

New Literature on Old Age

EDITOR

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ABUSE

- 211/1 Assessment: financial crime against vulnerable adults; by Social Care Institute for Excellence - SCIE; City of London Police; National Fraud Intelligence Bureau.: Social Care Institute for Excellence - SCIE, November 2011, 72 pp (Adults' services SCIE report 49). The purpose of the assessment was to highlight some of the current and potential future threats to vulnerable adults in relation to economic crime. The report covers the wide spectrum of financial abuse against vulnerable adults by family members, care workers and other unscrupulous individuals. The assessment sought to highlight the scale of the problem, to identify gaps in financial safeguarding and to ascertain the work required to improve safeguarding practice. (JL)
From http://www.scie.org.uk/publications/reports/report49.asp?dm_i=4O5,MYUB,3XH4RV,1UX5V,1#
- 211/2 The problem of violence toward the elderly; by Edward V Karyukhin.: International Institute on Ageing (United Nations - Malta). BOLD, vol 21, no 2, February 2011, pp 22-26.
Explores different definitions of violence towards older people in the Russian context, examines the UN's approach to the problem of violence and looks at types of abuse and violence towards older people recorded in the Russian mass media. These include physical violence including murder, financial exploitation, emotional trauma and neglect. The article concludes with some brief extracts from the results of a poll of older Muscovites who were asked what they wanted from social services. Among the problems they faced were poor access to public transport, inadequate protection from criminals and disrespectful attitudes to old age. (JL)
ISSN: 10165177 From : <http://www.inia.org.mt/publications.html>
- 211/3 Safeguarding adults at risk from harm: a legal guide for practitioners; by Michael Mandelstam, Social Care Institute for Excellence - SCIE.: Social Care Institute for Excellence - SCIE, December 2011, 279 pp (Adults' services SCIE report 50).
The guide outlines the legal basis for the safeguarding of vulnerable adults at risk of harm in England. A series of case studies ('A') are included at the beginning of the guide, while the main part of the guide ('B') sets out the legal framework. Part 1 outlines the government's No secrets guidance and three key concepts of protection, justice and empowerment. Part 2 outlines a number of key human rights including the right to life, the right not to be subjected to inhuman or degrading treatment, the right not to be arbitrarily deprived of liberty and the right to respect for private and family life. The section also covers legal issues around information sharing and disclosure, and whistleblowing. Part 3 covers interventions around mental capacity, with particular reference to the Mental Capacity Act 2005, the Mental Health Act 1983 and other legislation. Part 4 explains the roles of key service providers in safeguarding vulnerable adults, including housing providers, the police, Crown Prosecution Service and coroners. Part 5 looks at the regulation of social and health care providers under the Health and Social Care Act 2008. Part 6 covers financial and property abuse including fraud. Part 7 covers an array of other offences including psychological harm, violence against the person and sexual abuse. A concluding section looks at protective orders, injunctions and other interventions, eg. protection from harassment, Non-Molestation Orders, Occupation Orders and Forced Marriage Protection Orders. (JL)
From: http://www.scie.org.uk/publications/reports/report50.asp?dm_i=4O5,MYUB,3XH4RV,1UX5V,1

ANXIETY

- 211/4 The spectrum of worry in the community-dwelling elderly; by Jeannette Golden, Ronan M Conroy, Irene Bruce ... (et al).
Aging & Mental Health, vol 15, no 8, November 2011, pp 985-994.
The study looked at the prevalence and distribution of worry, its content, and its associations with quality of life and depression, based on a community sample of 2,136 people aged between 65 and 96. The GMS-AGECAT structured psychiatric interview was used to rate symptoms which were classified into five levels of severity of worry ranging from simple, non-excessive to generalised anxiety disorder (GAD). In the study, 79% of the participants reported worrying, 37% reported worrying excessively, while 20% reported excessive, uncontrollable worry. Overall, 6.3% met criteria for GAD. Prevalence of all types of worry declined with age and was lower in men. The prevalence of depressed mood was similar in those without worry and those with non-severe worry but rose significantly with each level of severe worry. Major depression was absent in those who did not worry, and had a prevalence of only 0.2% in those with non-severe worry. It had a significantly elevated prevalence at all levels of excessive worry, and a significantly higher prevalence in those with GAD. All levels of excessive worry were associated with reduced quality of life. In conclusion, severe worry is highly prevalent in the elderly. Although most severe worriers do not meet criteria for GAD they do have a reduced quality of life and an increased prevalence of depression. (JL)
ISSN: 13607863 From : <http://www.informaworld.com/CAMH>

ASSISTIVE TECHNOLOGY

(See Also 211/15)

- 211/5 "ENDEA": a case study of multidisciplinary practice in the development of assisted technologies for older adults in Ireland; by Cathy Bailey, Julie Doyle, Susan Squires ... (et al).
Journal of Assistive Technologies, 5, 3, 2011, pp 101-111.
This article discussed the authors' experiences of multidisciplinary practice in relation to developing home-based assisted living technologies. The study drew on almost three years' experience of working with a large ongoing multidisciplinary Irish national research programme - the Technology for Independent Living (TRIL) Centre. This involved teams of clinicians, social scientists, engineers, designers, ethnographers and other professionals working with older adults to design, test and deliver home-based technologies focusing on mitigating falls, keeping socially connected and maintaining or improving cognitive function. The authors' experiences are presented through their retrospective team building model, ENDEA (Engage, Negotiate, Do the work, Evaluate/Assess). The ENDEA model is proposed as a blueprint for successful outcomes, through the management and delivery of multidisciplinary research. (JL)
ISSN: 17549450 From : <http://www.pierprofessional.com/jatflyer/>
- 211/6 The Mainstreaming on Ambient Intelligence project; by Jacqueline Damant, Martin Knapp, Maggie Ellis ... (et al).
Journal of Assistive Technologies, 5, 3, 2011, pp 152-153.
Briefly describes and evaluates the Mainstreaming on Ambient Intelligence (MonAMI) project, a Europe-wide project that set out to demonstrate how accessible, useful

services for older and/or disabled adults living at home could be delivered in mainstream systems and platforms. These platforms included mainstream devices such as broadband internet and third-generation mobile phones. The project was tested and evaluated in close cooperation with older and disabled users in various locations across Europe. It ran for 57 months and came to completion in May 2011. (JL)
ISSN: 17549450 From : <http://www.pierprofessional.com/jatflyer/>

ATTITUDES TO AGEING

- 211/7 Constructing ageing and age identities: a case study of newspaper discourses; by Gerard Fealy, Martin McNamara, Margaret Pearl Treacy, Imogen Lyons.
Ageing and Society, vol 32, part 1, January 2012, pp 85-102.
This study investigated ageing and age identities in newspapers in Ireland. 227 newspaper articles concerned with welfare provision for older people were subjected to discourse analysis. Findings revealed that the use of phrases to name and reference older people positioned them as a distinct demographic group and ageism was discernible in texts that deployed collective names like 'grannies and grandads' and 'little old ladies'. Five distinct identity types were available in the texts, variously constructing older people as victims; frail, infirm and vulnerable; radicalised citizens; deserving old; and undeserving old. The discourses analysed placed older people outside mainstream Irish society. The idea that older people might be healthy, self-reliant and capable of autonomous living was largely absent in the discourses. The authors concluded that newspapers revealed social constructions of ageing and age identity that had consequences for the way that society behaves towards older people. (JL)
ISSN: 0144686X
From : <http://www.journals.cambridge.org/aso>

BLACK AND MINORITY ETHNIC GROUPS

(See 211/8)

CARERS AND CARING

- 211/8 Care concerns for elders in Korean and Korean American communities; by Melen McBride, Gwen Yeo (guest editors).
Clinical Gerontologist, vol 34, no 4, 2011, pp 267-352 (whole issue).
Special issue featuring an editorial followed by five articles. Topics covered include community service use among Korean Americans with dementia; elder abuse and help seeking among Korean Americans; Korean American adult children's views on end of life care; Korean versions of the Lubben Social Network Scale; and the involvement of Korean American family caregivers in dementia research. (JL)
ISSN: 07317115
From : <http://www.tandfonline.com/toc/wcli20/current>
- 211/9 A new model for care and support: sharing lives and taking charge; by Alex Fox.
Working with Older People, vol 15, no 2, 2011, pp 58-63.
This paper aims to look at lesser-known approaches to working with older people which challenge current assumptions about older people and approaches to providing care, suggesting that they lie on a continuum of support services which combine paid

professional care on the one hand, and unpaid informal family care on the other. The paper looks at Shared Lives, ASA Lincolnshire's At Home Day Resource for people with dementia, Homeshare, KeyRing and micro-enterprises. The case study demonstrates how by combining the value of real relationships with more formal support approaches, better outcomes can be achieved at lower costs. With the gap between the capacity of existing services and the needs of an ageing population growing daily, the paper provides additional research and development in this area of work. (JL)

ISSN: 13663666

From : <http://www.pierprofessional.com/wwopflyer/index.html>

DEMENTIA

(See Also 211/40)

211/10

Awareness in Alzheimer's disease and associated dementias: theoretical framework and clinical implications; by Linda Clare, Ivana S Markova, Ilona Roth, Robin G Morris.

Aging & Mental Health, vol 15, no 8, November 2011, pp 936-944.

Awareness can be defined as a reasonable or realistic perception or appraisal of a given aspect of one's situation, functioning or performance, or of the resulting implications, expressed explicitly or implicitly. Disturbances of awareness have significant implications for people with dementia and their caregivers. The construction of awareness has been extensively studied in dementia, but a lack of conceptual and methodological clarity in this area means that few clear findings have emerged. This article presents a framework for conceptualising awareness in people with Alzheimer's disease and associated dementias that can guide research and influence practice. The authors begin by considering the general concept of awareness and the ways in which neurological damage can place constraints on awareness. Within an integrative biopsychosocial model that acknowledges the influence of neurocognitive, psychological, and social variables on awareness, challenges for empirical research on awareness in dementia are addressed, and a 'levels of awareness' framework is presented within which awareness operates at four levels of increasing complexity, providing a means of differentiating among awareness phenomena. Approaches to mapping awareness phenomena are discussed, and directions for future research and clinical practice are outlined. In conclusion, the levels of awareness framework should act as a stimulus to further research, resulting in a more coherent understanding of the nature of awareness deficits, the implications of these for people with dementia and their caregivers, and the possibilities for targeted and effective interventions. (JL)

ISSN: 13607863

From : <http://www.informaworld.com/CAMH>

211/11

Awareness of social and emotional functioning in people with early-stage dementia and implications for carers; by Sharon M Nelis, Linda Clare, Anthony Martyr ... (et al).

Aging & Mental Health, vol 15, no 8, November 2011, pp 961-969.

The study explored the extent to which awareness of social and emotional function is reduced in early-stage dementia and whether this relates to the quality of life of the person with dementia (PwD), the quality of the relationship between the PwD and carer and carer stress. 97 participants with a diagnosis of Alzheimer's, vascular or mixed dementia rated their social functioning using the Socio-Emotional Questionnaire (SEQ). Carers provided parallel ratings, allowing calculation of discrepancy scores used to index awareness. Neuropsychiatric symptoms, PwD quality of life, the perceived quality of the

relationship for both partners and carer stress were also measured. Factor analysis of the SEQ indicated three domains of social functioning: emotional recognition and empathy (ERE), social relationships (SR) and prosocial behaviour (PB). For PwD unawareness was related to cognitive dysfunction and psychiatric disturbance, but not to quality of life or quality of relationship. Lower awareness was associated with greater carer stress and poorer perceived quality of relationship. Lack of awareness of social functioning had important implications for relationship quality and levels of carer stress. (JL)

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From : <http://www.informaworld.com/CAMH>

211/12

The Enriched Opportunities Programme for people with dementia: a cluster-randomised controlled trial in 10 extra care housing schemes; by Dawn J Brooker, Elaine Argyle, Andrew J Scally, David Clancy.

Aging & Mental Health, vol 15, no 8, November 2011, pp 1008-1017.

The Enriched Opportunities Programme (EOP) was a multi-level intervention focusing on improved quality of life for people with dementia. This study compared the experience of people living with dementia and other mental health problems in extra care housing schemes that utilised EOP with schemes that employed an active control intervention. Ten extra care housing schemes were cluster randomised to receive either the EOP intervention or an active control intervention for an 18-month period. Residents with dementia or other significant mental health problems were assessed on a number of outcome measures at baseline, six months, one year and 18 months. The primary outcome measure was quality of life. Self-reported depression was an important secondary outcome. The EOP-participating residents rated their quality of life more positively over time than the active control. There was also a significant group-time interaction for depressive symptoms. The EOP-participating residents reported a reduction of 25% at both six and 12 months and a 37% reduction at 18 months. EOP residents were less likely than residents in the active control sites to move to a care home or be admitted to a hospital inpatient bed. They were more likely to be seen by a range of community health professionals. Overall the EOP had a positive impact on the quality of life of people with dementia in well-staffed extra care housing schemes. (JL)

ISSN: 13607863 From : <http://www.informaworld.com/CAMH>

211/13

Factors influencing quality of life for people with dementia: a qualitative perspective; by Wendy Moyle, Lorraine Venturto, Susan Griffiths ... (et al).

Aging & Mental Health, vol 15, no 8, November 2011, pp 970-977.

An exploration and understanding of quality of life (QOL) can help to enhance understanding and respect for people with dementia and assist in improving care and treatment of this population. This study sought to understand the factors that influence QOL for people living with dementia in long-term care (LTC), including an understanding of how they perceived they were valued. In-depth interviews were conducted with 32 older people with dementia across four large Australian care settings. While these residents were either satisfied or dissatisfied with elements of their life, the factors influencing a positive QOL were related to their relationship with family and other people, and 'things' such as needing some control over their life and, more importantly, needing to contribute to their community. Participants reported feeling of little use and therefore of limited value to society. This study proposes a need to understand how relationships might be maintained and strengthened following a move into LTC and

highlights the importance of control and its influence on feeling valued. (JL)
ISSN: 13607863 From : <http://www.informaworld.com/CAMH>

- 211/14 Goal-setting in cognitive rehabilitation for people with early-stage Alzheimer's Disease; by Linda Clare, Suzannah Evans, Caroline Parkinson ... (et al).
Clinical Gerontologist, vol 34, no 3, 2011, pp 220-236.
This article drew upon findings from a randomised controlled trial of cognitive rehabilitation to consider the extent to which people with early-stage Alzheimer's Disease were able to identify individual rehabilitation goals, and what kinds of goals were important to them. For those assigned to receive cognitive rehabilitation, the authors further examined the nature of the goals selected as the basis for therapy, and analysed within-group results with regard to efficacy. All participants were able to identify goals and to rate their performance and satisfaction with performance. Participants assigned to cognitive rehabilitation worked on selected goals, and clinically significant improvements in performance and satisfaction ratings for these goals were corroborated by therapist ratings and goal attainment indicators. (JL)
ISSN: 07317115 From : <http://www.tandfonline.com/toc/wcli20/current>
- 211/15 How personalised technology can play an important role in supporting people with learning disabilities as they age and face the onset of dementia; by Emma Nichols.
Journal of Assistive Technologies, 5, 3, 2011, pp 158-163.
This study aims to demonstrate how personalised technology can be used to support people with learning disabilities as they age and face the onset of dementia. It describes how the national learning disability charity Hft has been helping such people through its service at Old Quarries, a residential care home based in Gloucestershire. The case studies featured in the article show how individuals have used personalised technology to help them live independently and safely at home. (JL)
ISSN: 17549450 From : <http://www.pierprofessional.com/jatflyer/>
- 211/16 The impact of Cognitive Stimulation Therapy groups on people with dementia: views from participants, their carers and group facilitators; by Aimee Spector, Charlotte Gardner, Martin Orrell.
Aging & Mental Health, vol 15, no 8, November 2011, pp 945-949.
Cognitive Stimulation Therapy (CST) can lead to significant improvements in cognitive function and quality of life for people with dementia. This study sought to investigate whether improvements found in clinical trials were also noted by people with dementia, their carers and group facilitators in everyday life. Qualitative interviews and focus groups were conducted with people attending CST groups, their carers and the group facilitators. Data were recorded and transcribed, before being analysed using Framework Analysis. Two main themes emerged, 'Positive experiences of being in the group' and 'Changes experienced in everyday life', along with seven sub-themes. The overall experience of attending CST was seen as being emotionally positive and most participants reported some cognitive benefits. (JL)
ISSN: 13607863 From : <http://www.informaworld.com/CAMH>
- 211/17 Report of the National Audit of Dementia Care in General Hospitals 2011; by John Young, Chloe Hood, Rosemary Woolley ... (et al); Peter Crome (Chair), Royal College of Psychiatrists, National Audit of Dementia Steering Group.: Royal College of Psychiatrists, 2011, 235 pp.
The purpose of the audit, the first of its kind, was to examine the quality of care

received by people with dementia in general hospitals in England and Wales. Key questions for the audit were: What structures and resources do hospitals have in place to enable them to identify and meet the care needs of people with dementia? What evidence can be assembled to show that people with dementia in the hospital have received an acceptable standard of care? These questions led to the development of a two part audit: a hospital level or 'core' audit, and a ward level 'enhanced' audit. Chapters in the main body of the report present findings by theme as follows: governance, or the setting up and running of hospitals; assessment of the physical and mental health needs of dementia patients; access to specialist mental health services through a liaison team; nutrition for older or vulnerable patients; information sharing and communication with the families of dementia patients; staff training in awareness of dementia; the physical ward environment; discharge planning and procedure; and person-centred care for dementia patients using the Person, Interaction and Environment (PIE) observational tool. Overall the findings of the audit showed that hospitals in England and Wales are falling short in the care given to dementia patients. Many hospitals have poor communication with families and are lacking in personal care for patients. Too little is being done to get patient access to specialist services, or to prepare for their discharge from hospital. Basic help with eating is often inadequate, and many staff feel that they have received insufficient training to deal with dementia patients. (JL)

From : <http://www.rcpsych.ac.uk/quality/quality,accreditationaudit/nationalauditofdementia1.aspx>

211/18

Underdiagnosis of dementia in primary care: variations in the observed prevalence and comparisons to the expected prevalence; by Amanda Connolly, Ella Gaehl, Helen Martin ... (et al).

Aging & Mental Health, vol 15, no 8, November 2011, pp 978-984.

Dementia is a major and growing health problem in the UK, however many patients remain undiagnosed. This study investigated the magnitude and variation in the difference between 'observed' and 'estimated' prevalence of dementia in general practices. The authors also explored practice characteristics associated with observed prevalence rates. Six Primary Care Trusts (PCTs) provided data on all general practices in their area in terms of number of doctors, patient list size, number of patients over 65 years of age, socio-economic deprivation status of practices and number of patients on dementia registers. The average observed prevalence overall of dementia amongst patients 65 years and over was 3.0%. The observed prevalence was 54.5% lower than the prevalence observed in the epidemiological studies in the UK. For an average size general practice approximately 27 patients with dementia may remain undiagnosed. Statistically significant differences in prevalence rates were found between the different PCTs. The observed prevalence of dementia was significantly lower among practices run by one GP compared to multiple GPs and in more affluent areas. In conclusion, just under a half of the expected numbers of patients with dementia are recognised in GP dementia registers. The underdiagnosis of dementia varies with practice characteristics, socio-economic deprivation and between PCTs, which has implications for the local implementation of the National Dementia Strategy. (JL)

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DEPRESSION

- 211/19 The effect of productive activities on depressive symptoms among older adults with dual sensory loss; by Michele Capella McDonnell.
Research on Aging, vol 33, no 3, May 2011, pp 234-255.
The purpose of the study was to evaluate the ability of three productive activities (paid employment, volunteer work and informal helping) to mitigate the negative effects of dual sensory loss (DSL) on depressive symptoms among older adults. Multilevel modelling was used to analyse longitudinal data from the nationally representative Health and Retirement Study. The sample consisted of 2,688 persons: 1,380 who developed DSL during the study and 1,308 who did not. Although participation in each of the productive activities was associated with fewer depressive symptoms for older adults with DSL, volunteering was also the only variable that moderated the relationship between DSL and depressive symptoms. Persons with a DSL who volunteered exhibited a larger decrease in depressive symptoms compared to persons without sensory loss who volunteered. A volunteer intervention for older adults with DSL may be a viable option to help reduce depression in this population. (JL)
ISSN: 01640275
From : <http://roa.sagepub.com/>
- 211/20 Exploring causal effects of combining work and intergenerational support on depressive symptoms among middle-aged women; by Suzanna J Oprea, Matthijs Kalmijn.
Ageing and Society, vol 32, part 1, January 2012, pp 130-146.
Previous studies have supported the idea that many middle-aged women struggle to combine paid employment and intergenerational support, and that the subsequent stress leads them to experience an increase in depressive symptoms. However a question remains as to whether combining work and intergenerational support actually causes an increase in depressive symptoms. This study investigated the proportion of middle-aged women aged 50 and above combining paid work and support to an adult child or parent, and the extent to which combining these roles affected their depressive symptoms over time. Analysis indicated that 14 per cent of middle-aged women combine the roles of employee and support provider to an adult child or a parent. Combining roles can take away some of the positive mental health effects of fulfilling a role. In conclusion the findings support the idea that role combination increases stress. (JL)
ISSN: 0144686X
From : <http://www.journals.cambridge.org/aso>
- 211/21 Positive and negative exchanges in social relationships as predictors of depression: evidence from the English Longitudinal Study on Aging; by Mai Stafford, Paola Zaninotto, James Nazroo.
Journal of Aging and Health, vol 23, no 4, June 2011, pp 607-628.
The study aimed to investigate whether the impact of negative and positive social exchanges on depression depends on relationship type among late middle aged and older adults. Using data from the English Longitudinal Study of Ageing, baseline positive and negative exchanges with partners, children, other family and friends were linked to two-year changes in depression on the eight-item Center for Epidemiologic Studies Depression Scale. Results showed that positive and negative exchanges with partners and with children were independently associated with depression, adjusting for age, gender, wealth, and baseline depression. Negative but not positive exchanges with

other family and with friends were associated with depression. The association between depression and positive/negative exchanges was weaker among people over 70 compared with those in the 50-70 age group. (JL)

ISSN: 08982643

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

DIET AND NUTRITION

211/22

"Never the twain shall meet": dual systems exacerbate malnutrition in older adults recently discharged from hospital; by Julie L Locher, Nancy S Wellman.

Journal of Nutrition in Gerontology and Geriatrics, vol 30, no 1, 2011, pp 24-28.

Research suggests that frail older adults are at serious risk of malnutrition and its consequences on discharge from hospital. This commentary offers insights into barriers that contribute to the persistent underutilisation of available nutrition services and consequent gaps in the continuum of care for at-risk recently discharged older adults. Possible solutions for addressing the problem include the establishment of routine procedures for appropriate referrals to nutrition services in the community as part of the discharge planning process. (JL)

ISSN: 21551197

From : <http://www.tandfonline.com/loi/wjne21>

211/23

Social influences and eating behavior in later life: a review; by Elisabeth Vesnaver, Heather H Keller.

Journal of Nutrition in Gerontology and Geriatrics, vol 30, no 1, 2011, pp 2-23.

Food intake is complex and often poor among older adults as there are multiple individual, social, and environmental determinants that may interact and change over time. Social isolation has long been recognised as a key factor predicting nutrition risk in this population. However the mechanisms by which social relationships influence diet among older adults remain poorly understood. The purpose of this review is (1) to identify and, where possible, clarify the social concepts used in older adult nutrition research over the past two decades, specifically, the concepts of social integration, social support, companionship and commensality; and (2) to provide a review and summary of the empirical literature on social factors and diet among cognitively well older adults living in the community. The authors conclude by discussing challenges to studying social concepts in older adult nutrition and identifying areas for future research. (JL)

ISSN: 21551197 From : <http://www.tandfonline.com/loi/wjne21>

DISABILITY

(See 211/19, 211/46)

DRUG AND ALCOHOL MISUSE

211/24

Never too late: older people and alcohol misuse; by J Mortimer.

Working with Older People, vol 15, no 2, 2011, pp 71-79.

There is a current obsession in the media with excessive drinking by young people, however evidence shows that many people over 65 have the same problems. This paper explores some of the issues around older people and alcohol. The paper highlights good practice through case studies and identifies some practical ways to

prevent and reduce the risk of alcohol abuse by older people. More brief intervention for older drinkers, more specialist projects for older drinkers, and training and support for staff in all services dealing with older people who misuse alcohol is urgently needed. Additionally, specialist training for dementia services to enable them to work effectively with alcohol-related brain injury and drinkers in drug and alcohol services who are ageing are also needed. Finally the need for more research on substance misuse in older people, primarily in order to generate practical responses is highlighted. (JL)
ISSN: 13663666 From : <http://www.pierprofessional.com/wwopflyer/index.html>

EMPLOYMENT

(See 211/20)

FALLS

- 211/25 Fall risk factors in community-dwelling elderly who receive Medicaid-supported home- and community-based care services; by Takashi Yamashita, Haesang Jeon, A John Bailer ... (et al).
Journal of Aging and Health, vol 23, no 4, June 2011, pp 682-703.
The study aimed to identify fall risk factors in an understudied population of older people receiving community-based care services. Data were collected from enrollees of Ohio's Medicaid home- and community-based waiver programme (preadmission screening system providing options and resources today [PASSPORT]). 23,182 participants receiving PASSPORT services in 2005/2006 were classified as fallers and non-fallers, and a variety of risk factors for falling was analysed using logistic regressions. Risk factors for falling were identified as follows: a previous history of falling, older age, white race, incontinence, a higher number of medications, activity of daily living limitations, unsteady gait, tremour, grasping strength, and absence of supervision. The authors conclude that identifying risk factors for the participants of a Medicaid home- and community-based waiver programme are useful for a falls risk assessment. However it would be most helpful if the community-based care service programmes were to incorporate measurements of known fall risk factors into their regular data collection (JL)
ISSN: 08982643 From : <http://jah.sagepub.com/>

HEALTH SERVICES

(See 211/18)

HOSPITAL CARE

(See 211/17)

HOUSING WITH CARE

- 211/26 The evolution of assisted living provider services (ALPS) to support twenty-first century health, social care and housing needs; by Dave Miles, Kevin Doughty.
Journal of Assistive Technologies, 5, 3, 2011, pp 140-145.
This paper describes the processes involved in establishing a telecare service to include the provision of all forms of assistive technologies including aids and adaptations and

elements of standalone telecare which are particularly relevant to families of people with learning disabilities. The Nottingham model of assisted living provider services is proposed as an example of how home improvements, community equipment and telecare/health services may be integrated. The implications of these changes are discussed in the context of additional resources needed for improved prescribing, installation and support. (JL)

ISSN: 17549450

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211/27

Residential complexes in Queensland, Australia: a space of segregation and ageism?; by Maree Petersen, Jeni Warburton.

Ageing and Society, vol 32, part 1, January 2012, pp 60-84.

Large residential complexes comprising retirement villages and care facilities have become synonymous with specialised housing for older people. This paper explores the geographies of residential complexes in Queensland, Australia. The paper outlines how the professional knowledge of designers, planners and policy makers shape and frame the place of older people in contemporary society. The authors suggest that professional knowledge is characterised by contradictions, and that business interests sustain stereotypes of older people as either ageless or dependent. Furthermore, spaces designed for older people reinforce historical legacies of separation from the community. This form of built environment can thus be seen as both a cause and effect of ageism. The authors conclude that the lack of attention by gerontology to these spaces has hampered discussion of alternatives for older people's housing in Australia and the subsequent development of urban and social planning. (JL)

ISSN: 0144686X

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

INTERGENERATIONAL ISSUES

(See Also 211/20, 211/36)

211/28

Bringing the young and old together: how to connect international youth work with intergenerational practice; by Michael Teffel.

Working with Older People, vol 15, no 2, 2011, pp 53-57.

This case study describes the efforts of the Kreisau-Initiative (KI) based in Berlin, Germany, to connect the field of international youth work with intergenerational approaches. The study describes three projects of the KI, illustrating the general background of the intergenerational projects, discussing opportunities and challenges, and highlighting some of the implications for practitioners. When offering international exchange projects for people of all ages, the paper made one interesting finding - it is more difficult to find younger people (aged 50 and younger) to take part in such activities than seniors. From this case study the author learned that every project which aims to foster intergenerational dialogue needs a topic in which every participant (both young and old) is interested - it should be connected to them and to their daily lives. For organisations which would like to work both intergenerationally and internationally, it is difficult to obtain funding as there are only a few funds supporting international meetings for people of all ages. (JL)

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INTERNATIONAL AND COMPARATIVE

(See Also 211/2, 211/45, 211/46)

- 211/29 Demographic transition, developmentalism and social security in China; by Lin Ye. *Social Policy & Administration*, vol 45, no 6, December 2011, pp 678-693. This article studies the current demographic transition in China and its implications on the country's social welfare reform, particularly its Old Age Social Security (OASS) development. The developmental approach is analysed to examine how developmentalism affects China's social welfare reform. Reviewing the historical development of the OASS system after the 1980s, the article discusses the major issues and concerns under the current system and the challenges it faces for future development. Further studies are called upon to address these issues in order to build a financially sound and socially equitable welfare system in China. (JL)
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From : <http://www.wiley.com/bw/journal.asp?ref=0144-5596&site=1>
- 211/30 Subjective well-being poverty of the elderly population in China; by Xiaolin Wang, Xiaoyuan Shang, Liping Xu. *Social Policy & Administration*, vol 45, no 6, December 2011, pp 714-731. Poverty is represented not only by objective well-being indicators which include income and consumption levels, but also by subjective indicators which reflect what a person feels. It is estimated that the incidence of subjective well-being poverty (SWP) among the Chinese rural elderly population in 2006 was 9.7 per cent, about 4.2 times as much as that of the country's total rural population in the same year, which was 2.3 per cent. Over 16 per cent of the rural elderly population and 11.5 per cent of the urban elderly population rated their life satisfaction as poor or very poor. In terms of SWP, senior citizens, especially those who live in rural areas or who are women or very aged, have become a special group among the poor in China. This article suggests that China's social policies for the new stage take into account the issue of absolute poverty and also that of SWP. A multi-dimensional strategy system targeting the issue of poverty needs to be established, and a policy system to address poverty reduction as well as old age security and care should be implemented. (JL)
ISSN: 01445596
From : <http://www.wiley.com/bw/journal.asp?ref=0144-5596&site=1>

LEISURE

- 211/31 Meanings of television in older adults' lives: an analysis of change and continuity in television viewing; by Margot van der Goot, Johannes W J Beentjes, Marteen van Selm. *Ageing and Society*, vol 32, part 1, January 2012, pp 147-168. Television viewing is an important leisure activity for older adults. The aim this study was to provide insight into the meanings of television in older adults' lives, by analysing change and continuity in their television viewing. A qualitative study was conducted that included in-depth interviews on television viewing among a diverse sample of Dutch people aged 65 years and above. The interview study showed that television has a variety of meanings for older adults. The meanings of television viewing changed in response to changes in everyday life: retirement, physical changes and changes in household composition led to increases as well as decreases in television viewing. Watching more television was experienced in both positive and negative ways. After

a loss in the interpersonal sphere, television viewing can play a valuable role in adaptation processes, but it was also experienced as an activity that needed to be avoided. With regard to television content it was found that some programmes gained importance when people age, whereas other programmes became less important or attractive. These changes in television viewing occurred for only part of the sample and some interviewees experienced continuity in the status of viewing and in their content preferences. The results are discussed in the context of recent literature on leisure constraints, leisure as coping, and adaptation strategies. (JL)

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LONELINESS

211/32

The campaign to end loneliness; by Laura Ferguson.

Working with Older People, vol 15, no 2, 2011, pp 66-70.

This paper gives an overview of the issue of loneliness in old age and describes current research including anecdotal evidence from local project groups seeking to alleviate loneliness in older adults. Loneliness is a highly subjective emotion that is difficult and complex to measure. However, research has shown that men and women are affected differently. It has been shown to have strong links to health issues such as depression, Alzheimer's and heart disease as well as having been shown to be a bigger risk factor in early mortality than lifelong smoking and obesity. This paper highlights the first steps being taken by organisations working, under the umbrella of a recently launched Campaign to End Loneliness, towards further reducing loneliness in older age. (JL)

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From : <http://www.pierprofessional.com/wwopflyer/index.html>

211/33

Listening to you: the baseline report from the Campaign to End Loneliness; by Sally Cupitt, Campaign to End Loneliness; Charities Evaluation Services; Calouste Gulbenkian Foundation.: Campaign to End Loneliness, 2011, 32 pp.

The Campaign to End Loneliness, launched in February 2011, is a coalition of organisations working together through research, policy, campaigning and innovation to inspire individuals to keep connected in older age. The report presents the results of a survey of more than 1,500 adults aged over 40 (the majority over 65) who were asked about their views on loneliness and what they were doing to prevent or alleviate it. Many respondents (especially younger participants) thought that loneliness in older people is much more prevalent than it actually is. Almost all respondents knew about the links between loneliness and health, and most felt that it was an important social issue. Most kept in touch with or gave support to older friends and family frequently, and respondents over 65 reported more contact with family and friends than those aged 65 and under. About a third of respondents (mostly younger people) said they wanted to do more to help people over 65 stay connected. Over half the respondents said they worried about becoming lonely in the future, however as the age of respondents went up they worried about loneliness less. (JL)

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

LONG TERM CARE

- 211/34 Implementing consumer choice in long-term care: the impact of individual budgets on social care providers in England; by Mark Wilberforce, Caroline Glendinning, David Challis ... (et al).
Social Policy & Administration, vol 45, no 5, October 2011, pp 593-612.
England has increasingly relied on consumerist principles to deliver greater quality and improved efficiency in the long-term care system. The Individual Budget (IB) pilots marked a step in this direction, with people eligible for state-funded support being granted direct control over the resources available for their care. This article explores the early impact of IBs on providers' services, on their workforces, and on the administrative implications for providers of managing IBs. Interviews were conducted with a sample of 16 social care providers spread across four IB pilot sites and with commissioning managers in each of seven pilot sites. The study found that providers were positive about the opportunities for better quality services that IBs can bring about. However the participants highlighted a number of obstacles to their effectiveness, and reported a range of potentially adverse administrative and workforce consequences which have the potential to jeopardise the consumerist policy objectives of increased choice and efficiency. (JL)
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From : <http://www.wiley.com/bw/journal.asp?ref=0144-5596&site=1>

MENTAL HEALTH

- 211/35 Elder mental health: the next frontier; by Darlene O'Connor, Laney Bruner-Canhoto (guest editors).
Journal of Aging & Social Policy, vol 23, no 3, July-September 2011, pp 219-332 (whole issue).
Special issue featuring an introduction followed by seven articles written by a variety of researchers who together look at some of the key issues that face policymakers in the United States as they attempt to address the mental health needs of an ageing population. Topics covered include: mental health and ageing in the 21st century; older adults with serious mental illness and community living; collaborative models of mental health care; treatment of late-life mental disorders in primary care; serious mental illness and long term nursing home care; Pre-Admission Screening and Resident Review (PASRR) for nursing home residents with mental illness; and coalitions on mental health and ageing.
ISSN: 08959420
From : <http://www.tandf.co.uk/journals/authors/WASPauth.asp>
- 211/36 The long arm of offspring: adult children's troubles as teenagers and elderly parents' mental health; by Melissa A Milkie, Dawn R Norris, Alex Bierman.
Research on Aging, vol 33, no 3, May 2011, pp 327-355.
The study aimed to investigate whether children's problematic experiences in adolescence have an impact on the mental health of their parents in later life, decades after these experiences have occurred. With a sample of 670 African American and white mothers and fathers aged 65 and older, the authors show that older parents have higher levels of anger when their offspring had more difficulties as teens. For black parents this association remains with controls for children's problems as adults and current concerns about adult children, whereas for white parents it is mediated by

current concerns. Teen difficulties are also related to current depression for older black but not white parents. This research adds to the literature on family, mental health and ageing by showing how psychological well-being in later life is in part a function of parenting experiences decades earlier. (JL)

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211/37

The Wellbeing Project: improving the psychological wellbeing of older adults; by Suzannah Clark, Leila Jackson.

Working with Older People, vol 15, no 2, 2011, pp 87-91.

This paper describes the Wellbeing Project that was developed by Manchester Mental Health and Social Care Trust in partnership with Manchester City Council. A group-based cognitive behavioural therapy intervention known as "Be Well, Age Well" was written specifically to help improve the mood and wellbeing of older adults. A preliminary evaluation showed promising results and in response to a significant increase in demand for continued delivery of the intervention, there are now plans to examine the feasibility of non mental health qualified staff facilitating the course. Funding is currently being sought for a more definitive study. The Wellbeing Project believes that if older adults are educated via the approach as adopted by the "Be Well, Age Well" course, the level of resilience will improve for those individuals who would otherwise have experienced compromised wellbeing. (JL)

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PARTICIPATION

211/38

Promoting involvement of older people in shaping policy and practice; by Christine Wood, Mel Wright.

Working with Older People, vol 15, no 2, 2011, pp 80-86.

Two case studies from the Northeast of England and London are used to illustrate how older people can be effectively enabled and involved to influence their communities and the services that impact on their lives. Age Concern Durham County created a ten-hour introductory level course called "The Confident Consumer". This included basic assertiveness skills, advice on how to challenge discrimination, and used role play to improve communication skills for older people. The case studies have demonstrated that older people do want to be involved and are enthusiastic participants when given the opportunity to use their voice. By reaching out to older people and working actively in partnership with service providers, older people can help to shape their own world. (JL)

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POVERTY

(See 211/30)

QUALITY OF LIFE

(See 211/13)

RESIDENTIAL AND NURSING HOME CARE

211/39

Family care-giving and decisions about entry to care: a rural perspective; by Assumpta Ryan, Hugh McKenna, Oliver Slevin.

Ageing and Society, vol 32, part 1, January 2012, pp 1-18.

The aim of this qualitative study, based in Northern Ireland, was to explore rural family carers' experiences of the nursing home placement of an older relative. The study used a grounded theory approach in which purposive sampling was used to initiate data collection and thereafter theoretical sampling was employed. Semi-structured interviews were conducted with 29 relatives of nursing home residents and the resultant data were recorded, transcribed and analysed using constant comparisons. The older people in the study had deep attachments to their homes and entry to care was a last resort. However rural family carers had close relationships with health and social care practitioners and felt supported in the decision-making process. The choice of home was a foregone conclusion for carers who had a strong sense of familiarity with the nursing homes in their area. This familiarity was influenced by the relatively rural communities in which respondents resided and by an efficient 'grapevine', which seemed to thrive in these small communities. This familiarity, in turn, influenced the choice of nursing home, timing of the placement and responses of family carers. The findings indicate that issues such as rurality and familiarity warrant a more detailed exploration in future research on entry to care. (JL)

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RESPIRE CARE

211/40

Seeking respite: issues around the use of day respite care for the carers of people with dementia; by Andrew Robinson, Emma Lea, Lynn Hemmings ... (et al).

Ageing and Society, vol 32, part 2, February 2012, pp 196-218.

This Australian study looked at how carers of people with dementia continue to under-use day respite services. The aim of the study was to identify issues around the use of day respite care from the perspective of the family carer. Telephone interviews were held with ten Tasmanian carers whose family member refused to attend day respite care and 17 Tasmanian carers whose family member attended. The barriers to attend day respite care, how the carer dealt with their family member's refusal to attend, how attendance at day respite care could be assisted, and the benefits of attendance were examined. The findings showed that carers considering day respite care were often overwhelmed by the quantity of information, confused about the process, and worried about the recipient's safety in an unfamiliar environment. They felt anxious about public acknowledgement of the condition leading to fear of embarrassment. Day respite care users appreciated the break it provided them and the opportunity for their family member to socialise. To facilitate a greater uptake of day respite care, reliable information sources and strategies to help carers deal with their emotions, together with a wider social acceptance of dementia, are important. Furthermore carers need an opportunity to talk with others, enabling them to gain support from those who have successfully introduced a family member to day respite care. (JL)

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RETIREMENT

- 211/41 Is adjustment to retirement an individual responsibility?: socio-contextual conditions and options available to retired persons: the Korean perspective; by Yunjeong Yang. *Ageing and Society*, vol 32, part 2, February 2012, pp 177-195.
This study looks at how societal ageism and structural constraints obstruct retired persons' choices or options available in post-retirement life. It attempts to contribute to the literature of ageing, retirement and wellbeing in later life by providing real examples of ageism around the time of retirement as structural constraints of older persons. It also illustrates how they consequently reduce the choices of retired persons, and in turn affect their later life. The study draws on data from interviews with 34 retirees aged in their late fifties and sixties in Korea. Within the socio-economic context of ageism around the time of retirement, four options/strategies appear to be available, namely: reconciling, complaining and not knowing what to do, finding roles in other activities, and disengaging. Older persons' decisions to continue to work after retirement are often reconciling ones, that is, taken within a context of limited choice and control. Permanent leavers' decisions not to work are also influenced by the limited quality of work available in the labour market. The study concludes by arguing that policies for older persons should take into consideration their diverse expectations and aspirations for their later life, but, at the same time should remain aware of their constraints within socio-economic contexts. (JL)
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RETIREMENT COMMUNITIES

(See Also 211/27)

- 211/42 Then and now: evolving community in the context of a retirement village; by Miriam Bernard, Jennifer Liddle, Bernadette Bartlam ... (et al).
Ageing and Society, vol 32, part 1, January 2012, pp 103-129.
There is little data in the United Kingdom about what it is like to live in retirement communities, how they evolve over time and whether they enhance people's lifestyle aspirations and quality of life. This paper examines these issues through the lens of 'community' and in the context of Denham Garden Village, a purpose-built retirement village in Buckinghamshire. Interviews were held with 52 residents and 16 individuals associated with a variety of organisations involved in the (re)development of the retirement village. The paper focuses on how community was conceptualised, experienced and understood both in the early days of the village, and now subsequent to its redevelopment. In conclusion, the authors suggest that the findings question the extent to which community evolves over time and raise important questions about how socially cohesive such retirement villages are. (JL)
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SEXUALITY

- 211/43 Aging and sexuality: how much do gynecologists know and care?; by Orli Langer-Most, Niele Langer.
Journal of Women & Aging, vol 22, no 4, 2010, pp 283-289.
The expression of one's sexuality is a fundamental mental health need of all individuals regardless of age or gender. In the present study the authors sought to determine

gynaecologists' knowledge and attitudes regarding sexuality in older women. 141 gynaecologists in five U.S. hospitals were surveyed using the Aging Sexual Attitudes and Knowledge Scale (ASKAS). A key finding of the study was that although gynaecologists demonstrate adequate knowledge of ageing sexuality, there is a diminished permissive attitude. Even less positive attitudes were shown among older physicians. (JL)

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SOCIAL CARE

(See Also 211/9)

211/44

'Street-level bureaucracy' revisited: the changing face of frontline discretion in adult social care in England; by Kathryn Ellis.

Social Policy & Administration, vol 45, no 3, June 2011, pp 221-244.

In this article the author assesses the continuing significance of Lipsky's 1980 work on street-level bureaucracy for frontline decision-making in adult social care. The article presents a literature review charting the impact of shifts in welfare administration on street-level autonomy and draws on the author's own research to assess conflicting views about the impact of social care reforms on the discretion which frontline social workers exercise. It identifies and discusses four main types of frontline discretion found within and across teams: street-level bureaucrat, practitioner, bureau professional, and paternalistic professional. The author notes that frontline decision-making represents a dynamic interaction between top-down authority and street-level discretion. Today the advent of personalisation raises fresh questions about the nature and scope of frontline discretion in social care. (JL)

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SOCIAL NETWORKS

(See Also 211/21)

211/45

Family relations and life satisfaction of older people: a comparative study between two different hukous in China; by Huang Yunong.

Ageing and Society, vol 32, part 1, January 2012, pp 19-40.

The Chinese hukou system is an administrative system first implemented in 1960 to control the movement of people between urban and non-urban areas. There are two kinds of hukous: agricultural or rural, and non-agricultural or urban. This paper examined the relationships between family relations and life satisfaction between two groups of older people with different Chinese hukous. Five factors related to family relations were included in the study, namely: family support network, satisfaction with family support, family harmony, filial support and filial discrepancy. A total of 532 valid questionnaires, 263 and 269 being filled in by older people with agricultural and non-agricultural hukous, respectively, were obtained. Bivariate analyses indicated that five factors were correlated significantly with life satisfaction for both groups of older people. The results of hierarchical regression analyses showed that when controlling for socio-demographic variables, filial support was associated with life satisfaction for both groups of older people; satisfaction with family support and filial discrepancy was only associated with life satisfaction among older people with agricultural hukous; family harmony only contributed to explaining life satisfaction among older people with

non-agricultural hukous. The present study confirmed the importance of family relations to older people's lives. The policy and practice implications of the study are discussed in the context of China's social and economic changes. (JL)

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SOCIAL SERVICES

211/46

Absent role of the state: analysis of social support to older people with disabilities in Rural China; by Karen R Fisher, Xiaoyuan Shang, Zhengang Li.

Social Policy & Administration, vol 45, no 6, December 2011, pp 633-648.

China is experiencing rapid population ageing and already has 44 million older people with disabilities aged over 59 years. Yet social support for this client group is undeveloped and not well researched. This article contributes by using a disability rights framework (right to life and protection, economic security and social support) to analyse local cases in rural China. It finds that, although the family is still the main provider of economic and care support to rural older people with disabilities, the absence of a state role in welfare provision has negative impacts on the well-being of older and younger generations in rural families. (JL)

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WELL-BEING

211/47

Cross-national insights into the relationship between wealth and wellbeing: a comparison between Australia, the United States of America and South Korea; by Sarang Kim, Kerry A Sargent-Cox, Davina J French ... (et al).

Ageing and Society, vol 32, part 1, January 2012, pp 41-59.

The positive relationship between wealth and wellbeing has received considerable attention, however little is known about how the significance of wealth for the health and wellbeing of older adults may vary across societies. Furthermore researchers tend to focus mainly on income rather than other aspects of financial resources even though older adults often rely on fixed income, particularly after retirement. Using data from the Household, Income and Labour Dynamics in Australia (HILDA) survey, the Health and Retirement Study (HRS) in the United States of America and the Korean Longitudinal Study of Ageing, this exploratory cross-national study examined the relationship between wealth satisfaction and objective wealth and wellbeing (measured as self-rated health and life satisfaction) among older Australians, Americans and Koreans aged 50 years and over. Regression analyses showed that wealth satisfaction was associated with wellbeing over and above monetary wealth in all three countries. The relationship between monetary wealth and self-rated health was larger for the US than Australian and Korean samples, while the additional contribution of wealth satisfaction to life satisfaction was larger for the Korean than the Australian and US samples. These findings are discussed in terms of the cultural and economic differences between these countries, particularly as they affect older persons. (JL)

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