

# New Literature on Old Age

EDITOR

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## ABUSE, SAFEGUARDING AND PROTECTION

(See Also 234/93)

- 234/1 Best-practice guideline on the prevention of abuse and neglect of older adults; by Sandra P Hirst, Tasha Penney, Susan McNeill ... (et al).: Canadian Association on Gerontology. Canadian Journal on Aging, vol 35, no 2, June 2016, pp 242-260.  
A systematic literature review was conducted to identify effective approaches to preventing and addressing abuse and neglect of older adults within health care settings in Canada. The review was conducted using databases searched from 2000 to 2013. Additionally expert panel members submitted article citations from personal archives. Two research associates (NRAs) screened each title and abstract for inclusion. After inter-rater reliability was determined between the NRAs, the records were divided, appraised and data extracted independently. The review resulted in 62 studies that focused on identifying, assessing and responding to abuse and neglect of older adults; education, prevention, and health promotion strategies; and organisational and system-level supports to prevent and respond to abuse and neglect. Abuse and neglect of older adults remains under-explored in terms of evidence-based studies. Hence further research in all of the areas described in the results is needed. (JL)  
ISSN: 07149808  
From : [journals.cambridge.org/cjg](http://journals.cambridge.org/cjg)
- 234/2 Knowledge translation regarding financial abuse and dementia for the banking sector: the development and testing of an education tool; by Carmelle Peisah, Sangita Bhatia, Jenna Macnab, Henry Brodaty.: Wiley Blackwell.  
International Journal of Geriatric Psychiatry, vol 31, no 7, July 2016, pp 702-707.  
Financial abuse is the most common form of elder abuse. Capacity Australia, established to promote education regarding capacity and abuse prevention across health, legal and financial sectors, was awarded a grant by the Dementia Collaborative Research Centre to educate the banking sector on financial abuse and dementia. In this study the authors aimed to develop a knowledge translation tool for bank staff on the issue. The banking sector across Australia was engaged and consulted to develop a tailored education tool based on Australian Banking Association's Guidelines on Financial Abuse Prevention, supplemented by information related to dementia, financial capacity and supported decision-making. The tool was tested on 69 banking staff across Australia from two major banks. An online education tool using adaptive learning was developed, comprising a pre-test of 15 multiple choice questions, followed by a learning module tailored to the individual's performance on the pre-test, and a post-test to assess knowledge translation. A significant increase in scores was demonstrated when baseline scores were compared with post-course scores. The tool took approximately 10-20 minutes to complete depending on the knowledge of participant and continuity of completion. The Australian banking industry was amenable to assist in the development of a tailored education tool on dementia, abuse and financial capacity. This online e-tool provides an effective medium for knowledge translation. (JL)  
ISSN: 08856230  
From : [www.orangejournal.org](http://www.orangejournal.org)
- 234/3 Rosalie Wolf memorial lecture: a logic model to measure the impacts of World Elder Abuse Awareness Day; by Karen Stein.: Routledge.  
Journal of Elder Abuse and Neglect, vol 28, no 3, June-July 2016, pp 127-133.  
This commentary discusses the need to evaluate the impact of World Elder Abuse Awareness Day activities, the elder abuse field's most sustained public awareness initiative. A logic model is proposed with measures for short-term, medium-term, and long-term outcomes for community-based programmes. Rosalie Wolf is commemorated as the founder of the National Committee for the Prevention of Elder Abuse, founder of the International Network for the Prevention of Elder Abuse, and founder and inaugural editor of the Journal of Elder Abuse and Neglect. (RH)  
ISSN: 08946566  
From : <http://www.tandfonline.com>
- 234/4 Understanding of elder abuse and neglect among health care professionals in Malaysia: an exploratory survey; by Ayesha Ahmed, Wan-Yuen Choo, Sajaratulnisah Othman (et al).: Routledge.  
Journal of Elder Abuse and Neglect, vol 28, no 3, June-July 2016, pp 163-177.  
Elder abuse and neglect (EAN) is a hidden public health challenge for Malaysia. This cross-sectional survey used a self-administered questionnaire to explore health care professionals' knowledge, perceptions, practices and experience concerning EAN. Participants were 148 doctors and nurses from two neighbouring states in Malaysia. Both doctors and nurses demonstrated poor

understanding of signs of EAN, and exhibited misperceptions on reporting requirements. Both groups perceived EAN as a national burden and reporting it as their responsibility; but most felt they had not been trained to diagnose it. Many were unsure of procedures and whether their own interventions could be effective. Only four (nurses) of 41 participants who suspected abuse during the past year reported the cases. Targeted education and uniform protocols are mandatory to ensure best practice with regards to EAN. Further research is crucial to extend this inquiry into the broader health care workforce. (RH)

ISSN: 08946566 [From : http://www.tandfonline.com](http://www.tandfonline.com)

## **ACTIVE AGEING**

(See Also 234/11)

234/5 Measuring active ageing among older adults in Singapore; by Emily Z K Lim, Claire L Thomson.: Cambridge University Press.

Ageing and Society, vol 36, no 9, October 2016, pp 1853-1869.

Active Ageing is conceptualised to measure the extent to which older people remain actively engaged with life. However, there is no evidence that the concept of Active Ageing is actually associated with older people's activity levels. Influences of age, ethnicity and spirituality on Active Ageing are also unexplored. This study used the Active Ageing Index (AAI) to examine whether the level of Active Ageing predicted the actual activity level of 120 Singaporeans of Chinese, Malay and Indians ethnicities, aged 55-64 years old or 65 years and over. Spirituality, measured by the Spirituality Index of Well-Being, was added to the AAI, to see if the predictive power of AAI improved. Hierarchical multiple regression showed that the AAI alone (controlling for age) did not significantly predict the activity level of older people. The predictive power of the AAI improved significantly with spirituality included. Two-way between-groups Analysis of Variance revealed main effects of age and ethnicity, with higher AAI in those aged 55-64 and in Indian-Singaporeans. These findings suggest that the theoretical construct of Active Ageing needs further examination to identify the domains that distinguish it from chronological age, and support broadening the construct, by including spirituality in Active Ageing. (RH)

ISSN: 0144696X [From : journals.cambridge.org/aso](http://journals.cambridge.org/aso)

## **ADVOCACY**

(See 234/72)

## **AGEISM AND AGE DISCRIMINATION**

234/6 Surprising effects of ageism; by Hannah J Swift.: AARP International.

AARP International: The Journal, 2016, pp 45-48.

In the United Kingdom and Europe it has been found that ageism is the most commonly experienced form of prejudice. This article highlights some of the lesser-known negative consequences of ageism that permeate society. The study begins by examining some of the psychological processes underpinning ageism that older people may face by revealing how people of different ages use and apply the category labels 'old' and 'young'. The author argues that age categories are more than labels – they are also imbued with both negative and positive meanings that denote status and power. (JL)

[From : journal.aarpinternational.org](http://journal.aarpinternational.org)

## **ALTERNATIVE THERAPIES**

234/7 On and off the mat: yoga experiences of middle-aged and older adults; by Annette Wertman, Andrew V Wister, Barbara A Mitchell.: Canadian Association on Gerontology.

Canadian Journal on Aging, vol 35, no 2, June 2016, pp 190-205.

This article explored potential differences in yoga practice between middle-aged and older adults. A 'health belief - life course model' framed the research, and a mixed-methods analytic strategy was employed to examine life course pathways into yoga and motivations to practice, as well as perceived barriers and health benefits. For the quantitative analyses, a convenience sample of 452 participants was collected using an online questionnaire. For the qualitative analyses, face-to-face interviews were conducted with a subset of 20 participants. Unique differences between the age groups (both current age and age when started yoga) as well as by gender were found for selected pathways, reasons/motivations and barriers to engage in yoga as well as for perceived health benefits. In addition, results underscored the importance of informational cues and social linkages that affected how individuals adopted and experienced yoga. Implications for health promotion programmes that target older adults are discussed. (JL)

ISSN: 07149808

[From : journals.cambridge.org/cjg](http://journals.cambridge.org/cjg)

## ANXIETY

(See Also 234/19)

- 234/8 The prevalence of anxiety among older adults in nursing homes and other residential aged care facilities: a systematic review; by Alexandra S Creighton, Tanya E Davison, David W Kissane.: Wiley Blackwell.  
International Journal of Geriatric Psychiatry, vol 31, no 6, June 2016, pp 555-566.  
The objective of the research was to synthesise and summarise studies examining the prevalence rate of anxiety disorders and symptoms in older adults living in residential aged care. Using the PRISMA guidelines, five electronic databases were searched using key terms and subject headings, as well as reference lists of relevant papers. The search was limited to literature published in English. Eligible studies examined the prevalence of anxiety disorders or symptoms in aged care residents aged 50+ years. A total of 2249 articles were identified, of which 18 studies (with a total of 5927 participants) were included in this review. The rate of overall anxiety disorders ranged from 3.2% to 20%, with the highest quality studies estimating a prevalence rate of 5% to 5.7%. Generalised anxiety disorder and specific phobias were found to be the most common anxiety disorders among aged care residents, while clinically significant anxiety symptoms were found to be more frequent (6.5% to 58.4%) than threshold disorders. Anxiety disorders and anxiety symptoms are common in older aged care residents. Given the paucity and overall quality of research examining anxiety within this population and the heterogeneity found in studies, further research is needed to help clarify this issue. (JL)  
ISSN: 08856230  
From : [www.orangejournal.org](http://www.orangejournal.org)

## ASSISTIVE TECHNOLOGY

(See Also 234/111)

- 234/9 No place like home?: surveillance and what home means in old age; by W Ben Mortenson, Andrew Sixsmith, Robert Beringer.: Cambridge University Press.  
Canadian Journal on Aging, vol 35, no 1, March 2016, pp 103-114.  
New surveillance technologies like those included in ambient assisted living - such as body-worn and passive environmental sensors, smart interfaces and communications networks - are being developed to improve the security and safety of 'at risk' older people, but ethical questions have been raised about the extent to which they compromise the rights and privacy of the people being monitored. This qualitative study was designed to help understand the ways these novel surveillance technologies would influence individuals' everyday experiences of home. Participants felt new forms of surveillance would influence their sense of security, autonomy, and self-confidence, and would alter perceptions of home. The findings emphasise the need to improve understanding of how ambient assisted living will affect the lives of those being monitored. (JL)  
ISSN: 07149808  
From : [journals.cambridge.org/cjg](http://journals.cambridge.org/cjg)
- 234/10 The under-connected ecosystem of elders; by Lilian Myers.: AARP International.  
AARP International: The Journal, 2016, pp 49-53.  
Explores ways of using information and mobile technology to engage older people in interactions that keep them safe, active, and mentally and physically well. Technology can be a vital tool to turn crisis into opportunity and to fill a void in the lives of older people caused by changes in policy and social structures. (JL)  
From : [journal.aarpinternational.org](http://journal.aarpinternational.org)

## ATTITUDES TO AGEING

- 234/11 Beyond stereotypes: talent, resources and social activity among the postmodern elderly; by Stefano Poli.: Hipatia Press.  
Research on Ageing and Social Policy, vol 2, no 1, July 2014, pp 58-86.  
Desirable proposals in terms of active ageing are constrained by the heterogeneous conditions of older people, often affected by inequalities and social frailty. Added to this, older people are frequently limited by homogenising representations, reproducing a sense of non-productivity and marginalisation according to an obsolete industrial model of the life cycle. However, it has to be highlighted that among older people, it is often possible to observe the emergence of 'social talent', performed by being active in different forms of civic engagement. This paper aims to highlight the determinants of social activity behind the deep versatilities of old age through the results of quantitative and qualitative research conducted in Genoa, an Italian town where ageing is prevalent. By identifying the interactions of multiple indicators regarding value systems, socioeconomic conditions and older people's different lifestyles, the importance of social activity

and its determinant predictors among older people are highlighted: rethinking their role in contemporary society, enlarging their horizons of capabilities and opportunities, and overcoming latent homogenising stereotypes through the promotion of an effective path of active citizenship. (OFFPRINT.) (RH)

ISSN: 2014671X From : <http://doi.org/10.4471/rasp.2014.03>

234/12

A deepening involvement in life with others: towards a philosophy of aging; by Jan Baars.: Hipatia Press.

Research on Ageing and Social Policy, vol 1, no 1, July 2013, pp 6-26.

Although many people are living longer and healthier than before and life expectancies have even more than doubled in the last 150 years, cultures of ageing have not kept up with these developments. On the contrary: in most Western countries, people are driven from the labour market at a younger age than was the case in the 1960s and they are labelled as 'aged' as soon as they reach age 50. Partly as a response to this early exclusion from normal adulthood, cultures of ageing have developed, which paradoxically define ageing well as "staying young". This article argues that contemporary developments in longevity ask for inspiring cultures of ageing which do not deny its vulnerabilities nor belittle its potentials. As unique lives are deepened in ageing, they may lead to inspiring cultures of aging which go beyond the dominant perspectives that emphasize either staying young or hopeless decline. (OFFPRINT.) (RH)

ISSN: 2014671X

From : <http://doi.org/10.4471/rasp.2013.01>

234/13

How diversity gets lost: age and gender in design practices of information and communication technologies; by Nelly Oudshoorn, Louis Neven, Marcelle Stienstra.: Routledge.

Journal of Women and Aging, vol 28, no 2, [March-April] 2016, pp 170-185 (IN: Journal of Women and Aging, vol 28, nos 1-3, 2016).

The authors adopt an intersectional approach to investigate how age, gender, and diversity are represented, silenced, or prioritised in design. Based on a comparative study of design practices of information and communication technologies (ICTs) for young girls and older people, this article describes differences and similarities in the ways in which designers tried to cope with diversity. In one study, an ambient intelligence (AmI) robot was developed for older people, while the other study looked at Kidcom, a computer game for girls. Consideration of diversity was neglected; and the developers relied on hegemonic views of gender and age, constructed older people and young girls as an "other", and consequently their opinions were ignored. (RH)

ISSN: 08952841

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

234/14

Lessons on aging: hopes and concerns of Japanese women at midlife; by Melissa K Melby.: Routledge.

Journal of Women and Aging, vol 28, no 2, [March-April] 2016, pp 127-140 (IN: Journal of Women and Aging, vol 28, nos 1-3, 2016).

Japan is leading the global trend of decreasing birth rates and of a greying society. In this study, the authors examine women's changing gender and intergenerational relationships and how these affect their concerns and hopes for their futures. Many of the 121 midlife women (aged 45-55) interviewed viewed themselves as sandwiched between their mothers-in-law and actual or potential daughters-in-law, at the nadir of intergenerational status within their families, in large part due to changing social patterns in marriage and birth rates. Doubts about the marriageability of their sons arising from role expectations for brides to care for parents-in-law cause concern for many and highlight the gendered and intergenerational nature of aging concerns. Yet, midlife in the 21st century, with changing gender and intergenerational roles, appears to create opportunities for many Japanese women to reflect on the meaning of the next stage of their lives. Changing gender and intergenerational relationships may contribute to their hopes to live a life of self-actualisation and to be true to one's self (jibun rashiku ikiru). (RH)

ISSN: 08952841 From : <http://www.tandfonline.com>

234/15

Why do I dread looking old?: A test of social identity theory, terror management theory, and the double standard of aging; by Jill M Chonody, Barbra Teater.: Routledge.

Journal of Women and Aging, vol 28, no 2, [March-April] 2016, pp 112-126 (IN: Journal of Women and Aging, vol 28, nos 1-3, 2016).

Outward appearance is one of the means by which age is determined, and fear of looking old may stem from fears about social identity and death. This study explored how social identity theory and terror management theory may help to explain the dread of looking old. University students from the United States, England, and Australia (N = 1,042) completed a questionnaire regarding their attitudes about ageing and older adults. Results indicated that sex, age, beliefs about personal aging, and death anxiety explained 30.4% of the variance for participants' dread of looking old. Theoretical hypotheses were supported by the authors' findings. (RH)

ISSN: 08952841 From : <http://www.tandfonline.com>



## BLACK AND MINORITY ETHNIC GROUPS

(See 234/25, 234/28, 234/59, 234/78)

## CARERS AND CARING

- 234/16 Perceived value of support for older adults coping with multi-morbidity: patient, informal care-giver and family physician perspectives; by Gayathri Naganathan, Kerry Kuluski, Ashlinder Gill (et al.): Cambridge University Press.  
Ageing and Society, vol 36, no 9, October 2016, pp 1891-1914.  
The perceived value of informal and formal supports for older adults with multi-morbidity was investigated from the perspectives of patients, care-givers and family physicians. Semi-structured interviews were conducted with 27 patients, their informal care-givers and their family physicians in an urban academic family health team in Ontario, Canada. Analysis was conducted using a General Inductive Approach to facilitate identification of main themes and to build a framework of perceived value of supports. Participant views converged on supports that facilitate patient independence and ease care-giver burden. However, important differences in participant perceptions arose regarding these priorities. Physicians and care-givers valued supports that facilitate health and safety, while patients prioritised supports that enable self-efficacy and independence. While formal supports which eased care-giver burden were viewed positively by all members of the triad, many patients also rejected formal supports, citing that informal support from their care-giver was available. Such conflicts between patient, care-giver and physician-perceived value of supports may have important implications for consumer and care-giver willingness to accept formal supports when supports are available. These findings contribute to the broader literature on community-based care, by incorporating the perspectives of patients, informal care-givers and family physicians to understand better the barriers and facilitators of uptake of supportive services that contribute to successful ageing at home. (RH)  
ISSN: 0144696X  
From : [journals.cambridge.org/aso](http://journals.cambridge.org/aso)

## CRIME

- 234/17 Fear of crime amongst elders in India; by Avanish Bhai Patel, Anindya Jayanta Mishra.: Emerald. Working with Older People, vol 20, no 1, 2016, pp 36-45.  
Crime against older people is a matter of grave concern in contemporary India, with instances of grievous bodily harm, murder and abusive behaviour being perpetrated by known and unknown persons. Such cases have had a negative impact on older people's way of life and sense of well-being. Consequently, fear of crime is being recognised as an emerging social problem among India's older population. This paper examines different types of crime that are being committed against older people (leading to a fear of crime); it also identifies the victim-offender relationship. Using a mixed method approach, the study was conducted from October 2012 to January 2013 on a sample of 220 older people living in both rural and urban areas of Lucknow in the state of Uttar Pradesh, India. It examines the factors shaping their experience of victimisation, and has been designed as an exploratory lead-in to a planned wider study. The findings suggest that emotional crime is a major problem for this group of older people, and is more prevalent than crime against the body and property. The study has also found that older people have a fear of crime in their own houses due to victimisation. (RH)  
ISSN: 13663666 From : [www.emeraldgroupublishing.com/wwop.htm](http://www.emeraldgroupublishing.com/wwop.htm)

## DEATH AND DYING

- 234/18 The mental health and mortality impact of death of a partner with dementia; by Sunil M Shah, Iain M Carey, Tess Harris ... (et al.): Wiley Blackwell.  
International Journal of Geriatric Psychiatry, vol 31, no 8, August 2016, pp 929-937.  
Caring for a partner with dementia and partner bereavement are independently associated with poor health. An understanding of the health effects of living with a partner dying with dementia can help optimise support. The present study looked at health in the year before and after loss of a partner with dementia compared with other bereavements. In a UK primary care database, 2,624 older individuals whose partner died with dementia during 2005-2012 were matched with 7,512 individuals experiencing bereavement where the deceased partner had no dementia recorded. Prior to bereavement, partners of the deceased with dementia were more likely to be diagnosed with depression and receive psychotropic medication than partners from bereavements without dementia. In contrast, psychotropic medication initiation two months after dementia bereavement was lower. Compared with other bereaved individuals, mortality after bereavement was lower in men experiencing a dementia bereavement but similar in women. Prior to bereavement, those who died with dementia were less likely to receive palliative care. These findings show that in the year

before bereavement, partners of individuals dying with dementia experience poorer mental health than those facing bereavement from other causes, and their partner is less likely to receive palliative care. In the year after, individuals whose partner died with dementia experience some attenuation of the adverse health effects of bereavement. Services need to address the needs of carers for individuals dying with dementia and improve access to palliative care. (JL)

ISSN: 08856230

From : [www.orangejournal.org](http://www.orangejournal.org)

234/19

Older adults and the fear of death: the protective function of generativity; by Rochelle J Major, William J Whelton, Jeff Schimel ... (et al): Canadian Association on Gerontology.

Canadian Journal on Aging, vol 35, no 2, June 2016, pp 261-272.

Terror management theory (TMT) posits that cultural worldviews function to allay concerns about human mortality. Preliminary research with older adults has indicated that seniors do not respond to death reminders in the same way as their younger counterparts. The purpose of the current study was to test a developmentally relevant construct that may buffer death anxiety in later life. It was hypothesised that Erikson's concept of generativity may encompass death-denying properties for older adults. In the study 179 older adults were recruited to determine if subtle mortality salience inductions would lead participants to rate their own generativity as higher than after a blatant induction, or no induction, after controlling for pre-induction generativity. As expected, participants exposed to subtle death primes rated themselves as having higher levels of generativity than the other two groups after co-varying pre-induction generativity. Explanations are discussed in light of the literatures on TMT and generativity. (JL)

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## DEMENTIA

(See Also 234/34, 234/82)

234/20

Achieving the 67 per cent: raising the rates of diagnosis of dementia in Milton Keynes; by Stephanie Oldroyd, Emily Tonkin-Gage, Emily Standell.: British Psychological Society.

Psychology of Older People: The FPOP Bulletin, no 133, January 2016, pp 85-90.

The authors reflect on developing three new initiatives to achieve a government target of dementia diagnosis rate and impact of this on service provision. First, diagnostic guidelines were developed, in order to support GPs in making informed diagnosis decisions. The second initiative involved a care home project, ensuring that care home residents were currently diagnosed, if appropriate, and also making sure that diagnostic data were recorded accurately. The final initiative was a GP memory screening pilot project, which involved a memory screening team running clinics in several GP surgeries in Milton Keynes, offering memory screening appointments. These initiatives contributed to the achievement of the 67 per cent diagnosis rate in Milton Keynes. However, they also resulted in important consequences for the current service provision. A significant increase in referrals to the Memory Assessment Service was seen, and along with this, an increase in waiting times. As a result, post-diagnostic support provisions are being developed further, to try to meet the increased and more varied demands. Potential benefits of the new initiatives are becoming evident. However, further evaluation is required, to understand fully the benefits and possible consequences of these innovative projects. (RH)

ISSN: 20528914 From : <http://www.bps.org.uk/newtworks-and-communities/member-microsite/dcp-faculty-psychology-older-people-fpop>

234/21

Applicability of the pre-death grief concept to dementia family caregivers in Asia; by Tau Ming Liew.: Wiley Blackwell.

International Journal of Geriatric Psychiatry, vol 31, no 7, July 2016, pp 749-754.

Pre-death grief is prevalent among dementia family caregivers. When unaddressed it produces adverse outcomes. With its research primarily conducted in Caucasians, its applicability to non-Caucasians is uncertain. The present study explored the existence and the characteristics of pre-death grief in a multi-ethnic Asian population using an established pre-death grief scale, namely the Marwit-Meuser Caregiver Grief Inventory (MM-CGI). 72 dementia family caregivers were recruited from a tertiary hospital. Existence of pre-death grief was shown by its measurability on MM-CGI, together with good internal consistency reliability and construct validity. Characteristics of pre-death grief were explored through multivariate linear regression of MM-CGI and by comparing MM-CGI scores with those from the original US study using one-sample T-test. In the Asian context pre-death grief was measurable in a reliable and valid manner. Risk factors of pre-death grief included caring for patients with severe dementia, spousal relationship and secondary or below education. Influence of culture was palpable: Asians had more worries and felt isolation, and certain ethnicity showed more pre-death grief. Pre-death grief is applicable even to the non-Caucasian population. It bears much similarity to that in Caucasians, however its expression is modified by culture. Clinicians working with non-Caucasian populations need to be sensitive to its presence and to the influence of culture on its expression. (JL)

ISSN: 08856230 From : [www.orangejournal.org](http://www.orangejournal.org)

- 234/22      Combatting dementia globally; by Dennis Gillings.: AARP International.  
AARP International: The Journal, 2015, pp 62-65.  
Looks at what the World Dementia Council (WDC) is currently doing to combat the global dementia epidemic. Whilst a breakthrough cure remains elusive, current priorities include promoting lifestyle changes in order to minimise risk of developing the disease, making sure effective treatments become available as soon as possible, investing in research and drug development, optimising the potential of data and enhancing dementia care through technology.  
(JL)  
From : [journal.aarpinternational.org](http://journal.aarpinternational.org)
- 234/23      Containment and its role in maintaining the self in dementia; by Christopher Wilson, Harriet Danby.: British Psychological Society.  
Psychology of Older People: the FPOP Bulletin, no 134, April 2016, pp 15-19.  
The authors aim to illustrate a tangible theoretical framework for understanding and supporting the endurance of and within dementia. First, they outline the role of containment in the development and maintenance of the self, before considering how a dementia can represent a threat to a premorbid sense of self. They reflect on common barriers to containment and selfness ideologically constructed by services, including the potentially damaging use of expert language and neuropsychiatric shorthand. A practical application of psychodynamic concepts in terms of scaffolding a sense of self for clients with dementia within NHS dementia services is explored.  
(RH)  
ISSN: 20528914  
From : [www.bps.org.uk/networks-and-communities/member-microsite/dcp-faculty-psychology-older-people-fpop](http://www.bps.org.uk/networks-and-communities/member-microsite/dcp-faculty-psychology-older-people-fpop)
- 234/24      The current psychometric status of the Addenbrooke's Cognitive Examination-III: a review; by Simone Lindsey, Syd Hiskey.: British Psychological Society.  
Psychology of Older People: The FPOP Bulletin, no 135, July 2016, pp 14-19.  
The choice of a screening tool for detecting cognitive impairment and dementia is important and should be supported by evidence on its validity. The authors conducted a systematic review of papers reporting relevant data on the Addenbrooke's Cognitive Examination-III (ACE-III). Of 76 articles initially identified, just three studies met criteria for inclusion. Two studies showed evidence that the ACE-III can differentiate between people with or without a dementia. One study reported lower diagnostic cut-off points than those currently recommended and routinely employed in clinical practice. The authors conclude that there is currently limited research on the psychometric properties of the ACE-III. Overall, however, the ACE-III remains a clinically useful screening measure in dementia, and further lines of empirical enquiry to support its use are recommended. (RH)  
ISSN: 20528914  
From : <http://www.bps.org.uk/networks-and-communities/member-microsite/dcp-faculty-psychology-older-people-fpop>
- 234/25      Dementia among gypsies and travellers; by Mary Tilki.: Hawker Publications.  
Journal of Dementia Care, vol 24, no 4, July/August 2016, pp 12-14.  
This is the first of two articles looking at the impact of dementia on gypsies and travellers. It looks at the difficulties and challenges for services, which include: a shortage of sufficient, decent traveller sites; a culture of self-reliance; negative experience of trying to obtain social care; and barriers to access to health and social care services in general for this group. (RH)  
ISSN: 13518372  
From : [www.careinfo.org](http://www.careinfo.org)
- 234/26      Dementia-friendly banking; by Graeme Whippy.: AARP International.  
AARP International: The Journal, 2015, pp 59-61.  
For people with dementia, keeping on top of finances can be difficult, and most people with the condition have difficulty using banks. This article looks at ways in which Lloyds Banking Group has been working in partnership with the Alzheimer's Society to promote dementia-friendly banking in the UK. (JL)  
From : [journal.aarpinternational.org](http://journal.aarpinternational.org)
- 234/27      The impact of dementia illness representations on accessing health care; by Louise Sheppard.: British Psychological Society.  
Psychology of Older People: The FPOP Bulletin, no 135, July 2016, pp 33-38.  
Help-seeking for dementia concerns has been associated with beliefs about memory. Older people (3 men and 3 women) were interviewed to elicit their illness representation (beliefs) of dementia, to investigate the impact on help-seeking. Two themes were identified when using Interpretative Phenomenological Analysis. First, 'We all forget, don't we? But there's a difference'. Second, 'I

think everybody these days gets quite scared'. Participants suggested that an observer identifies symptoms in another, prompting help-seeking. Denial may be used to cope with fear of symptoms, hindering attempts to seek help. (RH)

ISSN: 20528914

From : <http://www.bps.org.uk/networks-and-communities/member-microsite/dcp-faculty-psychology-older-people-fpop>

234/28

Upon learning from the community: surveying dementia awareness in South East Asian communities; by Ian Scott, Faye Barrow, Serena Sharma.: British Psychological Society.

Psychology of Older People: The FPOP Bulletin, no 133, January 2016, pp 50-57.

The Department of Health (DH) has highlighted the need to increase early diagnosis of dementia, increase the uptake of intervention following diagnosis, and reduce stigma of this debilitating condition (National dementia strategy, DH, 2009). Further, previous authors have highlighted the need to deliver culturally tailored services (C M Geibel et al, 2014; V Seabrooke & A Milne, 2004). An opportunity arose to learn about the perspective of dementia from a cross-section of the local Punjabi community who were attending a Dementia Information Group. Over a 5-week programme, the authors conducted a short dementia survey to members of the local Punjabi community. Results indicate that respondents hold some positive constructions of dementia and services, although some perspectives reflecting stigma and concerns about help-seeking were evident. Limitations of this study and recommendations for further research are briefly discussed. (RH)

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From : <http://www.bps.org.uk/newtworks-and-communities/member-microsite/dcp-faculty-psychology-older-people-fpop>

## **DEMENTIA CARE**

(See Also 234/22, 234/102, 234/107)

234/29

The adaptation of Cognitive Stimulation Therapy and Maintenance Cognitive Stimulation Therapy on a ward for people with dementia; by Nadia Majeed.: British Psychological Society.

Psychology of Older People: The FPOP Bulletin, no 133, January 2016, pp 40-43.

A 20-bed ward at Prospect Park Hospital in Reading to which patients with dementia are admitted and generally stay for up to 6 months invited patients to participate in therapeutic activities, including Cognitive Stimulation Therapy (CST) and Maintenance Cognitive Stimulation Therapy (MCST). This article outlines the key principles of CST. (RH)

ISSN: 20528914

From : <http://www.bps.org.uk/newtworks-and-communities/member-microsite/dcp-faculty-psychology-older-people-fpop>

234/30

A cost-benefit analysis of a CBT for carers of people with dementia group; by Chris Allen.: British Psychological Society.

Psychology of Older People: The FPOP Bulletin, no 133, January 2016, pp 18-24.

Twenty-two of the most stressed (defined by hitting caseness and having high levels of contact with services) carers of people with dementia attended and completed one of three 12-week CBT (cognitive behavioural therapy) for Carers groups. The carers were assessed pre- and post-group on a range of clinical outcome measures, which indicated that after the group, they were less stressed, felt more competent, their general health improved, their participation in activities increased, and their levels of anxiety and depression decreased. A cost-benefit analysis performed by public health indicated that this also translated into savings for the healthcare system, with acute care contacts reducing from 281 to 36 over the same time period, representing a saving of £11,855, and mental health contacts from 119 to 18, suggesting a potential saving of £35,451. Community care contacts increased by one. Total savings were £47,000 for a project costing £15,000. CBT for Carers of People with Dementia groups offer the opportunity of improving carers' physical and mental health, and producing savings for the healthcare system. (RH)

ISSN: 20528914

From : <http://www.bps.org.uk/newtworks-and-communities/member-microsite/dcp-faculty-psychology-older-people-fpop>

234/31

Cost-effectiveness of exercise as a therapy for behavioural and psychological symptoms of dementia within the EVIDEM-E randomised controlled trial; by Francesco D'Amico, Amritpal Rehill, Martin Knapp ... (et al.): Wiley Blackwell.

International Journal of Geriatric Psychiatry, vol 31, no 6, June 2016, pp 656-665.

Although available evidence is modest, exercise could be beneficial in reducing behavioural and psychological symptoms of dementia. The present study aimed to evaluate the cost-effectiveness of a dyadic exercise regimen for individuals with dementia and their main carer as therapy for behavioural and psychological symptoms of dementia. The study analysed cost-effectiveness

within a two-arm, pragmatic, randomised, controlled, single-blind, parallel-group trial of a dyadic exercise regimen (individually tailored, for 20-30 minutes at least five times per week). The study then randomised 131 community-dwelling individuals with dementia and clinically significant behavioural and psychological symptoms with a carer willing and able to participate in the exercise regimen. 52 dyads provided sufficient cost data for analyses. Mean intervention cost was £284 per dyad. For the subsample of 52 dyads, the intervention group had significantly higher mean cost from a societal perspective, but costs were not significantly different from a health and social care perspective. The exercise intervention was more cost-effective than treatment as usual from both societal and health and social care perspectives for the measure of behavioural and psychological symptoms (Neuropsychiatric Inventory). It did not appear cost-effective in terms of cost per quality-adjusted life year gain. The exercise intervention had the potential to be seen as cost-effective when considering behavioural and psychological symptoms but did not appear cost-effective when considering quality-adjusted life year gains. (JL)

ISSN: 08856230

From : [www.orangejournal.org](http://www.orangejournal.org)

- 234/32 Developing CBT services for family carers of people with dementia: five years on; by Jane Fossey, Harriet Barlow, Amanda Robinson, Jo-ann Fowler.: British Psychological Society. Psychology of Older People: The FPOP Bulletin, no 133, January 2016, pp 12-17. The authors outline how services in Oxfordshire and Buckinghamshire have been developing the way in which CBT (cognitive behavioural therapy) for family carers of people with dementia is offered. They reflect on some of the learning from their service development in CBT group work, and outline a current randomised control trial (RCT), 'Caring for Me and You' hosted within the service and funded by the Alzheimer's Society, which is evaluating the effectiveness of a newly-developed computerised CBT package for family carers who have anxiety and depression. The article includes examples of carers' feedback at follow-up assessment. (RH)  
ISSN: 20528914  
From : <http://www.bps.org.uk/newtworks-and-communities/member-microsite/dcp-faculty-psychology-older-people-fpop>
- 234/33 The effect of Cognitive Stimulation Therapy (CST) groups for dementia on participant's attitudes to ageing: a practice-based study; by Fleur Newton.: British Psychological Society. Psychology of Older People: The FPOP Bulletin, no 133, January 2016, pp 25-31. This practice-based study investigated the effects of Cognitive Stimulation Therapy (CST) on everyday NHS clinical settings on both routine outcomes and attitudes to ageing. This is important, given that negative ageist beliefs have been linked to decline in the health and well-being of older people, especially those with a dementia diagnosis. A quantitative pre-test/post-test design was used to evaluate changes in participant outcomes for cognition, quality of life (QoL) and ageing attitudes. A total of 82 CST participants with mild to moderate dementia were included in the study. Significant improvements on measures of quality of life and attitudes to ageing were found pre- to post-CST, and a holding pattern of non change was observed for cognition. A significant positive correlation was established between ageing attitudes and quality of life. Demographic characteristics were not found to have an influence on the treatment effects of CST. These findings provide additional evidence that CST can produce routine improvements in clinical practice settings that are equally applicable across age and gender. Of clinical significance is the finding CST improves the attitudes of ageing of older people with dementia, as this is the first time it has been studied empirically. This further highlights the potential of CST as a de-stigmatising, positive ageing intervention.  
ISSN: 20528914  
From : <http://www.bps.org.uk/newtworks-and-communities/member-microsite/dcp-faculty-psychology-older-people-fpop>
- 234/34 Identifying the causes, prevention and management of crises in dementia: an online survey of stakeholders; by Ritchard Ledgerd, Juanita Hoe, Zoe Hoare ... (et al.): Wiley Blackwell. International Journal of Geriatric Psychiatry, vol 31, no 6, June 2016, pp 638-647. Crisis situations in dementia can lead to hospital admission or institutionalisation. Offering immediate interventions may help avoid admission, whilst stabilising measures can help prevent future crises. The objective of this study was to identify the main causes of crisis and interventions to treat or prevent crisis in persons with dementia based on different stakeholder perspectives. An online questionnaire was developed to identify the causes of crisis and appropriate interventions in a crisis. Participants included people with dementia, family carers and staff working in health and social care, including emergency and voluntary sectors as well as academia. The results ranked the main causes of crisis, interventions that could prevent a crisis and interventions that could be useful in a crisis. Wandering, falls and infection were highly rated as risk factors for crises across all stakeholder groups. Consumers rated aggression as less important but severity of memory impairment as much more important than the other groups did. Education and support for family carers and home care staff were highly valued for preventing crises. Well-trained home

care staff, communication equipment, emergency contacts and access to respite were highly valued for managing crises. Also identified were triggers and interventions that different stakeholders saw as important for crisis in dementia. Recognition of these may be critical to planning effective and accepted support and care for people with dementia. (JL)  
ISSN: 08856230 From : [www.orangejournal.org](http://www.orangejournal.org)

- 234/35 There is more to CST than the manual; by Natalia Banach, Kathryn Evans.: British Psychological Society.  
Psychology of Older People: The FPOP Bulletin, no 133, January 2016, pp 44-49.  
The authors explore the notion that there is more to CST (Cognitive Stimulation Therapy) groups than the manual, by contrasting two CST groups that they had facilitated in a 6-month period: 'Friends' (moderate to severe dementia) and 'The Hopefuls' (mild dementia). They look at different applications of CST theory in practice, the adaptability of the manual, and the importance of supervision in the process of running the groups. They discuss the qualitative and quantitative effects of being in the group, and look at CST in the broader context of group work with people with dementia. This article is written from a first-person perspective: an assistant psychologist together with a co-facilitator, either a trainee clinical psychologist or a support worker. (RH)  
ISSN: 20528914 From : <http://www.bps.org.uk/newtworks-and-communities/member-microsite/dcp-faculty-psychology-older-people-fpop>

- 234/36 Transforming services for older people with dementia: actions and some personal reflections; by Chris Allen.: British Psychological Society.  
Psychology of Older People: The FPOP Bulletin, no 133, January 2016, pp 91-96.  
Service transformation can lead to improvements in accessibility and service delivery for many more older people than a psychologist can hope to deliver working individually. The author outlines the aims and objectives of a service transformation, by reference to different phases of a project in Windsor and Maidenhead, to improve the care of people with dementia and their carers. Other aspects of the project have included improving identification of dementia, transforming the care provided in care homes, and transforming the view of older people, assisted by Windsor Photographic Society's poster and brand campaign, Proud to be Grey. The usefulness of guidance such as the QS50 NICE quality standards (Mental wellbeing of older people in care homes) is acknowledged. The author also notes that pilot projects have been essential to overall success, as they offered the opportunity to try out approaches and make changes prior to wider implementation. (RH)  
ISSN: 20528914  
From : <http://www.bps.org.uk/newtworks-and-communities/member-microsite/dcp-faculty-psychology-older-people-fpop>

## **DEPRESSION**

(See 234/51)

## **DISABILITY**

- 234/37 A better life: valuing our later years; by Imogen Blood, Joseph Rowntree Foundation - JRF.: Joseph Rowntree Foundation - JRF, 2013, 88 pp.  
The Joseph Rowntree Foundation (JRF) major 5-year programme 'A better life' (2009-2013) aimed to explore what quality of life means for older people with high support needs, and to examine what can help us all to improve our final years.  
This book was commissioned by JRF to draw out and reflect on the key messages from this body of work. A recurring theme is that ageing is about all of us; it is everyone's business, not just those working in care homes, commissioning health and care services, or developing government policies and programmes. The book quotes the personal experiences of older individuals, and asks why it is that personal identity risks getting overlooked at this stage of life. It considers the messages about what 'choice', 'control' and 'independence' mean to people as they get older. A concluding chapter summarises key messages and draws together the practical ideas for change that were introduced throughout the report, starting with old age being not about 'them': it is about all of us. Older people are individuals, and as a group, they are becoming more diverse. Relationships matter to us, whatever our age: we have a fundamental human need to connect with others meaningfully. Older people with high support needs have many assets, strengths and resources; and whatever our age or support needs, we should all be treated as citizens: the individual and collective voices of older people with high support needs should be heard and given power. (RH)  
From : Joseph Rowntree Foundation, The Homestead, 40 Water End, York YO30 6WP. Weblink: [www.jrf.org.uk/work/workarea/better-life](http://www.jrf.org.uk/work/workarea/better-life)

234/38 A better life: valuing our later years; by Philly Hare, Ilona Haslewood, Joseph Rowntree Foundation - JRF.: Joseph Rowntree Foundation - JRF.  
Inspiring Social Change, 2950, December 2013, 4 pp (Ref 2950).  
The Joseph Rowntree Foundation (JRF) major 5-year programme 'A better life' aimed to explore what quality of life means for older people with high support needs, and to examine what can help us all to improve our final years. The main work of commissioning and publishing projects relating to this goal finished in 2013. This paper summarises the key messages from the 'A better life' programme of work, available from the JRF website (see: [www.jrf.org.uk/work/workarea/better-life](http://www.jrf.org.uk/work/workarea/better-life)). It notes key points that will inform subsequent work to disseminate the findings and to reflect on the meaning of the evidence base on issues such as challenging ageist assumptions, recognition of the increasing diversity of older people, and making simple changes to improve older people's lives. It also notes that there have been major changes since the project began, in particular cuts to or loss of services, voluntary sector organisations and local infrastructure - which are detrimental to the well-being of older people and those who support them. (RH)  
From : Joseph Rowntree Foundation, The Homestead, 40 Water End, York YO30 6WP. Weblink: [www.jrf.org.uk/work/workarea/better-life](http://www.jrf.org.uk/work/workarea/better-life)

234/39 Rights of persons with disabilities: report of the Special Rapporteur [to the] General Assembly, Seventieth session: Item 73 (b) of the provisional agenda: Promotion and protection of human rights: human rights questions, including alternative approaches for improving the effective enjoyment of human rights and fundamental freedoms; by Catalina Devandas-Aguilar, Special Rapporteur on the Rights of Persons with Disabilities, General Assembly, United Nations - UN. New York, NY: United Nations, 7 August 2015, 25 pp (A/70/297) (General Assembly, 70th session, item 73(b)).  
The report focuses on the right of people with disabilities to social protection. The Special Rapporteur seeks to provide guidance to States on the requirements to establish disability-inclusive social protection systems that promote active citizenship, social inclusion and community participation of people with disabilities, in conformity with the Convention on the Rights of Persons with Disabilities, while acknowledging the existing difficulties in implementation. Key elements for building disability-inclusive social protection systems include: legal and institutional frameworks; system design; disability benefits; targeting and eligibility; relevance of benefit packages; non-discrimination; accessibility; participation; and resource implications. (RH)  
From : [http://www.un.org/en/ga/search/view\\_doc.asp?symbol=A/70/297](http://www.un.org/en/ga/search/view_doc.asp?symbol=A/70/297)

## **ECONOMIC ISSUES**

234/40 Social class structure and identity in later life; by Marvin Formosa.: Hipatia Press.  
Research on Ageing and Social Policy, vol 2, no 1, July 2014, pp 2-27.  
The elusive character of social class in ageing studies is discussed. Whilst for many gerontologists social class no longer represents a salient marker of social difference in later life, critical gerontologists continue to stress that it is crucial in determining how people experience retirement and the quality of lives they lead. This article reports on an empirical study on class structures and identities in later life carried out in Malta. Qualitative data highlight three key classes inhabited by older people in Malta, namely, the working class, the middle class, and the dominant class. Results also demonstrate clearly that subjects held distinct class identities, albeit more along 'cultural' lines of distinction rather than economic formations. This article demonstrates that although older peoples no longer spontaneously and unambiguously use the language of class, they do not constitute thoroughly individualised beings who fly completely free from class relations. (OFFPRINT.) (RH)  
ISSN: 2014671X  
From : <http://doi.org/10.4471/rasp.2014.01>

## **EMPLOYMENT**

(See Also 234/52, 234/65)

234/41 Big change for small business; by Geoff Pearman.: AARP International.  
AARP International: The Journal, X, pp 50-53.  
Reports on the work of Partners in Change, an organisational and workforce consultancy based in Australia and New Zealand. Partners in Change has developed a unique cluster programme for small- to medium-sized businesses that are prepared to face some tough issues as they adapt to their ageing workforces. The author argues that the ageing of the workforce needs to be approached as a strategic issue as opposed to one of diversity. (JL)  
From : [journal.aarpinternational.org](http://journal.aarpinternational.org)

- 234/42 The growing discontents of older British employees: extended working life at risk from quality of working life; by Deborah Smeaton, Michael White.: Cambridge University Press. Social Policy and Society, vol 15, no 3, July 2016, pp 369-385.  
A key component of sustainable welfare policy is the extension of working life (EWL). Currently this aim is chiefly pursued by financial policies, neglecting the potential role of quality of working life (QWL) in attracting people to remain employed. National survey data for Britain in the years 1992, 2006 and 2012 demonstrate deteriorating overall job attitudes among older employees, following the changed competitive and technological conditions of the 1990s. The investigation goes on to diagnose aspects of the work situation implicated in adverse experiences of work among older employees. Work demands and the nature of work emerge as key areas of discontent, with additional evidence of insecurity, and dissatisfaction with pensions that have arisen during the recent recession. Policies that could help with QWL, with particular attention to the role of employers, are reviewed in the conclusion. (RH)  
ISSN: 14747464  
From : journals.cambridge.org/sps
- 234/43 Work longer, live healthier: the relationship between economic activity, health and government policy; by Gabriel H Sahigren, Age Endeavour Fellowship - AEF; Institute of Economic Affairs - IEA. London: Institute of Economic Affairs, May 2013, 50 pp (IEA Discussion paper, no 46). In the past 50 years, labour market participation among older people has declined significantly, though the trend has reversed a little in recent years. In the UK, there has been a significant decrease in the employment rate among older men. Research presented in this paper indicates that being retired decreases physical, mental and self-assessed health. Adverse effects increase as the number of years spent in retirement increases. However, results vary depending on the model and research strategy used, as with these examples: that retirement decreases the likelihood of being in "very good" or "excellent" self-assessed health by about 40%; that retirement increases the probability of suffering from clinical depression by about 40%; or that retirement increases the probability of having at least one diagnosed physical condition by about 60%. The author suggests that higher state pension ages are not only possible (given longer life expectancy) and desirable (given the fiscal costs of state pensions), but later retirement should lead to better average health in retirement. As such, the government should remove impediments to later retirement that are to be found in state pension systems, disability benefit provision and employment protection legislation. (RH)  
From : Institute of Economic Affairs, 2 Lord North Street, London SW1P 3LB.

## ENVIRONMENTAL ISSUES

(See Also 234/88)

- 234/44 Environmental design that supports healthy aging: evaluating a new supportive living facility; by Steve Friesen, Suzette Bremault-Phillips, Leanne Rudrum, Laura G Rogers.: Taylor and Francis. Journal of Housing for the Elderly, vol 30, no 1, January-March 2016, pp 17-33.  
The environments in which people live contribute to their health. This evaluation of a new seniors assisted living facility in Alberta, Canada studied the role of the built environment on healthy ageing. An environmental design survey was used to examine resident satisfaction and place attachment as a way to increase awareness of person-environment fit. Surveyed residents reported high levels of satisfaction with the built environment, and satisfaction scores were positively correlated with measures of place attachment. The results of this evaluation increases our understanding of how the built environment affects older people in residential living facilities, and the value of measures examining person-environment fit. (RH)  
ISSN: 02763893 From : www.tandfonline.com

## FALLS

- 234/45 Activity, balance, learning, and exposure (ABLE): a new intervention for fear of falling; by Julie Loebach Wetherell, Kristen Johnson, Douglas Chang ... (et al.): Wiley Blackwell. International Journal of Geriatric Psychiatry, vol 31, no 7, July 2016, pp 791-798.  
Fear of falling is an important problem among older adults, even those with relatively low rates of objective fall risk who are often overlooked as targets for intervention. In this study the authors developed and pilot tested a new intervention known as Activity, Balance, Learning, and Exposure (ABLE) in a sample of 10 older adults with excessive fear of falling. The ABLE intervention integrated exposure therapy and cognitive restructuring with a home safety evaluation and an exercise programme and was conducted in the home. In this pilot project ABLE was jointly conducted by a physical therapist and a psychologist with expertise in geriatric anxiety disorders. The intervention was feasible and acceptable and resulted in decreases in fear and activity avoidance for most participants. One participant experienced an injurious fall. A number of important lessons were learned resulting in modifications to the inclusion criteria, assessments and



intervention over the course of this pilot study. Results suggest that ABLE has promise for treating excessive fear of falling in older adults and support testing the intervention in a larger randomised trial. (JL)  
ISSN: 08856230 From : [www.orangejournal.org](http://www.orangejournal.org)

234/46

Are older adults receiving evidence-based advice to prevent falls post-discharge from hospital?; by Den-Ching A Lee, Ted Brown, Rene Stolwyk ... (et al.): Sage.  
Health Education Journal, vol 75, no 4, June 2016, pp 448-463.  
Older adults experience a high rate of falls when they transition to community living following discharge from hospital. The objective of this study was to describe the proportion of older adults who could recall having discussed falls and falls prevention strategies with a health professional within six months following discharge from hospital. A secondary objective was to describe the recalled content of those discussions and the strategies recommended and/or undertaken to prevent falls. Study participants were a prospective cohort study of 155 older adults surveyed prior to discharge from hospital, of whom 123 were followed up at month 3 and/or month 6 in the community post-discharge. Participants were recruited from three Australian hospitals. Questionnaires captured predictive factors that may predispose to a fall and data related to the objectives being examined. Of the 123 participants who had at least one follow-up, 54 reported discussing falls with a health professional (49 discussed falls with their general practitioners). Of the 54 participants who recalled having a discussion, 33 commented that they were asked whether they had fallen over. Only six discussed interventions to prevent falls. However 44 stated that they attempted a total of 53 strategies to prevent falls post-discharge. Of these strategies, 40 had an absence of evidence of effectiveness, 11 had evidence of effectiveness, while two had either evidence of no benefit/harm or evidence of harm for the prevention of falls. In all, 53 participants reported falling post-discharge but 42% of them did not recall discussing falls with their health professional. There is considerable scope for health professionals, especially general practitioners, to increase the frequency with which they discuss falls and evidence-based interventions to prevent falls in this population. (JL)  
ISSN: 00178969 From : [hej.sagepub.com](http://hej.sagepub.com)

234/47

Quality of Austrian and Dutch falls-prevention information: a comparative descriptive study; by Daniela Schoberer, Donja M Mijnaerends, Monica Flidner ... (et al.): Sage.  
Health Education Journal, vol 75, no 2, March 2016, pp 220-234.  
The aim of this study was to evaluate and compare the quality of written patient information material available in Austrian and Dutch hospitals and nursing homes pertaining to falls prevention. Written patient information material was independently evaluated by two assessors using the 36-item Ensuring Quality Information for Patients (EQIP) scale with regard to content, structure and identification data. EQIP global scores were calculated and country- and institution-specific (hospitals and nursing homes) differences were analysed. The written patient information material available in Dutch hospitals had a significantly higher EQIP mean score than that in Austrian hospitals. The difference in EQIP global score between the countries was not significant for the written patient information material in nursing homes. Sub-scale analyses indicated that Dutch institutions reached significantly higher mean values in the global scores for content and structure than Austrian ones. Although Dutch written patient information material pertaining to falls prevention was of higher quality than that in Austria, both countries suffered from shortcomings, especially with regard to content and identification data. Authors of written patient information material face a great challenge in taking consumer involvement and evidence-based criteria into account. (JL)  
ISSN: 00178969  
From : [hej.sagepub.com](http://hej.sagepub.com)

## **FAMILY AND INFORMAL CARE**

(See 234/16)

## **FRAILTY**

234/48

Frailty in self-neglecting older adults: a secondary analysis; by Jessica L Lee, Jason Burnett, Carmel B Dyer.: Routledge.  
Journal of Elder Abuse and Neglect, vol 28, no 3, June-July 2016, pp 152-162.  
Self-neglect (SN) and frailty in older adults is associated with increased disability and mortality. Despite these commonalities, there have been no studies objectively assessing frailty in older adults who SN. This secondary analysis classified frailty in 37 older adults with Adult Protective Services (APS) validated SN using the Fried Frailty Phenotype (FFP) of weight loss, weakness, exhaustion, activity level, and walking speed. Overall, 3% were classified as robust, 62% as pre-frail, and 35% as frail. Most (72%) were overweight or obese, with clinically significant decreases in activity level (60%) and walking speed (97%). Compared to the original FFP

population, older adults who self-neglect exhibit important differences in frailty phenotypes. Finding that the largest percentage of older adults who self-neglect were pre-frail indicates a critical opportunity for intervention to reduce this population's future functional decline and mortality. (RH)

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## GOVERNMENT AND POLICY

(See 234/54)

## GRANDPARENTS

234/49

The experience, contributions, and resilience of grandparents of children with autism spectrum disorder; by Jennifer Hillman, Alison R Marvin, Connie M Anderson.: Routledge.

Journal of Intergenerational Relationships, vol 14, no 2, April-June 2016, pp 76-92.

Autism Spectrum Disorder (ASD) affects 1 in 68 children in the United States and has been associated with significant stress on nuclear families. Little is known about the grandparents of these children, however, including their first-person, intergenerational experience and potential family contributions. A national, online survey of 1,870 grandparents of grandchildren with ASD revealed that they make significant monetary contributions toward therapeutic needs and frequently play an essential caregiving role. 43% of the grandparents reported making personal sacrifices such as drawing upon their retirement funds or putting off retirement; and 25% of the grandparents moved or combined households to support a grandchild on the autism spectrum. Consistent with resilience theory, the majority of grandparents reported that they were coping fairly or very well in relation to their grandchild's ASD, although they did express significant worry for their adult son's or daughter's well-being. However, 12% of grandparents reported that they were coping poorly. Recommendations for future research and public health policy are provided. (RH)

ISSN: 15350770 From : <http://www.tandfonline.com>

234/50

The joy of grandparenting: a qualitative analysis of grandparents; by Daniel H Mansson.: Routledge.

Journal of Intergenerational Relationships, vol 14, no 2, April-June 2016, pp 135-145.

According to Socioemotional Selectivity Theory (L I Carstensen, 1995), people become emotionally selective as they grow older, and therefore choose to sustain primarily their closest relationships (i.e. family relationships), including their grandparent-grandchild relationships. Thus, to provide practical suggestions for grandchildren and parents of grandchildren, this study examined what grandparents (N = 104) find most rewarding about being grandparents. The participants completed a survey in which they were asked to answer the question: "In your experience, what are the best parts of being a grandparent?" The 586 responses were coded in accordance with V Braun and V Clarke's (2006) recommendations for thematic analyses, which resulted in five distinct themes: maturation, mutual affection, pride, shared activities, and teaching and learning. (RH)

ISSN: 15350770 From : <http://www.tandfonline.com>

234/51

Positive affect and depressive symptoms: what dimensions of grandfather involvement matter?; by James S Bates, Alan C Taylor.: Routledge.

Journal of Intergenerational Relationships, vol 14, no 2, April-June 2016, pp 93-103.

The mental health of middle-aged and older men is an understudied dimension of human development that has implications for grandfathers' involvement in the lives of their grandchildren. Grandfather involvement is defined as the degree of engagement in the process of building and maintaining relationships with grandchildren and comprises the concepts of participation in activities, commitment, and contact frequency. The authors used the Grandfather Involvement and Health Survey (data collected mainly in New York) and structural equation modelling techniques, to test two models exploring how grandfather involvement is associated with two aspects of mental health, positive affect and depressive symptoms. (RH)

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## HEALTH AND WELLBEING

(See Also 234/43, 234/115)

234/52

'Workplace wellness': using psychological formulation and leadership to enhance staff wellbeing; by Ian Scott, Serena Sharma.: British Psychological Society.

Psychology of Older People: The FPOP Bulletin, no 135, July 2016, pp 39-46.

In 2013, Slough Community Mental Health Team (CMHT) for older people became one of the first Listening into Action (LiA) Pioneer Teams in Berkshire Healthcare NHS Foundation Trust.

LiA is a method of change that allows ideas to emerge from the grassroots of an organisation, to create changes that are readily bought into by staff. The Team's Principal Psychologist (first author) submitted the LiA project as an idea for service development and led the Team through the piece of work over one year. The resulting changes in well-being were monitored longitudinally. Towards the end of the process, staff were re-interviewed, and the authors thematically analysed interview answers. In summary, this report describes a service development approach and illustrates how psychological leadership can galvanise teams. (RH)

ISSN: 20528914

From : <http://www.bps.org.uk/networks-and-communities/member-microsite/dcp-faculty-psychology-older-people-fpop>

## **HEALTH CARE**

(See Also 234/16, 234/27, 234/66)

- 234/53 Pressure points: carers and the NHS; by Carers UK. London: Carers UK, 2016, 25 pp (Research summary).  
Carers UK examined the role of carers in reducing emergency admissions and delayed transfers of care from hospital. Carers who had used 999 or Accident & Emergency (A&E) services over the previous year had done so because of a lack of access to other community health and social care services. This research summary also looks at preventing emergency care admissions, and how carers are not being consulted or involved in discharge from hospital - or only at the last minute. It finds that when carers are consulted about the discharge process, they are more likely to say that they feel they have a choice about caring for the person they look after. Carers UK make 11 recommendations about how vital it is that carers are identified and supported as a group, and for promoting the development of a Carer Friendly NHS. Funding for social care also need to improve over the short and longer term; and NHS Trusts, CCGs and local authorities need to work on integrated discharge policies. Case studies and examples of good practice illustrate ways in which improvements to carers' experiences can be achieved. (RH)  
From : <http://www.carersuk.org/for-professionals/policy/policy-library/pressure-points-carers-and-the-nhs>

## **HEALTH SERVICES**

(See Also 234/68)

- 234/54 The EU covenant; by Anne-Sophie Parent.: AARP International.  
AARP International: The Journal, 2016, pp 74-77.  
In this article the author argues the need to bring the EU's health and long-term care infrastructure into alignment with the projected increase of ageing and older citizens. By helping local and regional authorities to meet their demographic challenges in innovative and sustainable ways, the EU Covenant is expected to play an important role in reducing geographical inequalities and in contributing to increased healthy life expectancy in Europe. (JL)  
From : [journal.aarpinternational.org](http://journal.aarpinternational.org)
- 234/55 Health check: the NHS and market reforms; by Kristian Niemietz, Age Endeavour Fellowship - AEF; Institute of Economic Affairs - IEA. London: Institute of Economic Affairs, October 2014, 52 pp (IEA Discussion paper, no 54).  
Reforms of the National Health Service (NHS) in the early 21st century introduced some degree of choice and competition. This paper reviews performance of the NHS, and compares it with that of other health systems. It discusses the successes and shortcomings of the reform process, also proposals for competition for improving healthcare in England. It includes some comparative statistics for OECD countries in relation to 5-year mortality rates of cancer and stroke patients, and age-standardised rates of mortality amenable to healthcare. The perspective is of healthcare as being amenable to market forces. (RH)  
From : Institute of Economic Affairs, Lord North Street, London SW1P 3LB.
- 234/56 Report of the Mid Staffordshire NHS Foundation Trust public inquiry: executive summary; presented to Parliament pursuant to Section 26 of the Inquiries Act 2005; by Robert Francis (chair), Mid Staffordshire NHS Foundation Trust Public Inquiry. London: TSO, February 2013, 125 pp (HC 2012/13 947).  
A summary of the final report of the public inquiry into the Mid Staffordshire NHS Foundation Trust, which investigated the poor care provided to by the main hospital serving Stafford and its surrounding area. The inquiry examined the operation of the commissioning, supervisory and regulatory organisations in relation to their monitoring role at Mid Staffordshire NHS Foundation Trust between January 2005 and March 2009. This included an examination of the culture and systems of those organisations, and why problems at the Trust were not identified sooner. This

executive summary provides details of the background and scope of the inquiry and highlights key findings. The findings provide details of early warning signs on poor standards of care, analysis of evidence, lessons learned and key recommendations. A table summarises the 290 recommendations made.

A dedicated weblink (<https://www.gov.uk/government/publications/report-of-the-mid-staffordshire-nhs-foundation-trust-public-inquiry>) - gives links to the main three volume report (ISBN 9780102981469, HC 898 2012-13): Vol 1 (692 pp); Vol 2 668 pp; and Vol 3 (434 pp).

A further weblink (<https://www.gov.uk/government/collections/mid-staffordshire-nhs-foundation-trust-news-and-publications>) provides links to documents and information on the significant failings in quality of care at Mid Staffordshire NHS Foundation Trust since 2009, including an overview of Monitor's actions and the future of patient services in Mid Staffordshire. (RH)

From: <http://webarchive.nationalarchives.gov.uk/20150407084003/http://www.midstaffpublicinquiry.com/sites/default/files/report/Executive%20summary.pdf>

## HOME CARE

234/57

Trends in the informal and formal home-care use of older adults in the Netherlands between 1992 and 2012; by Joukje C Swinkels, Bianca Suanet, Dorly J H Deeg, Marjolein I Broese van Groenou.: Cambridge University Press.

*Ageing and Society*, vol 36, no 9, October 2016, pp 1870-1890.

This study investigates trends in, and the interdependence of, the use of informal and formal home care of community-dwelling older people over the last two decades in the context of governmental reform of long-term care services and modernisation of informal relationships. Seven observations of the Longitudinal Ageing Study Amsterdam (LASA) covering from 1992 to 2012 were analysed using multi-level logistic regression analysis. The sample entailed 9,585 observations from 3,574 respondents, aged 65 to 85 years and living independently at each time of measurement. Measures included formal and informal care use, health, physical and cognitive limitations, socio-demographics, partner status, social network, privately paid help and sense of mastery. Results showed that between 1992 and 2012, formal home-care use increased slightly, while there was a large decrease in the use of informal care. Multivariate multi-level logistic regression analyses showed a substitution effect between formal and informal care use which decreased over time. Analyses also showed improved cognitive functioning, increased partner availability and social network size, as well as increased use of privately paid care over time. Nevertheless, these positive trends did not explain the large decrease in informal care use. The results regarding informal care use suggest a societal trend of weakened informal solidarity, reflecting increased individualisation and increased availability of formal home care. The decreased substitution effect suggests that, in agreement with current reforms of long-term care, complementary or supplementary forms of care use may be more common in the near future. (RH)

ISSN: 0144696X From : [journals.cambridge.org/aso](http://journals.cambridge.org/aso)

## HOMELESSNESS

234/58

A literature review of homelessness and aging: suggestions for a policy and practice-relevant research agenda; by Amanda Grenier, Rachel Barken, Tamara Sussman ... (et al).: Cambridge University Press.

*Canadian Journal on Aging*, vol 35, no 1, March 2016, pp 28-41.

Homelessness among older people is a growing concern across Canada and is expected to rise with demographic change. Yet current knowledge, policies and practices on homelessness largely focus on younger populations. Likewise research and policies on ageing typically overlook homelessness. Responses to homelessness among older people must address complex needs related to health, income security and housing. Based on a comprehensive literature review, this article outlines the existing and needed research with regards to homelessness among older people. The authors clarify the intersections of ageing and homelessness; review the relevant statistics, including estimated prevalence; discuss pathways and variations in experience; and identify gaps in knowledge. They conclude with a call for an inclusive research agenda that will help build policies and practices to reduce and ultimately to eliminate homelessness among older people in Canada. (JL)

ISSN: 07149808 From : [journals.cambridge.org/cjg](http://journals.cambridge.org/cjg)

## HOSPICE CARE

234/59

Bridging the gap: strengthening relations between hospices and Muslims of Britain; by Sughra Ahmed, Naved Siddiqi, Woolf Institute; Hospice UK; Together for Short Lives. Cambridge: Woolf Institute, 2015, 45 pp.

Hospice UK and Together for Short Lives commissioned this report with the aim of learning how hospices and British Muslim communities can mutually strengthen engagement, so that hospices

may provide the support needed by children and adults. Using research carried on over a 6-month period, the report looks at what is important to Muslims towards the end of life, and the barriers to engagement between hospices and Muslims in Britain. It also covers learning from national workshops, from the data, and from examples of best practice. Recommendations focus on three core areas. First, hospices and service providers should include information on religion and ethnicity in their records, to be used at registration of death and in preparing burial services. Second, hospices need to communicate and engage with local Muslim organisations, for example through community radio and television. Third, hospices, service providers and clinicians should seek specialist training programmes to better understand the "last journey" protocols and services. Joint training with mosques and Muslim burial services would also help in understanding what is needed from when a patient dies to the completion of burial rites of passage. (RH)

From : <https://www.hospiceuk.org/what-we-offer/publications?kwrdr=Bridging%20the%20gap>

## **HOSPITAL CARE**

234/60

Engaging with inpatient staff working on an older people's mixed functional and organic ward setting: a trainee experience of running a supervision group; by Mareike Suesse, Candy Stone.: British Psychological Society.

Psychology of Older People: The FPOP Bulletin, no 133, January 2016, pp 78-84.

A qualitative study with staff receiving psychological supervision on older adult inpatient units (Murphy, Osborne and Smith, 2013) suggested that supervision is a way of enabling staff to view their patients more as individuals and helped them to understand why patients are as they are. In light of this and similar studies in care homes and adult mental health units, a trainee and a consultant clinical psychiatrist describe a similar supervision group that had been set up at the request of the ward manager of an older adult inpatient ward with 16 female beds. They outline the training needs analysis and planning session, observing that the aim of a supervision group is to encourage reflection and thus improve practice. They consider the 'needs focused model' used in their fortnightly 45-60 minute sessions with 2-8 staff, who brought up difficult cases (involving patients with or without dementia). They note the mostly positive staff feedback, and discuss aspects of encouraging engagement. Although this supervision group was successful, a small minority of staff chose not to engage, despite being invited. The authors conclude that there is a role for supervision groups to write up case examples of successful experiences that would help educate those who do not support or understand how to use supervision. (RH)

ISSN: 20528914 From : <http://www.bps.org.uk/newtworks-and-communities/member-microsite/dcp-faculty-psychology-older-people-fpop>

## **HOUSING**

(See Also 234/112)

234/61

The design of mainstream housing for downsizers; by Janet Sutherland, Jonathan Tarbatt.: Taylor and Francis.

Journal of Housing for the Elderly, vol 30, no 2, April-June 2016, pp 214-235.

In the United Kingdom, the supply of new homes to the housing market tends to be focused either on "general-needs" housing, or on special needs housing for older people. Relatively few people move into homes that will support their independence as they age. This qualitative case study of a mainstream housing development has been compiled against a backdrop of chronic housing shortage and the UK government's recent Housing Standards Review. The development meets so-called Lifetime Homes in Lifetime Neighbourhoods standards, and identifies specific design and location features that have attracted "downsizers" to buy into it. (RH)

ISSN: 02763893

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

234/62

Staying put: factors associated with ageing in one's lifetime home: insights from the European context; by Celia Fernandez-Carro, Maria Evandrou.: Hipatia Press.

Research on Ageing and Social Policy, vol 2, no 1, July 2014, pp 28-56.

'Ageing in Place' is a theoretical-practical concept used to promote those policies that facilitate older people stay at home as alternative to institutionalisation. While the political application of the term seems to presuppose universal benefits for those who age at home, critical gerontology has questions alluding to the complexity of ageing process and the reductionist view that often underlies the institutional discourse around these policies. This article aims to shed light on the premise assumed by the 'Ageing in Place' implementation, by analysing factors associated to a particular type of older Europeans; and those with long-lasting residential trajectories. Using data from SHARE (the Survey of Health, Ageing and Retirement in Europe, wave 1, 2004), this work analyses the characteristics of those individuals aged 65 and over who for most of their life have presented a pattern of residential stability. The length of residential trajectory is assessed depending on socio-demographic characteristics, resources and support exchange networks and

residential conditions. Special attention is paid to regional variations, by comparing eleven countries of continental Europe. This article provides empirical findings that enhance the progression in an under-researched topic, residential immobility, by discussing the assumptions that underlie the implementation of 'ageing in place' policies in Europe, especially when it implies a disadvantaged living situation. (OFFPRINT.) (RH)

ISSN: 2014671X

From : <http://doi.org/10.4471/rasp.2014.02>

## **HOUSING WITH CARE**

(See Also 234/80, 234/101)

234/63

Changes in self-rated health during the transition to retired living among Medicare managed-care recipients; by Colby Lea, Ana Quinones, Heather Whitson (et al.): Taylor and Francis.

Journal of Housing for the Elderly, vol 30, no 1, January-March 2016, pp 75-87.

Moving into a retirement community may be precipitated by or bring about changes in health status. The authors hypothesised that moving into a retirement community would be associated with a decline in self-rated health (SRH), but that health-related factors would mitigate this association. They analysed data from 58,272 participants in Cohort 3 of the Medicare Health Outcome Survey. Individuals answered questions regarding living status in 2000 and 2002. Those who moved into a retirement community were compared with those who did not. The primary outcome was change in SRH. The authors created adjusted and unadjusted models. A total of 2,520 participants (4.4%) moved into retirement communities between 2000 and 2002. There were no substantial differences in the mean change in SRH between those who moved and those who did not. In adjusted and unadjusted models, moving was not significantly associated with changes in SRH. In an analysis stratified by SRH, only those with the best SRH had a significant decline in SRH during the move. SRH mainly remained stable for most people regardless of moving into a retirement community. These findings argue against environmental context being a main determinant of self-perceived health status among older adults. (RH)

ISSN: 02763893

From : [www.tandfonline.com](http://www.tandfonline.com)

234/64

Exploring the connection between personal space and social participation; by Brenda M Elias, Suzanne L Cook.: Taylor and Francis.

Journal of Housing for the Elderly, vol 30, no 1, January-March 2016, pp 106-121.

An innovative housing model that provides integrated support services to a mixed community of adults with physical, developmental, and mental health needs demonstrates how the use of social and personal space intersects with social participation levels. Case study findings from the first two years of this five-year research project at Reena Community Residence in York Region, Ontario, Canada will report on the lived experience of a diverse, multigenerational population as they make the transition from various residential settings and connect to a new "intentional community with supports". It is important when considering housing for older adults who are ageing in place to recognize that these tenants with special needs age much earlier than the rest of the population. Tenant responses define their personal space and environmental fit. Emerging levels of social participation are being recognized by the tenants as life-changing events. (RH)

ISSN: 02763893

From : [www.tandfonline.com](http://www.tandfonline.com)

## **INCOME AND PERSONAL FINANCE**

(See Also 234/26, 234/76)

234/65

Income from work: the fourth pillar of income provision in old age; by Gabriel Heller Sahlgren, Age Endeavour Fellowship - AEF; Institute of Economic Affairs - IEA. London: Institute of Economic Affairs, January 2014, 59 pp (IEA Discussion paper, no 52).

The Institute of Economic Affairs (IEA) has worked with the Age Endeavour Fellowship to produce reports such as this on the effects of work on ageing (<http://www.ageendeavour.org.uk/research>). This report asks why older people have low labour market participation, even with increased life expectancy. It considers the impact of disability and unemployment benefits on employment at older ages. It asks whether employment protection and anti-discrimination laws are useful or harmful; and whether there are negative side effects of raising employment at older ages. It concludes that reversing the steep decline in employment rates among older people since the mid 20th century is not going to be easy. However, the opinion is expressed that "less government involvement through state pension schemes, disability insurance and employment regulation increases the ability of individuals to determine their own work and retirement patterns." (RH)

From : Institute of Economic Affairs, Lord North Street, London SW1P 3LB.

## INEQUALITY AND HUMAN RIGHTS

(See Also 234/39)

- 234/66 Income inequities in health care utilization among adults aged 50 and older; by Margaret J Penning, Chi Zheng.: Cambridge University Press.  
Canadian Journal on Aging, vol 35, no 1, March 2016, pp 55-69.  
Equitable access to and utilisation of health services is a primary goal for many health care systems, particularly in countries with universal publicly funded systems. Despite concerns regarding potentially adverse implications of the 1990s health care policy and other reforms, whether and how income inequalities in service utilisation changed remains unclear. This study addressed the impact of income on physician and hospital utilisation from 1992-2002 among adults aged 50 and older in British Columbia. Those with lower incomes were found less likely to access general practitioner and specialist services but more likely to access hospital services. Income-related disparities in physician care increased over time; hospital care declined. Volume of GP and hospital care was inversely associated with income, however these differences increased regarding GP services only. Findings of declines in hospital-care access, accompanied by increasing income-related disparities in physician-services access, show that inequities are increasing within Canada's health care system. (JL)  
ISSN: 07149808  
From : [journals.cambridge.org/cjg](http://journals.cambridge.org/cjg)
- 234/67 The rights of older persons; by Rosa Kornfeld-Matte.: AARP International.  
AARP International: The Journal, 2015, pp 32-35.  
Report by the UN's first Independent Expert on the enjoyment of all human rights by older persons. The author proposes a mandate for the implementation of such rights, which include healthy ageing, age-friendly environments, autonomy and participation in all aspects of society. (JL)  
From : [journal.aarpinternational.org](http://journal.aarpinternational.org)

## INFORMATION AND COMMUNICATION TECHNOLOGY

(See 234/13)

### INTEGRATED CARE

- 234/68 Improving mental and physical healthcare for older adults: an inpatient service development project by frontline staff; by Nadia Majeed, Elaine Williams.: British Psychological Society.  
Psychology of Older People: The FPOP Bulletin, no 133, January 2016, pp 72-77.  
The complexities of working in older adults services where clients often experience co-morbid conditions can highlight the necessity for collaborative working between physical and mental healthcare providers. Three older adult mental and physical health wards based in a psychiatric and community hospital started a collaborative service development project to improve holistic patient care. The authors discuss how providing staff with the authority and autonomy to make organisational changes can have a positive impact for patients, staff and the NHS Trust. (RH)  
ISSN: 20528914  
From : <http://www.bps.org.uk/newtworks-and-communities/member-microsite/dcp-faculty-psychology-older-people-fpop>

### INTERGENERATIONAL ISSUES

- 234/69 Age Encounters: exploring age and intergenerational perceptions; by Briony Dow, Melanie Joosten, Simon Biggs, Helen Kimberley.: Routledge.  
Journal of Intergenerational Relationships, vol 14, no 2, April-June 2016, pp 104-118.  
Age Encounters was an Australian video documentary project, wherein 10 younger people (age 16-23) and 10 older people (age 65-89) were asked questions about age, ageism, and their perception of the other generation, including challenges the other group might face and whether they could identify possibilities for solidarity between the two generations. It was found that most intergenerational relationships are respectful and occur within the family. Any lack of generational understanding appeared to be due to a lack of relationships outside of the family, leading to a reliance on assumptions and recognized stereotypes. When opportunities for intergenerational relationships and shared spaces were available, the stereotypes did not apply. (RH)  
ISSN: 15350770  
From : <http://www.tandfonline.com>

- 234/70 Learn Together Cymru: Pan-Wales intergenerational learning project; by Teresa Walters.: Routledge.  
Journal of Intergenerational Relationships, vol 14, no 2, April-June 2016, pp 146-150.  
Learn Together Cymru (LTC) is funded by the Big Lottery Fund for Wales, is managed by Volunteering Matters UK, and is a volunteer-led intergenerational project aimed at improving children's basic skills and the well-being of the adult volunteers who support them. LTC builds on 5 years' experience of schools volunteering in Wales and on the National Programme for Reading Volunteers (NPRV) funded by the Welsh Government. Following evaluation of the NPRV, Volunteering Matters identified the need for a project such as LTC. This article outlines LTC's activities and lessons learned; and notes its unique features: organisational model, partnerships and that learning resources were developed. (RH)  
ISSN: 15350770  
From : <http://www.tandfonline.com>
- 234/71 Making intergenerational care a possibility in Australia: a review of the Australian legislation; by Katrina Radford, Deborah Oxlade, Anneke Fitzgerald, Nerina Vecchio.: Routledge.  
Journal of Intergenerational Relationships, vol 14, no 2, April-June 2016, pp 119-134.  
In the Australian context, the out-of-home care of children and respite service for older adults are segregated. Yet, internationally there has been a shift toward intergenerational programmes that purposefully bring together younger and older people for mutual benefits. This paper examines the enablers of, supports for, and constraints of introducing intergenerational care programmes (IGC) within the Australian legislation and regulations of child-care and aged-care programmes. In doing so, programme design features, workforce strategies, and built environment are considered. The literature indicates that the meshing of standards into IGC programmes provides an opportunity to make intergenerational care an attractive model for respite to caregivers and recipients of care, while providing intergenerational contact for younger families. Such a programme is likely to be cost effective with economies-of-scale workforce efficiencies. Future research will involve a needs assessment of potential consumers, to explore the possible demand for intergenerational care programmes within Australia before conducting a trial of different intergenerational care programmes.  
ISSN: 15350770  
From : <http://www.tandfonline.com>
- 234/72 Portuguese working group advocacy for intergenerational policies: challenges and results; by Marta Goncalves, Alan Hattlon-Yeo, Carla Branco.: Emerald.  
Working with Older People, vol 20, no 1, 2016, pp 30-35.  
The authors examine the benefits and challenges of the advocacy group for intergenerational policies that was created in Portugal in 2012, the European Year of Active Ageing and solidarity between Generations. The group conducted 9 closed group meetings every 3 months (average attendance of five members), and 6 public events bringing together researchers, policy makers, practitioners and civil society. The group was established as a response to the various social changes happening in Portugal as a consequence of the ageing population, low-birth rate and migration, leading to the need to explore new responses which are based both on the need to promote active ageing and intergenerational solidarity, and also the importance of family and state support to multigenerational families as a building block to strengthen communities. The paper sets the context of the changing social situation in Portugal, describes the process used through both closed and public meetings to discuss this, and then describes the perspectives of four core groups. Only by pooling resources and thinking intergenerationally will we be able to deliver the opportunities and support that citizens will need to enable them to age well across the life course. Drawing on this and the strong tradition of the family in Portugal it seeks to make the case that an intergenerational approach is essential to the country's future social well-being. (RH)  
ISSN: 13663666  
From : [www.emeraldgroupublishing.com/wwop.htm](http://www.emeraldgroupublishing.com/wwop.htm)

## **INTERNATIONAL AND COMPARATIVE**

(See Also 234/3, 234/17, 234/21, 234/22, 234/47, 234/72)

- 234/73 The Danish approach: how Denmark reinvented its elder care; by Manu Sareen.: AARP International.  
AARP International: The Journal, 2015, pp 54-57.  
Faced with a growing ageing population, Denmark has formulated a new strategy for caring for its older citizens. Activating care is a means to empower older people to live more independent lives with a high degree of self-care without having to depend on others. (JL)  
From : [journal.aarpinternational.org](http://journal.aarpinternational.org)



## LONELINESS AND SOCIAL ISOLATION

(See 234/110)

## LONG TERM CARE

(See Also 234/54)

- 234/74 Care perceptions among residents of LTC facilities purporting to offer person-centred care; by Leeann Donnelly, Michael I MacEntee.: Canadian Association on Gerontology. Canadian Journal on Aging, vol 35, no 2, June 2016, pp 149-160.  
This study explored qualitatively how residents of long-term care (LTC) facilities felt about and adapted to the care they received. The authors interviewed and observed a purposeful selection of older residents in seven facilities purporting to provide person-centred care. Interpretative descriptions from 43 personal interviews with 23 participants answered the question: How do residents perceive the care rendered in LTC facilities purporting to offer person-centred care? Three themes emerged: (1) the caring environment; (2) preservation of dignity; and (3) maintenance of personal autonomy. Participants were sympathetic to the nursing staff's workload, but felt distant from the staff. Participants gave examples of poor care and lack of empathy, human indignities and violations of personal autonomy caused by institutional policies they felt inhibited their ability to receive care based on their preferences. Overall they challenged the claims of person-centred care but adapted to cope with an environment that threatened their dignity and autonomy. (JL)  
ISSN: 07149808  
From : [journals.cambridge.org/cjg](http://journals.cambridge.org/cjg)

- 234/75 Partnership Program for long-term care insurance: the right model for addressing uncertainties with the future?: forum article; by Savannah Bergquist, Joan Coasta-Font, Katherine Swartz.: Cambridge University Press.  
Ageing and Society, vol 36, no 9, October 2016, pp 1779-1793.  
Public policies that provide incentives for higher middle-income people to purchase private long-term care insurance (LTCI) have been proposed as a way to shield large numbers of middle-income people from the risk of needing costly long-term care. A proposal to promote purchases of private LTCI that has gained modest traction in the United States of America is the Partnership Program. The structure and public-private nature of the Partnership Programs are reviewed along with the trends in sales of both regular private LTCI policies and Partnership LTCI policies, to show that both experienced low rates of purchase. Efforts to implement the Partnership Programs were very modest, in part because many were launched when the Affordable Care Act 2010 was passed. (The authors note that the Partnership for Long-Term Care Programme, or LTCP, was designed to potentially reduce the financial pressure on Medicaid to pay for LTC.) At the same time, several well-known insurers withdrew from selling private LTCI. Understanding why the Partnership Program is not a success provides lessons for other counties interested in creating similar public-private ventures. (RH)  
ISSN: 0144696X  
From : [journals.cambridge.org/aso](http://journals.cambridge.org/aso)

## MENTAL HEALTH

(See Also 234/18)

- 234/76 The Lichtenberg Financial Decision Screening Scale (LFDSS): a new tool for assessing financial decision making and preventing financial exploitation; by Peter A Lichtenberg, Lisa Ficker, Analise Rahman-Filipiak (et al.): Routledge.  
Journal of Elder Abuse and Neglect, vol 28, no 3, June-July 2016, pp 134-151.  
One of the challenges in preventing the financial exploitation of older adults is that neither criminal justice nor non-criminal justice professionals are equipped to detect capacity deficits. Because decision-making capacity is a cornerstone assessment in cases of financial exploitation, effective instruments for measuring this capacity are essential. The authors introduce a new screening scale for financial decision making that can be administered to older adults. To explore the implementation and assess the construct validity of the Lichtenberg Financial Decision Screening Scale (LFDSS), the authors conducted a pilot study of 29 older adults seen by APS (Adult Protective Services) workers and 79 seen by other professionals. Case examples are included. (RH)  
ISSN: 08946566  
From : <http://www.tandfonline.com>

- 234/77 The role of cognitive reserve on terminal decline: a cross-cohort analysis from two European studies: OCTO-Twin, Sweden, and Newcastle 85+, UK; by Dorina Cadar, Blossom C M Stephan, Carol Jagger ... (et al): Wiley Blackwell.  
International Journal of Geriatric Psychiatry, vol 31, no 6, June 2016, pp 601-610.  
Cognitive performance shows a marked deterioration in close proximity to death, as postulated by the terminal decline hypothesis. The effect of education on the rate of terminal decline in the oldest old (i.e. persons 85+ years) has been controversial and not entirely understood. In the current study the authors investigated the rate of decline prior to death with a special focus on the role of education and socioeconomic position, in two European longitudinal studies of ageing: the Origins of Variance in the Old-Old: Octogenarian Twins (OCTO-Twin), based in Sweden, and the Newcastle 85+ study. A process-based approach was used in which individuals' cognitive scores were aligned according to distance to death. In a coordinated analysis, multilevel models were employed to examine associations between different markers of cognitive reserve (education and socioeconomic position) and terminal decline using the mini-mental state examination (MMSE), controlling for age at baseline, sex, dementia incidence and time to death from the study entry to the time of death within each cohort. The current findings suggest that education was positively associated with higher MMSE scores prior to death in the OCTO-Twin, but not in the Newcastle 85+ study, independent of socioeconomic position and other factors such as baseline age, sex and time to death from the study entry. However education was not associated with the rate of terminal decline in both of these studies. These results offer only partial support to the cognitive reserve hypothesis and cognitive performance prior to death. (JL)  
ISSN: 08856230 From : [www.orangejournal.org](http://www.orangejournal.org)

### MENTAL HEALTH SERVICES

(See Also 234/29, 234/30, 234/32, 234/33, 234/35, 234/68)

- 234/78 Collaborating with service users to form a culturally tailored intervention: Punjabi Cognitive Stimulation Therapy; by Serena Sharma, Ian Scott.: British Psychological Society.  
Psychology of Older People: The FPOP Bulletin, no 133, January 2016, pp 32-39.  
Following service user requests, a culturally adopted version of Cognitive Stimulation Therapy (CST, A L Spector et al, 2001) was delivered in Punjabi at Slough Memory Clinic between May and August 2014. As far as the authors know, this was the first time CST had been delivered in a non-English language within a UK memory clinic (S Sharma, 2014). In a live, symbiotic manner, Punjabi group members led the adaptation process of the CST programme to suit their cultural requirements. This article highlights the importance of service user involvement in both the planning and adaptation stages of Punjabi CST. (RH)  
ISSN: 20528914  
From : <http://www.bps.org.uk/newnetworks-and-communities/member-microsite/dcp-faculty-psychology-older-people-fpop>
- 234/79 Patients' and carers' experiences of UK memory services; by Emma Hailey, Sophie Hodge, Alistair Burns, Martin Orrell.: Wiley Blackwell.  
International Journal of Geriatric Psychiatry, vol 31, no 6, June 2016, pp 676-680.  
The objective of this study was to test the validity of an accreditation programme for memory services in the UK by investigating whether different levels of accreditation status (excellent compared with accredited) were reflected in patients' and carers' reported satisfaction. The study used a comparison of survey data from patient and carer feedback questionnaires collected from services as part of the accreditation process. 583 patient questionnaires and 663 carer questionnaires were returned from 41 services. Patients and carers who attended memory services which were later accredited as excellent were more likely than those who had visited accredited services to have: been given written information about a variety of topics; been asked for feedback about using the memory service; and had found it easier to get to their appointments. Carers attending services accredited as excellent were more likely to have been offered an assessment of their needs. Patients and carers had very good experiences of memory services overall whether they had standard or excellent accreditation. However excellent services were consistently better on a number of factors. This provides further support that the accreditation process is an important indicator of the quality of memory services. (JL)  
ISSN: 08856230 From : [www.orangejournal.org](http://www.orangejournal.org)

### MENTAL ILLNESS

- 234/80 Mental illness in assisted living: challenges for quality of life and care; by Leslie A Morgan, Rosa Perez, Ann Christine Frankowski (et al): Taylor and Francis.  
Journal of Housing for the Elderly, vol 30, no 2, April-June 2016, pp 185-198.  
An unknown number of mentally ill older people in the United States receive care in assisted living, along with people facing physical or cognitive challenges. While dementia is familiar in

assisted living, the authors' data indicate that neither staff nor residents are prepared to work or live with the mentally ill. Challenges are created for professionals, since these residents bring diverse needs. Daily inter-resident interactions are also disrupted or stressful. Qualitative data describe the impacts on quality of resident life, as well as care and management dilemmas identified within five assisted-living settings with a varying presence of mental illness among residents. (RH)

ISSN: 02763893

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

## NEIGHBOURHOODS AND COMMUNITIES

- 234/81 Building an 8-80 city: a simple concept for creating great cities for all; by Gil Penalosa.: AARP International.  
AARP International: The Journal, 2015, pp 80-83.  
Describes the work of 8-80 Cities, a Toronto-based non-profit organisation that aims to enhance urban quality of life and well-being. The 8-80 city concept looks at how cities can be transformed into places that prioritise people, reflect social equity in the public realm and encourage sustainable lifestyles for people of all ages and abilities, from eight to 80 years and more. (JL)  
From : [journal.aarpinternational.org](http://journal.aarpinternational.org)
- 234/82 Building dementia-friendly communities: a priority for everyone; by Geraldine Green, Louise Lakey, Alzheimer's Society. London: Alzheimer's Society, 2013, 78 pp.  
The National Dementia Declaration for England (2010) identified that people with dementia want to live in communities that give them choice and control over their lives, provide services and support designed around their needs, and to feel valued and understood, and part of family, community and civic life. This report provides evidence of dementia-friendly communities in England, Wales and Northern Ireland from the perspective of people affected by dementia. It uses the results of a survey of people with dementia (510 respondents) distributed by Alzheimer's Society staff and other networks in Autumn 2012 (referred to as the DFCsurvey) to explore the barriers that people face in their community, how they would like to be engaged in their local area, and the support they need to enable them to do so. Overall, the report aims to provide guidance to areas that are looking to become dementia-friendly, and to provide extra evidence for those already committed to becoming dementia-friendly. Evidence from people with dementia and their carers is collated alongside examples of projects that are making a difference for people with dementia. This information is used both to provide a definition of a dementia-friendly community, and to suggest 10 key areas of focus for communities to consider in working to become dementia friendly. These 10 key areas are: challenge stigma and build understanding; accessible community activities; acknowledge potential; ensure an early diagnosis; practical support to enable engagement in community life; community-based solutions; consistent and reliable travel options; easy to navigate environments; and respectful and responsive businesses and services. While there are some excellent examples of communities that are adapting themselves to the needs required by dementia, many people with dementia do not feel supported and a part of their local area; and are not able to take part in activities that they enjoyed before they developed the condition. Loneliness, feeling isolated and lack of confidence were identified as major barriers. An executive summary (10 pp) is also available ([https://www.alzheimers.org.uk/site/scripts/download\\_info.php?fileID=1918](https://www.alzheimers.org.uk/site/scripts/download_info.php?fileID=1918)). (RH)  
From : Alzheimer's Society, Devon House, 58 St Katharine's Way, London E1W 1JX. Weblink: <https://www.alzheimers.org.uk/site/scripts/downloads.php?categoryID=200436>
- 234/83 A city of firsts; by Susan Cooley.: AARP International.  
AARP International: The Journal, 2015, pp 71-74.  
Describes Manchester's journey to becoming an age-friendly city promoting older people's quality of life and well-being, beginning with the launch of its Valuing Older People (VOP) programme in 2003 and the establishment of an Older People's Board in 2004. In 2010 Manchester became the first UK city to join the World Health Organisation's (WHO) Global Network of Age-Friendly Cities and Communities, part of the first wave of a dozen cities to pledge continual improvement in support of the WHO's eight age-friendly domains of city life. (JL)  
From : [journal.aarpinternational.org](http://journal.aarpinternational.org)
- 234/84 Defining a framework for age-friendly interventions; by Allen Glicksman, Lauren Ring, Morton H Kleban.: Taylor and Francis.  
Journal of Housing for the Elderly, vol 30, no 2, April-June 2016, pp 175-184.  
Although there is no generally agreed upon definition of the term age friendly, almost all definitions share the same health related goals. Verena H Menec et al (Canadian Journal on Aging, vol 30, No 3, 2011, pp 479-493) have offered a conceptual framework defining age friendly as efforts to increase connectivity. In the present article, the authors' analysis was designed to test the hypothesis that targets of many age friendly efforts (food, housing, transport and social capital)

are associated with these health outcomes. They discovered that the two areas associated with increasing connectivity, transportation and social capital, were associated with the age-friendly health related goals. They conclude that Menec's framework provides a useful way of defining age friendly interventions. (RH)

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

- 234/85 Designing an ageless social community: adapting a New Urbanist social core to suit baby boomers in later life; by Nichole Campbell, Daejin Kim.: Taylor and Francis.  
Journal of Housing for the Elderly, vol 30, no 2, April-June 2016, pp 156-174.  
Given that many older adults have a preference for ageing in place, it is important that neighbourhood design supports successful ageing. Design also plays an essential role in supporting social relationships. This American qualitative study aimed to identify New Urbanist neighbourhood and social space design attributes that support older residents' physiological and social needs. This case study used keyword-in-context analysis with focus group interview data, to identify domains supporting social interaction for residents ageing in place including: location factors, social factors, design factors, and programmatic factors. (RH)  
ISSN: 02763893  
From : <http://www.tandfonline.com>
- 234/86 Insights from older slum dwellers; by Isabella Aboderin, Hilda Akinyi Owii.: AARP International.  
AARP International: The Journal, 2016, pp 67-68.  
First of two short case studies that offer insights into age-friendly communities around the world. This study from Nairobi, Kenya, examines the extent of age-friendliness in two slums, based on older residents' own priorities and needs. (JL)  
From : [journal.aarpinternational.org](http://journal.aarpinternational.org)
- 234/87 A new measure of age-friendliness; by Jana Lynott.: AARP International.  
AARP International: The Journal, 2016, pp 59-62.  
Describes and introduces the Livability Index, a groundbreaking tool developed by AARP that scores every neighbourhood and community in the United States for the services and amenities that affect people's lives the most. The Index measures 60 indicators spread across seven categories of livability: housing, neighbourhood, transportation, environment, health, engagement and opportunity. These categories of livability closely align with the eight domains of age-friendliness used by the World Health Organization. (JL)  
From : [journal.aarpinternational.org](http://journal.aarpinternational.org)
- 234/88 Outdoor environmental supportiveness and older people's quality of life: a personal projects approach; by Angela Curl, Catharine Ward Thompson, Susana Alves, Peter Aspinall.: Taylor and Francis.  
Journal of Housing for the Elderly, vol 30, no 1, January-March 2016, pp 1-16.  
The authors present an approach to exploring the role of environmental supportiveness in contributing to older people's quality of life (QoL), based on B R Little's ecological model (2010) in which individual and situational factors influence the personal projects of salience to individuals. Personal projects are self-generated and purpose-oriented activities or goals in which an individual is engaged (Little, 1983). The efficacy with which the pursuit of these activities is achieved depends on the nature of the project and the degree to which it is supported by external factors such as the environment. The authors explore the relationship between the outdoor environment and QoL, drawing on the concept of "environmental support" as presented by T Sugiyama and C Ward Thompson (2007). There is a positive relationship between the number of outdoor personal projects older people participated in and measures indicative of their QoL. The relationship between perceived environmental support and QoL measures was significant in projects involving nature but not for other project types. The study was undertaken as part of the IDGO (Inclusive design for Getting Outdoors) research project, supported by the Engineering and Physical Sciences Research Council (EPSRC; Project No GR/S29102/01). (RH)  
ISSN: 02763893  
From : [www.tandfonline.com](http://www.tandfonline.com)

## **OLDER WOMEN**

(See Also 234/14, 234/15, 234/97, 234/108)

- 234/89 "It's my body, my future": older women's views of their interactions with physicians; by Hazel MacRae.: Routledge.  
Journal of Women and Aging, vol 28, no 3, [May-June] 2016, pp 211-224 (IN: Journal of Women and Aging, vol 28, nos 1-3, 2016).  
Based on data obtained from in-depth, qualitative interviews conducted with 30 older Canadian

women, this article examines older women's experiences with, and views of, physicians. The research participants report a very high level of satisfaction with the patient-physician relationship; however, they also report physician shortcomings. Findings indicate that participants' satisfaction with the patient-physician relationship was influenced by "stories about other doctors", rationalisations and justifications, and a high level of patient assertiveness. (RH)

ISSN: 08952841

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

234/90

Are baby boomer women unique?: The moderating effect of birth cohort on age in substance use patterns during midlife; by Stephanie Elias Sarabia, James I Martin.: Routledge.

Journal of Women and Aging, vol 28, no 2, [March-April] 2016, pp 150-160 (IN: Journal of Women and Aging, vol 28, nos 1-3, 2016).

This study examined the relationships of age to use of alcohol, marijuana and illicit drugs, and misuse of prescription drugs among midlife American women, and whether these relationships are modified by birth cohort. Structural Equation Modelling was used to analyse National Survey on Drug Use and Health data (for 1979 and 1994), which included 2,035 baby boomer and silent generation cohort women (ages 30 to 55). Midlife women across cohorts reduced alcohol and marijuana use, but not illicit and prescription drug misuse, as they aged. A modifying effect of birth cohort was not supported, but findings did support differential ageing effects across substances. Implications are discussed. (RH)

ISSN: 08952841

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

234/91

Contextualizing older women's body images: time dimensions, multiple reference groups, and age codings of appearance; by Clary Krekula.: Routledge.

Journal of Women and Aging, vol 28, no 1, January-February 2016, pp 58-76 (IN: Journal of Women and Aging, vol 28, nos 1-3, 2016).

The article sheds light on older women's body images and considers assumptions that women's ageing is more painful and shameful than men's ageing, since men are not expected to live up to youthful beauty norms - the so-called double standard of ageing hypothesis. Based on 12 qualitative interviews with women from the age of 75 from the Stockholm, Sweden area, the author argues that older women have access to a double perspective of beauty, which means that they can relate to both youthful and age-related beauty norms. The results also illustrate that women's body image is created in a context where previous body images are central, and that this time perspective can contribute toward a positive body image. (RH)

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

234/92

Positives and negatives of online dating according to women 50+; by Carla Vandeweerd, Jaime Myers, Martha Coulter (et al.): Routledge.

Journal of Women and Aging, vol 28, no 3, [May-June] 2016, pp 259-270 (IN: Journal of Women and Aging, vol 28, nos 1-3, 2016).

To understand the positives and negatives of online dating according to the lived experience of older women, telephone interviews were conducted with 45 American women aged 50+ living within 50 miles of zip code 33602 (Tampa, Florida) who date online. Interviews were audio recorded, transcribed verbatim, and thematically team coded. The opportunity to expand one's social network for both friendships and romantic partners, the ability to control dating risks and pace of relationship formation, and knowing more about one's partner were significant reported benefits of online dating. Dating online also includes unique risks, such as pervasive lying, attempted financial exploitation in the form of scammers, and unwanted electronic sexual aggression. (RH)

ISSN: 08952841

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

234/93

Strengthening resources for midlife and older rural women who experience intimate partner violence; by Lori E Weeks, Colleen Macquarrie, Lorraine Begley (et al.): Routledge.

Journal of Women and Aging, vol 28, no 1, January-February 2016, pp 46-57 (IN: Journal of Women and Aging, vol 28, nos 1-3, 2016).

Little is known about midlife and older women who experience intimate partner violence (IPV) living in rural places and their resource needs. Guided by a strengths perspective, the authors provide insights into resources that midlife and older women use, or would like to use, in their journey in leaving an abusive partner. Eight women from the Maritime Provinces in Canada who had left an abusive partner participated in a face-to-face interview. They drew on a wide variety of paid and unpaid resources; but each woman had a unique set of resources that contributed to her being able to make such a significant life transition. It is clear that we need to have a variety of formal and informal resources available to older women experiencing IPV in rural areas, and new forms of resources need to be developed. The results of this study also indicate that increased

efforts are needed in improving both public and professional education regarding older rural women and IPV. (RH)  
ISSN: 08952841  
From : <http://www.tandfonline.com>

- 234/94 Women's attitudes toward forming new partnerships in widowhood: the search for "your own someone" and for freedom; by Jaroslava Hasmanova Marhankova.: Routledge.  
Journal of Women and Aging, vol 28, no 1, January-February 2016, pp 34-45 (IN: Journal of Women and Aging, vol 28, nos 1-3, 2016).  
This text is based on an analysis of 20 biographical interviews with women in the Czech Republic who are both retired and have been widowed. The text discusses women's attitudes toward beginning new intimate relationships and the kinds of partnerships some of them have formed in old age. The author discusses the role of gender and gendered behaviour in the institution of marriage as an important factor influencing women's attitudes toward remarrying. The experience of being widowed is an important transition that, besides trauma and difficulties, also presents an opportunity to escape from the previous gender norms and expectations. The significance of these changes, which often open up opportunities for alternative forms of self-fulfillment, become part of the strategies that women select when entering future partnership arrangements. (RH)  
ISSN: 08952841  
From : <http://www.tandfonline.com>

- 234/95 Women's perspectives toward menopause: a phenomenological study in Iran; by Sevil Hakimi, Masoumeh Simbar, Fahimeh Ramezani Tehrani (et al.): Routledge.  
Journal of Women and Aging, vol 28, no 1, January-February 2016, pp 80-89 (IN: Journal of Women and Aging, vol 28, nos 1-3, 2016).  
The attitude and feelings toward menopause among Azeri menopausal women were explored using hermeneutic phenomenology based on Van Manen's approach. A total of 18 menopausal women attending urban health centres in Tabriz, Iran, were recruited using a purposive sampling method. Data were gathered through semi-structured interviews. Each interview was transcribed verbatim and analysed simultaneously. Data analysis led to the emergence of five main themes: positive attitude, neutral attitude, negative attitude, positive feelings, and negative feelings. Participants had different feelings and attitudes. Acceptance of menopause as a natural process helps women to have a neutral attitude toward menopause. (RH)  
ISSN: 08952841  
From : <http://www.tandfonline.com>

## **PARTICIPATION**

(See 234/64)

## **PENSIONS AND BENEFITS**

(See Also 234/99)

- 234/96 Growing the UK pension pot: the case for privatisation; by Philip Booth, Kristian Niemietz, Age Endeavour Fellowship - AEF; Institute of Economic Affairs - IEA. London: Institute of Economic Affairs, October 2014, 59 pp (IEA Discussion paper, no 56).  
The system of contracting out of state pensions - a form of pension privatisation - operated very successfully in the UK until recent years with cross-party support. This was very important in ensuring that the UK system of private pension provision was one of the most successful in the Western world. The Institute of Economic Affairs (IEA) has worked with Age Endeavour Fellowship to produce reports such as this on the effects of work on ageing (<http://www.ageendeavour.org.uk/research>). This paper proposes reviving the concept of voluntary pension privatisation through contracting out using the proposed reformed UK pension system that will be introduced from 2016. The risks in state and private pension systems, as well as inter-generational liabilities are also considered. This paper is based on a book chapter 'Pension privatisation by choice' by the same authors in 'Pensions policies, new reforms and current challenges' (New York: Nova Science Publishers, 2014). It also forms the basis of a shorter paper by the authors, 'Privatising pensions in the UK: how to restore contracting out' (Economic Affairs, vol 34, no 2, 2014). (RH)  
From : Institute of Economic Affairs, Lord North Street, London SW1P 3LB.

## PHYSICAL ACTIVITY

(See Also 234/7)

- 234/97 Perceived exercise barriers and their associations with regular exercise across three age groups of rural women in Taiwan; by Jing-Juin Huang, Huey-Shyan Lin, Bih-O Lee (et al.): Routledge. *Journal of Women and Aging*, vol 28, no 1, January-February 2016, pp 68-79 (IN: *Journal of Women and Aging*, vol 28, nos 1-3, 2016).  
The purposes of this cross-sectional, correlation study were to explore the differences in perceived exercise barriers across three age groups of Taiwanese rural women (30-50, 51-70, and >70 years old), and to examine the associations between perceived exercise barriers and regular exercise behaviour. A total of 227 women completed the Self-Reported Exercise Behaviour and the Perceived Exercise Barrier Scale. Women older than 70 reported higher physical and psychological barriers and lower administrative barriers than did the younger group. Women who did not exercise regularly tended to have a higher perception of exercise barriers. (RH)  
ISSN: 08952841  
From : <http://www.tandfonline.com>

## POLITICS AND CAMPAIGNING

- 234/98 Towards an age-friendly EU: mainstreaming non-discrimination and equal opportunities for older persons in the European Union: report of an AGE action in 2014; by AGE Platform Europe. Brussels: AGE Platform Europe, 2014, 31 pp.  
A booklet published to coincide with the European Parliament elections and to raise political and public awareness. The AGE action 2014 objective was to inform the new European Parliament and new European Commission about the discrimination and challenges faced by older people. Examples of projects across the EU indicate how older people's daily lives can be improved with regard to: human rights; active citizenship; employment; decent income in old age; the fight against poverty; and health and quality long-term care; consumer issues; accessibility, mobility and new technologies; and age-friendly environments. (RH)  
From : AGE Platform Europe, 111 rue Froissart, B-1040 Bruxelles, Belgium. Website: [www.age-platform.eu](http://www.age-platform.eu)

## POVERTY

- 234/99 How important are state transfers for reducing poverty rates in later life?; by Debora Price, Karen Glaser, Jay Ginn, Malcolm Nicholls.: Cambridge University Press.  
*Ageing and Society*, vol 36, no 9, October 2016, pp 1794-1825.  
Financial welfare in later life is of prime concern as the funding of pensions and care rises up policy agendas. In this context, work and family histories are well-known for how they affect late-life income, generally reducing state and private pensions for women. In a political context where benefits are under threat as part of the retrenchment of the welfare state, the authors consider two key questions. First, how do state pension and benefit transfers interact with work and family histories to reduce poverty risks in later life? Second, who is kept out of poverty by state benefits and transfers? The authors use data from the English Longitudinal Study of Ageing (ELSA) to examine how work, family and health histories are associated with poverty in later life, and to estimate how far and in what ways state pensions, Income Support and disability benefits play a mediating role. The authors conclude that state support is key to maintaining incomes above official poverty lines for a substantial number of those whose work, family and health histories would otherwise have led to their incomes falling below these lines. While disability benefits are designed to compensate for the additional costs of disability, it is likely that many in receipt experience poverty (even though they are not captured in official poverty statistics); even more so for those incurring the costs of disability, but not in receipt of these benefits. (RH)  
ISSN: 0144696X  
From : [journals.cambridge.org/aso](http://journals.cambridge.org/aso)

- 234/100 Poverty intervention in relation to the older population in a time of economic crisis: the Portuguese case; by Ines Gomes, Maria Irene Carvalho, Isabella Paoletti.: Hipatia Press.  
*Research on Ageing and Social Policy*, vol 2, no 1, July 2014, pp 88-114.  
In times of economic crisis, the distribution and impact of its effects vary greatly among social groups, due to the different level of exposure and the availability of resources. The authors conduct a policy analysis of the most important public policies and programmes for combating poverty in older people in Portugal in the last two decades. They critically analyse the actual social and political situation from three main perspectives: poverty approach, gender mainstream, and public-private partnerships. The latest restriction measures have been jeopardizing the fight against poverty in the last 15 years. Although poverty among older people is currently considered a political priority, no comprehensive policies are being developed. The policy interventions are

directed towards extreme situations of poverty and dependency. Preventive measures are excluded from policies planning; and the state is increasingly delegating social care responsibilities to the social sector. (OFFPRINT.) (RH)  
ISSN: 2014671X  
From : <http://doi.org/10.4471/rasp.2014.04>

#### **RELATIONSHIPS (PERSONAL)**

(See Also 234/92)

- 234/101 Interpersonal relationships and subjective well-being among older adults in sheltered housing; by Daniel J Herbers, Louise Meijering.: Hipatia Press.  
Research on Ageing and Social Policy, vol 3, no 1, July 2015, pp 14-44.  
The authors examine how experiences with interpersonal relationships contribute to older adults' well-being in the residential context of sheltered housing. They draw on data collected from sixteen in-depth interviews with older adults living in sheltered housing in a small town in northern Netherlands. Participants experienced the interaction with their children as of primary importance in their interpersonal relationships, while interactions with other residents were rather superficial. Their children offered emotional support as well as instrumental support and were found to play essential roles in participants' well-being. Moreover, participants expressed that the social and physical activities organised by the residential care facility offered them the opportunity to remain physically and mentally active. The help received from housekeepers and caregivers was found to be another important element of interpersonal relationships, and so too was the reciprocal nature of support exchanged with other sheltered housing residents. The authors conclude that the benefits of interpersonal relationships in sheltered housing should be considered when designing policy for the well-being of older adults ageing in place. (OFFPRINT.) (RH)  
ISSN: 2014671X  
From : <http://doi.org/10.17583/rasp.2015.1416>

#### **RESIDENTIAL AND NURSING HOME CARE**

(See Also 234/8)

- 234/102 De Hogeweyk: an innovative "dementia village" in the Netherlands; by Gibert Ruiz.: AARP International.  
AARP International: The Journal, 2016, pp 56-57.  
This article briefly describes an innovative retirement village in the Netherlands known as De Hogeweyk, a secure care facility designed to look and feel like an all-inclusive village for older people in need of nursing care and particularly for those living with dementia. Residents are able to roam freely within the village and make use of shops and services. The village is maintained with real gardeners, bartenders, waiters and cashiers throughout the four-acre facility. (JL)  
From : [journal.aarpinternational.org](http://journal.aarpinternational.org)
- 234/103 Design characteristics of sensory gardens in Norwegian nursing homes: a cross-sectional e-mail survey; by Marianne Thorsen Gonzalez, Marit Kirkevold.: Taylor and Francis.  
Journal of Housing for the Elderly, vol 30, no 2, April-June 2016, pp 141-155.  
Sensory gardens are increasingly popular in Norwegian nursing homes. A cross-sectional web survey of 121 nursing home leaders examined the design characteristics of Norwegian sensory gardens. The findings revealed that Norwegian sensory gardens were generally compliant with recommended design guidelines involving sensory experiences, stable walkways, landmarks, accessibility, visibility from indoors, seating features, and prosthetic supports. However, there is a potential for further improvements concerning walkways with rails, access to alarm systems, clear signposts to toilets from the outdoors, lighting in the evenings, greenhouses, increased awareness of edible and nontoxic plants, and maintenance of the gardens. (RH)  
ISSN: 02763893  
From : <http://www.tandfonline.com>
- 234/104 The importance of personal possessions for the development of a sense of home of nursing home residents; by J van Hoof, M L Janssen, C M C Heesackers (et al.): Taylor and Francis.  
Journal of Housing for the Elderly, vol 30, no 1, January-March 2016, pp 34-50.  
Personal possessions of nursing home residents can contribute to their sense of home. This study investigated which of the personal belongings were considered most important, and if these items indeed contributed to a sense of home. An interpretative qualitative methodology using the Critical Appraisal Skills Programmes (2013) was conducted with 27 Dutch nursing home residents. Photographs, paintings, and pieces of furniture are objects with sentimental value; and the television set is valued for its practical function. Residents of larger rooms have more flexibility in bringing along personal items, including pieces of furniture. The results of this study can be



used for the design of nursing homes, or for making informed choices during the process of institutionalisation. (RH)  
ISSN: 02763893  
From : [www.tandfonline.com](http://www.tandfonline.com)

- 234/105      The Newcastle Challenging Behaviour Checklist: feedback about its use in the treatment of agitation; by Karin Smith, F Lesley Hadaway, Katharina Reichelt, Ian A James.: British Psychological Society.  
Psychology of Older People: the FPOP Bulletin, no 134, April 2016, pp 25-34.  
This paper outlines the piloting of a tool, the Newcastle Challenging Behaviour Checklist (CBC, James, Machenzie and Hope, 2010), designed to be used at Step 3 of the Faculty of the Psychology of Older People (FPOP) stepped care model (Brechtin et al, 2013). The CBC provides a protocol-led methodology for identifying causes and treatment of strategies for Behaviours that Challenge (BC), and does not require input from a specialist BC team. This paper presents feedback from care home staff asked to use the CBC for the treatment of a person with dementia displaying a number of problematic behaviours, including agitation and aggression. Outcome on the effectiveness of the intervention derived from the checklist is also reported. This article builds on a previous paper, which obtained positive opinions of the CBC as an assessment tool (Rippon et al, 2014).  
ISSN: 20528914      From : [www.bps.org.uk/networks-and-communities/member-microsite/dcp-faculty-psychology-older-people-fpop](http://www.bps.org.uk/networks-and-communities/member-microsite/dcp-faculty-psychology-older-people-fpop)
- 234/106      One year on: reflections on integrating psychological thinking into a physical care home support service; by Carla Runchman.: British Psychological Society.  
Psychology of Older People: The FPOP Bulletin, no 133, January 2016, pp 66-71.  
The Oxfordshire Integrated Care Home Support Service (CHSS; see Candy Stone et al's article in this issue) has integrated specialist mental health staff into its physical health service, to provide psychosocial interventions for behavioural and psychological symptoms of dementia (BPSD), using a stepped care approach. The team includes mental health nurses, occupational therapists, a clinical psychologist and a consultant psychiatrist, and the interventions for challenging behaviour are supervised by the psychologist. The author reflects on being that psychologist, and on leading introduction of psychological formulation and ideas for non-pharmacological interventions in a well-established physical health service. (RH)  
ISSN: 20528914      From : <http://www.bps.org.uk/newtworks-and-communities/member-microsite/dcp-faculty-psychology-older-people-fpop>
- 234/107      The Oxfordshire Integrated Care Home Support Service: new developments to address the health and wellbeing of people with dementia in care homes; by Candy Stone, Jane Fossey, Antoinette Broad.: British Psychological Society.  
Psychology of Older People: The FPOP Bulletin, no 133, January 2016, pp 58-65.  
This article describes how a fully integrated multidisciplinary physical and mental healthcare team has been developed, by reshaping existing services, to meet mental healthcare needs and treat behavioural and psychological symptoms of dementia (BPSD) and physical healthcare problems in Oxfordshire's care homes through an Integrated Care Home Support Service (ICHSS). (RH)  
ISSN: 20528914      From : <http://www.bps.org.uk/newtworks-and-communities/member-microsite/dcp-faculty-psychology-older-people-fpop>

## **RESILIENCE**

- 234/108      Measuring older women's resilience: evaluating the suitability of the Connor-Davidson Resilience Scale and the Resilience Scale; by Cari Gulbrandsen.: Routledge.  
Journal of Women and Aging, vol 28, no 3, [May-June] 2016, pp 225-237 (IN: Journal of Women and Aging, vol 28, nos 1-3, 2016).  
The author provides conceptual and operational definitions of the construct of resilience in the context of research with older adults (aged 60 years or older). Two psychometric instruments (the Connor-Davidson Resilience Scale and the Resilience Scale) are described. The psychometric properties of each instrument are discussed in relation to the research of the original developers of the tools and research conducted by other investigators. Research on the resilience of older women has yet to be initiated. The author evaluated the psychometric properties of both instruments to determine their suitability for investigation of resilience in older women. (RH)  
ISSN: 08952841  
From : <http://www.tandfonline.com>

## **RETIREMENT**

(See 234/63)

## RURAL ISSUES

- 234/109 Changing service provision in rural areas and the possible impact on older people: a case example of compulsory post office closures and outreach services in England; by Charlotte Hamilton.: Cambridge University Press.  
Social Policy and Society, vol 15, no 3, July 2016, pp 387-401.  
Rural post office provision is becoming increasingly reliant on alternative models of delivery. The effect of change could fall disproportionately on older people who are a key customer group of the Post Office. The existing literature has not yet examined where compulsory changes have taken place and their impact on older people living in the community. This research uses a mixed methods approach to explore the 2007-2009 Post Office Network Change Programme in England and a case study of older people in a community affected by this change. Very rural areas were vulnerable to post office changes: 70 per cent of changes to Post Office models of delivery occurred in these areas. It is important to consider the impacts of changes more broadly, including both direct and indirect outcomes. (RH)  
ISSN: 14747464  
From : [journals.cambridge.org/sps](http://journals.cambridge.org/sps)
- 234/110 Connecting socially isolated older rural adults with older volunteers through expressive arts; by Ann MacLeod, Mark W Skinner, Fay Wilkinson, Heather Reid.: Cambridge University Press.  
Canadian Journal on Aging, vol 35, no 1, March 2016, pp 14-27.  
Employing a participatory arts-based research approach the present study examined an innovative programme from rural Ontario, Canada, designed to address social isolation among older people. Older socially isolated adults were matched to trained volunteers where in dyads, the eight pairs created expressive art in their home setting over the course of ten home visits. With thematic and narrative inquiry the study analysed the experiences and perceptions of the programme leader, older participants and older volunteers via their artistic creations, weekly logs, evaluations and field notes. The findings revealed a successful intervention that positively influenced the well-being of older adult participants and older volunteers, especially in regards to relationships, personal development and creating meaning as well as extending the intervention's impact beyond the programme's duration. The authors discuss opportunities for similar programmes to inform policy and enable positive community-based health and social service responses to rural social isolation. (JL)  
ISSN: 07149808  
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## SENSORY LOSS

- 234/111 Happy living in darkness!: Indoor lighting in relation to activities of daily living, visual and general health in 75-year-olds living at home; by Grethe Eilertsen, Gunnar Horgen, Tor Martin Kvikstad, Helle K Falkenbert.: Taylor and Francis.  
Journal of Housing for the Elderly, vol 30, no 2, April-June 2016, pp 199-213.  
Lighting has been identified as a significant environmental attribute for promoting vision and general health among older people, enabling successful ageing at home, but it has received little attention in the literature. Indoor lighting levels, self-reported vision and general health, and activities of daily life were measured in 114 healthy 75-year-old Norwegians. Despite very low levels of indoor lighting, the subjects were happy and healthy. There is a large discrepancy between self-assessed health and recommended lighting levels, and low awareness of the effect of lighting on age-related vision loss or daily living in the future. Knowledge of how to utilise indoor lighting to ensure healthy and safe ageing for those living in their own homes is needed. (RH)  
ISSN: 02763893  
From : <http://www.tandfonline.com>
- 234/112 Meeting the needs of visually impaired people living in Lifetime Homes; by Cliona Rooney, Karim Hadjri, Mairin Rooney (et al.): Taylor and Francis.  
Journal of Housing for the Elderly, vol 30, no 2, April-June 2016, pp 123-140.  
The authors explore perceptions on the suitability and effectiveness of Lifetime Homes standards (LTHS) for those with visual impairment in Northern Ireland. LTHS are a series of mandatory United Kingdom public-sector housing design interventions, providing a model for ensuring accessible and adaptable homes throughout an occupant's life span. An ageing demographic with increasing incidence of diabetes has led to rising numbers of older, visually impaired people wanting to remain in their homes for longer. Qualitative semi-structured interviews were conducted with 13 key stakeholders and thematically analysed. Although findings show that employing LTHS offers benefits to visually impaired residents, shortcomings were also identified. Evidence indicates a need for policy makers, health-care professionals and housing associations to modify practices, to better meet the housing needs of visually impaired people. Findings may

also be applicable to those with other impairments and disabilities in relation to housing for older residents. (RH)  
ISSN: 02763893  
From : <http://www.tandfonline.com>

### SMOKING

- 234/113 Prevalence and predictors of tobacco use in the elderly; by Shirlene Pang, Mythily Subramaniam, Edimansyah Abdin ... (et al.): Wiley Blackwell.  
International Journal of Geriatric Psychiatry, vol 31, no 7, July 2016, pp 716-722.  
Smoking is a well-established public health issue which has not been examined previously among older people in Singapore. This paper describes and identifies the current prevalence and predictors of tobacco use among the older resident population. Data were derived from the Well-being of the Singapore Elderly study, a cross-sectional epidemiological study of older people in Singapore. Sociodemographic data from 2,565 Singapore residents aged 60 years and above were collected through face-to-face interviews. Multinomial logistic regression analyses identified predictors of tobacco use. A total of 236 respondents were current tobacco users (9.5%). The majority of older tobacco users were men (88.1%). Significant predictors of tobacco use were gender, marital status and education level. Younger age (60-74 years old) was associated with more tobacco use, and the completion of tertiary education with lower rates of use. Overall smoking prevalence among older people was found to be lower than that of the Singapore general adult population (16%). However the rate was still high and is of concern given the likelihood of a higher rate of physical disorders which could be worsened with tobacco use. The identification of those at risk enables them to be targeted for smoking cessation programmes and other interventions. (JL)  
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### SOCIAL CARE

(See 234/16, 234/53)

### SOCIAL NETWORKS

- 234/114 Longitudinal changes in social networks, health and wellbeing among older Koreans; by Borin Kim, Sojung Park, Toni C Antonucci.: Cambridge University Press.  
Ageing and Society, vol 36, no 9, October 2016, pp 1915-1936.  
This study investigates the changes in social network types among older adults in South Korea; and it examines whether, and to what extent, these changes influence their health and psychological well-being. Data were obtained from the Korean Longitudinal Study of Ageing. The sample was restricted to respondents aged over 65 years of age who participated in both the 2006 and 2008 surveys (N = 3,501). The social network types for both years were derived by Latent Class Analysis. Changes in network types over time were then identified. A series of multivariate regression analyses were conducted to examine the effects of social network changes on self-rated health, depressive symptoms and life satisfaction. Restricted, Family, Friend and Diverse network types were derived from each wave of the study. Although the direction of social network changes was not always towards the Restricted type, the Restricted network was the most prevalent and stable type among older Koreans. Older adults who remained in, or made a transition to, restricted types of social networks were more likely to have poor self-rated health, higher levels of depressive symptoms and lower levels of life satisfaction. This study adds to the limited body of literature on longitudinal network typology, and it expands older people's knowledge of social network types in diverse social and cultural contexts. (RH)  
ISSN: 0144696X  
From : [journals.cambridge.org/aso](http://journals.cambridge.org/aso)
- 234/115 The relationships that matter: social network site use and social wellbeing among older adults in the United States of America; by Rebecca P Yu, Ryan J McCammon, Nicole B Ellison, Kenneth M Langa.: Cambridge University Press.  
Ageing and Society, vol 36, no 9, October 2016, pp 1826-1852.  
An increasing number of middle-aged and older Americans are using social network sites (SNSs, or social media), but little research has addressed how SNS use is associated with social well-being outcomes in this population. The authors used a nationally representative sample of 1,620 Americans older than 50 from the 2012 Health and Retirement Study (HRS) to examine the relationship between older adults' SNS use and social well-being associated with non-kin and kin relations, and to explore how these associations vary by age. Results of ordinary least-squares regression analyses suggest that SNS use is positively associated with non-kin-related social well-being outcomes, including perceived support from friends ( $\beta = 0.13$ ;  $p = 0.001$ ;  $N = 460$ ) and

feelings of connectedness ( $\beta = 0.10$ ;  $p = 0.001$ ;  $N = 463$ ). Regression models employing interaction terms of age and SNS use further reveal that SNS use contributes to feelings of connectedness to a greater extent as people age ( $\beta = 0.10$ ;  $p = 0.001$ ;  $N = 463$ ). Of all kin-related social well-being outcomes, SNS use only predicts increased perceived support from children ( $\beta = 0.08$ ;  $p = 0.05$ ;  $N = 410$ ), and age negatively shapes this relationship ( $\beta = -0.14$ ;  $p = 0.001$ ;  $N = 410$ ). As older people engage with an increasingly smaller and narrower network with a greater proportion of kin contacts, the results suggest that SNS use may help older adults access differential social benefits throughout later life. (RH)

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From : [journals.cambridge.org/aso](http://journals.cambridge.org/aso)

## STATISTICS

234/116 Maximising the value of UK population cohorts; by Jill Pell (Chairman), MRC Strategic Review of the Largest UK Population Cohort Studies, Medical Research Council. Swindon; London: Medical Research Council, [ 2014 ], 85 pp.

A total of 34 cohorts were included in the review: 19 cohorts partially or fully funded by the Medical Research Council (MRC); and 15 cohorts funded entirely by others. These cohort studies comprise the majority of large longitudinal population studies in the UK, with age ranges that span the whole life course from birth to over 100 years old. The current size of cohorts ranges from 1.24 million in the Million Women Study, to approximately 150 in CFAS I (Cognitive Function and Ageing Studies I). It is estimated that some 2.5 million people in the UK have been recruited to large population cohort studies. In 2014, there are more than 2.2 million people (3.5% of the UK population) who are still taking part. Twenty-eight of the total 34 cohorts in this review were included in an exercise modelling the current and projected profile of the UK cohort portfolio in the 10 years to 2024. (RH)

From: <http://www.mrc.ac.uk/publications/browse/maximising-the-value-of-uk-population-cohorts/>

## SUICIDE

234/117 Assessing the role of physical illness in young old and older old suicide attempters; by Stefan Wiktorsson, Anne I Berg, Katarina Wilhelmson ... (et al.): Wiley Blackwell.

International Journal of Geriatric Psychiatry, vol 31, no 7, July 2016, pp 771-774.

In the current study attributions for attempting suicide were explored in older adults with and without serious physical illness. An open-ended question was used to explore attributions for attempting suicide in 101 hospitalised patients aged 70+. Serious physical illness was defined as a score of 3 or 4 on any of the 13 non-psychiatric organ categories in the Cumulative Illness Rating Scale for Geriatrics. Roughly one-third of hospitalised patients with and without serious physical illness attributed the suicide attempt to somatic distress. Among 70- to 79-year-olds, seriously physically ill patients were more likely than healthier patients to attribute their attempt to psychological pain (84% vs. 48%). There were no significant differences in attributions in persons with and without serious health problems in the 80+ group. These findings show that the processes by which physical illness confers risk for attempted suicide in older adulthood may be age dependent. Interventions are needed to mitigate psychological pain in physically ill older patients, especially those in their seventies. Research is needed to understand how the psychological processes that influence the desire for suicide change across older adulthood. (JL)

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From : [www.orangejournal.org](http://www.orangejournal.org)

234/118 Reducing suicidal ideation in home health care: results from the CAREPATH depression care management trial; by Matthew C Lohman, Patrick J Raue, Rebecca L Greenberg, Martha L Bruce.: Wiley Blackwell.

International Journal of Geriatric Psychiatry, vol 31, no 7, July 2016, pp 708-715.

The study evaluated the effectiveness of a depression care management intervention in reducing suicidal ideation (SI) among home health patients. Data come from the cluster-randomised effectiveness trial of the Depression Care for Patients at Home (Depression CAREPATH), an intervention that integrates depression care management into the routine nursing visits of Medicare home health patients screening positive for depression. Patients were interviewed at baseline, three, six and 12-month follow-up. SI was measured using the Hamilton Rating Scale for Depression item. The study compared likelihood of any level of SI between intervention and usual care patients using longitudinal logistic mixed-effects models. A total of 306 eligible patients enrolled in the trial. Among them, 70 patients (22.9%) reported SI at baseline. Among patients with SI, patients under the care of nurses randomised to CAREPATH were less likely to report SI over the study period, with 63.6% of usual care versus 31.3% of CAREPATH participants continuing to report SI after one year. Baseline major depression, greater perceived burdensomeness and greater functional disability were associated with greater likelihood of SI. Overall SI was reported in more than 10% of Medicare home health patients. The Depression

CAREPATH intervention was associated with a reduction in patients reporting SI at one year, compared to enhanced usual care. Given relative low burden on nursing staff, depression care management may be an important component of routine home health practices producing long-term reduction in SI among high-risk patients. (JL)

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From : [www.orangejournal.org](http://www.orangejournal.org)

### **TRANSPORT**

234/119

Special issue. Older driver research: evidence to guide change; by Shawn C Marshall (ed).: Canadian Association on Gerontology.

Canadian Journal on Aging, vol 35, supplement 1, 2016, pp 1-116 (whole issue).

The objective of this special issue, comprising of an editorial and ten articles, was to highlight older driver research relevant to the Canadian context. Topics include: antidepressants and driving in older adults; on-road driving performance of older adults; self-reported driving restrictions and psychosocial constructs; health and driving in older adults; effects of season and weather on older drivers' trip distances; ethics of clinical decision-making for older drivers; cognitive performance, driving behaviour and attitudes over time; functional ability and its influence on vehicle type driven by older Canadians; convenience sampling and older drivers; and the effects of ageing on driver visibility. (JL)

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From : [journals.cambridge.org/cjg](http://journals.cambridge.org/cjg)

### **VOLUNTEERING AND THE VOLUNTARY SECTOR**

234/120

The nonprofit sector in an aging world; by Tom Wright.: AARP International.

AARP International: The Journal, 2016, pp 23-25.

Looks at ways in which Age UK and other voluntary agencies are responding to the challenges of an ageing population. The author argues that the nonprofit sector is uniquely posed to contribute its experience and expertise to influence major international policy to improve the lives of older people. There appears to be a gap between what is provided and what older people say is right for them, and nonprofits are well placed to bridge this gap. (JL)

From : [journal.aarpinternational.org](http://journal.aarpinternational.org)



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