New Literature on Old Age

EDITOR
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ABUSE

(See 209/1)

AGE DISCRIMINATION

209/1   Is ageism in university students associated with elder abuse?; by Yongjie Yon, Larry Anderson, Jocelyn Lymburner ... (et al).
Journal of Intergenerational Relationships, vol 8, no 4, 2010, pp 386-402.
Research indicates that in comparison to middle aged adults, young adults exhibit higher levels of ageist attitudes toward older persons and that elder abuse is increasing. This study examines proclivity of elder abuse by young adults enrolled in a postsecondary institution. A total of 206 university students completed questionnaires on attitudes toward older persons and their proclivity to elder abuse. Results indicate that student attitudes are correlated with elder abuse. In addition, proclivity to psychological abuse is found to be significantly higher than physical abuse. (JL)
ISSN: 15350770
From : http://www.tandf.co.uk/journals/WJIR/

ALCOHOL AND DRUG MISUSE

209/2   Alcohol, ageing and dementia: a Scottish perspective; by Louise F McCabe.
Dementia: the international journal of social research and practice, vol 10, no 2, May 2011, pp 149-163.
There are complex relationships between alcohol misuse, ageing and cognitive impairment. This article uses Scotland as a case study to examine these relationships and their implications for people who drink as they age. The links between alcohol use and dementia are discussed, focusing on biological and social implications for individuals as they age. Current responses in Scotland to these different issues are examined from individual, cultural and policy perspectives. Concludes that the needs of older individuals who experience alcohol-related morbidity are not adequately addressed in Scotland. (JL)
ISSN: 14713012   From : http://dem.sagepub.com/

ASSISTIVE TECHNOLOGY

209/3   A stakeholder-centred exploration of the current barriers to the uptake of home care technology in the UK; by Julia S Clark, Marilyn R McGee-Lennon.
Journal of Assistive Technologies, 5, 1, March 2011, pp 12-25.
Reports on a study exploring issues surrounding the uptake of assisted living technology (ALT) in Scotland. The study used scenario-based focus groups with a wide variety of stakeholders in home care to identify barriers to the successful uptake of ALT. Six focus group sessions were conducted with individual stakeholder groups (social care workers, policy makers, telecare installation technicians, older users, and informal carers) and five with mixed stakeholder groups. The focus groups used the same home care scenario to identify and categorise perceptions, attitudes and expectations of stakeholders, and the emerging themes were analysed. The themes were: acceptance issues; ethical, legal and privacy issues; availability of resources; personalisation and evolution of provision; and awareness, education, and training. Study findings revealed that there is a clear demand for awareness raising and knowledge building on the range, scope and capabilities of current assistive and home care technologies. (JL)
ISSN: 17549450   From : http://www.pierprofessional.com/jatflyer/

209/4   Use of gesture recognition to control household devices for older people; by Caroline Langensiepen, Ahmad Lofti, Scott Higgins.
Journal of Assistive Technologies, vol 4, no 4, December 2010, pp 4-10.
Whilst assistive technology has the potential to help older people to remain independent in their own homes, a possible barrier is that this population may be less dexterous and computer literate

compared with their younger counterparts. The aim of this study was to explore the use of hand gestures to control home automation, hoping to provide a more natural and intuitive interface to help bridge the gap between technology and older users. A prototype was created and trialled with a small panel of older users. Using the Nintendo Wii Remote (Wiimote) technology, gestures performed in the air were captured using an infrared camera. Computational intelligence techniques were then used to recognise and learn the gestures. This resulted in sending the command to standard home automation X10 units to control a number of attached electrical devices. It was found that although older people could readily use gestures to control devices, configuration of a home system is likely to remain a task for carers or technicians. (JL)
ISSN: 17549450
<u>From</u> : http://www.pierprofessional.com/jatflyer/index.html

BLACK AND MINORITY ETHNIC GROUPS

209/5   Theorising about ageing, family and immigration; by Lynn McDonald.
Ageing and Society, vol <u>31</u>, part 7, October 2011, pp 1180-1201.
This paper explores the ways in which social gerontological theories have explained the effect of ethnicity and immigration on older people. It explores how these theories can be used for further theory advancement without modifications to existing theories. The paper suggests that current theories do not have the capacity to capture the effects of immigration at the structural level and its link to the social, psychological and family levels, let alone ageing. The overriding complexity of ageing and immigration requires a long-term view and an integrating framework with multiple levels that can accommodate a variety of theoretical interests. The conclusions are that a life-course perspective can be used in different ways to further this theoretical agenda. These approaches allow everyone with the possibility for interdisciplinary theory building to advance the understanding of the lives of immigrant families. (JL)
ISSN: 0144686X
<u>From</u> : http://www.journals.cambridge.org/aso

CARE MANAGEMENT

209/6   Changes over time: the motivations of independent-sector care-home managers and owners in England between 1994 and 2003; by Tihana Matosevic, Martin Knapp, Julian Le Grand, Jose-Luis Fernandez.
Ageing and Society, vol <u>31</u>, part 8, November 2011, pp 1389-1405.
The paper looked at private and voluntary sector care home managers' motivations for providing services for older people, and whether those motivations changed between 1994 and 2003. There were a number of significant policy changes over that time, including an increased `marketisation' of the sector, coupled with an increase in regulation. Critics of these changes argued that they could adversely affect the motivational structure of the principal provider agents. Previously altruistic or public-service motivations might turn into more self-interested concerns: `knights' might become `knaves'. To test this proposition, data were collected across eight English local authorities using face-to-face interviews and postal questionnaires. Results indicated that, although local care-home markets underwent some major changes, individuals' motivational profiles remained relatively stable. Further analysis of the relationship between motivations and the social care market environment suggests that, while voluntary sector providers are primarily driven by caring motivations and less concerned with income maximising and professional development, private sector home managers and owners seemed to be more focused on the financial aspects of providing care services, professional motivations, and on their independence in running a care home. The policy implications of these findings are discussed. (JL)
ISSN: 0144686X
<u>From</u> : http://www.journals.cambridge.org/aso

DEMENTIA

(See Also 209/2, 209/33, 209/48, 209/53)

209/7   'That's me, the Goother': evaluation of a program for individuals with early-onset dementia; by Jennifer M Kinney, Cary S Kart, Luann Reddecliff.
Dementia: the international journal of social research and practice, vol 10, no 3, August 2011, pp 361-377.
The authors conducted face-to-face interviews with six white men aged under 65 with early-onset dementia (EOD). These interviews were supplemented by a series of focus group meetings with the men's wives in order to document perceptions of a weekly, supervised volunteer programme for their husbands at a local zoo. The programme, `Get Out of the House' (or GOOTH) was designed to provide individuals with EOD a weekly opportunity to participate in meaningful, supervised volunteer work in the community. Interviews with the participants (referred to as `Goothers') revealed that they strongly identified with the programme and were eager to share their experiences, about which they showed some depth of insight. The focus group revealed that the programme represented a break in the day-to-day routine for spouses and families as well as participants, and had benefits that extended beyond the programme time itself. Challenges with the development and implementation of such programmes and implications for research and practice are discussed. (JL)
ISSN: 14713012   From : http://dem.sagepub.com/

209/8   An autoethnography on shifting relationships between a daughter, her mother and Alzheimer's dementia (in any order); by Marina Malthouse.
Dementia: the international journal of social research and practice, vol 10, no 2, May 2011, pp 249-256.
This article is an autoethnography written by a daughter whose mother developed Alzheimer's disease. In the writing, a shifting nature of relationships is described between the daughter, her mother and the dementia. As a form of self-narrative where the author is placed within a social context, the writing follows Ellis's descriptions of autoethnography (1999) which suggest seeing through a wide-angled lens. This lens has been focused outwards and inwards with the aim of creating an evocative text about shifting relationships and dementia. In its construction, meaning has been extracted from these experiences that help the author to stay aware of these relationships that can shift even further as her mother's dementia moves on in time. (JL)
ISSN: 14713012   From : http://dem.sagepub.com/

209/9   Existential loss as a determinant to well-being in the dementia caregiving dyad: a conceptual model; by Rich Piiparinen, Carol J Whitlatch.
Dementia: the international journal of social research and practice, vol 10, no 2, May 2011, pp 185-201.
When a loved one is diagnosed with dementia existing issues can surface. These relate not only to the progressive loss of a person but to a carer's own sense of security. This article describes a conceptual model for dementia caring. It describes how existing threats can affect a carer's appraisal of the care situation and therefore how a carer copes. Suggests that carer coping, as manifested through avoidance or acceptance of loss, will influence behavioural interaction within the caregiving dyad, where communication and decision making between caregiver and the person with dementia is predominantly inequitable or equitable. In terms of intervention particular emphasis is put on both individual and social factors that negatively influence a carer's ability to integrate the emotional costs related to dementia and its care. (JL)
ISSN: 14713012   From : http://dem.sagepub.com/

209/10   I'm still the same person: the impact of early-stage dementia on identity; by Lisa S Caddell, Linda Clare.
Dementia: the international journal of social research and practice, vol 10, no 3, August 2011, pp 379-398.
Research suggests that the onset and progression of dementia may pose a threat to a person's

sense of identity. This qualitative study used Interpretative Phenomenological Analysis to explore participants' perceptions of the impact of dementia on their identity. Participants were ten people with dementia. The four themes emerging from the data represented participants' views on aspects of their current identities, whether they believed that dementia would alter their identities in the future, perceptions of how dementia had affected their lifestyle, and relationships with friends and family. The analysis suggested that for the most part, participants felt that little had changed with respect to their identities as a whole, but most identified features of themselves that were different than they had been prior to the onset of dementia. Thus it appeared that participants were in a state of flux, experiencing both continuity and change in their sense of identity simultaneously. (JL)

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

209/11   Living through end-stage dementia: the experiences and expressed needs of family carers; by Chris Shanley, Cherry Russell, Heather Middleton, Virginia Simpson-Young.
Dementia: the international journal of social research and practice, vol 10, no 3, August 2011, pp 325-340.
The study focused on the experiences and needs of family carers of people with end-stage dementia. The project involved in-depth, qualitative interviews with 15 carers. The major themes emerging from the accounts of participants' experiences were: getting support; having to trust others with care; managing the loneliness of being a carer; witnessing a loved one fade away; anticipating and experiencing death; and re-establishing life after the funeral. Carers expressed a range of instrumental and psychosocial needs. The study provided a more personal account of the caring experience than much of the related literature. It emphasised the need of carers for genuine understanding and connection - from family and friends as well as healthcare staff. The study highlights the amount of support carers can provide to each other through support groups and associated friendships, and stresses the importance of healthcare staff acknowledging and respecting this capacity of carers. (JL)
ISSN: 14713012
From : http://dem.sagepub.com/

209/12   Managing dementia agitation in residential aged care; by John W Bidewell, Esther Chang.
Dementia: the international journal of social research and practice, vol 10, no 3, August 2011, pp 299-315.
Agitation is a widespread and challenging problem among aged care residents with dementia. This study drew on empirical and theoretical literature to propose a model for preventing and treating agitation non-pharmacologically. A literature review found an agreed, coherent definition and measurement of agitation to be absent despite numerous agitation remedies having been suggested. However sufficient material was found to support evidence-based care planning. Agitation is revealed as resulting from a resident's interactions with the environment or their internal state, giving rise to unmet needs that attentive care can treat. A review of agitation treatments found no single effective remedy and a lack of quality evaluation. A higher-order, problem-solving approach is proposed. The described system consists of sequential diagnosis, decision making and treatment options, starting with individualised and institutional preventative measures removing environmental triggers, followed by individual remediation, with residents' unmet needs receiving priority consistent with patient-centred care. (JL)
ISSN: 14713012
From : http://dem.sagepub.com/

209/13   The needs of people with learning disabilities who develop dementia: a literature review; by Penny Llewellyn.
Dementia: the international journal of social research and practice, vol 10, no 2, May 2011, pp 235-247.
People with learning disabilities are living longer and are increasingly developing age related conditions including dementia, thus posing many challenges for services. A literature review was undertaken of articles published between 1996 and 2006 relating to the needs of people with

learning disabilities and dementia, their carers and their peers. Results of the search showed that the primary medical need is for timely and accurate diagnosis. There is a multitude of diagnostic tools and advice is available as to which are most suitable for different client groups. The needs of carers are intertwined with those of people with learning disabilities and dementia and meeting their needs for education, training and increased staff numbers, has proved beneficial. Although multiple services will be responsible for the needs of this client group, there is a consensus that learning disability services should be at the heart of service provision. (JL)

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

209/14   The organisation of dementia care by families in Malta: the experiences of family caregivers; by Anthea Innes, Stephen Abela, Charles Scerri.

This paper discusses the experiences of dementia family caregivers in Malta. The study design was essentially exploratory as it was the first funded social research project on dementia on the island. Semi-structured interviews were conducted in 2008 with 17 caregivers sourced from an outpatient memory clinic. A thematic analysis was guided by the questions: What are the experiences of family caregiving in Malta? And what impact does caregiving have for individual/family life? Three key findings are discussed, namely: the organisation of family care in Malta; the use of formal services; and the dislocation of dementia caregiving experiences from wider community life. The paper raises questions about support mechanisms currently available in Malta while presenting cross-national learning opportunities to apply established knowledge to the Maltese context. (JL)

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

209/15   Preserving the 'us identity' through marriage commitment while living with early-stage dementia; by Judie C Davies.

Recognising the impact of marriage commitment on living with early-stage dementia has important implications for developing proactive care for individuals with dementia and their families. This mixed method study of six couples experiencing early-stage Alzheimer's dementia explored how married couples experienced the meaning of commitment through memory loss represented by the transitional process of pre-diagnosis, diagnosis, and post-diagnosis. Narrative analysis was used to identify shared themes from couples' accounts through semi-structured interviews and supported by questionnaires related to commitment and marriage satisfaction. Couples' commitment was expressed by four major themes: `partnership for life', `reciprocity', `resilience', and `forgiveness'. The couples experienced an undisturbed, enduring commitment to their relationship in spite of the diagnosis of dementia. The `us identity' of the couples remained intact. They considered the challenge of dementia to be a collaborative venture - a journey into the unknown. (JL)

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

209/16   A psycho-educational intervention focused on communication for caregivers of a family member in the early stage of Alzheimer's disease: results of an experimental study; by Krystyna Klodnicka Kouri, Francine C Ducharme, Francine Giroux.

A psycho-educational intervention focused on communication was conceived for caregivers of family members in the early stage of Alzheimer's disease and tested on five outcome variables: caregiver knowledge, perceptions of communication difficulties and degree of perceived disturbance related to these difficulties, self-efficacy and skills. Guided by a theoretical framework that encompassed geragogy, the McGill model of nursing and self-efficacy theory,

the intervention was evaluated via an experimental design with pre-post tests. 50 family caregivers were randomly assigned to an experimental group (intervention programme), or to a control group (information flier on communication and memory). Statistically significant effects were found on four dependent variables: caregiver knowledge, degree of disturbance related to communication difficulties, self-efficacy and skills. No significant effects were observed in regard to the perceived presence of communication difficulties. This communication programme serves as a useful tool to prepare caregivers for their new role. (JL)
ISSN: 14713012
From : http://dem.sagepub.com/

209/17   Psychological trauma and fear for personal safety as a result of behaviours that challenge in dementia: the experiences of healthcare workers; by Ann Scott, Assumpta Ryan, Ian A James, Elizabeth Mitchell.
Dementia: the international journal of social research and practice, vol 10, no 2, May 2011, pp 257-269.
The study aimed to document the experiences of healthcare workers of exposure to violence by service users with dementia. An exploratory study invited 96 nurses and 228 care assistants from nine care homes to complete a questionnaire. Among those who replied 68 respondents said they had been involved in an incident where they feared for their personal safety and 71.4% witnessed an incident where they feared for the safety of a colleague. Over the previous year 34% felt `very unsafe' and almost 18% felt `terrified'. Overall the study found that violent episodes against care home staff are not isolated incidents and dementia care staff lack the skills to cope with such aggression. Their reluctance to engage with aggressive residents compromises care. An increasing ageing population combined with prevalence rates for dementia will place greater demands on care homes. The authors argue that nationally agreed accredited qualifications for care assistants based on knowledge, skills and attitudes specific to dementia may raise the standard of care. Infrastructures to support assaulted staff may reduce feelings of isolation, assist with recruitment and retention problems and provide social support. (JL)
ISSN: 14713012
From : http://dem.sagepub.com/

209/18   Using Photovoice with people with early-stage Alzheimer's disease: a discussion of methodology; by Elaine C Wiersma.
Dementia: the international journal of social research and practice, vol 10, no 2, May 2011, pp 203-216.
Photovoice is a qualitative methodology that involves giving cameras to participants to record and document their experiences in ways that can create change. In this study the Photovoice method was used with a group of participants with early stages of Alzheimer's disease. The paper discusses some of the practical challenges arising out of using this methodology with people with early stage Alzheimer's disease as well as some of the issues surrounding research ethics, consent and capacity. (JL)
ISSN: 14713012
From : http://dem.sagepub.com/

DIET AND NUTRITION

209/19   Dignity and nutrition inspection programme: national overview; by Jo Williams (Chair), Care Quality Commission - CQC.: Care Quality Commission - CQC, October 2011, 30 pp.
The Care Quality Commission (CQC) carried out unannounced visits to 100 acute NHS hospitals in England between March and June 2011, looking at standards of dignity and nutrition on wards caring for older people. Of the 100 hospitals inspected, 45 were found to be fully compliant with dignity and nutrition standards, 35 met both the official standards on dignity and nutrition although there was room for improvement and 20 were failing on one or both. Among the non-compliant hospitals, common areas of concern included a lack of support for those who needed help eating, poor hygiene, patients' privacy not being respected (eg. curtains not being closed properly) and patients being spoken to in a condescending or dismissive way. The second

half of the report summarises the results of a short survey in which the hospitals gave their feedback on the CQC's inspection methods and joint working. Most of the hospital trusts who responded acknowledged that the inspection process was fair and clearly explained. Three quarters of trusts said that they had made changes to the way they approach dignity and respect as a result of the inspection programme. (JL)

From: http://www.cqc.org.uk/_db/_documents/20111007_Dignity_and_nutrition_inspection _report _FINAL.pdf

DIGNITY

EMPLOYMENT

209/20   Extending working lives?: employability, work ability and better quality working lives; by Tony Maltby.
Social Policy & Society, vol 10. Pt 3, July 2011, pp 299-308.
Faced with a changing economic and demographic outlook, this article focuses upon UK practice and presents an approach that has been used across continental Europe for many years. The central argument is that improving the quality of life of older adults is not simply and only about a better `work-life balance' but the adoption of a holistic approach to worker well-being and health, broadly defined at the level of the enterprise. The article provides a short review of existing policy and gives a distinction between employability and Work Ability. It then suggests that the Work Ability approach used for over 30 years in Finland be trialled in the UK and that the Government provide fiscal incentives for UK enterprises to adopt and implement such preventative approaches within a broader age management structure. Argues that Europeans are likely to work to a more advanced age in future than in the immediate past. It is time to focus upon the positive contributions that older people can and do make to society. (JL)
ISSN: 14747464
From : http://journals.cambridge.org/action/displayJournal?jid=SPS

EXERCISE

209/21   Exercise in later life: the older adults' perspective about resistance training; by Tim Henwood, Anthony Tuckett, Offer Edelstein, Helen Bartlett.
Ageing and Society, vol 31, part 8, November 2011, pp 1330-1349.
The paper investigated the benefits older individuals attribute to physical exercise that challenges the muscular system (known as resistance training) and the motivational tactics that they employ to undertake it. Data were drawn from three focus groups where participants aged 65 or above were encouraged to openly discuss resistance training, physical activity and exercise. Findings revealed that participants were aware of the benefits of training on general and functional health, and that these benefits were employed in the motivation to train. In addition, presently or previously trained individuals stressed the importance of environment and programme structure as a training motivator. The benefits to mental and social health, effect on ageing and body image were also raised. However, participants discussed these in a broad context. While it could be said that public knowledge reflects current evidence, it is also clear that individuals are still unaware of a number of specific benefits. (JL)
ISSN: 0144686X
From : http://www.journals.cambridge.org/aso

EXTRA-CARE HOUSING

FALLS

Ethical issues in the use of fall detectors; by Michelle Ganyo, Michael Dunn, Tony Hope.
Ageing and Society, vol 31, part 8, November 2011, pp 1350-1367.
Fall detectors are a form of remote monitoring assistive technology that have the potential to reduce older adults' risks of falling. In this paper the ethical issues raised by the use of fall detectors are examined. The fall detection devices currently available are outlined, and a summary of how these devices require social care services or family carers to respond in particular ways is provided. The ethical issues associated with the use of fall detectors are classified under four headings: autonomy, privacy, benefit, and the use of resources. These issues arise out of the nature of the technology itself, and the way that this technology is integrated into the day-to-day support package of the person for whom it is provided. It is argued that manufacturers have a duty to provide information about the `ethical side-effects' associated with the use of a particular device, and that the process of making a decision to provide a person with a fall detector should include a checklist of questions that is designed to enable decision makers to work through the ethical issues raised. (JL)
ISSN: 0144686X
From : http://www.journals.cambridge.org/aso

FAMILY AND INFORMAL CARE

(See Also 209/8, 209/37)

209/23   Baby-boomers and the 'denaturalisation' of care-giving in Quebec; by Nancy Guberman, Jean-Pierre Lavoie, Ignace Olazabal.
Ageing and Society, vol 31, part 7, October 2011, pp 1141-1158.
This study aimed to understand how modern post-war families interact with old, ill, or disabled family members. Participants included 40 baby-boomer female carers from Montreal, Canada, who were interviewed to discuss their identification with their social generation, their relationship to care-giving, their values regarding care-giving, and the reality of the care-giving they offer. Findings revealed that women no longer identified themselves mainly in terms of family. For most, care-giving was not their only dominant identity - they actively tried to maintain multiple identities, such as worker, wife, mother, friend and social activist, as well as carer. They were also participating in the process of individualisation, leading to the `denaturalisation' of caring. Also, the women called themselves `care-givers' and not simply wives, daughters or mothers, denoting that the work of care-giving no longer falls within the realm of `normal' family responsibilities. The authors concluded that these carers had set limits to their caring commitments, while still adhering to norms of family responsibility for care-giving. (JL)
ISSN: 0144686X
From : http://www.journals.cambridge.org/aso

GRANDPARENTS

(See Also 209/28)

209/24   Grandparenting in the 21st century: issues of diversity in grandparent-grandchild relationships; by Charlie Stelle, Christine A Fruhauf, Nancy Orel, Laura Landry-Meyer.
Journal of Gerontological Social Work, vol 53, issue 8, 2010, pp 682-701.
Previous research has demonstrated the importance of age, ethnicity, and socioeconomic status in understanding grandparent-grandchild relationships. However the value of these relationships may depend on a multiplicity of other factors. This article first presents an overview of the grandparent-grandchild relationship, focusing on factors that influence the connection. The authors then look at diversity among grandparents, with particular emphasis on gender, sexual orientation, and physical and/or cognitive limitations. They consider strength-based and empowerment strategies and their implications for practice, polices and future research. The

article concludes that the diversity and context in which the relationship is embedded, and lifelong patterns of family experiences, exchange and attachment, must be considered in order to understand it. Although this review focused on three subgroups of grandparents, it is suggested that other subgroups, such as those with mental illness, incarcerated grandparents and those in long term care also warrant study. (JL)

ISSN: 01634372   From : http://www.tandf.co.uk/journals/WGER

HEALTH CARE

(See 209/27)

HEALTH EXPECTANCY

209/25   The impact of socio-contextual, physical and lifestyle variables on measures of physical and psychological wellbeing among Maori and non-Maori: the New Zealand Health, Work and Retirement Study; by Patrick L Dulin, Christine Stephens, Fiona Alpass ... (et al).
Ageing and Society, vol 31, part 8, November 2011, pp 1406-1424.
This article provides an overview of the New Zealand Health, Work and Retirement Study (HWR), the focus of which is on determinants of cultural-contextual factors on physical and mental health among 6,662 New Zealand citizens, a nationally representative sample of adults between 55 and 70 years of age. The HWR was initiated in 2006 with two-year re-assessment intervals. The health and wellbeing of older Maori was a study priority as previous research has shown large health disparities between Maori and non-Maori in New Zealand. First-wave results indicated that socioeconomic status, social support and retirement status were associated with optimal ageing among older adults in New Zealand. Maori scored lower on markers of physical and mental health, which was partially explained by restrictive factors including reduced economic living standards and a propensity towards less physical activity. After controlling for multiple socio-contextual and biological variables, ethnicity continued to predict health, suggesting that there are other markers of health and wellbeing in ageing among Maori. Structural variables which restrict access to health care and predispose Maori to engage in maladaptive lifestyle behaviours combined with the distal effects of colonisation may contribute to the health disparities found between Maori and the majority population in New Zealand. (JL)
ISSN: 0144686X   From : http://www.journals.cambridge.org/aso

209/26   Independent and combined association of physical activity and cardiac disease on mortality risk in the very old; by Marja Aijo, Terttu Parkatti.
Journal of Aging and Health, vol 23, no 1, February 2011, pp 70-85.
This study investigated physical activity as a predictor of all-cause mortality among 75- and 80-year-old people with and without chronic cardiac disease over a 10-year follow-up period. Four study groups were formed according to the respondent's self-reported level of physical activity as well as chronic cardiac diseases: active without cardiac disease (ANCD - control group), active with cardiac disease (ACD), sedentary without cardiac disease (SNCD), and sedentary with cardiac disease (SCD). In the analyses, the ACD and the SNCD groups had a 50% greater risk of dying compared with the control group, while the SCD group had an almost threefold risk of dying compared with the control group. The authors conclude that for older people with cardiac disease, a physically active lifestyle is associated with lower mortality. (JL)
ISSN: 08982643   From : http://jah.sagepub.com/

HEALTH SERVICES

209/27   The state of health care and adult social care in England: an overview of key themes in care in 2010/11; presented to Parliament pursuant to section 83 (4) (a) of part 1 of the Health and Social Care Act 2008; by Care Quality Commission - CQC. London: TSO, 15 September 2011, 66 pp (HC 2010/11 1487).
This third annual report on the state of health and adult social care in England covers the period April 2010 to March 2011 and is based on CQC's responsibilities under the Health and Social

Care Act 2008, the first year that the Commission is reporting on the state of care under the new Act. Main topics covered in the report are: the changing shape of adult health and social care provision; access to NHS and social care; choice and control in NHS and adult social care including equality and human rights; and patient quality and safety. (JL)
Price: £15.50
From : TSO, PO Box 29, Norwich NR3 1GN. website: www.tsoshop.co.uk
Care Quality Commission website: www.cqc.org.uk

HIV AND AIDS

209/28   'I am living a peaceful life with my grandchildren. Nothing else': stories of adversity and 'resilience' of older women caring for children in the context of HIV/AIDS and other stressors; by Marisa Casale.
Ageing and Society, vol 31, part 8, November 2011, pp 1265-1288.
The study aimed to explore the effects of HIV and AIDS on female care-givers from a resilience and strengths perspective. By discussing findings of qualitative research conducted with nine female carers of children in South Africa's Kwazulu-Natal province, one of the world's most HIV-affected regions, the paper examined two themes, focusing mainly on older (grandmother) carers: (1) their strength and resourcefulness in responding to adversity to ensure their families' survival and (2) their leadership role in affronting HIV and related stigma within their own families. The aim of the research was both to add to experiential data on the much-debated notion of `resilience' and further challenge the stereotype of older carers or `rural African grandmothers' as passive victims of a changing world, rather than key agents of change. While terms such as `coping strategies' and `resilience' should be used cautiously, it is important to consider carers' short-term responses to the many challenges faced, with a view to informing interventions. (JL)
ISSN: 0144686X
From : http://www.journals.cambridge.org/aso

209/29   Psychosocial predictors of self-esteem in a multiethnic sample of women over 50 at risk for HIV; by Robin J Jacobs, Michael N Kane.
Journal of Women & Aging, vol 23, no 1, 2011, pp 23-39.
This U.S. study explored the link between self-esteem and risky sexual behaviour (including AIDS/HIV risk) in women aged over 50. A multi-ethnic community-based sample of 572 women from this age group completed an anonymous questionnaire on sexual behaviours, sociodemographic characteristics and psychosocial measures relevant to midlife and older women. Regression analysis showed that sensation-seeking, HIV stigma, sexual assertiveness and self-silencing predicted self-esteem in women over 50. Factors such as relational context, interpersonal power and silencing can affect self-esteem and may be contributing to HIV risk in this group. (JL)
ISSN: 08952841
From : http://www.tandf.co.uk/journals/titles/08952841.asp

HOME CARE

(See 209/3, 209/38)

HOMELESSNESS

209/30   Interagency working to support the health of people who are homeless; by Louise Joly, Claire Goodman, Katherine Froggatt, Vari Drennan.
Social Policy & Society, vol 10, Pt 4, October 2011, pp 523-536.
Interagency working is a recurrent theme in homelessness policy literature, but is ill defined and rarely addressed in UK homelessness research. This article draws on findings from a study on how the health needs of homeless people were being addressed by multiple providers in one UK inner city area. The authors argue that a focus on the health needs and behaviours perceived as

being a risk to the general population (eg tuberculosis, begging, sex work, drug use) directly influences interagency working and how professional networks organise themselves. The findings are discussed with reference to the impact of social policy on the health of people who are homeless. (JL)

ISSN: 14747464

209/31   Multiple exclusion homelessness in the UK: key patterns and intersections; by Suzanne Fitzpatrick, Sarah Johnsen, Michael White.
Social Policy & Society, vol 10, Pt 4, October 2011, pp 501-512.
This article presents preliminary results from a multi-stage quantitative study of `multiple exclusion homelessness' (MEH) in seven urban locations across the UK. It demonstrates a very high degree of overlap between a range of experiences associated with `deep social exclusion' - namely, homelessness, substance misuse, institutional care and `street culture' activities (such as begging and street drinking). It also provides evidence to support the contention that homelessness is a particularly prevalent form of exclusion, with its experience reported as widespread by those accessing low threshold support services targeted at other dimensions of deep exclusion, such as drug misuse. Further, the analysis presented indicates that the nature of MEH varies geographically, with the profile of the population affected looking quite different in Westminster (London) compared with urban locations. The main explanation for this appears to be the exceptionally high proportion of migrants in the MEH population in Westminster, who tend to report lower overall levels of personal trauma and vulnerability than the indigenous MEH population. (JL)
ISSN: 14747464

209/32   Working together to address multiple exclusion homelessness; by Michelle Cornes, Louise Joly, Jill Manthorpe ... (et al).
Social Policy & Society, vol 10, Pt 4, October 2011, pp 513-522.
This article draws on preliminary findings from a two-year exploratory study to describe how different agencies and professionals work together to identify and manage the intersections between homelessness and other facets of deep social exclusion. The authors assess the extent to which current practice is informed by policy frameworks for `personalised and integrated care planning' focusing in particular on the `coordinating' and `sign-posting' role of the housing support worker. The study concludes with some initial thoughts as to how policy and practice might be strengthened in this area to ensure more `joined-up' and continuous support for people with experience of multiple exclusion homelessness. (JL)
ISSN: 14747464

HOSPITAL DISCHARGE

209/33   How family carers view hospital discharge planning for the older person with a dementia; by Michael Bauer, Les Fitzgerald, Susan Koch, Susan King.
Dementia: the international journal of social research and practice, vol 10, no 3, August 2011, pp 317-323.
This study reports on the experiences of 25 family carers of the hospital discharge planning process for their family member with dementia. Analysis of the data indicates that the needs of family carers were not always addressed in the hospital discharge process and that discharge planning and execution is in need of improvement. (JL)
ISSN: 14713012

HOUSING WITH CARE

209/34   Boundaries of roles and responsibilities in housing with care schemes; by Jenny Pannell, Imogen Blood. York: Joseph Rowntree Foundation - JRF, October 2011, 20 pp.

In this report the authors show how there is no single model of housing with care (HWC). Schemes vary enormously in size and scale, location, services and cost. They are run by private companies and not-for-profit housing associations and charities. Also there are significant variations in provision and policy context across the UK. Since residents' quality of life can be affected by the way in which these organisations work together, clarity over boundaries, roles and responsibilities is crucial. Among the main research questions the authors address are: what are the boundaries/fault lines of roles and responsibilities in HWC? What are the impacts on quality of life for older residents with or without high support needs? Can a right-based approach to services empower residents? How is quality of life affected by different expectations between residents, family, staff, providers, commissioners and other stakeholders?
From : http://www.jrf.org.uk/sites/files/jrf/housing-care-responsibilities-summary.pdf

INCOME AND PERSONAL FINANCE

(See 209/46)

INTERGENERATIONAL ISSUES

(See Also 209/54)

209/35   Balancing generations: on the strength and character of family norms in the West and East of Europe; by Svein Olav Daatland, Katharina Herlofson, Ivar A Lima.
Ageing and Society, vol 31, part 7, October 2011, pp 1159-1179.
The study examined the strength and character of responsibility norms between older parents and adult children. Quantitative data from the `Generations and Gender Survey' were investigated to compare seven countries from Europe, namely Norway, Germany, France, Romania, Bulgaria, Russia and Georgia. Norm strength was measured as the level of support for family and parental responsibility. Character differences were indicated by how conditional the norms were, and how they were balanced between generations. Findings revealed that family norms were stronger in Eastern and Southern Europe, with Norway and Georgia as the extreme cases. National differences were considerable for familial norms, but moderate for parental norms. Parental responsibility was relatively stronger in the North West of Europe, while filial responsibility was stronger in the South East. Women were less supportive of family obligations than men. The authors conclude that where the welfare state is more developed, it has moderated the demanding character of family obligations and led to a more independent relationship between generations. (JL)
ISSN: 0144686X
From : http://www.journals.cambridge.org/aso

209/36   Exploring generational intelligence as a model for examining the process of intergenerational relationships; by Simon Biggs, Irja Haapala, Ariela Lowenstein.
Ageing and Society, vol 31, part 7, October 2011, pp 1107-1124.
This article discusses an emerging model of intergenerational relationships that places oneself in the position of a person of a different age. It examines an experiential approach that draws on sociological thinking on generational consciousness and on the relationships between conflict, solidarity and ambivalence. The main emphasis is on the processes of generational experience, and a distinction is made between the informational knowledge that is available to social actors and the degree to which it is possible to act intelligently. The latter highlights the steps that would need to be taken to become critically aware of age as a factor in social relations, including the relative ability to recognise one's personal generational distinctiveness, acquiring understanding of the relationship between generations, critical awareness of the value stance being taken toward generational positions, and finally, acting in a manner that is generationally

aware. The article concludes with a discussion of how generational relations can be encouraged. Implications for future research into intergenerational relationships are presented. (JL)
ISSN: 0144686X
From : http://www.journals.cambridge.org/aso

209/37   Stability and change in the intergenerational family: a convoy approach; by Toni C Antonucci, Kira S Birditt, Carey W Sherman, Sarah Trinh.
Ageing and Society, vol 31, part 7, October 2011, pp 1084 -1106.
This paper describes the factors that influence supportive relations within intergenerational families, beginning with a description of the changing structure of the intergenerational family. It shows how personal characteristics, especially gender, race, age and socio-economic status, and situational characteristics, in particular family structure and intergenerational context, influence support exchanges. These exchanges are described with special attention to the unique circumstances of care-giving in intergenerational families, while also exploring the differences in the quality of intergenerational relations. Positive and negative support exchanges and their influence on wellbeing are discussed. The paper considers the implications of change and stability in intergenerational relationships, and makes recommendations about how best to plan future intergenerational family support. The authors conclude that societies and families with fewer resources must be innovative in meeting the needs of older people as well as those of all family members. (JL)
ISSN: 0144686X
From : http://www.journals.cambridge.org/aso

INTERNATIONAL AND COMPARATIVE

(See Also 209/14, 209/23, 209/25, 209/35)

209/38   Exploring the impact of the Japanese Long-Term Care Insurance Act on the gendered stratification of the care labour market through an analysis of the domiciliary care provided by welfare non-profit organisations; by Junko Yamashita.
Social Policy & Society, vol 10, Pt 4, October 2011, pp 433-443.
Japan's implementation of the Long Term Care Insurance (LTCI) Act in 2000 provides a good example with which to examine the restructuring process of care services for older people, as these have come to be commodified by the welfare state. By focusing on the provision of care by Welfare Non-Profit Organisations (WNPSs), this article explores the significance of gender in the restructuring process. It reveals that care services are stratified with institutional care placed at the top of hierarchy of care services costs, and domestic task services at the bottom. There is an unequal distribution of gender and organisational type for each type of care work. (JL)
ISSN: 14747464
From : http://journals.cambridge.org/action/displayJournal?jid=SPS

LEARNING DIFFICULTIES

(See 209/13)

LONELINESS

209/39   Age and loneliness in 25 different nations; by Keming Yang, Christina Victor.
Ageing and Society, vol 31, part 8, November 2011, pp 1368-1388.
Although loneliness has been widely perceived as a problem of old age, there is evidence suggesting that adolescence is the peak age for experiencing loneliness and there are demonstrable variations between nations in reported rates of loneliness. However, comparative data for examining both the prevalence of loneliness across age groups and across nations are sparse. As the first phase of a larger project, this paper explored the prevalence of loneliness across different age groups in 25 European nations, with a focus on people of an advanced age. Results suggested that the prevalence of loneliness does increase with age for the combined

sample. However, the nation in which one lives shows a greater impact than age on reported levels of loneliness, with Russia and Eastern European nations having the highest proportions of lonely people (about 10-34% for different age groups) and Northern European nations the lowest (mostly below 6%). Possible explanatory factors are identified and discussed. (JL)
ISSN: 0144686X
From : http://www.journals.cambridge.org/aso

209/40   Factors associated with loneliness of noninstitutionalized and institutionalized older adults; by Maria-Eugenia Prieto-Flores, Maria Joao Forjaz, Gloria Fernandez-Mayoralas ... (et al).
Journal of Aging and Health, vol 23, no 1, February 2011, pp 177-194.
The study aimed to seek whether sociodemographic and health factors contribute differentially to the explanation of loneliness in institutionalised and non-institutionalised older adults. A secondary aim was to analyse the influence of institutionalisation on older people's loneliness. The work was based on two surveys of older adults aged 60 years or more in Spain, in which a group of 234 community-dwelling people and 234 nursing homes residents participated. Study results showed that depression was associated with loneliness in both populations. Sex and marital status contributed to explain loneliness among those living at home, whereas gathering with family, friends, and neighbours showed a significant effect in the institutionalised group. Institutionalisation per se showed a strong effect on loneliness. (JL)
ISSN: 08982643
From : http://jah.sagepub.com/

209/41   Preventing loneliness and social isolation: interventions and outcomes; by Karen Windle, Jennifer Francis, Caroline Coomber, Social Care Institute for Excellence - SCIE.: Social Care Institute for Excellence, October 2011, 15 pp (Research briefing, 39).
Older people are particularly vulnerable to social isolation or loneliness owing to loss of friends and family, mobility or income. This briefing provides a summary of the research knowledge into the effectiveness and cost-effectiveness of services to prevent social isolation and loneliness. The briefing lists key interventions in three groups: one to one interventions, group services, and wider community engagement. It then discusses the outcomes of interventions in the following areas: social isolation, reducing loneliness, health and wellbeing, health service use, people's views on the interventions, organisational implications, implementing effective interventions, and cost-effective interventions. Existing gaps in the research evidence are also highlighted. (JL)
From :http://www.scie.org.uk/publications/briefings/briefing39/index.asp?dm_i=4O5,KIDG,3XH4RV,1NZNX,1

LONG TERM CARE

209/42   Measuring the quality of long-tem care.
Eurohealth, vol 16, no 2, 2010, pp 1-24.
Special focus section featuring an editorial followed by seven articles looking at ways of measuring the quality of long-term care of older people across different European countries. The papers, which cover both residential care and care in the community, follow on from an expert meeting on `Measuring the Quality of Long Term Care' held at the London School of Economics and Political Science on 21 May 2010. Topics include: long term home and hospice care in Hungary; improving the quality of long term care in Germany; institutional care in Finland; quality of care assurance in the Netherlands; the United States experience of care quality; safeguarding quality of care in Austria; and measuring the quality of long term care in England. (JL)
ISSN: 13561030
From : http://www2.lse.ac.uk/LSEHealthAndSocialCare/publications/eurohealth/eurohealth.aspx

MENTAL CAPACITY

209/43   'Early days': knowledge and use of the Mental Capacity Act 2005 by care home managers and staff; by Jill Manthorpe, Kritika Samsi, Hazel Heath, Nigel Charles.
Dementia: the international journal of social research and practice, vol 10, no 3, August 2011, pp 283-298.
The Mental Capacity Act (MCA), implemented in England and Wales in 2007, has relevance for the care home sector through its focus on decision-specific assessments of capacity. This study focused on evidence-based interventions in dementia, drawing on research designed to identify issues relating to implementation of the Act. Specific research questions for the study pertained to staff abilities to incorporate a new legal framework addressing mental capacity into care of people with dementia. Qualitative interviews with 32 staff in one group of care homes in Southern England demonstrated that, regardless of knowledge of MCA, the daily working ethos of staff appeared to be within the remit of Act. Training could therefore continue to build on these principles. However considerable variation in understanding of terms and principles of the MCA was found. Few participants were aware of specific legislative points and offered `common sense' explanations for their actions and decision-making. This level of knowledge may not meet regulators' requirements or the needs of residents. (JL)
ISSN: 14713012
From : http://dem.sagepub.com/

209/44   Early implementation of the Mental Capacity Act 2005 in health and social care; by Geraldine Boyle.
Critical Social Policy, vol 31, no 3, issue 108, August 2011, pp 365-387.
This paper discusses the early implementation of the Mental Capacity Act 2005 in health and social care in England. The author examines the research evidence to date, particularly monitoring data from the Department of Health, in order to review the progress made in implementation. The extent to which the Act is achieving its overall aim of facilitating decision-making by people lacking capacity is discussed, focusing on people with dementia. The author concludes that the initial implementation of the Act (and the related Deprivation of Liberty Safeguards) has had only limited effectiveness in facilitating decision-making by people lacking capacity, promoting their best interests and protecting their liberty. Future implementation needs to ensure that the rights of people lacking capacity, particularly people with dementia, are taken more seriously in health and social care and are better protected. (JL)
ISSN: 02610183
From : http://csp.sagepub.com

MENTAL HEALTH

209/45   'Oh he was forgettable': construction of self identity through use of communicative coping behaviors in the discourse of persons with cognitive impairment; by Pamela A Saunders, Kate de Medeiros, Ashley Bartell.
Dementia: the international journal of social research and practice, vol 10, no 3, August 2011, pp 341-359.
Communication involving persons with cognitive impairment (CI) associated memory issues requires particular attention in the clinical setting due to the sensitive and often difficult institutional work that must take place between the patient and his or her physician. An individual with CI is often tested for memory issues during the office visit, generating a potentially face-threatening situation. The patient may attempt to preserve positive identity or `save face' by using communicative coping behaviors (CCBs). This study characterizes the use of CCBs (e.g., accounts and humour) by persons with CI in clinical interviews and provides important insight on how to improve doctor-patient communication involving people with CI. In order to describe and compare CCBs used by persons with cognitive impairment, and those used by cognitively normal individuals, verbatim, in-office transcripts from both groups were analysed. Results showed that participants with CI used more memory accounts than cognitively normal individuals and similar amounts of humour in order to save face and construct a normal

identity. These data may help to inform doctors and caregivers regarding the ways in which persons with CI construct and preserve a positive sense of self-identity through communication. (JL)

209/46   Money and happiness: does age make a difference?; by Chang-Ming Hsieh.
Ageing and Society, vol 31, part 8, November 2011, pp 1289-1306.
This study examined the relationship between money and happiness across different age groups in the United States. Even after controlling for major socio-demographic variables, income was found to have a significant positive association with happiness for young and middle-age adults but not for older adults. Also the effect of household income on happiness was significantly smaller for older adults than for young or middle-age adults. The relationship between household income and happiness no longer differed significantly across age groups after social comparison variables were included. The relationship between income and happiness did not vary significantly by age group after controlling for major socio-demographic variables. (JL)

209/47   Older adults' concerns about cognitive health: commonalities and differences among six United States ethnic groups; by James N Laditka, Sarah B Laditka, Rui Liu ... (et al).
Ageing and Society, vol 31, part 7, October 2011, pp 1202-1228.
The study explored different concerns about cognitive health among ethnically diverse groups of older adults. The research was grounded in theories of health behaviour and the representation of health and illness. Focus groups discussions were conducted with older adults aged over 50 in four languages. Participants were African Americans, American Indians, Chinese Americans, Latinos, white people and Vietnamese Americans, in nine United States locations. Participants discussed concerns about keeping their memory or ability to think as they age. In findings, all ethnic groups expressed concern and fear about memory loss, losing independence, and becoming a `burden'. Knowing someone with Alzheimer's disease increased concern. American Indians, Chinese Americans, Latinos and Vietnamese Americans expected memory loss. American Indians, Chinese Americans and Vietnamese Americans were concerned about stigma associated with Alzheimer's disease. Only African Americans, Chinese and whites expressed concern about genetic risks. Only African Americans and whites expressed concern about behaviour changes. When asked for their thoughts about their ability to think as they age, participants focused almost exclusively on memory. This suggests that health education promoting cognitive health should focus on memory. However it should also educate the public about the importance of maintaining all aspects of cognitive health. (JL)

209/48   StoryCorps' Memory Loss Initiative: enhancing personhood for storytellers with memory loss; by Marie Y Savundranayagam, Lorna J Dilley, Anne Basting.
Dementia: the international journal of social research and practice, vol 10, no 3, August 2011, pp 415-433.
The StoryCorps Memory Loss Initiative was designed to gather oral histories of people with memory loss. This study investigated the StoryCorps interview experience for storytellers who self identified with early stage memory loss and the persons who interviewed them. Interviews took place in Milwaukee, Chicago, and New York. Follow-up interviews were conducted with 42 persons with memory loss, along with 27 family members who participated in the interviews. Results revealed that the StoryCorps experience was a meaningful activity that allowed participants to acknowledge the beauty of the present moment, to reflect and engage in meaningful conversations, to re-affirm both the selfhood of individuals with memory loss and their relationships with family members. The participants also had an opportunity to be a part of national history while leaving a legacy for future generations within families. The findings are discussed within the context of personhood enhancing strategies for persons with memory loss. (JL)

MIGRATION

(See 209/5)

NEIGHBOURHOODS AND COMMUNITIES

209/49   Rhetoric to action: a study of stakeholder perceptions of aging well in two local communities; by Jo-Anne Everingham, Chi-Wai Lui, Helen Bartlett ... (et al).
Journal of Gerontological Social Work, vol 53, issue 8, 2010, pp 760-775.
This qualitative study of local perceptions of policy goals and action in relation to ageing reports 31 stakeholder interviews within two Australian communities exploring (a) the meaning of ageing well; and (b) preferred policy actions to achieve positive ageing outcomes. Findings suggest that community perceptions of ageing well are broadly consistent with the goals of national and international policy frameworks in focusing on three dimensions - health, social engagement and security. Furthermore participants believe that achievement of positive ageing outcomes requires a mix of self-help, community action and government intervention - particularly government support and encouragement for ageing well initiatives. (JL)
ISSN: 01634372
From : http://www.tandf.co.uk/journals/WGER

209/50   Social justice, social policy, and the environment.
Critical Social Policy, vol 31, no 2, issue 107, May 2011, pp 171-324 (whole issue).
The seven articles in this special themed issue seek to connect environmental justice to social justice, including the critical interrogation of ways in which `the environment' may be used to impose regressive social policies. Topics covered include green politics and the global North-South divide; radical climate movements in the UK; flood risk and environmental justice; environmental justice in Cuba; environmental inequalities in rural England; climate change mitigation policies; food initiatives and sustainable community development. (JL)
ISSN: 02610183
From : http://csp.sagepub.com

PARTICIPATION

209/51   Productivity in old age; by Rocio Fernandez-Ballesteros, Maria Dolores Zamarron, Juan Diez-Nicolas ... (et al).
Research on Aging, vol 33, no 2, March 2011, pp 205-226.
This article looks at the findings of a longitudinal study from Spain which explored the extent to which older adults (aged 55 to 75) report being involved in productive activities. The data are examined firstly by age, gender, and working status; and secondly, under moderate-cost assumptions. The unpaid contribution to society of older people is then calculated in terms of euros. The results are discussed in the context of other general studies about unpaid productive activities in old age. It is concluded that the sample is characterised by a focus on productive activity related to care for other adults and children and their estimated contribution in unpaid activities expresses the importance of older persons as social capital. (JL)
ISSN: 01640275
From : http://roa.sagepub.com/

QUALITY OF LIFE

(See 209/46)

RELIGION AND SPIRITUALITY

209/52   Spirituality and aging; by Helen Lavretsky.
Aging Health, vol 6, no 6, December 2010, pp 749-769.
Interest in spirituality and ageing has increased recently, owing to overwhelming evidence of

positive health outcomes linked to spirituality and religious participation. This article reviews literature and research on spirituality, as well as spiritual interventions and their putative neurobiological mechanisms in relation to ageing, mental and physical health. Particular topics explored include spirituality and ageing in modern society; spirituality and successful ageing; spirituality versus religiosity; spirituality and physical and mental health; coping with death and dying; and spiritual care by healthcare providers. The second half of the article looks at spirituality in clinical practice and intervention. (JL)
ISSN: 1745509X
From : http://www.futuremedicine.com/loi/ahe

209/53   What's so big about the 'little things': a phenomenological inquiry into the meaning of spiritual care in dementia; by Tracy J Carr, Sandee Hicks-Moore, Phyllis Montgomery.
Dementia: the international journal of social research and practice, vol 10, no 3, August 2011, pp 399-414.
This study explored the meaning of spiritual care from the perspectives of patients living with moderate to severe dementia, their families and their care providers. Using a hermeneutic phenomenological approach, open-ended interviews were conducted in a dementia care unit with 29 participants, including patients, families, health care workers and hospital chaplains. Interviewees were asked to share their stories and insights about spiritual care in dementia. Using hermeneutic analysis, the central theme of `little things' was identified. Recognition and attendance to `little things' promoted patients' sense of personhood and connectedness to self and others. Barriers to spiritual care in dementia were also identified. These findings inform our understanding about effective relational approaches to spiritual care in dementia. (JL)
ISSN: 14713012
From : http://dem.sagepub.com/

RESEARCH

209/54   Rethinking theoretical and methodological issues in intergenerational family relations research; by Ariela Lowenstein, Ruth Katz, Simon Biggs.
Ageing and Society, vol 31, part 7, October 2011, pp 1077-1083.
Introduction to a special issue of this journal in which the authors outline some key theoretical and methodological developments in the study of intergenerational family relations. The study draws on observations that a number of social issues are emerging that have an intergenerational dimension. There is growing recognition that to study adult ageing one has also to study intergenerational relationships. Furthermore a new architecture for social relations is beginning to take shape in the wake of demographic change. How individuals, families and societies cope with such change provokes the question of how gerontologically-informed research, theorisation and policy will also adapt. Seven positions are summarised which attempt to map out some new conceptual directions for intergenerational research through a critical use of concepts such as transition, generational self-awareness and empathy, metaphors of cultural translation, and the deployment of social and moral capital. The authors then examine changing gender roles, the balance between family and welfare state support frameworks, ethnicity and immigration as important elements of this process. A critical review of approaches to intergenerational relationships hopefully emerges. (JL)
ISSN: 0144686X
From : http://www.journals.cambridge.org/aso

RESIDENTIAL AND NURSING HOME CARE

(See Also 209/6, 209/12, 209/43, 209/59)

209/55   Care & quality of life: themed content.
Aging Health, vol 6, no 6, December 2010, pp 695-769.
This special themed section includes an editorial followed by five articles exploring quality of life issues in residential and nursing home care, with a special emphasis on frailty in older

people. The editorial explores definitions of the term `frailty', arguing that the concept should encompass social network factors that can be used for determining the need of care. Other items in this section include a paper on the appropriateness of daily medication use in patients with advanced dementia; the use of potentially inappropriate medications in the care of frail older people; the Green House model of nursing home care; a medical perspective on elder abuse; and spirituality and ageing. (JL)

ISSN: 1745509X

From : http://www.futuremedicine.com/loi/ahe

209/56   Need support and wellbeing during morning care activities: an observational study on resident-staff interaction in nursing homes; by Annette F J Custers, Yolande Kuin, Marianne Riksen-Walraven, Gerben J Westerhof.
Ageing and Society, vol 31, part 8, November 2011, pp 1425-1442.
Quality of life and wellbeing in nursing homes are becoming more important in research and practice. One of the main influences on residents' wellbeing is the interaction with their professional care-givers. The purpose of this study was to explore to what extent care-givers support the residents' needs of relatedness, autonomy and competence, and how this need support is related to wellbeing. Residents and their professional care-givers of four nursing homes in the Netherlands participated in an observational and questionnaire study. Three video-observations of each resident (with different care-givers) were made during morning care. Additional data were collected by means of questionnaires. The results show that the needs of residents were, on average, moderately fulfilled during care interactions. More need support by care-givers was related to higher resident wellbeing. Care-givers provided more need support to residents with stronger functional impairments. More need support was provided by higher-educated care-givers and care-givers in higher job functions. The results show the importance of need support for situational wellbeing, but the contribution to the general subjective wellbeing of residents remains unclear. Further (longitudinal) research is needed to investigate changes in wellbeing over time. Possible differences between subjective ratings and observations of need support and wellbeing should be taken into account. (JL)

ISSN: 0144686X

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

SEXUALITY

209/57   Expectations of later life support among lesbian and gay Queenslanders; by Mark Hughes.
Australian Journal on Ageing, vol 29, issue 4, December 2010, pp 161-166.
The study, based in Queensland, Australia, aimed to examine lesbian and gay people's expectations of support, socialising and cohabitation in later life. Lesbian and gay people expected to receive support from diverse sources, including same-sex partners, lesbian, gay, bisexual and transgender friends and heterosexual friends. Women were more likely to expect to receive support from others than men, and men were more likely to expect to live alone in later life. Concludes that aged care providers need to be responsive to the different sources of support that may be provided to older lesbian and gay people. Services that are lesbian- and gay-friendly may facilitate service uptake and reduce pressures on lesbian and gay people's informal networks of support. (JL)

From : http://onlinelibrary.wiley.com/journal/10.1111/(ISSN)1741-6612/issues

209/58   Exploring the nature of same-sex relationships; by Jean K Quam, Gary S Whitford, Lake E Dziengel, Kelly Abel Knochel.
Journal of Gerontological Social Work, vol 53, issue 8, 2010, pp 702-722.
The study explored the relationship structure and experiences of 145 gay men and lesbians in the United States aged 50 and above in long term same-sex relationships. A survey assessed relationship satisfaction and roles, caregiving, shared assets, and relationship protection and support. Findings from the ENRICH couples scale revealed high scores in communication, conflict resolution and couple satisfaction. Most participants had taken steps to protect shared assets and assign legal authority to their partners. Participants expressed differing views

regarding marriage. The authors conclude that older same-sex couple relationships have some distinct functional characteristics that need to be considered when providing services to this cohort. (JL)
ISSN: 01634372
From : http://www.tandf.co.uk/journals/WGER

SHELTERED HOUSING

(See 209/34)

SLEEP

209/59   Time spent in bed at night by care-home residents: choice or compromise?; by Rebekah Luff, Theresa Ellmers, Ingrid Eyers ... (et al).
Ageing and Society, vol 31, part 7, October 2011, pp 1229-1250.
This study investigated the amount of time that care home residents spend in bed at night. Data were collected over 14 days from 125 residents in ten care homes in South East England, and focused on how residents' bedtimes and getting-up times were managed. Findings revealed that residents averaged almost 11 hours in bed at night, significantly more time than was spent sleeping. There was greater variance in the amount of time residents who needed assistance spent in bed than there was for independent residents. An examination of six care homes, each with 8pm to 8am night shifts, showed that bedtimes and getting-up times for dependent residents were influenced by the staff's shift patterns. Interviews with 38 residents revealed a lack of resident choice about bedtimes and many compromises by the residents to fit in with the care home shift and staffing patterns. The authors conclude that the current system of 12-hour night shifts, during which staff ratios are lower than in the daytime, results in too much bed rest, particularly for residents who are the least independent. (JL)
ISSN: 0144686X
From : http://www.journals.cambridge.org/aso

SOCIAL CARE

(See 209/27)

SOCIAL EXCLUSION

(See 209/41)

SOCIAL POLICY AND THEORY

(See Also 209/5)

209/60   Gerontological autism: terms of accountability in the cultural study of the category of the Fourth Age; by Haim Hazan.
Ageing and Society, vol 31, part 7, October 2011, pp 1125-1140.
This article aims to pose an intellectual challenge to both students and researchers of old age. It suggests that older people are a testimony to the failure to generate a language by which to comprehend cultural phenomena, which has the effect of nullifying any meaningful discourse between researchers and older subjects. The arguments are based on an analysis of the unique position of the very old as an `unconstructable other', as they appear in the relevant discourse relating to older people. The article suggests that cultural standing of that category is set in a symbolic and existential space that prevents communication with its inhabitants. The social processes that lead to this state of absent translation and a deadlock of interpretation are analysed by using examples a longitudinal study of the very old in Israel. In ending, an alternative way of understanding the ageing population is proposed. (JL)
ISSN: 0144686X   From : http://www.journals.cambridge.org/aso

SOCIAL SERVICES

209/61   Service use barriers differentiating care-givers' service use patterns; by Song-Iee Hong, Leslie Hasche, Mi Jin Lee.
Ageing and Society, vol 31, part 8, November 2011, pp 1307-1329.
This study describes what types of service use barriers older adults' informal care-givers perceive and examines how these barriers differentiate care-giver service use patterns. Analysing the 2004 National Long-Term Care Survey and Informal Care-giver Data Set in the USA, the study reports the prevalence of service barriers for each type of service as well as for overall service use. Service barriers are measured in terms of availability, awareness, affordability, staff quality, privacy violation, complex bureaucracy, language barriers, qualification of each programme and no thought of service. As a main outcome, care-giver service use patterns (light service users, selective in-home users, and multiple service users) are examined in relation to service use barriers when other predisposing, enabling and need variables are controlled. Of the ten service use barriers defined in this study, awareness and no thought of service are the most prevalent barriers. Care-givers reporting service barriers of availability, awareness and affordability are more likely to be light service users compared to multiple service users and selective in-home service users. These findings highlight the significance of enhancing awareness of care-giver supportive services as well as increasing availability and financial support for service use. (JL)
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