

# New Literature on Old Age

EDITOR

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## **ABUSE, SAFEGUARDING AND PROTECTION**

(See Also 260/18)

- 260/1 Comparing older adult and child protection policy in the United States of America; by Peiyi Lu, Mack Shelley.: Cambridge University Press.  
Ageing and Society, vol 41, no 2, February 2021, pp 273-293.  
Compared with policy related to child abuse, older adult protection policy developed later and made slower progress in the United States of America. Few studies have addressed older adult protection policy. This paper compares the two policies and provides implications about how to improve older adult protection policy by emulating child protection policy. The Dimensions of Choice Framework was utilised to illuminate the differences between child protection and older adult protection policies (i.e. allocation, provisions, delivery and finance), while Advocacy Coalition Framework theory was used to explain why these differences exist (i.e. the contentions between ally and opposite coalitions). The Dimensions of Choice Framework refined the descriptive comparison of the two policies while the Advocacy Coalition Framework unfolded the efforts and struggles between advocacy coalitions that result in policy changes; and the conceptual combination further provides a cross-disciplinary link between social work and public policy studies. Findings indicated that, compared to child protection policy, older adult protection policy lacked federal legislative and administrative direction, well-developed diagnosis and evaluation tools, a national data system, sufficient federal funds and a comprehensive response mechanism. This was the case because older adult protection advocates presented a more controversial argument regarding the role of government intervention in protecting victims while respecting individual autonomy, lower public and government awareness, and weaker efforts from ally coalitions.  
ISSN: 0144686X  
From : <https://doi.org/10.1017/S0144686X19000990>
- 260/2 Reducing preventable harm to residents in aged care: a systems approach; by Peter D Hibbert, Robyn Clay-Williams, Johanna Westbrook, Richard L Reed, Andrew Georgiou, Louise K Wiles, Charlotte J Molloy, Jeffrey Braithwaite.: Wiley.  
Australasian Journal on Ageing, vol 40, no 1, March 2021, pp 72-76.  
Residents in Australian aged care facilities can suffer serious preventable harm from incidents ('adverse events' (AEs)). An inadequate response to AEs by aged care facilities can compound distress to residents and their families/carers. Facilities have an obligation to respond to and investigate AEs involving residents, learn from them, and take action to reduce the chance of them reoccurring. Residential aged care facilities have a duty to create a culture where staff, residents and families/carers feel comfortable reporting AEs or complaints; there is adequate time and resources to manage AEs and complaints; and feedback is provided to staff, residents and their families/carers on the results of investigations into AEs/complaints. The Aged Care Quality and Safety Commission's role should encompass additional governance functions such as sharing results and lessons learnt from AEs, complaints and investigations across Australia, assuring the quality of investigations conducted by facilities, and undertaking national system-wide investigations.  
ISSN: 14406381  
From : <https://doi.org/10.1111/ajag.12861>

## **AGEING IN PLACE**

(See 260/8, 260/70)

## **ARTS, CRAFT AND MUSIC**

- 260/3 Evaluation of the 'Unforgettable' art programme by people with dementia and their care-givers; by Iris Hendriks, Franka J M Meiland, Debby L Gerritsen, Rose-Marie Dröes.: Cambridge University Press.  
Ageing and Society, vol 41, no 2, February 2021, pp 294-312.  
Art programmes have been shown to contribute to the quality of life of people with dementia. To understand how people with dementia benefit from art programmes it is important to evaluate them. 'Unforgettable' is an interactive museum programme for people with dementia and their care-givers in the Netherlands. This study examined how it is experienced and appreciated by its users. It also investigated whether the user experience and appreciation are linked to their specific background characteristics. In a single-group design, we used a 'take-home' survey to collect the participants' background characteristics and their experience and appreciation of the programme. A before and after intervention measurement took place, using a smiley face scale, to measure the change in mood of participants. Participants evaluated the programme very positively. Social interaction proved a key factor in their appreciation. The mood of the persons with dementia (N = 95) and care-givers (N = 104) improved after participation in the 'Unforgettable' programme. The results of this evaluation may contribute to the quality of art programmes in museums.  
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From : <https://doi.org/10.1017/S0144686X19001089>

## ATTITUDES TO AGEING

(See Also 260/12)

- 260/4 Ageing, old age and older adults: a social media analysis of dominant topics and discourses; by Meiko Makita, Amalia Mas-Bleda, Emma Stuart, Mike Thelwall.: Cambridge University Press.  
Ageing and Society, vol 41, no 2, February 2021, pp 247-272.  
Whilst representations of old age and older people in traditional media have been well documented, examinations of such representations within social media discourse are still scarce. This is an unfortunate omission because of the importance of social media for communication in contemporary society. In this study, we combine content analysis and discourse analysis to explore patterns of representation on Twitter around the terms ageing, old age, older people and elderly with a sample of 1,200 tweets. Our analysis shows that 'personal concerns/views' and 'health and social care' are the predominant overall topics, although some topics are clearly linked with specific keywords. The language often used in the tweets seems to reinforce negative discourses of age and ageing that locate older adults as a disempowered, vulnerable and homogeneous group; old age is deemed a problem and ageing is considered something that needs to be resisted, slowed or disguised. These topics and discursive patterns are indeed similar to those found in empirical studies of social perceptions and traditional media portrayal of old age, which indicates that social media and Twitter in particular appears to serve as an online platform that reproduces and reinforces existing ageist discourses in traditional media that feed into social perceptions of ageing and older people.  
ISSN: 0144686X  
From : <https://doi.org/10.1017/S0144686X19001016>
- 260/5 Battles and breakthroughs: representations of dementia in the British press; by Annika Bailey, Tom Denning, Kevin Harvey.: Cambridge University Press.  
Ageing and Society, vol 41, no 2, February 2021, pp 362-376.  
Media coverage of dementia can influence public and professional attitudes towards the syndrome, shaping societal knowledge of dementia and impacting how people with dementia are cared for. This paper reports on a study of news articles about dementia published in the British press in the years 2012-2017. The analysis combines the tools of corpus linguistics, a methodology for quantitatively surveying a vast amount of electronic linguistic data, with the qualitative perspectives of Critical Discourse Analysis, which seeks to uncover dominant discourses and ideologies. The most salient discourse that emerged from this analysis was the portrayal of dementia in biomedical terms, with a particular focus on the pathological processes of dementia, and pharmaceutical treatments and research. Keywords relating to this discourse are interrogated in detail, illuminating the linguistic strategies through which the pathology of dementia and people with dementia are depicted. This study highlights the challenges that this type of reporting presents to people living with dementia and their families, and points to the relevance of a discursive approach to understanding societal perceptions of dementia.  
ISSN: 0144686X  
From : <https://doi.org/10.1017/S0144686X19001120>
- 260/6 Chronological quarantine and ageism: COVID-19 and gerontology's relationship with age categorisation; by James Rupert Fletcher.: Cambridge University Press.  
Ageing and Society, vol 41, no 3, March 2021, pp 479-492.  
In March 2020, the government of the United Kingdom advised all people aged 70 and above to self-isolate stringently for a minimum of 12 weeks in response to COVID-19. The British Society of Gerontology criticised the government for ignoring individual differences, deeming the approach ageist. Former British Geriatrics Society president David Oliver contested accusations of ageism, arguing that the approach was pragmatic discrimination based on epidemiological evidence. This debate catalyses core gerontological tensions regarding ageism, discrimination, categorisation and heterogeneity. A critical realist perspective reveals that both the government and gerontology are struggling to negotiate these irresolvable tensions. Contrary to the binary debate, age-based isolation simultaneously represents pragmatic discrimination and value-driven ageism. However, it does so partly because it relies on a chronologic epistemology that positions age as a potent biosocial axis of meaningful difference, thereby reflecting gerontology's own ageism. The ethical purism of gerontological accusations of ageism is thus somewhat misplaced, potentially obscuring an opportunity for reflection on value-laden engagements with age in social research.  
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From : <https://doi.org/10.1017/S0144686X20001324>

## BLACK AND MINORITY ETHNIC GROUPS

(See Also 260/72)

- 260/7 Holocaust survivors' perspectives on using community aged care and support services; by Karen Teshuva, Allan Borowski, Yvonne Wells.: Cambridge University Press.  
Ageing and Society, vol 41, no 2, February 2021, pp 231-246.  
The extant literature on Jewish Holocaust survivors' experiences of receiving aged care services typically focuses on the risk that formal care settings may reactivate traumatic memories. Absent from previous research have been the viewpoints of older survivors themselves regarding their aged care experiences. An interpretive phenomenological approach was used to investigate Jewish Holocaust survivors' lived experience of using community aged care services. Thirteen in-depth interviews were conducted and analysed using thematic analysis. The credibility of the findings was ensured by methodological triangulation and peer debriefing. Four major themes emerged from the analysis: wanting carers to do their job well; being supported to maintain autonomy; having a good relationship with the carer; and being understood as an individual. Although Holocaust survivors described the lived experience of using community aged care services in terms of universal themes similar to those identified with other groups of care recipients, the data revealed that this experience is intertwined with individual earlier-life traumatic experiences. This study has implications for training age care staff who work with Holocaust survivors and older trauma survivors from other refugee backgrounds.  
ISSN: 0144686X  
From : <https://doi.org/10.1017/S0144686X1900093X>
- 260/8 The lived experience of older low-income African Americans living alone: implications for aging in place in the United States; by Otis L Owens, Jenay M Beer, Asa A Revels, Kellee White.: Taylor and Francis.  
Journal of Aging and Environment, vol 35, no 1, January-March 2021, pp 42-61.  
The numbers of older low-income African Americans (AAs) is increasing. However, there is a lack of research on the challenges to aging-in place faced by this population. The goal of this research was to document the lived experiences among older low-income AAs who live alone. Twelve participants were provided with surveys, engaged in video diary recording, and participated in in-depth follow-up interviews. Failing health was the most limiting factor for aging-in-place. Participants' strategies for overcoming associated barriers included self-help and aid from informal caregivers. Findings can inform the development of interventions to support aging-in-place for older AAs and their caregivers.  
ISSN: 26892618  
From : <https://doi.org/10.1080/26892618.2020.1780662>

## CARERS AND CARING

(See Also 260/83)

- 260/9 'When it faded in her ... it faded in me': a qualitative study exploring the impact of care-giving on the experience of spousal intimacy for older male care-givers; by Anne Fee, Sonja McIlfatrick, Assumpta Ryan.: Cambridge University Press.  
Ageing and Society, vol 41, no 1, January 2021, pp. 29-50.  
Older male care-givers play an increasingly important role in informal care-giving, yet they have received little attention in the literature. The aim of this study was to explore the impact of care-giving on the experience of spousal intimacy for older male care-givers. Twenty-four older male care-givers, drawn from a region of the United Kingdom, participated in one-to-one interviews about their care-giving role. Thematic analysis was used to analyse data, and the study was underpinned by theories of masculinity. Three main themes were identified: (a) 'Impact of care-giving on the experience of sexual intimacy'; (b) 'Impact of care-giving on the experience of emotional intimacy'; and (c) 'Not up for discussion'. When sexual intimacy declined, some older male care-givers prioritised emotional intimacy; some struggled with the decline; and some were reluctant to discuss the issue. Additionally, some care-givers reported that they had not received support from external support providers for declining sexual or emotional intimacy. Intimacy has been highlighted as important for care-givers given its link with care-giver wellbeing and quality of life. Results of this study suggest that sexual and emotional intimacy was an issue for older male care-givers, and that this issue should be considered by external support providers as part of a holistic assessment of need in order to tailor effective support.  
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From : <https://doi.org/10.1017/S0144686X19000850>

## COMMUNITY CARE

(See Also 260/31)

- 260/10 The impact of COVID-19 on the quality of life of older adults receiving community-based aged care; by Joyce Siette, Laura Dodds, Karla Seaman, Viviana Wuthrich, Carly Johnco, Joanne Earl, Piers Dawes, Johanna I Westbrook.: Wiley.  
Australasian Journal on Ageing, vol 40, no 1, March 2021, pp 84-89.  
The purpose of this study was to investigate the impact of the COVID-19 pandemic on the quality of life and social networks of older adults receiving community care services.  
Quality of life and social network questionnaires were completed by older adults (n = 21) receiving home care services at three time points (2018, 2019, and during the first Australian COVID-19 lockdown in 2020). Additional questions about technology use were included in 2020.  
Older adults' quality of life significantly decreased during the pandemic compared to the prior year. During the pandemic, over 80% used technology to maintain contact with family and friends, and social networks did not change.  
Government messages and support initiatives directed towards technology adoption among older adults receiving home care may assist with maintaining social connection during COVID-19. Our findings add to the relatively limited understanding of the impact of the COVID-19 pandemic on the socio-emotional well-being of older people.  
ISSN: 14406381  
From : <https://doi.org/10.1111/ajag.12924>

## COVID-19

(See Also 260/6, 260/10)

- 260/11 Developing a clinical screening tool for identifying COVID-19 infection in older people dwelling in residential aged care services; by Kavitha Gnanasambantham, Georgia Aitken, Brett Morris, Jessica Simionato, Eu-Hua Chua, Joseph E Ibrahim.: Wiley.  
Australasian Journal on Ageing, vol 40, no 1, March 2021, pp 48-57.  
The intention of this study was to develop and conduct preliminary feasibility testing of a clinical screening instrument for early identification of COVID-19 infection in older people residing in residential aged care services (RACS).  
A qualitative study was conducted using a multi-modal approach involving examination of existing literature and national guidelines for COVID-19 clinical screening, formulation of a discussion document with peer review and feasibility testing of a prototype screening tool.  
Existing COVID-19 clinical screening tools do not consider age-related impacts on clinical presentation. The qualitative analysis identified the important clinical elements to include were a lower threshold for temperature, occurrence of a recent fall and change in functional status. The new elements also had to be simple and feasible to implement. Overall feedback was positive with all participants recommending the use of the new tool.  
A new screening tool for RACS residents was developed addressing the pathophysiological changes with ageing and atypical features of COVID-19 infection.  
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From : <https://doi.org/10.1111/ajag.12884>

## DAY CARE

(See 260/14)

## DEMENCIA

(See Also 260/3, 260/5, 260/69)

- 260/12 Age differences in attitudes about older adults with dementia; by Christie Newton, Thomas Hadjistavropoulos, Natasha L Gallant, Ying C MacNab.: Cambridge University Press.  
Ageing and Society, vol 41, no 1, January 2021, pp 121-136.  
Dementia, a term that describes a variety of brain conditions marked by gradual, persistent and progressive cognitive decline, affects a significant proportion of older adults. Older adults with dementia are sometimes perceived less favourably than those without dementia. Furthermore, compared to persons without dementia, those with dementia are often perceived by others as having reduced personhood. This study was aimed at investigating whether differences in attitudes towards dementia and personhood perceptions vary as a function of age group, care-giver status, attitudes towards ageing, dementia knowledge, gender and education. In total 196 younger, middle-aged and older adults were recruited. Findings revealed that being a care-giver as well as having less ageist attitudes were predictive of being more comfortable around persons with dementia, having more knowledge about dementia and ascribing

greater personhood to people with dementia. Those with more dementia knowledge (prior to the study) were less comfortable around people with dementia. Finally, when controlling this prior dementia knowledge, older adults were more comfortable around people with dementia compared to younger and middle-aged adults. Gender and education were not associated with any of the variables under study. Findings contribute to a better understanding of the role of age- and care-giver-related factors in the determination of attitudes towards dementia.

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From : <https://doi.org/10.1017/S0144686X19000965>

- 260/13 Social inclusion of people with dementia: an integrative review of theoretical frameworks, methods and findings in empirical studies; by Christiane Pinkert, Kerstin Köhler, Milena von Kutzleben, Iris Hochgräber, Christoph Cavazzini, Silke Völz, Rebecca Palm, Bernhard Holle.: Cambridge University Press.

*Ageing and Society*, vol 41, no 4, April 2021, pp 773-793.

The social inclusion of people with dementia (PwD) is recognised as a global goal of legislation, societal initiatives and service provision. Ensuring the social inclusion of PwD in these areas implies that its dimensions and domains are clear and unambiguous. However, the concept of social inclusion as it is currently used by researchers and practitioners is often vague or acts as a container concept for a variety of different approaches. This paper reports on an integrative review that analysed qualitative and quantitative studies on social inclusion and exclusion of PwD. It focused not only on the empirical results of the included studies but also on the theoretical embedding and methodological approaches to the concept of social inclusion and exclusion. We find that empirical studies on the social inclusion of PwD are scarce and largely characterised by a lack of or inconsistent conceptualisation. Against this background, the operationalisation of the concept and the assessment of the individual aspects of social inclusion with standardised instruments seem to be premature. Substantial theoretical and methodological work is needed to guide research on the social inclusion of PwD. The empirical results show that relationships with other people and being integrated into social networks are essential aspects of social inclusion. Likewise, the strategies and attitudes of caring persons can help to create or reinforce exclusion.

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## DEMENTIA CARE

(See Also 260/3, 260/71)

- 260/14 'I want to make myself useful': the value of nature-based adult day services in urban areas for people with dementia and their family carers; by Simone R. de Bruin, Yvette Buist, Jan Hassink, Lenneke Vaandrager.: Cambridge University Press.

*Ageing and Society*, vol 41, no 3, March 2021, pp 582-604.

Nature-based adult day services (ADSs) in urban areas are relatively new services in the Netherlands. Since knowledge about these services is still scarce, this study aimed to elucidate their value for people with dementia and their family carers in terms of health and wellbeing. We interviewed 39 people with dementia attending nature-based ADSs in urban areas and their family carers, and 17 providers of these services. Respondents indicated that nature-based ADSs in urban areas positively affected the health and wellbeing of people with dementia. According to them, these services support contact with nature and animals, activity engagement, physical activity, structure, social interactions, healthy eating, a sense of meaning in life and a focus on normal daily life. Respondents further indicated that these services stimulate respite, reassurance and maintenance of family carers' own activities and social contacts. We conclude that nature-based ADSs in urban areas have a wide range of benefits that might affect the health and wellbeing of people with dementia and their family carers. Worldwide, demand is growing for innovative practices in dementia care. It is therefore worthwhile monitoring the development of dementia care innovations, such as nature-based ADSs, and for countries to exchange lessons learned from these services.

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From : <https://doi.org/10.1017/S0144686X19001168>

- 260/15 'It's our pleasure, we count cars here': an exploration of the 'neighbourhood-based connections' for people living alone with dementia; by Elzana Odzakovic, Agneta Kullberg, Ingrid Hellström, Andrew Clark, Sarah Campbell, Kainde Manji, Kirstein Rummery, John Keady, Richard Ward.: Cambridge University Press.

*Ageing and Society*, vol 41, no 3, March 2021, pp 645-670.

The extent of social isolation experienced by people living with dementia who reside in the community has been well acknowledged, yet little is known about how people living alone with dementia maintain neighbourhood-based connections. The purpose of this study is to examine the experiences of people with dementia who live alone, focusing upon how they establish social networks and relationships in a neighbourhood context, and how they are supported to maintain this social context within everyday

life. Multiple data collection methods were used including, semi-structured interviews, walking interviews, guided home tours and social network mapping, which were conducted with 14 community-dwelling people living alone with dementia (11 women and three men) situated across the three international study sites in England, Scotland and Sweden. Data were analysed using thematic analysis. The analysis revealed four main themes: (a) making the effort to stay connected; (b) befriending by organisations and facilitated friendships; (c) the quiet neighbourhood atmosphere; and (d) changing social connections. The analysis suggests that people with dementia who live alone were active agents who took control to find and maintain relationships and social networks in the neighbourhood. Our findings indicate the need to raise awareness about this specific group in both policy and practice, and to find creative ways to help people connect through everyday activities and by spontaneous encounters in the neighbourhood.

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From : <https://doi.org/10.1017/S0144686X19001259>

- 260/16 Carers' experiences of timely access to and use of dementia care services in eight European countries; by Hannah Jelley, Liselot Kerpershoek, Frans Verhey, Claire Wolfs, Marjolein de Vugt, Anja Bieber, Astrid Stephan, Gabriele Meyer, Mona Michelet, Geir Selbaek, Britt-Marie Sjölund, Anders Sköldunger, Louise Hopper, Kate Irving, Maria Marques, Maria Conceição Balsinha, Manuel Gonçalves-Pereira, Daniel Michael Portolani, Orazio Zanetti, Bob Woods, the Actifcare Consortium.: Cambridge University Press.

Ageing and Society, vol 41, no 2, February 2021, pp 403-420.

Timely access to care services is crucial to support people with dementia and their family carers to live well. Carers of people with dementia (N = 390), recruited from eight countries, completed semi-structured interviews about their experiences of either accessing or not using formal care services over a 12-month period in the Access to Timely Formal Care (Actifcare) study. Participant responses were summarised using content analysis, categorised into clusters and frequencies were calculated. Less than half of the participants (42.3%) reported service use. Of those using services, 72.8 per cent reported timely access and of those not using services 67.2 per cent were satisfied with this situation. However, substantial minorities either reported access at the wrong time (27.2%), or feeling dissatisfied or mixed feelings about not accessing services (32.8%). Reasons for not using services included use not necessary yet, the carer provided support or refusal. Reasons given for using services included changes in the condition of the person with dementia, the service's ability to meet individual needs, not coping or the opportunity to access services arose. Facilitators and barriers to service use included whether participants experienced supportive professionals, the speed of the process, whether the general practitioner was helpful, participant's own proactive attitude and the quality of information received. To achieve timely support, simplified pathways to use of formal care services are needed.

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From : <https://doi.org/10.1017/S0144686X19001119>

- 260/17 An exploration of the experiences of informal carers supporting a relative living with dementia during and after the move to technology-enriched supported accommodation; by Janeet Rondon-Sulbaran, Jean Daly-Lynn, Brendan McCormack, Assumpta Ryan, Suzanne Martin.: Cambridge University Press.

Ageing and Society, vol 41, no 1, January 2021, pp 1-28.

The aim of this study was to explore the experiences of family carers supporting a relative living with dementia during and after the move to technology-enriched supported accommodation (TESA). The paper explores the informal carers (ICs) roles, the factors prompting the move to TESA, alongside their perceptions of their relatives' experience of the move and of life in a technology-enriched environment. Within a qualitative study 25 semi-structured interviews were conducted with ICs and data were analysed following a thematic approach. Four themes were identified, reflecting the shift in roles and identity of both ICs and persons living with dementia. The move to TESA was linked to a perceived reduction in care-giving pressures, with positive outcomes reported for both the ICs and the people living with dementia. Smart home technologies in the facilities did not appear to impact on the decision-making during transition, however, they were valued as part of the lived experience for the people living with dementia within the TESA facilities. These findings are relevant to policy makers, commissioners and providers of services to highlight the engagement of all stakeholders in the provision of care for people living with dementia and their families early from diagnosis in order to facilitate person-centred practices in community settings.

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From : <https://doi.org/10.1017/S0144686X19001028>

- 260/18 The securitisation of dementia: socialities of securitisation on secure dementia care units; by Megan E Graham.: Cambridge University Press.

Ageing and Society, vol 41, no 2, February 2021, pp 439-455.

Nearly 50 million people around the world live with dementia, with statistics predicting a steady increase in prevalence for the foreseeable future. There is a need for comprehensive and compassionate dementia care. Long-term care homes have built special care units for people living with middle- to late-stage dementia. Among other services, these care units often use innovative security technologies that monitor

and curtail movement beyond unit exit doors. As care-givers and technology developers grapple with the ethical dilemma of autonomy and risk management, researchers are beginning to investigate the social impact of these security technologies. The present research contributes to this line of inquiry. Fieldwork was carried out on two secure long-term care units for people living with dementia. Ethnographic accounts will illustrate how security technology creates socialities of securitisation on a secure dementia unit. Using securitisation theory, The study will argue that dementia has been redefined, shifting it from a health issue to a security issue. The discursive construction of dementia as a security issue will be considered in terms of the co-constructed notions of vulnerability, risk, security threat and security challenge with respect to people living with dementia. The paper investigates how securitisation influences the ethics of dementia care.

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From : <https://doi.org/10.1017/S0144686X19001247>

## DEMOGRAPHY AND THE DEMOGRAPHICS OF AGEING

(See 260/56)

### DEPRESSION

- 260/19 Decomposing the effects of childhood adversity on later-life depression among Europeans: a comparative analysis by gender; by Georgia Verropoulou, Eleni Serafetinidou, Cleon Tsimbos.: Cambridge University Press.

*Ageing and Society*, vol 41, no 1, January 2021, pp 158-186.

The aims of the present study are twofold: first, to examine the importance of socio-economic disadvantage, adverse experiences and poor health in childhood on later-life depression by sex and, second, to discern the direct and indirect effects of childhood circumstances using a decomposition technique. Data are derived from Waves 2 and 3 of the Survey of Health, Ageing and Retirement in Europe (SHARE). The methods involve use of logistic regression models and a decomposition approach. The findings indicate that childhood socio-economic status (SES) for both genders and cognitive function for men have only a significant direct effect, consistent with the critical period model. Childhood health for men and poor parental mental health for women are nearly fully mediated by adulthood and later-life circumstances, a fact in line with the pathway model. Poor childhood health, parental excessive alcohol consumption and cognitive function for women and adverse experiences for men have both significant direct and indirect effects, consistent with both models. Mediating factors include poor adulthood and later-life health, socio-economic adversity and stress; adulthood and later-life SES mediate early life health and adverse experiences more strongly for men, whereas stress seems to mediate early life adverse experiences to a greater extent among women. Intervening policies should address childhood adversity while considering the differential vulnerability of men and women.

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From : <https://doi.org/10.1017/S0144686X19000977>

- 260/20 A model-driven approach to better identify older people at risk of depression; by Chiara Gennaro, Omar Paccagnella, Paola Zaninotto.: Cambridge University Press.

*Ageing and Society*, vol 41, no 2, February 2021, pp 339-361.

Depression in later life is one of the most common mental disorders. Several instruments have been developed to detect the presence or the absence of certain symptoms or emotional disorders, based on cut-off points. However, the use of a cut-off does not allow identification of depression sub-types or distinguish between mild and severe depression. As a result, depression may be under- or over-diagnosed in older people. This paper aims to apply a model-driven approach to classify individuals into distinct sub-groups, based on different combinations of depressive and emotional conditions. This approach is based on two distinct statistical solutions: first, a latent class analysis is applied to the items collected by the depression scale and, according to the final model, the probability of belonging to each class is calculated for every individual. Second, a factor analysis of these classes is performed to obtain a reduced number of clusters for easy interpretation. We use data collected through the EURO-D scale in a large sample of older individuals, participants of the sixth wave of the Survey of Health, Ageing and Retirement in Europe. We show that by using such a model-based approach it is possible to classify individuals in a more accurate way than the simple dichotomisation 'depressed' versus 'non-depressed'.

ISSN: 0144686X

From : <https://doi.org/10.1017/S0144686X19001077>

## DIET AND NUTRITION

- 260/21 Bad enough to cook for two, worse for one: mixed method evaluation of eating behavior among community dwelling older adults; by Kerri Lynn Knippen, HeeSoon Lee, Tasha Ford, Philip Welch.: Taylor and Francis.  
Journal of Nutrition in Gerontology and Geriatrics, vol 39, no 1, 2020, pp 214-235.  
Food insecurity, life events, and emotional eating can influence dietary patterns. However, their interaction among older adults requires further investigation. This mixed-method, interdisciplinary project included 7 focus groups and a cross-sectional survey (n = 55) to evaluate these factors among older adults (60-102 years of age) living in rural Ohio communities. Qualitative data highlighted critical life events, emotions and personal relationships, food insecurity, and learning how to do more with less, and resilience in dietary patterns. The majority of the participants were overweight or obese. Food insecurity, frequency of congregate meals, and age were associated with emotional eating. Attributes of diet quality correlated with emotional eating and food insecurity. Future work should address the unique needs of older adults by expanding food assistance programs, while including the older adult's perspectives with regard to life experiences, the value of social support, personal relationships, and honoring food preferences, particularly nutrient-dense foods.  
ISSN: 21551197  
From : <https://doi.org/10.1080/21551197.2020.1759478>
- 260/22 Evaluating the effect of a home-delivered meals service on the physical and psychological wellbeing of a UK population of older adults: a pilot and feasibility study; by Mary F O'Leary, Manuela Barreto, Joanna L Bowtell.: Taylor and Francis.  
Journal of Nutrition in Gerontology and Geriatrics, vol 39, no 1, 2020, pp 1-15.  
This study evaluates the effectiveness of a 3-week, daily meal provision service by a non-profit provider on the physical and psychological wellbeing of an older adult population. It further examines the feasibility of carrying out such measures in participant's homes. 19 older adult participants (8M, 11F; 78.3 ± 8.7 years) received 3 meals per day for 21 days and supplemented these meals ad libitum. Risk of malnutrition (Mini Nutritional Assessment; MNA) body composition, blood pressure, handgrip strength, balance, mobility, loneliness, social capital, satisfaction with life and mood were evaluated in participant's homes before and after the intervention. Following the intervention, MNA score increased significantly and participants rated themselves as significantly less depressed. The study describes a methodology that was largely feasible and outlines ways in which it could be improved. It claims to have demonstrated that even short-term, home meal deliveries improve MNA scores and can positively alter some measures of mood.  
ISSN: 21551197  
From : <https://doi.org/10.1080/21551197.2019.1684417>
- 260/23 Exploring food choice and flexibility practices among staff and residents at care homes in Denmark; by Maria Nyberg, Mine Sylow.: Cambridge University Press.  
Ageing and Society, vol 41, no 4, April 2021, pp 854-874.  
With a growing number of people reaching older age, the need for care provided in long-term care institutions is increasing. Although the goal is to deliver person-centred care that includes choice and flexibility opportunities, pre-scheduled mealtimes and set menus are still used. The aim was to explore how food choice and flexibility practices were perceived and performed by residents and staff at three care homes in Denmark. Three food journey interviews with eight residents (aged 83-96) and three focus groups with 12 people from the care and kitchen staff were conducted. Food choice and flexibility practices were mainly performed informally and selectively by the staff, and through personal practices by the residents, implying that many residents were excluded from food choice and flexibility opportunities. However, food choice and flexibility practices were also inhibited by the staff's time pressure and unfamiliarity with choice possibilities, and by the politeness of the residents. Our findings suggest that food choice and flexibility practices must be understood and performed broadly, and include various ways of listening and responding to the residents' needs and preferences. The study highlighted the importance of incorporating the essential embodied knowledge and emotional know-how, inherent in food choice and flexibility practices, into formal and inclusive strategies concerning how to think and act in relation to the food and meal situation.  
ISSN: 0144686X  
From : <https://doi.org/10.1017/S0144686X19001491>
- 260/24 Interventions to support older people's involvement in activities related to meals: a systematic review; by Anne Marie Beck, Mette Merlin Husted, C Elizabeth Weekes, Christine Baldwin.: Taylor and Francis.  
Journal of Nutrition in Gerontology and Geriatrics, vol 39, no 1, 2020, pp 155-191.  
The objective of this systematic review is to assess whether old people should be actively involved in activities related to meals to support quality of life, nutritional status and functional abilities related to meals. Two electronic databases Cochrane Database of Systematic Reviews and the Database of Abstracts of Reviews of Effectiveness were searched, supported by PubMed citation, snowball searches.

Eleven primary studies were included. The quality was low. No studies assessed the effect on health-related quality of life. Three types of interventions to support activities related to meals were identified: Meal-related activities to facilitate improved autonomy seemed to overall improve nutritional intake, physical and social function related to meals, plus mealtime coping. Interventions of encouragement and reinforcement by staff to facilitate independence in eating seemed to have beneficial effect on nutritional intake and physical function related to meals. Interventions using food preparation and cooking to support participation seemed to have beneficial effects on social function related to meals and mealtime coping. There is an urgent need for good quality, adequately powered studies in this area and among old people in all health care settings.

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From : <https://doi.org/10.1080/21551197.2020.1834484>

## **DISABILITY**

(See Also 260/53)

- 260/25 Facilitators and barriers to autonomy: a systematic literature review for older adults with physical impairments, living in residential care facilities; by Jolande van Loon, Katrien Luijkx, Meriam Janssen, Letje de Rooij, Bienke Janssen.: Cambridge University Press.  
Ageing and Society, vol 41, no 5, May 2021, pp 1021-1050.

Autonomy is important in every stage of life. However, little is known about how autonomy is enhanced for older adults living in residential care facilities (RCFs). This leads to the research question: which facilitators and barriers to autonomy of older adults with physical impairments due to ageing and chronic health conditions living in RCFs are known? The results will be organised according to the framework of person-centred practice, because this is related to autonomy enhancement. To answer the research question, a systematic literature search and review was performed in the electronic databases CINAHL, PsycINFO, PubMed, Social Services Abstracts and Sociological Abstracts. Inclusion and exclusion criteria were derived from the research question. Selected articles were analysed and assessed on quality using the Mixed Methods Appraisal Tool. Facilitators and barriers for autonomy were found and arranged in four themes: characteristics of residents, prerequisites of professional care-givers, care processes between resident and care-giver, and environment of care. The established facilitators and barriers are relational and dynamic. For a better understanding of the facilitators and barriers to autonomy for older adults with physical impairments living in RCFs, a description is based on the 35 included articles. Autonomy is a capacity to influence the environment and make decisions irrespective of having executional autonomy, to live the kind of life someone desires to live in the face of diminishing social, physical and/or cognitive resources and dependency, and it develops in relationships. The results provide an actual overview and lead to a better understanding of barriers and facilitators for the autonomy of older adults with physical impairments in RCFs. For both residents and care-givers, results offer possibilities to sustain and reinforce autonomy. Scientifically, the study creates new knowledge on factors that influence autonomy, which can be used to enhance autonomy.

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From : <https://doi.org/10.1017/S0144686X19001557>

## **EMPLOYMENT**

- 260/26 Older adults' integration in the labour market: a global view; by Axel Börsch-Supan, Felizia Hanemann, Brian Beach, Didier Halimi, Susana Harding, Marieke van der Waal, Daisuke Watanabe, Ursula M Staudinger.: Cambridge University Press.  
Ageing and Society, vol 41, no 4, April 2021, pp 917-935.

What governs labour force participation in later life and why is it so different across countries? Health and labour force participation in older ages are not strongly linked, but we observe a large variation across countries in old-age labour force participation. This points to the important role of country-specific regulations governing pension receipt and old-age labour force participation. In addition to the statutory eligibility age for a pension, such country-specific regulations include: earnings tests that limit the amount of earnings when pension benefits are received; the amount of benefit deductions for early retirement; the availability of part-time pensions before normal retirement; special regulations that permit early retirement for certain population groups; and either subsidies or extra costs for employers if they keep older employees in their labour force. This paper asks two questions: Can we link a relatively low labour force participation at ages 60-64 to country-specific regulations that make early retirement attractive? and Can we link a relatively high labour force participation at ages 65-74 to country-specific regulations that make late retirement attractive? To answer these questions, the authors compared the experiences in a set of developed countries around the world in order to understand better the impact of country-specific rules and laws on work and retirement behaviour at older ages and, by consequence, on the financial sustainability of pension systems.

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## FAMILY AND INFORMAL CARE

(See Also 260/17, 260/45, 260/52, 260/53, 260/71)

- 260/27 An integrative analysis of sibling influences on adult children's care-giving for parents; by Jorik Vergauwen, Dimitri Mortelmans.: Cambridge University Press. Ageing and Society, vol 41, no 3, March 2021, pp 536-560. The extent to which, and the reasons why, children help to care for their parents are examined in an extensive range of literature. Although care for parents essentially takes place in parent-child dyads, many of these studies acknowledge that the amount of care a child gives is generally the outcome of collective decisions in multiple-child families. However, to our knowledge, no research in Europe enhances our understanding of how sibling characteristics influence an individual child's care-giving. Using data for 14 European countries from the Survey of Health, Ageing and Retirement in Europe, the present study relates pre-care-giving sibling characteristics to children's subsequent start of giving care. This longitudinal approach allows correction for the endogenous nature of time-changing predictors. The analysis demonstrates that daughters start to care more often when they have brothers instead of sisters. This pattern of gendered intergenerational care particularly applies to southern European countries. We also observe that both pre-care-giving parent-sibling frequency of contact and geographic distances predict children's care-giving transition strongly. Children who are closer to their parents than siblings in terms of contact and proximity have higher odds of care-taking. Finally, being the only child without a job enhances the start of care-giving as well. The results suggest that sibling characteristics are an important factor in explaining intergenerational care differences between children in Europe.  
ISSN: 0144686X  
From : <https://doi.org/10.1017/S0144686X19001156>

## FRAILITY

(See Also 260/52)

- 260/28 An interRAI-derived frailty index is associated with prior hospitalisations in older adults residing in retirement villages; by Katherine Bloomfield, Zhenqiang Wu, Annie Tatton, Cheryl Calvert, Nancye Peel, Ruth Hubbard, Hamish Jamieson, Joanna Hikaka, Michal Boyd, Dale Bramley, Martin J Connolly.: Wiley. Australasian Journal on Ageing, vol 40, no 1, March 2021, pp 66-71. The objectives of this study were to develop and validate a frailty index (FI) from interRAI-Community Health Assessments (CHA) on older adults in retirement villages (RVs). The study is a cross-sectional analysis of a current RV research study. A FI was generated using the cumulative deficit model. Health-care utilisation measures were acute, and all, hospitalisations 12 months before baseline assessment. Associations between FI and hospitalisations were explored using multivariable logistic regression to estimate odds ratio (OR). Of 577 included residents, mean (SD) age was 81 (7) and 419 (73%) were female. Mean (SD) FI was 0.16 (0.09); 260 (45%) were mildly frail, and 108 (19%) moderate/severely frail. In multivariate-adjusted analysis, odds of acute hospitalisation for mild (OR = 3.3, P .001) and moderate/severely frail (OR = 6.4, P .001) were significantly higher than fit residents. Higher odds were also observed for all hospitalisations. A considerable proportion of RV residents were moderately/severely frail. FI was associated with acute and all hospitalisations.  
ISSN: 14406381  
From : <https://doi.org/10.1111/ajag.12863>

## GERONTOLOGY (GENERAL)

- 260/29 Being a gerontologist: intersections between the professional and the personal in the Ageing of British Gerontology project; by Jackie Reynolds, Miriam Bernard, Mo Ray.: Cambridge University Press. Ageing and Society, vol 41, no 5, May 2021, pp 1051-1071. Despite the growth of cultural gerontology this century, relatively few gerontologists have interrogated their own experiences of ageing through a critical reflexive lens. This paper seeks to address this lack of attention by discussing some findings of the Ageing of British Gerontology project: a two-year (2015-2017) Leverhulme-funded study focused on identifying key developments and changes in gerontological research, theory, policy and practice in Britain since the founding of the British Society of Social and Behavioural Gerontology (now the British Society of Gerontology) in 1971. As part of a mixed-method study, the authors undertook 50 in-depth biographical interviews with 'senior' or retired individuals who have played a key role in the creation and development of gerontology in Britain. As well as focusing more widely on gerontological developments, they asked participants about the relationship between their professional insights into ageing and their personal experiences of ageing - both their own and that of loved ones. In this paper, we discuss the findings in relation to five key themes: health, illness and mortality; close personal relationships; work relationships; challenging

ageism; and ageing selves. The authors found evidence that participants often drew upon their personal experiences of ageing in a range of contexts, including teaching and research. There were also numerous examples of professional insights informing personal decision-making, especially in relation to care of loved ones, though the emotionally challenging aspects of this emphasised the limitations of professional insights. Ultimately, they argue that the distinction between the personal and the professional is something of a false dichotomy, and there is often a complex interplay between the two aspects.

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From : <https://doi.org/10.1017/S0144686X1900151X>

## **HEALTH AND WELLBEING**

(See 260/58)

## **HEALTH CARE**

(See 260/56, 260/83)

## **HEALTH SERVICES**

260/30 Health workforce planning under conditions of uncertainty: identifying supportive integrated care policies using scenario analysis; by Gareth H Rees, Peter Crampton, Robin Gauld, Stephen MacDonell.: Emerald.

Journal of Integrated Care, vol 29, no 2, 2021, pp 153-169.

Integrated care presents health workforce planners with significant uncertainty. This results from: (1) these workforces are likely in the future to be different from the present, (2) integrated care's variable definitions and (3) workforce policy and planning is not familiar with addressing such challenges. One means to deal with uncertainty is scenario analysis. In this study the authors reveal some integration-supportive workforce governance and planning policies that were derived from the application of scenario analysis.

Through a mixed methods design that applies content analysis, scenario construction and the policy Delphi method, the study analyses a set of New Zealand's older persons health sector workforce scenarios. Developed from data gathered from workforce documents and studies, the scenarios are evaluated by a panel, and derived policy statements are assessed for desirability and feasibility.

One scenario was found to be most favourable, based on its broad focus, inclusion of prevention and references to patient dignity, although funding changes were indicated as necessary for its realisation. The integration-supportive policies are based on promoting network-based care models, patient-centric funding that promotes collaboration and the enhancement of interprofessional education and educator involvement.

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From : <https://doi.org/10.1108/JICA-08-2020-0052>

## **HEALTHY AGEING**

(See 260/54)

## **HOME CARE**

(See Also 260/15, 260/22, 260/45)

260/31 Choice and quality in home-based and community-based aged care: insights from two rapid evidence reviews; by Nicholas J R Hunter, Yvonne Wells, Samantha J Clune, Beatriz P Ayala Quintanilla, Erica Johnstone.: Cambridge University Press.

Ageing and Society, vol 41, no 4, April 2021, pp 875-916.

As consumer-directed care programmes become increasingly common in aged care provision, there is a heightened requirement for literature summarising the experience and perspectives of recipients. The authors conducted rapid evidence reviews on two components of consumer experience of home- and community-based aged care: (a) drivers of choice when looking for a service (Question 1 (Q1)); and (b) perceptions of quality of services (Question 2 (Q2)). They systematically searched MEDLINE and EMBASE databases, and conducted manual (non-systematic) searches of primary and grey literature (e.g. government reports) across CINAHL, Scopus, PsychINFO, and Web of Science, Trove and OpenGrey databases. Articles deemed eligible after abstract/full-text screening subsequently underwent risk-of-bias assessment to ensure their quality. The final included studies (Q1: N = 21; Q2: N = 19) comprised both quantitative and qualitative articles, which highlighted that consumer choices of services are driven by a combination of: desire for flexibility in service provision; optimising mobility; need for personal assistance, security and safety, interaction, and social/leisure activities; and to target and address previously unmet needs. Similarly, consumer perspectives of quality include control and autonomy, interpersonal interactions, flexibility of choice, and safety and affordability. The reviews

suggest that future model development should take into account consumers' freedom to choose services in a flexible manner, and the value they place on interpersonal relationships and social interaction.  
ISSN: 0144686X  
[From : https://doi.org/10.1017/S0144686X19001065](https://doi.org/10.1017/S0144686X19001065)

- 260/32 Meeting the challenges of measuring outcomes of home care programs: the Australian Community Outcomes Measurement (ACCOM) tool; by Beatriz Cardona, Michael Fine, Shaun Riley.: Taylor and Francis.  
Home Health Care Services Quarterly, vol 39, no 3, July-September 2020, pp 141-153.  
Measuring the impact of care delivered at home for frail older people is a complex task given many confounding variables that may impact on the ability of service providers to identify the direct impact of their programs on their clients' well-being and quality of life. The recent publication of the 2018 Wellness and Reablement Report Outcomes indicated that organizations lack formal processes to measure the impact of their programs on service users. There are therefore limited data exits on measuring outcomes and the performance of the ACCOM tool in the real world. Knowledge of a strong causal relationship between services provided and outcomes enables confidence in assuming the care provided was largely responsible for the outcome achieved. This paper reflects on the experiences of one service provider in Brisbane, in implementing the Australian Community Care Outcomes Measurement (ACCOM) tool to measure and demonstrates the impact of their programs.  
ISSN: 01621424  
[From : https://doi.org/10.1080/01621424.2020.1759477](https://doi.org/10.1080/01621424.2020.1759477)

- 260/33 Older adults' perspectives regarding peer-to-peer support programs and maintaining independence; by Rebecca J Schwei, Amy W Amesoudji, Kali DeYoung, Jenny Madlof, Erika Zambrano-Morales, Jane Mahoney, Elizabeth A Jacobs.: Taylor and Francis.  
Home Health Care Services Quarterly, vol 39, no 4, October-December 2020, pp 197-209.  
Peer to peer (P2P) support has been suggested as one community program that may promote aging in place. The authors sought to understand challenges older adults have maintaining their independence and to identify how P2P support facilitates independence. They completed 17 semi-structured interviews with older adults receiving P2P support in 3 cities in the United States. Study team members coded data using deductive and inductive conventional content analysis. Participants identified declining abilities, difficulties with mobility, and increasing cost of living as challenges to independence. P2P support facilitated independence and provided them with a new friend. The qualitative findings indicate that maintaining independence as an older adult in the United States has many challenges. P2P programs have an important role in helping older adults stay in their home by supporting mobility and promoting social engagement.  
ISSN: 01621424  
[From : https://doi.org/10.1080/01621424.2020.1778594](https://doi.org/10.1080/01621424.2020.1778594)

- 260/34 Picking low hanging fruit: a scoping review of work environment related interventions in the home care sector; by Christofer Rydenfält, Charlotte Holgersson, Britt Östlund, Inger Arvidsson, Gerd Johansson, Roger Persson.: Taylor and Francis.  
Home Health Care Services Quarterly, vol 39, no 4, October-December 2020, pp 223-237.  
Home care for elderly people is an important part of the social welfare system. The sector employs many people, especially women, and work environment issues are common. This review explores the scientific literature on organizational interventions that target the home care work environment. Altogether, 16 studies of varying quality met the inclusion criteria. The interventions identified involved organizational change, education and training, digitalization and scheduling. Many interventions were concerned with changing specific behaviors or with introducing new technology rather than tackling complex issues such as sick leave, stress or gender inequality. Employee participation increased the likelihood of success.  
ISSN: 01621424 [From : https://doi.org/10.1080/01621424.2020.1772936](https://doi.org/10.1080/01621424.2020.1772936)

## HOSPITAL CARE

- 260/35 Greening a geriatric ward reduces functional decline in elderly patients and is positively evaluated by hospital staff; by Agnes E van den Berg, Jolanda Maas, Liesbeth van den Hoven, Karin Tanja-Dijkstra.: Taylor and Francis.  
Journal of Aging and Environment, vol 35, no 2, April-June 2021, pp 125-144.  
This research examined whether greening of a geriatric ward may reduce the hospital-induced decline in the independent functioning of elderly patients as measured by changes from admission to discharge in the KATZ-ADL6 and physician assessments at discharge. Using a quasi-experimental design with 4 months of pre- and post-tests, the functional decline in a sample of 54 hospitalized geriatric patients was found to be lower after greening than before greening for both measures. Moreover, an evaluative survey among 15 staff members showed that they appreciated the greening, and believed it to support patient well-being.  
ISSN: 26892618 [From : https://doi.org/10.1080/26892618.2020.1805390](https://doi.org/10.1080/26892618.2020.1805390)

## HOUSING

(See Also 260/57)

- 260/36 Dimensions of housing insecurity for older women living with a low income; by Kelly O'Neil, Katie Aubrecht, Janice Keefe.: Taylor and Francis.  
Journal of Aging and Environment, vol 35, no 1, January-March 2021, pp 1-27.  
Limited attention in housing research is given to the experiences of insecure housing among older women living with a low income, who, evidence suggests, are especially at risk. This qualitative study found that for some older women living in Halifax Regional Municipality in Nova Scotia, Canada, housing insecurity goes beyond the problem of unaffordability. Housing insecurity emerged as the cumulative effects of inter-related factors encompassing the quality of relationships within their housing and the ability to claim a sense of safety, privacy, and autonomy within their living spaces. Flight from abusive partners, conflicts with landlords, and the death or divorce of male partners all surfaced as de-stabilizing factors in women's housing. Women's personal histories, including marginalized employment and early trauma also exacerbated the daily stresses of precarious housing. The role of pets as both important health supports and barriers to housing also surfaced in this research, as did the function of smoking as an entrenched coping mechanism that also limits housing options.  
ISSN: 26892618  
From : <https://doi.org/10.1080/26892618.2020.1744498>
- 260/37 Older adults' perspectives on transitions in the kitchen; by S D Ramsamy-Iranah, M Maguire, S Peace, V Pooneeth.: Taylor and Francis.  
Journal of Aging and Environment, vol 35, no 2, April-June 2021, pp 207-224.  
A study was conducted among 30 older adults in Mauritius about the use kitchens. They were interviewed firstly about the kitchens they had experienced in the past, and secondly to discuss and demonstrate their current kitchen and how easily they could use it. It was found that while some of the participants had age-related disabilities, they were all doing their best to cope with kitchen tasks. However, many were found to be attached to traditional equipment rather than newer labour-saving products. The study shows that there is a need to for a more inclusive approach to kitchen design to make life easier for this group of people. There is also a requirement to promote the benefits of modern kitchen gadgets as allowing them to live independently for longer.  
ISSN: 26892618  
From : <https://doi.org/10.1080/26892618.2020.1834052>
- 260/38 Towards meaningful mobility: a research agenda for movement within and between places in later life; by Louise Meijering.: Cambridge University Press.  
Ageing and Society, vol 41, no 4, April 2021, pp 711-723.  
Mobility or physical movement contributes to health and wellbeing in later life. Most studies have focused on the contribution of outdoor mobility to active ageing, but physical and cognitive impairments restrict the mobility of many older adults. This article aims to explore the gaps in the current literature on mobility in later life, and identify required innovations in the field through laying out key areas for future research. It discusses two, largely separate, areas of research, namely on mobility patterns and mobility experiences. The first focuses on quantitative and spatial research on outdoor mobility patterns in terms of routes, timing and transport modes. The second mainly concerns qualitative research on how older adults perceive mobility in their everyday lives. This article identifies three areas for future research on mobility in later life: (a) beyond outdoor movement; (b) diversity in mobility; and (c) the role of time in mobility. To conclude, addressing these areas jointly will contribute to further unpacking the concept of mobility as meaningful practice and to integrating quantitative and qualitative methods when studying mobility in later life. This will result in policy inputs on the mobility and wellbeing of our ageing population.  
ISSN: 0144686X  
From : <https://doi.org/10.1017/S0144686X19001296>
- 260/39 The use of public space in a public housing complex by senior citizens: a qualitative study; by Hiroshige Matsumoto, Masako Kageyama, Noriko Yamamoto-Mitani, Satoko Nagata.: Taylor and Francis.  
Journal of Aging and Environment, vol 35, no 2, April-June 2021, pp 107-124.  
Recently, many community gathering spaces (CGSs) have been built as platforms for senior citizens to socialize. This study constitutes an ethnographic examination of how senior citizens use a CGS in a public housing complex in Japan. The results depicted six characteristic styles in which senior citizens used the CGS: visiting a park, attending a school, using a library, using a meeting room, shopping for commodities, and participating in events. Frequency of CGS use and group cohesion were two properties that distinguished among the six styles. Moreover, environmental features of the CGS enabled senior citizens with various physical and social conditions to use the CGS.  
ISSN: 26892618  
From : <https://doi.org/10.1080/26892618.2020.1802803>

## HOUSING WITH CARE

(See Also 260/65)

- 260/40 Developing and testing a model of the assisted living environment; by Sarah D Holmes, Barbara Resnick, Elizabeth Galik, Nancy Kusmaul.: Taylor and Francis.  
Journal of Aging and Environment, vol 35, no 1, January-March 2021, pp 62-76.  
The assisted living (AL) environment plays an important role in supporting residents' satisfaction and helping them to age in place. The AL environment is multidimensional and has many interrelated components including staffing (e.g. direct care workers, nursing, activity staff), services provided (e.g. medical, mental health, pharmacy), amenities offered at the setting (e.g. beauty salon, library, exercise facilities), and the physical environment. Evidence suggests that aspects of the AL environment can enhance or detract from the physical function, well-being, social engagement, and behavioral outcomes among residents. The purpose of this study was to develop and test a multidimensional AL environment measurement model that includes indicators of staffing, services, amenities, and the physical environment. Baseline data was used from a study testing the Dissemination and Implementation of Function Focused Care in AL. A total of 54 AL facilities across three states were included in the sample. Settings ranged in size from 31 to 164 beds with an average size of 82.2 (SD = 26.2) beds and the majority were for profit facilities (n = 41, 74.5%). Structural equation modeling was used to test the proposed model. Results showed that the model fit the data (Chi-Square/df = 1.861, p .05; CFI = .858, RMSEA = .126). Having a comprehensive AL environment measurement model will advance future research that explores the impact of the environment on resident outcomes. Findings from this study will inform interventions and programs designed to modify AL environments to optimize residents' satisfaction with AL.  
ISSN: 26892618  
From : <https://doi.org/10.1080/26892618.2020.1793439>
- 260/41 Informing best practice for supportive housing with care for older adults: a qualitative investigation of service user views; by Frances Louise Finn, Claire O'Gorman, Suzanne Denieffe, Majella McCarthy.: Taylor and Francis.  
Journal of Aging and Environment, vol 35, no 1, January-March 2021, pp 28-41.  
Worldwide the older adult population is increasing, with subsequent socioeconomic challenges. Internationally, a well-recognised model that enables healthy ageing is 'supportive housing with care,' which provides care for older adults that can function with basic support. In Ireland, policy toward public provision of older adult care is nursing home based. To inform policy further, this study explores the views of service users of supportive housing with care facilities. An instrumental case study methodology was adopted with a sample of 30 participants. Six residents participated in focus groups (n = 5) across three facilities (n = 30). Four themes emerged: Reasons for coming to live in the center; Experiences of supportive housing with care; Experiences of alternative care and; Suggestions for improvements. Results demonstrated resounding positivity for the supportive housing with care model. It is necessary however to be mindful that success lies in an older adult housing policy that provides choice, which is underpinned by the concept of person centered care.  
ISSN: 26892618  
From : <https://doi.org/10.1080/26892618.2020.1772442>
- 260/42 Transforming space into place: a person-environment interchange approach for designing an assisted living facility courtyard; by Mahsa Yari, Kathy Lee, Jessica Cassidy, Zhirui Chen.: Taylor and Francis.  
Journal of Aging and Environment, vol 35, no 2, April-June 2021, pp 188-206.  
This study tested whether it is applicable to design a long-term care facility courtyard for older adults with a person-environment interchange approach. The authors created design protocols for an underutilized courtyard at an assisted living facility to promote interactions amongst residents, others, and nature. Then, they conducted semi-structured individual interviews with nine residents to explore their perceptions on the existing courtyard and the design protocols by presenting simulated prototyped landscaping in a video format. Findings suggest that residents appreciate multisensory features in their courtyard, and they are willing to play active roles in creating and sustaining their outdoor courtyard environments.  
ISSN: 26892618  
From : <https://doi.org/10.1080/26892618.2020.1815923>

## **INCOME AND PERSONAL FINANCE**

- 260/43 Exploring underexposed stories: the experienced lifecourse of financially excluded older adults; by Sofie Van Regenmortel, An-Sofie Smetcoren, Sara Marsillas, Deborah Lambotte, Bram Fret, Liesbeth De Donder.: Cambridge University Press.  
Ageing and Society, vol 41, no 4, April 2021, pp 724-745.  
To gain insights into vulnerable lifecourses and give a voice to those often underrepresented in quantitative research, this study examines the life stories (past, present and future) of 19 financially excluded older adults using an adapted version of McAdams' life-story interview scheme. Although these life stories demonstrate an accumulation of many disadvantages and an uncertain future because of current financial situations, the stories also reflect the generativity, resilience, coping strategies and agency of financially excluded older adults. We demonstrate how the experienced lifecourse is built around both negative and positive turning points and transitions which go beyond the classical education-work-retirement triumvirate, and how socio-cultural life scripts are used as a framework to build one's own life story in order to achieve continuity. The discussion highlights the potential for deploying the life-story method as a qualitative resource for providing individualised care.  
ISSN: 0144686X  
From : <https://doi.org/10.1017/S0144686X19001235>

## **INFORMATION AND COMMUNICATION TECHNOLOGY**

(See Also 260/4)

- 260/44 Social networking sites and the experience of older adult users: a systematic review; by Loveday Newman, Charlotte Stoner, Aimee Spector.: Cambridge University Press.  
Ageing and Society, vol 41, no 2, February 2021, pp 377-402.  
This study aimed to systematically review the use of social networking sites (SNSs) from an older adult perspective (all papers had an average sample age of 65+ and samples ranged in age from 50 to 98). Characteristics of older adult SNS users, incentives and disincentives for use, and the relationship between SNS use, wellbeing and cognitive function were explored. From a systematic search, 21 papers met inclusion criteria and were subjected to a quality review. Paper quality was often low or medium, as rated by a standard quality assessment framework. Results indicated that older adult SNS users were more likely to have particular characteristics, including being female and younger. The main incentive for use was to maintain contact with family and friends. Disincentives included privacy concerns and lack of perceived usefulness. The relationship between SNS use, wellbeing and cognitive function was inconclusive. SNS use is a multi-dimensional phenomenon that needs to be understood in the context of broader communication practices, individuals' social relationships, and individual preferences and characteristics.  
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From : <https://doi.org/10.1017/S0144686X19001144>

## **INTEGRATED CARE**

(See 260/30, 260/66)

## **INTERNATIONAL AND COMPARATIVE**

(See Also 260/16, 260/83, 260/84)

- 260/45 Care preferences among Chinese older adults with daily care needs: individual and community factors; by Jiehua Lu, Li Zhang, Kunyu Zhang.: Sage.  
Research on Aging, vol 43, nos 3-4, March-April 2021, pp 166-176.  
Traditionally, Chinese families have been the primary provider of care for older adults, and older people expected family care. However, along with the modernization and demographic transition, family functions have been weakened, and state-based care has begun to play an essential role in supporting family care for older people. This paper aims to assess the care preferences of older people and the different responsibilities of individuals and communities in modern China. Using data from the 2014 China Longitudinal Aging Social Survey (CLASS) and multinomial logistic regression modeling, we find that family care remains the cornerstone for older adults and their care preferences are associated with individual and community factors, mainly including the number of children, education level, residential area, the presence of health infrastructure and care facilities, and the values associated with filial piety of older adults.  
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From : <https://doi.org/10.1177%2F0164027520939321>

- 260/46 A contemporary insight into an age-friendly environment contributing to the social network, active ageing and quality of life of community resident seniors in Japan; by Myo Nyein Aung, Yuka Koyanagi, Satomi Ueno, Sariyamon Tiraphat, Motoyuki Yuasa.: Taylor and Francis.  
Journal of Aging and Environment, vol 35, no 2, April-June 2021, pp 145-160.  
Japan has been promoting an age-friendly environment for the health and well-being of its senior citizens. This study aimed to identify the environmental factors that promote social network diversity, active ageing, and quality of life for seniors in Japan. Through the experience of 243 seniors in different parts of Japan, the study assessed 20 factors of the WHO recommended age-friendly environment theoretical framework and how those contributed to the dependent variables: social network diversity, active ageing, and quality of life. Three factors significantly influenced the social network of seniors: (1) engagement in volunteer activity, and (2) having opportunities for paid employment, and (3) having internet access at home, whereas two factors (1) participation in sociocultural activities and (2) participation in group physical activities in leisure time, were statistically significant in relation to active ageing. Furthermore, the quality of life was significantly related to (1) locally available information about health concerns and service needs; (2) personal care or assistance needs achievable in the home setting using formal services; and (3) income sufficient to meet basic needs over the previous 12 months without public or private assistance. In conclusion, access to care in the community is important for the quality of life of the older, whilst social participation and exercise merit active ageing. Age-friendly environment implies a balance of care, welfare, and health services.  
ISSN: 26892618 From : <https://doi.org/10.1080/26892618.2020.1813232>
- 260/47 Current status of the long-term care security system for older adults in China; by Peng Du, Tingyue Dong, Jingyao Ji.: Sage.  
Research on Aging, vol 43, nos 3-4, March-April 2021, pp 136-146.  
In response to the increasing care demand of older adults and their families, the construction of the long-term care (LTC) security system has been widely recognized by the government, society and families. This article discusses the socio-demographic background, current situation, achievements and issues of this system. The LTC security system in China has achieved considerable progress in enriched service provision and expanded social insurance system pilot programs. However, the issues of unbalanced service provision and the explorative design of the insurance system still need to be resolved. Our recommendations for the development of the LTC security system include comprehensively reviewing the integrated care service system in terms of placing 'old adults at the center,' addressing the long-standing divisions between urban and rural areas in service provision and insurance design, advancing research and discussion concerning pilot experiences and improving the unified evaluation and financial planning systems.  
ISSN: 01640275 From : <https://doi.org/10.1177%2F0164027520949117>
- 260/48 Evaluating the quality of long-term care services in the city of La Plata, Argentina; by Peter Lloyd-Sherlock, Bridget Penhale, Nelida Redondo.: Cambridge University Press.  
Ageing and Society, vol 41, no 1, January 2021, pp 208-230.  
This paper reports on an innovative survey of long-term care facilities for older people in the Argentine city of La Plata. It applies a range of qualitative methodologies, including a clandestine audit conducted by older people living in the community. The paper pays particular attention to the types and availability of services, perceived quality and the rigour of regulatory processes. It finds that there has been a rapid growth in the availability of formal services, but that there are many gaps in provision, especially for older people with complex care needs. There are strong indications that service quality is uneven and, in some cases, this amounts to the contravention of basic human rights. State regulation is hampered by institutional fragmentation and weak governance. A wider set of expert interviews and the limited available published information indicate that these findings are unlikely to be exceptional, and that similar issues affect rapidly emerging long-term care systems in many low- and middle-income countries.  
ISSN: 0144686X From : <https://doi.org/10.1017/S0144686X1900103X>
- 260/49 The impact of long-term care policy on the percentage of older adults with disabilities cared for by family members in China: a system dynamics simulation; by Rong Peng, Bei Wu.: Sage.  
Research on Aging, vol 43, nos 3-4, March-April 2021, pp 147-155.  
This study examined the impact of current and future long-term care (LTC) policies on the family caregiving burden in China. System dynamics (SD) methodology was used to construct an LTC delivery system model that simulates the demand of LTC, living options, and LTC service use for disabled older adults. The model was based on three policy variables including the proportion of payment from LTC insurance, the growth rate of beds in LTC institutions, and the time to adjusting the capacity of community-based care. Results showed that the percentage of older adults with disabilities cared for by family members was projected to increase from 92.6% in 2015 to 97.8% in 2035, assuming no policy changes; under the mixed policy scenario, this percentage would reduce significantly to 63.8% in 2035. These findings illustrate that changes in LTC policy and delivery system have a significant impact on family care.  
ISSN: 01640275 From : <https://doi.org/10.1177%2F0164027520923567>

- 260/50     Improving care for older adults in China: development of long-term care policy and system; by Bei Wu, Marc A Cohen, Zhen Cong, Kyungmin Kim, Changmin Peng.: Sage.  
 Research on Aging, vol 43, nos 3-4, March-April 2021, pp 123-126.  
 This special issue covers several important topics related to long-term care (LTC) systems and policy development in China. It provides a contextual background on the development of the LTC system in China as well as the needs and preferences of LTC from family and older adults' perspectives. In addition, this issue covers the topic of evaluation of a recently developed long-term care nursing insurance and provides an example of family caregiving for persons with dementia within the Chinese context. The authors in this special issue also provided insights into the impact of the COVID-19 pandemic on older adults' life and LTC quality, and explored potential strategies to handle the challenges during and post-pandemic.  
 ISSN: 01640275  
 From : <https://doi.org/10.1177%2F0164027521990829>
- 260/51     An initial analysis of the effects of a long-term care insurance on equity and efficiency: a case study of Qingdao City in China; by Wei Yang, Shuang Chang, Wenbo Zhang, Ruobing Wang, Elias Mossialos, Xun Wu, Dan Cui, Hao Li, Hong Mi.: Sage.  
 Research on Aging, vol 43, nos 3-4, March-April 2021, pp 156-165.  
 Finding a suitable mechanism to finance long-term care (LTC) is a pressing policy concern for many countries. Using Qingdao city in China as a case study, this article presents an initial assessment of a newly piloted LTC insurance by evaluating its effects on equity and efficiency in financing. Drawing data from 47 in-depth interviews conducted in 2016, this study found that there remain sizable disparities in financial burden among insurance participants, despite an emphasis on ensuring equitable access to care. Although the insurance brought cost savings to the health care sector, the LTC providers are incentivized to provide care at the least cost, even when such care is deemed inadequate due to the fixed payment for their services. This article offers critical insights into the potentials and challenges of applying the LTC insurance model in a developing country, where critical lessons can be drawn for public LTC insurance in other countries.  
 ISSN: 01640275  
 From : <https://doi.org/10.1177%2F0164027520907346>
- 260/52     Intention to use respite services among informal care-givers of frail older adults in China: the role of care needs change; by Qian Sun, Nan Lu, Nan Jiang, Vivian W Q Lou.: Cambridge University Press.  
 Ageing and Society, vol 41, no 1, January 2021, pp 101-120.  
 Population ageing in China calls for evidence-based solutions, especially in terms of fulfilling long-term care needs among frail older adults. Respite services are identified as effective resources for alleviating care-giver burden and promoting the wellbeing of both older adults and their family care-givers. However, respite care is often under-used in China. This research aimed to examine factors associated with intention to use respite services among informal care-givers in Shanghai, mainland China. This study was part of the Longitudinal Study on Family Caregivers for Frail Older Adults in Shanghai. Pairs of older adults and their care-givers (N = 583) who successfully completed the 2013 and 2016 waves were included in the data analysis. Two logistic regression models were conducted, one with time-invariant and one with time-variant factors. The model with time-variant factors had greater explanatory power than the original Andersen model with time-invariant factors influencing intention to use respite services among care-givers. Care-givers had higher odds of intending to use respite services if they had higher care-giving burden, were caring elderly people who experienced care-giver transitions, or were caring for elderly people with increased function of ambulation or decreased function of feeding. The findings imply that change in functional health was a significant determinant of intention to use respite care. Relevant policy and service implications will be discussed.  
 ISSN: 0144686X  
 From : <https://doi.org/10.1017/S0144686X20000628>
- 260/53     Is informal care sufficient to meet the long-term care needs of older people with disabilities in China?: Evidence from the China Health and Retirement Longitudinal Survey; by Wei Yang, Si Ying Tan.: Cambridge University Press.  
 Ageing and Society, vol 41, no 5, May 2021, pp 980-999.  
 Rapid demographic shifts and socio-economic changes are fuelling concerns over the inadequate supply of informal care - the most common source of care-giving for older people in China. Unmet long-term care needs, which are believed to cause numerous adverse effects on health, continue to increase. Drawing data from the 2015 wave of the China Health and Retirement Longitudinal Survey, this study explores the relationship between informal care provision and unmet long-term care needs among older people in China. The authors first examine the availability of informal care among older people with disabilities. They then analyse whether a higher intensity of informal care leads to lower unmet needs. The findings suggest that the majority of older people with disabilities receive a low intensity of care, i.e. less than 80 hours per month. Besides, a higher intensity of informal care received could significantly lower the probabilities of unmet needs for the disabled older adults who have mainly instrumental

activities of daily living limitations. The study points out that informal care cannot address the needs of those who are struggling with multi-dimensional difficulties in their daily living. The findings highlight a pressing need for the government to buttress the formal care provision and delivery systems to support both informal care-givers and disabled older people in China.

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From : <https://doi.org/10.1017/S0144686X1900148X>

260/54 A latent class analysis of health lifestyles and health outcomes among Chinese older adults; by Li Zhang.: Cambridge University Press.

*Ageing and Society*, vol 41, no 2, February 2021, pp 313-338.

Prior analyses have repeatedly documented the association between individual health behaviours and health outcomes. Nonetheless, few studies have taken a health lifestyle theory approach to examine how health lifestyle behaviours have shaped Chinese older adults' health status. Using the most recent 2011-2012 data released by the Chinese Longitudinal Healthy Longevity Survey (CLHLS), latent class analysis was applied to identify predominant health lifestyles among Chinese older adults aged 65-105. Four distinct classes representing health lifestyles emerged. Furthermore, the research found the way in which the four classes representing older adults' health lifestyles can be predicted by the respondent's demographic and socio-economic characteristics. In addition, health lifestyles were found to be strongly associated with Chinese older adults' health outcomes which were measured by self-rated health, functional independence, cognitive function and chronic diseases, even after controlling for demographic features as well as individual and parental socio-economic disadvantage. Findings supported the cumulative disadvantage theory in health. The research highlighted the importance of promoting health lifestyles to improve older adults' health outcomes.

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From : <https://doi.org/10.1017/S0144686X20001063>

260/55 Living with cognitive impairment in China: exploring dyadic experiences through a person-centred care lens; by Jing Wang, Kirsten N Corazzini, Eleanor S McConnell, Ding Ding, Hanzhang Xu, Sijia Wei, Bei Wu.: Sage.

*Research on Aging*, vol 43, nos 3-4, March-April 2021, pp 177-187.

China has experienced a substantial increase in the number of older adults with dementia and milder forms of cognitive impairment. Being spouses of Persons with cognitive impairment (PWCI) and living with them for several decades does not necessarily mean that it is easier for them to provide person-centered care and maintain a valued and healthy relationship. The current study explored how elements of PCC, as operationalized by the Senses Framework, operate or fail to operate in the dyadic experiences of PWCI and their spousal care partners within the socio-cultural context of China. Our findings suggest that PWCI and their spouses experience the six senses through the person-centeredness in their daily interactions with each other. It also indicated successes and challenges to being person-centered early in the disease and identified their unmet needs as well as barriers and facilitators to improve their well-being.

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From : <https://doi.org/10.1177%2F0164027520935597>

260/56 A multi-dimensional perspective on the gender gap in health among older adults in India and China: application of a new ageing measure; by Arun Balachandran, K S James.: Cambridge University Press. *Ageing and Society*, vol 41, no 5, May 2021, pp 1000-1020.

A continuous rise of female life expectancy above that of males among older adults in India and China may give the impression that the relative gender gap in health in these countries is decreasing. However, given the systemic gender bias against older females in these countries across multiple dimensions of health, a fuller understanding of the gender gap in health calls for a multi-dimensional perspective. The authors estimate a multi-dimensional old-age threshold (MOAT) that specifies different old-age thresholds for female and male populations which accommodates multiple dimensions related to physical, intellectual and general health. They use the MOAT to evaluate the multi-dimensional gender gap in India and China by differencing the MOAT for females with that of males. Females in both countries have a lower MOAT than their male counterparts, indicating an earlier advent of 'old age' for females. The multi-dimensional estimates of the gender gap are also higher than the estimates based on only one dimension of health. A considerable level of variation is also observed in the gender gap across provinces. The study illustrates the need to understand the gender gap in health in India and China from a multi-dimensional perspective and provides an innovative way to quantify such a gap. Province-specific as well as health dimension-specific interventions are vital in reducing the gender gap among older adults in these countries.

ISSN: 0144686X

From : <https://doi.org/10.1017/S0144686X19001521>

- 260/57 Perceived housing conditions, home satisfaction, control beliefs over aging experience, and life satisfaction among Chinese older adults: a path analysis study; by Shiyu Lu.: Taylor and Francis. *Journal of Aging and Environment*, vol 35, no 1, January-March 2021, pp 88-105. Knowledge about the mechanisms of home satisfaction affecting life satisfaction among elderly during the aging process is limited. This study aims to investigate the mediating effect of perceived control over aging experience on the relationship between home satisfaction and life satisfaction. The secondary data collected from face-to-face questionnaire interviews with a sample of 755 community-dwelling Chinese older adults were used. The path analysis was applied to examine the mediating effect of perceived control in the relationship between home satisfaction and life satisfaction after controlling for other covariates. The bootstrap approach was employed. Goodness-of-fit indices were obtained for the final model and the model explained 30% of the variance of life satisfaction. Perceived housing conditions include poor lighting (Beta = -0.32, p 0.001), uneven thresholds/floors (Beta = -0.10, p = 0.007), and lack of emergency alarm (Beta = -0.14, p 0.001) and were associated with lower home satisfaction. Home satisfaction was positively associated with life satisfaction (Beta = 0.23, p 0.001), and control belief over aging experience was a significant mediator, explaining 11.5% between home satisfaction and life satisfaction. Such mediating effect was only significant among those aged 60 - 79 years old. The mediation effect of perceived control over aging experience underscores the importance of accommodating housing needs among older adults.  
ISSN: 26892618  
From : <https://doi.org/10.1080/26892618.2020.1793441>
- 260/58 Subjective wellbeing of Chinese elderly: a comparative analysis among Hong Kong, Urban China and Taiwan; by Jia Miao, Xiaogang Wu.: Cambridge University Press. *Ageing and Society*, vol 41, no 3, March 2021, pp 686-707. This study investigates the relative importance of living with adult children and social participation for the elderly's subjective wellbeing (happiness) in three Chinese societies (Hong Kong, urban China and Taiwan). We use data from the 2011 wave of the Hong Kong Panel Study of Social Dynamics (N = 1,658), the 2010 China Family Panel Studies in mainland China (N = 3,198) and the 2010 wave of the Taiwan Social Change Survey (N = 790). The ordinary least squares regression shows that, as the family value of society moves forward on a traditional-modern continuum, the elderly benefit more psychologically from social participation and less from living with children. The older people in Hong Kong who live independently with a spouse are in a significantly better emotional state than those living with adult children. Social participation is positively associated with subjective wellbeing among the aged in Hong Kong but not among those in urban China and Taiwan. The findings suggest that encouraging social involvement is important for effective public policy to tackle rapid population ageing in Chinese societies.  
ISSN: 0144686X  
From : <https://doi.org/10.1017/S0144686X19001272>
- 260/59 Understanding health and social challenges for aging and long-term care in China; by Wei Yang, Bei Wu, Si Ying Tan, Bingqin Li, Vivian W Q Lou, Zhuo (Adam) Chen, Xi Chen, James Rupert Fletcher, Ludovico Carrino, Bo Hu, Anwen Zhang, Min Hu, Yixiao Wang.: Sage. *Research on Aging*, vol 43, nos 3-4, March-April 2021, pp 127-135. The results published here are a synthesis of the top four research areas that represent perspectives drawn from the second King's College London Symposium on Ageing and Long-term Care in China held from 4 to 5th July 2019 at King's College London in London. The aim of the Symposium was to have a better understanding of health and social challenges for aging and long-term care in China. This symposium draws research insights from a wide range of disciplines, including economics, public policy, demography, gerontology, public health and sociology. A total of 20 participants from eight countries, sought to identify the key issues and research priorities in the area of aging and long-term care in China.  
ISSN: 01640275  
From : <https://doi.org/10.1177%2F0164027520938764>

## LEGAL ISSUES

- 260/60 Elder law and its subject: the contextualised ageing individual; by Ann Numhauser-Henning.: Cambridge University Press. *Ageing and Society*, vol 41, no 3, March 2021, pp 516-535. Elder law is often approached in terms of a 'body' of law. In this article, I argue for a contextualised and externalised perspective on the ageing individual as the subject of elder law. Elder law relates to the implications of law as an institutionalisation of society seen through the lens of older persons. The aged subject is a contested and differentiated social construct to be studied in relation to an externalised social 'problem' and properly contextualised. Whereas the ageing individual in the context of labour law and anti-discrimination regulation turns out to be remarkably young, the specific history of LGBT persons in society comes to the fore in cases where age intersects with a ground such as sexual orientation. The

'ageing' worker must thus be understood in relation to work as the dominant distributive order in society, and in relation to institutions and developments associated with work. Due to the role of age as a traditional social stratifier, the prohibition against age discrimination has been given a weaker format than have prohibitions against other kinds of discrimination, and the ban on ageism has failed to achieve a clear legal status. Deficiencies in the measures taken against age discrimination are also evident in their incapacity to address situations where age intersects with other grounds, resulting in a compartmentalised application and interpretation of discrimination bans, leaving vulnerable sub-groups without protection. In sum, elder law is very much a field in process and- although arguing for the added value of a contextualised perspective - it may for the time being suffice to say that 'elder law is what elder law researchers do'.

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From : <https://doi.org/10.1017/S0144686X19001284>

## LGBT

- 260/61 Adding grey to the rainbow: a narrative analysis of generational identity through stories and counter-stories of older gay men; by Kyle L Bower, Denise C Lewis, J Maria Bermudez, Anneliese A Singh.: Cambridge University Press.

Ageing and Society, vol 41, no 5, May 2021, pp 957-979.

This study explored identity formation among nine gay men who were born between 1946 and 1964. This group of nine was the largest homogeneous sub-group within a larger sample (N = 18). Although participants share similar demographic characteristics, their individual social, personal and narrative identities diverge to represent distinctive embodied selves. Guided by queer and feminist theories, the qualitative analysis identified dominant and counter-narratives that demonstrate the complexity of sexual identity as it evolves over time. All nine men recall being aware of their gay identity as children; however, like many socially constructed labels, their outward identity was more complex and difficult to understand. The findings demonstrate how participants negotiated their sexual identities through decades of social change. As illustrated within each subset of identity (i.e. social, personal and narrative), some participants found themselves breaking ground for a broader gay rights social movement, while others described their experience of being relegated to silence and invisibility for most of their lives. This research contributes to an ongoing discussion concerning the individuality found among lesbian, gay, bisexual and transgender (LGBT) individuals in later life. As the LGBT population becomes more visible, there will be a growing need to understand the individualism that exists within this coalition and affirm their diversifying sexual and gender identities.

ISSN: 0144686X

From : <https://doi.org/10.1017/S0144686X19001429>

- 260/62 Inequalities in older LGBT people's health and care needs in the United Kingdom: a systematic scoping review; by Dylan Kneale, Josie Henley, James Thomas, Robert French.: Cambridge University Press. Ageing and Society, vol 41, no 3, March 2021.

The hostile environment that older lesbian, gay, bisexual and transgender (LGBT) people faced at younger ages in the United Kingdom (UK) may have a lasting negative impact on their health. This systematic scoping review adds to the current knowledge base through comprehensively synthesising evidence on what is known about the extent and nature of health and care inequalities, as well as highlighting gaps in the evidence which point the way towards future research priorities. We searched four databases, undertook manual searching, and included studies which presented empirical findings on LGBT people aged 50+ in the UK and their physical and mental health or social care status. From a total of 5,738 records, 48 papers from 42 studies were eligible and included for data extraction. The synthesis finds that inequities exist across physical and mental health, as well as in social care, exposure to violence and loneliness. Social care environments appeared as a focal point for inequities and formal care environments severely compromised the identity and relationships that older LGBT people developed over their lifecourse. Conversely, the literature demonstrated how some older LGBT people successfully negotiated age-related transitions, e.g. emphasising the important role of LGBT-focused social groups in offsetting social isolation and loneliness. While there exist clear policy implications around the requirement for formal care environments to change to accommodate an increasingly diverse older population, there is also a need to explore how to support older LGBT people to maintain their independence for longer, reducing the need for formal care.

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## LIFE-LONG LEARNING

- 260/63 'Our members are growing up!': contradictions in ageing talk within a lifelong learning institute; by Summer C Roberts.: Cambridge University Press.

Ageing and Society, vol 41, no 4, April 2021, pp 836-853.

Whether encouraging successful ageing or labelling one as a stereotypical senior citizen, messages surrounding ageing pervade the daily lives of older adults. However, as a social status, age remains primarily in the background of older adults' conversations, only being drawn into the focus when one

is identified as older. This paper draws on interviews with members and staff of an Osher Lifelong Learning Institute (OLLI) in the southeastern United States of America in order to examine the ways that they discuss age and ageing. These older adults' ageing talk often focused on navigating away from negative ideas about age and avoiding labels deemed pejorative. Humour was occasionally used in identifying age, which carried potential for reinforcing as well as subverting ageism. Yet, members highlighted positive value in being older, particularly as demonstrated through participation in age-segregated education. Overall, these findings reflect the conflicting influences of deeply embedded ageist beliefs and personal desires to age successfully among this group of white, upper-middle-class, educated older adults. Ultimately, OLLI served as a protective environment for these privileged individuals, shielding the self from stereotypes otherwise present in ageing talk.

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From : <https://doi.org/10.1017/S0144686X19001508>

## **LONELINESS AND SOCIAL ISOLATION**

(See Also 260/73)

260/64 Marital status, close social network and loneliness of older adults in the Czech Republic; by Martina Stípková.: Cambridge University Press.

*Ageing and Society*, vol 41, no 3, March 2021, pp 671-685.

The wellbeing of older adults is closely related to their social relationships. There is a well-documented association of widowhood with social isolation and loneliness, but less is known about the consequences of divorce. This paper focuses on the effects of divorce and widowhood on the characteristics of social networks and loneliness in the Czech Republic. Data from the Czech component of the Survey of Health, Ageing and Retirement in Europe, 2015, are used. The results show that married older adults have the lowest levels of loneliness and, together with widowed men, the largest network of confidants. However, the size of the network is not associated with loneliness (net of socio-demographic variables). The only characteristic of the close social network that has an influence on loneliness is the presence of a partner in the network. This variable explains part of the advantage of spouses. Divorce is found to have a smaller impact on loneliness than widowhood, but the size of the difference depends on the gender and timing of the event. Widowed men seem to be most vulnerable while persons who divorce at age 50 or later experience the lowest level of loneliness among the unmarried groups. The favourable effect of late divorce can be interpreted in relation to the specific nature of partnership decisions in later life.

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260/65 Time- and place-dependent experiences of loneliness in assisted living facilities; by Anu H. Jansson, Antti Karisto, Kaisu H. Pitkälä.: Cambridge University Press.

*Ageing and Society*, vol 41, no 3, March 2021, pp 628-644.

The purpose of the study is to explore feelings of loneliness among residents in assisted living facilities in terms of how loneliness is experienced and articulated, and what specific factors are related to the experiences. The study used a mixed-method approach. We individually interviewed 13 residents twice over six months. We conducted two focus group interviews and noted our observations each time we met the respondents. Data analysis leaned on abductive reasoning. The respondents described loneliness in versatile, rich ways. It proved to be time and place dependent. It was dependent on the time of day, days of the week and seasons. Lonely time was meaningless and filled with a feeling of waiting. Loneliness was also intertwined with place. None of the respondents called their apartment home; instead they called it a hospital, even a prison. They had to spend long periods of time in their apartments against their will, and their desire to interact with other residents was not met. The respondents felt invisible. Residents' experiences of loneliness in assisted living facilities are unique and distinctive. Time- and place-dependent experiences of loneliness act as important signals for reflection on how care practices in these facilities could be more satisfying. Loneliness should therefore be a key topic and the target of prevention and interventions.

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## **LONG TERM CARE**

(See 260/47, 260/48, 260/49, 260/50, 260/51, 260/59)

## **MEDICATION**

260/66 Appropriate polypharmacy: a barometer for integrated care; by Alpana Mair, Eleftheria Antoniadou, Anne Hendry, Branko Gabrovec.: Emerald.

*Journal of Integrated Care*, vol 29, no 2, 2021, pp 204-214.

Polypharmacy, the concurrent use of multiple medicines by one individual, is a common and growing challenge driven by an ageing population and the growing number of people living longer with chronic conditions. Up to 11% of unplanned hospital admissions in the UK are attributable to, mostly avoidable, harm from medicines. However, this topic is not yet central to integrated practice. This paper reviews

the challenge that polypharmacy presents to the health and care system and offers lessons for integrated policy and practice.

Two commonly encountered scenarios illustrate the relevance of addressing inappropriate polypharmacy to integrated practice. An overview of the literature on polypharmacy and frailty, including two recent large studies of policy and practice in Europe, identifies lessons for practitioners, managers, policy makers and commissioners.

Comprehensive change strategies should extend beyond pharmacist led deprescribing initiatives. An inter-professional and systems thinking approach is required, so all members of the integrated team can play their part in realising the value of holistic prescribing, appropriate polypharmacy and shared decision making. Awareness and education about polypharmacy should be embedded in inter-professional training for all practitioners who care for people with multimorbidity or frailty.

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## MENTAL HEALTH

(See Also 260/19, 260/55)

- 260/67 Late-life accumulation, proliferation, and stagnation of home contents: an in-depth qualitative study of ten aging in place dwellers; by Gloria E Stafford, Heather Carlile Carter.: Taylor and Francis. *Journal of Aging and Environment*, vol 35, no 2, April-June 2021, pp 161-187.

Due to continued societal affluence, the households of many older people aging in place contain innumerable items, each with a complex story of origin, selection, and provenance. Excess possession accumulation can induce stress, create fall hazards, and impact indoor air quality. Often the burden passes to heirs who distribute or eliminate what is left behind after the death of the elder, an unpleasant task no matter the circumstances. Although academic discourse addresses the disbandment of households during late-life residential downsizing, issues related to accumulation and dispossession within the lives of people who continue to reside at home remain unexplored. The question, What is the collective cost of too much stuff? is a complex social issue for older people and their families, and one that requires additional research. This study reports possession management issues identified in a qualitative analysis of interviews with ten late-life older-old adults aging in place. Findings indicate that excess accumulation of possessions in a long-occupied home can lead to personal maladjustment and familial stress regarding eventual possession divestment. While future research must identify better strategies to alleviate the impact, this paper proposes active possession management as a necessary intervention in supporting older adults who age in place.

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## MIGRATION

- 260/68 First-generation circular migrants involved in the upbringing of their grandchildren: the case of Turkish immigrants in Germany; by Tolga Tezcan.: Cambridge University Press. *Ageing and Society*, vol 41, no 1, January 2021, pp 77-100.

Following retirement, older immigrants increasingly tend to engage in circular migration. This back-and-forth movement introduces a variety of challenges affecting the nature of grandparenthood as well as grandparental involvement in the upbringing of grandchildren. For circular migrant grandparents, maintaining intergenerational relationships requires them to overcome not only geographic distances, but also linguistic and cultural differences. In families with circular migrant grandparents, intergenerational conflict often springs from disparate generational exposure to acculturation processes, producing divergent aspirations within the first and second generations regarding the upbringing of the third generation. This study explores how first-generation Turkish circular migrant grandparents attempt to raise grandchildren who reside in Germany by implementing 'cultural and instrumental transfers'. This study undertakes a qualitative approach: semi-structured interviews with a purposive sample of first-generation Turkish circular migrant grandparents (N = 40). The analysis finds that child-care assistance is characterised by intergenerational conflict - rather than solidarity or altruistic support - between the first and second generations. Moreover, through transnational arranged marriages, as a cultural transfer, and inter vivos gifts, as an instrumental transfer, grandparents encourage their grandchildren to return to Turkey permanently.

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## NEIGHBOURHOODS AND COMMUNITIES

(See Also 260/8, 260/15, 260/38, 260/39, 260/46, 260/57)

- 260/69 People with dementia as active participants in studies related to the built environment: a systematic review; by Fernanda Marx, Donat Retfalvi.: Taylor and Francis.  
Journal of Aging and Environment, vol 35, no 1, January-March 2021, pp 77-87.  
Studies about dementia in relation to the built environment have not always include patients with dementia as active participants. This paper presents a systematic review focusing on recent available literature on people with dementia as active participants in studies related to the physical environment. The aim is to analyze methods, adversities and challenges of their involvement. A total of 14 studies were reviewed. The results reinforce the fact that people with dementia offer unique insights. Data collection methods should be adapted for their inclusion as well as a more careful approach and a special attention regarding the consent of participation.  
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From : <https://doi.org/10.1080/26892618.2020.1793440>
- 260/70 The temporal aspects of mobility intentions: older people's reflections on present and future support arrangements; by Rachel Barken.: Cambridge University Press.  
Ageing and Society, vol 41, no 3, March 2021, pp 561-581.  
Discourses on later-life housing and care are polarised. Ageing in place - typically in one's long-term dwelling - is often presented as the most desirable living arrangement, while moving to a congregate environment tends to be regarded as a last resort. Such polarised discourses obscure older people's experiences as they contemplate needs for housing, health and social care. To expand current understandings of mobility intentions, this paper examines 'time work' - or actions undertaken to exert some agency over time - as older people with chronic health conditions and disabilities navigate present and future support arrangements. Based on an interpretive analysis of qualitative interviews with 22 older persons receiving home care in Ontario, Canada, I identify three themes that highlight the temporal aspects of mobility intentions: (a) maintaining continuity with the past and present, (b) constructing alternative futures and (c) facing precarity. Focusing on time work shows how people make sense of ageing in place and/or relocating not only in relation to their physical, social and psychological capacities, but also in relation to perceptions of the past, present and future. Time work, moreover, has implications for feelings of security in the present and a sense of control over the future. Based on these findings, I make suggestions for developing a comprehensive continuum of supports, so all older people can make meaningful choices concerning housing and care.  
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From : <https://doi.org/10.1017/S0144686X19001223>
- 260/71 Transforming lived places into the connected neighbourhood: a longitudinal narrative study of five couples where one partner has an early diagnosis of dementia; by Xia Li, John Keady, Richard Ward.: Cambridge University Press.  
Ageing and Society, vol 41, no 3, March 2021, pp 605-627.  
To support people with dementia to live at home, a key national and international policy driver is to create dementia-friendly communities which draws attention to the importance of a local neighbourhood and living well with dementia. However, there is a lack of evidence about how people with dementia define and interact with their neighbourhood. This longitudinal narrative research aimed to uncover the meaning, construction and place of neighbourhood in the lives of people with dementia and their care partners through a participatory approach. Five couples, where one partner had an early diagnosis of dementia and capacity to consent, participated in the (up to) one-year mixed qualitative method study. During this time-frame, 65 home visits were conducted, resulting in over 57 hours of interview data alongside the development of other artefacts, such as neighbourhood maps, photographs, diaries and field notes. Narrative analysis was applied within and across the data-sets. This led to the emergence of three themes to describe a connected neighbourhood. First, 'connecting to people' is about the couples' connections with family members, friends and neighbours through a sense of belonging, group identification and responsibilities. Second, 'connecting to places' shares the couples' emotional and biographical attachment to places. Third, 'connecting to resources' refers to the couples actively seeking support to live independently and to retain neighbourhood connections.  
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From : <https://doi.org/10.1017/S0144686X1900117X>
- 260/72 Understanding the neighbourhood environment and the health and wellbeing of older Chinese immigrants: a systematic literature review; by Siyao Gao, Karine Dupre, Caryl Bosman.: Cambridge University Press.  
Ageing and Society, vol 41, no 4, April 2021, pp 815-835.  
Neighbourhood environment has a significant impact on the health and wellbeing of older people. In recent years, the increase in older Chinese immigrants globally has attracted a growing amount of research which has investigated the health and wellbeing of these elderly residents. The aim of this study

is to provide a systematic literature review of empirical findings on the health and wellbeing of older Chinese immigrants and the ways in which the neighbourhood environment impacts them. A systematic search was conducted using online databases where 52 articles met specific criteria and were subsequently reviewed critically. An inductive approach was undertaken to analyse the data extracted from the selected articles. The review was categorised according to the following themes: neighbourhood social environment, neighbourhood physical environment and place attachment. The findings show that the majority of research has investigated the health status of older immigrants, and in particular, the impacts related to the social environments in which they live. The literature review indicated that there is scope for future studies to investigate the impact of the physical neighbourhood environment on this group of people.

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## **OLDER MEN**

260/73 'A lonely old man': empirical investigations of older men and loneliness, and the ramifications for policy and practice; by John Ratcliffe, Andrea Wigfield, Sarah Alden.: Cambridge University Press.

*Ageing and Society*, vol 41, no 4, April 2021, pp 794-814.

Loneliness has become an issue of significant academic, public and policy focus. There has been much research on experiences of loneliness in later life and many accompanying interventions targeting lonely older people. However, there has been a dearth of research on the impact that loneliness can have on older men and the resulting implications for policy and practice. This paper aims to redress this by developing a theoretical framework to improve understanding of older men's constructions and experiences of loneliness. It draws on two qualitative empirical studies: the first explores older men's perceptions of masculinity and loneliness; and the second looks at the effectiveness of a service for older men which was designed to alleviate loneliness among older people more generally. The paper outlines the way in which older men often construct masculinity as an oppressive (hegemonic) requirement, but which can be reformed into 'positive' traits of 'strength of mind', 'responsibility', 'caring', 'helping out', 'doing a favour' and 'giving something back', with a consistent yet implicit assumption that enactment of these denotes a 'proud' masculine identity. Loneliness, on the other hand, is represented as a subordinate social role, both non-masculine and related to marginalising stereotypes of age. This results in the identification of two important implications for the way in which services can assist in the alleviation of loneliness in older men: that men are more likely to engage with a service that can facilitate the construction of a 'proud' masculine identity; and that services which deconstruct hegemonic masculinities, particularly by providing a space where men feel comfortable being emotionally tactile, are likely to be most effective at both alleviating loneliness and promoting overall wellbeing.

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From : <https://doi.org/10.1017/S0144686X19001387>

260/74 'It's most of my life - going to the pub or the group': the social networks of involuntarily childless older men; by Robin A Hadley.: Cambridge University Press.

*Ageing and Society*, vol 41, no 1, January 2021, pp 51-76.

The social networks of older people are a significant influence on their health and wellbeing. Adult children are an important element in their parent's network and provide the majority of informal care. The morphology of personal networks alters with age, employment, gender and relationships. Not having children automatically reduces both vertical familial structure and affects the wider formal and informal social links that children can bring. Childless men are missing from gerontological, reproduction, sociological and psychological research. These fields have all mainly focused on family and women. This paper reports on an auto/biographical qualitative study framed by biographical, feminist, gerontological and lifecourse approaches. Data were gathered from semi-structured biographical interviews with 14 self-defined involuntarily childless men aged between 49 and 82 years old. A latent thematic analysis highlighted the complex intersections between childlessness and individual agency, relationships and socio-cultural structures. The impact of major lifecourse events and non-events had significant implications for how childless people perform and view their social and self-identity. I argue that involuntary childlessness affects the social, emotional and relational aspects of men's lived experience across the lifecourse.

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From : <https://doi.org/10.1017/S0144686X19000837>

## **PALLIATIVE CARE**

260/75 Cost comparison of different models of palliative care delivery; by Tracy Comans, Kim-Huong Nguyen, Fiona Stafford-Bell, Meera Agar.: Wiley.

*Australasian Journal on Ageing*, vol 40, no 1, March 2021, pp 90-93.

The aim of this project was to assess the value for money of a modified unit within a residential aged care facility (RACF) for people requiring palliative care at the end of life.

A three-way comparison using a mixed-method costing was used to estimate the per day cost of the unit

compared to care in a palliative care unit within a hospital and a standard RACF bed. The cost of the unit was estimated at \$242 per day (2015 Australian dollars). The palliative care hospital bed cost \$1,664 per day. The cost of a standard RACF bed was \$123 per day, indicating that an additional \$120 per day is required to provide the higher level of care required by people with complex palliative care needs.

A modified RACF unit could provide substantial cost savings to the health budget for selected complex palliative care patients.

ISSN: 14406381

From : <https://doi.org/10.1111/ajag.12843>

## **PARTICIPATION**

260/76 Does training in co-production lead to any real change in practice?: Reflections from practitioners in Northern Ireland; by Sonia Patton, Anne McGlade, Joe Elliott.: Emerald. Journal of Integrated Care, vol 29, no 2, 2021, pp 141-152.

This paper explores the perceptions of a small cohort of participants in the 'Involving People' programme. This 35-week course recruited staff from across statutory, voluntary and charity sectors who aimed to lead and develop change initiatives within their respective organisations. The study captured staff views on the extent to which their training in co-production enabled them to deliver sustainable service improvement within their organisations.

This was a small scale, qualitative study, using a purposive sampling approach. Of the 18 staff participants, 5 agreed to participate in face-to-face semi-structured interviews. Through a process of free text analysis, several themes and sub-themes were identified.

Several barriers and opportunities were highlighted coupled with suggestions on changes to public service delivery based on equal and reciprocal relationships between professionals, service users and their families. Organisational structures and silo working still act as an inhibitor for real change.

Additionally, it was demonstrated that training in the area of co-production can act as a catalyst for wider service improvements. It can enhance staff confidence to profile the importance of service user involvement, persuading their colleagues of its benefits and challenging practice where co-production is not happening. However, a collective leadership and a shared language on co-production are still needed to develop inclusive organisational cultures.

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## **PERSONALISATION**

(See 260/76)

## **PHYSICAL ACTIVITY**

260/77 (Re)conceptualising physical activity participation as career; by Victoria J Palmer, James Bowness, Emmanuelle Tulle.: Cambridge University Press.

Ageing and Society, vol 41, no 4, April 2021, pp 936-954.

Physical activity is increasingly positioned as playing an important role in preventing and mitigating many of the decrements associated with biological ageing. As a result, public health messages encourage older people to remain active in later life. Despite this, physical activity participation rates among older adults are low. This may be in part related to the conventional approach to understanding physical activity participation as a product of motivation. The authors contend that this approach does not allow for a deeper exploration of the wider structural, historical and discursive contexts in which physical activity participation occurs. Therefore, they propose that physical activity can be reconceptualised as a career. Through a synthesis of findings from four studies exploring physical activity experiences in later life, they demonstrate that beginning and maintaining a physical activity career requires a disposition towards physical activity, the legitimisation of physically active practices and dealing with contingencies. In addition, they demonstrate that maintaining a physical activity career requires investment and deliberation to adapt physical activity practices continually within an individual's own personal biography. As such, the authors conclude that current strategies to promote physical activity to older adults are unlikely to result in increased levels of participation. To promote physical activity to older adults an understanding of how structural, cultural and historical contexts influence participation is needed.

ISSN: 0144686X From : <https://doi.org/10.1017/S0144686X19001430>

260/78 Promoting adherence to organised physical activity among socially disadvantaged older people; by Tracy Nau, Genevieve Nolan, Ben J Smith.: Cambridge University Press.

Ageing and Society, vol 41, no 2, February 2021, pp 421-438.

Group-based physical activity (PA) in community-based settings represents a promising avenue for promoting healthy ageing, however, lower levels of adherence have been found to be associated with aspects of social disadvantage. Providers are in a key position to provide important insights about strategies to improve adherence, however, few studies have examined their perspectives. In this study,

30 community service providers were interviewed, and 42 older people participated in focus groups to identify actions perceived as effective for promoting adherence to organised PA, with a focus on factors relevant to older people experiencing socio-economic disadvantage, social isolation, living with a disability or from culturally and linguistically diverse backgrounds. Data were analysed thematically. Adherence barriers included deteriorating health, lack of belonging and loss of motivation. Helpful strategies for addressing deteriorating health included maintaining programme flexibility, facilitating access to health and other services, and supporting participants to adapt to acquired limitations. Belonging can be fostered by creating positive and inclusive experiences, ensuring safe and stigma-free environments, providing opportunities to forge personal connections and demonstrating care. Motivation may be enhanced by ensuring activities are of interest and functional benefit, programme settings are suitable and appealing, and enjoyment is prioritised. In conclusion, a range of strategies is likely to be necessary to mitigate risks to adherence and support continued participation in organised PA among socially disadvantaged older people.

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From : <https://doi.org/10.1017/S0144686X19001132>

260/79 The role of individual resources, health behaviour and age perception as determinants of sports participation in older age; by Eric Fass, Torsten Schlesinger.: Cambridge University Press.

*Ageing and Society*, vol 41, no 4, April 2021, pp 746 - 772.

Sports participation contributes to maintaining health and wellbeing in old age, hence a deeper understanding of its various determinants is necessary. Previous research has primarily focused on either the effects of individual resources or age-specific attitudes to sports participation. However, a deeper understanding of the inter-relationships between these variables is required to develop effective policies to promote sports participation in ageing societies. To address the hypothesised inter-relationships, we consider both individual resources as well as age-specific attitudes and behaviours in order to integrate them simultaneously in our analysis. Furthermore, the analysis will be differentiated according to the three social status groups. The sample contains 1,560 retired persons, aged 65 years and older, based on the fifth wave (2014) of the German Ageing Survey. Multiple Poisson regression models were estimated to test our hypotheses. After adjusting for demographic variables, greater individual resources are associated with more regular sports participation. The findings also reveal that positive age perception and healthy behaviours are related to sports participation. Slight mediation effects between the different variables can be observed. Furthermore, the effect structures vary across different social status groups. The findings show that both individual resources and age-specific behaviours and attitudes are independent determinants of sports participation in older age. Our results confirm slight inter-relationships between socio-economic resources and age-specific attitudes.

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From : <https://doi.org/10.1017/S0144686X19001260>

## RESIDENTIAL AND NURSING HOME CARE

(See Also 260/2, 260/11, 260/23, 260/25)

260/80 Development of a Toolkit to support sustainable culture change in residential aged care; by Christopher Etherton-Ber, Barbara Horner, Lorraine Venturato, Rosemary Saunders, Leon Flicker.: Wiley. *Australasian Journal on Ageing*, vol 40, no 1, March 2021, pp 77-83.

This study aimed to develop and evaluate a Toolkit to support implementation of the Towards Organisational Culture Change (TOCCCh) intervention, with minimal external facilitation, in aged care facilities, to implement long-lasting organisational change.

Eight residential aged care facilities across two Australian states participated. A Toolkit was drafted iteratively, engaging staff from participating sites and a reference group. Participating facilities undertook two change projects utilising the Toolkit. Qualitative data were collected from site project sponsors, work teams and other care staff, and analysed thematically.

The intervention was perceived to provide a generic approach that could be applied to solve agreed challenges in the workplace generating useful outcomes including staff development, increased communication, teamwork and leadership. The role of a project sponsor, and organisational support, was perceived as important for sustainability.

Aged care facility staff teams report they can work together effectively for sustainable improvements when provided with a Toolkit.

ISSN: 14406381

From : <https://doi.org/10.1111/ajag.12890>

## RETIREMENT

- 260/81 Healthy retirement begins at school: educational differences in the health outcomes of early transitions into retirement; by Kasim Allel, Ana Sofia León, Ursula M. Staudinger, Esteban Calvo.: Cambridge University Press.  
Ageing and Society, vol 41, no 1, January 2021, pp 137-157.  
The literature on socio-economic variations in the association between retirement timing and health is inconclusive and largely limited to the moderating role of occupation. By selecting the sample case of Mexico where a sizeable number of older adults have no or very little formal education, this study allows the moderating role of education to be tested properly. Drawing on panel data for 2,430 individuals age 50 and over from the Mexican Health and Aging Study (MHAS) and combining propensity score matching models with fixed-effects regressions, this article investigates differences in the health effects of retirement timing between older adults with varying years of education. Subjective health is measured using a self-reported assessment of respondents' overall health and physical health as a reverse count of doctor-diagnosed chronic diseases. The results indicate that early transitions into retirement are associated with worse health outcomes, but education fully compensates for the detrimental association with subjective and physical health, while adjusting for baseline health, demographics and socio-economic characteristics. In conclusion, formal education during childhood and adolescence is associated with a long-term protective effect on health. It attenuates negative health consequences of early retirement transitions. Policies and programmes promoting healthy and active ageing would benefit from considering the influence of formal education in shaping older adults' health after the transition into retirement.  
ISSN: 0144686X  
From : <https://doi.org/10.1017/S0144686X19000928>
- 260/82 The impacts of gender on seasonal retirement mobility and wellbeing; by Honggang Xu, Yuting Wang.: Cambridge University Press.  
Ageing and Society, vol 41, no 1, January 2021, pp 187-207.  
With the increase in personal mobility and improvements in living standards, seasonal mobility for health reasons is a well-observed phenomenon among retired people worldwide. Existing studies have shown that there are relationships between seasonal retirement mobility and wellbeing, and this study attempts to explore the effects of gender on these relationships. The framework of therapeutic mobility, which includes daily activities, sociality and context, was used to analyse this relationship. Qualitative methods including semi-structured interviews, non-participatory observation and mobile ethnography were used to collect data. This study finds that female seasonal senior migrants in Sanya have more abundant and meaningful daily activities and receive more emotional supports, and as a result, gain more benefits than males, and that these differences are related to their gender roles. Furthermore, while gender itself cannot explain all the differences, it works within the intersection of economic condition, age and family support. This study has enriched the literature on therapeutic mobility and has practical implications.  
ISSN: 0144686X  
From : <https://doi.org/10.1017/S0144686X19001004>

## RURAL ISSUES

- 260/83 Age-friendly care for older adults within rural Australian health systems: an integrative review; by Rachel Winterton, Suzanne Hodgkin, Samantha Jane Clune, Kathleen Brasher.: Wiley.  
Australasian Journal on Ageing, vol 40, no 1, March 2021, pp 16-34.  
The objectives of this study were to identify the core elements of interventions and models that facilitate age-friendly care for older adults within rural Australian health systems, and assess the extent to which these align with core elements of the Institute for Health Improvement's (IHI) Age-Friendly Health Systems 4Ms Model.  
Peer-reviewed journal articles examining core elements of Australian rural geriatric care models were collected and analysed using an integrative review methodology.  
Identified models and interventions addressed all four core elements of the IHI model: what matters, medications, mobility and mentation. There was more evidence relating to mobility and mentation, with lesser evidence relating to medications and what matters. A series of core elements not aligned with the model were also identified.  
The IHI 4Ms Model appears to be applicable in the rural Australian context. More high-quality, systematic evidence is needed to investigate the core elements of age-friendly care across diverse rural context  
ISSN: 14406381  
From : <https://doi.org/10.1111/ajag.12834>

- 260/84 A decade of rural ageing research in the Australasian Journal on Ageing; by Rachel Winterton, Marguerite Bramble (eds): Wiley.  
Australasian Journal on Ageing, vol 40, no 1, March 2021, pp 12-15.  
Over a decade ago, Davis and Bartlett published a seminal review on healthy ageing in rural Australia in the Australasian Journal on Ageing (AJA). This paper identified a series of issues and challenges associated with maintaining health in rural settings in older age. These encompassed challenges associated with rural living, social capital and social infrastructure, and healthy ageing and health care. This editorial explores the extent to which rural ageing scholarship within AJA has addressed the issues and challenges identified in the Davis and Bartlett review. In doing so, it highlights key articles published in the last decade. In May 2020, a search of AJA articles published from 2009 onwards using the key terms rural, regional, remote and non-urban was conducted in PubMed. Sixty papers were retrieved with titles and abstracts and then reviewed to exclude non-relevant papers (papers that were not based on Australian research, and papers that did not have rural-specific findings). Remaining papers were then categorised into the three key subject areas (rural living, social capital and infrastructure, and healthy ageing/health care), with papers addressing these areas included.  
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From : <https://doi.org/10.1111/ajag.12879>

### **SEXUALITY**

(See 260/9)

### **SOCIAL INCLUSION**

(See 260/13)

### **SOCIAL NETWORKS**

(See 260/74)

### **TELEHEALTH AND TELECARE**

- 260/85 Carers' involvement in telecare provision by local councils for older people in England: perspectives of council telecare managers and stakeholders; by Nicole Steils, John Woolham, Malcolm Fisk, Jeremy Porteus, Kirsty Forsyth.: Cambridge University Press.  
Ageing and Society, vol 41, no 2, February 2021, pp 456-475.  
This paper explores telecare manager and other 'stakeholder' perspectives on the nature, extent and impact of family and other unpaid/informal carers' involvement in the provision of telecare equipment and services for older people. Data used in the paper are derived from a larger study on telecare provision by local councils in England. The paper aims to add to the growing evidence about carers' engagement with electronic assistive technology and telecare, and considers this in the context of typologies of professionals' engagement with carers. How carers are involved in telecare provision is examined primarily from the perspectives of senior managers responsible for telecare services who responded to an online survey and/or were interviewed in 2016 as part of a wider study. The perspectives of three unpaid carers were captured in a separate strand of the main study, which comprised more detailed case study interviews within four selected councils. Thematic and comparative analysis of both qualitative and quantitative survey data revealed the varied involvements and responsibilities that carers assumed during the telecare provision process, the barriers that they needed to overcome and their integration in local council strategies. Findings are discussed in the context of Twigg and Atkin's typology of carer support. They suggest that carers are mainly perceived as 'resources' and involvement is largely taken for granted. There are instances in which carers can be seen as 'co-workers': this is mainly around responding to alerts generated by the telecare user or by monitored devices, but only in those councils that fund response services. Though some participants felt that telecare devices could replace or 'supersede' hands-on care that involved routine monitoring of health and wellbeing, it was also acknowledged that its use might also place new responsibilities on carers. Furthermore, the study found that meeting carers' own rights as 'co-clients' was little acknowledged.  
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From : <https://doi.org/10.1017/S0144686X1900120X>

### **WELLBEING**

(See 260/58, 260/67)