. Attention to these factors is necessary to assess the degree to which current knowledge can be generalized to future cohorts and to respond to the needs of veterans and their families. Research on the effects of military service on the life course and ageing is not only relevant to cohorts now in late life, but will also offer insights into some of the potential consequences of service for men and women currently serving in conflicts. (KJ/RH)  
ISSN: 01640275  
From : <http://www.sagepub.com>

#### **ASSESSMENT**

- 179/7 Nurse-led implementation of the single assessment process in primary care: a descriptive feasibility study; by H C Roberts, Z M Hemsley, G Thomas (et al).  
Age and Ageing, vol 35, no 4, July 2006, pp 394-398.  
The objective of this study was to determine the resources required to carry out the single assessment process in one urban primary care practice, in Southampton. The participants were 944 people aged 70+ years, registered with the practice, not living in residential/nursing home or terminally ill. Participants were sent the six-item Sherbrooke questionnaire (case-finding tool); 863 (91%) of participants replied. From such results as detailed, it was concluded that targeting those scoring 3+ on the Sherbrooke questionnaire (28% of the sample) may improve the identification of patients who would benefit from further assessment. A contact approach rather than a case-finding one may improve the relevance of this process to older people. (KJ)  
ISSN: 00020729  
From : <http://www.ageing.oxfordjournals.org>

## ASSISTIVE TECHNOLOGY

(See Also 179/22)

- 179/8 Does technology have a role to play in assisting stroke therapy?: a review of practical issues for practitioners; by Nargis Islam, Nigel D Harris, Christopher Eccleston.  
Quality in Ageing, vol 7, no 1, March 2006, pp 49-56.  
Assistive technology is a term used to describe any device ranging from simple equipment to complex technologies that can assist a person with a disability. The term is now applied to new technological devices to facilitate active rehabilitation, as well as to equipment to enable people to live with their condition. Current developments such as technology for stroke rehabilitation are rarely brought to the attention of health and social care practitioners, even though frontline staff will be at the forefront of implementation, and their views of the nature of devices and their appropriateness is pivotal. This paper describes some of the technologies being developed to assist the process and delivery of stroke rehabilitation, their potential benefits in practice and stakeholder perceptions of these new technologies. (RH)  
ISSN: 14717794  
From : <http://www.pavpub.com>
- 179/9 How assistive technology can improve well-being; by Garuth Chalfont, Grant Gibson.  
Journal of Dementia Care, vol 14, no 2, March/April 2006, pp 19-21.  
Can technology offer more than help with safety and security? Can it contribute to individual well-being and quality of life? This is the first of two articles explaining the work of the Independent project: Investigating Enabling Domestic Environments for People with Dementia. The authors report specifically on analyses of users' requirements and of environmental factors which either enable or challenge the success of technology and activities and homes where people with dementia live. They also outline qualitative interviews with 26 people with dementia who either live in their own homes or in residential care settings. The project consortium comprises the University of Liverpool's School of Primary Care, the School of Architecture at the University of Sheffield, and Bath Institute of Medical Engineering (BIME). Project partners include Dementia Voice, SheffCare, Northamptonshire Social Services, and Huntleigh Healthcare. The project is funded under the Engineering and Physical Science Research Council (EPSCR) under the Extending Quality of Life (EQUAL 4) Programme. (RH)  
ISSN: 13518372
- 179/10 Putting technology to work for quality of life; by Garuth Chalfont, Grant Gibson.  
Journal of Dementia Care, vol 14, no 3, May/June 2006, pp 30-31.  
What factors influence whether a new piece of technology is accepted by people with dementia? In the second of two articles on the Independent project: Investigating Enabling Domestic Environments for People with Dementia, the authors explain the project's findings on this question. They consider how psychological factors may influence how new technology is accepted by people with dementia, notably imagination, self-identity and perception which may play a role in deciding whether to participate in activities or not. Examples from transcripts are included to illustrate these points. The Independent project consortium comprises the University of Liverpool's School of Primary Care, the School of Architecture at the University of Sheffield, and Bath Institute of Medical Engineering (BIME). Project partners include Dementia Voice, SheffCare, Northamptonshire Social Services, and Huntleigh Healthcare. The project is funded under the Engineering and Physical Science Research Council (EPSCR) under the Extending Quality of Life (EQUAL 4) Programme. (RH)  
ISSN: 13518372
- 179/11 Using digital media to access information and good practice for paid carers of older people : a summary; by Interactive Technologies Research Group, University of Brighton; Social Care Institute for Excellence - SCIE. London: Social Care Institute for Excellence, 2006, 16 pp (Report 15 summary).  
This summarises a study commissioned by the Social Care Institute for Excellence and carried out by the University of Brighton to explore the feasibility and the appropriateness of digital technologies to support the work of paid carers in residential care homes. The study used a

combination of methodologies to develop a picture of current work practices across the sector and to gauge the appropriateness of support mechanisms for seeking information and communication using digital technologies. A full report is available from the website link given. (KJ)  
ISBN: 1904812295

From : SCIE, Goldings House, 2 Hay's Lane, London SE1 2HB. Full report available to download from: <http://www.scie.org.uk/publications/details.asp?pubID=101>

## **ATTITUDES TO AGEING**

(See 179/79)

## **BLACK AND MINORITY ETHNIC GROUPS**

(See Also 179/32)

179/12 "Pressure of life": ethnicity as a mediating factor in mid-life and older peoples' experience of high blood pressure; by Gina Marie Awoko Higginbottom.

Sociology of Health & Illness, vol 28, no 5, July 2006, pp 583-610.

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

ISSN: 01419889

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

179/13 Stigma and dementia: East European and South Asian family carers negotiating stigma in the UK; by Jenny Mackenzie.

Dementia: the international journal of social research and practice, vol 5, no 2, May 2006, pp 233-248.

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

ISSN: 14713012

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

## **CARE MANAGEMENT**

179/14 From care management to case management: what can the NHS learn from the social care experience?; by Sally Jacobs, Jane Hughes, David Challis (et al), Personal Social Services Research Unit - PSSRU, University of Manchester.

Journal of Integrated Care, vol 14, issue 3, June 2006, pp 22-31.

Care management has developed in a variety of forms. This diary study explores differences in



the approach taken by care managers in three distinct social service settings: 61 in community-based older people's teams; 17 in hospital social work teams for older people; and 38 from mental health teams for younger adults. A total of 4,262 hours of activity were recorded, ranging between averages of 35.3 to 38.4 hours per week per manager. Conclusions are drawn both for social care and for health services developing case management for people with long term conditions. The evidence points to the mainly administrative form of care management that predominates in English local authorities today. (RH)

ISSN: 14769018

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

- 179/15 Should care managers be brokers?: [Arguments for and against this role being carried out by existing care managers]; by Martin Green, Ray Jones.  
Community Care, no 1635, 10 August 2006, pp 32.  
The adult care Green Paper, "Our health, our care, our say" (Cm 6737), proposes that care brokers or navigators should help people buy their own care. Martin Green, Chief Executive of the English Community Care Association (ECCA) argues the case for this role being carried out by existing care managers, while arguing the case against is Ray Jones, Chair, British Association of Social Workers (BASW). Green suggests that the Commission for Social Care Inspection (CSCI) and its successor merged commission should implement something based on the Financial Services Authority (FSA) model. This idea is not reassuring to Jones, bearing in mind recent mis-selling scandals. Rather, a range of community and commercial services should be involved. (RH)  
ISSN: 03075508  
From : <http://www.communitycare.co.uk>

## **DEMENTIA**

(See Also 179/9, 179/13, 179/28, 179/66, 179/84, 179/88)

- 179/16 Learning disability and dementia: are we prepared?; by Diana Kerr, Colm Cunningham, Heather Wilkinson.  
Journal of Dementia Care, vol 14, no 3, May/June 2006, pp 17-19.  
We know that people with learning disabilities are living longer, making them more likely to develop dementia. The authors report on their investigation for the Joseph Rowntree Foundation (JRF) on whether we are prepared to meet the needs of this group. Their study considered three models of care - ageing in place, in place progression, and referral out. These models provide a framework to consider the issues facing older people with a learning disability when they developed dementia. Within each of the models, specific issues requiring attention are identified: night care; training; creating an enabling environment; diagnosis; and co-residents. The authors' report, "Home for good?: preparing to support people with a learning disability in a residential setting when they develop dementia", was published by Pavilion Publishing in 2004. (RH)  
ISSN: 13518372

- 179/17 Negotiating ethics in dementia care: an analysis of an ethic of care in practice; by Tula Brannelly.  
Dementia: the international journal of social research and practice, vol 5, no 2, May 2006, pp 197-212.  
Providing care for people with dementia is often complex and ethically difficult, and is guided by the values of people with dementia and professional and lay carers. Each participant brings often different, and sometimes conflicting, perspectives, which contribute to the difficulty of negotiating suitable care. This research examined how participation and inclusion were facilitated by community psychiatric nurses and social workers to achieve care for people with dementia. Practice was observed to provide snapshots of interactions between people with dementia, practitioners and lay carers, and interviews with practitioners interrogated practice. The analytical framework used was Tronto's "Integrity of care" (1993) taken from the wider feminist political argument of an ethic of care (Gilligan, 1982). The adoption in practice of an ethic of care strengthens the opportunity for increased participation and inclusion, and therefore aims to provide care that fits with the values and preferences of people with dementia and their carers. The research found that of 50 people with dementia, 10 were placed in permanent placements

such as nursing homes and residential homes, some unwillingly. This article discusses what happens in care when the ethical elements of an ethic of care are practised, and when they are not. (RH)

ISSN: 14713012

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

179/18 Neighbourhoods for life: designing dementia-friendly outdoor environments; by Lynne Mitchell, Elizabeth Burton.

Quality in Ageing, vol 7, no 1, March 2006, pp 26-33.

Although most older people with dementia live at home (about of third of these on their own), to date, design for dementia has focused on the internal, generally institutional environment of care homes and dementia care facilities. Unless outdoor environments are designed to help older people with dementia continue to use their local neighbourhoods, they will effectively become housebound. This paper presents findings of a 3-year research project conducted by the WISE (Wellbeing in Sustainable Environments) research unit of the Oxford Institute for Sustainable Development at Oxford Brookes University. The researchers were funded by the Engineering and Physical Sciences Research Council (EPSRC) Extending Quality of Life (EQUAL initiative to examine how the outside environment could be made dementia friendly. This unprecedented research investigated the perceptions, experiences and use of the outdoor environment by older people with dementia and identified design factors that influence their ability to successfully use and negotiate their local neighbourhoods. The research found that dementia-friendly outdoor environments are places that are familiar, legible, distinctive, accessible, comfortable and safe. The findings have enabled the researchers to provide some preliminary recommendations for designers, at all scales from urban design to the design of street furniture, on the criteria to consider in developing dementia-friendly urban areas. (RH)

ISSN: 14717794

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

179/19 Outdoor wayfinding in dementia; by Bart Sheehan, Elizabeth Burton, Lynne Mitchell.

Dementia: the international journal of social research and practice, vol 5, no 2, May 2006, pp 271-282.

As part of a wider investigation of the public outdoor environment in dementia funded by the Engineering and Physical Sciences Research Council (EPSRC), the authors investigated outdoor wayfinding in familiar public environments among people with early dementia and controls. Their aims were to investigate outdoor wayfinding performance of people with dementia, and which features of the outdoor environment are used in wayfinding by people with dementia. The authors observed 13 older subjects with confirmed dementia and 10 controls on outdoor walks. Two accompanying researchers recorded performance in wayfinding, built environment features and the use of these features in wayfinding. Results showed that people with dementia performed worse on wayfinding, even in familiar areas, but that they attended to similar features of the built environment and made equal use of features such as signs in wayfinding. Research that investigates the built environment for people with dementia is feasible and may help guide planning policies likely to enhance independent community living for this group. (RH)

ISSN: 14713012

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

179/20 Personality and behaviour changes mark the early stages of Alzheimer's disease in adults with Down's syndrome: findings from a prospective population-based study; by Sarah L Ball, Anthony J Holland, Johnny Hon (et al).

International Journal of Geriatric Psychiatry, vol 21, no 7, July 2006, pp 661-673.

The early presentation of Alzheimer's disease (AD) in Down's syndrome (DS) is characterised by prominent personality and behaviour changes, associated with excessive dysfunction, providing support for the notion that the functions of the frontal lobes may be compromised early in the course of the disease in this population. This is the main finding from a follow-up with a population sample with DS first assessed in 1994, followed up 18 months later, and reassessed after a further 5 years. The present study focuses on the 55 individuals who took part in the second follow-up. Dementia diagnosis was made using the modified CAMDEX (Cambridge Examination for Mental Disorders of the Elderly) informant interview and neuropsychological assessment was

undertaken using the CAMCOG (Cambridge Cognitive Examination). (RH)  
ISSN: 08856230  
From : <http://www.interscience.wiley.com>

- 179/21 Risk factors for incident dementia in England and Wales: the Medical Research Council Cognitive Function and Ageing Study: a population-based nested case-control study; by Agustin G Yip, Carol Brayne, Fiona E Matthews, MRC Cognitive Function and Ageing Study (MRC CFAS). *Age and Ageing*, vol 35, no 2, March 2006, pp 154-159.  
This large UK-based multicentre study examined longitudinal risk of dementia in representative populations. Subjects were 6,075 individuals aged 65+ from two rural areas (Cambridgeshire and Gwynedd) and three urban (Nottingham, Newcastle and Oxford), from a detailed assessment group with risk measured at baseline. Incident dementia was measured at 2 and 6 years. Logistic regression analyses indicated a strong increased risk with age, moderate risk with stroke and Parkinson's disease (PD), and minimal risk for female sex and higher levels of education. Good / excellent self-reported health is associated with long-term protective effect, but smoking and alcohol are not. A history of exposure to general anaesthesia (GA) was associated with reduced risk. Thus, some well-know risk factors for dementia, of vascular and Alzheimer's type, are confirmed but not others. The association between perceived health - a robust predictor of user health outcomes - and incident dementia, independently of other potential risks, warrants further study. (RH)  
ISSN: 00020729 From : <http://www.ageing.oxfordjournals.org>
- 179/22 Technology and personhood in dementia care; by Arlene J Astell. *Quality in Ageing*, vol 7, no 1, March 2006, pp 15-25.  
Modern dementia care is increasingly turning to technology on a wide range of issues. Such developments are argued to improve quality of life (QoL) as, for example, technological interventions that reduce risks and increase safety can enable people with dementia to stay in their own homes for longer. However, all interventions in dementia care must strike a balance between doing what is perceived to be "for the best" and preserving the personhood of people with dementia. Technological interventions run a particularly high risk of crossing the line into doing things to people with dementia, rather than with them. Doing things for people with dementia is also problematic if it takes away their ability to do things for themselves. These issues are examined with reference to electronic tagging, assistive or "smart" technology and interventions that tackle the psychological needs of people with dementia. (RH)  
ISSN: 14717794 From : <http://www.pavpub.com>
- 179/23 What has architecture got to do with dementia care?: explorations of the relationship between quality of life and building design in two EQUAL [Extending Quality of Life] projects; by Judith Torrington. *Quality in Ageing*, vol 7, no 1, March 2006, pp 34-48.  
Two projects from the EQUAL [Extending Quality of Life] programme explore aspects of the adherence of building design on the quality of life of people with dementia. Design in Caring Environments (DICE) examined the quality of life of people in residential care homes in relation to building design features. INDEPENDENT (Investigating Enabling Domestic Environments for People with Dementia) is a current project with the aim of developing technologies to enhance quality of life in supporting enjoyable activities. One aspect of INDEPENDENT is an exploration of the interaction between spatial settings and meaningful activity, to highlight factors that support and enable activity and to identify barriers. Findings from both projects suggest that a more creative approach to the management of buildings would enhance the well-being of residents, under-use of facilities is common. Meaningful space that supports activity is therapeutic, but spaces that give confused messages are common in buildings used by older people. Tools to evaluate buildings have a potential role in the long-term management of facilities to help identify underused spaces, spatial confusion and barriers to activity. Quality of life was shown to be poorer in buildings that prioritise safety and health, buildings that support activity positively by providing good assistive devices, giving people control of their environment and affording good links with the community have a positive association with well-being. (RH)  
ISSN: 14717794 From : <http://www.pavpub.com>

## DEMOGRAPHY AND THE DEMOGRAPHICS OF AGEING

- 179/24 National population projections 2004-based: report giving population projections by age and sex for the United Kingdom, Great Britain and constituent countries; by Helen Bray (ed), Government Actuary's Department; Registrars General; Office for National Statistics - ONS. London: The Stationery Office (HMSO), 2006, 84 pp (Series PP2 no.25).  
The key result is that the population of the United Kingdom is projected to increase gradually from an estimated 59.8 million in 2004 to reach 67 million by 2031. Longer term projections suggest the population will peak around 2050 at almost 66 million and then gradually start to fall. The number of older people will significantly increase relative to the number of younger people, with the mean age of the population expected to rise from 39.5 years in 2004 to 43.3 years by 2031. The number of people over the state pension age is projected to increase by 9.3 per cent from 11.1 million in 2004 to 12.2 million in 2010. The population aged 80 and over is expected to grow from 2.6 million in 2004 to reach 5.0 million by 2031. (KJ)  
Price: £35.00  
From : TSO, PO Box 29, Norwich NR3 1GN. <http://www.statistics.gov.uk>

## DEPRESSION

(See Also 179/49)

- 179/25 Depression and suicide in older people: a forgotten statistic; by Kathryn Hill.  
Signpost, vol 11, no 1, June 2006, pp 4-6.  
Contrary to public perception and media reporting, the suicide rate in England and Wales is highest in the older population, particularly older men. Depression is the most important risk factor in suicide in older people, and many older people who commit suicide will visit their general practitioner (GP) in the 4 weeks preceding their death. This article outlines prevalence of and factors relating to depression and suicide in older people, to highlight how failure to adequately recognise and/or treat depression in older people contributes to the significant number of older people who commit suicide, and to suggest ways that might lead to a decrease in these numbers. (RH)  
ISSN: 13684345  
From : <http://www.signpostjournal.co.uk>

## DIRECT PAYMENTS

(See Also 179/56)

- 179/26 "The council is picking on us": [Wiltshire County Council's decision to cut direct payments for leisure opportunities]; by Gordon Carson.  
Community Care, no 1635, 10 August 2006, pp 30-31.  
There is anger at Wiltshire County Council's decision to cut direct payments for leisure opportunities such as attending local adult education courses. This article reports on reactions to how these cuts have affected older and disabled service users and staff. The county's former director of adult and community services had promoted independent living through direct payments. The new director is having to make cuts, in part to meet the shortfall in the local NHS budget. (RH)  
ISSN: 03075508  
From : <http://www.communitycare.co.uk>

- 179/27 Your care, your choice: Direct payments working for you; by Age Concern England - ACE.  
London: Minamon Film (Producer), 2006, DVD (running time : 18 mins).  
This DVD features older people in receipt of direct payments who feel that their lives have been enriched by being able to access the types of activities and support that they have chosen. It also shows how direct payment support services can help. This film is designed to be shown to groups, followed by a question and answer session led by a local expert from a Direct Payments Support Service - and supplemented by "A guide to receiving direct payments from your local council : a route to independent living", a free booklet from the Department of Health (DH) who

gave a grant towards production of this DVD. ([www.dh.gov.uk/publications](http://www.dh.gov.uk/publications)). The DVD is available in different languages - English, Sylheti, Punjabi and Urdu. (KJ)

Price: FOC

From : Age Concern England, Astral House, 1268 London Road, London SW16 4ER.  
katharine.orellana@ace.org.uk <http://www.ageconcern.org.uk>

## **DISABILITY**

- 179/28 Deafness and dementia: consulting on the issues; by Kate Allan.  
Journal of Dementia Care, vol 14, no 3, May/June 2006, pp 35-38 (Research focus).  
The author describes a consultation exercise that looked at the issues for two groups of people with dementia: those with acquired hearing loss, and those who had always been deaf. The consultation exercise was carried out to obtain insight into the important challenges which need to be tackled. The study sought the views of service users, relatives, care practitioners (mostly care assistants) and British Sign Language (BSL) or English interpreters - 43 people in all. Issues covered in this research focus include recognising deafness, social isolation, implications for communication, hearing aids, and the needs of deaf sign language users with dementia. The consultation exercise was undertaken jointly by the Dementia Services Development Centre (DSDC), University of Stirling and Deaf Action in Edinburgh. (RH)  
ISSN: 13518372
- 179/29 Making the Link: ageing and sight loss; by Carol Smith.  
Journal of Integrated Care, vol 14, issue 3, June 2006, pp 32-38.  
Making the Link is a project being developed by the Royal National Institute of the Blind (RNIB) and funded by the Department of Health (DH). The project is aimed at improving health and social care for older people with sight problems, by focusing on some of the standards for the National Service Framework for Older People (NSF), and applying them to older people with sight problems. The project will identify, develop and disseminate good practice by establishing two pilot sites and conducting desk research. This article reports on the project's background and development. (RH)  
ISSN: 14769018 From : <http://www.pavpub.com>

## **EMPLOYMENT**

(See Also 179/83)

- 179/30 Ageing and employment: looking back, looking forward; by Patrick Grattan, Social Policy Association. Bristol: The Policy Press, 2006, pp 293-312.  
IN: Social policy review 18, part 3, chapter 14, 2006, pp 293-312.  
TAEN, The Age and Employment Network, formerly known as the Third Age Employment Network, was founded in 1998 with the aim of finding ways of making the labour market operate more effectively for people in mid- and later life. The author looks back at changes that have taken place in the eight years that TAEN has been operating. He looks at some of the major themes that must underpin plans for extending working life - for example, retraining - and for changing the pattern of retirement. (RH)  
ISBN: 1861348436  
From : The Policy Press, University of Bristol, Fourth floor, Beacon House, Queen's Road, Bristol BS8 1QU.
- 179/31 Extending working life: problems and prospects for social and public policy; by Chris Phillipson, Social Policy Association. Bristol: The Policy Press, 2006, pp 221-248.  
IN: Social policy review 18, part 3, chapter 11, 2006, pp 221-248.  
This is a general review of issues and prospects for social policy on age and employment, which attempts to give context to the other papers in this section of this issue of Social Policy Review. It draws on research commissioned by the Department for Work and Pensions (DWP), published in 2005 as "Extending working life: a review of the research literature", by Chris Phillipson and Allison Smith (DWP research paper, no 299). In looking at changes in the employment of older workers, the author notes that the policy of extending working life has been significant in the

debate about the economic sustainability of an ageing population. He uses evidence from the Labour Force Survey (LFS) and the English Longitudinal Study of Ageing (ELSA) to ask whether employment rates for older workers will continue to increase, and what prevents people returning to work. He suggests areas for research in developing policies to extend working life. (RH)  
ISBN: 1861348436

From : The Policy Press, University of Bristol, Fourth floor, Beacon House, Queen's Road, Bristol BS8 1QU.

### **END-OF-LIFE CARE**

179/32 A sweeter palliative: [responsive end of life care for ethnic population groups]; by Yasmin Gunaratnam.

Community Care, no 1642, 28 September 2006, pp 36-37.

As ethnic minority populations age in the UK, how can we ensure that they receive responsive end-of-life care? This article discusses findings from the Stories that Matter, a project that used narrative interviews to collect the experiences of life-limiting illness and care among ethnic minority elders, carers, and social and health care professionals. It highlights the ways in which social work can support the care choices of older people from ethnic minorities. The project was managed by the Policy Research Institute on Ageing and Ethnicity (Priae) and funded by the Department of Health (DH). (RH)

ISSN: 03075508

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

### **EXTRA-CARE HOUSING**

179/33 Extra care housing for people with dementia; by John Dow.

Journal of Integrated Care, vol 14, issue 3, June 2006, pp 19-23.

The author considers some of the legal complexities involved in developing extra care housing for people with dementia. He discusses, first, whether extra care schemes will be registrable under the Care Standards Act 2000 as a care home. Second, will dementia sufferers have the mental capacity to enter into tenancies? Lastly, the Disability Discrimination Act 1995 should be considered with regard to landlords' actions in accepting or ending tenancies. (RH)

ISSN: 14769018

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

### **FALLS**

179/34 Use of the 'STRATIFY' falls risk assessment in patients recovering from acute stroke; by Jane Smith, Anne Forster, John Young.

Age and Ageing, vol 35, no 2, March 2006, pp 138-142.

Falls are one of the most common medical complications after stroke. A reliable falls risk indicator for routine use on stroke units would be a clinically useful component of a falls prevention programme. In this north of England study of all patients with a diagnosis of stroke admitted to stroke units over a 6-month period, the risk assessment tool STRATIFY was completed at admission, along with the Barthel index, Rivermead mobility index, abbreviated mental test score, and Albert's test (for visual neglect). STRATIFY was then completed weekly and within 48 hours of anticipated discharge. From 387 patients admitted to the participating units during the study period, 225 contributed to the 28-day in-patient study, and 234 were followed up at 3 months after discharge. STRATIFY performed poorly in predicting falls in the first 28 days (sensitivity 11.3% and specificity 89.5%) and after discharge (sensitivity 16.3% and specificity 86.4%). There is a need for a stroke-specific rather than a generic falls risk assessment tool. (RH)

ISSN: 00020729

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

## FAMILY AND INFORMAL CARE

(See Also 179/47, 179/70)

- 179/35 Between elderly parents and adult children: a new look at the intergenerational care provided by the 'sandwich generation'; by Emily Grundy, John C Henretta, Family Support for Older People: Determinants and Consequences (FAMSUP) Network, European Science Foundation. *Ageing and Society*, vol 26, part 5, September 2006, pp 707-722.  
The 'sandwich generation' has been conceptualised as those mid-life adults who simultaneously raise dependent children and care for frail aged parents. Such a combination of dependents is in fact very unusual. A more common situation is when adults in late mid-life or early old age have one or more surviving parents and adult but still partly dependent children. It can be hypothesised that for parents in this pivotal position, the demands from adult children and from aged parents compete, with the result that those who provide help to one are less likely to provide help to the other. An alternative hypothesis, however, is that family solidarity has an important influence but is not universal, so that some pivotal generation parents engage in intergenerational exchange in both directions, and there is positive association between helping parents and helping children. To investigate this question, the paper presents an analysis of data from two broadly comparable national surveys in Great Britain and the US on the care provided by women aged 55-69 to their descendant and ascendant relatives. The results show that around one-third of the women reported providing help to members of both generations, and that around one-fifth provided support to neither. They broadly support the solidarity hypothesis, but provide some evidence that having three or more children is associated with a reduced likelihood of providing help to a parent. This is the first of four empirical studies on the provision of family support to older people, written by members of the Family Support for Older People: Determinants and Consequences (FAMSUP) Network, European Science Foundation (ESF). (RH)  
ISSN: 0144686X  
From : [http://www.journals.cambridge.org/jid\\_ASO](http://www.journals.cambridge.org/jid_ASO)
- 179/36 Family support for older people in an era of demographic change and policy constraints; by Douglas A Wolf, Sonali S Ballal, Family Support for Older People: Determinants and Consequences (FAMSUP) Network, European Science Foundation. *Ageing and Society*, vol 26, part 5, September 2006, pp 693-706.  
This paper introduces four empirical studies on the provision of family support to older people, written by members of the Family Support for Older People: Determinants and Consequences (FAMSUP) Network, European Science Foundation (ESF). The studies have in common the use of individual-level data and recognition of the importance of demographic forces, cultural variations and public policy in shaping patterns of elder care. The four papers are also explicitly comparative, and emphasise both between- and within-country differences. The European countries examined exhibit several broadly similar demographic trends, but these are superimposed on very different policy regimes. The 'macro' focus of much comparative policy-oriented research facilitates the identification and description of population ageing, while illuminating the policy issues raised by demographic change. A macro-focus is also characteristic of much comparative welfare state analysis. The 'micro' orientation of the research presented in this collection typically treats the policy environment as an implicit or residual category. It is argued that progress in understanding comparative patterns of elder care, and in developing policy responses to demographic change, will be facilitated through blending the micro and macro perspectives, in which variations in the policy environment are explicitly linked to individual and family-level behaviour. (RH)  
ISSN: 0144686X  
From : [http://www.journals.cambridge.org/jid\\_ASO](http://www.journals.cambridge.org/jid_ASO)
- 179/37 Family support for older people: determinants and consequences: papers from a European Science Foundation Scientific Network; by Karen Glaser, Cecilia Tomassini, Douglas Wolf (guest editors), Family Support for Older People: Determinants and Consequences (FAMSUP) Network, European Science Foundation. *Ageing and Society*, vol 26, part 5, September 2006, pp 689-782.  
The aim of this special issue of *Ageing and Society* is to examine the relationships between

support for older people and various socio-demographic, cultural and policy factors in selected European countries and the US, using the international comparative perspective developed by members of the Family Support for Older People: Determinants and Consequences (FAMSUP) Network. Four of the papers were given by network members at a symposium on 'Family Support for Older People: International Comparisons' held at the International Sociological Association (ISA) Inter-Congress Conference on Ageing Societies and Ageing Sociology: Diversity and Change in a Global World, held at Roehampton University in September 2004. A guest editorial (pp 689-692), 'The FAMSUP network and its comparative studies of family support for frail older people' outlines the aims and work of FAMSUP, which was supported by a grant from the European Science Foundation (ESF) during 2002-04. (RH)  
ISSN: 0144686X  
From : [http://www.journals.cambridge.org/jid\\_ASO](http://www.journals.cambridge.org/jid_ASO)

179/38

Informal care at times of change in health and mobility: a qualitative study; by Rachael Goberman-Hill, Shah Ebrahim.  
Age and Ageing, vol 35, no 3, May 2006, pp 261-266.  
Relationships between people with health problems and their partners, families and friends are usually described as "informal care". The authors question whether "informal care" is an appropriate label for how older people describe their relationships with partners or other significant friends or relatives at times of change in health and mobility (walking). 7 men and 8 women aged between 58 and 85 (mean 72.5 years) were recruited on grounds of having difficulty walking. Each was interviewed on four occasions. 9 of the interviewees lived with partners, 4 of whom were interviewed. Whether living alone or with a partner, all participants discussed key social relationships. Analysis used standard methods of qualitative inquiry, including thematic and narrative case study approaches. The participants had several ways of coping with health changes and the onset or escalation of immobility. These included working together to ensure recovery, working together to maintain independence, and experiencing and recognising considerable difficulty coping with change. Adaptation within relationships reflected the experience of abrupt or gradual change as well as expectations for the future. Participants did not describe their relationships in terms of "carer" or "cared for". Means of coping with changing circumstances in mobility and health are inextricable from the work that goes on within partner, familial or friendship relationships. As older people seldom describe their relationships with significant others as "care", it may be more appropriate to discuss informal care provision with patients by using the language of relationships. (RH)  
ISSN: 00020729  
From : <http://www.ageing.oxfordjournals.org>

179/39

The support of parents in old age by those born during 1945-1954: a European perspective; by Jim Ogg, Sylvie Renaut, Family Support for Older People: Determinants and Consequences (FAMSUP) Network, European Science Foundation.  
Ageing and Society, vol 26, part 5, September 2006, pp 723-743.  
In 2004 in Europe, more than two-thirds of those born between 1945 and 1954 had a parent or parent-in-law alive, and the rates of co-residence with their ascendants ranged from less than 4% in Sweden, Denmark and the Netherlands, to between 17% and 24% in Italy, Spain and Greece. The proportions that had provided practical help to their parents during the previous 12 months had a north-south gradient, from approximately one-in-three in northern Europe to 15% or less in southern Europe. In contrast, the proportion of helpers that provided regular and almost daily help had an inverse pattern, being low in Sweden and Denmark and much higher in the south. Some of these differences may be attributable to variations among the countries in the interpretation of 'help'. Help to ageing parents tends to be most associated with the gender of givers and receivers, the living arrangements, geographical proximity and needs of the parents, and the availability of adult children who can help. There is little evidence of a specific 'baby boomer generation' effect on the probability of giving help. Data from the Survey of Health, Ageing and Retirement in Europe (SHARE) was used for this article, which is the second of four empirical studies on the provision of family support to older people, written by members of the Family Support for Older People: Determinants and Consequences (FAMSUP) Network, European Science Foundation (ESF). (RH)  
ISSN: 0144686X From : [http://www.journals.cambridge.org/jid\\_ASO](http://www.journals.cambridge.org/jid_ASO)



## GOVERNMENT AND POLICY

- 179/40 CSR: creating security in retirement: Comprehensive Spending Review; by Age Concern England - ACE. London: Age Concern England, July 2006, 27 pp.  
The Government's forthcoming Comprehensive Spending Review (CSR) is likely to set priorities and direction of policy for the next ten years. In this document, Age Concern England (ACE) makes the case for HM Treasury to conduct a cross-cutting review of the older population's needs. Although there has been progress, Gordon Brown's aim of ending pensioner poverty within a generation has a long way to go. This document spells out the main priorities as: poverty and social exclusion; employment and the adult skills gap; health inequalities; and lack of dignity and respect in social care. (RH)  
From : Age Concern England, Astral House, 1268 London Road, London SW16 4ER. Download: [http://www.ageconcern.org.uk/AgeConcern/Documents/CSR\\_pamphlet\\_July\\_2006.pdf#search=%22%2BComprehensive%20Spending%20Review%20Age%20Concern%20England%22](http://www.ageconcern.org.uk/AgeConcern/Documents/CSR_pamphlet_July_2006.pdf#search=%22%2BComprehensive%20Spending%20Review%20Age%20Concern%20England%22)
- 179/41 Valuing older people: the Mayor of London's older people strategy; by Mayor of London, Greater London Authority - GLA. London: Greater London Authority, September 2006, 86 pp.  
One of the Mayor of London's manifesto commitments for the 2004 elections was to deliver an older people's strategy for London. This strategy sets out the Mayor's vision of a London where older people have choice and control over their lives, and are active, vital members of their communities. Identified as key issues are: challenging perceptions and promoting the contribution of older people; pensions and income; supporting community services; and promoting good quality health and social care. Other policy areas covered in the strategy are: empowering older Londoners; access to employment (in this instance, covering all people aged 50+); age equality; volunteering; culture and leisure; transport; crime and personal safety; e-Government and access to new technologies; housing and homelessness; fire safety in the home; and environment. The introduction also notes the needs of individuals and groups, for example: multiple discrimination and multiple need; women; ethnicity; refugees and asylum seekers; faith groups; disabled people; lesbian, gay, bisexual and transgender groups; and older people living alone. (RH)  
Price: FOC  
From : GLA, City Hall, The Queen's Walk, London SE1 2AA. Also available in other formats and languages from the Public Liaison Unit.  
Website: [http://www.london.gov.uk/mayor/strategies/older\\_people/index.jsp](http://www.london.gov.uk/mayor/strategies/older_people/index.jsp)

## HEALTH CARE

(See Also 179/78)

- 179/42 "As fit as butchers' dogs?": a report on healthy lifestyle choice and older people; by Age Concern England - ACE; National Consumer Council - NCC. London: Age Concern England - ACE, 2006, 48 pp (Age Concern Reports).  
Opinion Leader Research was commissioned by Age Concern England (ACE) and the National Consumer Council (NCC) to undertake research with older people exploring the subject of a choosing a healthy lifestyle. In-depth interviews were conducted with people aged 60+ in locations in northern and southern England during July and August 2005. The research aimed to explore: older people's knowledge and awareness of healthy lifestyle information; the factors which drive and underpin older people's health behaviour; and barriers and enabling factors to older people leading a healthy lifestyle. This report discusses the research findings and the identification of four groups: able and willing to be healthy; able but unwilling to be healthy; unable but willing to be healthy; and unable and unwilling to be healthy. Implications the public policy work of ACE and NCC are discussed and recommendations made on: health literacy; communicating health messages; target groups for interventions; timing of interventions; mental well-being and quality of life; and joined-up solutions. (RH)  
ISBN: 1903629381  
Price: £10.00  
From : Age Concern England, Astral House, 1268 London Road, London SW16 4ER.  
<http://www.ageconcern.org.uk>

## HEALTH SERVICES

(See 179/49)

## HISTORY OF AGEING

(See 179/3)

## HOSPITAL CARE

(See Also 179/68)

- 179/43      A cost effectiveness analysis within a randomised controlled trial of post-acute care of older people in a community hospital; by Jacequeline O'Reilly, Karin Lowson, John Young (et al). British Medical Journal, vol 333 no 7561, 29 July 2006, pp 228-231.  
The potential for community hospitals to provide intermediate care has been recognised. The authors carried out this cost-effectiveness study with 220 patients needing rehabilitation after an acute illness for which they required admission to hospital. The study examined multidisciplinary care in a district general hospital or prompt transfer to a community hospital in Bradford, West Yorkshire. The mean quality of adjusted life years (QALY) score for the community hospital group was marginally non-significantly higher than for those in the district general hospital group (0.38 vs 0.35) at 6 months after recruitment. The mean standard deviation costs per patient of the health and social services resources used were similar for both groups: community hospital £7,233; district general hospital £7,351. These findings were robust to several sensitivity analyses. The incremental cost effectiveness ratio for community hospital care dominated. A cost-effectiveness acceptability curve, based on bootstrapped simulations, suggests that at a willingness to pay threshold of £10,000 per QALY, 51% of the community hospital cases will be cost-effective, which rises to 58% of cases when the threshold is £30,000 QALY. Post-acute care for older people in a locally-based community hospital is of similar cost effectiveness to that of an elderly care department of a district general hospital. (RH)  
ISSN: 09598138  
From : <http://www.bmj.com>
- 179/44      Giving patients a choice of what to wear in hospital; by Diane Wilson.  
Nursing Times, vol 102, no 20, 16 May 2006, pp 29-31.  
The number of older people in hospital is increasing in line with an ageing population. In response, specialist teams have been established to review and enhance the provision of all aspects of care for older patients. This article reports on a project at the University Hospitals of Leicester NHS Trust which explored how providing a choice of what to wear in hospital can enhance older patients' overall well-being. Surveys were conducted with patients and staff regarding views on patients' daywear preferences, and taking account of cultural beliefs. (RH)  
ISSN: 09547762  
From : <http://www.nursingtimes.net>

## HOUSING

- 179/45      Housing choice for older people: a discussion paper; by Joe Oldman, Help the Aged. London: Help the Aged, 2006, 61 pp.  
This discussion paper gives an overview of some of the current policy issues impacting on older people's housing in England. It is designed to stimulate comment and feedback to assist Help the Aged in determining future housing priorities for further action. As such, the aim is to issue a revised version based on feedback and comments received. The report is arranged in four parts, and case studies are used by way of illustration. Part 1, on diversity of housing needs, examines trends in housing need, direction of government housing policy, and older people's demands and expectations. Part 2, housing options, considers whether people decide to stay put or move on, also issues around exclusion or discrimination. Part 3, finding solutions, first examines the extent to which strategic planning and policies such as Supporting People (SP) and the Decent Homes

Standard deliver results. The role of co-ordinating housing advice and information is considered in the context, for example, of Link-Age, the Single Assessment Process (SAP), Home Improvement Agencies ((HIA), and Housing Options for Older People (HOOP). Part 4 summarises the policy recommendations made. (RH)

ISBN: 1845980069

Price: £10.00

From : Help the Aged, 207-221 Pentonville Road, London N1 9UZ.

E-mail: [info@helptheaged.org.uk](mailto:info@helptheaged.org.uk) <http://www.helptheaged.org.uk>

## **INTEGRATED CARE**

(See 179/7)

## **INTERGENERATIONAL ISSUES**

(See 179/35, 179/50, 179/51)

## **INTERNATIONAL AND COMPARATIVE**

(See Also 179/39, 179/70)

179/46

The 2005 White House Conference on Aging; by Robert B Hudson (ed), White House Conference on Aging. 2005.: National Academy on an Aging Society, Winter 2006, pp 1-27.

Public Policy & Aging Report, vol 16, no 1, Winter 2006, pp 1-27.

White House Conferences on Aging have long served as benchmarks of the times rather than as fixed templates for future legislative action. While this conference was notable for George W Bush's (remarked upon) absence, its agenda concentrating on themes of personal responsibility, community involvement and new technology was well received.

Michael Levitt, US Secretary of Health and Human Services, gave a plenary speech at the Conference.

This is considered in Robert H Binstock's article, "Social security and Medicare: President Bush and the delegates reject each other". Two further themes at the Conference were mental health and housing. Mental health featured prominently, with a resolution passed on improving "recognition, assessment and treatment of mental illness and depression among older Americans". The last article notes three themes not considered - end-of-life decisions, lifelong learning, and drawing on the wisdom of elders - but suggesting how these subjects might be considered in 2015. (RH)

ISSN: 10553037

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

179/47

Balancing family and state care: neither, either or both?: the case of Sweden; by Gerdt Sundström, Bo Malmberg, Lennarth Johansson, Family Support for Older People: Determinants and Consequences (FAMSUP) Network, European Science Foundation.

Ageing and Society, vol 26, part 5, September 2006, pp 745-766.

Old-age care has frequently been conceptualised as being either family-based or publicly-provided. This article analyses the overlap in provision from the two sources and their relationship in the Swedish welfare state. The empirical evidence on patterns of use in Sweden supports a joint family-state conceptualisation of care: many older people and their carers prefer to rely on both sources of care rather than just one. However, this may depend on general coverage rates of public services and the efficient targeting of frail older people who live alone. Most older people in need of care rely on help only from their family, but many are helped by both the family and the state, particularly those with the greatest needs. Dynamic concepts like 'substitution' and 'complementarity' are hard to apply in cross-sectional studies: there may be complementarity in individual cases, but long-term substitution or its reversal in successive cohorts. The need for care varies considerably among Swedish municipalities, with implications for the levels of both public services and family support. High coverage rates of the public services may facilitate and support family care. This is the last of four empirical studies in this issue of Ageing and Society on the provision of family support to older people, written by members of the Family Support for Older People: Determinants and Consequences (FAMSUP)

Network, European Science Foundation (ESF). (RH)  
ISSN: 0144686X  
From : [http://www.journals.cambridge.org/jid\\_ASO](http://www.journals.cambridge.org/jid_ASO)

- 179/48      Geographical proximity and contact frequency between older parents and their adult children in Germany: cross-cohort and longitudinal perspectives; by Andreas Hoff.  
Generations Review, vol 16, no 2, April 2006, pp 16-22.  
While the survival of multi-generational families has become the rule rather than the exception, other demographic trends such as postponement of childbearing has led to larger time gaps between the generations. This article explores change and continuity of geographical proximity and contact frequency between parents and their adult children in Germany in the past ten years. These two structural aspects of the parent-child relationship that have had a significant impact on relationship quality and solidarity function. The research is based on data from the first and second phases of the German Ageing Survey which focuses on individuals in the second half of life. (RH)  
ISSN: 09652000  
From : (Editorial e-mail address) [gr@ageing.ox.ac.uk](mailto:gr@ageing.ox.ac.uk)
- 179/49      Health service use by adults with depression: community survey in five European countries: evidence from the ODIN study; by Cherie McCracken, Odd Steffen Dalgard, Jose Luis Ayuso-Mateos (et al).  
British Journal of Psychiatry, vol 189, August 2006, pp 161-167.  
One of the aims of the Outcomes of Depression International Network (ODIN) has been to examine patterns and predictors of health service use across Western Europe. The present study examined the cost and use of services by adults with depressive or adjustment disorders in five European countries, also predictive factors. 427 people aged 18-65 with depressive or adjustment disorders in Ireland, Finland, Norway, Spain and the UK provided information on predisposition (demographics, social support), enablement (country, urban/rural, social function) and need (symptom severity, perceived health status) for services. Outcome measures were self-reported use, the Client Services Receipt Inventory (CSRI), and costs of general practice, generic, psychiatric or social services in the previous 6 months. Less frequent use was made of generic services in Norway and of psychiatric services in the UK. Severity of depression, perceived health status, social functioning and level of social support were significant predictors of use. The number of people able to provide support was positively associated with greater health service use. Individual participant factors provided greater explanatory power than national differences in healthcare delivery. The association between social support and service use suggests that interventions may be needed for those who lack social support. (RH)  
ISSN: 00071250  
From : <http://bjp.rcpsych.org>
- 179/50      Intergenerational comparisons: Australian baby boomers discuss their perceptions; by Susan Quine, Diana Bernard.  
Generations Review, vol 16, no 2, April 2006, pp 4-7.  
Generational research is a promising way to identify needs and expectations of different cohorts. This qualitative study was designed to explore the perceptions of Australian baby boomers (aged 49-58) about the similarities and differences between their generation and those of the older and younger generations, and the potential for intergenerational conflict. In 2004, twelve focus groups were conducted in New South Wales (NSW), Australia. The groups were stratified by gender, social class and location. Analysis of the transcripts identified that the baby boomer participants generally felt well placed compared with the older and younger generations. They reported having experienced greater economic wealth and freedom than the older generation, and greater employment and housing security than the younger generation. Most had not considered the possibility of intergenerational conflict, and did not expect resentment from the younger generation. With increased financial assistance to the younger generation now, rather than through inheritance, such conflict appears unlikely to occur. (RH)  
ISSN: 09652000  
From : (Editorial e-mail address) [gr@ageing.ox.ac.uk](mailto:gr@ageing.ox.ac.uk)

- 179/51 Intergenerational coresidence of the Japanese elderly: are cultural norms proactive or reactive?; by Emiko Takagi, Merril Silverstein.  
 Research on Aging, vol 28, no 4, July 2006, pp 473-492.  
 Relatively high prevalence of co-residence between older parents and adult children in Japan is generally interpreted as a structural manifestation of traditional family norms. However, recent socioeconomic changes in Japan have called this into question. This study analyses national data from older people in Japan to examine the reciprocal relationship between two types of intergenerational co-residence and normative beliefs about traditional stem family living arrangements. Two-stage least squares regression analysis reveal that co-residence with married children and traditional normative beliefs mutually reinforce each other, whereas co-residence with unmarried children strengthens normative beliefs, but not vice versa. The authors argue that the composition of multigenerational households of older people in Japan is shifting toward a type where instrumental concerns of both generations take precedence over traditional cultural ideology. Traditional norms still motivate the formation of stem-family households but are also used to justify instrumentally driven living arrangements with single children. (RH)  
 ISSN: 01640275  
 From : <http://www.sagepublications.com>
- 179/52 Meeting the needs of elderly people in China; by Tuhong Zhang, Yude Chen.  
 British Medical Journal, vol 333 no 7564, 19 August 2006, pp 363-364.  
 Community health care is a good idea, but is being implemented unsatisfactorily in China. This short article compares China's population composition with that of the UK. It then outlines the findings of the national household health survey conducted in China in 1998 and 2003 (published in 2004). Among trends noted are changes in the patterns of illness: hypertension has become more prevalent than acute respiratory disease since 1998; cardiac vascular disease and cerebrovascular disease have both increased; and there are more unmet needs. Accessibility of or to healthcare is a problem, for reasons of distance, lack of professionally qualified health professionals, or of healthcare centres not covered by medical insurance. The Chinese government should ensure that older people have access to healthcare by extending healthcare coverage to more people, and by better funding. (RH)  
 ISSN: 09598138  
 From : <http://www.bmj.com>
- 179/53 Orphan pensioners and migrating grandparents: the impact of mass migration on older people in rural Albania; by Russell King, Julie Vullnetari.  
 Ageing and Society, vol 26, part 5, September 2006, pp 783-816.  
 Since 1990, Albania has witnessed rural out-migration on a massive scale, both to other countries (chiefly to Italy and Greece) and internally to Tirana and other major towns. The scale of this migration has disrupted the multigenerational rural and social kinship systems that, before 1990, displayed strong and coherent family bonds, and simultaneously accommodated paternalistic state directives and were supported by welfare provision for all members of the population. The sudden, political, social and rural dislocations that followed the end of the communist regime have made older people particularly vulnerable: many have been left behind by their emigrant children, creating the phenomenon of socially isolated "elderly orphans". While the migrants' remittances cushion the social isolation, the loss of children and grandchildren through emigration has undermined older people's self-respect and *raison d'être* in Albanian family life. This paper based on fieldwork and interviews in regions of heavy out-migration in northern and southern Albania, examines the human impact of emigration on the older people who have been left behind as well as their coping mechanisms, one being to follow their children abroad to care for their grandchildren, enabling the "middle generation" working age parents to engage in paid work. (RH)  
 ISSN: 0144686X  
 From : [http://www.journals.cambridge.org/jid\\_ASO](http://www.journals.cambridge.org/jid_ASO)
- 179/54 Politics within paths: trajectories of Danish and Swedish earnings-related pensions; by Christoffer Green-Pedersen, Anders Lindbom.  
 Journal of European Social Policy, vol 16, no 3, August 2006, pp 245-270.  
 The path dependency idea is taken as the starting point for this investigation of earnings-related

pension schemes over the last two decades in Denmark and Sweden. In the case of Denmark, this article shows that existing funded, occupational pension schemes precluded a pay-as-you-go (PAYG) solutions for workers not already covered due to a "reverse double payment problem". Instead, political attention centred on broadening the coverage of occupational schemes. The article demonstrates that the development of funded pension systems also shows a great deal of path dependency. In the case of Sweden, the authors provide a detailed empirical investigation which shows how the double payment problem affects the position of political parties, rather than the entire reform process. The study thus argues that the political parties were the crucial actors in Swedish pension reform, and that path dependency facilitated a consensual reform process, because it made irrelevant a more fundamental party political disagreement over the pension system. (RH)

ISSN: 09589287

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

179/55

Socio-economic status differences in older people's use of informal and formal help: a comparison of four European countries; by Marjolein Broese van Groenou, Karen Glaser, Cecilia Tomassini (et al), Family Support for Older People: Determinants and Consequences (FAMSUP) Network, European Science Foundation.

Ageing and Society, vol 26, part 5, September 2006, pp 767-782.

Variations by older people's socio-economic status (SES, i.e. educational level and social class) in the use of informal and formal help from outside the household in Great Britain, Italy, Belgium and the Netherlands are investigated. In all these countries, it was older people in low SES groups who mostly used such help. Multinomial logistic regression analyses showed that, for each country and by both types of help, there were SES gradients in the substitution of both formal and informal care, and that differences in age, health and marital status largely accounted for the former but not the latter. Cross-national differences in the use of both formal and informal help remained when variations in sex, age, SES, health, marital status, home ownership and the use of privately paid help were taken into account. Significant interaction effects were found, which indicated that older people in low SES groups in Great Britain and the Netherlands had higher rates of using internal help from outside the household than their counterparts in Italy, and similarly that those in the Netherlands were more likely to use formal help than their Italian peers. Results are discussed in relation to the cultural differences and variations in the availability of formal services among the countries. This is the third of four empirical studies in this issue of Ageing and Society on the provision of family support to older people, written by members of the Family Support for Older People: Determinants and Consequences (FAMSUP) Network, European Science Foundation (ESF). (RH)

ISSN: 0144686X

From : [http://www.journals.cambridge.org/jid\\_ASO](http://www.journals.cambridge.org/jid_ASO)

179/56

A stark choice: [direct payment systems in the UK and Norway]; by Karen Christensen. Community Care, no 1630, 6 July 2006, pp 32-33.

The direct payment systems in the UK and Norway face a similar dilemma: more local control risks growing inequality among service users. This article looks at direct payments from a Norwegian perspective, by making some key comparisons with the UK. Although in Norway direct payments are organised more paternalistically, the system still satisfies the needs of disabled people and their assistants. The evidence is drawn from a continuing qualitative comparative research project in London and Bergen. (RH)

ISSN: 03075508

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

179/57

Waiting to go into a Danish nursing home; by Jens E Kofod.

Generations Review, vol 16, no 2, April 2006, pp 23-27.

The number of older people moving from their own home into a nursing home is likely to increase. This study examines important aspects in the transition process by applying ethnographic methods. 10 older Danish people and their relatives were interviewed and observed. It was found that their relationship towards their home care assistant became increasingly important as they waited to go into the nursing home. Assessments for home care were constrained by municipal authorities and their regulations, and the overall attitude was that the

needs of older people were not being appropriately defined and met. This left them barely able to maintain their homes, and as a consequence of this, their identity. (RH)

ISSN: 09652000

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

## **LEARNING DIFFICULTIES**

(See 179/16, 179/20)

## **LEGAL ISSUES**

(See 179/5)

## **LIFE-LONG LEARNING**

179/58

Securing learning in later life; by Jim Soulsby.

Generations Review, vol 16, no 3/4, September 2006, pp 4-6.

The Social Exclusion Unit (SEU) report, "A sure start in later life: ending inequalities for older people" (2006) and the Department for Work and Pensions' "Opportunity age: meeting the challenges of ageing in the 21st century" (DWP, 2005) both acknowledged the health and social benefits of later life learning. In contrast, the Department for Education and Skills (DfES), appears unwilling to include older people in its aim to enhance the country's skills. The International Federation on Ageing (IFA) 8th Global Conference in May 2006 provided an opportunity for a symposium on Securing learning in later life drawing on practice in several European countries. The author comments on this, but focusing on the National Institute for Adult Continuing Education (NIACE) and its work with older learners: Older & Bolder, Adult Learners' Week and Senior Learner of the Year, which show how access to education in adulthood can change lives. (RH)

ISSN: 09652000

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

179/59

Undergraduates over fifty; by Sharon Maxwell Magnus.: Age Concern, Sept/Oct 2006, pp 68-70. Heyday, issue 2, Sept/Oct 2006, pp 68-70.

A brief article, with photographs of current students, that introduces the work of the project, Ransackers, hosted within the Centre for Policy on Ageing. The article features the experiences of three students to illustrate how the project operates, which offers mature students the opportunity to study at a higher education college for a period of ten weeks, studying a topic of their choice, but not to gain a qualification. (KJ)

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

Ransackers contact: Allan Bell, CPA, 25-31 Ironmonger Row, London EC1V 3QP. Email: [abell@cpa.org.uk](mailto:abell@cpa.org.uk)

## **LONG TERM CARE**

(See Also 179/70)

179/60

Paying for long-term care; by Joseph Rowntree Foundation - JRF. York: Joseph Rowntree Foundation - JRF, April 2006, 15 pp.

Foundations, 0186, April 2006, 15 pp.

The UK has not yet found a clear, fair and adequate system for financing the growing demand for long-term as the population ages. In the 1990s, successive governments shied away from major reform which would have secured a sustainable and rational financing structure, as implemented in some other countries and recommended by many in the UK. The Joseph Rowntree Foundation (JRF) has been leading a debate on how to start moving towards better funding arrangements. While the need for big change over the long term has not gone away, important steps could be taken now to reduce the difficulties in the present system. This Foundations reviews the evidence and arguments brought forward and concludes this JRF programme of work by presenting some costed options for reforms. A summary sheet, "Testing consumer views on paying for long-term

care", is also available. (KJ/RH)

ISSN: 13665715

Price: FOC

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

- 179/61 Professional perspectives on decision making about the long-term care of older people; by Brian J Taylor, Michael Donnelly.  
British Journal of Social Work, vol 36, no 5, July 2006, pp 807-826.  
With the increasing pressure on social and health care resources, professionals have to be more explicit in their decision-making regarding the long-term care of older people. This grounded theory study used 19 focus groups and 9 semi-structured interviews (96 staff in total) to explore professional perspectives on this decision making. Participants and interviewees comprised care managers, social workers, consultant geriatricians, general practitioners (GPs), occupational therapists and hospital discharge staff from 11 Trusts in Northern Ireland. The emerging themes spanned context, clients, families and services. Decisions were often prompted by a crisis, hindering professionals seeking to make a measured assessment. Fear of burglary and assault, and the willingness and availability of family to help were major factors in decisions about living at home. Service availability, in terms of public funding for community care, the availability of home care workers and workload pressures on primary care services influenced decision "thresholds" regarding admission to institutional care. Assessment tools designed to assist decision making about the long term care of older people need to take into account the critical aspects of individual fears and motivation, family support and the availability of publicly funded services as well s functional and medical needs. (RH)  
ISSN: 00453102  
From : <http://www.bjsw.oxfordjournals.org>

#### **MEDICAL ISSUES**

(See Also 179/12)

- 179/62 Oxford handbook of geriatric medicine; by Lesley K Bowker, James D Price, Sarah C Smith. Oxford: Oxford University Press, 2006, 763 pp.  
The handbook's coverage includes diseases and conditions of older people that medical staff are likely to encounter. The first few chapters explain issues of ageing and current policies with regard to geriatric services in the UK, while the last few include death and dying, and ethics. (RH)  
ISBN: 0198530293  
Price: £24.95  
From : Oxford University Press, Great Clarendon Street, Oxford OX2 6DP. Website: [www.oup.com](http://www.oup.com) (ISBN-13: 9780198530299)

#### **MEDICATION**

- 179/63 The power of self control: Parkinson's disease : medicines management; by Stuart Shepherd. Health Service Journal, vol 116, no 6016, Supplement, 27 July 2006, p 9 (HSJ Parkinson's Disease).  
Drug regimes for Parkinson's disease have exacting standards. The author states the case for patients themselves managing their medication, referring to a medicines management project by Hinchinbrooke Health Care Trust and Huntingdonshire Primary Care Trust. (RH)  
ISSN: 09522271  
From : <http://www.hsj.co.uk>

#### **MENTAL HEALTH**

- 179/64 Promoting mental health and well-being in later life: a first report from the UK Inquiry into Mental Health and Well-being in Later Life; by June Crown (chairman), UK Inquiry into Mental Health and Well-being in Later Life, Age Concern England - ACE; Mental Health Foundation. London: Age Concern England, 2006, 80 pp.



Age Concern England (ACE) and the Mental Health Foundation launched this UK Inquiry (chaired by June Crown) in 2003. This first of two reports presents evidence from a comprehensive literature and policy review and the views of some 900 older people and carers, which points to five main areas that influence mental health and well-being in later life. The first is discrimination on the basis of age; not only is it the most common type of prejudice experienced by people aged 55+, it is a risk factor for poor mental health. Second, participation in meaningful activity, staying active and having a sense of purpose is important for mental well-being. Third, relationships with family and friends will help promote good mental health, whereas social isolation is a strong risk factor for poor mental health. Fourth, maintaining or improving physical health in later life will help to promote mental health. Lastly, poverty is a clear risk factor for poor mental health, which is also a risk factor for poverty. The report makes 15 recommendations aimed at bodies from local and central government, to voluntary organisations. (RH)

From : c/o Age Concern England, Astral House, 1268 London Road, London SW16 4ER.  
<http://www.mhilli.org>

179/65 Socio-economic position and common mental disorders: longitudinal study in the general population in the UK; by Petros Skapinakis, Scott Weich, Glyn Lewis (et al).  
British Journal of Psychiatry, vol 189, August 2006, pp 109-117.

Individuals in lower socio-economic groups (SEGs) have an increased prevalence of common mental disorders. This study aimed to investigate the longitudinal association between socio-economic position and common mental disorders in a general population sample in the UK. 2406 participants were assessed at two time points 18 months apart with the Revised Clinical Interview Schedule (CIS-R). The sample was stratified into two cohorts according to mental health status at baseline. After adjusting for baseline psychiatric morbidity, none of the socio-economic indicators studied was significantly associated with an episode of common mental disorder at follow-up. The analysis of separate diagnostic categories showed that subjective financial difficulties at baseline were independently associated with depression at follow-up in both cohorts. These findings support the view that apart from objective measures of socio-economic position, more objective measures might be equally important from an aetiological or clinical perspective. (RH)

ISSN: 00071250

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

#### **MENTAL HEALTH SERVICES**

179/66 Creating a community-based memory clinic for older people; by Moganeswari Grizzell, Anna Fairhurst, Sarah Lyle (et al).  
Nursing Times, vol 102, no 28, 11 July 2006, pp 32-34.

The authors describe the development of a multi-disciplinary, nurse-led memory clinic. The clinic has grown out of a research activity to become an important component of a community service for older people with dementia and other mental health problems. A detailed analysis of the interaction between the clinic and the community mental health team, as practised in this model of care, is presented for consideration. (RH)

ISSN: 09547762

From : <http://www.nursingtimes.net>

179/67 Flip side of private provision: [private sector provision for people with learning difficulties]; by Mark Hunter.

Community Care, no 1634, 3 August 2006, pp 26-27.

Long-stay hospitals for people with learning difficulties are being closed. The author asks whether the trend towards private provision for this group represents a return to institutional care. The idea of closing long-stay hospitals in the first place was to ensure that people with learning difficulties would be offered a better quality of care and a more fulfilling life. (RH)

ISSN: 03075508

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

179/68

Holistic care for older inpatients; by Janis Smy.  
Nursing Times, vol 102, no 20, 16 May 2006, pp 16-17.

A team of nurses from Bradford won an NT Award for training "older people's champions" to ensure patients' mental health needs, as well as physical needs are met. Kath Williams (team leader) and Suzanne Wightman (senior manager in practice development) from South West Yorkshire Mental Health NHS Trust have spent the past two years training, educating and supporting their general hospital colleagues in the identification and care of older patients who have mental health needs as well as the surgical or medical problem that brought them in to the hospital. Assisted by healthcare support worker Ruth Endecott and ward development manager Jo Crossland, they have recruited and trained a hospital-wide multidisciplinary team of older people's champions. Dementia care mapping (DCM) to improve the patient's healthcare journey has been introduced. The project, which was funded by the Department of Health (DH), has now come to an end. (RH)

ISSN: 09547762

From : <http://www.nursingtimes.net>

179/69

A tiered model of psychogeriatric service delivery: an evidence-based approach; by Brian Draper, Henry Brodaty, Lee-Fay Low.

International Journal of Geriatric Psychiatry, vol 21, no 7, July 2006, pp 645-653.

Previous models of mental health care for older people have not considered the full spectrum of mental disorders. Psychogeriatric service delivery ranges from primary provision to the management of the most severely ill. The Tiered Model depicts tiers of mental disorders in ascending order of severity and consequent interventions required, and thus provides a rational method for planning comprehensive service delivery across the full range of disorders. Interventions aim both to avert individuals from moving up tiers (prevention) and to move individuals down tiers (treatment). Individuals in the lower tiers have no mental disorders, and prevention strategies are targeted at at known risk factors. In the middle tiers, individuals with mild to moderate mental disorders will mainly be treated in primary care, often in collaboration with specialist mental health services for older people. Individuals in the top tiers with severe mental disorders usually require institutional care. This Australian study demonstrates that the tiered model provides a basis for planning comprehensive service delivery. (RH)

ISSN: 08856230

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

## **MIGRATION**

179/70

Change in care regimes and female migration: the "care drain" in the Mediterranean; by Francesca Bettio, Annamaria Simonazzi, Paola Villa.

Journal of European Social Policy, vol 16, no 3, August 2006, pp 271-286.

Concern over the need to provide long-term care for an ageing population has stimulated a search for new solutions that can ensure financial viability and a better balance between demand and supply of care. At present, there is a great variety of care regimes across industrial nations, with Mediterranean countries forming a distinctive cluster where management of care is overwhelmingly entrusted to the family. In some of these countries, care of older people has recently attracted large flows of care migrants, ushering in a new division of labour among family carers (mainly women), female migrants and skilled native workers. The article explores the interconnections between the feminisation of migration on the one hand, and ongoing change in the Southern European care regimes (in Italy, Spain, Portugal and Greece) on the other hand. Different strands of the literature are brought together and reviewed to illustrate ongoing developments. One main objective is to identify issues of efficiency, equity and sustainability raised by this new "model" of care. The results of recent surveys of provisions and costs of long-term care are accordingly reviewed to set the stage for discussion on the optimal mix of long-term care provisions in place of traditional family care. (RH)

ISSN: 09589287

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

179/71 Moving to Spain at an advanced aged; by Angeles Escriva, Emmeline Skinner.  
Generations Review, vol 16, no 2, April 2006, pp 8-15.  
Existing research on migration in later life has so far given little attention to the inflows of older people from developing countries to Europe. This article aims to illustrate the existence of migration in old age, and the way that it is influenced by structural family and personal factors. It also shows how - in contrast to wealthier older people who migrate within Europe in search of a pleasant location for retirement - older people from developing countries, most of whom are female, migrate as a means of securing their own future as well as that of their families. They do this both through contribution to unpaid work within the family household, or through paid work mainly in the care market. (RH)  
ISSN: 09652000  
From : (Editorial e-mail address) [gr@ageing.ox.ac.uk](mailto:gr@ageing.ox.ac.uk)

179/72 Retiring to the sun: life as a British retiree abroad; by Charles Betty.: Age Concern Cymru, Spring 2006, pp 3-7.  
Envisage, no 5, Spring 2006, pp 3-7.  
The author writes in his capacity as Vice President of Age Care Association, on the Costa del Sol, Spain. This brief article outlines the advantages and pitfalls of retiring to the sun, especially when the rural retreat can turn to something less than ideal as frailty and poor health mark the last years of such retirement. Caring for expatriate older people in Spain is beginning to raise challenges and issues for those choosing to retire there, especially when there are few family members that they left behind. The author wants to see greater cooperation between the care organisations, expatriate social clubs and political councillors, with a remit to investigate and monitor the most productive methods that provide a solution for British retirees; and volunteering amongst the British expatriates community itself should be part of that solution. (KJ)  
ISSN: 17417910  
From : [enquiries@accymru.org.uk](mailto:enquiries@accymru.org.uk)

#### **OLDER OFFENDERS**

179/73 Prison's ageing population; by Terry Philpot.  
Community Care, no 1639, 7 September 2006, pp 30-31.  
Over 60s comprise the fastest growing age group of prisoners. However, as the needs of younger inmates dominate the prison system, the mental, social and physical well-being of prisoners aged 60+ can suffer, even after release. This article highlights the disadvantages faced by older prisoners - particularly women, whose needs are not catered for, especially with regard to education and training. (RH)  
ISSN: 03075508  
From : <http://www.communitycare.co.uk>

#### **PALLIATIVE CARE**

(See Also 179/32)

179/74 The influence of patient and carer age in access to palliative care services; by Gunn E Grande, Morag C Farquhar, Stephen I G Barclay (et al).  
Age and Ageing, vol 35, no 3, May 2006, pp 267-272.  
Older patient age is associated with poorer access to palliative care. This may mask age differences in access due to a carer's age. This study compared patients who received community Macmillan nurse specialist advice, Marie Curie nursing or inpatient hospice care with patients who did not. 123 primary carers were interviewed. The study found that carer age was at least as important as patient age in predicting access to palliative home care. If carer age differences reflect that younger carers have greater need for support, health professionals may need to become more responsive to the support requirements of younger carers. If carer age differences reflect younger carers' greater effectiveness in recruiting care, there is a need to ensure that older carers' home care requirements are better heard and responded to by health professionals. (RH)  
ISSN: 00020729  
From : <http://www.ageing.oxfordjournals.org>

## PENSIONS AND BENEFITS

(See Also 179/54)

- 179/75      Employer attitudes to personal accounts: report of a qualitative study: a report of research carried out by BRMB Limited on behalf of the Department for Work and Pensions; by Helen Marshall, Andrew Thomas, BRMB Limited; Department for Work and Pensions - DWP. Leeds: Corporate Document Services- CDS, 2006, 110 pp (Department for Work and Pensions research report, no 371).  
In this context, "personal accounts" relates to the idea of a National Pensions Savings Scheme (NPSS), a recommendation of the Pensions Commission. This qualitative study is based on in-depth interviews with 75 business employers and 8 non-business employers representing firms varying in size from 1-4 to 1,000+ employees. Their views and concerns were sought on proposals for automatically enrolling people into personal accounts. The report is organised as follows: employers' attitudes towards pension provision; views on automatic enrolment and on the level of contributions; employers' likely responses to a 3% minimum employer contribution; employers' views on employee reactions to personal accounts; the process of introducing personal accounts; employers' views on different operating models of personal accounts; and views of non-business employers. Views on the "personal accounts" idea varied by size of employer, and on whether those with contributions of 3% or more were willing to "level down" their existing schemes. This study was commissioned as part of a programme of research and analysis carried out by the Department for Work and Pensions (DWP) to gather evidence to inform the Government's proposals on personal accounts, as set out in the White Paper, "Security in retirement: towards a new pensions system" (Cm 6841; TSO, 2006). (RH)  
ISBN: 1847120533  
From : Corporate Document Services, 7 Eastgate, Leeds LS2 7EY. E-mail: [orderline@cds.co.uk](mailto:orderline@cds.co.uk)  
Website: [www.cds.co.uk](http://www.cds.co.uk)  
Download from DWP website: <http://www.dwp.gov.uk/asd/asd5/rrs2006.asp>
- 179/76      Review of research relevant to assessing the impact of the proposed National Pension Savings Scheme on household savings: a report of independent research carried out by PricewaterhouseCoopers on behalf of the Department for Work and Pensions; by John Hawksworth, PricewaterhouseCoopers; Department for Work and Pensions - DWP. Leeds: Corporate Document Services- CDS, 2006, 48 pp (Department for Work and Pensions research report, no 373).  
The National Pensions Savings Scheme (NPSS) was a recommendation of the Pensions Commission. This report presents key findings of a review of academic and other published research on whether NPIS would add to total household savings. The review is intended to assist the government in assessing NPSS and other options for delivering personal accounts and reforming private pensions. The review is in two main parts. The first summarises a wide range of research of potential relevance to the assessment of the net impact of the proposed NPSS on household savings. This encompasses macroeconomic studies of the impact of changes on pension savings on total savings, and microeconomic studies looking at the impact of tax incentives and matching contributions on voluntary savings, the impact on total savings of changes in mandatory or quasi-mandatory funded savings schemes, and the impact of automatic enrolment. The second part discusses the implications of the research for the assessment of the impact of the NPSS on total household savings. (RH)  
ISBN: 1847120557  
From : Corporate Document Services, 7 Eastgate, Leeds LS2 7EY. E-mail: [orderline@cds.co.uk](mailto:orderline@cds.co.uk)  
Website: [www.cds.co.uk](http://www.cds.co.uk)  
Download from DWP website: <http://www.dwp.gov.uk/asd/asd5/rrs2006.asp>

## QUALITY OF LIFE

(See Also 179/10, 179/18, 179/23, 179/42)

- 179/77 Extending quality life: policy prescriptions from the Growing Older Programme; by Alan Walker. *Journal of Social Policy*, vol 35, part 3, July 2006, pp 437-454.  
This article provides a policy-oriented overview of the 5-year ESRC Growing Older Programme of research on quality of life in old age, the largest UK social sciences research endeavour to date in the field of ageing. The main objectives are stated and contributions to knowledge and research methods are summarised. Most of the article focuses on the relationship between research and policy. Key elements of the programme are: inequalities in old age, environments of ageing, economic and family roles, participation and involvement, and family and identity. (RH)  
ISSN: 00472794  
From : <http://www.journals.cambridge.org>
- 179/78 Predictors of the quality of life of older people with heart failure recruited from primary care; by Merryn Gott, Sarah Barnes, Chris Parker (et al).  
*Age and Ageing*, vol 35, no 2, March 2006, pp 172-177.  
Current understanding of quality of life (QoL) in heart failure is largely derived from clinical trials. Older people, women and those with co-morbidities are under-represented in these. This study concerns older people recruited from general practice surgeries in four areas of the UK: Bradford, Barnsley, East Devon, and West Hampshire. Among 542 people aged 60+ with heart failure, the following factors were predictive of reduced quality of life: being female; evidence of depression; being in New York Heart Association (NYHA) functional class III and IV; having two or more co-morbidities; and being in socioeconomic groups III-V. Older age was associated with reduced quality of life as measured by a generic quality of life tool (the SF-36), but not by a disease-specific quality of life tool (Kansas City Cardiomyopathy Questionnaire). Overall, the study's findings suggest that quality of life for older people with heart failure can be described a challenging and difficult. (RH)  
ISSN: 00020729  
From : <http://www.ageing.oxfordjournals.org>

## RESEARCH

- 179/79 Language and later life: issues, methods and representations; by Rebecca L Jones, John Percival (eds), Centre for Policy on Ageing - CPA; Centre for Ageing and Biographical Studies (CABS), Open University. London: Centre for Policy on Ageing, 2006, 83 pp (The representation of older people in ageing research series, no 7).  
The papers in this volume were originally presented at a joint CPA/CABS seminar in November 2005. In "Minding our languages: interviews with older people", Chih Hoong Sin discusses issues that arise in relation to different languages when researching later life. These include translation problems, cultural issues, preferences for speaking in another tongue (e.g. Welsh), and sign languages. Jane Maxim and colleagues introduced research (financed by the Stroke Association), in "Conversations with older people: order and disorder", discussing how language is used following the onset of aphasia and Alzheimer's disease (AD). In "Representations of older people with a learning difficulty: discourses and dilemmas" Liz Forbat reviews how the academic literature portrays people with learning difficulties such as Down's syndrome. Lastly, Judith Burnett focuses on the way in which later life and older people are represented in language. Based on her research into the journey through adulthood of a cohort of baby boomers now in their thirties, is "Sad isn't it? I must be getting old: narratives of ageing from the thirtysomethings". (RH)  
ISBN: 1901097064  
Price: £10.00 + p&p  
From : Central Books, 99 Wallis Road, London E9 5LN.
- 179/80 Using qualitative research in systematic reviews: older people's views of hospital discharge; by Mike Fisher, Hazel Qureshi, Wendy Hardyman (et al), Social Care Institute for Excellence - SCIE. London: Social Care Institute for Excellence, 2006, 68 pp (How knowledge works in social

care, report 9).

"What are older people's experiences of hospital discharge and how are they influenced by staff views and behaviour?" was the general research question chosen for this study, for which older people were defined as those aged 60+. The qualitative synthesis is based on a selective search that identified 104 relevant studies, of which 28 were selected for detailed evaluation and 15 for synthesis. The report describes the search strategy and methods: electronic databases (including AgeInfo, CareData and PsychInfo) were searched, also electronic versions of Ageing and Society, and Age and Ageing. The report discusses assessing study relevance and quality, also the process of synthesis and implications of this synthesis for services for older people. Two appendices are included: databases and search strategies; and a list of studies identified through search processes. Two further appendices are available online: data extraction and quality appraisal forms for the 15 studies included in qualitative synthesis ([www.scie.org.uk/publications/reports/report09c.pdf](http://www.scie.org.uk/publications/reports/report09c.pdf)); and example text search ([www.scie.org.uk/publications/reports/report09d.pdf](http://www.scie.org.uk/publications/reports/report09d.pdf)). (RH)  
ISBN: 1904812295

From : SCIE, Goldings House, 2 Hay's Lane, London SE1 2HB. <http://www.scie.org.uk>

## **RESIDENTIAL AND NURSING HOME CARE**

(See Also 179/57)

- 179/81      Reach for the stars: [a rating system for care homes]; by Graham Hopkins.  
Community Care, no 1640, 14 September 2006, pp 28-30.  
A rating system for care homes comes into force in 2007. However, despite the approval of most providers, there remain doubts about consistency and credibility. The author reports findings of a short survey of 93 care home providers conducted by Community Care. (RH)  
ISSN: 03075508  
From : <http://www.communitycare.co.uk>
- 179/82      Topping up care home fees - recommended maximum fee limits from April 2006: [other title]: Recommended maximum fees for the guidance of member charities considering "topping-up" fees for beneficiaries in care homes; by Association of Charity Officers - ACO. Potters Bar, Herts: Association of Charity Officers, 2006, 6 pp.  
This guidance relates to beneficiaries who are registered in registered homes providing residential or nursing home care. The Association of Charity Officers (ACO) provides figures for 2001 to 2006 suggesting what it considers should be the maximum fees for residential and nursing home care per week, and taking into account care needs. Other areas of concern covered include: income deficits of ACO member charities; dementia care; and campaigns that have drawn attention to underfunding of care for older people. (RH)  
From : Association of Charity Officers, Five Ways, 57/59 Hatfield Road, Potters Bar, Herts EN6 1HS. Email: [info@aco.uk.net](mailto:info@aco.uk.net) Website: <http://www.aco.uk.net>

## **RETIREMENT**

(See Also 179/72)

- 179/83      "I'd rather keep running to the end and then jump off the cliff": retirement decisions : who decides?; by Sarah Vickerstaff.  
Journal of Social Policy, vol 35, part 3, July 2006, pp 455-472.  
Government in the UK, as elsewhere in Europe, is keen to encourage individuals to delay their retirement, work for longer and save more for their retirement. This article argues that much of the public discussion is based on the debatable premise that most people are actively choosing to leave work "early". Research on retirement decisions hitherto has concentrated on individual factors, which dispose toward early retirement and has neglected to role of the employer in determining retirement timing. New research reported here, undertaken in three organisational case studies, explores the management of retirement and how individual employees experience these processes. It employs the concepts of "retirement zones" and retirement scenarios to demonstrate how the interaction of individual attributes (themselves subject to change) and organisational practices (also unpredictable and variable) produces retirement outcomes. It

concludes that there is considerable management discretion over the manner and timing of individual retirements. Hence, government needs to recognise that the minority of individuals may have relatively little personal discretion over their departure from work and hence concentration on urging them to work for longer and delay retiring may be missing the real target for policy change. (RH)

ISSN: 00472794

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

## **RURAL ISSUES**

179/84

Service provision for people with dementia in rural Scotland: difficulties and innovations; by Anthea Innes, Sylvia Cox, Annetta Smith (et al).

*Dementia: the international journal of social research and practice*, vol 5, no 2, May 2006, pp 249-270.

The provision of health and social care services to people with dementia and their carers living in remote and rural areas has been neglected globally. Meeting the needs of people with dementia poses many challenges for service providers. Such challenges may be compounded by the difficulties of providing and accessing services in rural areas. This article explores the views of Scottish service providers drawn from the voluntary, statutory and private sectors. The findings highlight the difficulties relating to dementia and rurality faced by service providers in Scotland. The authors also consider innovative measures reported by service providers. Such measures indicate that not only can the distinct challenges of dementia service provision be overcome, but also the challenges posed by providing services to people with dementia and their carers living in remote and rural areas. The practice and policy implications of such service provision in rural Scotland are considered. This article's findings extend the literature on rural dementia service provision. (RH)

ISSN: 14713012

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

## **SEXUALITY**

179/85

Sexual health and the new ageing; by Merryn Gott.

*Age and Ageing*, vol 35, no 2, March 2006, pp 106-107.

Changes in attitudes to sexuality and sexual health are being noticed as the baby boomer generation approaches older age. This short article notes recent findings on trends in over 50s' sexual lifestyles: the rapid rise in HIV/AIDS and other sexually transmitted infections; and the growing medicalisation of sexuality and the arrival of pharmaceuticals such as Viagra. However, other research suggests that while those working with older people must expect to deal with late-life sexual concerns, older people worry about appropriateness, tending not to initiate such discussions. (RH)

ISSN: 00020729

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

## **SOCIAL CARE**

(See 179/47)

## **SOCIAL NETWORKS**

(See 179/48)

## **SOCIAL SERVICES**

179/86

Assisting ageing; by Improvement and Development Agency - IDeA; The Beacon Scheme. London: Electronic format only, 2006, 56 pp.

This guide gives examples from Beacon authorities and others of current best practice in providing services for older people. Namely, it has been compiled in partnership with the IDeA by the Beacon authorities for the Services for Older People theme (2004-05). They are: Cotswold

District Council; Merseyside Fire & Rescue Service; Nottinghamshire County Council; Shropshire County Council; and, Stroud District Council. It outlines the major demographic and social trends and policy considerations that underpin the work of local authorities in this area before going on to discuss and present examples of different initiatives under four themes. Key factors for success that run throughout each theme are the active involvement of older people and the willingness of authorities and agencies to adopt innovative approaches to the provision of services. (KJ)

From : Download from website: <http://www.idea-knowledge.gov.uk/idk/aio/5084947>  
IDeA, Layden House, 76-86 Turmill Street, London EC1M 5LG.

## **STROKE**

(See 179/8, 179/34)

## **SUICIDE**

(See 179/25)

## **TRAINING**

179/87

Training and learning in the workplace: can we legislate against age discriminatory practices?; by Kerry Platman, Philip Taylor, Social Policy Association. Bristol: The Policy Press, 2006, pp 269-292.

IN: Social policy review 18, part 3, chapter 13, 2006, pp 269-292.

Vocational education is the focus of this chapter, beginning with the policy context of the age discrimination legislation. Patterns of vocational education according to age and other factors is examined, as are some recent government education initiatives designed to translate lifelong learning policies into concrete actions. Voluntary and statutory approaches to age equality in training provision are discussed. Lastly, the impact of the age discrimination regulations in furthering lifelong learning and workplace training is questioned. (RH)

ISBN: 1861348436

From : The Policy Press, University of Bristol, Fourth floor, Beacon House, Queen's Road, Bristol BS8 1QU.

## **TRANSPORT**

179/88

Driving, dementia and the Driver and Vehicle Licensing Agency: a survey of old age psychiatrists; by Anitha Naidu, Ian G McKeith.

Psychiatric Bulletin, vol 30, no 7, July 2006, pp 265-268.

Old age psychiatrists in north-west England were surveyed to determine what they considered relevant indicators of driving ability. The survey asked them about satisfaction with the current Driver and Vehicle Licensing Agency (DVLA) procedure of assessing competence to drive in patients with dementia, and how they thought this could be improved. 57 out of 75 psychiatrists (75%) responded. 26 (45%) respondents thought the forms issued by the DVLA were unsatisfactory, but 32 (57%) were satisfied with the eventual decisions made about individual patients. Factors thought to be relevant indicators of driving ability were occupational therapy (n=46, 81%), neuropsychological assessments (n=43, 75%) and carer's report of driving (n=48, 84%). Factors thought not to be relevant were a patient's report of driving ability (n=13, 23%), and the Mini Mental State Examination - MMSE (n=21, 38%). The current system for determining driving ability for people with cognitive impairment and dementia was felt to be unsatisfactory. A multidisciplinary approach and use of on-road driving assessments may improve decision-making. (RH)

ISSN: 09556036

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

## **WOMEN**

(See 179/70)



# 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.

1-2 November 2006

## **Community Care Live Scotland**

Social care study days and exhibition. Workshops include Age Concern Scotland - Equality and diversity in ageing.

*Organised by:* Community Care

*Venue:* Heriot-Watt University

*Location :* Edinburgh, Scotland

*Tel :* 0870 7873 815

*Tel :* +44 (0)20 7831 7090

1 November 2006

## **THE FUTURE OF AGEING RESEARCH LAUNCH CONFERENCE OF THE NEW DYNAMICS OF AGEING RESEARCH PROGRAMME**

By invitation only - contact

*marg.walker@shef.ac.uk* for an invitation.

*Venue:* Queen Elizabeth II Conference Centre, London

*Location :* London, England, Director - New Dynamics of Ageing Research Programme

*Details :* Alan Walker

1 November 2006

## **Mental Health Today London**

Mental Health Today London is the leading, established annual event for the mental health community. Comprising a full and comprehensive seminar programme and a large exhibition, Mental Health Today London will provide a valuable opportunity for mental health professionals, service users and those interested in joining the profession to come together to debate the big issues, share best practice and network.

*Organised by:* Pavilion

*Venue:* Business Design Centre

*Location :* London, England

*Details :* Customer Service Team, Freepost

RLUZ-ATEU-RYUZ, Pavilion, Richmond House, Richmond Road, Brighton, BN2 3RL

*Tel :* 0870 890 1080, *Fax :* 0870 890 1081

6-7 November 2006

## **Sharing Success : National Home Safety Congress 2006**

*Organised by:* Royal Society for the Prevention of Accidents (RoSPA)

*Venue:* Majestic Hotel

*Location :* Harrogate, England

*Details :* Events Administration, RoSPA, Edgbaston Park, 353 Bristol Road, Birmingham, B5 7ST

*Tel :* +44 (0)121 248 2000 / 0870 777 2120, *Fax :* +44 (0)121 248 2001

1-2 November 2006

## **NCA Annual Conference & Exhibition : Keeping the spotlight on care**

Keynote speaker: Ivan Lewis MP, Minister for Social Care.

*Speakers:* Sir Derek Wanless; Rodney Brooke CBE; Andrew Lansley MP; Professor Ian Philp; Paul Snell.

*Organised by:* National Care Association

*Venue:* Britannia International Hotel, London Docklands

*Location :* London, England

7-9 November 2006

## **The National Telecare Conference**

*Organised by:* Telecare Services Association

*Venue:* The Holland House Hotel

*Location :* Cardiff

*Details :* 10 Railway Street, Chatham, Kent, ME4 4JL

*Tel :* +44 (0)1634 846209, *Fax :* +44 (0)1634 818746

7-9 November 2006

### **UK Dementia Congress**

Expert speakers; debate and discussion; in-depth workshops; networking opportunities.

*Organised by:* Dementia Care

*Venue:* Bournemouth International Centre

*Location :* Bournemouth, England

*Details :* Hawker Conferences, Hawker

Publications, 2nd Floor, Culvert House, Culvert Road, London, SW11 5DH

*Tel :* +44 (0)20 7720 2108, *Fax :* +44 (0)20 7493 3023

8 November 2006

### **Elderly Care 2006**

*Speakers:* Chair: Prof. John Young (honorary Consultant Geriatrician at Bradford Hospitals Teaching Trust and Professor of Elderly Care at Leeds University).

*Organised by:* Goodwin Jewell Events Ltd

*Venue:* Manchester Town Hall

*Location :* Manchester, England

*Details :* North Mersey Business Park, Woodward Road, Knowsley Industrial Park, Liverpool, L32 7UY

*Tel :* +44 (0)151 546 6990, *Fax :* +44 (0)151 546 2427

9 November 2006

### **Still Working? The Labour Market and Older People**

Afternoon conference @ £85 plus VAT.

Conference will end with keynote speaker: David Willets MP, Shadow Secretary of State for Education and Skills.

*Speakers:* Prof. Stephen McNair (CROW Director); Sam Mercer (EFA Director); Mark Keese (Team Leader of the Older Workers Review at OECD).

*Organised by:* Institute of Employment Studies - IES

*Venue:* The Brewery, Chiswell Street

*Location :* London, England

*Details :* Sue Kent, Mantell Building, University of Sussex, Brighton, BN1 9RF

*Tel :* +44 (0)1273 873690

9 November 2006

### **The 2006 Annual Homecare Conference**

Keynote presentation: Ivan Lewis MP, Parliamentary Under Secretary of State for Care Services

*Speakers:* Chair: Lucianne Sawyer, President, UKHCA

*Organised by:* Laing & Buisson

*Venue:* Radisson SAS Portman Hotel

*Location :* London, England

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

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

14 November 2006

### **NPC Health Conference : The Future of the NHS**

The event is aimed at both health professionals and pensioners with an active interest in the NHS, and particularly those involved with PCTs or Patient Forums.

*Organised by:* National Pensioners Convention (NPC)

*Venue:* Indian YMCA, Fitzroy Square

*Location :* London, England, National Officer

*Details :* Neil Duncan-Jordan, 19-23 Ironmonger Row, London, EC1V 3QN

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

15 November 2006

### **New Opportunities for Community Hospitals**

*Speakers:* Chair: Dr Richard Taylor MP.

*Organised by:* Laing & Buisson

*Venue:* central London

*Location :* London, England

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

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

15 November 2006

### **The challenge of homecare worker recruitment and retention**

*Organised by:* UKHCA

*Location :* Croydon, England

*Details :* Jane Taylor-Medhurst, UKHCA Ltd, 42b Banstead Road, Carshalton Beeches, Surrey, SM5 3NW

*Tel :* +44 (0)20 8288 1551, *Fax :* +44 (0)20 8288 1550

16 November 2006

### **Cutting Corners or Cutting Costs? Assessing the value of early intervention in older people's services**

Keynote speech: The future of early intervention services for older people: Ivan Lewis MP, Parliamentary Under Secretary of State, Dept of Health.

*Speakers:* Chair: Stephen Burke (Chief Executive,

Counsel and Care).

*Organised by:* Counsel and Care supported by Housing21

*Venue:* Barbican Centre

*Location :* London, England, Westminster Advisers Ltd

*Details :* Marijana Sevic, 48 Westminster Palace Gardens, 1-7 Artillery Row, London, SW1P 1RR  
*Tel :* +44 (0)20 7227 1643, *Fax :* +44 (0)20 7222 9501, A major priority for ministers in the Department of Health and the new Department for Communities and Local Government is to encourage social services, housing departments and the NHS to develop more early intervention services. The rationale is to enhance older people's quality of life and save on future costs of care. This Counsel and Care conference seeks to provide a forum for delegates to debate the future of early intervention services and to learn from best practice. Keynote speech: Ivan Lewis MP, Parliamentary Under Secretary of State, Department of Health, "The future of early intervention services for older people". , <http://www.counselandcare.org.uk>

16 November 2006

#### **Delirium: from Science to Services**

The conference programme is designed to provide a comprehensive overview of current thinking about delirium, including basic science, treatment, prevention and service models that can improve delirium management.

*Organised by:* Leeds Mental Health Teaching NHS Trust

*Venue:* Hilton Leeds City, Leeds

*Location :* Leeds, England

*Details :* Customer Support Officer, The Andrew Sims Centre, The Mount, 44 Hyde Terrace, Leeds, LS2 9LN

*Tel :* +44 (0)113 305 5638, *Fax :* +44 (0)113 305 5632

16 November 2006

#### **"Pulling Together" Developing Information and Advice for Older People**

*Organised by:* Scottish Helpline for Older People, c/o Age Concern Scotland

*Venue:* Glasgow Royal Concert Hall, Sauchiehall Street

*Location :* Glasgow, England

*Details :* Vanessa Spalding, SHOP Conference, Causeway House, 160 Causewayside, Edinburgh, EH9 1PR

*Tel :* 0845 833 9307

17 november 2006

#### **Linking London : LVSC AGM and Conference**

LVSC AGM with workshops on topics: Sharing knowledge and good practice; Learning from success. Guest speaker: Chris Pond, Chair of Capacitybuilders.

*Organised by:* London Voluntary Service Council (LVSC)

*Venue:* London Voluntary Service Council

*Location :* London, England

*Details :* Susan, LVSC, 356 Holloway Road, London, N7 6PA

*Tel :* +44 (0)20 7700 8105, *Fax :* +44 (0)20 7700 8108

18 October 2006 [6-8.00pm]

#### **Perspectives on Death and Dying in the UK and Japan**

Free seminar (please reserve your place in advance).

*Speakers:* Contributors: Dr Glennys Howarth, Dr Hikaru Suzuki, Deborah Annetts.

*Organised by:* The Daiwa Anglo-Japanese Foundation; The Japan Society

*Venue:* Daiwa Foundation Japan House

*Location :* London, England

*Details :* Chris Massey, Information Officer, Daiwa Foundation Japan House, 13-14 Cornwall Terrace, London, NW1 4QP

*Tel :* +44 (0)20 7486 4348, *Fax :* +44 (0)20 7486 2914

22 November 2006

#### **Gala Opera Night to Benefit Vulnerable Older People**

Counsel and Care is delighted to announce that it will hold a Gala Opera Night on November 22nd, with a performance of English National Opera's new look Gondoliers. The evening will be a wonderful opportunity to see one of only six performances this year, and to enjoy a champagne reception in the glamorous Sky Bar. Tickets are £160 each and are available by telephoning Lesley Sinclair at Counsel and Care on 020 7241 8528.

*Organised by:* Counsel and Care

*Venue:* London

*Location :* London

*Details :* Lesley Sinclair, Counsel & Care, Twyman House, 16 Bonny Street, London, NW1 9PG

*Tel :* +44 (0)20 7241 8528, All proceeds will go directly to Counsel and Care and will be spent on helping vulnerable older people.

22 November 2006

### **Learning Disability Today London**

Learning Disability Today is the leading, established annual event for the learning disability community. Comprising a full and comprehensive seminar programme and a large exhibition, Learning Disability Today London will provide a valuable opportunity for learning disability professionals, service users and their carers and those interested in joining the profession to come together to debate the big issues, share best practice and network.

*Organised by:* Pavilion

*Venue:* Business Design Centre

*Location :* London, England

*Details :* Customer Service Team, Freepost RLUZ-ATEU-RYUZ, Pavilion, Richmond House, Richmond Road, Brighton, BN2 3RL

*Tel :* 0870 890 1080, *Fax :* 0870 890 1081

23 November 2006

### **NHS Continuing Care Responsibilities**

A one day course with Trainer: Jean Gould.

*Organised by:* Carers UK Training

*Venue:* London

*Location :* Central London, England

*Details :* Carers UK Training Unit, Ruth Pitter House, Carers UK, 20-25 Glasshouse Yard, London , EC1A 4JT

*Tel :* +44 (0)20 7566 7632, *Fax :* +44 (0)20 7490 8824

23 November 2006

### **Your Care, Your Record : Care Record Development Board 2006 Conference**

See the technology of the National Programme for IT in the NHS in action.

*Organised by:* NHS Care Record Development Board (CRDB)

*Location :* Islington, London, England

27 November 2006 2-4 pm

### **Chinese Oral History Project Launch**

Supported by the Heritage Lottery Fund, the Project started a year ago and has proven to be an innovative way to collect the oral histories of the older Chinese generations in an attempt to bridge the gap between the young and old. The launch will include guest speakers from an oral history professional, interviewees and volunteers accompanied with live performance and display of the documentary, booklet and interactive CDROM. *Organised by:* Chinese Mental Health Association

(CMHA)

*Venue:* Asia House, New Cavendish Street

*Location :* London, England

*Details :* Oral History Project, CMHA, 2/F Zenith House, 155 Curtain Road, London , EC2A 3QY

*Tel :* 020 7613 1008

28 November 2006

### **Mental Capacity Act : delivery and dilemmas**

Another venue and date for this conference is 11 January 2007 in the Park Crescent Conference Centre, London.

*Organised by:* National Council for Palliative Care

*Venue:* @Bristol

*Location :* Bristol, England

*Details :* Education & Training dept, Help the Hospices, 34-44 Britannia Street, London, WC1X 9JG

*Tel :* +44 (0)20 7520 2911, *Fax :* +44 (0)20 7278 1021

28 November 2006

### **Preventing Malnutrition in the Community : What Works?**

Malnutrition is a particular problem in ageing populations: metabolic and physiological changes associated with the ageing process render older people particularly susceptible to mineral and nutrient deficiencies. Malnutrition is not only a problem on its own: it compromises the health outcomes of individuals, may delay the speed of recovery and increase mortality. The impact on population health is significant, as is the burden to individuals and their carers, not to mention the economic impact on the health care system.

*Organised by:* Royal Institute of Public Health in collaboration with European Nutrition for Health Alliance and ILC UK

*Venue:* RIPH Portland Place

*Location :* London, England

*Details :* Jennifer Tatman, 28 Portland Place, London, W1B 1DE

*Tel :* +44 (0)20 7291 8353, Yet awareness of this issue is low - not only amongst the general public, but within the medical and nursing professions and amongst health care managers, health insurers, patients, policymakers and politicians. , It is against this background that a group of stakeholders from across the health arena have formed the European Nutrition for Health Alliance in a united effort to raise awareness of the importance and the urgency of the issue of malnutrition and to build an agenda for action at the European level. , <http://www.european-nutrition.org>

28 November 2006

**PSI 75th Anniversary Conference : How Will We Cope? The challenges to governance from rapid social, economic and environmental change**

*Organised by:* PSI - Policy Studies Institute

*Venue:* Tate Britain

*Location :* London, England, Administrator

*Details :* Tim Edwards, PSI, 50 Hanson Street, London, W1W 6UP

*Tel :* +44 (0)20 7911 7521

28 November 2006

**The Mental Capacity Act : What it means for your day to day practice**

The aim of this event is to equip delegates with an understanding both of the contents of the Act and its implications for practice. Chaired by Dr David Newby from the Trust.

*Organised by:* Leeds Mental Health Teaching NHS Trust

*Venue:* Hilton Leeds City, Leeds

*Location :* Leeds, England

*Details :* Customer Support Officer, The Andrew Sims Centre, The Mount, 44 Hyde Terrace, Leeds, LS2 9LN

*Tel :* +44 (0)113 305 5638, *Fax :* +44 (0)113 305 5632

30 November 2006

**Ethical and Legal Issues in the Care of Older People**

The care of older people presents an ever increasing range of ethical and legal issues for health professionals and policy makers, not to mention older people themselves and their carers, ranging from who should have access to treatment to how and when people should be allowed to die. There is growing concern over perceived discrimination against older people in health care and the quality of care that is provided. Older people and their carers and advocates face a confusing regulatory landscape and barriers to accessing justice. This landmark conference brings together some of the leading experts in older people's healthcare and the medico-legal world, and is a must for anyone with an interest in the care of older people; older people's rights; and ethical and medicolegal issues concerning the care of older people.

*Speakers:* Keynote speaker: Gordon Lishman CBE, Director General, Age Concern England.

*Organised by:* Action against Medical Accidents (AvMA)

*Venue:* Woburn House, Tavistock Square

*Location :* London, England

*Details :* AvMA, 19 Little Mill,, Barlestone,,

Warwickshire,, CV13 0HW

*Tel :* 0845 303 3334, *Fax :* 0845 303 3335, The organiser, Action against Medical Accidents (AvMA) is a registered charity promoting patient safety and justice. Any surplus revenue from this event will be ploughed into AvMA's charitable work.

30 November 2006

**Protecting Adults from Abuse - everyone's business**

Keynote address: David Behan, Director General for Social Care, Department of Health

*Speakers:* Chair: Mark Ivory (Acting Editor, Community Care)

*Organised by:* Gatehouse; Community Care Conferences

*Venue:* Central London

*Location :* London, England

*Details :* Halsbury House, 35 Chancery Lane, London, WC2A 1EL

*Tel :* +44 (0)20 7347 3575, *Fax :* +44 (0)20 7347 3578

2 December 2006

**Oral History on Television**

This seminar and workshop is followed by an evening reception to celebrate the life and achievements of Stephen Peet (1920-2005).

*Organised by:* Oral History Society in conjunction with The British Library Sound Archive

*Venue:* British Library Conference Centre

*Location :* London, England

*Details :* Belinda Waterman, Oral History on Television Seminar, Department of History, University of Essex, Colchester, CO4 3SQ

6 December 2006

**Great Expectations : Delivering services within our means**

Practitioner conference : practical strategies for provision of services to carers.

*Speakers:* Bill Kilgallon (SCIE); Imedla Redmond (Carers UK); Paul Martin (Chief Inspector of Social Services, NI).

*Organised by:* Carers UK Training

*Venue:* Royal College of Nursing

*Location :* central London, England

*Details :* Carers UK Training Unit, Carers UK, 20-25 Glasshouse Yard, London , EC1A 4JT

*Tel :* +44 (0)20 7566 7632, *Fax :* +44 (0)20 7490 8824

6-7 December 2006

**NICE 2006 : Tackling health priorities**

*Organised by:* National Institute for Health and Clinical Excellence - NICE

*Venue:* ICC, Birmingham

*Location :* Birmingham , England

*Details :* Health Links, Windsor House , 11 High Street, Kings Heath, Birmingham, B14 7BB

*Fax :* 0121 248 3390

16 January 2007

**2007 Telecare and Assistive Technology Conference**

Keynote presentation: Ivan Lewis MP, Parliamentary Under Secretary of State for Care Services.

*Speakers:* Chair: David Hinchliffe, past chairman of the House of Commons Select Committee on Health.

*Organised by:* Laing & Buisson

*Venue:* central London

*Location :* London, England

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

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

**Adult Learners' Week 2007 Awards**

The closing date for nominations for these awards is noon Friday 19 January 2007. You can nominate online or order a paper form by telephone or email.

*Organised by:* NIACE

*Location :* London, England

*Details :* Andrew Smart, Campaigns Officer, Campaigns and Promotions NIACE, Renaissance House, 20 Princess Road West, Leicester, LE1 6TP

*Tel :* +44 (0)116 204 4200, *Fax :* +44 (0)116 223 0050

23-24 January 2007

**Health and Care Europe**

*Speakers:* Chair: Tom Sackville (Chief Executive, International Federation of Health).

*Organised by:* Laing & Buisson

*Venue:* London Marriott Hotel

*Location :* London, England

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

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

24 January 2007

**Remedying the wrongs : challenging health and social care decisions**

A one day course with Trainer: Jean Gould.

*Organised by:* Carers UK Training

*Venue:* London

*Location :* Central London, England

*Details :* Carers UK Training Unit, Ruth Pitter House, Carers UK, 20-25 Glasshouse Yard, London , EC1A 4JT

*Tel :* +44 (0)20 7566 7632, *Fax :* +44 (0)20 7490 8824

26 January 2007

**Seizing the Day Conference 2007**

An international multi-professional conference on day care provision for older people with mental health problems.

*Organised by:* Leeds Mental Health Teaching NHS Trust

*Venue:* the Midland Hotel, Manchester

*Location :* Leeds, England

*Details :* Customer Support Officer, The Andrew Sims Centre, The Mount, 44 Hyde Terrace, Leeds, LS2 9LN

*Tel :* +44 (0)113 305 5638, *Fax :* +44 (0)113 305 5632

30 January 2007

**Direct Payments**

A one day course which is also available on 3 July 2007. Trainer: Luke Clements.

*Organised by:* Carers UK Training

*Venue:* London

*Location :* Central London, England

*Details :* Carers UK Training Unit, Ruth Pitter House, Carers UK, 20-25 Glasshouse Yard, London , EC1A 4JT

*Tel :* +44 (0)20 7566 7632, *Fax :* +44 (0)20 7490 8824

1 February 2007

**Dementia : Raising the Standard of Care**

*Organised by:* Leeds Mental Health Teaching NHS Trust

*Venue:* Hilton Leeds City, Leeds

*Location :* Leeds, England

*Details :* Customer Support Officer, The Andrew Sims Centre, The Mount, 44 Hyde Terrace, Leeds, LS2 9LN

*Tel :* +44 (0)113 305 5638, *Fax :* +44 (0)113 305 5632

5 - 7 March 2007

**5th International Research Conference on Social Security : Social security and the labour market: A mismatch?**

*Organised by:* International Social Security Association - ISSA

*Venue:* Warsaw

*Location :* Warsaw, Poland

*Details :* ISSA, International Social Security Association, International Research Conference on Social Security, 4 route des Morillons, Case postale 1, CH-1211

*Tel :* Geneva 22, Switzerland, *Fax :* (+41-22) 799 85 09

19 March - 1 April 2007

**Authority, Role and Organisation**

*Organised by:* Tavistock Institute

*Venue:* Sundridge Park Conference Centre

*Location :* Bromley, Kent, England

*Details :* Rachel Kelly, 30 Tabernacle Street, London, EC2A 4UE

*Tel :* +44 (0)20 7417 0407, *Fax :* +44 (0)20 7417 0566

18-20 June 2007

**IAHSA 7th International Conference : The Global Ageing Network, Leading Change - Sharing Innovation - Enhancing Life**

*Organised by:* International Association of Homes and Services for the Ageing (IAHSA)

*Venue:* St Julian's, Malta

*Location :* St Julians, Malta

*Details :* IAHSA, 2519 Connecticut Avenue, NW, Washington, DC 20008 , USA

*Tel :* +1-519-661-1603, *Fax :* +1-519-661-1612

6-8 September 2007

**BSG Conference 2007 : Realities of Ageing : Research into Action**

*Speakers:* Prof. Germaine Greer; Prof. John McKnight (Northwestern University, Illinois); Prof. Kevin Morgan (Loughborough Univ.); Prof. Neil Small (Bradford Univ.)

*Organised by:* British Society of Gerontology - BSG

*Venue:* Sheffield Hallam University

*Location :* Sheffield, England

*Details :* Conference Secretariat

*Tel :* +44 (0)114 225 5338/5319/5342

