

New Literature on Old Age

EDITOR

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Contents for vol 44 no 259, 2021

Subject Headings	Page
Abuse, safeguarding and protection	1
Arts, craft and music	1
Assistive technology	2
Attitudes to ageing	2
Black and minority ethnic groups	3
Covid-19	3
Crime	5
Dementia	5
Dementia care	6
Depression	8
Falls	8
Home care	9
Hospital care	9
Housing with care	9
Inequality and human rights	10
Information and communication technology	10
Intergenerational issues	11
International and comparative	11
Loneliness and social isolation	14
Long term care	15

Continued...

Subject Headings	Page
Mental health	15
Neighbourhoods and communities	16
Oral health	16
Pensions and benefits	17
Physical activity	17
Reminiscence	18
Residential and nursing home care	19
Retirement	19
Rural issues	20
Sensory loss	20
Social care	20
Social networks	21
Social policy and theory	21
Stroke	22
Transport	22
Volunteering and the voluntary sector	22

ABUSE, SAFEGUARDING AND PROTECTION

(See Also 259/13, 259/16, 259/48, 259/49)

- 259/1 Safeguarding adults practice and remote working in the COVID-19 era: challenges and opportunities; by Ann Anka, Helen Thacker, Bridget Penhale.: Emerald.
Journal of Adult Protection, vol 22, no 6, 2020, pp 415-427.
Little is known about effective safeguarding adults practice in the era of shielding, self-isolation, social distancing and remote working. This exploratory paper aims to examine the literature on the impact of COVID-19 on safeguarding adults practice.
A literature search was carried out in recently published articles to locate literature relating to COVID-19 and safeguarding adults in the UK and internationally. This included policy guidance and law, to describe the existing knowledge base, gaps in practice and areas that may require further research.
The findings suggest that measures to curb the spread of the COVID-19 pandemic gave rise to remote working and virtual safeguarding practice. The findings highlight the need for empirical research into the impact of virtual safeguarding adults assessments and effective ways to support the needs and outcomes of those who may be at risk of or experiencing abuse and neglect while shielding, socially isolating or when working in an environment where social distancing is required.
ISSN: 14668203 From : <https://doi.org/10.1108/JAP-08-2020-0040>

- 259/2 Three early papers on self-neglect; by Stephen Martineau.: Emerald.
Journal of Adult Protection, vol 23, no 1, 2021, pp 45-56.
This study examines three English research papers on self-neglect, from 1957, 1966 and 1975, discussing them in the context of more recent thinking and the statutory framework in England.
In reviewing the three research papers, developments and points of continuity in the field of self-neglect are identified and discussed in this paper.
In light of the findings of the three articles, the present paper traces some of the classificatory refinements in this field that have taken place since the papers were published, notably in respect of hoarding and severe domestic squalor. Some of the difficulties in making judgements about behaviour thought to breach societal norms are described, and the challenges practitioners face in intervening in cases, particularly where the person concerned is refusing assistance, are examined.
ISSN: 14668203 From : <https://doi.org/10.1108/JAP-07-2020-0023>

ARTS, CRAFT AND MUSIC

- 259/3 Art in response to music: involving children too; by Nia Davies Williams.: Investor Publishing.
Journal of Dementia Care, vol 29, no 2, March/April 2021, pp 18-20.
The author, as musician in residence at a dementia care home in North Wales, finds that non-intrusive live music fits in very well with informal and relaxed painting activities carried out by residents. Painting styles often reflect the music.
Before the Coronavirus pandemic children from local primary schools would often join in these 'Art in Response to Music' sessions. These encounters were always found to be positive and worries about how the children might react if an older person with dementia showed signs of confusion proved groundless.
ISSN: 13518372 From : <http://www.journalofdementiacare.co.uk>
- 259/4 Getting creative: a project to improve well-being for all; by Kate Parkin.: Investor Publishing.
Journal of Dementia Care, vol 29, no 1, January/February 2021, pp 18-19.
Patients in a Newcastle memory service, along with their caregivers and clinicians, were given the chance of 'getting creative' thanks to a project run by the charity 'Equal Arts'.
The charity operates in care settings and cultural venues. The 'Getting Creative' artist-led groups were made up of 12 older people with dementia and their carers and two support staff.
Survey and photographic evidence was gathered from sessions using ipads. 'It was pleasing to see patients, who had been nervous at first, find their voices and the ability to communicate with each other and make new friends through creative activities such as moulding clay figures and making glass bottle lamps.'
The project has had a long-term influence on the way the clinic runs its service and the hope is it can be extended to other services in the North East.
ISSN: 13518372 From : <http://www.journalofdementiacare.co.uk>
- 259/5 It's changed my life just by giving it a try; by Liz Jennings, Jess Shaw, Keith Oliver.: Investor Publishing.
Journal of Dementia Care, vol 29, no 1, January/February 2021, pp 20-21.
Time and Place is a project aimed at helping people with dementia write their own poetry assisted by student volunteers. When COVID-19 struck the project seemed doomed. This article describes how it was rescued, using Zoom, bringing together creative writers from across the UK, to become a national success story.
ISSN: 13518372 From : <http://www.journalofdementiacare.co.uk>

- 259/6 The music died, but we'll meet again with energy and passion; by Diana Kerr.: Investor Publishing. Journal of Dementia Care, vol 29, no 1, January/February 2021, pp 32-34. This article looks at the organisation of singing groups for older people with dementia across Scotland and the affects of COVID-19. When coronavirus arrived it felt like 'the day the music died'.
ISSN: 13518372
From : <http://www.journalofdementiacare.co.uk>

ASSISTIVE TECHNOLOGY

- 259/7 The essential needs for home-care robots in Japan; by Mayuko Tsujimura, Hiroo Ide, Wenwei Yu, Naonori Kodate, Mina Ishimaru, Atsuko Shimamura, Sayuri Suwa.: Emerald. Journal of Enabling Technologies, vol 14, no 4, 2020, pp 201-220. This study aims to compare the level of needs for home-care robots amongst older adults, family caregivers and home-care staff and clarify the factors constituting these needs. A cross-sectional, anonymous questionnaire survey was administered. It included 52 items related to needs for home-care robots rated on a four-point Likert scale. Means and standard deviations were calculated, and the Kruskal-Wallis test was performed for each item. Factor analysis was conducted on the needs of home-care staff. Responses from 79 older adults, 54 family caregivers and 427 home-care staff were analysed. For all three groups, the level of agreement was high for the following needs: to inform family and support personnel immediately when older adults fall, about their location in case of natural disasters and about mismanagement of fire by older adults with dementia. For family caregivers and home-care staff, the level of need concerning monitoring was higher than for older adults. Extracted using factor analysis, the six factors representing the essential needs for home-care robots were risk minimisation, daily monitoring of the physical condition, supporting activities of daily living (ADL) and instrumental ADL, pre-empting problems, communication and miscellaneous support.
ISSN: 23986263
From : <https://doi.org/10.1108/JET-03-2020-0008>

- 259/8 He's lovely: I know he's not real - but he could be; by Sarah Small, Catherine Quinn.: Investor Publishing. Journal of Dementia Care, vol 29, no 2, March/April 2021, pp 21-23. This study investigates whether robotic animals can provide the same boost to wellbeing, for older people with dementia, as contact with real animals. Nine residents were observed over 24 robotic animal sessions. While the overall assessment was that the robotic animals were beneficial, it was noted that a patient could form an attachment to the robotic animal that might be problematic and needed careful management. For most residents the robotic animals were a source of comfort, an opportunity for social engagement and a trigger for sharing memories. There were some limitations in that not all residents were enthusiastic and there were issues for some staff around battery life and confidence in using the animals. Staff, however, felt that residents enjoyed live animals more than the robotic ones.
ISSN: 13518372
From : <http://www.journalofdementiacare.co.uk>

ATTITUDES TO AGEING

(See Also 259/45)

- 259/9 Misunderstandings about older people fuel corona virus complacency; by Ellery Altshuler.: Emerald. Working with Older People, vol 24, no 4, 2020, pp 269-272. The purpose of this paper is to explore public assumptions underlying the apparent disregard for the lives of older people during the coronavirus outbreak. It attempts to dispel myths about quality of life among older people. The paper integrates the author's personal experiences as a doctor with data collection, which involved general PubMed searches for articles relating to the public response to the effect of coronavirus on older people; beliefs about the lives of older people; and issues of happiness, contentedness and quality of life in older age. Some people have concluded that the lives of older people - which they believe to be of low quality - are worth risking to lessen the economic impact of coronavirus. This morbid calculation is based in part on the assumption that older people are less happy than younger people. In fact, the evidence shows that as people get older, they become significantly happier. This paper asks readers to explore their assumptions about ageing and reaffirms the importance of protecting older people in the midst of the coronavirus pandemic.
ISSN: 13663666
From : <https://doi.org/10.1108/WWOP-06-2020-0033>

BLACK AND MINORITY ETHNIC GROUPS

- 259/10 Family relationships and cognitive function among community-dwelling US Chinese older adults; by Mengting Li, Man Guo, Meredith Stensland, XinQi Dong.: Sage.
Research on Aging, vol 43, no 1, January 2021, pp 37-46.
A broad literature has explored racial disparities in cognitive aging. Research incorporating sociocultural factors would provide a more comprehensive understanding of minority aging. This study aims to investigate the role of family typology in cognition among U.S. Chinese immigrants. Data were derived from the Population Study of Chinese Elderly in Chicago (PINE). Family typology included tight-knit, unobligated ambivalent, commanding conflicted, and detached typologies. Cognition was evaluated by global cognition, episodic memory, working memory, executive function, and mini-mental state examination (MMSE). Linear and quantile regressions were used. Older adults with detached and commanding conflicted typologies reported lower global cognition than those with unobligated ambivalent typology. Detached, commanding conflicted, and tight-knit typologies were associated with poorer performance in episodic memory, working memory and MMSE than unobligated ambivalent typology, respectively. Social service providers could be aware of multifaceted family relationships when developing interventions for cognitive function and understand family typology as a whole.
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COVID-19

- (See Also 259/1, 259/9, 259/37, 259/39, 259/40, 259/41, 259/42, 259/43, 259/44, 259/55, 259/60, 259/66, 259/67, 259/72, 259/80)
- 259/11 Caught between two fronts: successful aging in the time of COVID-19; by Lukas Richter, Theresa Heidinger.: Emerald.
Working with Older People, vol 24, no 4, 2020, pp 273-280.
The COVID-19 pandemic poses a great challenge for older people both in terms of the severity of the disease and the negative consequences of social distancing. Assumptions about negative effects on the lives of the elderly, affecting dimensions of successful aging (such as the preservation of social relationships), have thus far been hypothetical and have lacked empirical evidence. The aim of this paper is to shed empirical light on the effects of COVID-19 on the everyday life of older people against the background of the concept of successful aging.
Data from a standardised, representative telephone survey with residents of Lower Austria, a county of Austria, were used for this secondary analysis. The sample included 521 persons of 60 years of age and older. For this paper, contingency analyses (Chi square coefficients, z-tests using Bonferroni correction) and unidimensional correlational analyses were calculated.
The empirical data show that 'successful aging', as described within a theoretical framework, is a challenge in the time of the COVID-19 pandemic.
ISSN: 13663666
From : <https://doi.org/10.1108/WWOP-06-2020-0031>
- 259/12 COVID-19 and inequality: developing an age-friendly strategy for recovery in low income communities; by Tine Buffel, Patty Doran, Mhorag Goff, Luciana Lang, Camilla Lewis, Chris Phillipson, Sophie Yarker.: Emerald.
Quality in Ageing and Older Adults, vol 21, no 4, 2020, pp 271-279.
This paper aims to explore the social impact of the COVID-19 pandemic, focusing on issues facing older people living in urban areas characterised by multiple deprivation.
It first reviews the role of place and neighbourhood in later life; second, it examines the relationship between neighbourhood deprivation and the impact of COVID-19; and, third, it outlines the basis for an 'age-friendly' recovery strategy.
The paper argues that COVID-19 is having a disproportionate impact on low-income communities, which have already been affected by cuts to public services, the loss of social infrastructure and pressures on the voluntary sector. It highlights the need for community-based interventions to be developed as an essential part of future policies designed to tackle the effects of COVID-19.
The paper contributes to debates about developing COVID-19 recovery strategies in the context of growing inequalities affecting urban neighbourhoods.
ISSN: 14717794
From : <https://doi.org/10.1108/QAOA-09-2020-0044>
- 259/13 COVID-19 and residential care facilities: issues and concerns identified by the international network prevention of elder abuse (INPEA); by Marie Beaulieu, Julien Cadieux Genesse, Kevin St-Martin.: Emerald.
Journal of Adult Protection, vol 22, no 6, 2020, pp 385-389.
The COVID-19 pandemic has affected the physical, psychological, social and financial health of older persons. On this subject, the United Nations published a policy brief on the impact of COVID-19 on older persons in May 2020. In line with this, the purpose of this general review is to address three issues

affecting older persons living in residential care facilities: protective measures implemented to block the virus' entry, the types of mistreatment most frequently experienced and the necessity to promote and defend the rights of these persons.

The design of this study is based on input gathered since the end of April during meetings of the International Network for the Prevention of Elder Abuse (INPEA) and the results of a July survey of its members.

The survey results indicate variability in the implementation of protective measures in different countries and the significant presence of mistreatment and violation of the rights of older persons. Three major issues demand attention: ageism, systemic and managerial problems and the effects of implemented measures. All these prompt the INPEA to once again plea for the adoption of an international convention of human rights of older persons.

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From : <https://www.emerald.com/insight/content/doi/10.1108/JAP-08-2020-0034/full/pdf>

- 259/14 COVID-19, human rights and older people; by Susan McGrath.: Wiley.
Australasian Journal on Ageing, vol 39, no 4, December 2020, pp 328-30.
This editorial argues that the COVID-19 crisis has highlighted the precarious, contingent social norms and moral code around the value of older life and inclusion of older people as full participants in society, and as rights holders within human rights narratives and practices. The pandemic has also provided a case study of the limitations of legal systems available to protect the human rights of older people and the limited state of rights embeddedness and implementation in institutions and culture.
ISSN: 14406381
From : <https://doi.org/10.1111/ajag.12887>
- 259/15 Older peoples' sacrifice during COVID-19 pandemic; by Adalberto Fernandes.: Emerald.
Working with Older People, vol 24, no 4, 2020, pp 265-268.
This paper aims to reflect on the roles that are socially attributed to older people in the COVID-19 pandemic.
A discourse analysis of World Health Organization (WHO) recommendations for older people, and news articles, explores their concepts about this population during COVID-19.
The author's interpretation suggests that the WHO provides a restrictive model of action for older people in the pandemic. The history of older people is not valued, and their actions are limited to the maintenance of biological life. This restriction can lead to sacrificial behaviour models depicted in the news, demanding a reconceptualization of the notion of older people.
The author concludes that the public model of older people is dangerous for this population during COVID19. The care for older people in this pandemic demands that we co-construct an active role with them for the crisis.
ISSN: 13663666
From : <https://doi.org/10.1108/WWOP-07-2020-0035>
- 259/16 Safeguarding adults and COVID-19: a sector-led improvement response; by Adi Cooper.: Emerald.
Journal of Adult Protection, vol 22, no 6, 2020, pp 401-413.
This study aims to describe the sector-led response to the COVID-19 pandemic and national lockdown in terms of safeguarding adults. It uses a case study method to examine a sector-led improvement response to COVID-19 and safeguarding adults.
The study describes how safeguarding issues and concerns were identified and brought together, and then responded to. It reviews the initiative in the context of crisis intervention theory and discusses the achievements of this initiative regarding COVID-19 and safeguarding adults during the period April-July 2020.
The study describes a unique joint initiative between the Local Government Association and the Association of Directors of Adult Social Services, which worked with the Networks of Chairs of Safeguarding Adults Boards, Safeguarding Adults Boards' managers and Principal Social Workers. This initiative developed resources and shared information and good practice to support a response in unprecedented circumstances.
ISSN: 14668203
From : <https://doi.org/10.1108/JAP-08-2020-0037>
- 259/17 Shining a light on care homes during the COVID-19 pandemic in the UK 2020; by Annie Stevenson.: Emerald.
Quality in Ageing and Older Adults, vol 21, no 4, 2020, pp 217-228.
The purpose of this paper is to explore the link between age discrimination and the injustices that have taken place in our care homes during the COVID-19 pandemic in this country. It seeks to show how destructive age discrimination is to those who live in our care homes and attempts to shake up our attitudes to older people, as the pandemic continues. It is hoped that shifts in attitude would lead to a societal revolution in care and support for older people as the pandemic shows us how the current system is breaking down.
The paper is a personal insight into the plight of the care home sector during the COVID-19 pandemic in the UK. The writer has worked in the field of social care and older people's services for many years

and felt compelled to share her learning and observations. This has led to venturing more deeply into understanding why those who live, work and visit care homes have been so neglected and 'cast into the shadows' in the face of such desperate danger. Whilst tracking the media narrative during the first wave, the author attempts to apply her knowledge, in particular gained from working for Help the Aged (now Age UK) as a policy manager for Quality Care, but also draws on experiences as a social worker, commissioner and care provider from the 1980s to the present. By 'shining a light' on care homes, revealing that the darker practices that have taken place contravene the Human Rights Act 1998, it is hoped that the recognition of age discrimination will happen at every level and become better known in its application. The paper observes how deeply rooted it is in us all.

Having highlighted some shocking examples of bad practice from the authorities relating to care homes, the article concludes that Government policy on care homes from March to July 2020 was discriminatory and questions how far lessons have been learned. The legislation is in place in the form of the Human Rights Act 1998 to protect older people in care homes but is not being widely implemented at regional policy level. Government rhetoric remains far from reality. Instead of redressing the gap and admitting mistakes, there is evidence at a high level of continued denial and the projection of blame on to the care homes themselves.

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From : <https://doi.org/10.1108/QAOA-10-2020-0051>

CRIME

(See Also 259/50)

259/18 Older adults and scams: evidence from the Mass Observation Archive; by Jan Bailey, Louise Taylor, Paul Kingston, Geoffrey Watts.: Emerald.

Journal of Adult Protection, vol 23, no 1, 2021, pp 57-69.

The issue of financial abuse is highlighted in the Care Act (2014). One category of financial abuse is consumer fraud or 'scams.' Evidence suggests that scams are becoming increasingly ubiquitous, yet how scams impact older adults remains under-researched. The purpose of this paper is to report data from 80 older adults' written responses to a Mass Observation Archive Directive, commissioned in autumn 2015, which focused on scams.

A qualitative approach was used with data captured via written responses to a set of questions. There was no limit on the length of written accounts, and respondents remained anonymous. Data were analysed thematically, resulting in four key themes.

The data indicates scams impact individuals in terms of health and well-being, irrespective of whether they have experienced financial loss, and trigger implementation of strategies intended to avoid being defrauded. There is also evidence of scam-related stigma with individuals who are defrauded being subject to derision and censure.

ISSN: 14668203

From : <https://doi.org/10.1108/JAP-07-2020-0030>

DEMENTIA

259/19 Narrative inquiry on case studies of crisis in dementia; by Alessandro Bosco (et al.): Emerald.

Quality in Ageing and Older Adults, vol 21, no 3, 2020, pp 181-191.

This study aims to explore the coping styles that can be inferred from the discourse of dyads with dementia, and how these appear to impact on care management.

This was a case study approach. Participants were recruited from two teams managing crisis in dementia in the UK. The authors conducted multiple qualitative interviews with people with dementia and their family carers over the course of one month. The analysis was first performed through thematic analysis. Data were further analysed through narrative inquiry to create a story line, or play in our case, for our findings.

Five dyads were interviewed and a total of 16 interviews were conducted. Three dyads were husband-wife and two were daughter-mother relationships. The mean age was 67.4 years for carers and 79.8 years for people with dementia. In these cases, the carer assumed responsibility for managing the episode and was more likely to seek formal help if a pre-existing plan was in place. Otherwise, when a crisis arose, dyads preferred to avoid involving professionals.

The study concludes that psychosocial interventions should aim to identify and replace unhelpful strategies used by dyads to manage crisis episodes.

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From : <https://doi.org/10.1108/QAOA-02-2020-0002>

DEMENTIA CARE

(See Also 259/3, 259/8, 259/34, 259/57)

- 259/20 The Alexander Technique: a role in dementia care?; by Charlotte Woods.: Investor Publishing. Journal of Dementia Care, vol 29, no 2, March/April 2021, pp 15-17.
The Alexander Technique teaches how to improve 'presence', poise and ease of movement. This study investigates whether the technique can be effective for older people with dementia. The author, who was training to teach the Alexander Technique, at first tried with her mother who had dementia but was still living at home. She found the technique surprisingly effective.
She then moved on to work with a small group of residents with dementia, and staff, in a care home, observing the technique to be effective in improving balance and mobility and reducing pain all round and in improving mood and levels of social interaction for the older residents with dementia.
ISSN: 13518372
From : <http://www.journalofdementiacare.co.uk>
- 259/21 Couples' experiences of using DemPower in everyday life; by Therese Bielsten (et al).: Emerald. Quality in Ageing and Older Adults, vol 21, no 3, 2020, pp 169-180.
Interventions aimed at couples where one partner has dementia are often targeting burden, depression and cognitive function and do not focus on relationship and interpersonal issues. Furthermore, interventions within this population do not seem to have embraced a salutogenic and authentic dyadic approach where both partners' experiences are considered. To address this gap, a self-management app, DemPower, which was piloted and tested among couples where one partner has dementia living at home, has been developed. This study explores couples' everyday experiences of engaging with the DemPower. Semi-structured interviews with couples were analysed using thematic analysis.
The findings resulted in the following themes: growth of the relationship; we are not alone; and positive approach. The findings indicated that the experiences of a salutogenic and dyadic intervention can contribute to the feelings of empowerment, satisfaction of couples' achievements and a sense of support through peers and with the intervention itself.
The findings of this study indicate that couples where one partner has dementia appreciate interventions that focuses on a salutogenic approach to their everyday life and relationship. The dyadic intervention contributed to feelings of empowerment, satisfaction of couples' achievements and a sense of support through peers and through the intervention itself. Discussing, inventory and focus on strengths, resources and quality of life can therefore give couples insight in their growth of the relationship and their transitions during the dementia trajectory. Furthermore, this study can serve as an eye opener in health care for the type of support couples need and wishes to receive. This means that care for people with dementia and partners should adopt a more health-promoting approach.
ISSN: 14717794
From : <https://doi.org/10.1108/QAOA-10-2019-0059>
- 259/22 Development and preliminary testing of a framework for quantifying local service provision for people with dementia; by Jane Hughes (et al).: Emerald. Quality in Ageing and Older Adults, vol 21, no 3, 2020, pp 193-202.
This study hypothesises that there are variations in health and social care services available for older people with dementia and their carers, and that measurement of this between localities is possible. The purpose of the paper is to present a framework for examining this hypothesis.
Using a case study approach, data from national surveys of local authorities providing social care and National Health Services Trusts providing old age mental health services conducted in 2014/2015 in England were used. From these, indicators of variation in services for people with dementia and their carers in different geographical areas were created. Measurement of the presence/absence of each service permitted the creation of a service mix score for each area.
The framework comprised 16 attributes each with indicators describing the characteristics of the organisations providing the services; the skill mix of community mental health teams for older people; and the health care and social care services available in localities. Variation was evident, confirmed by quartile analysis and exemplars, suggesting that older people with dementia and their carers in different localities are likely to experience differences in the range of provision available, particularly social care services.
ISSN: 14717794 From : <https://doi.org/10.1108/QAOA-03-2020-0010>
- 259/23 Getting our terminology right: the power of language; by Ian James.: Investor Publishing. Journal of Dementia Care, vol 29, no 2, March/April 2021, pp 24-27.
This article looks at the terminology used in dementia care, in particular 'challenging behaviour', BPSD (Behavioural and Psychological Symptoms of Dementia) and related terms. It considers whether such terminology remains appropriate and the pros and cons of use.
The article looks at the history and development of the terminology and reports on a survey of usage among 376 dementia care professions. Alternative acronyms including BECON ('behavioural and emotional communication of need') were favoured but not found to be memorable.
ISSN: 13518372 From : <http://www.journalofdementiacare.co.uk>

- 259/24 Living with cancer and dementia: care and treatment experiences; by Alys Griffiths.: Investor Publishing.
Journal of Dementia Care, vol 29, no 1, January/February 2021, pp 28-31.
This study looks at the cancer-related experiences of people with dementia, their family and clinical teams.
It finds that people with comorbid cancer and dementia face unique and often complex situations which oncology staff are not always equipped for professionally.
Many examples of flexible and person-centred care were observed but also many ways in which the services could have helped to 'make the journey easier'.
It is suggested that further research should study the value of offering more community based services and consider the needs of people with cancer and dementia who do not have a family support network.
ISSN: 13518372
From : <http://www.journalofdementiacare.co.uk>
- 259/25 Mapping post-diagnostic dementia care in England: an e-survey; by Rachael Frost, Kate Walters, Jane Wilcock, Louise Robinson, Karen Harrison Denning, Martin Knapp, Louise Allan, Greta Rait.: Emerald.
Journal of Integrated Care, vol 29, no 1, 2021, pp 22-36.
Post-diagnostic dementia care is often fragmented in the United Kingdom, with great variation in provision. Recent policies suggest moving towards better community-based care for dementia; however, little is known on how this care is delivered. This study aimed to map the post-diagnostic dementia support provided in England a decade after the introduction of a National Dementia Strategy.
A mixed-methods e-survey (open Nov 2018-Mar 2019) of dementia commissioners in England recruited through mailing lists of relevant organisations was conducted. The authors descriptively summarised quantitative data and carried out thematic analysis of open-ended survey responses.
Fifty two completed responses were received, which covered 82 commissioning bodies, with representation from each region in England. Respondents reported great variation in the types of services provided. Information, caregiver assessments and dementia navigation were commonly reported and usually delivered by the voluntary sector or local authorities. Integrated pathways of care were seen as important to avoid overlap or gaps in service coverage. Despite an increasingly diverse population, few areas reported providing dementia health services specifically for BME populations. Over half of providers planned to change services further within five years.
ISSN: 14769018
From : <https://doi.org/10.1108/JICA-02-2020-0005>
- 259/26 Rare dementia support in rural and remote areas; by Gill Windle.: Investor Publishing.
Journal of Dementia Care, vol 29, no 1, January/February 2021, pp 26-28.
The Rare Dementia Impact Project team provides insights into the support needs and care preferences of people with rarer form of dementia. This review looks at the benefits and challenges for those in rural and remote regions.
The benefits include the person with dementia continuing to contribute and support from the wider community. Challenges include the risk of isolation, the impact of stigma and caregiver distress. Other issues include the lack of dementia care service provision, complex care systems, language and culture and problems associated with travel and distance.
ISSN: 13518372 From : <http://www.journalofdementiacare.co.uk>
- 259/27 Social work assessments for people with advanced dementia in "the new normal"; by Hilary Wilson.: Emerald.
Working with Older People, vol 24, no 4, 2020, pp 293-297.
Social work involves working directly with people who are experiencing a crisis. An assessment is carried out to establish the best way forward and then reviewed after a period of time to measure success or recalibrate the service. The current pandemic restrictions have all but ruled out meeting with people face-to-face. Now, professionals are usually required to don some form of personal protective equipment (PPE) when meeting with people and their families. Talking to an unknown professional who is behind a mask or on the telephone, about a personal issue is hard for everyone, but it is particularly difficult for people who may be further on in their dementia journey.
These impediments impact the social work assessment and review, meaning people may not have the quality of service they need and may end up paying for unnecessary provision. If admission to a care home is deemed necessary, the stakes rise considerably. A care home admission means contributing towards fees with pensions, savings and assets, including housing. Now, it comes with an additional health risk.
ISSN: 13663666 From : <https://doi.org/10.1108/WWOP-06-2020-0028>
- 259/28 Tailored peer support in rare dementia care; by Adetola Grillo.: Investor Publishing.
Journal of Dementia Care, vol 29, no 2, March/April 2021, pp 32-34.
Peer support can be a vital resource for people affected by rare forms of dementia, especially where professionals have limited knowledge. This article discusses the benefits of peer support in rare dementia cases. Support groups may meet online or face-to-face, and may be disease specific or not. The article

notes several such groups in the UK, USA and Canada and lists reported benefits. The article concludes that while peer support may not be a panacea, it is a valued psychosocial intervention that complements other supports.
ISSN: 13518372
From : <http://www.journalofdementiacare.co.uk>

- 259/29 Use of health and support services by people living with dementia in the community setting; by Lisa M Kalisch Ellett, Nicole L Pratt, Tuan A Nguyen, Elizabeth E Roughead.: Wiley. *Australasian Journal on Ageing*, vol 39, no 4, December 2020, pp 341-349.
The purpose of this study was to determine the access to and use of health-care services by people with dementia in the community.
A retrospective cross-sectional analysis of the Australian Government Department of Veterans' Affairs (DVA) administrative claims data was conducted. Veterans and their spouses with one or more dementia claims between 1 January 2000 and 30 June 2016, who were aged ≥ 45 years at the time of the claim and who were still alive and living in the community on 30 June 2017, were included. The authors assessed the proportions of people with dementia who received medical, pharmacy and medicines, allied health services, and home care supports from 1 July 2016 to 30 June 2017.
A total of 10,171 people with dementia were included. They had a median age of 89 years, 60% were female, and 63% lived in a major city. Over the one-year study period, 98% visited the GP and 99% had medicines dispensed at a pharmacy. Eighty-two per cent saw a specialist, and 19% saw a geriatrician. Thirty-one per cent received a DVA-funded dose administration aid to support medication administration, and 19% received a home medicines review. Less than half had claims for occupational therapist services (48%), community nursing (48%), physiotherapists (41%) or dentist visits (33%). Fifty-eight per cent received home care supports, for example domestic assistance.
The study concludes that many people living with dementia in the community do not access all of the health-care or support services available to them. Ensuring that people with dementia and their carers are supported to access the services available to assist them live in the community setting for as long as possible is important.
ISSN: 14406381
From : <https://doi.org/10.1111/ajag.12801>

DEPRESSION

(See 259/52)

FALLS

- 259/30 Implementing an intelligent video monitoring system to detect falls of older adults at home: a multiple case study; by Nolwenn Lapierre, Alain St-Arnaud, Jean Meunier, Jacqueline Rousseau.: Emerald. *Journal of Enabling Technologies*, vol 14, no 4, 2020, pp 253-271.
Older adults are at a high risk of falling. The consequences of falls are worse when the person is unable to get up afterward. Thus, an intelligent video monitoring system (IVS) was developed to detect falls and send alerts to a respondent. This study aims to explore the implementation of the IVS at home.
A multiple case study was conducted with four dyads: older adults and informal caregivers. The IVS was implemented for two months at home. Perceptions of the IVS and technical variables were documented. Interviews were thematically analyzed, and technical data were descriptively analysed.
The rate of false alarms was 0.35 per day. Participants had positive opinions of the IVS and mentioned its ease of use. They also made suggestions for improvement.
The study showed the feasibility of a two-month implementation of this IVS. Its development should be continued and tested with a larger experimental group.
ISSN: 23986263
From : <https://doi.org/10.1108/JET-03-2020-0012>
- 259/31 Web-based home-hazard modification app for falls prevention: the view of those at risk of falling and their carers; by Nikki Holliday (et al.): Emerald. *Journal of Enabling Technologies*, vol 14, no 3, 2020, pp 141-156.
The purpose of the study is to assess the usability and acceptability of FallCheck, a Web app that allows users to complete home-hazard assessments within their own home, with a group of people at risk of falling and their carers.
The mixed method study uses an online survey followed by semi-structured telephone interviews to collect both qualitative and quantitative data. A Think-Aloud study was used to test usability of the Web app through structured tasks.
Findings showed that FallCheck was easy to use with few usability issues. The Web app was deemed appropriate to use by people at risk of falling (young or old) or by carers if appropriate. The depth of knowledge provision and breadth of content was acceptable, and many participants reported subsequently making changes to their home environment to reduce their risk of falling. Overall, the majority of participants reported feelings of improved confidence and safety with an increased awareness of fall risks and a reduction in fear of falling at home.

FallCheck has good acceptability and usability with people at risk of falling and their carers and has the potential to improve access to home-hazard assessment and affect behavioural change regarding fall risk hazards and behaviour.

ISSN: 23986263

From : <https://doi.org/10.1108/JET-12-2019-0055>

HOME CARE

(See Also 259/7)

- 259/32 Challenges and solutions in the continuity of home care for rural older people: a thematic analysis; by Ryuichi Ohta, Yoshinori Ryu, Jun Kitayuguchi, Tatsunosuke Gomi, Takuji Katsube.: Taylor and Francis.

Home Health Care Services Quarterly, vol 39, no 2, April-June 2020, pp 126-139.

Home care is essential for the continuity of care, but rural communities struggle to procure these services regularly. As rural populations age, these difficulties may be exacerbated. This study examines the challenges and solutions for offering home care in rural areas. Healthcare professionals held focus groups and one-on-one interviews in rural communities, and these interviews were recorded and analyzed using thematic analysis. Changing rural contexts, stakeholder relationships, and sustainable communities were the primary themes. Increasing knowledge, sharing information, and dialogue among stakeholders were also crucial. Collaboration between professions may also create more sustainable home care in rural communities.

ISSN: 01621424

From : <https://doi.org/10.1080/01621424.2020.1739185>

- 259/33 Exploring the association between quality of homecare services and older adults' well-being; by Chang-ming Hsieh, Gretchen P Kenagy.: Taylor and Francis.

Home Health Care Services Quarterly, vol 39, no 2, April-June 2020, pp 65-79.

Homecare services play an important role in enabling older adults with chronic illness or functional impairment to continue living in their homes and communities. Previous research on homecare services has not fully explored the potential psychological benefits of homecare services. This study investigates the association between quality of homecare services and psychological well-being by analyzing two surveys. The results showed that the association between well-being and the quality of homecare services was mediated by satisfaction with health ($z = 4.36, p = .000$), satisfaction with family life ($z = 4.96, p = .000$) and satisfaction with friendship ($z = 3.56, p = .000$). The top three most important life domains, health, family life, and friendships, combined fully mediated the association between well-being and the quality of homecare services. These findings suggest that quality homecare services could enhance clients' well-being in the areas of family life and friendships beyond health.

ISSN: 01621424

From : <https://doi.org/10.1080/01621424.2020.1726849>

HOSPITAL CARE

(See Also 259/36)

- 259/34 Playfulness and mischief: an intergenerational journey; by Jo James, Nicola Abraham, Elizabeth McGeorge.: Investor Publishing.

Journal of Dementia Care, vol 29, no 1, January/February 2021, pp 22-25.

Following an intergenerational Christmas Party on a hospital dementia ward, this article discusses the practicalities of organising a hospital based intergenerational project, including issues of infection control. Worries were expressed about exposing children to the unpredictable behaviour of dementia patients and exposing dementia patients to the unpredictable behaviour of children.

In assessing outcomes it became too difficult to gain NHS ethical approval for a process to assess outcomes for patients so assessment focussed on the children. The children were shown to develop empathy and thoughtfulness. Parents assessed that the children enjoyed the sessions.

Overall assessment was that the project had value, not just for children and patients but for everyone involved. The project turned out to be much more complicated to organise than anticipated.

ISSN: 13518372

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

HOUSING WITH CARE

- 259/35 Perceived social standing in assisted living communities: a mixed-methods study of social hierarchies among residents; by Evan Plys, Rachel Johnson-Koenke.: Sage.

Research on Aging, vol 43, no 1, January 2021, pp 47-57.

The purpose of this mixed-methods study was to measure perceived social standing within an assisted living (PSS-AL), and to identify individual determinants and empirical correlates of this construct. The sample consisted of 200 residents of 21 assisted livings (ALs). A self-anchoring ladder measured

PSS-AL (M = 6.95, SD = 2.04) and an open-ended follow-up question assessed individual determinants of PSS-AL ratings. In a multiple regression, mental health (Beta = .27, p = .001), intimate staff-resident relationships (Beta = .22, p = .024), and extraversion (Beta = .27, p = .001) were significant predictors of PSS-AL. Qualitative findings revealed that inter-personal factors, prosocial behaviors, and health were key determinants of PSS-AL. Results highlight the social demands of AL and associated implications for residents with varying social abilities, skills, and interests. Findings also suggest that staff-resident relationships may shape and-or reinforce resident social hierarchies. The authors discuss implications for research and practice.

ISSN: 01640275

From : <https://doi.org/10.1177%2F0164027520932823>

- 259/36 Predictors of transport to hospital after emergency ambulance call-out for older people living in residential aged care; by Rosamond A Dwyer, Belinda J Gabbe, Thach Tran, Karen Smith, Judy A Lowthian.: Wiley.

Australasian Journal on Ageing, vol 39, no 4, December 2020, pp 350-358.

People living in residential aged care (RAC) frequently experience ambulance call-out. These episodes may have unintended consequences, yet remain under-investigated. The aim of this study was to examine clinical and sociodemographic features associated with transfer to hospital for this population. Retrospective cohort study using 6 years of clinical data from Ambulance Victoria (AV) were examined. Data analysis included multilevel multivariable logistic regression analysis of factors associated with transport to hospital.

The study found that odds of transfer were greater for people in rural areas, those with a history of depression, cardiovascular disease and osteoporosis, and residents prescribed antipsychotic and antidepressant medication. Ambulance call-out for trauma (commonly low-level fall) was less frequently transferred to hospital than that for a medical complaint.

It is anticipated that these findings will improve prediction of call-outs likely to require transfer. Findings include identification of clinical features to be targeted by community and preventative health programs to reduce risk of acute health deterioration and requirement for emergency hospital transfer.

ISSN: 14406381

From : <https://doi.org/10.1111/ajag.12803>

INEQUALITY AND HUMAN RIGHTS

(See 259/12, 259/14)

INFORMATION AND COMMUNICATION TECHNOLOGY

- 259/37 COVID-19 and AgeTech; by Andrew Sixsmith.: Emerald.

Quality in Ageing and Older Adults, vol 21, no 4, 2020, pp 247-252.

The paper is a commentary on emerging issues in the AgeTech sector, with particular reference to COVID-19. Information used in this paper is drawn from the Canadian AGE-WELL network.

The COVID-19 pandemic has particularly impacted older adults. Technology has increasingly been seen as a solution to support older adults during this time. AgeTech refers to the use of existing and emerging advanced technologies, such as digital media, information and communication technologies (ICTs), mobile technologies, wearables and smart home systems, to help keep older adults connected and to deliver health and community services.

Despite the potential of AgeTech, key challenges remain such as structural barriers to larger-scale implementation, the need to focus on quality of service rather than crisis management and addressing the digital divide.

AgeTech helps older adults to stay healthy and active, increases their safety and security, supports independent living and reduces isolation. In particular, technology can support older adults and caregivers in their own homes and communities and meet the desire of most older adults to age in place. AgeTech is helpful in assisting older adults to stay connected. The COVID-19 pandemic has shown the importance of the informal social connections and supports within families, communities and voluntary organizations.

ISSN: 14717794

From : <https://doi.org/10.1108/QAOA-07-2020-0029>

- 259/38 Technological advancements to address elderly loneliness: practical considerations and community resilience implications for COVID-19 pandemic; by Kristina M Conroy, Srikrupa Krishnan, Stacy Mittelstaedt, Sonny S Patel.: Emerald.

Working with Older People, vol 24, no 4, 2020, pp 257-264.

Loneliness has been a known severe public health concern among the elderly population during the COVID-19 pandemic. This paper aims to discuss the practicalities of using emerging technologies to address elderly loneliness and its implications and adaptations to the outbreak of corona virus disease-2019.

The authors draw on examples from the literature and their own observations from working with older adults, to provide an overview of possible ways technology could help this population in the current

COVID-19 pandemic.

Technological advancements have offered remarkable opportunities to deliver care and maintain connections despite the need to stay physically separated. These tools can be integrated into crisis communications, public health responses and care programs to address loneliness among the elderly. However, it must be done strategically and informed by the type of loneliness at play, environmental factors, socioeconomics and technological literacy.

The article suggests that care-providing organizations and policymakers should consider the risk of loneliness while responding to COVID-19 outbreak, particularly within elderly populations. As a part of a broader plan, technological solutions and low-tech approaches can make a difference in mitigating loneliness. Solutions should be accessible to and usable by older adults. Provision of equipment, training and guidance may be necessary to execute a technology-centric plan; for some communities and individuals, approaches that do not rely on advanced technology may be more effective.

ISSN: 13663666

From : <https://doi.org/10.1108/WWOP-07-2020-0036>

INTERGENERATIONAL ISSUES

(See Also 259/47)

- 259/39 Stronger together?: Intergenerational connection and COVID-19; by Stephen Burke.: Emerald. *Quality in Ageing and Older Adults*, vol 21, no 4, 2020, pp 253-259.
This paper aims to review how intergenerational connections and relationships have been affected to date by COVID-19. It seeks to provide lessons for the future.
Although there are some excellent examples of creative approaches such as online strategies to bring generations together in the face of social distancing, there remain barriers to building stronger communities. Many people of all ages remain lonely and isolated. Community projects are under-funded and will struggle to maintain connections beyond the immediate crisis. Inequalities and the digital divide have been exacerbated by COVID-19. Intergenerational relations are likely to be further strained by the economic impact.
ISSN: 14717794
From : <https://doi.org/10.1108/QAOA-07-2020-0033>

INTERNATIONAL AND COMPARATIVE

- 259/40 Bring it on COVID-19: being an older person in developing countries during a pandemic; by Setayesh Sattari, Soniya Billore.: Emerald. *Working with Older People*, vol 24, no 4, 2020, pp 281-291.
This study aims to explore the respective risk perception toward the Covid-19 pandemic among the elderly in two developing countries and their lifestyle change and adaptation behaviour as a result of that.
In total, 22 in-depth interviews were conducted among people aged 60 to 85 in Iran and India. The interview guideline was based on two constructs inspired by the study of Gerhold (2020) - risk perception of the pandemic and change in lifestyle and adaptation to the pandemic situation.
The results showed that although the majority of the interviewees initially experienced fear and anxiety during the stay-at-home order and the pandemic situation at large, they quickly adapted to the new situation with behavioral and attitudinal changes in ways relevant to the new normal. The results confirmed the maturation hypothesis proposed by Knight et al.
ISSN: 13663666
From : <https://doi.org/10.1108/WWOP-06-2020-0030>
- 259/41 COVID-19 and gender infectivity-mortality rate among Pakistani population; by Sadia Zia.: Emerald. *Working with Older People*, vol 24, no 4, 2020, pp 299-302.
This paper looks at the regional, behavioural and biological factors that have led to a high mortality rate from Covid-19 among older men in Pakistan.
Statistical data was collected from Government of Pakistan publications to analyse the gender-based infection rates and mortality count.
The study confirms a particularly high mortality rate among older men in Pakistan and suggests this may be because of hormonal differences between men and women, high rates of smoking among men and large numbers of returning travellers spreading the virus, including 20,000 pilgrims from Iran and Saudi Arabia.
ISSN: 13663666
From : <https://doi.org/10.1108/WWOP-06-2020-0023>
- 259/42 COVID-19 and older adults in Israel: common challenges and recommendations; by Jiska Cohen-Mansfield.: Emerald. *Quality in Ageing and Older Adults*, vol 21, no 4, 2020, pp 209-216.
The impact of COVID-19 has most dramatically affected the older population, and nursing homes have become infection hotspots. As a response, governments have ordered isolation of older adults in geriatric

institutions owing to the high risk of critical illness and mortality. The purpose of this paper is to discuss the potential impact of current policies on nursing homes and community-based care and provide suggestions for improvement in care.

Taking the situation in Israel as an example, the author discussed major systemic problems pertaining to long-term care facilities and to community based care; the neglect of mental health; systemic deficiencies in end of life care; and the need to revise communications concerning COVID-19.

Within each of the identified areas, recommended changes in strategy, policy and practice can help mitigate the dramatic impact of COVID-19 on the living experience of the older population.

ISSN: 14717794

From : <https://doi.org/10.1108/QAOA-09-2020-0043>

- 259/43 COVID-19 lockdown: the unspoken toll on the 65+ community in Turkey; by Ozgur Ates.: Emerald. Working with Older People, vol 24, no 4, 2020, pp 303-311.

On March 21, 2020, the Turkish Government imposed a curfew for citizens 65 years old and over and ordered them to stay at home as a measure to protect them against the COVID-19 outbreak. The curfew ended on June 10, 2020, having lasted 82 days. The purpose of this paper is to examine the significant emotional burden on the elderly, as they felt excluded and battled with despair during the lockdown.

This reflective paper shares the COVID-19 lockdown experiences of the author with a group of elderly residents of a small community in Ankara, Turkey. Through semi-structured interviews and analysis, three overarching themes of the residents' experience were identified: vulnerability, social isolation/loneliness and ageism.

The elderly in the community are individuals who get their social interaction outside the home. As a result of the nearly three months of social isolation, they have experienced social disconnection and health problems.

ISSN: 13663666

From : <https://doi.org/10.1108/WWOP-07-2020-0037>

- 259/44 Describing the experiences of older persons with visual impairments during COVID-19 in rural Ghana; by Ariel Kwegyir Tsiboe.: Emerald.

Journal of Adult Protection, vol 22, no 6, 2020, pp 371-383.

This study aims to describe the lived experiences among older persons with disability during the coronavirus pandemic in rural Ghana.

The study is based on a qualitative methodology consistent with a phenomenological approach. Semi-structured interviews were conducted with 20 participants. Thematic analysis was used for data analysis.

During the pandemic, care given to older people with disabilities by their caregivers declined significantly because of the lockdown measures. This caused participants to suffer profoundly from loneliness and hunger, and forced some to have suicidal thoughts. At the same time, those who lived with their family members were kept indoors for several weeks to reduce their chances of contracting the virus. This was because participants' family members had lost confidence in the ability of the Ghanaian health-care system to protect their older relatives.

ISSN: 14668203

From : <https://doi.org/10.1108/JAP-07-2020-0026>

- 259/45 The effect of aging attitudes on the quality of life of older adults in China; by Lijuan Chen, Wei Guo, Cristina Perez.: Sage.

Research on Aging, vol 43, no 2, February 2021, pp 96-106.

This study uses data from the 2014 China Longitudinal Aging Social Survey to examine the effect of attitudes toward ageing on quality of life among older adults in China. We find that older people who experience psychosocial loss may be less satisfied with their life, and have more feelings of depression and loneliness. Compared to older women, older men have lower life satisfaction, and more depression and loneliness, though psychosocial loss has less of an effect on them. Older women who experience psychosocial loss are more likely to be dissatisfied with their life and feel more depressive and lonelier than their male counterparts. Among those who experience psychosocial loss, older people living in rural communities have a higher level of life satisfaction, while living in urban areas may counteract some of the positive impact of psychological growth on reducing the frequency of feeling depressed and lonely. Social policy can play a role in shaping constructive social/community environments to build more positive attitudes toward ageing.

ISSN: 01640275

From : <https://doi.org/10.1177%2F0164027520948192>

- 259/46 Hybridization in China's elder care service provision; by Christina Maags.: Wiley.

Social Policy and Administration, vol 55, no 1, January 2021, pp 113-127.

Although the party-state has embarked on a mission to increase elder care services, evaluating this development according to different sectors demonstrates certain challenges. Official statistics do not include sector-specific information, and while provider websites suggest that elder care services are largely in public hands, Chinese experts argue that they are mostly 'civilian-run.' How can we explain these discrepancies in data on Chinese elder care? Drawing on the concept of hybridisation and

triangulating quantitative and qualitative data, I argue that the party-state's efforts to 'socialize' elder care provision has resulted in hybridisation within the industry which blurs the line between care providers and obfuscates the stark role of the state in elder care service provision. During the implementation of state-initiated hybridisation, providers misclassify their ownership type to benefit from financial incentives or circumvent political control, resulting in even greater hybridisation and fragmentation on the ground.

ISSN: 01445596

From : <https://doi.org/10.1111/spol.12616>

259/47 Parental caregiving and employment among midlife women in Japan; by Saeko Kikuzawa, Ryotaro Uemura.: Sage.

Research on Aging, vol 43, no 2, February 2021, pp 107-118.

This paper examines how parental caregiving affects women's employment in Japan. Drawing on the 2005-2014 Longitudinal Survey of Middle-Aged and Elderly Persons, the authors estimate logistic regression models for the employment status of middle-aged women in various types of employment as a function of caregiving intensity to examine when and in what context caregivers' employment may be at risk for Japanese women. The results showed that working women who began providing 5 or more hours of care per week were significantly more likely to leave their jobs than non-caregiving women; those who began providing fewer than 5 hours of care per week did not show this likelihood. Among women in regular employment, those who began to provide 5 or more hours of care per week and those who provided care in the previous year were more likely to stop working or change jobs than their non-caregiving counterparts.

ISSN: 01640275

From : <https://doi.org/10.1177%2F0164027520941198>

259/48 Primary care physicians' identifying abuse of older adults in the small island state of Trinidad and Tobago; by Camile Huggins, Akeem Modeste-James, Jennifer Rouse.: Emerald.

Journal of Adult Protection, vol 23, no 1, 2021, pp 20-31.

This study aims to examine primary care physicians who are in a tenable position to identify signs of abuse in older adults as well as provide an opportunity to safeguard them from abuse. Yet little is known about their clinical decision-making process during a clinic visit to detect abuse of older adults and provide adequate support in the Caribbean.

Fourteen primary care physicians working in a government operated free clinic were interviewed about their clinical decision-making process, in a narrative analysis format on the small island state of Trinidad and Tobago.

Primary care physicians expressed lack of knowledge about the primary health-care clinics' protocols and procedures regarding abuse of older adults. Lack of attendance to educational in-service programs on recognizing and reporting abuse of older adults. A hands-off approach with non-medical abuse issues. Last there is no uniform assessments among the different types of physicians.

Although these findings are among primary care physicians located in Trinidad and Tobago, the context may be applied to primary care settings in other Caribbean islands. Major focus should be geared towards increasing awareness among the public and health-care professionals.

ISSN: 14668203 From : <https://doi.org/10.1108/JAP-07-2020-0020>

259/49 Protecting vulnerable adults in Singapore: the creation of the Vulnerable Adults Act 2018; by Jill Manthorpe, Joanne Liming Chen.: Emerald.

Journal of Adult Protection, vol 23, no 1, 2021, pp 32-44.

The purpose of this paper is to describe and analyse the development and content of the Vulnerable Adults Act 2018 (hereafter 'the Act') in Singapore. It reports the parliamentary processes and deliberations.

The study provides a synthesis of publicly available research, policy documents, parliamentary debate, media reports and commentary.

It sets the Act's development and aims in Singapore's social and legal contexts. It notes the interface with other legislation and the focus of the Act on community and family abuse and neglect.

The paper suggests some areas for research including how the Act is used and its impact and also points to areas where the Act does not apply and outlines new professional powers and responsibilities and the role of government and community-based organisations.

The paper provides an early account of the genesis and aims of the new legislation, its powers and administration and draws international comparisons.

ISSN: 14668203 From : <https://doi.org/10.1108/JAP-07-2020-0025>

259/50 Psychological factors of fear of crime: an empirical study of older people in Lucknow, India; by Avani Bhai Patel.: Emerald.

Journal of Adult Protection, vol 23, no 1, 2021, pp 6-19.

Author's summary: The incidents of elder victimisation and cases of victimisation, in general, are increasing fast in the society. These incidents have had negative impact on the sense of well-being and way of life of the older people. Therefore, fear of crime is being considered as a most concerning psycho-social problem amongst the older people in contemporary time. The purpose of this study is to

understand the impact of crime rate on the well-being of the older people and examine the linkage between psychological factors and fear of crime amongst the older people.

The present study is based on the mixed method approach and an exploratory research designed applied to conduct the study. The field survey has been done from October 2012 to January 2013 on a sample of 220 older people of rural and urban areas of Lucknow in the state of Uttar Pradesh through purposive sampling. For the study, researcher has interviewed 137 male older people and 83 female older people through interview schedules and case studies. The data have been analysed through descriptive and narrative analysis.

The study finds that those older people have direct or indirect experience of victimisation, they have anxiety and feel insecurity that someone can victimise them. The study also finds that the happiness of older people is more affected due to anxiety and phobia and have higher level of feeling of fear of crime in their neighbourhood and home. The study also finds whenever anti-social elements are active in the neighbourhood and they commit crimes, fear of crime and anxiety grasp the older people to a large extent causing a fracture in their psychological well-being.

ISSN: 14668203

From : <https://doi.org/10.1108/JAP-05-2020-0016>

259/51 Retirement, pensions, and depressive symptoms among older adults in China, England, Mexico, and the United States; by Peiyi Lu, Mack Shelley.

The International Journal of Aging and Human Development vol 92 no 1, January 2021, pp 40-64.

This study explores the associations of retirement, and of public and private pensions, with older adults' depressive symptoms by comparing differences between countries and age groups. Harmonized data were analysed from the family of Health and Retirement Study in 2012-2013 from China, England, Mexico, and the United States (n = 97,978). Respondents were asked if they were retired and received public or private pensions. Depressive symptom was measured by the Center for Epidemiologic Studies Depression Scale. Retirement was significantly associated with higher depressive symptoms for the United States and with lower depressive symptoms for Mexico and England. Public pension was significantly associated with lower depressive symptoms for Mexico and with higher depressive symptoms for the United States and China. Private pension was significantly associated with lower depressive symptoms for the United States, China, and England. Our study shows that continuity theory demonstrates cross-national variation in explaining the association between retirement and depressive symptoms.

From : <https://doi.org/10.1177%2F0091415019868227>

259/52 Social frailty and depression among older adults in Ghana: insights from the WHO SAGE surveys; by Prince M Amegbor, Vincent Z Kuuire, Alfred E Yawson, Mark W Rosenberg, Clive E Sabel.: Sage. Research on Aging, vol 43, no 2, February 2021, pp 85-95.

This study examines the association between social frailty and depression among older adults in Ghana over time. It employs longitudinal data analysis to examine the association between social frailty, socioeconomic status and depression using data from the WHO-SAGE survey. Descriptive and cross-tabulation analyses show that the prevalence of depression and social frailty among older adults decreased considerably in 2014/2015 compared to 2007/2008. The finding also reveals a huge reduction in social frailty among older adults in northern Ghana-the most deprived regions in Ghana-compared to those in southern Ghana. The multivariate panel data analysis reveals that depression was significantly associated with social isolation, financial needs, and physical needs. The findings suggest an over time decline in social frailty and depression among older adults, as well as, reduction in regional differences in social frailty and depression among older adults in Ghana.

ISSN: 01640275

From : <https://doi.org/10.1177%2F0164027520946447>

LONELINESS AND SOCIAL ISOLATION

(See Also 259/38)

259/53 A collaborative, multi-sectoral approach to implementing a social prescribing initiative to alleviate social isolation and enhance well-being amongst older people; by Emma Killbery Wilkinson, Amanda Lees, Sarah Weekes, Gillian Duncan, Geoffrey Meads, Kit Tapson.: Emerald.

Journal of Integrated Care, vol 29, no 1, 2021, pp 37-47.

In 2019, St Johns Winchester, a CQC-registered charity, launched the Hand in Hand (HiH) Service, a social prescribing (SP) initiative to alleviate social isolation/loneliness amongst older people via integration between primary care and the third sector. Arising from collaborative stakeholder reflection, this article explicates processes instigated to plan, implement and evaluate the HiH service which has been locally recognised as an exemplar of good practice. It aims to fill a gap in the literature which has hitherto lacked contextual description of the drivers, mechanisms and processes of SP schemes, leading to confusion over what constitutes SP and which models can work.

This article defines the context of, drivers for and collaborative process followed to implement and evaluate HiH and reflects on challenges, facilitators and key points for transferable learning. Early evaluation findings are presented.

Key features underpinning the success of the pilot phase were: having clear referral pathways, working collaboratively with health and voluntary sector partners, building relationships based on trust, adherence to high-quality standards and governance, a well-trained team of volunteers and access to up-to-date information source. There remains a disparity between the urgent need for rigorous evaluation data and the resources available to produce it.

ISSN: 14769018

From : <https://doi.org/10.1108/JICA-02-2020-0004>

259/54 Lived realities of lonely older people: resisting idealisations of home; by Alison Jarvis, Andrea Mountain.: Cambridge University Press.

Social Policy and Society, vol 20, no 1, January 2021, pp 1-16.

This article is based on research set up to explore temporal dimensions of loneliness amongst older people in a northern town. As the study progressed, spatial considerations and confinements emerged as a related and equally important feature. The article suggests that the 'social sphere' of lived reality, especially reality lived out in one confined space, is a prime candidate for what has been termed 'de-familiarisation'. Social policy discourses focussed on 'ageing in place' can sometimes neglect the realities of older people's circumstances, daily life and social contact. Central arguments put forward in the article are: that loneliness increases as spatial prospects recede; that 'home' can become a source of frustration and negativity rather than a source of solace and comfort; and that expanding and facilitating the social horizons of older people currently 'confined' to home should be prioritised within a genuinely age-friendly approach to social policy.

ISSN: 14747464

From : <https://doi.org/10.1017/S1474746420000044>

LONG TERM CARE

(See Also 259/42)

259/55 The COVID-19 pandemic and long-term care: what can we learn from the first wave about how to protect care homes?; by Margrieta Langins, Natasha Curry, Klara Lorenz-Dant, Adelina Comas-Herrera, Selina Rajan.: European Observatory on Health Systems and Policies.

Eurohealth, vol 26, no 2, 2020, pp 77-82.

The COVID-19 pandemic has highlighted and exacerbated pre-existing problems in the long-term care sector. Based on examples collected from the COVID-19 Health System Response Monitor (HSRM) and the International Long-term care Policy Network (LTCcovid), this article aims to take stock of what countries have done to support care homes in response to COVID-19. By learning from the measures taken during the first wave, governments and the sector itself have an opportunity to put the sector on a stronger footing from which to strengthen long-term care systems.

ISSN: 13561030

From : <http://www.euro.who.int/en/about-us/partners/observatory/publications/eurohealth>

MENTAL HEALTH

259/56 Treatment outcomes in older adults with hoarding disorder: the impact of self-control, boredom and social support; by Emily R Weiss, Alyssa Landers, McWelling Todman, David M Roane.: Wiley. Australasian Journal on Ageing, vol 39, no 4, December 2020, pp 375-80.

Hoarding disorder in older adults often develops in the context of co-occurring psychosocial maladies, and treatment response tends to be suboptimal. This preliminary investigation explored several ageing-related factors and their relationship to hoarding symptom severity (HSS), and examined treatment response to 15 sessions of cognitive behavioural therapy (CBT) with in-home support.

Twenty-nine participants (Mage = 67) completed self-report questionnaires measuring HSS, self-control, indecisiveness, depression, loneliness, social support and boredom, before (T1) and after (T2) treatment. At T1, HSS was associated marginally with loneliness and significantly with all other variables, except social support. At T2, HSS and depression decreased significantly and only boredom and self-control remained associated with HSS. Attrition rates were high, and those with low social support were more likely to discontinue treatment prematurely.

The study concludes that increasing social support may improve treatment retention, and pre-emptively reducing sources of boredom and increasing self-control during treatment might improve outcomes for older adults with hoarding disorder.

ISSN: 14406381

From : <https://doi.org/10.1111/ajag.12817>

NEIGHBOURHOODS AND COMMUNITIES

(See Also 259/75)

- 259/57 Dementia-friendly neighbourhood and the built environment: A scoping review; by Daniel R Y Gan, Habib Chaudhury, Jim Mann, Andrew V Wister. *The Gerontologist*, February 2021.
According to this study, there has been a proliferation of research on dementia-friendly communities in recent years, particularly on interpersonal and social aspects. Nonetheless, the neighbourhood built environment remains a co-constituent of the lived experience of people living with dementia (PLWD) that is amenable to interventions for health and well-being in the community. This scoping review presents a narrative synthesis of empirical research on dementia-friendly neighbourhoods, with a focus on the built environment and its associated socio-behavioural aspects. Planning and design principles are distilled to identify research and policy implications.
The authors reviewed 29 articles identified through a systematic search of AgeLine, PsycINFO, CINAHL, Global Health, MEDLINE, and Scopus. Peer-reviewed articles that employed quantitative and/or qualitative methods in community settings were included.
The study found an equal number of studies focused on behavioural/psychosocial aspects of the built environment and assessment of specific environmental features. The former often used qualitative methods, whereas statistical methods were common in studies on discrete features of the neighbourhood built environment. Few studies focused on rural contexts. Emerging research areas include interactions between dementia risk factors and neighbourhood environments to support primary and secondary prevention.
The authors suggest that the body of literature needs expansion into planning and design fields to foster community participation of PLWD by optimizing environmental stimuli, minimizing environmental barriers, and engaging PLWD in dementia-friendly community initiatives. While evidence has accumulated on landmarks and social participation at the individual level, research at the community- and policy- levels are limited. This requires advanced mixed methods.
From : <https://doi.org/10.1093/geront/gnab019>
- 259/58 Impact of public seating design on mobility and independence of older adults; by Robyn L Coman, Carlo D Caponecchia, Vinod Gopaldasani. *Experimental Aging Research*, Online, February 2021.
Mobility and independence of older adults are influenced by age-related capabilities and limitations, as well as environmental factors such as non-optimum design of public seating (e.g., inappropriate seat height, angle, and compressibility as well as armrests). This study was the first part of a multi-stage investigation of the impact of public seating on older adults. One hundred and six older adults (aged 65 and over) completed an online survey regarding difficulties experienced with standing up from public seating (e.g. frequency; location; type of seating; effects).
A majority (59.4%) reported experiencing problems, with seat height the most common issue. Shopping malls, cafes and restaurants, doctor's offices, outdoor locations, and public toilets were the most common locations. Effects included inconvenience, embarrassment, discomfort, pain, and needing help from another person to stand. The authors argue that further research is needed to explore the locations and features of seating that can contribute to this problem.
From : <https://doi.org/10.1080/0361073X.2021.1884445>
- 259/59 Older people, town centres and the revival of the 'high street'; by Judith Phillips, Nigel Walford, Ann Hockey, Leigh Sparks. *Planning Theory & Practice*, Online, February 2021.
Concern for the future of town centres and their retail cores, the 'high street', is not new. Responses to this have often been somewhat one dimensional, focusing on their role as places of consumption, employment, leisure and heritage. This article considers the potential multiple roles of older people in helping revive and rejuvenate town centres given the centrality of place for healthy supportive living, community and social participation and 'ageing in place'. Taking an environmental gerontology perspective, the authors ask whether the WHO age friendly cities/communities' framework should be considered further in approaches to reviving town centres in a post-Covid-19 world.
From : <https://doi.org/10.1080/14649357.2021.1875030>

ORAL HEALTH

- 259/60 Adapting new strategies in dental care to help geriatric and special needs patients during COVID-19 pandemic; by Madhura Sen (et al.): Emerald.
Quality in Ageing and Older Adults, vol 21, no 4, 2020, pp 241-245.
This paper aims to discuss and urge further deliberation on possible strategies to help geriatric and special needs patients to receive dental care during the pandemic.
This paper includes a literature review of published research articles related to past epidemics, COVID-19 and older persons.
Accurate prediction of adverse outcomes, detection of unidentified problems, improved estimation of

residual life expectancy and appropriate use of geriatric interventions is required to understand the necessity of the treatment and effect of possible COVID-19 contraction during the treatment.

The authors reviewed the published literature and collated the lessons learnt from past epidemics, as the natural history of the COVID-19 is, as yet, not known.

Future dentists must be trained in crisis management to deal with pandemics more effectively. The dental fraternity should be equipped to provide some sort of 'psychological counseling and reassurance' prior to dental care to vulnerable individuals with comorbidities and special needs.

ISSN: 14717794

From : <https://doi.org/10.1108/QAOA-09-2020-0045>

PENSIONS AND BENEFITS

(See Also 259/51)

259/61 Gender and proposed Auto-enrolment in the Republic of Ireland: lessons from the UK; by Liam Foster, Dinali Wijeratne, Emer Mulligan.: Wiley.

Social Policy and Administration, vol 55, no 1, January 2021, pp 143-156.

The introduction of 'soft' compulsion in the form of Auto-enrolment into non-state pensions has been seen as a key policy response to the challenges presented by an ageing population and concerns about under-saving for retirement in the UK. Since its introduction in 2012, amongst eligible employees in the private sector, pension participation had risen by over 31 percentage points to 73% of eligible employees in 2016. Despite these trends, Auto-enrolment in the UK has not been without criticism, particularly in terms of its exclusion of certain groups, including carers, amongst whom females are over-represented. The Republic of Ireland (ROI) has recently announced its intention to implement an Auto-enrolment pension scheme. As such, this article examines the UK's experience of rolling out Auto-enrolment policy and considers lessons that could be learned by the ROI from the UK in its pursuit of Auto-enrolment, with a particular focus on women's pensions. Initially it outlines the current Irish pension system, the gendered nature of pensions, and the proposed Auto-enrolment system in ROI. Then it discusses the UK's experience of Auto-enrolment, with a particular focus on gender, before examining the lessons the ROI can learn from the UK's Auto-enrolment policy in relation to women and pensions. Finally, it concludes that Auto-enrolment alone will not resolve the gendered nature of pensions in the ROI and calls for a gender-based assessment of the proposed policy of Auto-enrolment in the ROI.

ISSN: 01445596 From : <https://doi.org/10.1111/spol.12627>

259/62 Understanding default behaviour in workplace pensions: automatic enrolment in the UK; by Lynne Robertson-Rose.: Cambridge University Press.

Journal of Social Policy, vol 50, no 1, January 2021, pp 21-39.

This article examines the retirement savings behaviour of twenty-five 30-40 years olds automatically enrolled into a workplace pension scheme. Using qualitative interviews, the paper explores the interaction between savings motivation and willingness to adhere to, or deviate from, the pension scheme defaults. Integrating insights from different savings paradigms, including sociological approaches and behavioural economics, the paper highlights how social motives drove willingness to accept enrolment defaults. Participants' reactions to the contribution defaults were motivated by a complex combination of factors including anchoring effects, the salience of ageing, and emotional responses such as pride, uncertainty and loss aversion. The author's main premise is that greater attention needs to be given to the interaction between subjective feelings about saving for retirement and pension scheme design.

ISSN: 00472794 From : <https://doi.org/10.1017/S0047279419000813>

PHYSICAL ACTIVITY

259/63 An ongoing physiotherapist-led exercise program in residential aged care: description of participant satisfaction and outcomes; by Katharine Scrivener, Katherine Alava Bravo, Brett Greely, Matthew Heidema, Angeline Violi, Nicholas Young.: Wiley.

Australasian Journal on Ageing, vol 39, no 4, December 2020, pp 359-365.

This study documents aged care residents' outcomes after, and satisfaction with, participation in a rehabilitation program conducted in a co-located gym.

A mixed-method prospective cohort study was conducted. All residents who attended the program were invited to participate in the study. Demographic information and outcome measures (walking speed, mobility, ability to stand, exercise self-efficacy and health status) were documented on study commencement and again after 6 months.

Thirty-eight participants were included with an average age of 83 years (SD 13). The majority of participants (61%) required physical assistance for mobility. Compliance with scheduled sessions was 94%. Most (92%) participants would recommend the program. The majority of participants (55%) experienced improved walking speed as measured by the 5-metre walk test.

The results suggest that a rehabilitative program can maintain the physical status of aged care residents, despite the common decline in physical performance in this population.

ISSN: 14406381 From : <https://doi.org/10.1111/ajag.12804>

- 259/64 What makes community-based physical activity programs for culturally and linguistically diverse older adults effective?: A systematic review; by Jed Montayre, Stephen Neville, Ihaka Dunn, Jagamaya Shrestha-Ranjit, Valerie Wright-St. Clair.: Wiley.
 Australasian Journal on Ageing, vol 39, no 4, December 2020, pp 331-340.
 This integrative review aimed to determine the features of effective physical activity programs for culturally and linguistically diverse (CALD) older adults.
 The authors searched for relevant articles in MEDLINE, PubMed, Google Scholar, Scopus and CINAHL. Articles were selected for evaluation if they included CALD older adults and implemented physical activity programs with culturally specific design features. Consistent with the Whittemore and Knafl integrative review methodology, they used the Downs and Black Checklist, Mixed Methods Appraisal Tool and the McMaster University appraisal tool for quantitative studies to assess the quality of included articles.
 Seven articles were included in this review. Effective community-based exercise or physical activity programs for CALD populations commonly featured close-to-home delivery, native language instruction and adaptations of culturally familiar activities.
 The study concludes that the provision of culturally appropriate community-based physical activity programs appears to support and encourage engagement among CALD older adults.
 ISSN: 14406381
 From : <https://doi.org/10.1111/ajag.12815>

REMINISCENCE

- 259/65 Sports-based reminiscence: improving support for men; by Cara Sass, Claire Surr, Lorena Lozano-Sufrategui.: Investor Publishing.
 Journal of Dementia Care, vol 29, no 2, March/April 2021, pp 28-31.
 Services offering support for social and emotional needs often appeal more to women than to men, but reminiscence groups based on sports appear to be an exception. This article evaluates the impact of Sporting Memories groups on social inclusion and wellbeing among men with dementia.
 Five Sporting memories groups across the north of England took part in the study between January 2018 and February 2019.
 Group participants showed improvements in wellbeing, as confirmed both by the men with dementia themselves and their partners. They were seen to 'light up' and were more communicative and engaged during the activities.
 Although isolated older men might benefit, it was noted that the majority of group members become involved on recommendation from others, and therefore already have established social networks.
 ISSN: 13518372
 From : <http://www.journalofdementiacare.co.uk>

RESEARCH

- 259/66 Building relational research capacity in care homes in the COVID-19 era: applying recognition theory to the research agenda; by Gill Toms (et al.): Emerald.
 Quality in Ageing and Older Adults, vol 21, no 4, 2020, pp 229-239.
 Research can be an influential driver in raising care home standards and the well-being and human rights of residents. This paper aims to present a case for how a relational research capacity building programme could advance this agenda.
 The study uses Axel Honneth's Recognition Theory as a lens through which to explore organisational and institutional factors (such as research capacity and investment) that can either enable or limit 'recognition' in the context of research in care homes. It draws on recent evidence from the COVID-19 pandemic in the UK and worldwide, to argue that such a relational capacity building agenda is even more pressing in the current context, and that it resonates with evidence from existing relational capacity building initiatives.
 A lack of relevant research arguably contributed to the crisis experienced by the care home sector early in the pandemic, and there are only tentative signs that residents, care home providers and staff are now informing the COVID-19 research agenda. Evidence from pre COVID-19 and insights from Honneth's Recognition Theory suggest that relational approaches to building research capacity within the care home sector can better generate evidence to inform practice.
 ISSN: 14717794
 From : <https://doi.org/10.1108/QAOA-09-2020-0042>

RESIDENTIAL AND NURSING HOME CARE

(See Also 259/13, 259/17, 259/42, 259/55, 259/66)

- 259/67 Dying in lockdown; by Tina Wallace.: Emerald.
Working with Older People, vol 24, no 4, 2020, pp 247-256.
Tina Wallace has written a detailed and very personal account of her own day to day experiences, and those of her mother, living and finally dying in a care home, unable to have the normal interactions with friends and family.
"The ties that bind are strong and so important. Losing them can literally be a matter of life and death, which many stories in the UK media attest to. Many families are now left broken hearted, sad and depleted by the manner of the deaths this virus has imposed. This story is about one such journey; the pain is over for my mum, but continuing for us as we find ways to grieve apart."
ISSN: 13663666
From : <https://doi.org/10.1108/WWOP-09-2020-0047>
- 259/68 How strong is the housing assets pillar of funding for residential aged care?; by Anna L Howe.: Wiley.
Australasian Journal on Ageing, vol 39, no 4, December 2020, pp 366-374.
The objective of this study was to explore reasons for the gap between the perception that high home ownership provides a strong pillar of funding for aged care accommodation and the actuality of half of those in residential care having this cost met by the Accommodation Supplement.
A review of data from Australian Bureau of Statistics and administrative sources, and recent research studies was carried out.
The study found that trends in payment methods show continuing reliance on the Accommodation Supplement. Reasons are found in patterns of home ownership at older ages, changes in tenure and living arrangements over the age range, and increasing use of the exchange value of housing assets. Policy tensions arise between protecting access for low means residents and requiring those who are able to pay to do so.
The study concludes that the housing assets pillar at advanced ages is not as strong as early in retirement and makes it increasingly unreliable as a source of funding.
ISSN: 14406381 From : <https://doi.org/10.1111/ajag.12854>
- 259/69 Improving care in care homes: what can Primary Care Networks learn from the Vanguard?; by Anna Coleman, Sarah Croke, Kath Checkland.: Emerald.
Journal of Integrated Care, vol 29, no 1, 2021, pp 85-96.
This study traces the evolution of a new integrated care policy in the English NHS (enhanced health in care homes, EHCH) from pilot model to wider roll out, over a 4-year period, into the circumstances of COVID-19.
Using published evidence and official documentation the authors compare and contrast the original EHCH model/framework, subsequent draft specifications and the final proposals, ahead of implementation.
The Primary Care Network EHCH service specification has clearly arisen from the Vanguard programme; however, problems related to GP contracts and COVID-19 means, at least initially, there is likely to be some variability over who will be responsible for delivery. It is unknown whether this service, delivered at pace in the current circumstances, will achieve or affect the outcomes envisaged by the pilots.
This paper reveals the fragility of health and care policymaking in the current climate. From initial concept, through development and testing, into forced early roll out, our observations reflect the unique impact of a global pandemic shock.
ISSN: 14769018 From : <https://doi.org/10.1108/JICA-06-2020-0037>

RETIREMENT

- 259/70 Does retirement get under the skin and into the head?: Testing the pathway from retirement to cardio-metabolic risk, then to episodic memory; by Katsuya Oi.: Sage.
Research on Aging, vol 43, no 1, January 2021, pp 25-36.
Many studies document significant causal impacts of retirement on cognitive abilities. It remains unclear if cognitive functioning could be hindered in post-retirement due to heightened physiological responses to stress. Using repeated observations of biomarkers, retirement status, and the word-recall test score from the Health and Retirement Study (n = 25,367; 15,343 among women and 10,024 among men), the study tests this pathway, separately for men and women. The study employs the two-stage least squares fixed-effects model that simultaneously fits three equations predicting the total-recall score, cardio-metabolic risk index, and retirement status. Being retired for at least a year decreases cardio-metabolic risk for men and women, and the resulting relief of cardio-metabolic risk improves cognitive functioning for women but not for men. Retirement does not lead to a downward health spiral as previously suggested; rather, it provides a much needed relief from stressors for those who are at health risks.
ISSN: 01640275 From : <https://doi.org/10.1177%2F0164027520941161>

- 259/71 Health- and age-related workplace factors as predictors of preferred, expected, and actual retirement timing: Findings from a Swedish cohort study; by Marta Sousa-Ribeiro, Claudia Bernhard-Oettel, Magnus Sverke, Hugo Westerlund.
International Journal of Environmental Research and Public Health, vol 18, no 5, March 2021, Online.
To address the challenges of demographic aging, governments and organizations encourage extended working lives. This study investigates how individual health- and age-related workplace factors contribute to preferred, expected and actual retirement timing, as well as to the congruency between preferences vs. expectations, and preferences vs. actual retirement. The study uses data from a representative Swedish longitudinal sample comprising 4058 workers aged 50-64, with follow-up data regarding actual retirement timing available for 1164 respondents. Multinomial logistic regression analyses suggest that later preferred, expected, and actual retirement timing were, to different extent, influenced by better health, an age-friendly workplace and feeling positive regarding the future at work. Emotional exhaustion, age-related inequalities at work and experiencing aging as an obstacle increased the likelihood of preferring to retire earlier than one expected to, over retiring at the time one expected to. Those with better health and positive work prospects are less likely to prefer retiring earlier than they expected to, and more likely to being 'pulled toward working until 65 and beyond', compared to being 'pulled toward early retirement'. Experiencing ageing as an obstacle decreases the chances of being 'pulled toward working until 65 and beyond'. The results provide insights on how to facilitate extended working lives.
From : <https://doi.org/10.3390/ijerph18052746>

RURAL ISSUES

(See Also 259/26, 259/32)

- 259/72 The vulnerability and resilience of older people in rural/regional areas in times of climate, environmental and global health challenges; by Matthew Carroll.: Wiley.
Australasian Journal on Ageing, vol 39, no 4, December 2020, pp 325-327.
This invited editorial considers the disproportionate effect COVID-19 has had on older people and the impact in rural areas. While older people may have been disproportionately impacted, older people, may be more psychologically robust, and age alone does not explain vulnerability. Public health messaging may be better targeted at people with health and mobility concerns at any age rather than 'vulnerable older people'.
ISSN: 14406381
From : <https://doi.org/10.1111/ajag.12865>

SENSORY LOSS

(See 259/44)

SOCIAL CARE

(See Also 259/46)

- 259/73 A lost decade?: A renewed case for adult social care reform in England; by Jon Glasby, Yanan Zhang, Matthew R Bennett, Patrick Hall.: Cambridge University Press.
Journal of Social Policy, vol 50, no 2, April 2021, pp 406-437.
Drawing on a 2010 analysis of the reform and costs of adult social care commissioned by Downing Street and the UK Department of Health, this paper sets out projected future costs under different reform scenarios, reviews what happened in practice from 2010-19, explores the impact of the growing gap between need and funding, and explores the relationship between future spending and economic growth. In the process, it identifies a 'lost decade' in which policy makers failed to act on the warnings which they received in 2010, draws attention to the disproportionate impact of cuts on older people (compared to services for people of working age) and calls for urgent action before the current system becomes unsustainable.
ISSN: 00472794
From : <https://doi.org/10.1017/S0047279420000288>
- 259/74 Public spending on adult social care and delayed transfers of care in England; by Jose Iparraguirre.: Emerald.
Quality in Ageing and Older Adults, vol 21, no 3, 2020, pp 155-167.
This paper aims to discover whether current public expenditure on adult social care services might be associated with the number of delayed days of care attributable to the social care system in England. Panel econometric models on data from local authorities with adult social care responsibilities in England between 2013-2014 and 2018-2019 were used.
After controlling for other organisational sources of inefficiency, the level of demand in the area and the income poverty amongst the resident older population, this paper finds that a 4.5% reduction in current

spending per head on adult social care per older person in one year is associated with an increase by 0.01 delayed days per head the following year.
Given the costs of adverse outcomes of delayed transfers of care reported in the literature, this paper suggests that budgetary constraints to adult social care services would represent a false economy of public funds.

ISSN: 14717794

From : <https://doi.org/10.1108/QAOA-11-2019-0066>

SOCIAL NETWORKS

- 259/75 Museums working with older people in times of pandemic; by Rita Gracio.: Emerald.
Working with Older People, vol 24, no 4, 2020, pp 313-319.
The purpose of this paper is to highlight some of the work with/for/about older people being undertaken by museums during the coronavirus disease (COVID-19) pandemic, thinking of museums as caregivers. This paper reviews the responses from museums which work with older adults, in times of pandemic. It reviews how museums have addressed older people during the COVID-19 outbreak in the UK and Portugal. Two Portuguese maritime museums which have older adults as strategic audiences are selected and their Facebook webpage during the lockdown is analysed.
Museums were committed to delivering online the work they have been doing offline, not without limitations. The digital turn in times of pandemic draw attention to inequalities regarding visitors who have access and literacy to engage with the digital museum as well as museums themselves. Unlike in the UK, in the two maritime museums, there were no specific programmes targeting older people - except for COVID-19 messages. However, older adults are presented online as active and as experts on maritime issues, representing empowering versions of ageing, either online or offline.
ISSN: 13663666
From : <https://doi.org/10.1108/WWOP-08-2020-0040>

SOCIAL POLICY AND THEORY

- 259/76 The application of social innovation as it relates to older people and the implications for future policymaking: a scoping review; by Holly Louise Crossen-White, Ann Hemingway, Adele Ladkin.: Emerald.
Quality in Ageing and Older Adults, vol 21, no 3, 2020, pp 143-153.
Social innovation has received increasing attention in recent decades. This study aims to consider how the concept has been applied to the issue of ageing and what can be learnt about effective policy responses.
The acknowledged lack of understanding generally about the concept makes it timely to undertake a scoping review of the current evidence from social innovation projects associated with older people. A scoping review is considered appropriate where there is a need to 'identify and analyse knowledge gaps'. Findings from the scoping review indicate that, as yet, the concept of social innovation is not fully defined. However, it has widespread appeal across a diverse range of disciplines and has the potential to generate innovative policy responses.
A key argument identified is the need to change the public's perceptions of ageing and devise public policies that encourage and nurture age-friendly communities. In summation, although social innovation has the potential to act as a policy driver, but to be effective, it is necessary to devise robust strategies to ensure full user-engagement and active involvement of communities. Therefore, it is the process of delivery that needs urgent attention in any future research into social innovation.
ISSN: 14717794
From : <https://doi.org/10.1108/QAOA-04-2020-0014>
- 259/77 Theorizing eldercare work: an orders of worth analysis; by Arthur Chia.: Taylor and Francis.
Home Health Care Services Quarterly, vol 39, no 2, April-June 2020, pp 107-125.
Eldercare is often regarded as 'dirty work' due to its association with dysfunctional, decaying, and diseased bodies. This paper focuses on eldercare work, and studies how current practices and organization of eldercare have been justified and legitimized in different and sometimes conflicting ways. Drawing on ethnographic fieldwork with workers in nursing homes for the elderly and homecare service, this paper examines eldercare work through the theoretical lens of 'orders of worth.' The concept of orders of worth affords a moral political analysis of eldercare work that helps to explain those dilemmas and situations which eldercare workers encounter and negotiate. Through the analysis, the moral entanglements between individual practices, institutional logics, and the political economy of care labor are systematically revealed.
ISSN: 01621424
From : <https://doi.org/10.1080/01621424.2020.1740130>

STROKE

- 259/78 Dexterity app. therapy versus conventional hand therapy in stroke; by Neha Sawant, Meruna Bose, Shrutika Parab.: Emerald.
Journal of Enabling Technologies, vol 14, no 4, 2020, pp 221-231.
Hand impairment post-stroke is a very common and important rehabilitation goal for functional independence. Advanced therapy options such as an app. therapy provides repetitive training, which may be beneficial for improving fine motor function. This study aims to evaluate the effect of app-based therapy compared to conventional hand therapy in improving dexterity in individuals with stroke. In total, 39 individuals within the first year of stroke with Brunnstrom stage of hand recovery IV to VI were randomly divided into three groups. All three groups received 60 min of therapy for 21 sessions over a period of 30 days. Group A received conventional hand therapy; Group B received app. therapy, while Group C received conventional therapy along with the app. therapy. All participants were assessed on the Nine-Hole Peg Test and Jebsen-Taylor Hand Function Test at the beginning and after completion of 21 sessions of intervention. Kruskal-Wallis (H) test and Wilcoxon test were used for statistical analysis.
All three groups improved on hand function post-treatment. However, Group C demonstrated significant improvement with 16%-58% increase in hand function performance on outcome measures ($p < 0.05$). The findings of the present study demonstrate improvement in dexterity with the app. therapy and combination therapy, in comparison to conventional therapy alone in individuals with stroke.
ISSN: 23986263
From : <https://doi.org/10.1108/JET-05-2020-0023>

TRANSPORT

- 259/79 Travel difficulties and barriers during later life: Evidence from the National Travel Survey in England; by Carlo Luiu, Miles Tight.
Journal of Transport Geography, vol 91, February 2021.
Using data from the National Travel Survey in England, this study investigates which factors lead to experiencing travel difficulties amongst people aged 60 years old and above. The ability to be mobile is one of the key factors enabling older people to maintain their wellbeing and independence while ageing. Given the shift towards an ageing population that our society is experiencing, providing an age-friendly transportation environment becomes necessary to allow older people to be able to fulfil their travel needs and keep involved in societal participation. By employing a conceptual framework based on five interrelated domains shaping mobility during later life, this paper explores older people's difficulties in accessing transport resources, mode usage and undertaking out-of-home activities. Poor health and wellbeing conditions, lack of access to transport resources and gender are identified as the main predictors to experiencing travel difficulties in later life, while activities more affected in this sense are medical appointments, visiting family or friends and social ones. The findings have implications for policies, planning and interventions targeting age-friendly and inclusive transport and environment and show the need to move beyond the transport domain and employ a more holistic and intersectionality-based approach to understand what affects and shapes mobility in later life.
From : <https://doi.org/10.1016/j.jtrangeo.2021.102973>

VOLUNTEERING AND THE VOLUNTARY SECTOR

- 259/80 Pandemic policy making: the health and wellbeing effects of the cessation of volunteering on older adults during the COVID-19 pandemic; by Jurgen Grotz, Sally Dyson, Linda Birt.: Emerald.
Quality in Ageing and Older Adults, vol 21, no 4, 2020, pp 261-269.
This policy-orientated commentary aims to provide a perspective on the effects of policy changes designed to reduce the risk of infection as a result of COVID-19. The example of the abrupt cessation of volunteering activities is used to consider the policy and practice implications that need to be acknowledged in new public service research to deal with the on-going implications of the COVID-19 pandemic and for future preparedness.
The paper combines existing knowledge volunteering of and for older adults with early pandemic practice evidence to situate an emerging health and wellbeing crisis for older adults. It emphasises the importance of immediate further detailed research to provide evidence for policy and practice following the lifting of COVID-19 related restrictions and in preparation for future crises.
The paper aims to provide a critical challenge to English pandemic health policy making, in particular, the national instruction 'to stop non-essential contact with others' without a strategy on how to remedy the serious side effects of this instruction, in particular on older adults.
It finds that the abrupt cessation of volunteering activities of and for older people because of the COVID-19 pandemic is highly likely to have negative health and wellbeing effects on older adults with long-term and far-reaching policy implications.
ISSN: 14717794
From : <https://doi.org/10.1108/QAOA-07-2020-0032>

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