

New Literature on Old Age

EDITOR

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ABUSE, SAFEGUARDING AND PROTECTION

(See Also 248/17, 248/20, 248/82, 248/83, 248/117)

- 248/1 Addressing the measurement challenge in elder abuse interventions: need for a severity framework; by David Burnes, Mark S Lachs, Karl Pillemer.: Taylor and Francis.
Journal of Elder Abuse and Neglect, vol 30, no 5, November-December 2018, pp 402-407.
The literature on elder abuse is evolving in a direction that emphasises intervention research. Despite this, the victims of elder abuse continue to be exposed to interventions that lack evidence of effectiveness. Researchers currently rely on binary approaches to measure elder abuse phenomena, which fail to capture changes in problem status over the course of an intervention. This commentary develops a case for severity as a framework to operationalise and measure elder abuse in intervention research and practice. A severity framework provides enhanced elder abuse measurement responsiveness, and aligns with the dominant client-centred, harm reduction clinical approach to intervening in elder abuse cases. (RH)
ISSN: 08946566 [From : http://www.tandfonline.com](http://www.tandfonline.com)
- 248/2 EATI Island: a virtual-reality-based elder abuse and neglect educational intervention; by Carolyn E Z Pickering, Kimberly Ridenour, Zachary Salaysay (et al): Taylor and Francis.
Gerontology and Geriatrics Education, vol 39, no 4, October-December 2018, pp 445-463.
Despite high prevalence rates of elder abuse and neglect (EA/N), compliance with mandatory reporting remains low. A lack of practical training on EA/N has been identified as a barrier. This article describes the development, implementation and evaluation of EATI Island (the Elder Abuse Training Institute Island), an innovative virtual-reality-based educational intervention, intended to improve EA/N recognition and reporting among nurses and social workers providing in-home services. The educational intervention consisted of an introductory course and advanced assessment training in virtual reality. The advanced assessment training was focused on learning to use the QualCare Scale, an instrument used to assess quality of family caregiving. Data were evaluated in terms of user satisfaction, changes in knowledge, and changes in practice. Results indicate that participants were satisfied with the content and format of the training program. Participants gained knowledge in identifying elder abuse and neglect, and had 99% accuracy in their mandatory reporting decisions. Importantly, professionals reported making changes in their daily practice based on knowledge and skills learnt. Evaluation data indicate that this interdisciplinary training program was a satisfactory way to learn that produced changes in knowledge and affected clinical practice. Few implementation barriers were encountered during this project, suggesting it would be replicable. (RH)
ISSN: 02701960 [From : http://www.tandfonline.com](http://www.tandfonline.com)
- 248/3 Job demands, emotional dissonance and elderly abuse: the moderating role of organizational resources; by Marie Andela, Didier Truchot, Virginie Huguenotte.: Taylor and Francis.
Journal of Elder Abuse and Neglect, vol 30, no 5, November-December 2018, pp 368-384.
The present study focuses on elder abuse committed by caregivers in nursing homes. It aims at a better understanding of neglect and abusive behaviours, by considering the working context and the emotional dissonance of these professionals. To achieve this goal, direct effects of emotional dissonance, job demands (workload and emotional demands) and organisational resources (high-quality relationships with colleagues and the supervisor) on neglect and abusive behaviours were analysed. Moreover, the moderating role of organisational resources was explored. The study was conducted with 481 nurses and healthcare assistants from more than 100 French nursing homes. Overall, results contributed to the literature by pointing out the impact of emotional dissonance and caregivers' working context on neglect and abusive behaviours. Moreover, the results highlight the moderating effect of high-quality relationships with colleagues and supervisor, and give rise to potential implications in preventing elder abuse in nursing homes. (RH)
ISSN: 08946566 [From : http://www.tandfonline.com](http://www.tandfonline.com)
- 248/4 Recruitment, enrollment and data collection with victims of elder abuse and neglect identified from police incident reports; by Carolyn E Z Pickering, Christopher Maxwell.: Taylor and Francis.
Journal of Elder Abuse and Neglect, vol 30, no 5, November-December 2018, pp 333-353.
Elder abuse and neglect (EAN) is a health and social problem that affects one in ten older people living in the community in America. This US study evaluated the success of researcher-generated recruitment, enrolment, data collection and safety protocols for field research with victims of EAN identified from police incident reports. Success of this methodology is evaluated in terms of cost-effectiveness, ability to generate a representative sample and safety. After reviewing 492 police incident reports involving victims aged 65+ to identify cases of EAN, 62 victims were identified. Mail, phone and in-person recruitment strategies were used. After 259 recruitment attempts, 52 (84%) eligible victims were contacted, of whom 24 (46%) consented to participate. Phone calls were the least expensive mechanism for producing a successfully enrolled participant. Findings from a regression show that completion of a research interview could not be predicted by victim, suspect or offence characteristics, indicating that the recruited victims likely represent the population from which they were drawn. No safety or adverse events occurred. (RH)
ISSN: 08946566 [From : http://www.tandfonline.com](http://www.tandfonline.com)

248/5 Staff conceptualisations of elder abuse in residential aged care: a rapid review; by Harriet Radermacher, Ying Li Toh, Deborah Western (et al): Wiley.
Australasian Journal on Ageing, vol 37, no 4, December 2018, pp 254-267.
The purpose of this rapid review was to explore how residential aged care staff conceptualise and identify elder abuse. English language publications between 2000 and 2017 about elder abuse in residential aged care in developed countries were sought from three academic databases. Only perspectives on staff-to-resident and resident-to-resident abuse were included. Over 2,000 articles were screened and 19 journal articles were included in the review. A wide range of abusive behaviours was identified but there was little common understanding of what constituted elder abuse. Furthermore disparities in conceptualisations were greater for certain types of abuse (e.g. verbal, psychological and caregiving). Elder abuse in residential aged care was conceptualised and identified by staff in diverse and different ways. This lack of common understanding hinders the development of effective interventions and prevention strategies which include staff education and training as well as significant structural and institutional changes. (JL)
ISSN: 14406381
From : <http://www.wileyonlinelibrary.com/journal/ajag>

248/6 What's in a name?: Family violence involving older adults; by Susan M Benbow, Shami Bhattacharyya, Paul Kingston.: Emerald.
Journal of Adult Protection, vol 20, no 5/6, 2018, pp 187-192.
The purpose of this paper was to review terminology used to describe family violence involving older adults in order to stimulate a discussion that may help in the use of more appropriate and clearer language. Different definitions of terms used to describe violence were considered and the contexts in which they were used. Two cases were described to illustrate the use of overlapping terms, the assumptions that lie behind them and the different actions that they lead to. The authors argue that legal, relational, health (physical and mental) and social perspectives are all useful and integration contributes to a fuller understanding of violence. The importance of terminology used to describe family violence involving older adults has been neglected in the past, yet it influences understanding about violent incidents and shapes responses to them. (JL)
ISSN: 14668203
From : <http://www.emeraldinsight.com/loi/jap>

ACTIVE AGEING

(See 248/62)

AGEING (GENERAL)

248/7 Measuring ageing: an introduction to the Ageing Better Measures Framework; by Catherine Foot, Luke Price, Centre for Ageing Better. London: Centre for Ageing Better, January 2019, 9 pp.
The Ageing Better Measures Framework (ABMF) is a compendium of 63 measures, survey scales and their data sources which look at individual outcomes related to ageing and later life. The Framework covers 12 broad topics: finance; health and well-being; social connections; major life transitions; plans for the future; recreation and leisure; fulfilling work; community contributions; relationships; physical and mental health activity; home and neighbourhood; and care and support services. This document looks at how the framework was developed, how it can be used, and areas for future development. (RH)
From : <https://www.ageing-better.org.uk/publications/ageing-better-measures-framework>

AGEISM AND AGE DISCRIMINATION

248/8 The birthday card exercise: replicating research as active learning; by Dana Sawchuk.: Taylor and Francis.
Gerontology and Geriatrics Education, vol 39, no 4, October-December 2018, pp 481-490.
One means of uncovering common attitudes toward ageing and older adults is to perform content analyses of popular print media forms, such as newspapers, magazines, and even greeting cards. This active learning activity involves small groups of undergraduate students replicating, in a limited way, elements of a published research study on the messages conveyed by age-related birthday cards. In the exercise, each group of students is asked to analyse a set of 15 different birthday cards, and to share qualitative and quantitative findings with classmates before submitting a written "discussion section" on their results to the instructor. Since this exercise is aligned with key course learning outcomes as well as with coursework preceding and following the activity, the author demonstrates how the exercise is integrated into the course's overall learning environment. Comments on student findings, the potential benefits of and modifications to the exercise, and the transferability of the exercise to other course contexts are also provided. (RH)
ISSN: 02701960
From : <http://www.tandfonline.com>

- 248/9 Everyday discrimination in the Australian workplace: assessing its prevalence and age and gender differences; by Philip Taylor, Christopher McLoughlin, Catherine Earl.: Wiley.
Australasian Journal on Ageing, vol 37, no 4, December 2018, pp 245-251.
 This study aimed to increase understanding of the nature and prevalence of discriminatory experiences in the workplace, focusing on issues of age and gender. The concept of everyday discrimination was operationalised in a survey of a representative sample of Australian workers. It was observed that overall, experiences of everyday discrimination were rare. Among men, such experiences declined with age, whereas for women almost no age differences were observed. It is argued that the nature of labour market age barriers has been misunderstood and the extent of discrimination faced by older workers possibly overstated. From a policy perspective the study indicates that there would be value in considering how discrimination manifests itself among workers with different characteristics. It is suggested that an intersectional approach that takes contextual factors and other grounds for discrimination into consideration might lead to tailored solutions that address specific sources of discrimination affecting men and women in particular industry sectors or specific age groups (JL)
 ISSN: 14406381
From : <http://www.wileyonlinelibrary.com/journal/ajag>
- 248/10 Identifying age-related stereotypes: exercising with older adults; by Jochen G Bocksnick, Mary Dyck.: Taylor and Francis.
Activities, Adaptation and Aging, vol 42, no 4, October-December 2018, pp 278-291.
 Kinesiology students represent a group of future professionals who might work with older adults in an exercise environment. These encounters may also be affected by the presence of age-related stereotypes. To identify these beliefs, 22 kinesiology students provided two written reflections on a group of older adults participating in an exercise programme. The students' first response was written after viewing a 13-minute video of older individuals' exercising; the second response occurred after their active exercise participation with the older adults. Thematic, qualitative analysis of the data suggested the students' stereotypes concerning the exercise behaviour of the older adults. (RH)
 ISSN: 01924788
From : <http://www.tandfonline.com>
- 248/11 Impact of life stories on college students' positive and negative attitudes toward older adults; by Takashi Yamashita, Sarah J Hahn, Jennifer M Kinney (et al.): Taylor and Francis.
Gerontology and Geriatrics Education, vol 39, no 3, July-September 2018, pp 326-340.
 Gerontological educators are increasingly interested in reducing college students' negative, and promoting their positive, attitudes toward older adults. Over the course of a semester, students from six 4-year institutions viewed three life story videos (documentaries) of older adults, and completed pre- and post-test surveys that assessed their positive (Allophilia Scale) and negative (Fraboni Scale of Ageism) attitudes. The authors assessed changes in attitudinal scales between treatment (with videos, n = 80) and control (no video, n = 40) groups. The "treatment" group showed significant increases in kinship, engagement and enthusiasm, and decreases in anti-locution and avoidance (all ps .05). There was no significant change in affect, comfort or discrimination. This study demonstrates how video stories affect students' attitudes about older adults. (RH)
 ISSN: 02701960
From : <http://www.tandfonline.com>
- AIDS AND ADAPTATIONS**
- 248/12 Pilot study to measure wheelchair users' space requirements in the bathroom; by Ernesto Morales, Stephanie Gamache, Francois Routhier (et al.): Emerald.
Journal of Enabling Technologies, vol 12, no 3, 2018, pp 129-140.
 A methodology to measure the circulation area required by a manual or powered wheelchair within a toilet stall is described. The authors present the range of possible results that can be collected when used in an experimental bathroom set-up. A bathroom environment containing a toilet, grab bars and two transparent acrylic panels suspended on rails to simulate walls was built. Three set-ups were experimented: 1,500 mm from the walls, 1,500 mm diagonally from the toilet and 1,700 mm from the walls. For each of the participants, markers were placed on the back and on the rear of the wheelchair, and one on the toes of the participants. The Vicon optical motion capture system was used to register the markers' position in the 3D space. The methodology proved to be relatively easy to install, efficient, and easy to interpret in terms of results. It provides specific points from which it is possible to measure the trajectories of markers and calculate the polygonal projection of the area covered by each participant. The results showed that manual and powered wheelchair users required, respectively, 100 and 300 mm more than the minimum 1,500 mm wall-to-wall area to complete a rotation in front of the toilet. These results showed that the 1,500 mm gyration area proposed in the Canadian Code of Construction is not sufficient for manual and powered wheelchair users to circulate easily in toilet stalls. The methodology can provide evidence to support the improvement of construction norms in terms of accessible circulation areas. (RH)
 ISSN: 23986263
From : <http://www.emeraldinsight.com/loi/jet>

- 248/13 Technology helps people stay healthy at home; by Helen Rostill.: Hawker Publications.
Journal of Dementia Care, vol 27, no 1, January-February 2019, pp 26-28.
Does technology have the answer to early identification of health problems in dementia? The author and research colleagues at Surrey and Borders Partnership NHS Foundation Trust, the University of Surrey and Royal Holloway University of London (RHUL) discuss the early findings from their pioneering study, 'Technology Integrated Health Management (THIM) for dementia'. Case studies on blood pressure, walking and getting lost, and overdose illustrate the usefulness of predictive algorithms (the rules to be followed by computers) in handling data as well as the ability to monitor a person's health remotely. (RH)
ISSN: 13518372
From : <http://www.journalofdementiacare.co.uk>

ALCOHOL AND DRUG MISUSE

- 248/14 Baby boomer's substance abuse and researcher indifference; by Daniel Rosen, Rafael J Engel, Corinne Beaugard, Nia Davis, Gerald Cochran.: Taylor and Francis.
Journal of Gerontological Social Work, vol 62, no 1, January 2019, pp 16-28.
The current older adult population is more likely to need and seek treatment for alcohol and drug abuse than previous cohorts of older adults, which necessitates the need for age-appropriate substance abuse treatment. Building on previous research that examined the lack of attention on substance abuse among older adults, this study examines articles addressing substance abuse disorders among older adults in leading American gerontological and substance abuse journals and federal funding between 2011 and 2017. Medical Subject Heading (MeSH) terms were used to identify publications from ten leading gerontological and ten leading substance abuse journals. During 2001-2017, there were 68 and 44 articles published in gerontology and substance abuse journals respectively related to substance abuse disorders in older adults. Most (59.8%) addressed alcohol abuse and 7% involved intervention studies. In the 7-year period, there were 13 federal grants. Despite growing misuse and treatment seeking among older adults with substance use disorders, there is a paucity of published or funded work in this area. Effectively addressing substance abuse in older adults will require a coordinated effort between researchers and practitioners, to establish and implement best practices for practitioners to rely on when working with substance abusing older adults. (RH)
ISSN: 01634372
From : <http://www.tandfonline.com>

ARTS, CRAFT AND MUSIC

- 248/15 The more we get together, the more we learn: focus on intergenerational and collaborative learning through singing; by Carol Beynon, Jennifer Lang.: Taylor and Francis.
Journal of Intergenerational Relationships, vol 16, nos 1-2, 2018, pp 45-63.
This Canada-based study explored the conceptual and practical frameworks necessary to foster vibrant and equal learning opportunities for young children and older adults through intergenerational singing programmes. The paper focused on the affordances necessary to create authentic and transformative learning environments for both generations, including the need for knowledgeable, insightful and informed leadership, the development of a curriculum with specific outcomes for each generation, attention to curriculum planning, implementation, and ease of access to the programme, to the curriculum, to each other and to the venue. It was found that the benefits of learning through intergenerational singing extended well beyond the vibrancy of lifelong learning and improved singing and included the mutual, reciprocal and valued friendships between the younger and older participants that developed during such programmes; observations of the incremental confidence that each generation acquired; awareness, acceptance and appreciation for growth, ageing and death; and better health such as improved mobility, less stress and increased breath support. (JL)
ISSN: 15350770
From : <http://www.tandfonline.com>
- 248/16 Serious leisure, play and the construction of community among older adult square dancers; by Barbara Schneider, Liza McCoy.: Taylor and Francis.
Activities, Adaptation and Aging, vol 42, no 1, January-March 2018, pp 54-68.
This article adds to the literature on social dance and ageing with an ethnographic study of the square dance community in Calgary, Alberta, Canada, most of whose members are older adults.
Based on focus groups and interviews with square dancers, a survey of the square dance community, and participant observation, the focus is on the serious and playful aspects of dance and the role of these older people in creating community. The authors examine aspects of square dance that contribute to successful ageing: the pleasure of socialising and friendships; the joy of moving the body to music; and the pleasure of dressing for the dance. (RH)
ISSN: 01924788
From : <http://www.tandfonline.com>

BLACK AND MINORITY ETHNIC GROUPS

(See Also 248/61, 248/105)

- 248/17 Elder mistreatment in South Asian communities: a review of the literature; by Ashfaque Ahmed Talpur, Tony Ryan, Parveen Ali, Sharron Hinchliff.: Emerald.
Journal of Adult Protection, vol 20, no 5/6, 2018, pp 193-206.
The purpose of this paper was to perform a literature review of empirical studies on elder mistreatment (EM) in South Asians and to discuss key implications for policy, practice and research. For this review multiple electronic databases in the international health and social science were searched and supplemented by grey literature and cross-references. Quality of papers was assessed against standard checklists. In total 16 studies met the inclusion criteria of the review of which 11 were cross-sectional design, and only six of them used standard instruments to measure EM. The prevalence estimates of overall EM retrieved from general population-based studies ranged from 9.3 per cent in India to 49.1 per cent in Nepal. Age, gender, residential settings, socioeconomic status, health, education and social structures and processes were key risk factors for EM in South Asian communities. Reporting and action taking were culturally rooted. While the review was not systematic, there were limitations associated with the paper in covering the diverse range of databases and studies. However this review provides a valuable synthesis of the empirical papers on the incidence, culturally specific risk factors and reporting trends of EM in South Asians. Additionally the review presents the papers evaluated for a quality to ensure the validity of empirical data. Finally the review includes several implications for policy, practice and future research on EM which may ultimately contribute in improving the health and wellbeing of older South Asians. (JL)
ISSN: 14668203
From : <http://www.emeraldinsight.com/loi/jap>
- 248/18 The race paradox in subjective wellbeing among older Americans; by Pengyan Tang, Heejung Jang, Mary Beth Rautkis (et al.): Cambridge University Press.
Ageing and Society, vol 39, no 3, March 2019, pp 568-589.
This study aims to assess racial differences in subjective well-being (SWB), and to examine whether the pathways of social support and social engagement to SWB vary by racial groups in the United States of America. The authors used a local sample (N = 1,035) and a nationally representative sample of 7,7018 from the Health and Retirement Study (HRS) to compare life satisfaction and happiness between non-Hispanic Whites and Blacks aged 55 and over. They evaluated the extent to which race, other socio-demographic characteristics, health, social engagement and social support explained the variances in SWB. They also examined the moderation effects of race on the relationships of SWB with age, social support and social engagement. Multiple regression analyses showed that non-Hispanic Blacks were at least as satisfied as, and even happier than White peers, after equalising social resources and health variables. Social support was significantly related to SWB, and it seemed that positive support was more important to Whites than to Blacks in predicting life satisfaction. In addition, the racial crossover effect existed, that is, the old-old (aged 80+) Blacks were happier than their White peers. Findings indicate a national trend of the race paradox in SWB and underscore the importance of social support in promoting older adults' well-being. Future research is recommended to investigate other potential mechanisms among Black older Americans to explain their relatively better SWB.
ISSN: 0144686X
From : <http://www.cambridge.org/aso>
- 248/19 Workforce diversity and conflicts in care work: managers' perspectives; by Jill Manthorpe, Jess Harris, Jo Moriarty, Martin Stevens.: Policy Press.
International Journal of Care and Caring, vol 2, no 4, November 2018, pp 499-513.
The care workforce in England is ethnically diverse, yet little is known of how managers manage this aspect of human resources work. This article reports findings from a longitudinal study of the care workforce to offer insights into managers' views of staff demographics, relationships and management challenges and strategies. Three themes emerged from the analysis: sources of conflict; reactive approaches to limiting conflict; and proactive approaches to preventing and limiting conflict. Findings have implications for human resource management and the creation of supportive staff relationships within care work in countries where ethnic diversity is characteristic of the care workforce. (RH)
ISSN: 23978821
From : <http://www.policypress.co.uk/journals/international-journal-of-care-and-caring>

CARE MANAGEMENT

(See 248/19)

CARERS AND CARING

(See Also 248/3, 248/19, 248/38, 248/107, 248/114, 248/124)

- 248/20 Care and mistreatment: two sides of the same coin?: An exploratory study of three Portuguese care homes; by Ana Paula Gil.: Policy Press.
International Journal of Care and Caring, vol 2, no 4, November 2018, pp 551-573.
Quality of care is still a central issue for long-term care policy. This article presents the initial results of ongoing research carried out in three Portuguese care homes in 2017, in relation to seven signs that are used to evaluate care practices. The article uses mixed methods (24 interviews and a data survey), based on the perspectives of care workers, professional staff and managers. The findings highlight the non-recognition of care work, difficult working conditions, poor training, and a limited monitoring of the care system as factors that reduce the quality of care and increase the risk of an institutionalised culture of care omission. (RH)
ISSN: 23978821
From : <http://www.policypress.co.uk/journals/international-journal-of-care-and-caring>
- 248/21 Carer-related research and knowledge: findings from a scoping review; by Mary Larkin, Melanie Henwood, Alisoun Milne.: Wiley.
Health and Social Care in the Community, vol 27, no 1, January 2019, pp 55-67.
The aim of this review was to provide a unique synthesis of evidence and knowledge about carers. The authors adopted a scoping review methodology drawing on a wide range of material from many different sources published between 2000 and 2016. It offered key insights into what is known; reinforced and expanded evidence about carers' profile; showed that knowledge is uneven, e.g. much is known about working carers, young carers and carers of people with dementia but far less is known about older carers or caring for someone with multiple needs. A striking feature of much research was a focus on caring as a set of tasks, rather than a dimension of an often dyadic relationship. While there is substantive evidence about the negative impact of caring the review suggests that links between caring and carer outcomes are neither linear nor inevitable and vary in depth and nature. A reliance on cross-sectional studies using standardised measures is a major weakness of existing research: this approach fails to capture the multidimensionality of the caring role, and the lived experience of the carer. Although research relating to formal support suggests that specific interventions for particular groups of carers may be effective, overall the evidence base is weak. There is a tension between cost-effectiveness and what is valued by carers. Developing robust evaluative models that accommodate this tension and take account of the dyadic context of caring is a critical challenge. A fundamental deficit of carer-related research is its location in one of two, largely separate, paradigmatic frameworks: the 'Gatherers and Evaluators' and the 'Conceptualisers and Theorisers'. The authors suggest that developing an integrated paradigm that draws on the strengths and methods of existing paradigms has considerable potential to generate new knowledge and new evidence and extend understanding of care and caring. (JL)
ISSN: 09660410
From : <http://www.wileyonlinelibrary.com/journal/hsc>
- 248/22 In-between-carer: towards a new type of elder care worker?: The example of Polish migrant care workers in Germany; by Patrycja Kniejska.: Policy Press.
International Journal of Care and Caring, vol 2, no 4, November 2018, pp 477-498.
In Germany, there are currently over 2,860,000 people in need of care. Many are cared for by caregivers from abroad, especially from Poland. The aim of this study is to determine how commuting Polish migrants understand elder care, and whether their caregiving has a more professional or non-professional character. Twenty-six formal, structured interviews with Polish caregivers were conducted. The data analysis shows two tendencies in caregiving by these caregivers. Some practised overprotective caregiving, and others compensatory caregiving. As a consequence, a new type of care is emerging that is in between family and professional care. (RH)
ISSN: 23978821
From : <http://www.policypress.co.uk/journals/international-journal-of-care-and-caring>
- 248/23 Juggling work and unpaid care: a growing issue; by Carers UK. London: Carers UK, January 2019, 20 pp.
The number of those juggling work and care appears to be higher than previously thought: some 4.87 million or one in seven workers (compared with the Census 2011's estimate, 3 million, or one in nine workers). Commissioned by Carers UK, YouGov plc conducted an online survey of 4,254 adults between 28 December 2018 and 04 January 2019. The poll repeated one question carried out in 2013 to provide a comparison for one key question. The survey and this report examine the impact of an ageing population on those juggling work while providing unpaid care, how the world of work needs to adapt, and the consequences if it does not. The top three interventions that workers thought would be most helpful if they were caring alongside work were: a supportive employer or line manager (89%), flexible working (88%), and additional paid leave of between 5 and 10 days (89%). However, working carers were more likely to say that none of the support options listed were offered by their employer. The report looks at carer friendly policies that are available in the workplace (according to employees); what good practice there is in supporting unpaid carers in the workplace; and detailed findings from the devolved

nations. It recommends that national and devolved governments should take a lead in setting appropriate policies and leading by example. It also makes recommendations for employers supporting and retaining employees, and for local authorities and health as service providers. The report is published with the support of Centrica, a leading UK employer in supporting carers within its workforce. The work of Employers for Carers is also acknowledged.

From : http://www.carersuk.org/images/News_and_campaigns/Juggling_work_and_unpaid_care_report_final_0119_WEB.pdf

COMMUNITY CARE

248/24 'One size does not fit all': perspectives on diversity in community aged care; by Claudia Meyer, Arti Appannah, Sally McMillan (et al.): Wiley.

Australasian Journal on Ageing, vol 37, no 4, December 2018, pp 268-274.

Typically older people are viewed via a single health condition yet health outcomes are likely impacted by the intersection of many individual characteristics. Promoting inclusive health care is underpinned by reducing bias, respectful communication and supporting individual needs and preferences. This Australian study explored perspectives of community aged care workers on diversity training and implementing training into practice. 90 community aged care workers were telephone-interviewed three months after a one-day diversity training workshop. Interviews were audio-recorded, transcribed verbatim and analysed thematically. Five themes emerged: 'raising awareness'; 'reserving judgement'; 'confidence and empowerment to embed diversity into practice'; 'communicating effectively'; and 'thinking about change _ but'. Diversity concepts were positively received but applying diversity principles into practice was found to be more difficult. Recommendations to promote inclusive health care included raising awareness of bias, communicating with inclusive language and embedding diversity concepts into community aged care practice by addressing individual, organisational and wider system constraints. (JL)

ISSN: 14406381

From : <http://www.wileyonlinelibrary.com/journal/ajag>

DEATH AND DYING

248/25 Dying in long-term care: perspectives from sexual and gender minority older adults about their fears and hopes for end of life; by Katherine Kortess-Miller, Jessica Boule, Kimberley Wilson, Arne Stinchcombe.: Taylor and Francis.

Journal of Social Work in End-of-Life and Palliative Care, vol 14, nos 2-3, April-September 2018, pp 209-224.

As lesbian, gay, bisexual, transgender and queer (LGBTQ+) communities age, many individuals expect a need to enter the long-term care system toward the end of life. Not unlike most ageing Canadians, this anticipation is met with concern and fear. However, previous research suggests that older LGBTQ+ individuals have unique fears, often related to personal safety and discrimination. This qualitative study examined the hopes and fears of older LGBTQ+ adults considering long-term care as they face end of life. Data were collected from three focus groups in Ontario, Canada, and analysed using inductive thematic analysis. Specific and frequent reference to fear of entering long-term care homes was common across all focus groups. The participants anticipated social isolation, decreased independence and capacity for decision-making, increased vulnerability to LGBTQ+-related stigma, as well as exposure to unsafe social and physical environments. The results from this study emphasise the need for palliative care specialists and long-term care home staff to address the unique health needs of older LGBTQ+ adults nearing the end of life, in order to work toward allaying fears and creating supportive and inclusive long-term care environments. (RH)

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

DEMENTIA

(See Also 248/82, 248/99, 248/103, 248/104)

248/26 A continuing sense of self in the lived experience of dementia; by Christine Bryden.: Taylor and Francis. Journal of Religion, Spirituality and Aging, vol 30, no 3, 2018, pp 279-290.

Diagnosis with dementia often leads to an overwhelming fear of loss of self, which is assumed in the social discourse about the condition. In this article a woman who was herself diagnosed with dementia in 1995 shares her experiences of how she reflected on this fear from a Christian theological perspective and was nonetheless able to discover a sense of hope. Highlighting what remains in dementia, as seen through the lens of the lived experience, provides a counter-story to the views of outside observers, which have dominated the literature to date. Although people with dementia experience a change in their cognitive sense of self, there are still important aspects of self that remain, which are: a sense of being an embodied self, in relationships with others and with God, and being able to find meaning in the present moment. Demonstrating that people living with dementia have a continuing sense of self can result in improved pastoral care and ministry. (JL)

ISSN: 15528030

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

- 248/27 Dementia in older people admitted to hospital: an analysis of length of stay and associated costs; by Susan Ahern, Jodi Cronin, Noel Woods (et al): Wiley.
International Journal of Geriatric Psychiatry, vol 34, no 1, January 2019, pp 137-143.
Patients with dementia in the acute setting are generally considered to impose higher costs on the health system compared to those without the disease largely due to longer length of stay (LOS). Many studies exploring the economic impact of the disease extrapolate estimates based on the costs of patients diagnosed using routinely collected hospital discharge data only. However much dementia is undiagnosed, and therefore in limiting the analysis to this cohort, it is believed that LOS and the associated costs of dementia may be overestimated. The purpose of this Irish study was to examine LOS and associated costs in a cohort of patients specifically screened for dementia in the hospital setting. Using primary data collected from a prospective observational study of patients aged 70 years or over the study conducted a comparative analysis of LOS and associated hospital costs for patients with and without a diagnosis of dementia. There was no significant difference in overall length of stay and total costs between those with or without dementia. Categorical data analysis of LOS and costs between the two groups provided mixed results. These results challenge the basis for estimating the costs of dementia in the acute setting using LOS data from those patients with a formal dementia diagnosis identified by routinely collected hospital discharge data only. Accurate disease prevalence data, encompassing all stages of disease severity, are required to enable an estimation of the true costs of dementia in the acute setting based on LOS. (JL)
ISSN: 09956230
From : <http://www.orangejournal.org>
- 248/28 Frontotemporal dementia: how we are failing families; by Lynne Ramsay, F Katharina Reichelt, Ian James.: Hawker Publications.
Journal of Dementia Care, vol 27, no 1, January-February 2019, pp 30-31.
Frontotemporal dementia often manifests itself in behavioural changes rather than memory deficits, yet it may go unrecognised. Two case studies illustrate how the consequences can be disastrous for those with the condition and those caring for and about them. For the past 20 years, Lynne (the first author) has acted as an unpaid advocate who has launched appeals on behalf of someone who has been dismissed from a job because of behavioural issues, and following the appeal has received a diagnosis of FTD. The first case involved a middle aged man whose sudden personality change led him to commit thefts and receive prison sentences - until finally diagnosed. The second concerns a surgeon in his 40s, whose wife had described changes in his behaviour and lack of empathy with patients to a newly qualified GP. Referring the husband to a consultant neurologist led to FTD diagnosis. It was only after various mistakes had been made with his care that he received help from a specialist nursing home. The insidious nature of this comparatively rare condition is highlighted, as is the importance of caregivers having appropriate levels of information and support. (RH)
ISSN: 13518372
From : <http://www.journalofdementiacare.co.uk>
- 248/29 Impact of time spent walking on incident dementia in elderly Japanese; by Yasutake Tomata, Shu Zhang, Yumi Sugawara, Ichiro Tsuji.: Wiley.
International Journal of Geriatric Psychiatry, vol 34, no 1, January 2019, pp 204-209.
This study examined the hypothesis that time spent walking daily has a marked impact on incident dementia. Firstly the authors analysed data from a Japanese cohort of 13,990 individuals aged 65 years or above in order to obtain hazard ratios. Time spent walking per day was assessed using a self-reported questionnaire. Data on 5.7-year incident dementia were retrieved from the public long-term care insurance database. After estimating the multivariate-adjusted hazard ratios (HRs) of incident dementia using the Cox model, the population attributable fraction (PAF) was calculated using the prevalence in a representative Japanese survey, the 'National Health and Nutrition Survey'. Results showed that time spent walking per day showed an inverse association with incident dementia: the multiple-adjusted HRs (95% confidence intervals) were 1.00 (reference) for less than 0.5 hour, 0.81 for 0.5 to one hour, and 0.72 for more than or equal to one hour. These estimates indicate that 18.1% of dementia cases would be attributable to walking if all subjects walked more than or equal to one hour per day and 14.0% if subjects increased their daily time spent walking to one level above the present one. Overall findings suggest that the daily time spent walking has a considerable preventive impact on incident dementia in Japan. (JL)
ISSN: 09956230
From : <http://www.orangejournal.org>
- 248/30 Making, shaping and celebrating together; by Roz Austin.: Hawker Publications.
Journal of Dementia Care, vol 27, no 1, January-February 2019, pp 24-25.
Language can pose a significant challenge for people with dementia, but those who are no longer able to write can be assisted to do so. This article examines how its author's "co-facilitation" of poems with her late grandmother, Wendy McNay, resulted in a book of poetry called Sweet Memories. Roz Austin explains that "Creating the poems together connected us together again". (RH)
ISSN: 13518372
From : <http://www.journalofdementiacare.co.uk>

- 248/31 Sensing the sacred: a small group worship experience for those with Alzheimer's and other dementias: a conference presentation from the 6th International Conference on Spirituality and Aging; by Nancy Gordon.: Taylor and Francis.
Journal of Religion, Spirituality and Aging, vol 30, no 4, 2018, pp 371-376.
In this paper the author describes her experience of developing a worship programme known as 'Sensing the Sacred'. The programme, designed for small groups of people with Alzheimer's disease or other dementias, was found to be beneficial for long term care residences and for congregations in ministry to their congregants and neighbours. It was developed from the work of Sonja Stewart, co-developer of the 'Young Children and Worship' programme, which uses wooden figures to tell Biblical stories and builds on the techniques of Maria Montessori. The paper describes development of this programme and offers advice on how to use it. (JL)
ISSN: 15528030
From : <http://www.tandfonline.com>
- 248/32 Timely diagnosis of dementia?: Family carers' experiences in 5 European countries; by Bob Woods, Francesca Arosio, Ana Diaz (et al).: Wiley.
International Journal of Geriatric Psychiatry, vol 34, no 1, January 2019, pp 114-121.
Timely diagnosis of dementia is recommended in national strategies. This study aimed to ascertain to what extent early diagnosis is occurring across Europe, what factors are associated with it and what is the impact on carers' emotions of quality of diagnostic disclosure. The authors carried out a survey of family carers recruited through five Alzheimer's associations (Czech Republic, Finland, Italy, the Netherlands and Scotland). 1,409 carers participated, 84% completing online. 52% were adult children and 37% were spouses, with median age 57. Most (83%) were female. Nearly half (47%) of carers reported that an earlier diagnosis would have been preferable. Delaying factors included reluctance of the person with dementia, lack of awareness of dementia, the response of professionals and delays within health systems. Recent diagnoses were no more likely to be considered timely although professional responses appeared to be improving. Delayed diagnoses were more often reported by adult child carers and where the diagnosis was made in the later stages of dementia or another condition had been previously diagnosed. In all countries except Italy, the diagnosis was shared with the person with dementia in most cases. Timely diagnoses and higher quality diagnostic disclosure are associated with better adjustment and less negative emotional impact on carers in the short and medium term. Although the study sample were well educated and likely to be in touch with an Alzheimer organisation, many continued to experience the diagnosis of dementia as coming too late. Further work on public awareness as well as on professional responses is therefore needed. (JL)
ISSN: 09956230
From : <http://www.orangejournal.org>
- 248/33 Young onset dementia: bridging the diagnosis gap; by Jacqueline Hussey, Leena Reddy.: Hawker Publications.
Journal of Dementia Care, vol 27, no 1, January-February 2019, pp 16-17.
Diagnosis rates for young onset dementia (YOD) are well below those for people aged 65+. The authors argue that this is unacceptable and issue a call for radical change. More effective screening, diagnosing and recording is needed if we are to have a better picture of YOD and to then have properly coordinated services, if these younger age groups are to benefit from greater social inclusion. (RH)
ISSN: 13518372
From : <http://www.journalofdementiacare.co.uk>

DEMMENTIA CARE

(See Also 248/13, 248/27, 248/56)

- 248/34 Carer coping and resident agitation as predictors of quality of life in care home residents living with dementia: Managing Agitation and Raising Quality of Life (MARQUE) English national care home prospective cohort study; by Anne Laybourne, Gill Livingston, Sian Cousins (et al).: Wiley.
International Journal of Geriatric Psychiatry, vol 34, no 1, January 2019, pp 106-113.
The objectives of this study were (1) to test the primary hypothesis that carers using more dysfunctional coping strategies predict lower quality of life in care home residents living with dementia, and this is moderated by levels of resident agitation, and (2) to explore relationships between carer dysfunctional coping strategy use, agitation, quality of life and resident survival. In the largest prospective cohort to date carers from 97 care home units (baseline, 4, 8, 12, 16 months) were interviewed about quality of life (DEMQOL-Proxy) and agitation (Cohen-Mansfield Agitation Inventory) of 1,483 residents living with dementia. At baseline 1,566 carers were interviewed about coping strategies (Brief COPE), averaging scores across care home units. Carer dysfunctional coping strategies did not predict resident quality of life over 16 months. Lower resident quality of life was longitudinally associated with worse Cohen-Mansfield Agitation Inventory score. Survival was not associated with carer dysfunctional coping, resident quality of life or agitation scores. Carer dysfunctional coping did not predict resident quality of life. Levels of resident agitation were consistently high and related to lower quality of life over 16 months. Lack of association between carer dysfunctional coping and resident quality of life may

reflect the influence of the care home or an insensitivity of aggregated coping strategy scores. The lack of relationship with survival indicates that agitation is not explained mainly by illness. Scalable interventions to reduce agitation in care home residents living with dementia are urgently needed. (JL)
ISSN: 09956230

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

- 248/35 The dementia-friendly hospital charter: its impact and future; by Vicki Leah, Jo James.: Hawker Publications.
Journal of Dementia Care, vol 27, no 1, January-February 2019, pp 14-15.
In the first of a new series on good practice in hospital dementia care, the authors report on the impact of the Dementia-Friendly Hospital Charter, originally launched by the Dementia Action Alliance in 2012. They explain why the Charter has been relaunched, for example, the inclusion of new material on volunteering. The sharing of knowledge between hospitals such that dementia leads feel that they no longer work in isolation in dealing with problems encountered, is highlighted. (RH)
ISSN: 13518372
From : <http://www.journalofdementiacare.co.uk>
- 248/36 The role of the memory service in helping carers to prepare for end of life: a mixed methods study; by Kirsten J Moore, Hannah Goodison, Elizabeth L Sampson.: Wiley.
International Journal of Geriatric Psychiatry, vol 34, no 2, February 2019, pp 360-368.
The objective of this study was to explore current practice and the role taken by UK memory services in helping carers of people with dementia prepare for the end of life. The authors used mixed methods including a survey and semistructured interviews with clinicians working in UK memory services accredited by the Memory Services National Accreditation Programme. They used descriptive statistics to report survey findings and thematically analysed interview and survey qualitative data. The surveys routinely discussed with carers the progressive nature of dementia (89%), legal arrangements (health: 72%; finances: 74%), advance care planning (63%) and implications of loss of capacity (61%). Fewer services routinely discussed the terminal nature of dementia (41%) and meaning of death (11%) with carers. Most (89%) agreed that these conversations were in line with their role. Interview findings corresponded with survey findings. Themes included diagnosis considered too early to discuss end of life, discussions being inconsistent with a 'living well' approach, people with dementia being resistant to conversations and discussions of spirituality crossing professional boundaries. Services' capacity for follow-up with carers impacted on ability to broach these topics. More in-depth and distressing topics such as end of life and advance care planning require longer follow-up to establish relationships to broach difficult topics. Variability in follow-up practices between services created inequity in the extent to which memory services could address these topics. More research is required to investigate the best method for broaching these topics with carers and the person with mild dementia within different health care contexts. (JL)
ISSN: 09956230 From : <http://www.orangejournal.org>
- 248/37 Supporting the spiritual needs of people with dementia in residential aged care; by Chanel Burke, Trevor Wight, Lynn Chenoweth.: Taylor and Francis.
Journal of Religion, Spirituality and Aging, vol 30, no 3, 2018, pp 234-250.
The aim of this study was to describe how an Australian not-for-profit church-based age care provider, BaptistCare NSW & ACT, has embraced the National Guidelines for Spiritual Care in Aged Care for people with dementia. A 12-month study was conducted in 19 Baptistcare residential homes, including 14 dementia units. Data were obtained from selected items of the Person-Centred Environment and Care Assessment Tool using interviews, observation and document review. The person-centred approach was instituted in adhering to the Guidelines for people with dementia. The latter approach was found to be helpful in actioning the Guidelines. (JL)
ISSN: 15528030 From : <http://www.tandfonline.com>
- 248/38 Understanding the quality of life of family carers of people with dementia: development of a new conceptual framework; by Stephanie Daley, Joanna Murray, Nicolas Farina (et al): Wiley.
International Journal of Geriatric Psychiatry, vol 34, no 1, January 2019, pp 79-86.
Dementia is a major global health and social care challenge and family carers are a vital determinant of positive outcomes for people with dementia. The aim of this study was to develop a conceptual framework for the Quality of Life (QOL) of family carers of people with dementia. Family carers of people with dementia and staff working in dementia services were studied repeatedly using in-depth individual qualitative interviews and focus group discussions. Analysis used constant comparison techniques underpinned by a collaborative approach with a study-specific advisory group of family carers. 41 individual interviews with 32 family carers and nine staff and two focus groups with six family carers and five staff were conducted. From the analysis 12 themes were identified that influenced carer QOL. These were organised into three categories focusing on person with dementia, carer and external environment. For carers of people with dementia the QOL construct was found to include condition-specific domains which were not routinely considered in generic assessment of QOL. This has implications for researchers, policymakers and service providers in addressing and measuring QOL in family carers of people with dementia. (JL)
ISSN: 09956230 From : <http://www.orangejournal.org>

- 248/39 The WHELD programme: showing the benefits; by Lucy Garrod, Jane Fossey, Clive Ballard.: Hawker Publications.
Journal of Dementia Care, vol 27, no 1, January-February 2019, pp 32-34.
Do person-centred care and social activity benefit people with dementia in care homes? The authors discuss the results of the WHELD (Wellbeing and Health in Dementia) study and implications for practice. They report results of a randomised control trial which assessed the effectiveness of this staff training intervention at 69 care homes over a 9-month period. The content of the four training days offered to WHELD champions, who then apply their learning and training colleagues, is described. Among the benefits to people with dementia were: improved quality of life; a small but statistically significant reduction in agitation and distress symptoms; moderate increase in proportion of positive care interactions between carers and residents; and a saving of £4,000 per care home or £2,000 per care home once the cost of implementing WHELD programme was taken into account. There was also a reduction in emergency and routine hospital admissions and less contact with GPs. The WHELD study demonstrates that with support, care home teams can incorporate into practice a focused approach to person-centred care, augmented by other therapeutic elements of personalised social activities and anti-psychotic review. Results of the full study are published as 'Impact of person-centred care training and person-centred activities on quality of life, agitation, and antipsychotic use in people with dementia living in nursing homes: A cluster-randomised controlled trial' in PLOS Medicine, February 2018 (see: <https://journals.plos.org/plosmedicine/article?id=10.1371/journal.pmed.1002500>). (RH)
ISSN: 13518372
From : <http://www.journalofdementiacare.co.uk>

DIET AND NUTRITION

- 248/40 Eating strategies: a qualitative study of how frail, home-dwelling older people in Denmark develop strategies to form meaningful eating situations; by Tenna Jensen, Liv Gronnow, Astrid Pernille Jespersen.: Cambridge University Press.
Ageing and Society, vol 39, no 3, March 2019, pp 590-608.
The eating strategies used by frail older people and the resources they entail are key to their experience with eating. This article analyses these strategies, based on semi-structured interviews and participant observation sessions with 25 home-dwelling frail older men and women, aged 72-101, who live in Copenhagen and receive food from the municipality. Like healthier older people, frail older Danes develop and use strategies to create acceptable eating situations. The strategies are linked to the arrangement of the eating situation, their former lives and experience with food and eating, and their perception of their own body. The focus on strategies enables insights into how frail older people manage to mobilise resources to create meaningful eating situations. However, these strategies are not all equally appropriate with regards to supporting a healthy nutritional status. Even so, a focus on these strategies is useful when developing public care initiatives that will contribute to a healthy nutritional status and a high quality of life for frail older people living at home. (RH)
ISSN: 0144686X
From : <http://www.cambridge.org/aso>
- 248/41 Improving the quality of life of aged care residents through the joy of food: the Lantern Project; by Cherie Hugo, Marcia Dwonczyk, Jan Skinner, Liz Isenring.: Wiley.
Australasian Journal on Ageing, vol 37, no 4, December 2018, pp 300-304.
Mealtimes directly impact the quality of life of residents in aged care. The objective of the Lantern Project was to improve the dining experience of aged care residents to reduce malnutrition risk through improving dietary intake. A transdisciplinary team of aged care professionals and resident advocates was formed as a collaboration collectively known as the Lantern Project. This paper outlines the journey and timeline of the Lantern Project collaboration since its inception and the interplay between the monthly stakeholder meetings and inter-related research projects demonstrating improved outcomes. Transdisciplinary collaboration offers well-grounded benefits and realistic strategies sensitive to the complexity of the aged care setting. An invited commentary in the same issue of the journal precedes this article (pp 252-253). (JL)
ISSN: 14406381
From : <http://www.wileyonlinelibrary.com/journal/ajag>

ECONOMIC ISSUES

- 248/42 Comparing the implications of expanded income-based measures of living standards with an application to older Australians; by Yuvisthi Naidoo.: Cambridge University Press.
Journal of Social Policy, vol 48, no 1, January 2019, pp 83-105.
Older people's standard of living is a critical policy matter, given Australia's ageing population. Conventional living standard assessments continue to rely on disposable income as a defining indicator, despite it not encompassing the full range of potential consumption possibilities that affect an individual's economic living standard. This article proposes a series of three economic resource metrics that sequentially append the disposable income metric to the value of non-cash benefits and services arising from the receipt of public goods, and/or services from home ownership in the form of a 'full'

income metric, and then the inclusion of wealth in the form of two derived 'potential consumption' metrics. Using data from the Household, Income and Labour Dynamics in Australia Survey, the findings demonstrate that augmenting disposable income with income streams from non-cash services and annuitised wealth substantially improves the relative economic position of older Australians. The findings also highlight the heterogeneity in economic living standard outcomes for different demographic sub-groups of older people that would otherwise be drawn, using a disposable income analytic lens. The article argues that an expanded economic resource perspective is necessary for informing ageing and social policy. (RH)

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

EDUCATION AND TRAINING

(See Also 248/2, 248/8, 248/11, 248/76, 248/125)

248/43 Geriatric education utilizing a palliative care framework; by Beverly Lunsford, Laurie Posey.: Taylor and Francis.

Gerontology and Geriatrics Education, vol 39, no 2, April-June 2018, pp 183-192.

The dramatic growth in the number of people aged 65+ and the increased incidence of multiple, chronic illness have resulted in the need for more comprehensive health care. Geriatrics and palliative care are medical specialties pertinent to older individuals, yet neither completely addresses the needs of older adults with chronic illness. A US interprofessional faculty developed Geriatric Education Utilizing a Palliative Care Framework (GEPaC), to teach an integrated approach to care. Interactive online modules use a variety of instruction methods, including case-based interactive questions, audio-visual presentations, reflective questions and scenario-based tests. Modules are designed for online education and/or traditional classrooms, and have been approved for Continuing Medical Education. Pre- and post-test scores showed significant improvements in knowledge, attitudes and skills. Participants were highly satisfied with the coursework's relevance and usefulness for their practice, and believed that GEPaC prepared them to address the needs of older adults for disease and symptom management, communicating goals of care, and supportive and/or compassionate care. (RH)

ISSN: 02701960 From : <http://www.tandfonline.com>

EMPLOYMENT

(See Also 248/23)

248/44 'Fuller' or 'extended' working lives?: Critical perspectives on changing transitions from work to retirement; by Chris Phillipson.: Cambridge University Press.

Ageing and Society, vol 39, no 3, March 2019, pp 629-650.

Research on older workers and retirement has yet to adjust fully to an environment influenced by a combination of demographic change, technological developments and economic recession. A key dimension to the changing relationship between ageing and work is the tension between policies to extend working life and the increasingly fragmented nature of late working life, with the emergence of varied transitions, including: bridge employment, second or third careers, part-time working, early retirement and other variations. These developments indicate both the challenge of conceptualising new forms of work-ending, and - in policy terms - the extent to which these can successfully accommodate longer working lives. The paper provides a critical perspective to the policy of extending working life and the narrative which underpins this approach. The paper argues that retirement has become a 'contested' institution in the 21st century, fragmented across different pathways and transitions affecting people in their fifties and sixties. The paper argues the case for improving work quality and security as a precondition for supporting policies for encouraging working in later life. An essential requirement for this will include linking debates on extending working life with technological developments and changes affecting the workplace, creating differentiated paths to retirement and labour force exit, enhancing the provision of training and continuing education, and re-thinking the idea of the 'older worker'. (RH)

ISSN: 0144686X From : <http://www.cambridge.org/aso>

248/45 Economic wellbeing for older people: 3C Project: user manual: learning for capability, capacity and citizenship; by EU Grundtvig Programme; 3C Project for Economic Wellbeing in Older People, European Union - EU: EU Grundtvig Programme; 3C Project for Economic Wellbeing in Older People, [2012?], 189 pp (Grundtvig Multilateral Project 518722-LLP-1-2011-1 PL-GRUNDTVIG-GMP).

The 3C Economic Wellbeing for Older People is a project which and aims to enable people aged 45+ to either remain in, or enter the labour market; it also considers income generation. This User Manual is published with the support of the Lifelong Learning Programme of the European Union (EU), and aimed at the five countries which the project covers: Greece, Netherlands, Poland, Spain and the UK. The manual is one of the project's outputs, and aims to provide appropriate knowledge about new forms of employment or work opportunities, and other ways of participation in society such as volunteering. Also covered are learning skills, and issues around lifestyle, health and well-being. (RH)

From : www.3cproject.eu

248/46 Returns to work after retirement: a prospective study of unretirement in the United Kingdom; by Loretta G Platts, Laurie M Corna, Diana Worts (et al.): Cambridge University Press.
Ageing and Society, vol 39, no 3, March 2019, pp 439-464.
Despite the complexity of the retirement process, most research treats it as an abrupt and one-way transition. This study takes a different approach by examining retirement reversals (unretirement) and their predictors. Using the British Household Panel Survey (BHPS, 1991-2008) and the subsequent Understanding Society (2010-2015), the authors undertook a survival analysis to investigate retirement reversals among Britons aged 50-69 who were born in 1920-1959 (N = 2,046). Unretirement was defined as: (a) reporting being retired and subsequently recommencing paid employment, or (b) beginning full-time work following partial retirement (the latter defined here as reporting being retired and working fewer than 30 hours per week). A cumulative proportion of around 25 per cent of participants experienced a retirement reversal after reporting being retired. About half of these reversals occurred within the first five years of retirement. Unretirement was more common for participants who were male, more educated, in better health, owned a house with a mortgage (compared to owning it outright), and whose partner was in paid work. However, unretirement rates were not higher for participants in greater financial need, whether measured as subjective assessment of finances or household income quintiles. These results suggest that unretirement is a strategy more often used by those who are already advantaged, and that it has the potential to exacerbate income inequalities in later life. (RH)
ISSN: 0144686X
From : <http://www.cambridge.org/aso>

248/47 Understanding work enjoyment among older workers: the significance of flexible work options and age discrimination in the workplace; by Eunhee Choi, Javier Ospina, Michael F Steger, Rebecca Orsi.: Taylor and Francis.
Journal of Gerontological Social Work, vol 61, no 8, November-December 2018, pp 867-886.
Although the number of older workers in the United States is increasing, there is a gap in knowledge on whether or not they actually enjoy working. This study, based on a conceptual framework focusing on job resources and demands, explored likely workplace determinants of work enjoyment among older workers aged 50 or over. Using the 2012 wave of the Health and Retirement Study (HRS), a partial proportional odds model was used to detect determinants of work enjoyment. Results showed that higher levels of work enjoyment were significantly and negatively associated with the level of perceived retirement pressure and promotion preference for younger workers, and positively associated with moving to less demanding positions. Self-employment showed a noticeable enhancement of work enjoyment. This study highlights the significance of flexible work options and age discrimination in the workplace in understanding work enjoyment later in life. (RH)
ISSN: 01634372
From : <http://www.tandfonline.com>

END-OF-LIFE CARE

(See Also 248/25, 248/114)

248/48 Filling the void: hospital palliative care and community hospice: a collaborative approach to providing hospital bereavement support; by Cathy J Silloway, Toni L Glover, Brian J Coleman, Sheri Kittelson.: Taylor and Francis.
Journal of Social Work in End-of-Life and Palliative Care, vol 14, nos 2-3, April-September 2018, pp 153-161.
Bereavement services are often provided as components of hospice and palliative care plans, including emotional, psychosocial and spiritual support provided to individuals and families to assist with grief, loss and adjustment after the death of a loved one. Patient- and family-centred care is a hallmark of palliative care. Moreover, bereavement counselling is offered as a hospice care benefit that is covered by Medicare and various private insurance plans in the US. However, not all hospital-based palliative care programmes offer bereavement support. This article describes an innovative bereavement programme designed to offer support to individuals whose loved one died in the hospital while receiving palliative care. The bereavement team, including clinical professionals from the inpatient palliative care team and two community hospices, developed the University of Florida (UF) Health Bereavement Program. The interprofessional team includes social workers, volunteers, chaplains, nurses, nurse practitioners and physicians. The Bereavement Program incorporates grief support workshops, follow-up with participants via postal mail at timed intervals, website access to grief resources, staff education, and an annual evening of remembrance. Finally, interagency collaboration has extended the reach of bereavement services beyond UF Health into the community at large. This model of provision serves as an example for other hospital-based palliative care services. (RH)
From : <http://www.tandfonline.com>

FALLS

- 248/49 Exercise for falls prevention: decision-making among Australian-born and Italian-born older people; by Pranee Liamputtong, Julie Lam, Keith Hill.: Taylor and Francis. Activities, Adaptation and Aging, vol 42, no 4, October-December 2018, pp 261-277. The authors examine those factors which contribute to decision-making on participation and adherence to exercise to reduce falls by older people with recent falls history. Nineteen participants (9 Australian-born and 10 Italian-born; median age 78 years) who had one or more falls in the past 12 months and completed a community-based physiotherapy course were recruited. Semi-structured interviews were conducted, transcribed and thematically analysed. The findings show that family, client-clinician relationship and personal experience affected decision-making and exercise participation. The findings revealed that a number of factors influenced older people's decision and uptake of falls prevention exercise, including personal goals, recommendations from health care providers, and life experiences. There were some differences between the Italian-born and the Australian-born participants, including that most Australian-born participants adhere to exercise regimens in order to avoid requiring nursing home care, whereas Italian-born individuals did not wish to be dependent on their children. An understanding of personal motivating and de-motivating factors for exercise for falls prevention are important for health and social care professionals to consider in engaging some groups of older people. (RH)
ISSN: 01924788 From : <http://www.tandfonline.com>

FAMILY AND INFORMAL CARE

(See Also 248/38)

- 248/50 Struggles for recognition and redistribution: family carers and domestic workers in Spanish eldercare; by Elin Peterson.: Policy Press. International Journal of Care and Caring, vol 2, no 4, November 2018, pp 459-476. Theories of social justice have identified the revaluation of caregiving work as a global challenge. Still, struggles for recognition are shaped by the specific cultural and institutional contexts in which they emerge. This article explores struggles for the recognition of caregiving work in Spanish eldercare, focusing on advocacy for family carers and for domestic workers. Drawing on interviews, findings reveal that domestic workers' needs are politicised to a greater extent than family carers' needs; empowerment and claims for workers' rights contrast with notions of self-care and mutual support. While the struggles are differentiated, the under-valuing of eldercare is a common theme. (RH)
ISSN: 23978821 From : <http://www.policypress.co.uk/journals/international-journal-of-care-and-caring>

FRAILITY

- 248/51 Exploring the impact of a new intervention to increase participation of frail older adults in meaningful leisure activities; by V Provencher, H Carbonneau, M Levasseur (et al.): Taylor and Francis. Activities, Adaptation and Aging, vol 42, no 1, January-March 2018, pp 1-18. Many frail older adults have difficulty maintaining social participation. The authors developed an innovative, personalised intervention (developed in French) to help frail older adults pursue meaningful leisure activities through the use of compensatory strategies. This Canadian pre-experimental pilot study was conducted with 10 French-speaking community-dwelling frail older adults in Quebec City (aged 80+). They were asked to identify three meaningful leisure activities they no longer performed, to name three barriers for each, and were then suggested three compensatory strategies. The study showed that the intervention improved their knowledge regarding the compensatory strategies learned and their participation in meaningful leisure activities. However, results also showed a decrease in feelings of well-being. This study provides promising results to support the implementation of an innovative intervention tailored to the needs of frail seniors and designed to foster their participation. However, further research is needed to improve our understanding of the impact of the intervention on well-being and to explain the results obtained. (RH)
ISSN: 01924788 From : <http://www.tandfonline.com>

GARDENING AND HORTICULTURAL THERAPY

- 248/52 Cultivating community: perceptions of community garden and reasons for participating in a rural Victorian town; by Pranee Liamputtong, Erin Louise Sanchez.: Taylor and Francis. Activities, Adaptation and Aging, vol 42, no 2, April-June 2018, pp 124-142. Community gardens can offer a range of psychosocial benefits to individuals who use them, including nutritional, social, psychological benefits, as well as the opportunity to become connected to nature. However, we know little about how community gardens are perceived and reasons that make people participate in community gardens in rural Australian towns. This paper examines these issues among a group of older people living in South Gippsland, Victoria, a rural Australian town. In-depth interviews were conducted with 10 older people. Findings highlighted the benefits associated with participation in a rural community garden, including forming social support networks in order to cultivate social capital. Community gardens created social connectedness among the participants, which could lead to

better overall health and well-being. The main reason for their initial involvement with the community garden was that they were new to the area. Joining the group to develop support networks within the local area would allow them to cultivate social capital in their new living environment. These findings can inform government policies regarding localised food sustainability programmes, which is important, given the increasing popularity of such programmes Australia-wide and elsewhere. (RH)

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GRANDPARENTS

(See Also 248/80, 248/84, 248/106, 248/124)

- 248/53 Predicting child safety: the effect of custodial grandparents' depressive symptoms, home safety, knowledge, and gender; by Danielle K Nadorff, Julie Hicks Patrick.: Taylor and Francis.

Journal of Intergenerational Relationships, vol 16, no 3, 2018, pp 225-242.

There are over 2.5 million custodial grandparents raising 4.8 million grandchildren in the United States. These grandparents face many major struggles including increasing financial costs, physical disabilities and deteriorating home environments. The present study investigated grandchild wellbeing, particularly the safety of custodial grandparents' homes and its relation to injury prevention. This is crucial as unintentional injury is the leading cause of death for children. The model put forward in this study predicted child safety based on grandparent gender, depressive symptoms and safety knowledge. The model fitted well and explained 23% of the variance in child injuries. Several gender differences were also present, for both grandparent and grandchild gender. (JL)

ISSN: 15350770

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

HEALTH AND WELLBEING

(See Also 248/18)

- 248/54 Happy now?: Lessons for economic policy makers from a focus on subjective well-being; by George Bangham, Resolution Foundation. London: Resolution Foundation, February 2019, 47 pp.

This report focuses on the relationship between subjective well-being and measures of economic living standards, namely income, the labour market and housing tenure. It also asks about how subjective well-being has changed since 2011, when the Office for National Statistics (ONS) began collecting data on happiness. It finds that age is closely associated with well-being, with teenagers (age 16) and 70-year-olds have the highest levels, and those in their early 50s the lowest levels. Among other findings are that: self-reported health correlates strongly with people's subjective well-being; being retired is the best economic status for well-being; and region of residence has a significant association with well-being: Northern Ireland tops the scale for both happiness and life satisfaction. The report recommends that surveys such as Understanding Society should ask the same four questions on subjective well-being as the main ONS surveys. It suggests a need for more detailed explanation as to why average well-being appears to have risen in the past few years, and "whether its growth is impervious to all but the most serious of economic downturns". (RH)

From : <https://www.resolutionfoundation.org/app/uploads/2019/02/Happy-now-report.pdf>

HOME CARE

(See Also 248/13)

- 248/55 'Independence' among older people receiving support at home: the meaning of daily care practices; by Rachel Barken.: Cambridge University Press.

Ageing and Society, vol 39, no 3, March 2019, pp 518-540.

Later life care practices are closely entangled with the ideals of independence and dependence. Based on an interpretive analysis of qualitative interviews with 34 people aged 65-100 receiving home care in Ontario, Canada, this article explores older people's subjective interpretations of caring for themselves (i.e. independence) and receiving support from others (i.e. dependence). Findings suggest that individuals construct subjective meanings of independence in relation to their changing physical capacities, and in the context of their relationships with family members, friends and formal care providers. First, participants considered their care activities to be a way of maintaining independence when they undertook certain practices with the intention of staving off dependency and future decline. Second, when they accepted assistance, many engaged in care relations that allowed them to preserve an independent identity in the face of limits to physical self-sufficiency. Third, participants reached the limits of independence when they lacked adequate assistance, and were unable to care for themselves in desirable ways. Findings illustrate how objective circumstances related to social and financial resources as well as access to formal services shape subjective interpretations, allowing some older people to hold on to independent identities while exacerbating feelings of dependency among others. (RH)

ISSN: 0144686X From : <http://www.cambridge.org/aso>

- 248/56 Constituents of effective support for homecare workers providing care to people with dementia at end of life; by I-Ling Yeh, Kritika Samsi, Tushna Vandrevale, Jill Manthorpe.: Wiley. *International Journal of Geriatric Psychiatry*, vol 34, no 2, February 2019, pp 352-359. The aim of this study was to enhance understanding about homecare workers providing care to people with dementia at the end of life by exploring their perceptions of challenges and the support they needed and sometimes received. Qualitative semi-structured interviews were conducted with 29 homecare workers and 13 homecare managers in England. Framework analysis was used to analyse the data. Four overarching challenges were identified: working with clients with dementia, including clients' sometimes unpredictable responses, communication difficulties and mood changes; caring for the dying; conflict with family members; and working alone, which often left homecare workers at risk of exhaustion, fatigue and a sense of isolation. When their work entailed high levels of emotion, such as a client's death or getting embroiled in a client's family conflict, they felt emotionally drained, under-prepared and overwhelmed. Supportive elements included receiving encouragement and learning from experienced peers and their feelings being acknowledged by managers at their employing homecare agency. Some workers were offered time off or encouraged to attend the client's funeral as a means of supporting the process of bereavement. Peer and manager support are essential and effective in coping with work pressures. There is a need to develop models of effective support to alleviate staff's practical, emotional and interpersonal pressures. However due to the isolating nature of homecare work, managers may not recognise early signs of their staff finding stress unmanageable and miss the opportunity to mitigate these negative effects. (JL)
ISSN: 09956230
From : <http://www.orangejournal.org>
- 248/57 Experiences of older people following the introduction of consumer-directed care to home care packages: a qualitative descriptive study; by Jenny Day, Ann C Thorington Taylor, Sharyn Hunter, Peter Summons.: Wiley. *Australasian Journal on Ageing*, vol 37, no 4, December 2018, pp 275-282. The objective of this study was to explore the experiences of older people receiving home care package (HCP) support following the introduction of consumer-directed care (CDC) by the Australian government in July 2015. 31 older people with existing HCP support from two service providers in regional New South Wales, Australia, participated in a face-to-face interview and/or a qualitative survey. Analysis revealed the theme of choices: preferences, constraints, balancing and choosing. Participants described choosing to live at home with HCP support; however they were constrained by poor communication and information about service changes and options, personal budgets and access to future care. HCP services remained largely unchanged during transition to CDC. Many aspects of the initial implementation of CDC were challenging for older people. Clear, relevant and timely communication and information about CDC and its consequences for consumers appear to be needed to enhance CDC. (JL)
ISSN: 14406381
From : <http://www.wileyonlinelibrary.com/journal/ajag>
- 248/58 Which client characteristics predict home-care needs?: Results from a survey study among Dutch home-care nurses; by Anne O E van den Bulck, Silke Metzethin, Arianne M J Elissen (et al.): Wiley. *Health and Social Care in the Community*, vol 27, no 1, January 2019, pp 93-104. Fee-for-service funding care on an hourly rate basis creates an incentive for home care providers to deliver high amounts of care. Under casemix funding, in contrast, clients are allocated - based on their characteristics - to homogenous, hierarchical groups, which are subsequently funded to promote more effective and efficient care. The first step in developing a casemix model is to understand which client characteristics are potential predictors of home care needs. Nurses working in home care (i.e. home care nurses) have a good insight into clients' home care needs. This study was conducted in co-operation with the Dutch Nurses' Association and the Dutch Healthcare Authority. Based on international literature, 35 client characteristics were identified as potential predictors of home care needs. In an online survey carried out during May 2017 Dutch home care nurses were asked to score these characteristics on relevance, using a 9-point Likert scale. They were subsequently asked to identify the top five client characteristics. Data were analysed using descriptive statistics. The survey was completed by 1,007 home care nurses. Consensus on relevance was achieved for 15 client characteristics, with 'terminal phase' being scored most relevant and 'sex' being scored as the least relevant. Relevance of the remaining 20 characteristics was uncertain. Additionally, based on the ranking, Activities of Daily Living (ADL) functioning was ranked as most relevant. According to home care nurses, both biomedical and psychosocial client characteristics need to be taken into account when predicting home care needs. Collaboration between clinical practice, policy development and science is necessary to realise a funding model, to work towards the Triple Aim (improved health, better care experience and lower costs). (JL)
ISSN: 09660410
From : <http://www.wileyonlinelibrary.com/journal/hsc>

HOSPITAL CARE

(See Also 248/27, 248/35, 248/60)

- 248/59 Enhancing dignity for older inpatients: the photograph-next-to-the-bed study; by Ruth E Hubbard, Melissa Bak, Jacqueline Watts (et al).: Taylor and Francis.
Clinical Gerontologist, vol 41, no 5, October-December 2018, pp 468-473.
Older inpatients compromised by illness and cognitive decline may be stripped of physical and cultural identifiers, making them vulnerable to erosion of dignity. This Australian study explored the experiences of patients, carers and clinical staff in response to a simple intervention that could enhance the dignity of care for older inpatients. All patients in a rehabilitation ward were encouraged to have a photograph of themselves next to their bed. Patients who did so, along with family members and staff were recruited to focus groups to explore their reflections. Discussions were transcribed and analysed using a deductive approach to capture evolving themes relating to patient care. All groups reported that the photograph provided "connection" and a means of communication between patients and staff. Staff spoke positively of gaining additional insights into patients' lives. Benefits included enrichment of interpersonal relationships between patients and staff, between staff and families, and between patients themselves. A bedside photograph improved connections between staff, patients and carers, promoting patients' dignity of identity. Displaying a bedside photograph as a visual reminder of the patient in the pre-illness state helps preservation of an individual's dignity, a core concept in patient-centred care. (RH)
ISSN: 07317115 From : <http://www.tandfonline.com>

HOUSING

- 248/60 Emergency hospital admissions associated with a non-randomised housing intervention meeting national housing quality standards: a longitudinal data linkage study; by Sarah E Rodgers, Rowena Bailey, Rhodri Johnson (et al).
Journal of Epidemiology & Community Health, vol 72, 2018, pp 896-903.
The authors investigated tenant healthcare utilisation associated with upgrading 8558 council houses to a national quality standard in a Welsh Local authority (Carmarthenshire). Homes received multiple internal and external improvements and were analysed using repeated measures of healthcare utilisation. The primary outcome was emergency hospital admissions for cardiorespiratory conditions and injuries for residents aged 60 years and over (source used was the Patient Episode Dataset for Wales). The Welsh Demographic Dataset (WDS) was used for the other outcomes and variables considered. Secondary outcomes included each of the separate conditions, for tenants aged 60 and over, and for all ages. Council home address and intervention records for eight housing cointerventions were anonymously linked to demographic data, hospital admissions and deaths for individuals in the cohort. Counts of health events were analysed using multilevel regression models to investigate associations between receipt of each housing improvement, adjusting for potential confounding factors and regional trends. The study found that residents aged 60 years and over living in homes when improvements were made were associated with up to 39% fewer admissions, compared with those living in homes that were not upgraded (incidence rate ratio=0.61, 95% CI 0.53 to 0.72). Reduced admissions were associated with electrical systems, windows and doors, wall insulation and garden paths. There were small non-significant reductions for the primary outcome associated with upgrading heating, adequate loft insulation, new kitchens and new bathrooms. These results suggest that hospital admissions can be avoided through improving whole home quality standards. This is the first large-scale longitudinal evaluation of a whole home intervention that evaluated multiple improvement elements using individual-level objective routine health data. (RH)
From : <https://jech.bmj.com/content/jech/72/10/896.full.pdf>
- 248/61 Housing and the older ethnic minority population in England; by Nigel de Noronha, Race Equality Foundation; Housing Learning and Improvement Network.: Race Equality Foundation; Housing Learning and Improvement Network, February 2019, 32 pp.
The evidence on housing disadvantage amongst the older black and minority ethnic (BME) population is explored. As the age profile of BME and migrant people converges towards that of the general UK population, it is likely that their future housing needs will entail increased demand for supported housing and adaptations to their homes. This report identifies the demographic changes in the BME population; the extent to which older BME people experience housing disadvantage compared to the white British population; what factors may contribute to this disadvantage; and the spatial concentration of BME older people in urban areas in England. It uses 2011 Census microdata and 2011 Census aggregate data: housing deprivation is indicated by overcrowding, having no central heating, or living with another household. The briefing is part of a broader dialogue with the Race Equality Foundation, Housing LIN and the Centre for Ageing Better. It reflects the opportunity to improve the quality of life of older BME people, by collecting evidence of the barriers that affect their experiences of housing and the ways that local agencies have overcome them. It finds a seemingly ongoing gap in the evidence base regarding the extent to which older BME people have access to suitable, high quality extra care and specialist housing that meets their needs. (RH)
From : https://www.housinglin.org.uk/_assets/Resources/Housing/Support_materials/Briefings/HLIN_Briefing_BME_Housing.pdf

HOUSING WITH CARE

(See 248/92)

INEQUALITY AND HUMAN RIGHTS

- 248/62 Inequality in active ageing: evidence from a new individual-level index for European countries; by Mikkel Barslund, Marten von Werder, Asghar Zaidi.: Cambridge University Press.
Ageing and Society, vol 39, no 3, March 2019, pp 541-567.
In the context of emerging challenges and opportunities associated with population ageing, the study of inequality in active-ageing outcomes is critical to the design of appropriate and effective social policies. While there is much discussion about active ageing at the aggregate country level, little is known about inequality in active-ageing experiences within countries. Based on the existing literature on active ageing, this paper proposes an individual-level composite active ageing index based on Survey of Health, Ageing and Retirement in Europe (SHARE) data. The individual-level nature of the index allows us to analyse inequality in experiences of active ageing within selected European countries. One important motivation behind measuring active ageing at the individual level is that it allows for a better understanding of unequal experiences of ageing, which may otherwise be masked in aggregate-level measures of active ageing. Results show large differences in the distribution of individual-level active ageing across the 13 European countries covered and across age groups. Furthermore, there is a positive association between the country-level active ageing index and the equality of its distribution within a country. Hence, countries with the lowest average active ageing index tend to have the most unequal distribution in active-ageing experiences. For nine European countries, where temporal data are also available, the authors find that inequality in active-ageing outcomes decreased in the period 2004 to 2013. (RH)
ISSN: 0144686X
From : <http://www.cambridge.org/aso>

INFORMATION AND COMMUNICATION TECHNOLOGY

(See Also 248/13, 248/79)

- 248/63 Older adult internet super-users: counsel from experience; by Mary Tyler, Veronika Simic, Linda De George-Walker.: Taylor and Francis.
Activities, Adaptation and Aging, vol 42, no 4, October-December 2018, pp 328-339.
There is evidence that digital technologies including the Internet have the potential to improve older adults' social participation and inclusion. This in turn is said to improve their quality of life. Older Internet super-users are in a unique position to inform us about what it takes to be a successful "silver surfer". This article reports on a study exploring the digital experiences of older Australian (age 65+) retirees, who are Internet "super-users". Super-users are defined as those who effectively use many Internet applications as part of the normal rhythm of daily life. The data gathering methods of this study were: photovoice, a diary of Internet use, and a semi-structured telephone interview. The project identified what makes a good Internet experience for older adults. This was then translated into a set of guidelines to improve Internet use for other older adults, who are yet to fully realise the potential of the Internet to enhance daily life and well-being. The results are considered from the perspectives that older adults' digital participation is best conceptualised by incorporating self-efficacy theory, digital competence and personal learning environments (PLEs), and demonstrates a pathway toward digital participation for older adults through the development of digital self-efficacy. (RH)
ISSN: 01924788 From : <http://www.tandfonline.com>
- 248/64 A process to evaluate an iTV platform to enhance seniors' access to information about public and social services; by Telmo Silva, Hilma Caravau, Liliana Reis, David Campbello.: Emerald.
Working with Older People, vol 22, no 4, 2018, pp 224-233.
The authors present a process to evaluate the usability and usefulness of a high-fidelity prototype of the +TV4E platform (removed for blind review), an iTV service which aims to promote the info-inclusion and quality of life of Portuguese seniors, by delivering informative contents about public and social services. The research presented is qualitative, and uses an inclusive and participatory co-design process involving older people to evaluate usability of an iTV service with support of the Post-Study System Usability Questionnaire (PSSUQ) tool and a questionnaire survey. The participants were 11 individuals aged 65+ enrolled in an adult day care centre in Aveiro city, Portugal (removed for blind review). Findings allowed assessment of some key aspects in the +TV4E platform implementation that should be addressed in its final version. Using the PSSUQ tool as well as a questionnaire survey confirmed the relevance of this platform to meet older people's information needs. This research offers insights on the value of including potential users in the development and test phases of an innovative technology which intends to offer more adequate tools to improve older people's info-inclusion and quality of life. Also, it is possible to understand what should be considered when evaluating a prototype intended to be used by older people. (RH)
ISSN: 13663666 From : <http://www.emeraldinsight.com/loi/wwop>

INTEGRATED CARE

- 248/65 The (cost-)effectiveness of preventive, integrated care for community-dwelling frail older people: a systematic review; by Wilhelmina Mijntje Looman, Robbert Huijsman, Isabelle Natalina Fabbrocetti.: Wiley.
Health and Social Care in the Community, vol 27, no 1, January 2019, pp 1-30.
Integrated care is increasingly promoted as an effective and cost-effective way to organise care for community-dwelling frail older people with complex problems but doubts remain as to whether high expectations are justified. The present study aimed to systematically review empirical evidence for the effectiveness and cost-effectiveness of preventive, integrated care for community-dwelling frail older people with particular reference to the elements and levels of integration of the interventions. Following an extensive literature search 2,998 unique records were identified. Of these, 46 studies on 29 interventions were selected. The authors assessed the quality of the included studies with the Effective Practice and Organization of Care risk-of-bias tool. The interventions were described following Rainbow Model of Integrated Care framework by Valentijn. This systematic review revealed that the majority of the reported outcomes in the studies on preventive, integrated care showed no effects. In terms of health outcomes, effectiveness was demonstrated most often for seldom-reported outcomes such as wellbeing. Outcomes regarding informal caregivers and professionals were rarely considered and negligible. Most promising were the care process outcomes that did improve for preventive, integrated care interventions as compared to usual care. Healthcare utilisation was the most reported outcome but mixed results were found. Evidence for cost-effectiveness was found to be limited. High expectations should be tempered given this limited and fragmented evidence for the effectiveness and cost-effectiveness of preventive, integrated care for frail older people. Future research should focus on unravelling the heterogeneity of frailty and on exploring what outcomes among frail older people may realistically be expected. (JL)
ISSN: 09660410
From : <http://www.wileyonlinelibrary.com/journal/hsc>

INTERGENERATIONAL ISSUES

(See Also 248/15, 248/84, 248/86, 248/88)

- 248/66 "It's a win-win situation" - intergenerational learning in preschool and elder care settings: an Irish perspective; by Carmel Gallagher, Anne Fitzpatrick.: Taylor and Francis.
Journal of Intergenerational Relationships, vol 16, nos 1-2, 2018, pp 26-44.
This paper explores the level and sustainability of intergenerational practice in early years and elder care settings in Ireland. The paper is based on a small-scale research study involving interviews with staff in five organisations and builds on findings from previous research conducted for the Together Old and Young (TOY) project (<http://www.toyproject.net>). The paper examines the pedagogies involved as well as the community context of intergenerational practice in early years and elder care settings. The findings highlight that sustainable intergenerational practice is facilitated by strong pedagogies that support active and relational learning across the life course and by being embedded in robust community networks. (JL)
ISSN: 15350770
From : <http://www.tandfonline.com>
- 248/67 'Roots and wings': an exploration of intergenerational play; by Joel R Agate, Sarah Taylor Agate, Toni Liechty, Lynda J Cochran.: Taylor and Francis.
Journal of Intergenerational Relationships, vol 16, no 4, 2018, pp 395-421.
Play is an important part of life, not only during childhood but also into adulthood and later life. While scholars have emphasised the physical, social, psychological and cognitive benefits of play for children, few researchers have explored the role of play in later life. One context in which ageing adults find opportunities to play is with their grandchildren. This qualitative study employed visual and text analyses to explore the experience of intergenerational play from the perspectives of grandchildren and grandparents. Findings indicated that both groups of participants were motivated to engage in play together, negotiated constraints to experience play, and received various benefits from playing with their grandparent or grandchild. Recommendations are provided to assist professionals in programming for intergenerational play and for further exploration of the motivations, benefits and constraints associated with intergenerational play. (JL)
ISSN: 15350770
From : <http://www.tandfonline.com>

- 248/68 Bridging the generation gap: intergenerational service-learning benefits young and old; by Carrie Andreoletti, Jessica L Howard.: Taylor and Francis.
Gerontology and Geriatrics Education, vol 39, no 1, January-March 2018, pp 46-60.
Intergenerational service-learning is commonly used in courses about ageing. Although benefits are well documented for college students, fewer studies have examined the benefits for older adults. This article discusses the development and implementation of an intergenerational program designed as a brief service-learning experience, to reduce age-related stereotypes and increase generativity in older adults.

- Young adults enrolled in an ageing course and older adults from a local assisted living community met three times to discuss a variety of topics and to get to know one another. Results showed a significant reduction in ageism on the Fraboni Scale of Ageism for young adults. Descriptive data suggested an increase in generativity on the Loyola Generativity Scale for older adults. Qualitative data suggested that all participants gained a greater appreciation for one another and recognized how much they had in common. Limitations, challenges and lessons learned are also discussed. Intergenerational service-learning, even in small doses, shows promise for bridging the generation gap. (RH)
ISSN: 02701960 [From](http://www.tandfonline.com) : http://www.tandfonline.com
- 248/69 Developing an evidenced based intergenerational pedagogy in Australia; by Jennifer Cartmel, Katrina Radford, Cindy Dawson (et al.): Taylor and Francis.
Journal of Intergenerational Relationships, vol 16, nos 1-2, 2018, pp 64-85.
This Australia-based study presents a systematic literature review of the qualitative evidence in relation to intergenerational learning programmes, principles and practices. The aim of the review was to develop the evidence base to form an Intergenerational Model of Practice Framework based on the Early Years Learning Framework (EYLF). The EYLF comprises three inter-related elements: principles, practice and outcomes. The results of this systematic literature review revealed commonalities across these elements and therefore what is needed to underpin the development of an evidence-based Intergenerational Model of Practice Framework. (JL)
ISSN: 15350770 [From](http://www.tandfonline.com) : http://www.tandfonline.com
- 248/70 How stereotypes and attitudes toward older adults are challenged through intergenerational contact: young people explain the process; by Barbra Teater.: Taylor and Francis.
Gerontology and Geriatrics Education, vol 39, no 1, January-March 2018, pp 104-116.
There is a growing body of evidence on the effectiveness of intergenerational contact in challenging stereotypes and attitudes, particularly when applying the four conditions of Allport's contact hypothesis. Despite this, little is known of how change actually occurs, particularly among young people. Individual interviews with twelve young people (age 11-12 years) were conducted to determine the extent and process by which their stereotypes and attitudes toward older adults (aged 65+) changed through intergenerational contact, based on the contact hypothesis. Data analysis revealed five themes and 12 sub-themes that illustrate this process. The findings support the contact hypothesis, explain how change occurs, and point to the need for further research on the change process. (RH)
ISSN: 02701960 [From](http://www.tandfonline.com) : http://www.tandfonline.com
- 248/71 Intergenerational education in Spanish primary schools: making the policy case; by Marianos Sánchez, Juan Sáez, Pilar Díaz, Margarita Campillo.: Taylor and Francis.
Journal of Intergenerational Relationships, vol 16, nos 1-2, 2018, pp 166-183.
The main purpose of this paper was to present the wider context and possibilities for developing intergenerational education in Spanish primary schools. Starting with an overview of the state of intergenerational relationships in Spain, the paper goes on to argue that bridging intergenerational relationships across familial and non-familial settings is a pathway ahead to boost cooperation between generations. Schools in general and primary schools in particular are said to be ideal intergenerational contact zones for such a bridging. Seven principles are put forward for policy-makers who would like to consider the infusion of an intergenerational perspective in primary schools. (JL)
ISSN: 15350770 [From](http://www.tandfonline.com) : http://www.tandfonline.com
- 248/72 Intergenerational interaction between old and young in creative task: Megumi Tabuchi, Asako Miura.: Taylor and Francis.
Journal of Intergenerational Relationships, vol 16, no 3, 2018, pp 275-286.
This Japanese study aimed to find out what are the characteristic interactions that occur when different generations are combined in a group and involved in creative activities. Using an experimental method, the study compared the behaviours of intergenerational groups with that of same age groups when performing a task using Kapla, a type of wooden block. Kapla are simple wooden blocks that are less constrained by form than regular blocks, and users can create freely with them. Four categories _ namely, 'Proposal request', 'New proposal', 'Reactions to proposal' and 'Assessments of partner's behaviour' _ were extracted from conversations during task performance. In intergenerational groups, the ratio of utterances of 'Proposal request' (encouraging a new proposal to partner) were higher than in same-generation groups for older adults. In intergenerational groups, older people assumed the role of encouraging younger people to suggest new ideas, and older people's such empathic behaviours were likely to provoke lively arguments. (JL)
ISSN: 15350770 [From](http://www.tandfonline.com) : http://www.tandfonline.com
- 248/73 Intergenerational learning through a participatory video game design workshop; by Giuliana Cucinelli, Ann-Louise Davidson, Margarida Romero, Tristan Matheson.: Taylor and Francis.
Journal of Intergenerational Relationships, vol 16, nos 1-2, 2018, pp 146-165.
This study was a programme evaluation for intergenerational video game design workshop using Scratch, a visual programming language developed at the MIT Media Lab, an interdisciplinary research laboratory based at Massachusetts Institute of Technology. The study used a framework inspired by participatory game design, intergenerational interactions and maker culture to create a workshop that

- valued the interactions of participants from various age groups, genders and backgrounds to learn together about game design. It used a mixed methodology, which exploited an action research technique called the Socratic Wheel and a post-questionnaire. Results showed that participants generally felt positive about the workshop, despite some criticisms about the thoroughness of the learning experience for some individuals. Limitations of both the workshop design and the research design are outlined. (JL)
ISSN: 15350770
From : <http://www.tandfonline.com>
- 248/74 A quantitative and qualitative evaluation of the impact of an intergenerational program on children's biases toward older adults; by Renée L Babcock, Eileen E MaloneBeach, Hannah M Salomon.: Taylor and Francis.
Journal of Intergenerational Relationships, vol 16, nos 1-2, 2018, pp 123-138.
Ageism refers to the negative bias that targets people of a particular age demographic, typically those in late adulthood. Intergenerational (IG) programmes, designed to offset the development of ageism in children, can be beneficial and may improve children's views of ageing. In the current study, a rural Midwestern United States IG programme, known as Bridges Together, was evaluated using both quantitative and qualitative measures. Results indicated that when measured implicitly, but not explicitly, children revealed negative biases against older adults. However with the exception of a self-assessment of their knowledge of and contact with older family members, there were no significant differences before and after the programme. (JL)
ISSN: 15350770 From : <http://www.tandfonline.com>
- 248/75 Sharing intergenerational relationships in educational contexts: the experience of an international program in three countries (Spain, Poland and Turkey); by Carmen Orte, Marga Vives, Joan Amer (et al.): Taylor and Francis.
Journal of Intergenerational Relationships, vol 16, nos 1-2, 2018, pp 86-103.
Schools are settings where intergenerational relationships can be forged in their capacity as microcosms or small communities through cooperative approaches and meaningful learning. This paper outlines the main practical, policy-related and research implications of intergenerational education programmes, based on the experience of the European SACHI ('Sharing Childhood') project. This was a European intergenerational relationship programme within the framework of the European Commission's Lifelong Learning Program (Grundtvig), coordinated by the GIFES research group attached to the University of the Balearic Islands (Spain), in collaboration with the Foundation for the Development of the Education System (Lodz, Poland) and Bayat Halk Egitim Merkezi Mudurlugu (Afyonkarahisar, Turkey). From the resulting guide to good practices that was drawn up, the generation of synergies should be highlighted as a means of bringing about changes in relationships as opposed to just attitudes. The importance is also raised of a rigorous assessment process. (JL)
ISSN: 15350770
From : <http://www.tandfonline.com>
- 248/76 Talk of Ages: using intergenerational classroom modules to engage older and younger students across the curriculum; by Joann M Montepare, Kimberly S Farah.: Taylor and Francis.
Gerontology and Geriatrics Education, vol 39, no 3, July-September 2018, pp 385-394.
Age-friendly college campuses offer opportunities for lifelong learning for students of all ages. University-based retirement communities are especially well-aligned with this goal, by allowing residents to enrol in college courses. Although this arrangement is a standard educational option for college-linked communities, it can have challenges. In particular, the semester-long schedule may be inconvenient for many older students. The Talk of Ages intergenerational module described in this case study was designed to offer an alternative curricular format, to bring older and younger students together for 1 to 2 weeks in focused course activities. To encourage participation across the curriculum, instructors were urged to draw on existing course content. Initial feedback about the course indicated that instructors as well as older and younger students found the course appealing. Useful suggestions for refining the module are also revealed. (RH)
ISSN: 02701960
From : <http://www.tandfonline.com>
- 248/77 Unpacking intergenerational (IG) programs for policy implications: a systematic review of the literature; by Katrina Radford, Ryan Gould, Nerina Vecchio, Anneke Fitzgerald.: Taylor and Francis.
Journal of Intergenerational Relationships, vol 16, no 3, 2018, pp 302-329.
Intergenerational care (IG) describes a situation where both a younger and older generation are receiving care in situations of shared resources and activities. Younger generations are defined as being of preschool age (0-5 years old) while older people are defined as senior citizens who are retired (aged 65+ years), and who are physically well enough to participate in such a programme. Anecdotally an intergenerational care programme takes on many forms. This paper presented a systematic literature review of intergenerational care models. Study findings are relevant to policymakers as the paper highlights opportunities to create an age-friendly environment by introducing intergenerational models in Australia, where intergenerational care development is in its infancy. Future research will help articulate the personal, social and economic value of intergenerational care. (JL)
ISSN: 15350770 From : <http://www.tandfonline.com>

INTERNATIONAL AND COMPARATIVE

(See Also 248/20, 248/22, 248/50, 248/121, 248/127)

- 248/78 The ambiguities of self-governance: Russian middle-aged middle-class women's reflections on ageing; by Maria Davidenko.: Cambridge University Press.
Ageing and Society, vol 39, no 3, March 2019, pp 609-628.
In a youth-centred culture, where ageing is associated with physical and mental decline, investment in a youthful appearance promises access to socially valuable resources. The need for regular care for the self, primarily through consumption, constitutes part of the narrative of successful or positive ageing. While some authors criticise an emphasis on individual effort to maintain personal well-being for a lack of attention to structural factors, others view such an approach favourably as a way of transcending state paternalism. In this paper, the author engages with the discourse of 'responsibilisation' drawing on the interviews with middle-aged, middle-class women from Moscow about their experiences of ageing. She uses the theoretical framework of 'governmentality' to demonstrate how the interviewed women's attempts to make sense of what it meant to age 'appropriately' within their milieus, that informed both their awareness of a need to improve and reinvent the self constantly through consumption in the context of post-Soviet Russian society, and their questioning of and resistance to this pressure. (RH)
ISSN: 0144686X From : <http://www.cambridge.org/aso>
- 248/79 Cell phone use and happiness among Chinese older adults: does rural/urban residence status matter?; by Xiangnan Chai, Hina Kalyal.: Sage.
Research on Aging, vol 41, no 1, January 2019, pp 85-109.
This study explores the relationship between cell phone (i.e. mobile phone) use and self-reported happiness among older adults in Mainland China, and whether rural/urban residence status moderates this relationship. The analysis is based on a sample of 6,952 respondents aged over 60, from the 2010 wave of China Family Panel Studies. Findings for this group show that using a mobile phone is positively associated with self-reported happiness (odds ratio [OR] = 1.283, p .001). However, this relationship remains for respondents residing in rural areas (OR = 1.616, p .01), but not for their urban counterparts. These findings reflect on how the happiness of Chinese older adults has been affected by a growing shift in traditional family values due to the unprecedented economic growth. Results also highlight the disparities between state support for older adults in rural and urban areas, as well as the necessity to develop relevant policies to improve the subjective well-being of China's rapidly growing population of older people. (RH)
ISSN: 01640275 From : <http://www.journals.sagepub.com/home/roa>
- 248/80 Grandparenting and self-related health among older Korean women; by Seung-won Choi, Zhenmei Zhang.: Sage.
Research on Aging, vol 40, no 10, December 2018, pp 911-932.
An increasing number of older Korean women have played an important role in helping to care for their grandchildren. This study aimed to investigate the effects of grandparenting on older women's health in South Korea. Using the Korean Longitudinal Study of Aging, the study estimated ordinal logistic regression models with lagged dependent variable to examine whether and how grandparenting type and transition and grandparenting intensity are associated with older women's self-rated health. Results showed that grandmothers who provide long-term nonresidential grandparenting have better self-rated health than grandmothers who are not engaged in grandparenting. Grandmothers caring for grandchildren in skipped-generation households or multigenerational households do not suffer from a deficit in health. Grandparenting intensity is not associated with grandmothers' health. These findings suggest that the implications of grandparenting for older women's health may differ in different social and cultural contexts. (JL)
ISSN: 01640275 From : <http://www.journals.sagepub.com/home/roa>
- 248/81 Long-term care for older people in South Africa: the enduring legacies of Apartheid and HIV/AIDS; by Peter Lloyd-Sherlock.: Cambridge University Press.
Journal of Social Policy, vol 48, no 1, January 2019, pp 147-167.
This paper sets out a general framework for analysing long-term care (LTC) systems for older people in different countries, and then applies this framework to a specific national setting. The paper considers the extent to which South Africa's emerging LTC system conforms to broader patterns observed across low- and middle-income countries, and how far it has been shaped by more local effects. It finds that patterns of demand for LTC vary across different racial categories. Despite having lower rates of ageing than the white population, Africans account for the majority of LTC demand. Residential services cater primarily for older whites, and there is a widespread perception that LTC for Africans should be a family responsibility. Across the sector, there is evidence of gaps in service availability, limited state oversight, and uneven service quality. In 2016, this led to a high-profile political scandal, which may prompt more effective state responses to this growing societal challenge. While the paper gives more weight to the fact that South Africa's experience is shaped by the racial legacies of Apartheid, the ongoing effects of the HIV/AIDS epidemic is acknowledged. (RH)
ISSN: 00472794 From : <http://www.cambridge.org/JSP>

- 248/82 Prevalence and associated factors of elder abuse in family caregivers of older people with dementia in central China cross-sectional study; by Min Wang, Huimin Sun, Junjian Zhang, Juan Ruan.: Wiley. *International Journal of Geriatric Psychiatry*, vol 34, no 2, February 2019, pp 299-307. The aim of this cross-sectional study was to explore the abuse risk and related important determinants among older people with dementia in central China. A sample of 158 family caregivers of older people with dementia was recruited from the Clinical Medicine Research Center of Dementia and Cognitive Impairment in Hubei Province, China. A social-demographic questionnaire, the Simplified Coping Style Questionnaire (SCSQ), the Social Support Rating Scale (SSRS), the Caregiver Burden Inventory (CBI) and the Caregiver Abuse Screen (CASE) were used for data collection. Descriptive statistics, Mann-Whitney U tests, Kruskal-Wallis tests, Spearman's rank correlation coefficient and logistic regression analysis were used for the data analyses. Results demonstrated that 77.8% reported a risk of abuse of older people with dementia. Moreover positive and negative reactions, subjective support and emotional, social and physical burden were associated with family caregivers' abusive behaviours. This was a study conducted to examine the risk of the abuse of older people with dementia by family caregivers in central China. Elder abuse is prevalent among people with dementia. The present results confirmed the need to focus on family caregiver burden, coping styles and social support in future interventions to prevent elder abuse. (JL)
ISSN: 09956230
From : <http://www.orangejournal.org>
- 248/83 The prevalence of elder abuse and neglect in Iran: a systematic review and meta-analysis; by Morteza Arab-zozani, Mossheen Mostafazadeh, Zeinab Arab-zozani (et al.): Taylor and Francis. *Journal of Elder Abuse and Neglect*, vol 30, no 5, November-December 2018, pp 408-423. The authors estimated the prevalence of elder abuse and neglect in Iran by searching PubMed, Embase, Scopus and PsycINFO to the end of 2017. Prevalence was calculated based on the percentage or amount reported in the studies. Sixteen studies involving 6,461 participants aged 60+ were included. The pooled prevalence for overall elder abuse was 45.7% (95% CI: 27.3-64.1, p .001). The prevalence of elder abuse and neglect in the Iranian population aged 60 years and over is substantial; and more research is needed to investigate its actual prevalence at the national level. (RH)
ISSN: 08946566
From : <http://www.tandfonline.com>
- 248/84 Relationships between grandchildren and grandparents in skipped generation families in Thailand; by Berit Ingersoll-Dayton, Kanchana Tangchonlatip, Sureeporn Punpuing, Laura Yakas.: Taylor and Francis. *Journal of Intergenerational Relationships*, vol 16, no 3, 2018, pp 256-274. Grandchildren are sometimes left in the care of their grandparents when parents migrate to find work. Using open-ended interviews with 48 grandparents this study examined intergenerational relationships in 'skipped generation' households in rural Thailand. The qualitative analyses identified several ways in which intergenerational relationships were characterised by solidarity (i.e., emotional closeness, instrumental helping and financial assistance) as well as conflict (i.e. financial tension, grandchildren's misbehaviour, role confusion). These findings have important implications for practitioners and policymakers that could improve intergenerational relationships in skipped generation households. (JL)
ISSN: 15350770
From : <http://www.tandfonline.com>
- LGBT**
- 248/85 "Fear runs deep": the anticipated needs of LGBT older adults in long-term care; by Jennifer M Putney, Sara Keary, Nicholas Hebert, Liz Krinsky, Rebekah Halmo.: Taylor and Francis. *Journal of Gerontological Social Work*, vol 61, no 8, November-December 2018, pp 887-907. Older lesbian, gay, bisexual and transgender (LGBT) adults are a vulnerable yet resilient population who face unique stressors as they foresee health decline. This paper presents the results of a qualitative study about community-dwelling LGBT older adults' anticipated needs and fears relating to nursing homes and assisted living. The study collected data through seven focus groups, a sample of 50 LGBT-identified adults age 55 and over in the north-east US. An inductive, thematic analysis approach was used to analyse the data. The study found that participants seek an inclusive environment where they will be safe and feel connected to a community. They fear dependence on healthcare providers, dementia, mistreatment and isolation. Importantly, these fears can lead to identity concealment and psychological distress, including suicide ideation. This study adds to the existing literature about the worries of older LGBT adults as they anticipate long-term care. The results suggest that older LGBT adults seek LGBT-inclusive residential care settings that encompass two distinct yet related aspects of LGBT-affirmative care: the procedural (e.g. culturally competent skills and knowledge of practitioners) and the implicit (e.g. the values and mission of the organisation). Implications for practice, policy and training are identified. (RH)
ISSN: 01634372
From : <http://www.tandfonline.com>

LIFELONG LEARNING

- 248/86 Generations learning together: pilot study for a multigenerational program; by Anita Glee Bertram, Brandon K Burr, Kaye Sears (et al.): Taylor and Francis.
Journal of Intergenerational Relationships, vol 16, no 3, 2018, pp 243-255.
Generations need to spend time in meaningful activities to facilitate more healthy interactions. In this study an interdisciplinary team worked together to implement an enriching, intergenerational project with four year olds, college students and older adults. College students played an active role in planning/facilitating activities. The overall objective of the research was assessing perceptual change between the generations using pre/post-tests with college students, pre-post interviews with older adults and pre-post teacher led discussions with children. Findings suggested that older adults and college students had improved perceptions. Children's perceptions remained negative with some positive perceptions. (JL)
ISSN: 15350770
From : <http://www.tandfonline.com>
- 248/87 Learning with active rural community-dwelling older adults: comprehensive effects of intergenerational service-learning in Taiwan; by Stephanie Yu-ching Chen.: Taylor and Francis.
Journal of Intergenerational Relationships, vol 16, no 3, 2018, pp 287-301.
This study evaluated the experiences of college students serving with active, rural community-dwelling older adults and evaluated outcomes among the students, older adults and community leaders in rural Taiwan. 31 undergraduate students assisted older adults for six weeks at three senior citizen centres as they participated in an active ageing competition. The analysis of qualitative data indicated that students adapted to the communicating barriers of language and cultural variances, were aware that older adults longed for company and impressed the active image of older adults. The results of this study indicated that service learning with rural community-dwelling older adults simultaneously benefits students, community leaders and older adults. (JL)
ISSN: 15350770
From : <http://www.tandfonline.com>
- 248/88 Making the case for transgenerational learning; by Tracey L Gendron, Sadie E Rubin, Emily P Peron.: Taylor and Francis.
Journal of Intergenerational Relationships, vol 16, nos 1-2, 2018, pp 139-145.
In an effort to evaluate existing programmes designed to bring together groups from different generations the present study conducted a literature search on intergenerational learning programmes in accordance with intergroup contact theory. The theory, as described by Allport (1954) and Rothbart and John (1985), asserts that in order to reduce prejudice and achieve the positive effects of intergroup contact, each of the following conditions should be met to some degree: (1) support of established authority or institution; (2) cross-group contact facilitated regularly over time; (3) equal status within the situation; (4) common goals; (5) intergroup cooperation; (6) behaviour of minority group members not consistent with their stereotype; and (7) cross-group contact facilitated in a variety of social contexts. The authors hypothesised that transgenerational engagement in the academic setting is only achieved when an activity or programme meets all of the aforementioned criteria. (JL)
ISSN: 15350770
From : <http://www.tandfonline.com>

LONELINESS AND SOCIAL ISOLATION

- 248/89 Does an impaired capacity for self-care impact the prevalence of social and emotional loneliness among elderly people?; by Irena Canjuga, Danica Zeleznik, Marijana Neuberg (et al.): Emerald.
Working with Older People, vol 22, no 4, 2018, pp 211-223.
The impact of self-care on loneliness has not been sufficiently researched. This paper aims to contribute to understanding the complexity of loneliness phenomena among older Croats living in retirement homes or in their own homes and communities. The research was conducted using standardised SELSA-L (Social and Emotional Loneliness Scale for Adults - long version) assessment loneliness questionnaires and the Self Care Assessment Worksheet for self-care assessment. The results were processed using the Kruskal-Wallis test. The results obtained show that impaired self-care ability affects the prevalence of loneliness among older people in almost the same way in both groups of participants. However, regarding the relationship between the state of health and self-care, only a statistically significant difference in the prevalence of loneliness is found in the case of those participants living in their own homes, with the worst health condition affecting poorer psychological care. The research was limited by the relatively small numbers in both participant groups and thus on the representativeness and generalisability of results. The samples' large age range distributions could also have a bearing on interpreting functional ability and the impact on self-care assessment. Nurses are indispensable in caring for the older people, and they need to promote and encourage older people's self-care through health care. Older people living in retirement homes should be allowed to participate equally in health care in order to preserve their own autonomy and dignity. However, to benefit those who live in their own homes, nurses should be connected to the local community, and thus stimulate preventive measures (testing blood sugar levels and blood pressure, and educating on the importance of preventive

examinations), or recreational activities in the environment with the goal of preserving functional ability. This paper thus contributes to understanding the complexity of loneliness phenomena among older people, with the aim of developing a model of prevention. (RH)

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From : <http://www.emeraldinsight.com/loi/wwop>

LONG TERM CARE

(See Also 248/25, 248/81, 248/85)

248/90 Barriers to self-care in elderly people with hypertension: a qualitative study; by Hanieh Gholamnejad, Ali Darvishpoor Kakhki, Fazlollah Ahmadi, Camelia Rohani.: Emerald.

Working with Older People, vol 22, no 4, 2018, pp 243-251.

Hypertension is the most common chronic disease worldwide; and self-care is the key criteria in determining the final course of the disease. However, the majority of older people do not observe self-care behaviours. This paper analyses the experiences of older people with hypertension in order to understand the barriers in their self-care behaviours. This is a qualitative study with a conventional content analysis approach conducted in Tehran, Iran in 2017. 23 participants were selected by purposeful sampling: 4 older people; 6 cardiologists, geriatric physicians and nurses working in the cardiovascular ward; and 3 caregivers. Using semi-structured, face-to-face interviews, data collection was continued until data saturation. Three main categories were identified: attitude limitations, inefficient supportive network and desperation; all showed barriers to self-care by the experiences of older people with hypertension. Lack of knowledge of the disease and its treatment process is one of the main barriers to self-care in older people with hypertension. Deficient supportive resources along with economic and family problems exacerbate failure in self-care behaviour. (RH)

ISSN: 13663666

From : <http://www.emeraldinsight.com/loi/wwop>

248/91 Challenges in long-term care in Europe; by Slavina Spasova, Rita Baeten, Bart Vanhercke.: European Observatory on Health Systems and Policies.

Eurohealth, vol 24, no 4, Winter 2018, pp 7-12.

The national provision of long-term care (LTC) in 35 European countries is described, with a focus on arrangements for older people. This article points to the four main challenges common to all countries: first, access and adequacy of LTC provision; second, quality of formal home care as well as residential services; third, employment of informal carers; and lastly, financial sustainability of the national systems. Since all European countries will continue to face significant LTC system challenges, a series of recommendations are presented to help overcome them. This article draws on analysis in 'Challenges in long-term care in Europe: a study of national policies' from the European Social Policy Network (ESPN) and European Commission (2018).

(See: <http://ec.europa.eu/social/main.jsp?catId=738&langId=en&pubId=8128&furtherPubs=yes>) (RH)

From : <http://www.healthobservatory.eu>

MENTAL HEALTH

(See Also 248/128, 248/129)

248/92 Emotional distress mediates the relationship between cognitive failures, dysfunctional coping, and life satisfaction in older people living in sheltered housing: a structural equation modelling approach; by Phuong Leung, Vasiliki Orgeta, Amina Musa, Martin Orrell.: Wiley.

International Journal of Geriatric Psychiatry, vol 34, no 1, January 2019, pp 179-185.

Little is known about the relationship between cognitive failures, emotional distress and life satisfaction in late life. Experiencing cognitive failures is a known risk for declining life satisfaction in older people although the mechanisms that may explain cognitive failures remain unclear. This study investigated the associations between psychosocial factors, cognitive failures and coping strategies and their influence on life satisfaction in older people living in sheltered housing. A total of 204 older people with a mean age of 75.08 years living in sheltered housing in London were recruited. The study used structural equation modelling path analysis to test several hypotheses based on theories of emotional distress (anxiety and depression) and cognitive failures and their influence on life satisfaction. Self-reported depressive symptoms, anxiety symptoms and cognitive failures were found to be common. The final model had a good fit: analyses showed that both cognitive failures and dysfunctional coping were significantly associated and exerted a moderate effect on emotional distress. Cognitive failures and dysfunctional coping had an indirect effect on life satisfaction through emotional distress which directly decreased levels of life satisfaction. Overall the study found that experiencing emotional distress helped to explain the association and negative effects of cognitive failures and dysfunctional coping on life satisfaction in older people living in sheltered housing. These findings help to understand the key mechanisms of experiencing cognitive failures in later life and can help guide future interventions of wellbeing. (JL)

ISSN: 09956230

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

- 248/93 Managing emotional and psychological distress in older people; by Felicity Chapman.: Emerald. Working with Older People, vol 22, no 4, 2018, pp 234-242.
Much has been written about helping those with dementia. But what about those for whom distress is not primarily related to a neurological cause and there is no psychiatric history? This practice informed paper offers a guide for allied health professionals and family carers to manage distress in older people who are able to engage in language-based communication but are experiencing significant change or loss. The paper draws on the author's extensive experience working as a mental health social worker who specialises in work with older people in the community and in care, with family carers and in educating allied health professionals on how to manage presentations of distress in older people. Three foundational management strategies are discussed: understand the reason for distress; implement the C.A.R.E. Plan (i.e. be Calm and curious, be Aware, use Reflective listening techniques, and give compassionate Eye contact); and maximise comfort in exploration and referral. This viewpoint piece has not been substantiated through research, and does not reflect training in the field of clinical geropsychology. The ideas in this paper are practical solutions to common problems that can be faced by workers or family in close contact with older people. The information can be applied immediately to whatever setting is relevant for the reader, and is written in easy to understand language. Furthermore, its aim is not only to increase skill and confidence for the reader, but also to promote older people's emotional and psychological well-being. (RH)
ISSN: 13663666
From : <http://www.emeraldinsight.com/loi/wwop>
- 248/94 Television viewing and cognitive decline in older age: findings from the English Longitudinal Study of Ageing; by Daisy Fancourt, Andrew Steptoe, Research Department of Behavioural Science and Health, University College London - UCL.
Scientific Reports, vol 9, article number 2851, 2019, 8 pp.
There has been significant interest in the effects of television on cognition in children, but much less research has been carried out into the effects in older adults. This study aimed to explore whether television viewing behaviours in adults aged 50 or over are associated with a decline in cognition. Using data from the English Longitudinal Study of Ageing (ELSA) involving 3,662 adults aged 50+, the authors used multivariate linear regression models to explore longitudinal associations between baseline television watching (2008/2009) and cognition 6 years later (2014/2015), while controlling for demographic factors, socio-economic status, depression, physical health, health behaviours and a range of other sedentary behaviours. Watching television for more than 3.5 hours per day is associated with a dose-response decline in verbal memory over the following six years, independent of confounding variables. These results are found in particular amongst those with better cognition at baseline and are robust to a range of sensitivity analyses exploring reverse causality, differential non-response and stability of television viewing. Watching television is not longitudinally associated with changes in semantic fluency. Overall, the results provide preliminary data to suggest that television viewing for more than 3.5 hours per day is related to cognitive decline. (RH)
From : <https://www.nature.com/articles/s41598-019-39354-4>

MENTAL HEALTH CARE

- 248/95 Measuring the patient experience in community mental health services for older people: a study of the Net Promoter Score using the Friends and Family Test in England; by Mark Wilberforce, Sarah Poll, Heather Langham (et al.): Wiley.
International Journal of Geriatric Psychiatry, vol 34, no 1, January 2019, pp 31-37.
The research aimed to explore the value of the Net Promoter Score as a service improvement tool and outcome measure. The study objectives were to (1) explore associations between the Net Promoter Score with patient and service receipt characteristics; (2) evaluate the strength of association between the Net Promoter Score and a satisfaction score; and (3) evaluate its test-retest reliability. A postal survey was sent to service users on caseloads of community mental health teams for older people in four localities of England. The survey collected the Net Promoter Score, a single satisfaction question, and data on socio-demographics, clinical profile and service receipt. Analysis used non-parametric tests of association and exploratory least squares regression. A second survey was administered for test-retest reliability analysis. Fieldwork concluded in April 2016. For 352 respondents, the Net Promoter Score was negatively related to age and was lowest for those still within six months of their initial referral. Receiving support from a psychiatrist and/or support worker was linked to higher scores. A strong but imperfect correlation coefficient with the satisfaction score indicated that they evaluated related but distinct constructs. It had a reasonable test-retest reliability, with a weighted kappa of 0.706. Despite doubts over its validity in community mental health services, the Net Promoter Score may produce results of value to researchers, clinicians, service commissioners and managers if part of wider data collection. However multi-item measures would provide greater breadth and improved reliability. (JL)
ISSN: 09956230
From : <http://www.orangejournal.org>

OLDER WOMEN

(See 248/78)

ORAL HEALTH

- 248/96 Improving the oral health of older people; by A Tinker, J Gallagher, T Awojobi (et al.): Emerald. Working with Older People, vol 22, no 4, 2018, pp 189-197.
Good oral health is important for physical and mental health, and can help social participation and well-being. This paper explores how adults may be supported in maintaining their oral health. It also aims to provide dental students with better knowledge of how community living older people's oral health can be maintained, and makes recommendations accordingly. It uses a pilot qualitative study involving eight dental students in three workshops in a Health Centre in South West London with 17 older adults (age range 63-94 years, 82 percent female and 42 percent white). For the older people, findings confirm previous research highlighting issues around prevention, delivery of care and access. However, other issues such as the use of fluoride and safety around tooth whitening were important. There was concern about the increasing privatisation of the dental service and problems in finding a dentist. For the dental students they valued time with older people and felt that they had a better understanding of them and research. The research highlights the need to give older people more information, and the value of simplicity, e.g. through provision of leaflets. (RH)
ISSN: 13663666
From : <http://www.emeraldinsight.com/loi/wwop>

PALLIATIVE CARE

(See Also 248/48)

- 248/97 Navigating the liminal space: trauma, transition, and connection in bereaved carers' experiences of specialist palliative care in Western Sydney; by Kristin Bindley, Anne May, Wendy Pavlek (et al.): Taylor and Francis.
Journal of Social Work in End-of-Life and Palliative Care, vol 14, nos 2-3, April-September 2018, pp 225-239.
Caregiving at the end of life has been associated with a range of physical, spiritual, social and psychological outcomes, and influenced by encounters with providers of specialist palliative care. This qualitative study explores experiences of bereaved carers of people with a life-limiting illness, in the context of care provided through a Western Sydney supportive and palliative care service. Thirteen bereaved caregivers participated in semi-structured, in-depth interviews. Transcripts were analysed using a thematic approach, informed by thematic networks. Four domains appeared to mediate carer experiences: confrontations with trauma, suffering and death; navigating transitions and boundaries and the caregiving role as liminal space; encountering connection in formal care contexts; and negotiating system issues. This study is one of the first to explore caregiver experiences within a low socioeconomic population in Western Sydney, and to provides a nuanced understanding of factors which may shape experiences of palliative care. Findings suggest the need for ongoing attention to the cultivation of skilful practitioners who are mindful of companion caregivers' needs, and in a manner attuned to the potential for trauma in the context of expected death. Additionally, findings call for investment in specialist sites of care alongside greater attention to public health approaches to palliative care. (RH)
From : <http://www.tandfonline.com>

PENSIONS AND BENEFITS

- 248/98 The retrenchment of public pension provision in the liberal world of welfare during the age of austerity - and its unexpected reversal, 1980-2017; by Paul Bridgen.: Wiley.
Social Policy and Administration, vol 53, no 1, January 2019, pp 16-33.
Pension system adaption during the "age of austerity" since 1980 is expected to vary between industrialised countries broadly in line with their membership of conservative, liberal or social democratic worlds of welfare. Empirical testing on the liberal world focuses on the later period and differs in its conclusions. This paper is based on a systematic study of the scale, nature and trajectory of change in six liberal pension systems between 1980 and 2017 (New Zealand, Australia, UK, Canada, Ireland and the United States). The paper uses expenditure, economic, demographic and social rights data. These data are analysed using a framework developed through critical engagement with Pierson's three welfare state change criteria and the welfare state "dependent variable problem". The paper finds a significant retrenchment of public pension provision in most liberal welfare states after 1980, but largely during the first half of the period. This has been partly reversed in most countries since the mid-1990s, though the scale of this reversal varies between countries. The recent rise of the state in liberal systems has been noted by some commentators; but to be properly understood, the paper argues, it must be considered in the context of the significant retrenchment which preceded it. There is a scope for research on the broader social context of recent reforms, particularly how middle-income groups were affected by retrenchment and how recent reforms have mitigated this. (RH)
ISSN: 01445596 From : <http://www.wileyonlinelibrary.com/journal/spol>

PERSONALISATION

(See 248/57)

PHYSICAL ACTIVITY

(See Also 248/10, 248/16, 248/29, 248/49)

- 248/99 Perceived benefits of an aquatic activity program on the behaviors of those with memory impairments: a pilot study; by Mary Lou Schilling, Roger Coles, Chris Simons, Robert Frost.: Taylor and Francis. *Activities, Adaptation and Aging*, vol 42, no 4, October-December 2018, pp 292-304.
A single-subject, alternating treatment design was used to compare the effects of an aquatic versus land-based activity intervention on the behaviours of participants with memory impairment or dementia. There were 19 observation days over a 2-month period. Results of this preliminary investigation suggest that there is no difference in participant behaviour, mood or orientation when engaged in land-based versus aquatic based activity. The investigators recommend the use of aquatics for individuals with dementia, especially for those individuals with a history of swimming, owning a pool, or living near a lake. (RH)
ISSN: 01924788
From : <http://www.tandfonline.com>
- 248/100 A pilot randomized trial of an intervention to enhance the health-promoting effects of older adults' lachman portfolios: the Engaged4Life Program; by Christine Matz-Costa, James Lubben, Margie E Lachman (et al): Taylor and Francis.
Journal of Gerontological Social Work, vol 61, no 8, November-December 2018, pp 792-816.
The Engaged4Life program is an intervention to encourage inactive community-dwelling older adults to embed physical activity, cognitive activity and social interaction into their everyday lives in contexts that are personally meaningful and natural for them. This study evaluated Engaged4Life's feasibility and outcomes. Fifteen participants from near Boston, Massachusetts were randomised to the intervention group (technology-assisted self-monitoring of daily activity via pedometers and daily tablet-based surveys; psycho-education plus goal-setting via a 3-hour workshop; and peer mentoring via phone twice a week for 2.5 weeks) and 15 to the control (technology-assisted self-monitoring only). Recruitment was shown to be feasible and efficient, but not able to reach the target for men. Retention rate was 83% and participants manifested high adherence and engagement with the intervention. Although this pilot trial was not powered to demonstrate significant differences between groups, daily steps increased by 431 (11% increase) from baseline to Week 4 for the intervention (p .05), but decreased by 458 for the control, for a net difference of 889 steps (p .05). Findings were sustained at Week 8 (p .01). In a future trial, difficulties in recruiting men, barriers due to the technology-intensive design, and the optimisation of secondary outcome measures should be addressed. (RH)
ISSN: 01634372
From : <http://www.tandfonline.com>
- 248/101 When working out works out: program administrators' perspectives on seniors' exercise participation; by Michelle Pannor Silver, Scott McRoberts, Hardeep Singh.: Taylor and Francis.
Activities, Adaptation and Aging, vol 42, no 1, January-March 2018, pp 19-40.
This study examined factors that inhibit and promote exercise engagement from the perspective of individuals who administer exercise programming for older people in a region of Ontario, Canada with a large and diverse immigrant population. Eight focus group discussions about exercise and ageing were examined using thematic analysis. A socio-ecological framework was applied to develop cross-cutting themes about factors that promote older people's exercise engagement. This study highlights the following as factors to consider when resolving multiple barriers to seniors' exercise participation: the role of athletic identity in relation to participants' cumulative life experiences, gender differences, and the importance of offering intergenerational environments. Future research should focus on perceptions of athletic identity among older people from ethno-culturally diverse communities, to examine the role of previous exposure to sport, and their views on single sex provision of sports activities. (RH)
ISSN: 01924788
From : <http://www.tandfonline.com>

PREVENTION

(See 248/65)

PUBLIC HEALTH

- 248/102 A qualitative evaluation of healthy weight services in a local authority in England; by Nicky Helen Kime, Jim McKenna, Claire Griffiths (et al): Sage.
Health Education Journal, vol 77, no 8, December 2018, pp 939-951.
In England, local authorities have an important role to play in tackling obesity. This study evaluated the

healthy weight services in one local authority, where obesity levels have been above the national average since 2006. The authors conducted process and outcome evaluation using a qualitative methodology. Data were generated in focus group discussions and semi-structured interviews with clients, practitioners, healthcare professionals and volunteers. A total of 91 individuals from six services participated in the evaluation. Staff competencies and empowerment outcomes were identified as areas of strength. However, despite examples of excellent practice and enthusiastic recommendations from clients, access and referral processes were areas of weakness. It is crucial that local authorities are provided with the tools to be able to implement healthy weight interventions effectively. A whole-systems approach presents a real opportunity for staff in local authorities and public health to work collaboratively and innovatively towards the same goal of continuous improvement in obesity management. (RH)

ISSN: 00178969

From : <http://www.journals.sagepub.com/home/hej>

RELATIONSHIPS (PERSONAL)

248/103 The impact of dementia on relationships, intimacy, and sexuality in later life couples: an integrative qualitative analysis of existing literature; by Kristen Holdsworth, Marita McCabe.: Taylor and Francis. *Clinical Gerontologist*, vol 41, no 1, January-February 2018, pp 3-19.

The onset and progression of dementia can have a profound effect on the couple dyad. This systematic review analysed the literature investigating the impact of dementia on the relationships, intimacy and sexuality in older couples. A systematic literature search was conducted in May 2016 for relevant research articles. Five databases were searched: Web of Science, PsycINFO, MedLine, Scopus and CINAHL. The reference lists of articles included in the review were screened along with the reference list of other relevant reviews. Thirteen studies were identified that investigated relationships, intimacy and sexuality from the perspective of the partner, the person with dementia, or from the perspective of the couple jointly. The analysis revealed several themes, including changes in responsibilities and roles, identity and self-esteem, affection, commitment, reciprocity, and sexual activity and satisfaction. The results strongly suggest dementia has a significant impact on the couple relationship. There is a dearth of research involving the perspective of the person with dementia or the couple jointly. Future research should investigate the impact of dementia on relationships, intimacy and sexuality from the perspective of partners, the person with dementia, and the couple jointly, to ensure the development of appropriate information and services that meet the needs of both people in the couple relationship. Clinicians should work closely with couples, to develop tailored information and supports to assist couples in managing the multiple changes that occur in their relationship, intimacy and sexuality due to dementia. (RH)

ISSN: 07317115

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

248/104 Love between couples living with Alzheimer's disease: narratives of spouse care-givers; by Orit Shavit, Aaron Ben-Ze'ev, Israel Doron.: Cambridge University Press.

Ageing and Society, vol 39, no 3, March 2019, pp 488-517.

Despite the wealth of studies describing relationships in the face of Alzheimer's disease (AD), little is known about the experience and changing meaning of 'love' between spouses when one of them is suffering from AD. A qualitative narrative approach was used in this Israeli interdisciplinary study to capture what love means for couples when one spouse is living with AD. A combination of open discussion along with a semi-guided interview was conducted with 16 spouses of people living with AD. Data were analysed using Thematic Analysis. A leading theme that emerges from the interviews is that AD provides a significant indicator of the meaning and understanding of the experience of love.

Five major types of relationship developments occurred after the disease emerged: love died, love became weaker, love did not change, love was enhanced, and the spouse fell in love again. The need for further research is discussed. The findings of this study offer an additional perspective to the existing literature, thereby providing a more comprehensive outlook on marital relationships within the context of AD. (RH)

ISSN: 0144686X

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

RELIGION AND SPIRITUALITY

(See Also 248/26, 248/31, 248/37)

248/105 Attachment to God and death anxiety in later life: does race matter?; by Jong Hyun Jung.: Sage.

Research on Aging, vol 40, no 10, December 2018, pp 956-977.

Research suggests that religion plays a critical role in individuals' attitudes toward death in later life. The purpose of this study was to investigate whether a previously unexamined aspect of religion – secure attachment to God – is associated with death anxiety among U.S. older adults and whether this association varies across race. Using longitudinal data from a representative sample of 936 adults aged 65 and older, the analyses revealed that secure attachment to God is associated with a decrease in death anxiety over time. Furthermore the negative association between secure attachment to God and change in death anxiety is greater for older Blacks than their White counterparts. These results indicate that

religion serves a protective function against death anxiety in later life. Moreover religion provides greater psychological benefits for older Blacks than older Whites, reinforcing a long-standing claim that religion is particularly valuable for individuals from marginalised backgrounds. (JL)

ISSN: 01640275

From : <http://www.journals.sagepub.com/home/roa>

- 248/106 The contributions of religious practice, existential certainty, and raising grandchildren to well-being in older adults; by Joe D Wilmoth, Loriena Yancura, Melissa A Barnett, Brittney Oliver.: Taylor and Francis.
Journal of Religion, Spirituality and Aging, vol 30, no 3, 2018, pp 212-233.
Religious beliefs and practice are believed to foster wellbeing across the life course. This study looked at whether religious practice, spiritual development and existential certainty are positively linked to wellbeing in grandparents, and whether these factors buffer grandparents from risks associated with raising grandchildren and adjusting to changing roles. Data were collected from individuals attending Protestant churches. Spiritual development and existential certainty were found to be positively associated with wellbeing. No evidence was found for buffering effects of religious practice on grandparent wellbeing. Overall grandparents raising grandchildren reported more challenges in adjusting to changes in roles compared to their peers. (JL)
ISSN: 15528030
From : <http://www.tandfonline.com>
- 248/107 Cultural safety in Muslim aged care: taking the bull by the horns; by Mahjabeen Ahmad.: Taylor and Francis.
Journal of Religion, Spirituality and Aging, vol 30, no 1, 2018, pp 25-47.
Cultural safety is critical to providing holistic, person-centred care. Where 'deep' or core cultural elements are primarily shaped and influenced by religion it becomes important to recognise and understand the religious values and traditions in planning, designing and delivering care. Such an approach is significantly important for communities essentially identified by their faith, such as the Muslim community. Muslims living in the West face challenges owing to their minority status and these are increasing in the current geopolitical context. These challenges contribute to individual Muslims and their families feeling vulnerable within an aged care system that is mostly unfamiliar and often confusing and frightening to them. This Australia-based study attempts to make a case for cultural safety in the context of Muslim aged care. It does not offer an answer or a definite solution to the cultural risks Muslims may face in care settings. Rather the article seeks to explore avenues for creating an environment of cultural safety without delving specifically into culturally safe care practices. It is only possible to offer culturally safe care when the environment in which care is to be delivered is respectful and supportive. (JL)
ISSN: 15528030
From : <http://www.tandfonline.com>
- 248/108 Layers of engagement: staff perceptions of spiritual care in residential aged care; by Mei-Ling Blank, Sarah Wood, Richard Egan.: Taylor and Francis.
Journal of Religion, Spirituality and Aging, vol 30, no 1, 2018, pp 78-98.
Addressing the spiritual care needs of residents living in aged care facilities should be an important dimension of quality care. In this study the authors conducted semi-structured interviews with residential aged care staff (including caregivers, nurses, managers and chaplains) in New Zealand to explore how spiritual care is understood and operationalised. Many participants appeared to equate spiritual care with holistic care that respects the whole person. Participants discussed five types of spiritual care engagement requiring different skills, knowledge and personal commitment, including information gathering, facilitation, companionship, end-of-life care and counselling. Overall study findings suggested that the spiritual care offered by all participants - clergy and non-clergy alike - was predominantly informal and unplanned. (JL)
ISSN: 15528030
From : <http://www.tandfonline.com>
- 248/109 The life tasks model: enhancing psychological and spiritual growth in the aged; by Bruce A Stevens.: Taylor and Francis.
Journal of Religion, Spirituality and Aging, vol 30, no 1, 2018, pp 2-11.
The life tasks model is an active, mutual and potentially universal approach to the spiritual care of older people. A life task is a responsibility, once undertaken, that lasts a lifetime. Three tasks are identified. Task 1 is the discovery of hidden learning. The process of discovery draws on implicit learning that comes into awareness. This leads to task 2, testing in which learning brought into awareness is tested by other life experiences. The final task is task 3, integration, in which a more aware and cohesive self is formed. Ideally this leads to service or vocation. Progress on the life tasks is illustrated by responses in a qualitative study of older adults. Although this model can be applied to self-growth and ministry to all ages, it is well suited to the care of older people. (JL)
ISSN: 15528030
From : <http://www.tandfonline.com>

- 248/110 Older adults in churches: differences in perceptions of clergy and older members; by Vern Bengston, Camille Endacott, Samantha Kang.: Taylor and Francis.
Journal of Religion, Spirituality and Aging, vol 30, no 2, 2018, pp 154-178.
As individuals age their spiritual and religious needs may change. This study looked at what churches are doing for their senior members, and what older members themselves feel they should do. The study asked both older church members and their clergy leaders about programmes directed toward seniors in their congregations. The sample consisted of 25 ministers, priests and Jewish rabbis who then gave names of 45 senior members of their congregations with an average age of 78.5 for interview. Data, collected through semi-structured in-depth interviews, showed that many congregations had provisions for older members, but most were focused on frail elders and their transportation needs. A majority of seniors, however, wanted more programmes and groups tailored to their more active interests and needs. A number of the priests, rabbis and pastors also saw the need for such programmes but didn't know how to go about forming them. Many churches and synagogues appeared to equate being older with frailty and there appeared to be suggestions of ageism on the part of clergy. The study concludes that the 75 million baby boomers who are now moving into their retirement years represent a challenge as well as a potential resource for churches and synagogues in the United States. (JL)
ISSN: 15528030
From : <http://www.tandfonline.com>
- 248/111 Rituals as portals of transcendence in the lives of older adults; by Marita Grudzen.: Taylor and Francis.
Journal of Religion, Spirituality and Aging, vol 30, no 2, 2018, pp 112-129.
In this article the author argues that we in the West are witnessing significant change and loss on multiple levels for our diverse older population. It is in this context that the study looks at the role of ritual in late life transcendence. In particular the study asks whether there are rituals performed alone or in relationship, in addition to traditional religious rituals, that increase one's sense of aliveness, purpose, and are potentially transformational in one's later years. Ritual, in this sense, would be a form of connection that is revisited for its whole-making. This includes the existence of the inner Presence, which supports an organic emergence of ritual that is strengthened by the energy and witness of community. The article includes several examples of this person-centred process at different stages among a diverse range of older adults. It includes a description of the Croning Ceremony which the author co-led with Patricia Thorne at the 2015 International Conference on Spirituality and Ageing. Drawing on the natural environment together with the work and lived experience of anthropologists, gerontologists, ethnogerontologists, Jungian therapists, psychiatrists, psychologists, theologians, ministers, nurses, and family and diverse community members, the study outlines a holistic perspective on ritual and its role in transcendence. The article closes with questions that can serve as stepping stones in preparation to serve as companions and facilitators for the older population. (JL)
ISSN: 15528030
From : <http://www.tandfonline.com>
- 248/112 Spirituality and aging: how worship communities of older adults sustain their faith in the absence of traditional ordained leadership; by Gillian Reid.: Taylor and Francis.
Journal of Religion, Spirituality and Aging, vol 30, no 1, 2018, pp 48-62.
This New Zealand-based study considered how older Christians aged 70 or over exercise worship in an environment of shared ministry. Specifically the study focused on the Local Shared Ministry Units (LSMU) model of worship within the Auckland Diocese of the Anglican Church in Aotearoa/New Zealand and Polynesia. A collective case study approach was used, and individual members of four LSMUs were interviewed with the resulting comments treated as a collective case study. Findings indicated that these older adults are still seeking faith formation, do not regard themselves as fully formed spiritually, and use personal prayer in particular to enhance and nourish their faith growth. (JL)
ISSN: 15528030
From : <http://www.tandfonline.com>
- 248/113 Successful aging: social theory, scripture, church teaching; by Fred Guyette.: Taylor and Francis.
Journal of Religion, Spirituality and Aging, vol 30, no 3, 2018, pp 199-211.
In this article the authors argue that despite the increasing number of people living well into old age there must be more to life than longevity and merely living longer. Religious communities and social scientists are both interested in what makes for 'successful ageing'. The dialogue between them can be enriched by fostering a mutual appreciation for biblical norms and stories and a better working knowledge of the models and methods of the social sciences. To this end the study offers a sketch of four models of ageing: disengagement, activity, continuity and Tornstam's theory of gerotranscendence. The sketch serves as a prelude to a discussion of three biblical stories: (1) the story of Barzillai and King David in 2 Samuel, which shows how older people can make a positive contribution to the common good in spite of their limitations; (2) the intertwined stories of Jacob and Joseph in Genesis, which can help understand the theological significance of life review, forgiveness, reconciliation and life review in the ageing process; and (3) the third phase of the encounter considers John Paul II's Letter to the Elderly, and builds on several suggestions he makes concerning the life of Moses and successful ageing. (JL)
ISSN: 15528030
From : <http://www.tandfonline.com>

- 248/114 Unique needs: Salvation Army officers in retirement and end-of-life care; by Bruce Allen Stevens, Rhonda Shaw, Peter Bewert (et al.): Taylor and Francis.
Journal of Religion, Spirituality and Aging, vol 30, no 1, 2018, pp 63-77.
The present study focused on retirement as a life transition for clergy and those who serve in the church. The study looked at whether being ordained, having a respected leadership role in the church and serving God brings some unique dynamics to this transition. In particular the article aimed to identify such factors using a large sample of Australian Salvation Army officers. These factors included financial concerns, life satisfaction and realism about the challenges of ageing, and attitudes to death and dying and the difference that faith in Christ makes (JL)
ISSN: 15528030
From : <http://www.tandfonline.com>
- 248/115 Using sandplay to explore inner states; by Sandi Peters.: Taylor and Francis.
Journal of Religion, Spirituality and Aging, vol 30, no 2, 2018, pp 179-194.
This article explores the psychology of Carl Jung, the Swiss psychiatrist, for its relevance in contextualising the experience of memory loss. The article then introduces the use of sandplay, a nonverbal method of accessing the self or inner world, with older adults living with memory loss. The psychology of C. G. Jung is used as a support in exploring potential meaning in late life and behaviours in dementia that defy understanding of what is possible developmentally with this population. The sandplays of five older people in varying stages of memory loss are used as case examples to demonstrate the depth of their interior world despite their diagnosis. (JL)
ISSN: 15528030
From : <http://www.tandfonline.com>
- 248/116 When reliance on religion falters: religious coping and post-traumatic stress symptoms in older adults after multiple disasters; by Katie E Stanko, Katie E Cherry, Loren D Marks (et al.): Taylor and Francis.
Journal of Religion, Spirituality and Aging, vol 30, no 4, 2018, pp 292-313.
In August 2005 the U.S. Gulf Coast was forever changed by Hurricane Katrina and the horrific flooding that followed, resulting in catastrophic damage to coastal communities in Texas, Louisiana, Mississippi, Alabama and Florida. In this study Katrina survivors answered open-ended questions about coping with hurricane-related challenges. The sample was partitioned into low and high scorers on a non-organisational religiosity scale. Content analyses revealed that low scorers described secular strategies, relied less on a church community in the aftermath of the storms and exhibited active religious coping. High scorers referenced a greater need for God and faith, highly valued their church as a coping resource, and described passive religious coping strategies. Implications of the loss of familiar religious routines after the disaster are discussed. (JL)
ISSN: 15528030
From : <http://www.tandfonline.com>

RESIDENTIAL AND NURSING HOME CARE

(See Also 248/3, 248/5, 248/20, 248/34, 248/41, 248/108, 248/130)

- 248/117 Family members' experiences and management of resident-to-resident abuse in long-term residential care; by Jennifer Baumbusch, Gloria Puurveen, Alison Phinney (et al.): Taylor and Francis.
Journal of Elder Abuse and Neglect, vol 30, no 5, November-December 2018, pp 385-401.
Resident-to-resident (RRA) abuse is increasingly recognised as a significant problem in long-term residential care. Families have a constant presence in this setting, yet their inclusion in research about RRA is minimal. This ethnographic study examined family members' experiences and management of RRA in Vancouver, Canada. Twelve family members participated in in-depth interviews; 56 hours of participant observation were conducted; and data were analysed thematically. The main themes illuminate families' experiences of RRA in a context that largely normalises it. In the absence of formal supports, families developed a range of management strategies, ranging from passive to active intervention. Organisational factors, such as staffing levels and mix, and the physical environment also contributed to RRA. Families are actively managing RRA in long-term residential care. Policies and programmes, including educational support, should be developed to validate and support families. (RH)
ISSN: 08946566
From : <http://www.tandfonline.com>
- 248/118 A game of two halves? Understanding the process and outcomes of English care home closures: qualitative and quantitative perspectives; by Jon Glasby, Kerry Allen, Suzanne Robinson.: Wiley.
Social Policy and Administration, vol 53, no 1, January 2019, pp 78-98.
With care services increasingly delivered via a market, there is always a risk that care homes could fail financially or struggle in terms of quality, ultimately having to close. When this happens, the received wisdom is that subsequent relocation can be detrimental to the health and well-being of older residents (possibly even culminating in increased mortality). However, there is very little formal evidence in the United Kingdom (UK) or beyond to guide policymakers and local leaders when undertaking such sensitive work. Against this background, this article reports findings from an independent evaluation of what is believed to be the largest care home closure programme in the UK (and possibly beyond).

This consisted of qualitative interviews with older people, families, care staff and social work assessors during the closure process in one case study care home and one linked day centre, as well as self-reported health and quality of life data for older people from 13 homes and/or linked day centres at initial assessment, 28 days after moving and at 12-month follow up. The study is significant in presenting public data about such a contested topic from such a large-scale closure process, in its focus on both process and outcomes, in its mixed-methods approach, and in its engagement with older people, families and care staff, alongside the use of more formal outcome measures. Despite significant distress part-way through the process, the article suggests that outcomes either stayed the same or improved for most of the sample up to a year after moving to new services. Care homes closures may thus be a "tale of two halves", with inevitable distress during the closure but, if done well, with scope for improved outcomes for some people in the longer term. These findings are crucial for current policy and practice, given that the risk of major closures seems to be growing, and given that there is virtually no previous research on which to base local or national closure processes. While some of this research is specific to England, the underlying issue of care home closures and lessons learned around good practice will also apply to other countries. (RH)

ISSN: 01445596

From : <http://www.wileyonlinelibrary.com/journal/spol>

248/119 Respecting care home residents' right to privacy: what is the evidence of good practice?; by Caroline Emmer De Albuquerque Green, Anthea Tinker, Jill Manthorpe.: Emerald.

Working with Older People, vol 22, no 4, 2018, pp 198-210.

The right to privacy is a fundamental human right, as enshrined in international and domestic law and standards. This paper reviews and discusses evidence of good practice in respecting care home residents' right to privacy. In the context of increasing interest in using a human rights approach to social care in care homes for older people, this literature review summarises research evidence on what respecting the human right to privacy of care home residents entails in practice. This literature review followed a rigorous systematic approach to the scoping review, inspired by the Joanna Biggs Institute's guidelines for conducting systematic reviews. 12 articles were included in the review. The research took a multidimensional understanding of privacy. These dimensions can be categorised as physical, inter-relational or related to personal data. The review highlights three good practice points. First, it is good privacy practice in care homes to make available single-occupancy bedrooms to residents, since this offers the opportunity to personalising this physical space with furniture and other belongings, adding a sense of ownership over the space. Second, residents appreciate being able to choose when and how they spend their time in their own bedrooms. Third, it is good practice to respect residents' private physical space and private choices, for example by knocking on doors before entering, or agreeing with the resident when it is permissible to enter. The review also found that in some studies privacy considerations were relevant to communal living areas within care homes, including the use of surveillance cameras and the sharing of personal data. This literature review adds to the body of academic literature on human rights and social care in practice. It also highlights areas for future research relating to the right to privacy in care homes. (RH)

ISSN: 13663666

From : <http://www.emeraldinsight.com/loi/wwop>

248/120 The use of direct care in nursing home residents: a longitudinal cohort study over 3 years; by Corinna Vossius, Geir Selbaek, Jurate Saltyte Benth (et al).: Wiley.

International Journal of Geriatric Psychiatry, vol 34, no 2, February 2019, pp 337-351.

The aim of the present study was to evaluate the trend in the use of direct care in a cohort of nursing home (NH) residents and to explore its association with resident characteristics and organisational factors. 696 NH residents from 47 Norwegian NHs were included at admission. In 537 residents the use of direct care was assessed every six months over a course of three years. A multiple model was estimated to identify demographic, clinical and organisational characteristics associated with the use of direct care time. Six months after admission 76.2 hours of direct care on average were rendered to each resident per month, while this number was reduced to 50.3 hours per month at the end of the study period. Most residents (92%) showed a stable use of direct care time, while a small group of residents displayed a much higher and varying use of direct care time. Increasing dementia, neuropsychiatric symptoms and decreasing function in activities of daily living were associated with higher use of direct care time. Direct care time constituted about 50% of the staff's working time. In Norwegian NHs, high use of direct care time was associated with younger age, more severe dementia and severe neuropsychiatric symptoms. By identifying factors that impact on direct care time, preventive measures might be put in place to the benefit of residents and possibly to improve resource use. Further research should explore the association between direct care time, quality of care and the residents' quality of life. (JL)

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RESILIENCE

(See 248/130)

RETIREMENT

(See Also 248/46)

- 248/121 Divided citizenship: how retirement in the host country affects the financial status of intra-European Union migrants; by Paul Bridgen, Traute Meyer.: Cambridge University Press.
Ageing and Society, vol 39, no 3, March 2019, pp 465-487.
Since European Union (EU) enlargement in 2003, labour migration from East to West and South to North has increased. It is to be expected that a share of these workers will want to retire in their host countries. According to the academic literature, EU legislation protects such mobility well, by allowing the transfer of rights accrued in any EU country to another. However, such research has focused on legislation, not outcomes. We know little about how migration will affect the financial status of retired migrants in their host country and their ability to sustain a life there, should they stay after retirement. Using migration, wage and pension policy data (Eurostat, Organisation for Economic Co-operation and Development - OECD), this paper projects the post-retirement incomes of a range of hypothetical EU migrants, selected in relation to the most common migratory flows since 2003. After having worked in their home countries (Romania, Poland, Bulgaria and Italy) for at least ten years, these people move to richer countries (Italy, Spain, Germany and the United Kingdom) and work there for at least 30 years. To determine whether they can remain settled after decades of labour force participation in the host country, the paper adds their pension entitlements from home and host countries and compares this income with the relative poverty line of the host countries. This shows that good portability of entitlements matters little when these are very low, because of a large wage gap between home and host country. Thus, after at least 30 years of enjoying all citizenship rights as workers, most of these individuals are projected to receive incomes below the relative poverty line of their host countries and thus experience a sharp drop in this status. Their citizenship is diminished. The paper concludes by considering policies that could avoid such an outcome. (RH)
ISSN: 0144686X
From : <http://www.cambridge.org/aso>

RURAL ISSUES

- 248/122 Older adult service usage assessment: evidence from two rural samples; by Nancy J Karlin.: Taylor and Francis.
Activities, Adaptation and Aging, vol 42, no 4, October-December 2018, pp 305-327.
The author assessed home and community-based services (HCBS) with regard to recent and future frequency of service usage, along with overall satisfaction and future perceived need for community services as reported by rural older adults. Data from two samples of older adults (in Nebraska and Colorado) were examined. Findings suggest support structures, religious involvement and health related issues differ between the two samples taken from similar proximities and distances to services, and areas with comparable population densities. Data suggest that older adults currently using an HCBS are likely to use that same service in the future, and they report a need beyond their current requirements. The perceptions of future service use and need may be applicable to other regions beyond the current study focus. Given that HCBS availability and use will change, continued measurement of service use and perceived needs could play a role toward furthering healthy ageing and informing funding policy. (RH)
ISSN: 01924788
From : <http://www.tandfonline.com>
- 248/123 Perceptions of changing communities among rural elders: impact on well-being; by Jane Strommen, Gregory F Sanders.: Taylor and Francis.
Activities, Adaptation and Aging, vol 42, no 3, July-September 2018, pp 210-224.
Rural changes have created concerns about the well-being of older people ageing in place. This study used a basic interpretive approach, to examine attitudes of community change among older people remaining in rural areas. Participants were recruited from 11 communities in east central North Dakota. The study reports findings from 13 interviews with participants ranging in age from 69 to 90. Four themes emerged: community loss; social loss and isolation; attachment to place; and commitment to stay. These findings should be considered when developing meaningful social activities that create a sense of belonging for older people in rural areas. (RH)
ISSN: 01924788
From : <http://www.tandfonline.com>
- 248/124 Rural versus urban residence as an influence on grandparent caregivers' needs for service; by Bert Hayslip Jr, Rebekah P Knight, Kyle S Page, Carolyn Phillips.: Taylor and Francis.
Journal of Intergenerational Relationships, vol 16, no 4, 2018, pp 422-440.
This Texas-based study explored the impact of rural versus urban environments on perceived needs for services among grandparent caregivers. A total of 75 grandparents took part in focus groups targeting their needs and concerns and/or completed a mailed survey. While findings suggested substantial similarity across rural and urban clients in unmet needs, areas of difficulty and service barriers, rural grandparents who reported their health to be fair or poor reported the greatest unmet needs and experienced the widest array of problem areas, while the opposite was true for urban grandparent

caregivers. With few exceptions, sociodemographic factors failed to predict unmet needs, array of problem areas and barriers. The practice and policy implications of these findings are discussed. (JL)

ISSN: 15350770

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

SEXUALITY

248/125 Addressing sexual health in geriatrics education; by Mark Brennan-Ing, Liz Seidel, Pam Ansell (et al.): Taylor and Francis.

Gerontology and Geriatrics Education, vol 39, no 2, April-June 2018, pp 249-263.

Adults remain sexually active well into later life, but few report discussing sexual health with a physician after age 50. The authors explored how geriatrics education might better address sexual health in the context of a psychosocial conference for geriatrics fellows, course directors, faculty members and other health care professionals. The conference comprised an informational plenary, which included a skills-building presentation on taking sexual histories, and a course director and faculty roundtable. Although they were informed about older adult sexual health, the geriatrics fellows' knowledge scores increased following the plenary. Fellows reported inconsistent sexual history taking with older adults, and they noted patient differences in age and gender as barriers. The roundtable discussion highlighted several barriers to inclusion of sexual health content in geriatrics curricula, including competing competencies, lack of educational materials, and discomfort with this topic on the part of faculty. Implications of these findings for geriatrics training and education programs and suggestions for improving this area of geriatrics education are discussed. (RH)

ISSN: 02701960

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

SOCIAL CARE

(See Also 248/122)

248/126 Older people's care survey 2018; by Joshua Cottell, Claire Harding, Coram Family and Childcare. London: Coram Family and Childcare, 2018, 22 pp.

In September 2018, Coram Family and Childcare submitted surveys as Freedom of Information (FOI) requests to all 206 local authorities in England, Scotland and Wales, and five Health and Social Care Trusts in Northern Ireland. 166 responses (79%) were received. This third annual survey of the price and availability of care for older people finds that costs are high and availability is low. It finds that while local authorities hold good information on what they are paying for older people's care, there is less robust information on self-funders. The section on prices also covers third party top ups, Deferred Payment Agreements, what self-funders pay for care, and how long self-funders will take to spend their savings on care. Availability of care is considered in terms of sufficiency, care by type of service, out of area placements, and variation between regions (including on care market awareness). The report recommends that UK governments should provide local authorities with adequate funding to ensure that there are enough safe, high quality care services available for everyone who needs them. In the long term, social care and its funding must be reformed. The report was sponsored by Legal and General. (RH)

From : <https://www.familyandchildcaretrust.org/older-people's-care-survey-2018>

248/127 User participation policies in Norway and England: the case of older people and social care; by Karen Christensen, Doria Pilling.: Cambridge University Press.

Journal of Social Policy, vol 48, no 1, January 2019, pp 43-61.

User participation has become one of the most important concepts in the social care sector in many European countries, but the literature has mostly paid attention to disabled people or those with mental health problems. This article compares the user participation policies directed at social care for older people in Norway and England. Using a discourse analytical approach, a selection primarily of White Papers from the 1960s until the present day are analysed. The analysis draws on the literature's discourse discussion, including a democratic and/or rights based discourse (full citizenship), a consumer discourse (consumers' rights to choose welfare services), a co-production discourse (users and state and/or local authorities partnerships), and nuances of these discourses. The analysis shows that, while both countries start with variations of a democratic discourse, Norway develops a temporary and weak consumer discourse in a middle phase, then moves to co-production in current times. England, on the other hand, develops a comprehensive consumer discourse but also a surprisingly strong co-production discourse - the idea of a 'Big Society' - in early and current times. (RH)

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SUICIDE

248/128 An evaluation of the Counselling on Access to Lethal Means (CALM) training with an area agency on aging; by Karen Slovak, Natalie Pope, Jarod Giger, Athena Kheibari.: Taylor and Francis.

Journal of Gerontological Social Work, vol 62, no 1, January 2019, pp 48-66.

Firearms are a significant risk factor in suicide, and older people are a disproportionately affected by this

means of suicide. This study investigated the impact of Counseling on Access to Lethal Means (CALM) training with geriatric case managers at an Area Agency on Aging. A concurrent mixed methods approach was used to explore 1) geriatric case managers' attitudes, beliefs, and behavioural intentions about counselling on access to lethal means following CALM training; and 2) perceived barriers to assessing for suicidality and counselling clients on access to firearms. The CALM evaluation data was collected immediately post-test at CALM training, at three-month follow up. Results indicate that since CALM training, 38% of respondents reported that they had discussed reducing access to lethal means with clients and/or families. At three-month follow-up, data showed that most beliefs, attitudes and behavioural intentions about counselling clients and families on this topic had increased. Focus group findings indicated that training had a positive effect on participants' attitudes, beliefs, and behavioural intentions about counselling on access to lethal means. The findings offer additional evidence and implications for training of this type. (RH)

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TRAUMA, CONFLICT AND WAR

(See Also 248/97)

- 248/129 Longitudinal health and disaster impact in older New Zealand adults in the 2010-2011 Canterbury earthquake series; by Joanne Allen, Lisa M Brown, Fiona M Alpass, Christine V Stephens.: Taylor and Francis.

Journal of Gerontological Social Work, vol 61, no 7, October 2018, pp 701-718.

Pre-existing longitudinal studies of people affected by disasters provide opportunities to examine the effects of these events on health. Data used in the current investigation were provided by participants in the New Zealand Health, Work and Retirement longitudinal surveys conducted in 2010, 2012 and 2014 who lived in the Canterbury region of New Zealand during the 2010-2011 earthquakes. 428 individuals aged between 50 and 83 years took part in the study. Latent profile growth analyses were used to identify groups of respondents who had similar pre-post-disaster physical and mental health profiles. These groups were compared in terms of demographic factors, personal impact of the earthquakes assessed in 2012 and the overall negative-positive impact of the earthquake assessed in 2014. There was little evidence of change in health status over time. Groups did not differ in their experiences of threat or disruption, however those in poorest health reported greatest distress and a more negative overall impact of the earthquake. Although results suggest little impact of disasters on health of surviving older adults, pre-disaster vulnerabilities were associated with distress. Social workers and agencies responsible for disaster response can play a key role in pre-disaster planning and assessment of vulnerabilities of older adults to enhance potential for positive outcomes post-disaster. (JL)

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- 248/130 Measures of emergency preparedness contributing to nursing home resilience; by Sandi J Lane, Elizabeth McGrady.: Taylor and Francis.

Journal of Gerontological Social Work, vol 61, no 7, October 2018, pp 751-774.

Resilience approaches have been successfully applied in crisis management, disaster response and high reliability organisations and have the potential to enhance existing systems of nursing home disaster preparedness. This study's purpose was to determine how the U.S. Center for Medicare and Medicaid Services (CMS) 'Emergency Preparedness Checklist Recommended Tool for Effective Health Care Facility Planning' contributes to organisational resilience by identifying the benchmark resilience items addressed by the CMS Emergency Preparedness Checklist and items not addressed by the CMS Emergency Preparedness Checklist, and to recommend tools and processes to improve resilience for nursing homes. The CMS Emergency Preparedness Checklist items were compared to the Resilience Benchmark Tool items; similar items were considered matches. Resilience Benchmark Tool items with no CMS Emergency Preparedness Checklist item matches were considered breaches in nursing home resilience. These findings suggest that the CMS Emergency Preparedness Checklist can be used to measure some aspects of resilience, however, there were many resilience factors not addressed. For nursing homes to prepare and respond to crisis situations, organisations need to embrace a culture that promotes individual resilience-related competencies that when aggregated enable the organisation to improve its resilience. Social workers have the skills and experience to facilitate this change. (JL)

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