

New Literature on Old Age

EDITOR

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ABUSE, SAFEGUARDING AND PROTECTION

(See Also 263/137)

- 263/1 Elder abuse and neglect in nursing homes as a reciprocal process: the view from the perspective of care workers; by Ana Paula Gil, Manuel Luis Capelas.: Emerald.
Journal of Adult Protection, vol 24, no 1, 2022, pp 22-42.
Reciprocal abuse inside care practices remain under-studied due to their invisibility and further research is required. The purpose of this paper was to explore different levels of conflicts inside organisations. The study was based on a self-administered questionnaire filled out by 150 care workers in 16 Portuguese care homes. Results indicated that overall, 54.7% of care workers had observed abuse in their daily practice in the preceding 12 months: 48.7% psychological; 36.0% neglectful care practices; 14.0% physical and 3.3% financial abuse. The figures decreased significantly as regards abuse committed themselves, with 16.7% of those admitting to having committed at least one of these behaviours. The highest figures were also recorded for psychological abuse (13.3%) and neglect (6.7%). There was a statistically significant relationship between abuse committed by care workers and abuse committed by residents. Overall 52.0% of care workers reported having been the target of at least one such behaviour by residents. This paper had its limitations as the sample consisted of only 16 nursing homes (12 not-for-profit and four for-profit nursing homes). The fact that only four of the 16 homes were for-profit was a potential limitation both in general and in particular because research has shown that lower quality of care and elder abuse and neglect are more common in for-profit nursing homes at least in Portugal. The results were also based on self-reported measures. Factors enhancing a reciprocal process of abuse included a reactive behaviour, the risk of retaliation after a complaint, the difficulty in dealing with dementia and the residents' aggressive behaviour, an absence of a training and support policy in an environment where difficult working conditions prevailed. Conflict was found to be much more than reducing an interpersonal relationship problem between residents and staff and extending to the whole organisation. There are still uncertainties on how organisations, staff and residents interact between themselves and affect care practices. (JL)
From : <https://doi.org/10.1108/JAP-06-2021-0021>
- 263/2 Remote support to victims of violence against women and domestic violence during the COVID-19 pandemic; by Sónia Maria Martins Caridade, Rosa Saavedra, Rita Ribeiro (et al).: Emerald.
Journal of Adult Protection, vol 23, no 5, 2021, pp 302-316.
This paper aimed to characterise the type of support provided to victims of violence against women and domestic violence (VAWDV) during the first lockdown, assessing the training of professionals to use remote support (RS). This cross-sectional study involved a sample of 196 support professionals, mainly women (91.8%) and who integrated the Portuguese National Support Network for victims of domestic violence (NSNVDV). Telephone emerged as the main RS communication media used in the lockdown (43.9%) and the emergency state periods (57.1%). Participants reported to have never used any social applications (41.8% vs 41.8%) or videoconference (46.4% vs 58.2%), in both periods assessed, i.e. lockdown and emergency state, respectively, and 82.7% assumed to have no training with RS to assist VAWDV victims. However support professionals recognised several advantages in using RS such as dealing with isolation, reducing inhibition, fear and shame and in promoting the victims' empowerment. Given the exploratory nature of this study, only descriptive analyses were conducted. Little is known about effective RS given by professionals to victims of VAWDV during the COVID-19 pandemic in the Portuguese context. The paper aims to add knowledge to the studied field. (JL)
ISSN: 14668203
From : <https://doi.org/10.1108/JAP-04-2021-0015>
- 263/3 Sexual assault of older people by hospital staff in England; by Amanda Warburton-Wynn.: Emerald.
Journal of Adult Protection, vol 24, no 1, 2022, pp 54-56.
A research paper was published in October 2021 highlighting results of freedom of information (FOI) requests sent to National Health Service (NHS) Trusts in England. The FOI requests asked for the number of incidents of sexual assault reported by hospitals where the victim was aged over 60 and the alleged perpetrator was a member of staff. The methodology involved sending FOI requests to all 206 NHS hospital Trusts in England requesting information on reported incidents of sexual assault against patients over 60 years old from 2016/17 to 2020/21, where the alleged perpetrator was a member of staff (including agency staff). Along with the number of reports, the FOI request also asked for the sex of the victim and alleged perpetrator, whether the incident was reported to police, the outcome of the police investigation and whether any internal disciplinary processes were followed. Of the hospitals that responded with some data (others were nil return), 56 individual reports meeting the criteria of the FOI were identified. A further 19 hospitals advised that they held reports of such incidents but under general data protection regulations they were unable to disclose exact numbers. Overall findings revealed that there were at least 75 reports of sexual assault on patients over 60 by hospital staff in the previous five years. The findings also showed that whilst the majority of victims were female, 30% were male and that a disappointing number were reported to police _ only 16. Of these, 14 were closed as 'No Further Action' by the police. (JL)
From : <https://doi.org/10.1108/JAP-11-2021-0040>

- 263/4 Theoretical approaches to elder abuse: a systematic review of the empirical evidence; by Joao Filipe Fundinho, Diana Cunha Pereira, José Ferreira-Alves.: Emerald. Journal of Adult Protection, vol 23, no 6, 2021, pp 370-383. The study of theoretical models explaining elder abuse has been one of the main gaps in the literature. This study aimed to conduct a systematic review to examine research supporting or opposing six theories of elder abuse: caregiver stress theory, social exchange theory, social learning theory, bidirectional theory, dyadic discord theory and the psychopathology of the caregiver. Seven databases were searched six times using different keywords about each theory. The paper found 26,229 references and then organised and analysed these references using pre-established criteria. In total 89 papers were selected which contained 117 results of interest. These papers were summarised and assessed for conceptual, methodological and evidence quality. The results showed evidence in favour of all the explored theories except for social learning theory, whose results indicated multiple interpretations of the theory. The study finishes by proposing that each of these theories might explain different facets of elder abuse. More research is necessary to understand how the predictions of these different theories interact. (JL) ISSN: 14668203 From : <https://doi.org/10.1108/JAP-04-2021-0014>

ACTIVE AGEING

- 263/5 Is ageing becoming more active?: Exploring cohort-wise changes in everyday time use among the older population in Sweden.; by Bertil Vilhelmson, Eva Thulin, Erik Elldér. European Journal of Ageing, August 2021. The time older people spend on various daily activities is critical for their health and well-being. New generations of older adults are increasingly expected to participate in 'active' activities. We explore shifts in active time use among upcoming cohorts of older people in Sweden. Recognizing the diverging meanings associated with the active ageing concept, we develop a classification model comprising the spheres of work, social engagement, and active leisure. We observe differences in time use of the 'older middle-aged' (pre-retirement), 'young old', and 'older old' observed in 2000/2001 and 2010/2011. We draw on two cross sections of Swedish time-use survey data covering 120 activities related to people's everyday lives. We measure between-cohort differences in mean time use and employ covariate analysis to control for the influence of group-wise changes in socio-demographics. Linear regression is used to explore social differentiation, e.g. the influence of gender. Comparisons between new and previous generations indicate substantial increases in overall active ageing activity: increases by 7 h per week among the older old and 3.5 h among the young old and older middle-aged. New generations spend more time on work, paid or unpaid, and leisure digital interaction; for some, this is counteracted by less free time spent on social engagement. The new generation of the older old group spends more time on outdoor activity and exercise. These time-use patterns are gendered and dependent on education, mainly due to changes in cohort composition. From : <https://doi.org/10.1007/s10433-021-00647-1>

AGE-FRIENDLY COMMUNITIES

(See 263/108, 263/110, 263/112)

AGEING IN PLACE

(See 263/109, 263/113)

AGEISM AND AGE DISCRIMINATION

- 263/6 'Youngsplaining' and moralistic judgements: exploring ageism through the lens of digital 'media ideologies'; by Francesca Comunello, Andrea Rosales, Simone Mulargia (et al).: Cambridge University Press. Ageing and Society, vol 42, no 4, April 2022, pp 938-961. The authors conducted eight focus groups (four with teenagers, four with people aged 65 or older) in two southern European cities (Rome and Barcelona), to explore ageist depictions of both young and older people that emerge from discourses addressing 'other people's' digital media usage practices. By negotiating the affordances and constraints of (digital) tools and platforms, people develop their own usage norms and strategies, which might - or might not - be intersubjectively shared. Discourses surrounding usage practices and norms tend to refer to what people understand as an appropriate way of using digital platforms: these discourses proved to be powerful triggers for expressing ageist stereotypes. 'The others' were depicted, by both teenage and older participants, as adopting inappropriate usage practices (with regard to content, form, skills and adherence to social norms). These reflections proved to have broader implications on how other age cohorts are perceived: participants tended to take discourses on digital media usage as an opportunity for making generalised judgements about 'the others', which address their manners, as well as their attitude towards communication and social life. Inter-group discrimination processes and ageist stereotypes play a major role in shaping the strong moralistic and patronising judgements expressed by older and younger participants towards 'the other' age cohort. (RH) ISSN: 0144686X From : <https://doi.org/10.1017/S0144686X20001312>

- 263/7 Value systems as motivational forces for the suppression of ageism towards older people amongst young adults: an analysis across countries; by Adrian Stanciu.: Cambridge University Press. *Ageing and Society*, vol 42, no 4, April 2022, pp 868-895.
What explains ageism towards older people? Several answers exist in the literature, but it is still unclear whether the ageism people express has been altered by motivational forces (i.e. factors which carry or enact motivation, leading to action or thought) or whether an original, primal ageism can be expressed directly. Investigating populations of young adults (45 and younger), this article suggests that value systems are sources of internal and external motivational forces which work to either suppress or to justify both subtle and blatant forms of ageism. It was hypothesised that, at the individual level, values precede any threat perception and negative stereotypical beliefs associated with older people, leading to forms of ageism which match the motivational goals of a person's values. It was further expected that, at the cultural level, values represent the climate in which people express ageist beliefs. It was found that self-transcendence values can bypass the negative effects of threat perception and negative stereotypes, resulting in less-negative forms of ageism. A sample comprising a clear majority of hierarchical, non-Western cultures showed that self-enhancement values also contributed motivational strength for the suppression of blatant ageism. A practical implication of these findings is the possibility of further developing existing strategies of combating ageism by working to effect appropriate long-term changes in the values of young adults. (RH)
ISSN: 0144686X
From : <https://doi.org/10.1017/S0144686X20001257>

ALCOHOL AND DRUG MISUSE

- 263/8 Can we talk about it?: A qualitative study exploring occupational therapists' decision making in judging when to ask an older person about drinking alcohol; by Fiona Maclean, Jan Dewing, Sarah Kantariz (et al.): Cambridge University Press. *Ageing and Society*, vol 42, no 3, March 2022, pp 521-538.
Older people now currently drink alcohol more frequently than previous generations, indicating a need to understand how this influences health and well-being in older adults. However, knowledge and awareness of the changing role alcohol plays in older people's lives is not necessarily widely understood by allied health professionals in acute hospital contexts. In turn, conversations about drinking alcohol in later life may not be routinely addressed as part of practice, limiting an older person's choice to make informed decisions about their drinking. This paper qualitatively examines when occupational therapists (N = 17) in an acute hospital setting in Scotland will initiate a conversation with older people (age 65+) about their drinking, guided by a theoretical lens that encompasses both person-centredness and collective occupation. Adopting a qualitative methodology, this study illustrates a typology of reasoning describing how, and in what circumstances, therapists ask older people about their alcohol use. Three themes were generated that provide further insight into the typology, these being 'hesitancy in practice', 'failure to link life transitions to alcohol use' and 'challenges of focusing on healthfulness'. These findings provide a potentially useful tool for therapists, services and organisations to self-assess their approach to asking older people about alcohol use: a necessary element of professional health-care practice as social trends in alcohol use continue to increase. (RH)
ISSN: 0144686X
From : <https://doi.org/10.1017/S0144686X20000951>

ANXIETY

- 263/9 Anxiety, isolation and diminishing resources: the impact of COVID-19 pandemic on residential care home facilities for older people in south-east Nigeria; by Prince Chiagozie Ekoh.: Emerald. *Working with Older People*, vol 25, no 4, 2021, pp 273-282.
Institutionalised older adults in care homes and long-care facilities have been identified as being at greater risk of COVID-19 related morbidity and mortality. This paper aimed to explore the impact of COVID-19 on care homes in south-east Nigeria given the recent increasing popularity of care homes in that country. The study adopted qualitative research methods and data was collected from 10 older residents and five caregivers using interviews from two care homes while ensuring the safety of the researcher and participants. The collected data was analysed using thematic analysis. Findings revealed that the physical health impact of the pandemic was not a major problem in the homes. However fear and anxiety, social disconnection and economic hardship were the major problems identified by all concerned. The popularity of care homes in Nigeria is growing as family structures continue to change. However previous studies which have revealed the devastating effect of COVID on institutionalised older adults have been from the global north. This is the first study designed to bridge the gap in literature and contribute to knowledge on this topic from Nigeria and Sub-Saharan Africa. (JL)
ISSN: 13663666
From : <https://doi.org/10.1108/WWOP-01-2021-0001>

ARTS, CRAFT AND MUSIC

- 263/10 Pleasure and time in senior dance: bringing temporality into focus in the field of ageing; by Clary Krekula.: Cambridge University Press.
Ageing and Society, vol 42, no 2, February 2022, pp 432-447.
Population ageing and discourses on healthy ageing have led to a growing interest in social dancing for seniors. While senior dance has been described as both common and contributing to good health, the fundamental connection between bodily and temporal dimensions has been fairly neglected.
Based on qualitative interviews with 25 women and eight men, aged 52-81, in Sweden, this article aims to shed light on the pleasurable experiences of senior dance. The results illustrate that the pleasurable experiences of dancing can be understood as three different experiences of temporality: embodied experience of extended present; an interaction with synchronised transcending subjectivities; and age identities with unbroken temporality. The results also highlight the central role that temporal aspects play in processes around subjectivities in later life, as well as the close connection between ageing embodiment and temporality. They also illustrate the ability of dance to create well-being, not only through its physical elements, but also through the sociableness that constitutes the core of dancing. In light of these results, the article argues that the temporal processes relate to individuals' diverse relationship with the world and that they therefore play a central role in subjective experiences of ageing. (RH)
ISSN: 0144686X
From : <https://doi.org/10.1017/S0144686X20000926>
- 263/11 Remembering the past, enhancing the present and sharing the future: a qualitative study of the impact of film screenings in care home communities; by Jenna P Breckenridge, Thilo Kroll, Gavin Wylie, Ana Salzburg.: Cambridge University Press.
Ageing and Society, vol 41, no 11, November 2021, pp 2615-2640.
Many care home residents lack opportunities for meaningful activity and social connection, resulting in poor physical and emotional well-being. Providing residents with varied activities and social opportunities can improve their quality of life. In this paper, the authors examine the potential for film to provide a meaningful, social activity. The limited existing research on film in care homes has predominantly examined the use of film clips and materials in stimulating reminiscence for people with dementia. The authors adopt a broader, transdisciplinary perspective of film, drawing on evidence from Film Studies that shared spectatorship has social and emotional benefits for the viewer. The authors offer the first qualitative study of care home residents' social, emotional and embodied engagement with feature length film and identify the key benefits of film in this setting. They ran social film screenings in two Scottish care homes over six weeks. Underpinned by psychocinematic theory, their study collected and analysed observational data alongside interviews with care home staff and discussion groups with residents. Their findings identified three ways in which film screenings benefit residents and supports social connection: prompting reminiscence; enhancing residents' experiences in the present; and creating a shared future and intergenerational connections. The paper offers useful insights into the rich potential for film to enhance the care home community, facilitate social connectivity and promote resident well-being. (RH)
ISSN: 0144686X
From : <https://doi.org/10.1017/S0144686X20000501>
- 263/12 What's it worth?: Value and valuation of late-life creativity; by Vera Gallistl.: Cambridge University Press.
Ageing and Society, vol 41, no 11, November 2021, pp 2599-2614.
This article emphasises late-life creativity as a process of value production that is structured by the making and evaluating of creative products. Data from 13 interviews with older adults (age 60+) involved in creative practices in Austria are used to explore this theme. Interviews examined perceptions of creative production, everyday routines and personal attitudes towards ageing.
Interviews transcripts were analysed using the documentary method. The analysis revealed three registers of valuation in late-life creativity. First, economic value, in which valuable creativity was given away at a high revenue. Second, field value, where valuable creativity was appreciated by institutions or other artists in the field. Third, lifecourse value, in which doing a creative activity for a long time meant being able to produce a creative product that was high in value. The results demonstrate the potential for valuation studies in gerontology: they highlight the circumstances and practices by which the activities of older adults are (de)valued. For policy and practice, this article suggests imagining arts-based interventions for older adults beyond the realm of health and well-being. The article also encourages thinking about how valuable artistic experiences can be supported in later life. (RH)
ISSN: 0144686X
From : <https://doi.org/10.1017/S0144686X20000495>

ASSESSMENT

- 263/13 Do assessment tools shape policy preferences?: Analysing policy framing effects on older adults' conceptualisation of autonomy; by Daniel Dickson, Patrik Marier, Anne-Sophie Dube.: Cambridge University Press.
Journal of Social Policy, vol 51, no 1, January 2022, pp 114-131.
The concept of autonomy is essential in the practice and study of gerontology and in long-term care policies. For older adults with expanding care needs, scores from tightly specified assessment instruments, which aim to measure the autonomy of service users, usually determine access to social services. These instruments emphasise functional independence in the performance of activities of daily living. In an effort to broaden the understanding of autonomy into needs assessment practice, the province of Québec (Canada) added social and relational elements into the assessment tool. In the wake of these changes, this article studies the interaction between the use of assessment instruments and the extent to which they alter how older adults define their autonomy as service users. This matters, since the conceptualisation of autonomy shapes the formulation of long-term care policy problems, influencing both the demand and supply of services and the types of services that ought to be prioritised by governments. Relying on focus groups, this study shows that the functional autonomy frame dominates problem definitions, while social/relational framings are marginal. This reflects the more authoritative weight of functional autonomy within the assessment tool and contributes to the biomedicalisation of ageing. (RH)
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ASSISTIVE TECHNOLOGY

(See 263/78)

ATTITUDES TO AGEING

(See Also 263/58, 263/70, 263/77)

- 263/14 (Non-)Stereotypical representations of older people in Swedish authority-managed social media; by Wenqian Xu.: Cambridge University Press.
Ageing and Society, vol 42, no 3, March 2022, pp 719-740.
Social media facilitates the sharing of ideas, thoughts and information about older people and later life through online networks and communities in contemporary society. Social media content about older people has become important for understanding media representations of older people, but it has not been sufficiently studied. Recent studies suggest that older people are predominantly represented as a disempowered, vulnerable and homogeneous group on social media sites, such as Facebook and Twitter. Because local authorities in many countries have begun using Facebook to reach out to and interact with citizens, they are seen as a significant producer of media content about older people and later life. The purpose of this study is to examine the ways in which Swedish local authorities have visually portrayed older people in their use of Facebook compared with other age groups. This research performed a visual content analysis of 1,000 Facebook posts posted by 33 Swedish local authorities, employing ten analytical aspects to describe and interpret the signs, activities and contexts associated with older people and other age groups (infants, children, adolescents and adults). The study found that the representations of older people on the Facebook pages of local authorities appeared to be not very diverse; specifically, older people (including those in residential care homes) were mainly portrayed as remaining socially engaged and moderately physically capable. This media representation destabilised the prevalent negative stereotypes of older people as being out of touch and dependent; however, it collided with the reality of older individuals with care needs. Additionally, this study argues that older people are represented as inferior to the young in terms of physical and technological competence, based on the connotations of the signs. Given that local authorities have progressively incorporated social media into their daily work, it is expected that this study will contribute to a greater understanding of the ways in which local authorities produce (non-)stereotypical representations of older people on social media. (RH)
ISSN: 0144686X
From : <https://doi.org/10.1017/S0144686X20001075>

- 263/15 Diversity and age stereotypes in portrayals of older adults in popular American primetime television series; by Cedomir Markov, Youngmin Yoon.: Cambridge University Press.
Ageing and Society, vol 41, no 12, December 2021, pp 2747-2767.
To examine the prevalence and diversity of older adults on primetime television, and age stereotyping in these portrayals, this study analysed the contents of 112 episodes of popular American television series aired between 2004 and 2018. The study identified 6.6 per cent of characters as aged 65 and older, a slight improvement to the values reported in previous studies. However, older adult characters are still grossly under-represented, considering the actual proportion of older adults in the general population of the United States of America. Further, the typical older character was young-old, male, Caucasian, middle-class, able-bodied and straight - if his sexuality was referenced. Older women still face double

discrimination in media representations. In addition, older adult characters with ethnicities other than Caucasian and African American are virtually invisible in primetime fiction series. Similarly, old-old characters, sexual minorities and people with disabilities are particularly rare among older adult characters in this type of programming. Finally, portrayals of 51.9 per cent of characters included at least some elements of age stereotypes, most of which were positive. The most commonly applied positive and negative stereotypes were found to be "the golden ager" and "the shrew", respectively. The findings are discussed in the context of the dominant discourse of ageing, and the potential implications of how various social groups perceive ageing and older adults. (RH)

ISSN: 0144686X

From : <https://doi.org/10.1017/S0144686X20000549>

- 263/16 Older people as represented in English quality newspapers; by Giulia Rovelli.: Emerald. Working with Older People, vol 25, no 3, 2021, pp 183-192.
This paper aimed to study how older people and old age have been portrayed in English quality newspapers from 1989 to 2018 by comparing newspaper articles and readers' letters to the editor. The study followed the methodology of corpus-assisted discourse analysis and examined a corpus of readers' letters to the editor and newspaper articles published in The Guardian and The New York Times, paying particular attention to the use and evolution of terminology and related stereotypes. The investigation revealed how the portrayal of old age in newspaper articles and readers' letters to the editor has mostly evolved symmetrically, with negatively connoted terms, including 'elderly', 'old' and 'aged', which are generally perceived as unrepresentative of the new generation of older people, being replaced by more neutral or euphemistic expressions such as 'older' and 'senior'. The analysis provides an interesting insight into how both the language and the discourse surrounding old age has evolved in the past few decades to accommodate to a changing society, taking into consideration how different professional and social groups, including older people themselves, represent and portray such an important life stage. (JL)
ISSN: 13663666
From : <https://doi.org/10.1108/WWOP-06-2021-0034>
- 263/17 Older women using women's magazines: the construction of knowledgeable selves; by Dana Sawchuk, Mina Ly.: Cambridge University Press. Ageing and Society, vol 42, no 4, April 2022, pp 765-785.
Women's magazines are widely read in Canada. The popularity of such magazines is significant because critical gerontologists, primarily drawing on content analyses of the magazines, often argue that these publications convey problematic messages about ageing. This article broaches the subject of women's magazines and ageing from a different vantage point, that of the older woman reader herself. In audience-centred research based on 21 semi-structured interviews with Canadian women over the age of 55, this study examines what older women say about the ageing-related content of women's magazines, along with what they say about how, when and why they read these magazines. Findings illustrate that participants are aware of the inadequate and unrealistic representations of older women in women's magazines. Nonetheless, they value the publications as a source of practical information on a variety of topics and as a light and undemanding source of entertainment and relaxation. The study reveals how participants assess and deploy magazine contents and characteristics in ways that contribute to (and are informed by) their lives and identities as older women. Against the broader cultural context of ageism, using and talking about women's magazines enables the participants to position themselves as being knowledgeable and informed on a variety of topics and in multiple interactions, both in explicit reference to the magazines themselves and more generally in their lives. (RH)
ISSN: 0144686X
From : <https://doi.org/10.1017/S0144686X20001129>
- 263/18 Othering in media representations of elderly care: using the social justice framework to make sense of public discourses on migrants and culture; by Jonas Lindblom, Sandra Torres.: Cambridge University Press. Social Policy and Society, vol 21, no 2, April 2022, pp 275-291.
Population ageing and international migration are two major societal trends challenging recent European eldercare regimes. Little research has addressed how public discourses about the implications of these trends for such care are shaped in different countries. This study aimed to examine how Swedish daily newspaper reporting on elderly care between 1995 and 2017 depicted the impact of increased ethno-cultural diversity on this sector. Through content analysis this study brought attention to the representations of migrants and culture that this reporting has deployed and the rhetorical practices that the reporting has relied on (i.e. genre stratification, hegemonisation, homogenisation, normative referencing and idealisation/ diminishment). The study exposes how the 'othering' of migrants is accomplished in Sweden's daily newspaper reporting on eldercare and problematises the ethea of inclusiveness and equality of care with which this welfare sector has become associated. (JL)
ISSN: 14747464
From : <https://doi.org/10.1017/S1474746421000154>

- 263/19 Perceptions and expectations of filial piety among older Chinese immigrants in Canada; by Weiguo Zhang.: Cambridge University Press.
Ageing and Society, vol 42, no 3, March 2022, pp 497-520.
Much of the literature discusses filial piety in general and ambiguous terms. In contrast, this study investigates specific perceptions of filial piety (or xiao) and parental expectations of filial duty among older Chinese immigrants in Canada. The study is based on thematic analysis of 46 Chinese immigrants in seven focus groups conducted in the Greater Toronto Area. Findings show the perceptions of filial piety varied, but almost all participants had reduced expectations of their children. Nevertheless, they still valued and expected emotional care from their children. The study argues that changes in institutional settings, social policies and welfare systems define parents' support needs and affect their expectations in the host society, while norms and institutional settings in the place of origin influence their perceptions of filial piety. (RH)
ISSN: 0144686X
From : <https://doi.org/10.1017/S0144686X20000902>
- 263/20 Reframing language, disrupting aging: a corpus-assisted multimodal critical discourse study; by Rosita Belinda Maglie, Laura Centonze.: Emerald.
Working with Older People, vol 25, no 3, 2021, pp 253-264.
The purpose of this paper was to explore two channels of communication (i.e. texts and images) from a non-governmental organisation website called #DisruptAging with the aim of finding how multimodal knowledge dissemination contributes to dismantling misconceptions about the ageing process. This analysis was based on an integrated approach that combined corpus-assisted discourse analysis (cf. Semino and Short, 2004; Baker et al., 2008, Baker, 2010) and multimodal critical discourse analysis (Machin and Mayr, 2012) via the American Medical Association format (2007) and the suite of FrameWorks tools (2015, 2017), which were applied to the collection of texts and images taken from #DisruptAging. A total of 69 stories corresponding with 218 images of older adults have shown to be powerful textual and semiotic resources, designed both for educational and awareness-raising purposes, to promote the so-called 'ageing well discourse' (cf. Loos et al., 2017). This discursive approach to the textual and visual material found in #DisruptAging hopes to influence the governing institutions that are constructed, and the people who are given power to run them, with the goal of fostering fair treatment of older people within society. There are few studies investigating counter-discourse forms available online, which use textual and visual language to change the way society conceives the idea of ageing. (JL)
ISSN: 13663666
From : <https://doi.org/10.1108/WWOP-06-2021-0032>
- 263/21 The relative importance of personal beliefs, meta-stereotypes and societal stereotypes of age for the wellbeing of older people; by Nicole Fasel, Christin-Melanie Vauclair, Maria Luísa Lima, Dominic Abrams.: Cambridge University Press.
Ageing and Society, vol 41, no 12, December 2021, pp 2768-2791.
Negative images of old age can harm older individuals' cognitive and physical functioning and health. Yet older people may be confronted with age stereotypes that are inconsistent with their own personal beliefs. The authors examine the implications for older people's well-being of three distinct elements of age stereotypes: their personal beliefs about their age group; their perception about how others generally perceive older people (i.e. their meta-stereotypes); and the societal age stereotypes that are empirically widely shared in society. This study uses measures from the Stereotype Content Model and survey data of older people from the United Kingdom (UK) (Study 1, N = 171), which found only partial overlap between older people's personal beliefs and their meta-stereotypes. Personal beliefs were unrelated to well-being, but positive meta-stereotypes of older people's competence were linked to higher well-being. These findings were largely replicated with a sample of baby-boomers from Switzerland (Study 2, N = 400) controlling for socio-demographics. Study 3 used representative survey data (N = 10,803) across 29 European countries, to test and confirm that the link between positive competence meta-stereotypes and well-being can be generalised to different cultures, and that positive warmth meta-stereotypes were an additional predictor. At the country level, societal age stereotypes about competence were positively related to the well-being of older people, but only in countries that provide greater opportunities for competence attainment. (RH)
ISSN: 0144686X
From : <https://doi.org/10.1017/S0144686X20000537>
- 263/22 Who is a "Senior"?: Looking for a definition in the healthcare system; by Monica Consolandi.: Emerald.
Working with Older People, vol 25, no 3, 2021, pp 230-234.
Seniors are at the core of important reflections to understand both how to ensure them a proper quality of life and better recognise their social role, providing them services and proper health care to value them as people and resources. This paper aimed to find a through definition about who is a senior, in the author's opinion the starting point to help them flourishing. As an example of definitions, an online dictionary and two geriatric text-books were quoted, highlighting qualities and rights referred to seniors especially in the delicate context of the health care system. Findings showed that the lack of a commonly shared perspective on this delicate kind of patient entails the difficulty to reach a coherent and satisfying definition about who a senior is. The lack of a commonly shared definition leads to inevitable

misunderstandings and could explain the arduousness of considering seniors in all their aspects. Further investigations are suggested. (JL)

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BLACK AND MINORITY ETHNIC GROUPS

(See Also 263/40)

- 263/23 Employment inequalities among British minority ethnic workers in health and social care at the time of Covid-19: a rapid review of the literature; by Shereen Hussein.: Cambridge University Press. Social Policy and Society, vol 21, no 2, April 2022, pp 316-330.

There are longstanding concerns of inequalities in the workplace among minority ethnic (ME) workers in the UK health and social care (H&SC) sectors. ME workers contribute significantly to H&SC delivery. However there is considerable evidence of substantial negative experiences among this group across various workplace indicators and outcomes, including mistreatment. The COVID-19 pandemic has exacerbated these inequalities with higher infection rates and related deaths among ME health and care workers. A rapid review methodology was employed to examine the work experiences and outcomes of ME workers in H&SC in the UK focusing on low paid workers. The review identified 51 relevant outputs, detailing the nature and extent of inequalities across recruitment, career progression and treatment at work, including bullying and harassment. The findings highlight the impact of the intersectionality of gender, race and migration status concerning the ways inequalities are manifested and operated through individual perceptions and institutional and structural racism. (JL)

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From : <https://doi.org/10.1017/S1474746421000841>

CARE MANAGEMENT

- 263/24 Exploring shared care plans for older people regarding their fulfilment of policy requirements and shared decision making; by Anna Condelius, Magdalena Andersson.

Research on Ageing and Social Policy, vol 9, no 2, 2021, pp 154-183.

The aim was to explore the documentation in shared care plans regarding the fulfilment of policy requirements and shared decision-making. The sample consisted of 15 shared care plans established for older people in Sweden. Analysis was performed using directed content analysis. The requirements in Swedish law and the 15 indicators of shared decision making (SDM) in the Multifocal Approach to the Sharing in SDM inventory were used to define the main categories. The policy requirements were fulfilled to a varied extent. All the care plans were established in collaboration between the municipality and the county council, but social services were not represented in six of them. The older person and next of kin were present at 14 of the care planning meetings. The individual's agreement to the establishment was documented in ten of the plans, but how and what the person had agreed to was not specified further. The headings focused on the policy requirements and did not support a care planning process, or a documentation based on SDM. Six out of 15 indicators of SDM were reflected. The decision-making process needs to be acknowledged more in the process of establishing shared care plans for older people. (OFFPRINT) (RH)

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From : <https://doi.org/10.17583/rasp.2021.7293>

CARERS AND CARING

(See Also 263/18, 263/23, 263/70)

- 263/25 Achieving shared understanding in chronic care interactions: the role of caregivers; by Sarah Bigi.: Emerald.

Working with Older People, vol 25, no 3, 2021, pp 245-252.

Within the context of a research programme on the most relevant discourse types in chronic care medical encounters, this qualitative study from Milan, Italy, reported on the role caregivers play within the process of shared understanding occurring between health care professionals and older patients. The purpose of the paper was to highlight one dimension of such complexity by bringing to light the challenges connected to the achievement of shared understanding between health care professionals and older patients when caregivers were involved in the conversation. The research carried out a two-step analysis of a corpus of transcripts of interactions in diabetes and hypertension settings. In the first step, caregivers' contributions to deliberative sequences were analysed. In the second step the analysis was extended to caregivers' contributions to the whole encounter. Results showed that professionals' ability to engage caregivers in deliberations during the encounter and, more generally, to assign a role to caregivers as legitimate participants in the consultation may favour the smooth development of the interaction and an effective process of shared understanding among all participants. The paper further develops original research about the functions of the argumentative component in dialogues occurring in clinical settings. (JL)

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- 263/26 Corpus-assisted analysis of the collocational profiles of the terms denoting elderly care workers; by Daniel Russo.: Emerald.
Working with Older People, vol 25, no 3, 2021, pp 193-201.
The purpose of this paper was to explore the terms used in the Macmillan Dictionary and the Oxford English Dictionary to identify the people who are paid to provide care to older people and check their presence in a corpus _ professional home care (PHC) _ of three UK-based specialised websites. This study was based on the frameworks and methods of corpus-assisted Discourse Analysis (Baker, 2006). The terms were extracted from a corpus of British websites of companies providing PHC services. This study highlights that in the PHC corpus, the words 'caregiver' and 'carer' are used as synonyms at the level of popular communication, whereas 'care assistant' and 'care worker' are used for intra-specialistic communication. The analysis also points out the variations in terminology observed in the corpora that are intended for different communication contexts, e.g. how professionals define themselves compared to how external actors identify them. This paper provides insight into the terminological aspects of caregiving in the professional field through a corpus-based study on specialised terminology integrating lexicographic considerations. This methodological framework can capture the sociolinguistic attitudes of speakers.
ISSN: 13663666
From : <https://doi.org/10.1108/WWOP-06-2021-0030>
- 263/27 Defence strategies in an online community of caregivers; by Marianna Lya Zummo.: Emerald.
Working with Older People, vol 25, no 3, 2021, pp 235-244.
The purpose of this paper was to understand caregivers' discursive constructions and responses to their unwanted (family and social) role as resulting in exchanges on social media. Online group platforms were understood as particularly suitable for the expression of intimate feelings among adults, for meeting and exhibiting stigma issues, and for the circulation of information and support (Suler, 2004; McCormack, 2010; Pounds et al., 2018). This paper drew from digital Conversation Analysis (Giles et al., 2015), and considered data after combining quantitative (corpus analysis) and qualitative methods, from a critical discourse analysis perspective. The Stereotype Content Model (SCM; Fiske et al., 2002) was used together with collocation analysis to understand categorisations, which ultimately resulted in a defence strategy (Assimakopoulos et al., 2017) to negotiate the Self and the Others (Tannen, 1992). Considering that the digital environment allows a discursive negotiation of identities, data suggest that these interactions are expressions of membership construction, group solidarity and empowerment, that normalise and legitimise emotions with the ultimate goal of (self-)acceptance. This study provides a basis for further research on caregivers' self-positioning in power-relations with others. (JL)
ISSN: 13663666
From : <https://doi.org/10.1108/WWOP-06-2021-0029>
- 263/28 Dividing responsibility for care: tracing the ethics of care in local care strategies; by Tiina Sihto.: Cambridge University Press.
Social Policy and Society, vol 21, no 2, April 2022, pp 194-209.
This article analyses local care policies through the lens of the feminist ethics of care. The focus is on the normative understandings regarding care that emerge in local care strategy documents and how these understandings relate with the concept of 'responsibility'. Strategies published by the municipality of Jyväskylä, Finland, between 2008 and 2016, are analysed using Trace analysis. The research questions are: How is the division of responsibility regarding care among different actors constructed in the strategies? How do the roles assigned to these different actors accord with the principles of ethics of care? The findings show that the documents emphasise individual responsibility in managing risks related to old age, as the norms of local societal institutions are largely detached from the principles of ethics of care. The analysis also reveals the absence of gender and human frailty from the care strategy documents. Rethinking the strategies through the lens of the ethics of care would mean reconceptualising responsibility as relational. (JL)
ISSN: 14747464
From : <https://doi.org/10.1017/S1474746420000585>
- 263/29 The impact of demographic change in the balance between formal and informal old-age care in Spain: Results from a mixed microsimulation-agent-based model; by Jeroen Spijker, Daniel Devolder, Pilar Zueras.: Cambridge University Press.
Ageing and Society, vol 42, no 3, March 2022, pp 588-613.
Changes in population and family structures are altering the provision of care for dependent older people. In Southern European countries like Spain, such care is still largely provided by family, typically spouses and adult daughters. However, an increasing proportion of women have entered the labour force, thereby affecting their availability. In order to study the demand and supply balance of informal care and to quantify the need for formal care when there is a deficit, the authors have developed a mixed microsimulation agent-based model (ABM). Based on nuptiality, fertility and mortality levels of cohorts born at ten-year intervals between 1908 and 1968, the model starts with a microsimulation of the lifecycle of individuals and their close relatives until death. The ABM then determines the amount of time available or needed to care for family members, starting from age 50. Estimates are derived from Spanish survey data on employment, disability and time of care received. Surprisingly, results show that

the family care deficit was greater in the older cohorts due to higher mortality and thus a greater impact of widowhood. However, for future older people, the authors foresee that persistent below-replacement fertility and, paradoxically, the prolongation of the lifespan of couples will increase the demand for formal care, as there will be more couples with both members incapacitated but without children to take care of them. (RH)

ISSN: 0144686X

From : <https://doi.org/10.1017/S0144686X20001026>

- 263/30 Migrant aged-care workers in Australia: do they have poorer-quality jobs than their locally born counterparts?; by Sara Charlesworth, Linda Isherwood.: Cambridge University Press.
Ageing and Society, vol 41, no 12, December 2021, pp 2702-2722.

Migrants make up a significant and growing proportion of the aged-care workforce in Australia. Using data from the 2016 National Aged Care Workforce Census and Survey, the authors investigate employment conditions for Australian-born and overseas-born frontline workers working in residential and home-based aged care, focusing on two key poor job quality indicators. They find that migrant home care workers from non-English-speaking background (NESB) countries are the most likely to be employed on a casual basis and to report hours-related underemployment. Migrant residential care workers from English-speaking background (ESB) countries are more likely to be casual, while NESB migrants are more likely to be underemployed. Controlling for a range of employment and socio-demographic characteristics, it is found that being an NESB migrant is significantly associated with both casual status and underemployment. Generally, while this association lessens with years spent in Australia, exposure to casual employment is amplified over time for NESB migrants in the residential sector. Holding a temporary visa increased the likelihood of casual employment for residential care workers and underemployment for home care workers. Working for a for-profit employer was also associated with poorer job quality. Further policy shifts in Australia towards temporary migration and increased marketisation of aged care may affect the working conditions of migrant aged-care workers. (RH)

ISSN: 0144686X

From : <https://doi.org/10.1017/S0144686X20000525>

- 263/31 Older carers and carers of people with dementia: improving and developing effective support; by Mary Larkin, Melanie Henwood, Alisoun Milne.: Cambridge University Press.
Social Policy and Society, vol 21, no 2, April 2022, pp 242-256.

The policy drive to support carers is a longstanding national and international priority. Research about the design and delivery of support for carers is critical to the underpinning evidence base. Through a timely exploration of a third sector perspective this UK-based study provides insights into approaches to, and the commissioning of, support for older carers and carers of people with dementia. The study highlights the importance of: embedding carers' perspectives in service developments; the provision of both generic and targeted support which adopts a nuanced and tailored approach; titrating the delivery of information and advice at a pace to match carers' needs; capturing quantitative and qualitative dimensions in service evaluation; and increased quantity and longevity of funding. Such insights not only complement existing research but can also be applied to other countries at a similar stage in the development of carer support. (JL)

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From : <https://doi.org/10.1017/S1474746420000615>

COVID-19

- 263/32 "I felt useless": a qualitative examination of COVID-19's impact on home-based primary care providers in New York; by Ksenia Gorbenkoo Emily Franzosa, Sybil Masse (et al.): Taylor and Francis.
Home Health Care Services Quarterly, vol 40, no 2, April-June 2021, pp 121-135.

Research on professional burnout during the COVID-19 pandemic has focused on hospital-based health care workers. This study examined the pandemic's psychological impact on home-based primary care (HBPC) providers. The authors interviewed 13 participants from six HBPC practices in New York City, including medical and clinical directors, program managers, nurse practitioners and social workers. Transcripts were analysed using inductive qualitative analysis approach. HBPC providers experienced emotional exhaustion and a sense of reduced personal accomplishment. They reported experiencing grief at losing many patients at once, also pressure to adapt to changing circumstances quickly. They also reported feeling guilty for failing to protect their patients and the reduced confidence in their professional expertise. Strategies to combat burnout included shorter on-call schedules, regular condolence meetings to acknowledge patient deaths, and peer support calls. This study identifies potential resources to improve the well-being and reduce the risk of burnout among HBPC providers. (RH)

ISSN: 01621424

From : <https://doi.org/10.1080/01621424.2021.1935383>

- 263/33 Post-pandemic challenges for all ages in an ageing society; by Stephen Burke.: Emerald.
Quality in Ageing and Older Adults, vol 22, nos 3/4, 2021, pp 172-177.
This paper aimed to highlight lessons from the COVID-19 pandemic for planning for the future in an

ageing society. It looked at trends, changes in society and implications for people of all ages. It focused on the importance of planning and whether COVID-19 will lead to long-term changes. In particular, the paper drew on the author's experiences running an intergenerational organisation during the pandemic and other work associated with ageing well. The author argues that the pandemic has challenged people of all ages in different ways, some of which have tested intergenerational solidarity. At the same time, the pandemic has raised issues which we must all address going forward: planning for future pandemics, planning for an ageing society and ensuring that future planning works for all generations. It is argued that despite much risk assessment and scenario planning, we were not well placed in the UK or across the world to respond to the multiple challenges of COVID-19. It is also well documented that the pandemic has exacerbated existing inequalities in our society. Also the author asks what are the lessons for our ageing society. As life expectancy rises, what will the quality of life be like in those added years? Many of today's babies can expect to have a 100-year life. What does that mean for the way we lead our lives and can we ensure that everyone can age well? These are not just issues for older people, but for people of all ages and generations. The COVID-19 experience has been different for younger and older people - whether it has been health or job security, income, taxation or housing. Questions of intergenerational fairness have again raised their heads, alongside the longer term impact for future generations. (NH/JL)

ISSN: 14717794

From : <https://doi.org/10.1108/QAOA-08-2021-0063>

CRIME

263/34 Improving access to justice for older victims of crime by reimagining conceptions of vulnerability; by Kevin J Brown, Faith Gordon.: Cambridge University Press.

Ageing and Society, vol 42, no 3, March 2022, pp 614-631.

In 2016, the Commissioner for Older People in Northern Ireland commissioned the authors to research the experiences of older victims of crime within the jurisdiction, with an emphasis on understanding the interaction between victims and the justice agencies. This article investigates the implications of recent research findings that establish that older victims of crime are less likely to obtain procedural justice than other age groups. It explores original empirical data from the United Kingdom that finds evidence of a systemic failure amongst agencies to identify vulnerability in the older population, and to put in place appropriate support mechanisms to allow older victims to participate fully in the justice system. The article discusses how the legally defined gateways to additional support, which are currently relied upon by many common law jurisdictions, disadvantage older victims and require re-imagining. It argues that international protocols, especially the current European Union Directive on victims' rights, are valuable guides in this process of re-conceptualisation. To reduce further the inequitable treatment of older victims, the article advocates for jurisdictions to introduce a presumption in favour of special assistance for older people participating in the justice system. (RH)

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From : <https://doi.org/10.1017/S0144686X20001051>

DEMENCIA

(See Also 263/104)

263/35 The Alzheimer case: perceptions, knowledge and the acquisition of information about Alzheimer's disease by middle-aged and older adults in Flanders; by Martijn Huisman, Stijn Joye, Daniel Biltreyst.: Cambridge University Press.

Ageing and Society, vol 42, no 4, April 2022, pp 918-937.

Alzheimer's disease (AD) is a major health concern as the world population ages, yet few studies have examined what the public over the age of 50 knows about AD. This qualitative study, based on 40 in-depth interviews, examines the knowledge of AD by Flemish people aged 50-80 and their cross-source engagement with information sources. Building on AD media representations and theories on media complementarity and health information behaviour, the authors find that respondents mostly encounter AD information non-purposively via traditional mass media and interpersonal communication, while the internet is occasionally used to purposefully seek information. Novels, personal experiences and/or social proximity, public figures and particularly film stand out as channels and sources of AD information, suggesting that fictional narratives, personal experiences and being able to identify with others leave lasting impressions and help to communicate and disperse AD information. However, common misconceptions and gaps in knowledge persist, including AD being considered part of the normal ageing process and old age as well as confusing AD with Parkinson's disease. The biomedical perspective and the tragedy discourse prevail among the majority of respondents, who describe AD in terms of decline, loss and death, and as 'the beginning of the end'. Only a few, typically female respondents, appear aware of the role of individual health behaviour and lifestyle choices to prevent dementia or delay its onset. The misconceptions of AD and gaps in knowledge, as well as the fact that a third of all cases of dementia might be delayed or prevented by managing lifestyle and other risk factors, stress the importance of public educational programmes and the need to emphasise and raise awareness of preventative behaviour. Overall, the findings from this study can be of help to public health communicators and dementia-awareness campaigns, as well as AD training programmes for health-care

professionals and family care-givers. (RH)
ISSN: 0144686X
From : <https://doi.org/10.1017/S0144686X20001221>

- 263/36 Living the everyday of dementia friendliness: navigating care in public spaces; by Katie Brittain, Cathrine Degnen.
Sociology of Health and Illness, vol 44, no 2, February 2022, pp 416-431.
Dementia friendly communities are a priority for international policymaking aimed at tackling the social exclusion of people living with dementia. However, what constitutes a dementia friendly community is not well defined nor understood. In this article, the authors explore what constitutes the enactment of care in a dementia friendly community, focusing on commercial, leisure public places. The authors use qualitative interviews with carers in North East England to examine how elements of social and material environments shape meaningful everyday practices of care outside the home. Drawing from the literature on materialities of care, they examine three everyday activities: eating out, going to the cinema and shopping. Maintaining such activities in public is part of keeping on with normal family life, but these can also expose individuals to stigmatising judgements by outsiders. Despite this, a complex array of material things, people, places and immaterial qualities such as ambience can come together to make care possible. The authors suggest there is a need to promote a less rigid, more flexible ethos in these public places. Through a recognition of the relational materialities of care, public spaces could do more to become places where people living with dementia can continue to feel connected and included. (OFFPRINT) (RH)
ISSN: 14679566
From : <https://doi.org/10.1111/1467-9566.13442>
- 263/37 Living with young onset dementia: reflections on recent developments, current discourse, and implications for policy and practice; by Andrea M Mayrhofer, Shaheen Shora, Margaret-Anne Tibbs (et al).: Cambridge University Press.
Ageing and Society, vol 41, no 11, November 2021, pp 2437-2445.
Recent research on young onset dementia (formal diagnosis at age 65) evidences emerging work around pre-diagnosis, diagnosis and the need to improve post-diagnostic support for this group. An increased awareness of young onset dementia has led to the establishment of peer-support groups, support networks and the involvement of people affected by dementia in research. However, the need to join up services at the systems level persists. Third-sector organisations that offer post-diagnostic support at the community level rely heavily on volunteers. Implications for policy and practice are that community-based commissioning of integrated services between health care, social care and the third sector would go a long way to providing the continuity and stability required in dementia support and care along the illness trajectory. This discussion document was written in collaboration with diagnostic services, the charity sector and conversations with people living with, and affected by, dementia. (RH)
ISSN: 0144686X
From : <https://doi.org/10.1017/S0144686X20000422>
- 263/38 Re-thinking and re-positioning being in the moment within a continuum of moments: introducing a new conceptual framework for dementia studies; by John David Keady, Sarah Campbell, Andrew Clark (et al).: Cambridge University Press.
Ageing and Society, vol 42, no 3, March 2022, pp 681-702.
This article draws upon six social research studies completed by members of the Dementia and Ageing Research Team at the University of Manchester and their associated networks over an eight-year period (2011-2019) with the aim of constructing a definition of 'being in the moment' and situating it within a continuum of moments that could be used to contextualise and frame the lived experience of dementia. The authors used the approach formulated by P Pound et al (2005) in synthesising qualitative studies. They identified this continuum of moments as comprising four sequential and interlinked steps: (a) 'creating the moment', defined as the processes and procedures necessary to enable being in the moment to take place - the time necessary for this to occur can range from fleeting to prolonged; (b) 'being in the moment', which refers to the multi-sensory processes involved in a personal or relational interaction and embodied engagement - being in the moment can be sustained through creativity and flow; (c) 'ending the moment', defined as when a specific moment is disengaged - this can be triggered by the person(s) involved consciously or subconsciously, or caused by a distraction in the environment or suchlike; and (d) 'reliving the moment', which refers to the opportunity for the experience(s) involved in 'being in the moment' to be later remembered and shared, however fragmentary, supported or full the recall. (RH)
ISSN: 0144686X
From : <https://doi.org/10.1017/S0144686X20001014>
- 263/39 Right at home: living with dementia and multi-morbidities; by Nicola A Cunningham, Julie Cowie, Karen Methven.: Cambridge University Press.
Ageing and Society, vol 42, no 3, March 2022, pp 632-656.
Dementia is recognised as the biggest health crisis of our time in terms of high personal and social costs and wider impact on health and social care systems. Increases in people living with dementia and multi-morbidities presents critical challenges for home care worldwide. Health-care systems struggle to provide adequate home-care services, delivering limited care restricted to a single-condition focus. This

Scottish study explored the experiences and expectations of home care from the multiple perspectives of people living with dementia and multi-morbidities and home-care workers providing support. Findings draw from qualitative semi-structured interviews with people with dementia (N = 2), their partners (N = 2), other partners or family carers (N = 6) and home-care workers (N = 26). Three themes are identified: (a) the preference for and value of home; (b) inadequate home-care provision and enhanced care burden; and (c) limited training and education. Despite continued calls for home-care investment, the focus on reduction in costs hides key questions and further dialogue is required exploring how people with dementia can be supported to live independently and flourish at home. This study considers these complex experiences and care requirements through the prism of disability and human rights frameworks. This paper concludes with consideration of more recent human social rights debate. The authors discuss critically what this may mean for people living with dementia, and consider the implications for co-requisite policy development to optimise available home-care support.

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From : <https://doi.org/10.1017/S0144686X2000104X>

DEMENTIA CARE

(See Also 263/31, 263/36, 263/129)

- 263/40 Determinants of discretionary and non-discretionary service utilization among caregivers of people with dementia: focusing on the race/ethnic differences; by Ling Xu, Yura Lee, Bum Jung Kim, Lin Chen.: Taylor and Francis.

Home Health Care Services Quarterly, vol 40, no 1, January-March 2021, pp 75-92.

Using Andersen's behavioural model of service utilisation, this study aimed to understand how predisposing, enabling, and need factors were associated with two types of service utilisation among caregivers of people with dementia. Caregiver participants (N = 637) were from the Resources for Enhancing Alzheimer's Caregivers Health (REACH II) study. Binary logistic and linear regression analyses were conducted to predict whether participants used services and the frequency of such service usage. Results showed that some enabling and need factors were significantly associated with both discretionary and non-discretionary service utilisation. Results also indicated some need factors were significant factors of the frequency of use for both discretionary and non-discretionary services. In addition, being Hispanic or African American moderated the association between some enabling or needs factors and service use. Practice attention needs to be paid on several enabling and needs factors among Hispanic and African American caregivers of people with dementia. (RH)

ISSN: 01621424

From : <https://doi.org/10.1080/01621424.2020.1805083>

- 263/41 Don't give up when communication is difficult: online well-being advice for caregivers of people with Alzheimer's and dementia; by Olivia E Jones, Elizabeth S Parks.: Taylor and Francis.

Home Health Care Services Quarterly, vol 40, no 2, April-June 2021, pp 136-147.

Sixteen million people in the United States are unpaid caregivers to people with Alzheimer's or dementia. Although caregiver investment is associated with personal and relational benefits, there are also emotional, mental, relational and physical costs. This study explores online well-being advice for nonprofessional caregivers of people with Alzheimer's and dementia, resulting in 332 online resources that offer informational support for nonprofessional caregivers. Although competent communication directly affects the well-being of caregiving relationships, only 39 of these texts offered advice related to communication strategies. Thematic analysis of these 39 sources resulted in 1,024 discrete pieces of caregiver advice related to three overarching themes: Daily Routine, Care Recipient Well-Being, and Caregiver Self-Care. The authors examine the Caregiver Self-Care theme to understand informational support available to caregivers. These self-care advice themes reveal a need for intentional focus on the home health quality of nonprofessional caregivers about ways that communication affects their everyday lives. (RH)

ISSN: 01621424

From : <https://doi.org/10.1080/01621424.2021.1907266>

- 263/42 Future outlook of people living alone with early-stage dementia and their non-resident relatives and friends who support them; by Janet Heaton, Anthony Martyr, Sharon M Nells (et al.): Cambridge University Press.

Ageing and Society, vol 41, no 11, November 2021, pp 2660-2680.

Little is known about the experiences of people living alone with dementia in the community and their non-resident relatives and friends who support them. This paper explore their respective attitudes and approaches to the future, particularly regarding the future care and living arrangements of those living with dementia. The study is based on a secondary analysis of qualitative data from the Memory Impairment and Dementia Study (MIDAS) conducted in North Wales between 2007 and 2010. Interviews were conducted with 24 people living alone with early-stage dementia, and one of their relatives or friends who supported them. All but four of the dyads were interviewed twice over 12 months (a total of 88 interviews). In the analysis, it was observed that several people with dementia expressed the desire to continue living at home for 'as long as possible'. A framework approach was used to investigate this theme in more depth, drawing on concepts from the existing studies of people living

with dementia and across disciplines. Similarities and differences in the future outlook and temporal orientation of the participants were identified. The results support previous research suggesting that the future outlook of people living with early-stage dementia can be interpreted in part as a response to their situation and a way of coping with the threats that it is perceived to present, and not just an impaired view of time. Priorities for future research are highlighted in the discussion. (RH)

ISSN: 0144686X

From : <https://doi.org/10.1017/S0144686X20000513>

263/43 How meeting centres continue to support people affected by dementia: report on UK COVID-19 impact; by Shirley Evans, Jennifer Bray, Dawn Brooker.: Emerald.

Working with Older People, vol 25, no 4, 2021, pp 283-293.

Because of COVID-19 restrictions, Meeting Centres (MCs) for people affected by dementia in the UK ceased to meet physically but continued to provide remote support. The aim of this study was to understand the extent to which MCs were able to operate when physical meetings were not possible and how they achieved particularly in relation to the adaptation and coping model and practical, emotional and social adjustment. Semi-structured interviews and focus groups were conducted with people affected by dementia, staff, volunteers, managers and trustees from MCs. Data were collected on the type and quantity of contact MCs had with people affected by dementia during lockdown. Data were coded and mapped against adaptation and coping strategies, i.e. practical understanding and empowerment, optimising emotional well-being and opportunities for social engagement. A range of remote approaches, both technological (e.g. using online platforms) and non-technological (eg newsletters and post) were implemented alongside limited face-to-face contact. Regular MC activities were adapted using the different approaches. It was possible to map all the adaptation and coping model support strategies to the activities delivered in this way. MCs were able to adapt rapidly to continue to support people to adjust to change. Moving forward, combining approaches (usual MC and remote) means person-centred support could be optimised, addressing social isolation and reaching those who could not attend MCs. This paper offers new insight into the extent to which community-based support for people with dementia can continue when face-to-face contact is not possible because of COVID. (JL)

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263/44 Supporting people with dementia and their carers: seventh report of the Health and Social Care Committee of session 2021/22: report, together with formal minutes relating to the report; by Health and Social Care Committee, House of Commons. London: House of Commons, 29 October 2021, 25 pp (HC Session 2021/22 96).

There are approximately 700,000 unpaid carers in the UK who support people with dementia. In this inquiry, the Health and Social Care Committee heard that those living with dementia, their carers and families still face many challenges to access the critical care they deserve. This short report builds on previous work and recommendations related to the social care system in the Committee's recent reports. It considers the impact of the current social care funding structure on those living with dementia, and explores options for social care funding reform. It focuses on what further action will be required to ensure all those living with dementia receive the personalised and quality care they deserve. The Committee notes that those living with dementia remain unprotected from unlimited costs, and navigating the system is burdensome for those providing support. The Committee concludes that the Government must use its social care White Paper to develop clear guidance on the care and support those living with dementia and their carers should expect to receive from diagnosis through to lifelong post-diagnostic support. (RH)

From : <https://committees.parliament.uk/publications/7662/documents/79983/default/>

263/45 Supportive care for older people with dementia: socio-organisational implications; by Francesco Miele, Federico Neresini, Giovanni Boniolo, Omar Paccagnella.: Cambridge University Press.

Ageing and Society, vol 42, no 2, February 2022, pp 376-408.

For many years, dementia care has been dominated by the standard medical approach, in which dementia is treated mainly with drugs, such as anti-anxiety, antidepressant and anti-psychotic medications. In seeking effective treatments for patients with dementia, many authors have criticised the pervasive use of drugs for managing behavioural and physiological symptoms related to dementia; instead, they have proposed personalised interventions aimed at supporting patients and their relatives from diagnosis until death. This article particularly refers to long-term settings, and its authors aim to understand the organisational implications of three types of interventions (labelled supportive care interventions - SCIs) that have characterised this shift in dementia care: person-centred, palliative and multi-disciplinary care. Conducted using the integrative review method, their review underlines how SCIs have controversial consequences for quality of care, the care-givers' quality of life and cultural backgrounds. After an in-depth analysis of selected papers, the authors offer some considerations about the implications of SCIs for long-term care organisations and future research directions. (RH)

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DEPRESSION

- 263/46 Depressive symptoms in elderly people participating in University of the Third Age and residents in nursing homes: the role of optimism and acceptance of passing; by Edyta Idczak-Paces, Adrian Kabat, Adrianna Krzywik, Iwona Nowakowska.
Research on Ageing and Social Policy, vol 9, no 2, 2021, pp 105-132.
Older people as an age group need particular support in preventing development of depressive symptoms, among others, due to the prospect of death. This group is heterogenous in terms of characteristics of ways of spending leisure time, which - as an important aspect of everyday life affecting the quality of interpersonal relationships and well-being - might be related to the level of their depressive symptoms. This study aimed to find out whether participation in University of Third Age (U3A; leisure time spending directed at personal development) activities versus being a Nursing Home resident (NH; leisure time spending, directed at compensation of difficulties associated to the aging process) may differentiate older people in terms of the level of depression taking into account their optimism and acceptance of passing. The study was pencil-and-paper questionnaire-based, conducted on a sample of people aged 60+: participants of U3A (N=48) and NH (N=54). In the U3A group, consistently for all levels of acceptance of passing, the higher the level of optimism, the lower the depressive symptoms. However, for the NH group, the higher the acceptance of passing, the lower the role of optimism in predicting depressive symptoms. (OFFPRINT) (RH)
ISSN: 20146728
From : <https://doi.org/10.17583/rasp.2021.5782>

DISABILITY

- 263/47 Association between childhood conditions and arthritis among middle-aged and older adults in China: the China Health and Retirement Longitudinal Study; by Nan Lu, Bei Wu, Nan Jiang, Tigyue Dong.: Cambridge University Press.
Ageing and Society, vol 41, no 11, November 2021, pp 2484-2501.
Using data from the 2015 wave and the life-history module of the China Health and Retirement Longitudinal Study (CHARLS), this study examined the association between childhood conditions and arthritis among middle-aged and older adults in China. Face-to-face interviews were conducted with respondents age 45 and over across China. Multiple imputation was used to handle the missing data, generating a final analytic sample of 19,800. Doctor-diagnosed arthritis was the main outcome variable. Random-effects logistic regression models were used to test the proposed models. Approximately 8 per cent of the respondents had better family financial status in childhood than their neighbours. Close to 8 per cent had been hospitalised or encountered similar conditions (e.g. confined to bed or home) for at least one month in childhood. Around one-third reported better subjective health in childhood than their peers. The majority of the respondents (80%) reported that they had stable health resources, and that their mothers were illiterate during their childhood. Childhood family financial status, subjective health, mother's education, access to health care and medical catastrophic events were found to be significant factors associated with arthritis in later life, after controlling for adulthood and older-age conditions (family financial status: odds ratio (OR) = 0.885, 95 per cent confidence interval (95% CI) = 0.848-0.924; subjective health: OR = 0.924, 95% CI = 0.889-0.960; mother's education: OR = 0.863, 95% CI = 0.750-0.992; access to health care: OR = 0.729, 95% CI = 0.552-0.964; medical catastrophic events: OR = 1.266, 95% CI = 1.108-1.446). The study results highlight an important role that childhood conditions play in affecting the onset of arthritis in late life in China. Healthcare providers may consider childhood conditions as a valuable screening criterion to identify risk populations, which could be used to guide health promotion and prevention programmes, and promote healthy ageing. (RH)
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EMPLOYMENT

(See Also 263/116)

- 263/48 Barriers and facilitators to extended working life: a focus on a predominately female ageing workforce; by Clare Ellen Edge, Margaret Coffey, Penny A Cook, Ashley Weinberg.: Cambridge University Press.
Ageing and Society, vol 41, no 12, December 2021, pp 2867-2887.
Many countries are reforming their pension systems so people stay in work for longer to improve the long-term sustainability of public finances to support an increasing older population. This research explored the factors that enable or inhibit people to extend working life (EWL) in a large United Kingdom-based retail organisation. Semi-structured interviews were carried out with a purposive sample (N = 30): 15 employees aged ≥ 60 and 15 supervisors supporting these employees. Older workers were predominately female, reflecting the gender profile of the older workers in the organisation. Older workers and supervisors reported that key facilitators to EWL were good health, the perception that older workers are of value, flexibility and choice, the need for an ongoing conversation across the lifecourse, the social and community aspect of work as a facilitator to EWL and the financial necessity to EWL. Perceived barriers to EWL included poor health, negative impacts of work on health, and a lack of respect and support. (NL/RH)
ISSN: 0144686X From : <https://doi.org/10.1017/S0144686X2000063X>

263/49 Early insights from the Over 50s Lifestyle Study, Great Britain: 1 March 2022: attitudes and reasons behind those aged 50 to 70 years leaving the labour market at some point in 2021, in Great Britain between 8 to 13 February 2022; by Office for National Statistics - ONS.: Office for National Statistics, 1 March 2022, 4 pp (Statistical bulletin).
This headline release includes early insights from the Over 50s Lifestyle Study, a new one-off survey set up by the Office for National Statistics (ONS) to look at the labour market experiences of adults aged 50-70 in Great Britain. The experiences of adults aged 50 to 70 years who were out of work at some point in 2021 are examined of 19,291 such individuals who had previously completed the Opinions and Lifestyle Survey (OPN), 13,803 responded (71.6%). More detailed analysis, including further breakdowns by age, sex and occupation, will be published on 14 March 2022.
https://www.ons.gov.uk/employmentandlabourmarket/peoplenotinwork/economicinactivity/bulletins/earlyinsightsfromtheover50slifestylestudygreatbritain/1march2022?mc_cid=b845f4d77a&mc_eid=0a445f9e3f

263/50 Living longer: impact of working from home on older workers: the shift towards working from home seen during the coronavirus (COVID-19) pandemic may help enable older workers to remain in the labour market for longer.; by Office for National Statistics - ONS.: Office for National Statistics, 25 August 2021, 13 pp.
Previous research has shown that flexible working is a factor in enabling older workers to remain in the labour market for longer. The proportion of older workers who are planning to work from home following the coronavirus (COVID-19) pandemic is higher than the proportion who worked from home prior to the pandemic, suggesting any benefit may persist. In June and July 2020, older workers working entirely from home were more likely to say they were planning to retire later compared with those not working from home. However, working from home has not been an option for all: while it may help some older workers stay in the labour market for longer, it may also entrench existing inequalities. This report examines statistical evidence about older workers on: characteristics of those who exit the labour market early; increased working from home and its impact; switching to working from home during the pandemic; expectations for working from home in the future; and increased working from home and reducing inequalities among older workers. (RH)
<https://www.ons.gov.uk/peoplepopulationandcommunity/birthsdeathsandmarriages/ageing/articles/livinglongerimpactofworkingfromhomeonolderworkers/2021-08-25>

END-OF-LIFE CARE

263/51 Living-with-dying: the elderly's language of terminal illness; by Stefania M Maci.: Emerald. Working with Older People, vol 25, no 3, 2021, pp 220-229.
This study aimed to examine ways in which older people alongside men and women of all ages who have a terminal illness use language to construct a narrative about their 'living-with-dying' experience. This investigation was a secondary analysis based on a corpus of health and illness narratives collected by the Health Experiences Research Group at the University of Oxford and published by the DIPEX charity (available at: <http://healthtalk.org/home>). The study showed that there are qualitative differences in the way in which not only older people but also men and women report their experience with terminal illness and their relation to death. Understanding the different perspectives from which older people narrate their experiences of how they live while dying from terminal illness can help health professionals to develop more effective all-inclusive health policies and practices in end-of-life care. (JL)
ISSN: 13663666 From : <https://doi.org/10.1108/WWOP-06-2021-0031>

FALLS

263/52 Factors included in adult fall risk assessment tools (FRATs): a systematic review; by Hendrika de Clercq, Alida Naude, Juan Bornman.: Cambridge University Press. Ageing and Society, vol 41, no 11, November 2021, pp 2558-2582.
Falls often have severe financial and environmental consequences, not only for those who fall, but also for their families and society at large. Identifying fall risk in older adults can be of great use in preventing or reducing falls and fall risk, and preventative measures that are then introduced can help reduce the incidence and severity of falls in older adults. The overall aim of this systematic review was to provide an analysis of existing mechanisms and measures for evaluating fall risk in older adults. The 43 included fall risk assessment tools (FRATs) produced a total of 493 FRAT items which, when linked to the ICF (International Classification of Functioning, Disability and Health), resulted in a total of 952 ICF codes. The ICF domain with the most used codes was body function, with 381 of the 952 codes used (40%), followed by activities and participation with 273 codes (28%), body structure with 238 codes (25%) and, lastly, environmental and personal factors with only 60 codes (7%). This review highlights the fact that current FRATs focus on the body, neglecting environmental and personal factors and, to a lesser extent, activities and participation. This over-reliance on the body as the point of failure in fall risk assessment clearly highlights the need for gathering qualitative data, such as from focus group discussions with older adults, to capture the perspectives and views of the older adults themselves about the factors that increase their risk of falling and comparing these perspectives to the data gathered from published FRATs, as described in this review. (RH)
ISSN: 0144686X From : <https://doi.org/10.1017/S0144686X2000046X>

- 263/53 Fall prevention education for older people being discharged from hospital: educators' perspectives; by Jacqueline Francis-Coad, Den-Ching A Lee, Terry P Haines (et al).: Sage. Health Education Journal, vol 80, no 8, December 2021, pp 908-920.
Falls are a significant problem for many older patients after hospital discharge. This qualitative study of three rehabilitation hospitals in Western Australia aimed to evaluate the fidelity and impact of a tailored patient fall prevention education programme from the perspective of the educators who delivered the programme. Three experienced physiotherapists trained as 'educators' to deliver a tailored fall prevention education programme to 195 older patients prior to hospital discharge. Patients were contacted monthly by phone to review their progress in the 3 months after discharge. Educator-patient interactions were recorded in a standardised educator diary. Post-intervention, educators participated in a mini-focus group, providing their perspectives regarding education delivery and its impact on patient abilities to engage in fall prevention strategies. Data were analysed using deductive content analysis. Educators identified several barriers and enablers to programme delivery, receipt and enactment by older patients that contributed to the fidelity of the education programme. The consistent need for more patient support to enable improved enactment of plans and to assist with safe recovery long after discharge warrants further attention at policy and health system levels. (RH)
ISSN: 00178969
From : <https://doi.org/10.1177/00178969211032711>

FAMILY AND INFORMAL CARE

(See Also 263/29, 263/42)

- 263/54 Education and skills training for care partners of hospitalised older adults: a scoping review; by Madeline Carbery, Samantha Schwartz, Nicole Warner, Beth Fields.: Sage. Health Education Journal, vol 80, no 8, December 2021, pp 921-933.
The authors conducted a scoping review on the education and skills training practices used with the care partners of hospitalised older adults in the USA via sources identified in the PubMed, PsychINFO and CINAHL databases. The aim was to characterise and identify gaps in the education and skills training used. Twelve studies were selected. Results illustrate that nurses utilise multiple modes of delivery, and frequently provide education and skills training tailored to the needs of care partners at the latter end of hospital care. However, such training provision varies greatly, including who provides education, in what way information is conveyed, and how care partner outcomes are measured. The findings of the first such scoping review on this topic highlight the need for education and skills training to be interprofessional, tailored to individual care partners' needs and begin at, or even before, the hospital admission of older adult patients. (RH)
ISSN: 00178969
From : <https://doi.org/10.1177/00178969211034192>

FRAILITY

- 263/55 Community frailty team workforce development: a personal reflection; by Eleanor Corbett, Lucy Lewis.: Emerald. Journal of Integrated Care, vol 29, no 4, 2021, pp 464-468.
This paper presents a personal view of a newly appointed consultant practitioner trainee in frailty. This role was created as a result of a rapid workforce review of a Frailty Support Team (FST) in response to the COVID-19 pandemic. The FST traditionally worked alongside other community services. A 'One Team' approach was developed whereby prior silos of community nursing, therapy and frailty teams became a single, locality based and mutually supportive integrated community service. This significantly increased capacity for an urgent community response for older people with complex needs and improved clinical management and coordination of care. As a workforce review identified the need for skills development, new roles for trainee advanced frailty practitioners (AFPs) and a consultant practitioner trainee in frailty were established. Findings showed that staff experience of the 'One Team' model was positive. The changes were thought to encourage closer and more efficient working between primary care and a range of community health services. The improved communication between professionals enabled more personalised care at home, reducing pressure on emergency hospital services. A rapid review of the workforce model has enabled the enhanced team capacity to cover a wider geographical area and improved recruitment and retention of staff by introducing a new pathway for career progression within the expanding specialism of frailty. The challenge of COVID-19 has prompted rapid service redesign to create an enhanced 'One Team in the community'. The innovative workforce model looks beyond traditional roles, values the experience and capabilities of staff and develops the skills and confidence required to provide a more integrated and person-centred specialist community pathway for people living with frailty. (JL)
ISSN: 14769018
From : <https://doi.org/10.1108/JICA-04-2021-0021>

- 263/56 Talking about frailty: health professional perspectives and an ideological dilemma; by Victoria Cluley, Graham Martin, Zoe Radnor, Jay Banerjee.: Cambridge University Press.
Ageing and Society, vol 42, no 1, January 2022, pp 204-222.
Frailty is increasingly used in clinical settings to describe a physiological state resulting from a combination of age-related co-morbidities. Frailty also has a strong 'lay' meaning that conjures a particular way of being. Recent studies have reported how frail older people perceive the term frailty, showing that frailty is often an unwanted and resisted label. While there are many scores and measures that clinicians can use to determine frailty, little has been published regarding how health-care professionals use and make sense of the term. This paper reports the findings of a qualitative study that explored how health professionals perceive frailty. Forty situated interviews were conducted with health-care professionals working in an emergency department in the English Midlands. The interview talk was analysed using discourse analysis. The findings show that the health professionals negotiate an 'ideological dilemma' - a tension between contradictory sets of meanings and consequences for action - based on their 'lay' and clinical experience of the term frailty. It is concluded that this dilemma could have a negative impact on the assessment of frailty, depending on the system of assessment used. (RH)
ISSN: 0144686X
From : <https://doi.org/10.1017/S0144686X20000884>

GRANDPARENTS

- 263/57 Daily grandchild care and grandparents' employment: a comparison of four European child-care policy regimes; by Ginevra Floridi.: Cambridge University Press.
Ageing and Society, vol 42, no 2, February 2022, pp 448-479.
Having grandchildren is known to reduce individuals' labour supply. However, it is unclear whether there is a negative association for grandparents between grandchild care provision and employment. Moreover, we do not know how the magnitude of any association between the two activities may vary across countries, as characterised by different child-care policy regimes. Using data from the Survey of Health, Ageing and Retirement in Europe (SHARE), this paper investigates the association between daily grandchild care provision and two employment outcomes for grandmothers and grandfathers aged 50-69: the probability of being employed, and the average weekly working hours. Recursive bivariate models are used to account for the potential selection of grandparents with different unobserved traits into work and family care. Estimates are compared across four country groups characterised by different child-care policy orientations: optional de-familisation; service de-familisation; supported familism; and familism by default. On average, across 20 European countries, grandparents looking after grandchildren daily are no less likely to work than grandparents who do not; however, employed grandfathers work eight hours less per week if providing daily child care. Evidence of a negative association between daily grandchild care and employment is strongest in countries with familistic approaches to child care, with no association in countries characterised by optional de-familisation. This suggests that public support for child care may help retain grandparents in the labour force. (RH)
ISSN: 0144686X
From : <https://doi.org/10.1017/S0144686X20000987>

HEALTH AND WELLBEING

(See Also 263/21, 263/66, 263/128)

- 263/58 The role of subjective age in sustaining wellbeing and health in the second half of life; by Marijke Veenstra, Svein Olav Daatland, Marja Aartsen.: Cambridge University Press.
Ageing and Society, vol 41, no 11, November 2021, pp 2446-2466.
Subjective age (SA) is a core indicator of the individual ageing experience, with important consequences for successful ageing. The aim of the current study was to investigate the directions of the longitudinal associations between domains of SA and subjective well-being and physical functioning in the second half of life. We used three-wave survey data (2002, 2007 and 2017) spanning 15 years from the Norwegian Lifecourse, Ageing and Generation Study, including 6,292 persons born between 1922 and 1961. SA was measured with felt-age and ideal-age discrepancies, well-being with the Satisfaction of Life Scale and physical functioning with the Short-Form 12. Three-wave cross-lagged panel models were applied to assess the temporal relationships between the different domains of SA, life satisfaction and physical functioning, adjusted for age, gender and education. Findings indicated that wanting to be younger was negatively associated with life satisfaction and physical functioning over time. Felt-age discrepancies did not predict subsequent well-being or physical functioning. The results did not reveal any evidence for reversed effects, i.e. from functioning or life satisfaction to SA. The findings support the psychological pathway from satisfaction with age(ing) to subjective well-being and physical functioning over time. Small ideal-age discrepancies reflect positive self-perceptions of ageing, which may help to accumulate psychological resources, guide behavioural regulation and support health. (RH)
ISSN: 0144686X
From : <https://doi.org/10.1017/S0144686X2000032X>

- 263/59 Self-perceived general health among community-dwelling Portuguese older adults: do men and women differ?; by Violeta Alarcao, Joana Costa, Teresa Madeira, Catarina Peixoto-Plácido, Elisabete Fernandes, Nuno Sousa-Santos, Osvaldo Santos, Paulo Jorge Nicola, Carla Lopes, Joao Gorjao-Clara.: Cambridge University Press.
Ageing and Society, vol 42, no 1, January 2022, pp 223-245.
Evidence on how gender intersects with relevant social constructs in later phases of life is scarce. This investigation examined gender inequalities in perceived health status (self-perceived general health; SPGH) by community-dwelling Portuguese older people, while considering psycho-social and socio-demographic determinants. The study used data from a representative sample of community-dwellers aged >65 years (N = 920), who were enrolled in the Portuguese Elderly Nutritional Status Surveillance System (PEN-3S) project. Associations between SPGH and socio-demographic and psychosocial variables, functionality and self-reported morbidity were tested; indirect effects of relevant predictors on SPGH were also tested using a bootstrap method. Gender inequalities in health were found: women significantly rated their health worse than men; overall, participants rated their health as fair. Education, functional status, depression symptoms and self-reported morbidity significantly predicted SPGH among women, whereas only the latter two were associated with SPGH among men. For both genders, depression was the strongest predictor of SPGH. Mediation analyses detected indirect effects of cognitive function and loneliness feelings on SPGH among older adults. Results herein provide insights on the predictive role of psychosocial variables on SPGH and support the need for considering the context when addressing the correlates of SPGH among Portuguese older adults. Altogether, these findings might support cost-effective interventions targeting the most vulnerable groups of the population to inequalities in health and its predictors. (RH)
ISSN: 0144686X
From : <https://doi.org/10.1017/S0144686X20000811>

HEALTH CARE

(See Also 263/22, 263/32, 263/114, 263/117, 263/140)

- 263/60 "Just because people are old, just because they're ill...": dignity matters in district nursing; by Emma Stevens, Liz Price, Liz Walker.: Emerald.
Journal of Adult Protection, vol 24, no 1, 2022, pp 3-14.
This paper aimed to explore the concept and practice of dignity as understood and experienced by older adults and district nursing staff. The paper adds a new, nuanced understanding of safeguarding possibilities in the context of district nursing care delivered in the home. The research used an ethnographic methodology involving observations of care between 62 community district nursing clinicians and patient and semi-structured interviews with 11 nursing staff and 11 older adult recipients of district nursing care in England. Findings showed that abuse was less likely to occur when clinicians were maintaining the dignity of their patients. The themes of time and space were used to demonstrate some fundamental ways in which dignity manifested. The absence of dignity offered opportunities for abuse and neglect to thrive. So both time and space were essential safeguarding considerations. Dignity was influenced by time and how it was experienced temporally, but nurses were not allocated time to 'do dignity', an arguably essential component of the caregiving role, yet one that could become marginalised. The home-clinic exists as a clinical space requiring careful management to ensure it is also an environment of dignity that can safeguard older adults. District nurses have both a proactive and reactive role in ensuring their patients remain safeguarded. By ensuring care is delivered with dignity and taking appropriate action if they suspect abuse or neglect, district nurses can safeguard their patients. (JL)
From : <https://doi.org/10.1108/JAP-07-2021-0024>
- 263/61 Facilitators and challenges in the adoption of a virtual nurse visit in the home health setting; by Susan D Birkhoff, Julie McCulloh Nair, Kelly Bald (et al).: Taylor and Francis.
Home Health Care Services Quarterly, vol 40, no 2, April-June 2021, pp 105-120.
The COVID-19 pandemic created an opportunity to incorporate nurse-led virtual home care visits into heart failure patients' plan of care. As a supplemental nurse visit to traditional in-person home visits, the Virtual Nurse Visit (VNV) service was deployed using Zoom teleconferencing technology enabling telehealth nurses to remotely communicate, assess and educate their patients. This mixed methods study explored heart failure patients' abilities, experience and satisfaction to use and adopt a virtual nurse visit. Sociodemographic, semi-structured interview questions and the System Usability Scale data were collected. Thirty-four participants completed the study. More than half of the participants perceived the VNV to be usable and four qualitative themes emerged: perceived safety during COVID-19, preferences for care delivery, user experiences and challenges, and satisfaction with the VNV service. Findings from this study as they relate to telehealth will inform future studies examining this type of nurse-led virtual visit and subsequent patient outcomes. (RH)
ISSN: 01621424
From : <https://doi.org/10.1080/01621424.2021.1906374>

- 263/62 The use of community advisory boards in pragmatic clinical trials: the case of the adult day services plus project; by Keith A Anderson, Holly Dabelko-Schoeny, Sokha Koeuth (et al.): Taylor and Francis. Home Health Care Services Quarterly, vol 40, no 1, January-March 2021, pp 16-26.
Community advisory boards (CABs) have become increasingly common and important in translational research in health care, including studies focusing on home and community-based services. CABs are composed of stakeholders who share interest in research projects and typically include patients and/or clients, practitioners, community members, policymakers and researchers. CABs advise researchers on issues ranging from research design and recruitment to implementation and dissemination. In this article, the researchers detail their experiences with the CAB for a pragmatic clinical trial of Adult Day Services (ADS) Plus, an education and support intervention for family caregivers of older adults with dementia using adult day services. Lessons learned, guidelines and best practices are then presented for developing and working with a CAB in healthcare research. (RH)
ISSN: 01621424
From : <https://doi.org/10.1080/01621424.2020.1816522>

HEALTH SERVICES

(See Also 263/60)

- 263/63 Importance of telephone follow-up and combined home visit and telephone follow-up interventions in reducing acute healthcare utilization; by Yuan Ying Lee, Lay Hwa Tiew, Yee Kian Tay, John Chee Meng Wong.: Emerald.
Journal of Integrated Care, vol 29, no 4, 2021, pp 403-413.
Transitional care is increasingly important in reducing hospital readmission rates and length of stay (LOS). Singapore is focusing on transitional care to address the evolving care needs of a multi-morbid ageing population. This study aimed to investigate the impact of transitional care programmes (TCPs) on acute healthcare utilisation. A retrospective, longitudinal, interventional study was conducted. High risk patients were enrolled into a transitional care programme of a local tertiary hospital. Patients received either telephone follow-up (TFU) or home-based intervention (HBI) with TFU. Readmission rates and LOS were assessed for both groups. There was no statistically significant difference in readmissions or LOS between TFU and HBI. After excluding demised patients, TFU had statistically significant lower LOS than HBI. Both interventions demonstrated statistically significant reductions in readmissions and LOS in pre-post analyses. Overall findings showed that TFU may be more effective than HBI in patients with lower clinical severity, despite both interventions showing statistically significant reductions in acute healthcare utilisation. Study findings may be used to inform transitional care practices. Future studies should continue to examine the comparative effectiveness of transitional care interventions and the patient populations most likely to benefit. (JL)
ISSN: 14769018
From : <https://doi.org/10.1108/JICA-04-2021-0019>

- 263/64 Teaming up for more comprehensive care: case study of the Geriatric flying squad and emergency responders (Ambulance, Police, Fire and Rescue); by Lynda Elias, Genevieve Maiden, Julie Manger, Patricia Reyes.: Emerald.
Journal of Integrated Care, vol 29, no 4, 2021, pp 377-389.
The purpose of this paper was to describe the development, implementation and initial evaluation of the Geriatric Flying Squad's reciprocal referral pathways with emergency responders including New South Wales Ambulance, Police and Fire and Rescue. These innovative pathways and model of care were developed to improve access to multidisciplinary services for vulnerable community dwelling frail older people with the intent of improving health and quality of life outcomes by providing an alternative to hospital admission. This was a case study describing the review of the Geriatric Flying Squad's referral database and quality improvement initiative to streamline referrals amongst the various emergency responders in the local health district. Findings showed that sustainable cross-sector collaboration could be achieved through building reciprocal pathways between an existing rapid response geriatric outreach service and emergency responders including Ambulance, Police, Fire and Rescue. (JL)
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From : <https://doi.org/10.1108/JICA-05-2021-0025>

HEALTHY AGEING

(See Also 263/59)

- 263/65 Cultural differences in the association between subjective age and health: evidence from the Israeli component of the Survey of Health, Ageing and Retirement in Europe (SHARE-Israel); by Yoav S Bergman, Amit Shrira.: Cambridge University Press.
Ageing and Society, vol 42, no 1, January 2022, pp 32-47.
Research has demonstrated that holding a young subjective age (i.e. feeling younger than one's chronological age) has been associated with various positive aspects of physical and psychological health. However, little is known about how such associations differ between cultural sub-groups within a given society. Accordingly, the current study focused on the Israeli component of the Survey of Health, Ageing and Retirement in Europe (SHARE-Israel) and aimed to explore the moderating role of culture

on the association between subjective age and objective physical health, subjective physical health and psychological health. Data were collected from 1,793 respondents who were classified into three groups: veteran Israeli Jews, immigrants from the former Soviet Union and Israeli Arab citizens. Their ages ranged from 50 to 105 (mean = 69.65, standard deviation = 9.49). All participants rated their subjective age and filled out scales examining six dimensions covering psychological health, as well as objective and subjective physical health. Across all examined dimensions, an older subjective age was associated with unfavourable health outcomes. For the majority of health dimensions, the subjective age-health links were most prominent among Israeli Arabs. Results are discussed from both a general societal standpoint (i.e. group differences in access to health services), as well as from the individual's specific role in his or her culture and society. (RH)

ISSN: 0144686X

From : <https://doi.org/10.1017/S0144686X20000707>

- 263/66 The Living Standards Capabilities for Elders scale (LSCAPE): adaptation and validation in a sample of Spanish seniors; by Tamara Alhambra-Borras, Ascension Donate-Martinez, Jorge Garces-Ferrer.: Cambridge University Press.

Ageing and Society, vol 41, no 11, November 2021, pp 2527-2539.

Living standards capabilities are an important determinant of healthy ageing. The Living Standards Capabilities for Elders scale (LSCAPE) is the main instrument available to assess living standards capabilities among older adults based on Sen's Capability Approach. The objectives of this study were: (a) to adapt and validate LSCAPE for use in the Spanish population; (b) to examine the dimensionality, validity and reliability; and (c) to establish the convergent validity of LSCAPE using self-reported measures of quality of life and income. The LSCAPE was administered to 441 Spanish seniors aged 65 and over. Confirmatory Factor Analysis (CFA) was used to analyse the dimensionality, validity and reliability. Discriminant and convergent validity of the model were assessed using Average Variance Extracted (AVE). Reliability was shown by Composite Reliability (CR) and Cronbach's alpha. Convergent validity was tested by correlating the LSCAPE scales and sub-scales with the Short-form Health Survey (SF-12) sub-scales. CFA showed that the LSCAPE Six-factor Model fits well to the data, showing Standardised Root Mean Square Residual 0.09 (0.084), Comparative Fit Index and Tucker-Lewis Index > 0.9 (0.925 and 0.917, respectively). LSCAPE showed also good reliability (CR indices > 0.7) and validity (AVE > 0.5) measures. Finally, LSCAPE had moderate to strong associations with SF-12 Health Survey sub-scales (>0.6) and a moderate relationship with income (>0.3). Thus, LSCAPE has been demonstrated to be a reliable and valid instrument in measuring living standards capabilities among the Spanish older population. (RH)

ISSN: 0144686X

From : <https://doi.org/10.1017/S0144686X20000446>

HOME CARE

(See Also 263/32, 263/61, 263/82)

- 263/67 Constructing a professional identity as an in-home carer; by Catherine Jane Blundell.: Emerald. *Working with Older People*, vol 25, no 3, 2021, pp 202-213.

The purpose of this study, from Italy, was to examine ways in which foreign live-in carers are able to construct agentive identities which counteract negative discourses regarding care work, sex and nationality. Interviews with non-Italian women working as carers in Bologna formed the basis of this research which focused on 'small stories'. Using positioning analysis, both the immediate context where the narrative took place and the wider societal discourses being referenced were examined. Subsequently, common recurrent discourses related to being a foreign carer in Italy were identified. The interviewees made strategic use of prevailing negative discourses to construct counter narratives to avoid being positioned as low-skilled workers and to permit them to reject negative stereotypes of what it meant to be a carer. In addition, more positive identities were constructed. These findings suggest that a sociolinguistic approach can help towards a better understanding of the lived-experiences of foreign care workers, as it can reveal aspects of carers' lives which do not easily fit into the categories which are often the focus of larger-scale, thematic studies. This paper combines an analysis of content together with an analysis of the construction of narrative to present a more complete picture of the reality of working as a carer today. (JL)

ISSN: 13663666

From : <https://doi.org/10.1108/WWOP-06-2021-0033>

- 263/68 Perceptions and experiences of live-in carers: why acknowledging versus neglecting personal identity matters for job satisfaction and wellbeing; by Tushna Vandrevala, Emma O'Dwyer.: Cambridge University Press.

Ageing and Society, vol 42, no 1, January 2022, pp 72-88.

For some older people and their families, live-in care offers a way of continuing to live independently at home in their local community. While research in the care industry has consistently highlighted the effects of caring on workers, little research has specifically explored the experiences of live-in carers. The current study examines the ways in which live-in carers construct their role, the different challenges they face, and the strategies they use to mitigate them. Semi-structured interviews were carried out with 21 live-in carers in the United Kingdom and the data were analysed using thematic analysis. The findings

suggest that carers perceive their role as complex and characterised by a heavy workload and tiredness. Participants emphasised the variability which was introduced to the role as a function of the quality of agency support, the character and condition of the client, and the carer's relationships with the client's family. Participants' accounts reflected an acknowledgement of the need to orient and respond constantly to the needs and routine of the client. While this orientation was recognised as necessary for effectively fulfilling the demands of the role, it was also linked to feelings of dislocation and loss of identity. Drawing on understandings of personal and social identity, the implications of these findings for live-in carers' psychological well-being and organisational support are discussed. (RH)

ISSN: 0144686X

From : <https://doi.org/10.1017/S0144686X20000744>

263/69 VA home based primary care teams: partnering with and acting as caregivers for veterans; by C Manheim, L Haverhals, C Gilman (et al.): Taylor and Francis.

Home Health Care Services Quarterly, vol 40, no 1, January-March 2021, pp 1-15.

The U.S. Department of Veterans Affairs' Home-Based Primary Care (HBPC) Interdisciplinary Team (IDT) provides in-home, primary care for medically complex Veterans. Caregiver and IDT member partnerships are important to care; and this study explores how HBPC and veterans' caregivers provide such care. Interviews, focus groups and field observations were conducted during eight HBPC site visits. Qualitative thematic analysis was performed. Effective partnerships were found to include: ease of communication; caregiver-centred support; and when no caregiver is present, IDTs providing more monitoring/services to Veterans and connection to community services. As this model expands, understanding dynamics between IDT members and caregivers will optimise the success of HBPC programs. (RH)

ISSN: 01621424

From : <https://doi.org/10.1080/01621424.2020.1869634>

HOSPITAL CARE

(See Also 263/3, 263/54)

263/70 "Honor thy father and thy mother": the contribution of verbal concerns to the understanding of elderly patients' satisfaction; by Keren Semyonov-Tal.: Emerald.

Quality in Ageing and Older Adults, vol 22, no 2, 2021, pp 95-105.

This study aimed firstly, to provide a typology of complaints concerning the treatment of older patients in geriatric wards; secondly, to estimate reported satisfaction with treatment; and thirdly, to assess the link between verbal concerns and satisfaction. Using the "Survey of Geriatric Wards, 2019" a sample of 4,725 family members of patients, hospitalised in 99 geriatric wards in Israel were asked to rate their overall satisfaction with treatment. They were also asked to provide verbal information on the hospitalisation experience through an open-ended question. A content analysis was applied to the verbal answers, to classify them into distinct qualitative categories. A regression analysis was then applied to examine the impact of the concerns on the level of patient satisfaction, net of patient's characteristics. Level of satisfaction among family members was found to be very high (8.16 on a scale from 1_10), with only very few expressing verbal concerns (2.3%). Content analysis revealed five reoccurring themes: physical violence (33.3%), verbal violence (19.2%), discrimination (21.2%), lack of dignified hospitalisation conditions (8.1%) and communication (18.2%). Further analysis revealed that satisfaction among those who complained, especially about interpersonal relations, was considerably and significantly lower than others. (JL)

ISSN: 14717794

From : <https://doi.org/10.1108/QAOA-02-2021-0022>

263/71 Patient experience and satisfaction with admission to an acute geriatric community hospital in the Netherlands: a mixed method study; by Marthe E Ribbink, Catharina C Roozendaal, Janet L MacNeil-Vroomen (et al.): Emerald.

Journal of Integrated Care, vol 29, no 4, 2021, pp 390-402.

The Acute Geriatric Community Hospital (AGCH) in an intermediate care facility was developed in 2018 in Amsterdam (the Netherlands) as an alternative to conventional hospitalisation. A comprehensive geriatric assessment and rehabilitation were integrated into acute medical care for older patients. This study aimed to evaluate patient experience and satisfaction with the AGCH. This was a mixed method observational study including a satisfaction questionnaire and qualitative interviews with AGCH patients or informal caregivers. 152 study participants filled in the questionnaire and 13 semi-structured interviews were conducted. 12 categories and four overarching themes emerged in the analysis. In general, study participants experienced the admission to the AGCH as positive and were satisfied with the care they received. There were also suggestions for improvement. Limitations of this study included possible participation bias. The results showed that patients valued this type of care indicating that it should be implemented elsewhere. Further research will focus on health outcomes, readmission rates and cost effectiveness of the AGCH. (JL)

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From : <https://doi.org/10.1108/JICA-04-2021-0018>

HOSPITAL DISCHARGE

(See 263/53)

HOUSING

- 263/72 Mobility-based disadvantage in older age: insecure housing and the risks of moving house; by Emma R Power.: Cambridge University Press.
Ageing and Society, vol 42, no 1, January 2022, pp 89-111.
This paper develops knowledge of the logistics of moving house amongst older people living in insecure housing. These people typically do not move once and settle into a new house, but face ongoing moves driven by factors including housing affordability, tenure conditions and eviction. The paper identifies four domains of experience faced by people undergoing cumulative, involuntary residential moves: the material (process of relocating oneself and possessions), economic (costs of moving house), embodied (physical experience) and affective (how relocation is experienced and felt). The logistics of relocation are examined through the experiences of single older women living in insecure housing in the greater Sydney region of Australia. The accounts of these women foreground the costs and challenges of insecure housing that are a consequence of relocation. Conceptually, this work contributes to understandings of mobility-based disadvantage in older age by drawing out the ways that the logistics of moving house - of relocating oneself and possessions - contribute in distinct ways to mobility-based disadvantage through risks to identity and senses of home. Empirically it addresses gaps in gerontological and housing scholarship through developing knowledge of the logistics and experiences of ongoing, involuntary residential moves. (RH)
ISSN: 0144686X
From : <https://doi.org/10.1017/S0144686X20000768>

HOUSING WITH CARE

- 263/73 Extra care housing: the current state of research and prospects for the future; by Robin A Darton.: Cambridge University Press.
Social Policy and Society, vol 21, no 2, April 2022, pp 292-303.
Extra care housing aims to meet the housing, care and support needs of older people while maintaining their independence in self-contained accommodation. Evidence from several studies suggests that it has benefits for residents in terms of costs and outcomes and can provide a supportive environment for people with dementia, although the benefits for residents with greater care needs are less clear. Budgetary pressures and increasing eligibility criteria are altering the balance of care between residents and resulting in more task-focused, less personalised care. An increasing shortfall in provision and incentives for developers to concentrate on 'lifestyle' provision raise questions about the long-term viability of the model for supporting local authority-funded residents. Responses to the COVID-19 pandemic also raise questions about future housing and care arrangements, and these need to be addressed in the government's long-delayed plans for social care. (JL)
ISSN: 14747464
From : <https://doi.org/10.1017/S1474746421000683>
- 263/74 Learning from the experience and effectiveness of retirement village and extra care housing responses to the COVID-19 pandemic; by Rachael Dutton.: Emerald.
Quality in Ageing and Older Adults, vol 22, nos 3/4, 2021, pp 159-171.
The RE-COV study was designed to illuminate the responses and experiences of retirement villages and older people's extra care housing during the first year of the COVID-19 pandemic. It focused particularly on the implications of lessons learned for national, operational and building design policy and practice. Invitations to take part in the study survey were emailed to the operators of 270 retirement villages and older people's extra care housing schemes in England which were known to the Elderly Accommodation Counsel. Completed questionnaires were returned from 38 operators, online or electronically, between December 2020 and February 2021. Survey findings evidenced the breadth and depth of the operators' responses, the effects these had on residents' lives and worthwhile changes which could be made. Outcomes demonstrated included higher levels of protection for residents from the COVID-19 virus compared to older people living in the general community, and high levels of residents feeling safe, supported and reassured.
The findings were used to offer evidence-based recommendations for housing operators, building designers and policymakers which could enhance resident, staff and operators' health and wellbeing, both going forward and during possible future pandemics. (NH/JL)
ISSN: 14717794
From : <https://doi.org/10.1108/QAOA-09-2021-0071>

IMAGES OF AGEING

(See 263/14, 263/15)

INDEPENDENT LIVING

- 263/75 Independent living with mobility restrictions: older people's perceptions of their out-of-home mobility; by Henna Luoma-Halkola, Liisa Haikio.: Cambridge University Press.
Ageing and Society, vol 42, no 2, February 2022, pp 249-270.
The authors studied older people's perceptions of how they organise their out-of-home mobility and independent living when they face mobility restrictions, based on seven focus groups with older people (N = 28) from a suburb in Finland. They provide an everyday life view of how the ability to move outside the home evolves through interdependencies between older people and their neighbourhoods, social relations and societal arrangements. Their findings show that supportive socio-material surroundings can provide older people with new ways to move outside their home, despite mobility restrictions and new ways to organise their daily life with decreased mobility. In contrast, restrictive socio-material surroundings can lead to situations in which older people forgo certain out-of-home journeys and activities. The findings contribute to an understanding that organising one's daily life and out-of-home mobility is an act of interdependence. Policies promoting independent living in old age should recognise these fundamental interdependencies, and support versatile ways of living rather than overemphasise activity and self-reliance. Based on older people's everyday life perspectives, both sides of the coin need to be considered: how to enable the out-of-home mobility of older people facing mobility restrictions, and how to support them in managing and enjoying daily life with decreased mobility. (RH)
ISSN: 0144686X
From : <https://doi.org/10.1017/S0144686X20000823>

INEQUALITY AND HUMAN RIGHTS

- 263/76 Social inequalities over the lifecourse and healthy ageing in Aotearoa/New Zealand: differences by Maori ethnicity and gender; by Christine Stephens, Agnes Szabo, Mary Breheny.: Cambridge University Press.
Ageing and Society, vol 42, no 4, April 2022, pp 745-764.
Life-course approaches to healthy ageing recognise that health in older age is affected by long-term cumulative inequalities between socio-economic status (SES), gender and ethnic groups, which begin in childhood. Combining longitudinal survey data with life-course history interviews from 729 older New Zealanders aged 61-81 (mean = 72, standard deviation = 4.5), the authors tested a life-course model of predictors of physical, mental and social health in older age. Latent growth curve and mediation analysis showed that the link between childhood SES and late-life health (over 10 years) was mediated by education, occupation and adult wealth. To account for the moderating effects of gender and ethnicity, the authors modelled the effects for sub-groups separately (225 non-Maori women, 158 Maori women, 219 non-Maori men and 127 Maori men). Childhood SES was an important predictor of later-life health, mediated by education and adult SES for all participants and for non-Maori men. However, there were significantly different pathways for Maori men and for women. Maori men and women and non-Maori women did not attain the same health benefits from higher childhood SES and education as non-Maori men. Findings point to the importance of considering the mediators of lifelong impacts on health in older age, and recognition of how membership of different socially structured groups produces different pathways to late-life health. (RH)
ISSN: 0144686X
From : <https://doi.org/10.1017/S0144686X20001130>

INFORMATION AND COMMUNICATION TECHNOLOGY

- 263/77 'Behind the Digi-God's back': social representations of older people's digital competences and internet use in regional Finnish newspapers; by Paivi Rasi.: Cambridge University Press.
Ageing and Society, vol 42, no 4, April 2022, pp 829-848.
This article discusses how three Finnish regional newspapers represented older people's digital competencies and internet use in their daily coverage. The study explored media representations from the perspective of social representations and sought to answer three questions. First, in what kind of internet user roles do the articles portray older people? Second, how and with what kind of images do the articles portray older people's digital competencies in various internet user roles? Third, how are older people positioned at a societal level in the articles? The analysis revealed that older people were portrayed as incompetent outcasts of a digitalised society. However, there was a clear difference according to whether older people were portrayed as recipients of public services or as consumers of private services. As targets of public services, older people were predominantly portrayed as happy targets, who welcomed the services provided for them. This result can be interpreted as part of the promotion of government digitalisation policies. (RH)
ISSN: 0144686X
From : <https://doi.org/10.1017/S0144686X20001269>
- 263/78 The co-constitution of ageing and technology: a model and agenda; by Alexander Peine, Louis Neven.: Cambridge University Press.
Ageing and Society, vol 41, no 12, December 2021, pp 2845-2866.
This paper presents a model for studying ageing and technology. It investigates the theoretical gains that

can be made by combining insights from Age Studies and Science and Technology Studies (STS). Although technology has become a much more salient part in older people's everyday lives and investments are high in technologies to deal with the alleged challenges of demographic change, theory development about ageing-technology relations has not kept up with these trends. Partly this is due to the poor connection between the social scientific understanding of ageing and the technically focused discipline of gerontechnology. This has led to an interventionist logic that underlies much of the current and implicit theorising about ageing and technology. The authors briefly analyse the problems of the interventionist logic, and then present a model that conceptualises the co-constitution of ageing and technology. They propose this model - which they call the CAT-model - to highlight a number of fundamental ideas about ageing-technology relations. At the centre are four different arenas (life-worlds of older people, design worlds, technological artefacts and images of ageing) in and across which these relations can and should be studied. To develop the model, the authors build on their own theoretical and empirical work over the last decade, and on examples from recent scholarship that straddle the disciplinary boundaries between STS and Age Studies. (RH)

ISSN: 0144686X

From : <https://doi.org/10.1017/S0144686X20000641>

263/79 Gender, capital endowment and digital exclusion of older people in China; by Juhua Yang, Peng Du.: Cambridge University Press.

Ageing and Society, vol 41, no 11, November 2021, pp 2502-2526.

Amid rapid population ageing and the high-speed progress of information and communications technology, use of smart electronics can improve older people's quality of life by helping them to stay connected, active and independent, which may, in turn, increase their overall happiness and sense of social belonging. Taking a gender perspective, this paper aims to understand variations in digital exclusion among older people. Using data from the 2016 China Longitudinal Ageing Social Survey (CHARLS), it finds that digital exclusion seems to vary by gender, with rural female older people being most excluded, possibly because they have the lowest capital endowment. The gender difference in the digital divide is even more salient with all other things being equal. Digital exclusion in the information era may further exacerbate gender inequality, particularly for those who are already most vulnerable. Since digital inclusion is somewhat inherent in the concept of intelligent old-age support, it should be considered an urgent necessity to help older people, especially rural women, to become familiar with smart electronic products. (RH)

ISSN: 0144686X

From : <https://doi.org/10.1017/S0144686X20000434>

263/80 Internet use, social isolation and loneliness in older adults; by Stephanie Stockwell, Brendon Stubbs, Sarah E Jackson (et al): Cambridge University Press.

Ageing and Society, vol 41, no 12, December 2021, pp 2723-2746.

This study explored associations between internet and/or email use in a large sample of older English adults with their social isolation and loneliness. Data from the English Longitudinal Study of Ageing (ELSA) Wave 8 (2016-17) were used, with complete data available for 4,492 men and women aged 50+ (mean age = 64.3, standard deviation = 13.3; 51.7% males). Binomial logistic regression was used to analyse cross-sectional associations between internet/email use and social isolation and loneliness. The majority of older adults reported using the internet/email every day (69.3%), fewer participants reported once a week (8.5%), once a month (2.6%), once every three months (0.7%), less than every three months (1.5%) and never (17.4%). No significant associations were found between internet/email use and loneliness; however, non-linear associations were found for social isolation. Older adults using the internet/email either once a week (odds ratio (OR) = 0.60, 95% confidence interval (CI) = 0.49-0.72) or once a month (OR = 0.60, 95% CI = 0.45-0.80) were significantly less likely to be socially isolated than every day users; those using internet/email less than once every three months were significantly more likely to be socially isolated than every day users (OR = 2.87, 95% CI = 1.28-6.40). Once every three months and never users showed no difference in social isolation compared with every day users. Weak associations were found between different online activities and loneliness, and strong associations were found with social isolation. The study updated knowledge of older adults' internet/email habits, devices used and activities engaged in online. Findings may be important for the design of digital behaviour change interventions in older adults, particularly in groups at risk of, or interventions targeting loneliness and/or social isolation. (RH)

ISSN: 0144686X

From : <https://doi.org/10.1017/S0144686X20000550>

263/81 Predictors of use of digital technology for communication among older adults: analysis of data from the health and retirement study; by Brady Lund.: Emerald.

Working with Older People, vol 25, no 4, 2021, pp 294-303.

This study aims to examine the potential impact of eleven social and psychological factors - anxiety, closeness with family and friends, intellectual curiosity, life control, life satisfaction, physical health, religiosity, self-esteem, sociability, socioeconomic status and works status and demands - on the use of digital technology by older adults for the purpose of communicating with family and friends. A path analysis, which uses ordinary least squares regression to examine relationships among variables, is used to perform a secondary analysis of data from the 2018 Health and Retirement Study. A correlation matrix, which displays the direct relationships among variables, is also incorporated.

Statistically significant direct influences are revealed between the use of digital technology for communication and three factors: intellectual curiosity, self-esteem, and sociability. These three factors are themselves moderated by the influences of the remaining eight factors. While most factors relate to an increase in the adoption of social uses of digital technology, increased anxiety and increased work demands (for those who are employed) are related to decreased adoption, while increased religiosity has a mixed effect (reduced intellectual curiosity but increased sociability). These findings suggest a few avenues for identifying and intervening in the lives of physically and socially isolated older adults, by illuminating correlates of technology adoption. (NH/JL)

ISSN: 13663666

From : <https://doi.org/10.1108/WWOP-01-2021-0002>

263/82 Using active information and communication technology for elderly homecare services: a scoping review; by Kiourmars Chelongar, Sima Ajami.: Taylor and Francis.

Home Health Care Services Quarterly, vol 40, no 1, January-March 2021, pp 93-104.

Nowadays, as life expectancy grows, the healthcare industry faces growing challenges related to corresponding increases in chronic diseases. Home care services (HCS) are the solution to this growing problem. It's a general premise that information and communication technology (ICT) can address these health issues and enhances HCS. The scope of this study was the active managerial and supervisory roles of these technologies within HCS. The study aimed to extract, accumulate and classify the challenges of using active ICT for elderly HCS. The authors used keywords and their synonyms in combination, to search titles, keywords and abstracts. More than 300 resources were collected, of which 33 articles were eligible for this study. Later, a team of experts gave their opinions individually on the articles gathered. According to the expert team's opinions, researchers classified challenges into technology, human factors and management. (RH)

ISSN: 01621424 From : <https://doi.org/10.1080/01621424.2020.1826381>

INTEGRATED CARE

263/83 Impact of occupational therapy in an integrated adult social care service: audit of therapy outcome measure findings; by Sharon J Davenport.: Emerald.

Journal of Integrated Care, vol 29, no 4, 2021, pp 439-451.

The Therapy Outcome Measure (TOMs) is a standardised therapist reporting tool used to measure and record outcomes in social care. From April 2020 the tool was implemented by an occupational therapy adult social care service following integration into a community NHS Trust. The aim of this study was to demonstrate occupational therapy outcomes in adult social care through a local audit of the TOMs. The objective was to determine whether clients improved following occupational therapy intervention in the four domains of impairment, activity, participation and wellbeing/carer wellbeing. 70 cases were purposively sampled over a two-month timeframe, extracting data from the local electronic recording system. Findings showed that occupational therapy in adult social care clearly makes an impact with their client group and carers. Evidence from the dataset demonstrates clinically significant change, as 93% of clients seen by adult social care occupational therapy staff showed an improvement in at least one TOMs domain during their whole episode of care. 79% of activity scores, 20% of participation scores and 50% of wellbeing scores improved following intervention. 79% of carer wellbeing scores improved following occupational therapy. The audit did not collect data on uptake from the separate teams (equipment, housing, STAR and adult social care work) in occupational therapy adult social care. Potential sampling bias occurred as cases with completed scores only were purposively sampled. Sampling was not random which prevented data gathering on uptake of TOMs across the separate teams. Additionally, the audit results could only be applied to the setting from which the data was collected, so they had limited external validity. These novel findings illustrate the valuable and unique impact of occupational therapy in this adult social care setting. The integration of adult social care into an NHS Community Trust has supported the service to measure outcomes by utilising the same standardised tool in use by allied health professions across the Trust. (JL)

ISSN: 14769018 From : <https://doi.org/10.1108/JICA-04-2021-0020>

263/84 Preconditions to implementation of an integrated care process programme; by Angela Bangsbo, Anna Duner, Synneve Dahlin Ivanoff, Eva Liden.: Emerald.

Journal of Integrated Care, vol 30, no 1, 2022, pp 66-76.

The purpose of this Swedish study was to investigate the preconditions of a full-scale implementation of an integrated care process programme for frail older people from the staff's understanding, commitment and ability to change their work procedures with comparisons over time and between organisations. A repeated cross-sectional study was conducted in a hospital, municipal health and social care setting. Findings showed that staff commitment decreased to the importance of a permanent municipal contact from baseline compared to the 12-months follow-up and the six- and 12-months follow-up, to the information transfer from emergency department from the six- to the 12-months follow-up to discharge planning at the hospital at six- and 12-months follow-up and towards discharge planning at home from baseline to the six-month follow-up. Significant differences occurred between the organisations about information transfer from the emergency department and discharge planning at home. The hospital staff were the most committed. These results can guide the implementation of complex interventions in organisations with high-employee turnover and heavy workload. (JL)

ISSN: 14769018 From : <https://doi.org/10.1108/JICA-06-2020-0035>

INTERGENERATIONAL ISSUES

(See Also 263/86, 263/92)

- 263/85 You are my favourite!: Parent-child relationships and satisfaction in later life in Italy; by Cecilia Tomassini, Elisa Cisotto, Giulia Cavrini.: Cambridge University Press. Ageing and Society, vol 41, no 11, November 2021, pp 2467-2483. While most surveys on intergenerational transfers include questions on the structural indicators of family exchanges, it is still uncommon for them to contain assessments of the relationships between parents and their adult children as well. This study uses the Italian 2009 Family Survey to analyse the satisfaction of parent-child relationships for parents aged 65 and older. After examining the association of such a variable with the structural indicators of intergenerational exchanges (frequency of contact), the authors use multilevel multinomial models to explore the individual factors associated with satisfaction of relationships with a child. Overall, older Italian parents report high satisfaction in their relationships with their adult children. Additionally, a not strong, but statistically significant association between structure (contact) and satisfaction was found. This study shows how high satisfaction of relationships with children is positively associated with being a mother and being married, and negatively associated with bad health status. Some of the variables considered have different impacts between the sexes of parents. Additionally, a better appreciation of relationships with daughters compared to sons was found, especially for fathers. (RH)
ISSN: 0144686X
From : <https://doi.org/10.1017/S0144686X20000471>

INTERNATIONAL AND COMPARATIVE

(See Also 263/19, 263/24, 263/47, 263/59, 263/65, 263/76, 263/79, 263/94, 263/118, 263/124, 263/140)

- 263/86 Adult childrens' achievements and ageing parents' depressive symptoms in China; by Haowei Wang (et al.): Cambridge University Press. Ageing and Society, vol 42, no 4, April 2022, pp 896-917. This study examined the association between adult children's achievements and ageing parents' depressive symptoms in China. The research topic was examined within the contexts of one-child and multiple-children families in rural and urban China. Older adults (aged 60-113, N = 8,450; nested within 462 communities/villages) from the 2013 China Longitudinal Ageing Social Survey provided information about themselves and their adult children (N = 22,738). Adult children's achievements were assessed with educational attainment, financial status and occupational status; older parents' depressive symptoms were assessed with nine items of the Chinese version of the Center for Epidemiological Studies Depression Scale (CES-D). Multilevel linear regression models were estimated separately for older parents with one child only and multiple children. For older parents with multiple children, both having one or more children with any achievement and the total number of children's achievements were associated with fewer depressive symptoms. For parents with only one child, any achievement of the child and the total number of the child's achievements were associated with fewer depressive symptoms. Our results also indicated that the association between children's achievements and parents' depressive symptoms varied by rural-urban residence and family type. These findings contributed to the understanding of family dynamics underlying the emotional well-being of older adults in China. (RH)
ISSN: 0144686X
From : <https://doi.org/10.1017/S0144686X20001270>
- 263/87 Effect of older adults in the family on the sandwich generation's pursuit of entrepreneurship: evidence from China; by Yiwei Liu, Wenjing Wang, Zhen Cong (et al.): Cambridge University Press. Ageing and Society, vol 42, no 2, February 2022, pp 331-350. Household entrepreneurship is a basic unit of entrepreneurial activity, and a crucial aspect of connecting personal and social well-being. This study examines the relationship between the proportion of older family members and household entrepreneurship. The authors use data from the China Family Panel Studies to assess the mediating effect of the middle-aged generation's support to their parents, and the moderating effect of the parents' support with respect to the proportion of older family members and entrepreneurship. They adopt the instrumental variable method to deal with endogeneity, robustness and credibility of the estimation results. The results show that a higher proportion of older family members impedes household entrepreneurship. Moreover, the financial and instrumental support provided by the middle-aged generation to their parents significantly mediates the relationship between the proportion of elderly family members and household entrepreneurship. In turn, parents' financial support to the middle-aged generation moderates the focal relationship; however, parents' instrumental support does not moderate the focal relationship. These findings emphasise the need to develop a comprehensive social security network for older adults that will indirectly promote household entrepreneurship, and improve personal and social well-being. (RH)
ISSN: 0144686X
From : <https://doi.org/10.1017/S0144686X21001033>

- 263/88 How do older adults spend their time?: Gender gaps and educational gradients in time use in East Asian and Western countries; by Man-Yee Kan, Muzhi Zhou, Daniela Veronica Negraia, Kamila Kolpashnikova, Ekaterina Hertog, Shohei Yoda, Jiweon Jun. *Journal of Population Ageing*, 2021, 537?562.
This study claims to be the first to document how older adults in East Asian and Western societies spend their time, across four key dimensions of daily life, by respondent's gender and education level. To do this, the authors undertook a pioneering effort and harmonized cross-sectional time-use data from East Asian countries (China, Japan, South Korea, Taiwan) with data from the Multinational Time Use Study (Canada, Denmark, Finland, France, Italy, The Netherlands, Norway, Spain, United Kingdom, United States; referred to as Western countries), collected between 2000 and 2015. Findings from bivariate and multivariate models suggest that daily time budgets of East Asian older adults are different from their counterparts in most Western countries. Specifically, gender gaps in domestic work, leisure, and sleep time were larger in East Asian contexts, than in Western countries. Gender gaps in paid work were larger in China compared to all other regions. Higher levels of educational attainment were associated with less paid work, more leisure, and less sleep time in East Asian countries, while in Western countries they were associated with more paid work, less domestic work, and less sleep. Interestingly, Italy and Spain, two Southern European welfare regimes, shared more similarities with East Asian countries than with other Western countries. The authors interpret and discuss the implications of these findings for population aging research, and welfare policies.
From : <https://doi.org/10.1007/s12062-021-09345-3>
- 263/89 Mental health of older migrants migrating along with adult children in China: a systematic review; by Julia Juan Wang, Daniel W L Lai.: Cambridge University Press.
Ageing and Society, vol 42, no 4, April 2022, pp 786-811.
Due to urbanisation in China, about 7.74 million older people have migrated to urban centres, where their adult children reside and work, to care for their grandchildren. While older migrants may benefit from family reunion and mutual support, empirical studies have identified challenges to adaptation, integration and mental health. Employing a systematic literature review approach, this paper examines recent empirical studies on the mental health of older migrants migrating along with adult children in China, focusing on mental health and well-being outcomes and determinants and directions for social work interventions. It identifies directions for considering diversity in conceptualisations of mental health and in theoretical perspectives to enrich understanding of the experiences of Chinese older migrants migrating along with adult children and potential interventions. (RH)
ISSN: 0144686X From : <https://doi.org/10.1017/S0144686X20001166>
- 263/90 More invisible and vulnerable: the impact of COVID-19 on older persons in displacement in Durumi IDP camp Abuja, Nigeria; by Prince Chiagozie Ekoh, Patricia Uju Agbawodikeizu, Elizabeth Onyedikachi George (et al).: Emerald.
Quality in Ageing and Older Adults, vol 22, nos 3/4, 2021, pp 135-146.
The coronavirus (COVID-19) pandemic has further intensified the vulnerability of older people in displacement and rendered them more unseen. This study aimed to explore the impact of COVID-19 on older people in displacement. Data were obtained using semi-structured interviews from 12 older persons at Durumi IDP camp Abuja, while observing strict infection control measures. The data were inductively coded with Nvivo and analysed thematically. Findings revealed that the economic and psychosocial fallout of the COVID-19 pandemic has increased older persons in displacement poverty, psychological stress and placed them at risk of ageism, social isolation and may subsequently lead to secondary displacement, thereby losing all progress, development and resilience built after initial displacement. The paper concludes by encouraging all stakeholders to pay more attention to this invisible yet vulnerable group to ensure no one is left behind as people fight through the pandemic and its social implications. This study is the first to explore the impact of COVID-19 on older people in displacement in Nigeria. This is because they have hitherto been relatively invisible to research endeavours. (JL)
ISSN: 14717794 From : <https://doi.org/10.1108/QAOA-10-2020-0049>
- 263/91 The power of culture: the gendered impact of family structures and living arrangements on social networks of Chinese older adults; by Menghan Zhao, Fan Yang, Youlang Zhang.: Cambridge University Press.
Ageing and Society, vol 42, no 3, March 2022, pp 657-680.
Most of the extant literature on fertility history and social networks of older adults has focused on advanced societies. Nevertheless, a limited number of studies have explored how culturally preferred family structures or living arrangements are related to older adults' social networks in developing societies. This study examined these issues in the Chinese context and paid particular attention to the filial piety and preference for sons dominating Chinese society. Using nationally representative data of adults aged 60 and over from the China Longitudinal Aging Social Survey in 2016, the authors constructed family and friend network scores, following previous studies; they developed linear models using multiple imputation for the missing data. The results suggested that childless older adults were the most disadvantaged in receiving support from family networks. Despite China's patrilineal culture, daughters were important sources of support. In terms of friend networks, older men who had no sons were least likely to receive support while co-residing with a partner and a son(s) might benefit them. Further analysis revealed that older rural women, but not older urban women, also had more support from friend networks if living with sons, implying urban-rural differences. Given the impact of social

networks on older adults' health and well-being, older Chinese people with no sons might need more support from other sources, such as aged-care programmes from public institutions, to achieve healthy ageing. (RH)
ISSN: 0144686X From : <https://doi.org/10.1017/S0144686X20001087>

- 263/92 Social capital, built environment and mental health: a comparison between the local elderly people and the laopiao in urban China; by Shuangshuang Tang, Harry F Lee, Jianxi Feng.: Cambridge University Press.
Ageing and Society, vol 42, no 1, January 2022, pp 179-203.
In rapidly urbanising China, the high number of older people, the so-called 'laopiao', float to cities where their sons or daughters live to look after their children and grandchildren. Laopiao in urban China are thought to suffer poor mental health owing to their floating status. This study explores the interrelationship between social capital, the built environment and mental health in urban China. Using a recent survey conducted in Nanjing (based on 591 completed questionnaires), structural equation modelling was performed to compare the local older population and the laopiao. Results showed that mental health determinants are dissimilar between the two groups. Bonding social capital promotes mental health in both groups, while bridging and linking social capital only contributes to the mental health of the laopiao. Also, access to public transport is positively correlated with mental health in both groups. Furthermore, lower street network density and better access to parks enhance the mental health of the local older population, while higher street network density and more open space within a community enhance the mental health of the laopiao. These findings suggest that different policy measures should be implemented for different groups of older people in urban China to improve their mental health. (RH)
ISSN: 0144686X
From : <https://doi.org/10.1017/S0144686X2000077X>

LEISURE

(See 263/5, 263/88)

LGBT

- 263/93 'I'm going to live my life for me': trans ageing, care, and older trans and gender non-conforming adults' expectations of and concerns for later life; by Paul Willis, Michele Raithby, Christine Dobbs (et al.): Cambridge University Press.
Ageing and Society, vol 41, no 12, December 2021, pp 2792-2813.
While research on the health and well-being of older lesbian, gay and bisexual adults is gradually expanding, research on older trans and gender non-conforming (TGNC) adults lags behind. Current scholarship about this group raises important questions about the intersection of ageing and gender identity for enhancing care and support for older TGNC adults and the lack of preparedness of health and social professionals for meeting these needs. This paper examines the accounts of 22 TGNC individuals (50-74 years) on the topic of ageing, and their concerns for and expectations of later life. It presents qualitative findings from a study of gender identity, ageing and care, based in Wales. Data were generated from two-part interviews with each participant. Four key themes are identified: (a) facilitative factors for transitioning in mid- to later life; (b) growing older as a new lease of life; (c) growing older: regrets, delays and uncertainties; and (d) ambivalent expectations of social care services. The authors argue that growing older as TGNC can be experienced across a multitude of standpoints, ranging from a new lease of life to a time of regret and uncertainty. They critically discuss emergent notions of trans time, precarity and uncertainty running across participants' accounts, and the implications for enhancing recognition of gender non-conformity and gender identity in social gerontology. (RH)
ISSN: 0144686X From : <https://doi.org/10.1017/S0144686X20000604>

LONELINESS AND SOCIAL ISOLATION

(See Also 263/9, 263/80)

- 263/94 Aging, marital status, and loneliness: multilevel analyses of 30 countries; by Elyakim Kislev.: Hipatia Press.
Research on Ageing and Social Policy, vol 10, no 1, Jan-Jul 2022, pp 77-103.
Using data from the 2006, 2010, 2012 and 2014 waves of the European Social Survey (ESS) and the UN databases, this paper investigates the differences in feelings of loneliness among different marital status groups in old age. Findings presented in this paper suggest that married older people are the least lonely group, followed by never-married older people, who fare better than widowed, divorced and separated older people. Overall, while married individuals are the happiest and the least lonely of all groups, marriage, on average, ends up with less benign results in late stages of life. The discussion section of this paper suggests that these findings might fit with the "greedy marriage" argument that long-term never-married people develop social skills and circles over time, which allows them to be more immune to loneliness and depression than widowed, divorced and separated older people.
(OFFPRINT.) (RH)
ISSN: 20146728 From : <https://doi.org/10.17583/rasp.8923>

- 263/95 Developing a new conceptual framework of meaningful interaction by understanding social isolation and loneliness; by Andrea Wigfield, Royce Turner, Sarah Alden (et al).: Cambridge University Press. Social Policy and Society, vol 21, no 2, April 2022, pp 172-193. Academic debate about social isolation and loneliness, and their adverse health and wellbeing implications, has resulted in many policy and programme interventions directed towards reducing both, especially among older people. However definitions of the two concepts, their measurement, and the relationship between the two are not clearly articulated. This article redresses this and draws on theoretical constructs adapted from symbolic interactionism, together with the Good Relations Measurement Framework, developed for the Equality and Human Rights Commission in the UK, to challenge the way in which social isolation and loneliness are currently understood. It argues for a need to understand experiences of social relationships, particularly those which facilitate meaningful interaction, suggesting that opportunities and barriers to meaningful interaction are determined by wider societal issues. This is set out in a new conceptual framework which can be applied across the life course and facilitates a new discourse for understanding these challenging concepts. (JL)
ISSN: 14747464
From : <https://doi.org/10.1017/S147474642000055X>
- 263/96 Loneliness, social dislocation and invisibility experienced by older men who are single or living alone: accounting for differences across sexual identity and social context; by Paul Willis, Alex Vickery, Tricia Jessiman.: Cambridge University Press. Ageing and Society, vol 42, no 2, February 2022, pp 409-431. Across literature on loneliness and ageing, little attention is given to the intersection of ageing, sexuality and masculinities, and how this shapes the social connections of older men. The authors report findings from a qualitative study of older men's experiences of loneliness and social participation, focusing on perspectives from two groups who are single and/or living alone: men identifying as (a) heterosexual and (b) gay (not bisexual). They present findings generated from semi-structured interviews with 72 men residing in England (65-95 years). They discuss three prominent themes: (a) loneliness, loss and social dislocation; (b) diverging life-events that trigger loneliness; and (c) variations in visibility and exclusion across social settings. Embedded within men's descriptions of loneliness is a running theme of social dislocation that speaks to a wider sense of social separation and estrangement. Unique to gay men's accounts are the ways in which experiences of loneliness and social isolation are compounded by living in heteronormative social environments and their encounters with ageism in gay social settings. Older men's accounts convey anxieties about visibility and anticipated exclusion across social settings shared with other men that vary according to sexual identity and context. The authors discuss how sexuality and being single and/or living alone impact on older men's social participation as we seek to move beyond a heterocentric understanding of loneliness. (RH)
ISSN: 0144686X
From : <https://doi.org/10.1017/S0144686X20000914>
- LONG TERM CARE**
- 263/97 Incentives and deterrents to the supply of long-term care for the elderly in England: evidence and experience in two local authorities; by Stephen Allan, Robin Darton.: Cambridge University Press. Social Policy and Society, vol 21, no 2, April 2022, pp 304-315. This article reported on a study assessing the incentives and deterrents to long-term care (LTC) supply in two local markets in England. The study found that supply of LTC in many countries is facing the issues of rising demand, lack of workforce and the interaction of the public and private sectors. Findings from qualitative interviews of local council and provider stakeholders exploring barriers and enablers faced by LTC providers in two local authorities (LAs) were presented and discussed. The interviews provided insight in three main areas: staffing, demand and stakeholder relationships. Staffing, in particular, was found to be crucial and there were many difficulties for providers in maintaining their workforce. Consistent with previous research, it was also noted that public spending levels on LTC puts pressure on providers striving to maintain a good quality service, including improved remuneration of staff. (JL)
ISSN: 14747464
From : <https://doi.org/10.1017/S1474746421000403>
- 263/98 Introduction: policies and practices shaping long-term care: between an inclusivity ethos and service delivery realities; by Shereen Hussein, Sara Charlesworth.: Cambridge University Press. Social Policy and Society, vol 21, no 2, April 2022, pp 257-260. Introduction to a special themed section of this journal. The section brings together several prominent scholars in long term care (LTC) research from different disciplines including health economics, sociology, demography, social policy, organisational studies and health care policy. The contributors employ diverse methodological approaches ranging from reviews and policy analysis to in-depth qualitative and quantitative methods. They also bring different perspectives and vantage points in their assessments of how the delivery of LTC is shaped 'on the ground', extending from cross-national comparisons of LTC and other policy settings to how workers, particularly those from minority groups, experience the day-to-day work of LTC. (JL)
ISSN: 14747464 From : <https://doi.org/10.1017/S1474746421000919>

- 263/99 What is out there and what can we learn?: international evidence on funding and delivery of long-term care; by Daniel Roland, Julien Forder, Karen Jones.: Cambridge University Press.
Social Policy and Society, vol 21, no 2, April 2022, pp 261-274.
This article describes the social care funding and delivery arrangements of a varied selection of developed countries, focusing on long-term care of older people. International evidence and latest reforms can inform the debate as countries struggle economically. Some have opted for mandatory social insurance that provides universal coverage. A premium is paid and if the insured individual or relatives require support they are entitled to it. Others opt for a similar universal system but with earmarked taxation while others fund their social care entirely from general taxation. Many choose a safety net system in which benefits are means tested leaving wealthier individuals to secure private arrangements of care. Within the UK the level of support varies as Scotland provides personal care free of charge, being more generous than England, Wales and Northern Ireland. There is no 'one solution' but understanding different options can help in the discussion of current and future reforms. (JL)
ISSN: 14747464
From : <https://doi.org/10.1017/S1474746421000531>

MEDICAL ISSUES

(See 263/47)

MEDICATION

- 263/100 Development of a drug distribution support device and survey of medication management burden on group home staff; by Ryoji Suzuki.: Taylor and Francis.
Home Health Care Services Quarterly, vol 40, no 3, July-September 2021, pp 218-230.
In Japan, the mean length of time spent on preparing and administering medications each day for everyone in care facilities has been reported to be 163 min. Most caregivers who administer medications to older people in care facilities have reported that this responsibility is a burden. The authors developed a drug distribution support device (DDSD) for caregivers, which was then installed in a group home, and a 3-month monitoring experiment was conducted. Caregivers then answered a questionnaire survey on medication management burden pre- and post-DDSD use. The caregivers reported no difficulties associated with medication distribution using DDSD. The DDSD reduced the daily dispensing duration by an average of 3.5 min. The questionnaire survey showed no differences in items related to the reduction of errors, and the Family Caregiver Medication Administration Hassles Scale showed no reduction of burden on caregivers. However, whether the DDSD reduces medication management burden remains undetermined. (RH)
ISSN: 01621424
From : <https://doi.org/10.1080/01621424.2021.1947927>
- 263/101 Forms of trust and polypharmacy among older adults; by Alison Ross, James Gillett.: Cambridge University Press.
Ageing and Society, vol 41, no 11, November 2021, pp 2583-2598.
This article examines how older adults make decisions about their medications through interconnected axes of trust that operate across social networks. Trust is negotiated by older adults enrolled in a deprescribing programme, which guides them through the process of reducing medications to mitigate risks associated with polypharmacy. This Canadian qualitative study was part of a larger study, a randomised controlled trial (RCT), which was a multi-centre project, set in routine primary care. The authors' analysis is informed by Jurgen Habermas's 'The theory of communicative action', vol 2 (1987) on the significance of communicative action in negotiating trust within social relationships, specifically, the use of in-depth semi-structured interviews with older adults about their medication use and the role of social networks in managing their health. Participants were age 70+ and experiencing polypharmacy. The authors' analysis discusses the social nature of medication practices and the importance of social networks for older adults' decision-making. Their perspective reflects the critique of late-modern society put forward by Habermas. Negotiating trust in pharmaceutical decision-making requires navigating tensions across and between system networks (health-care professionals) and life-world networks (family and friends). This study contributes to our knowledge of how distinct forms of trust operate in different social spheres, and sets the context for the way in which health-care decisions are made across social networks. The analysis reinforces the need for older adults to engage meaningfully in health-care decision-making, such that a convergence between system-world and life-world structures is encouraged. This would improve deprescribing programmes' efficacy as older adults optimise their medication use and improve their overall quality of life. (RH)
ISSN: 0144686X
From : <https://doi.org/10.1017/S0144686X20000483>

MENTAL CAPACITY

- 263/102 The neglected contributions of self-efficacy to older adults' financial capacity; by Hassam Waheed.: Emerald.
Quality in Ageing and Older Adults, vol 22, no 2, 2021, pp 106-113.
An ageing population comes with its own set of challenges such as impaired financial capacity and resultant dependency on others to manage financial affairs. Dependency in turn, as the evidence suggests, creates opportunities for financial exploitation of older adults. Related studies have primarily examined the clinical features and correlates of financial capacity or have attempted to develop its multidimensional measures. However both do little to resolve issues associated with impaired financial capacity. This paper aims to make a case for future researchers to assess older adults' financial capacity from a non-clinical aspect. Drawing on the notion of self-efficacy, as encapsulated within the social cognitive theory, this paper presents evidence from a host of different domains to demonstrate the potential contributions of self-efficacy to older adults' financial capacity. The contributions of self-efficacy in preserving older adults' financial capacity appear to be much more profound than is currently acknowledged in the literature, thereby overlooking potentially promising and cost-effective interventions for autonomous ageing. This paper presents a novel application of self-efficacy to autonomous ageing. Within this context, potential routes to the deployment of self-efficacy-based interventions are also discussed. (JL)
ISSN: 14717794
From : <https://doi.org/10.1108/QAOA-05-2021-0043>

MENTAL HEALTH

(See Also 263/46, 263/86, 263/89)

- 263/103 Do cognitively stimulating activities affect the association between retirement timing and cognitive functioning in old age?; by Isabel Baumann, Harpa S Eyjólfssdóttir, Johan Fritzell (et al.): Cambridge University Press.
Ageing and Society, vol 42, no 2, February 2022, pp 306-330.
In response to the rising financial pressure on old-age pension systems in industrialised economies, many European countries plan to increase the eligibility age for retirement pensions. The authors used data from Sweden to examine whether (and if so, how) retirement after age 65 - the eligibility age for basic pension - compared to retiring earlier affects the cognitive functioning of older adults'(between ages 70 and 85). Using a propensity score matching (PSM) approach, the authors examined, first, the selection bias potentially introduced by non-random selection into either early or late retirement; and second, average and heterogeneous treatment effects (HTEs). HTEs were evaluated for different levels of cognitive stimulation from occupational activities before retirement and from leisure activities after retirement. They drew from a rich longitudinal data-set linking two nationally representative Swedish surveys with a register data-set. They found that, on average, individuals who retire after age 65 do not have a higher level of cognitive functioning than those who retire earlier. Similarly, they did not observe HTEs from occupational activities. With respect to leisure activities, they found no systematic effects on cognitive functioning among those working beyond age 65. They conclude that, in general, retirement age does not seem to affect cognitive functioning in old age. Yet, the rising retirement age may put substantial pressure on individuals who suffer from poor health at the end of their occupational career, potentially exacerbating social- and health-related inequalities among older people. (RH)
ISSN: 0144686X
From : <https://doi.org/10.1017/S0144686X20000847>

MENTAL HEALTH CARE

- 263/104 Effectiveness of counselling and psychotherapeutic interventions for people with dementia and their families: a systematic review; by Emily Shoesmith, Alya Wyn-Griffiths, Cara Sass, Divine Charura.: Cambridge University Press.
Ageing and Society, vol 42, no 4, April 2022, pp 962-989.
As there is currently no cure for dementia, providing psychosocial support is imperative. Counselling and psychotherapeutic interventions offer a way to provide individualised support for people with dementia and their families. However, to date, there has not been a systematic review examining the research evidence for these interventions. This review aimed to examine the following research questions: (1) Are counselling and/or psychotherapeutic interventions effective for people with dementia?, (2) Are counselling and/or psychotherapeutic interventions effective for care-givers of people with dementia? and (3) Which modes of delivery are most effective for people with dementia and care-givers of people with dementia? A systematic literature search was conducted in MEDLINE (via PubMed), PsycINFO and CINAHL in March 2019. Keyword searches were employed with the terms 'dement*', 'counsel*', 'psychotherapy', 'therap*', 'care' and 'outcome', for the years 2000-2019. Thirty-one papers from seven countries were included in the review. Twenty studies were randomised controlled trials (RCTs) or adopted a quasi-experimental design. The remaining studies were qualitative or single-group repeated-measures design. The review identified variation in the counselling and/or psychotherapeutic approaches and mode of delivery. Most interventions adopted either a problem-solving or cognitive behavioural therapy approach. Mixed effectiveness was found on various

outcomes. The importance of customised modifications for people with dementia was highlighted consistently. Understanding the dyadic relationships between people with dementia and their care-givers is essential to offering effective interventions and guidance for practitioners is needed. Information about the cognitive impairment experienced by participants with dementia was poorly reported and is essential in the development of this research area. Future studies should consider the impact of cognitive impairment in developing guidance for counselling and/or psychotherapeutic intervention delivery for people with dementia. (RH)

ISSN: 0144686X

From : <https://doi.org/10.1017/S0144686X2000135X>

- 263/105 Exploring older adults' experiences seeking psychological services using the network episode model; by Brooke E Beatie, Corey S Mackenzie, Genevieve Thompson (et al).: Cambridge University Press. Ageing and Society, vol 42, no 1, January 2022, pp 48-71.

Older adults' mental health problems are a growing public health concern, especially because their rate of mental health service use is particularly low. Decades of mental health service utilisation models have been developed, yet key assumptions from these models focus primarily on factors that facilitate or inhibit access into the treatment system without taking into consideration the dynamics of how individuals respond to their mental health problems and engage in service use. More recently, dynamic models such as the Network Episode Model (NEM-II) have been developed to challenge the underlying, rational choice assumption of traditional utilisation models. Given the multifaceted and complex nature of older adults' mental health problems, this Canadian study aimed to examine whether the NEM-II is a helpful and appropriate model for understanding the dynamic process of how older adults navigate the mental health system, including factors that advanced and delayed help-seeking. Qualitative analyses from 15 interviews with older adults revealed that their backgrounds, social supports and treatment systems influence, and are influenced by, their illness careers. Factors that delayed help-seeking included: a lack of support, 'inappropriate' referrals or advice from treatment professionals, and poor mental health literacy. This research suggests the NEM-II is a helpful and appropriate theory for understanding older adults' pathways to treatment, and has implications for enhancing access to psychological services. (RH)

ISSN: 0144686X

From : <https://doi.org/10.1017/S0144686X20000719>

MIGRATION

(See 263/30, 263/89)

NEIGHBOURHOODS AND COMMUNITIES

(See Also 263/144)

- 263/106 'I shall miss the company': participants' reflections on time-limited day centre programming; by Robert J Hagan, Roger Manktelow.: Cambridge University Press.

Ageing and Society, vol 41, no 12, December 2021, pp 2933-2952.

The social needs of frail or isolated older people are sometimes aided by referrals to day centres in the United Kingdom. Since the late 1940s, day centres have had a role to play promoting socialisation in later life. Additionally, attendance at day centres is often open-ended, with participants only leaving due to moving to a nursing home or dying. In this study, the views of those attending time-limited day centre programmes in seven day centres in Northern Ireland have been sought in relation to their thoughts about the service as well as how they feel when it ends. Seventeen participants completed diaries for the programme duration and/or engaged in an interview process. Participants reflected on the social and educational benefits of attending, but also recognised impositions in the centres that impinged upon individual choices and also the length of time they could remain. This study reveals that, in order to maintain socialisation, time-limited programmes must have clear follow-on strategies for participants. Additionally, respondents' experiences reflect that a paternalistic model of care delivery remains in place that, whilst restrictive, reveals that access to the service is more specialised and not universal. Nevertheless, should day centres wish to remain relevant, it is important that service users are fully consulted about their desires and choices within the setting. (RH)

ISSN: 0144686X

From : <https://doi.org/10.1017/S0144686X20000689>

- 263/107 'It gives you a reason to be in this world': the interdependency of communities, environments and social justice for quality of life in older people; by Jane M Robertson, Grant Gibson, Corinne Greasley-Adams (et al).: Cambridge University Press.

Ageing and Society, vol 42, no 3, March 2022, pp 539-563.

Despite the complex interplay of factors that contribute to older people's quality of life, the research has predominantly focused on functional elements experienced at individual or dyadic level. Less studied have been perspectives which explore the interdependency of older people and their communities and environments. Qualitative data from a co-produced study of dimensions influencing older people's quality of life in Scotland was subjected to secondary analysis using a critical human ecological approach. Findings demonstrate the importance of community interdependencies in supporting

individual quality of life, the expression of active agency to foster quality of life within and across communities, and the importance of state infrastructures and service provision within these interdependencies. This article argues for a movement beyond functional conceptualisations of quality of life towards the inclusion of perspectives regarding communal well-being, alongside the role differing types of community play in influencing quality of life. Through developing conceptions of quality of life in social relations and community cohesion, in particular how quality of life is influenced by perceptions of solidarity and social justice including across generations, assessing quality of life at community level will assist in driving cultural change in policy making and practice. (RH)

ISSN: 0144686X

From : <https://doi.org/10.1017/S0144686X20000859>

- 263/108 Age friendly Wales: our strategy for an ageing society: what we will do to use the potential of today's older people and support our ageing society; by Welsh Government. Cardiff: Welsh Government, 7 October 2021, 60 pp.

'The strategy for older people in Wales' was first published in 2008. This new strategy is broader in scope than previous ones: it includes the life experiences of those age 50+, and spans policy areas from health and social care for older people living with complex needs to support for working age carers. Sections have also been updated to reflect policy changes in response to COVID-19. The strategy has three cross cutting themes: creating an age friendly Wales; prioritising prevention; and a rights based approach. Its four aims are: enhancing well-being; improving local services and environments; building and retaining people's own capability; and tackling age related poverty. (RH)

From : <https://gov.wales/age-friendly-wales-our-strategy-ageing-society>

- 263/109 Ageing in place together: older parents and ageing offspring with intellectual disability; by Yueh-Ching Chou, Teppo Kroger.: Cambridge University Press.

Ageing and Society, vol 42, no 2, February 2022, pp 480-494.

Limited research has been conducted about ageing in place among older parents who co-habit with their ageing offspring with intellectual disability (ID). This study aims to explore which older parents would choose ageing in place together with their ageing offspring with ID instead of moving and what factors are associated with this choice. A face-to-face interview was conducted using the 'housing pathways' framework with older parents (age 60+) co-habiting with their ageing offspring with ID (age 40+) from two local authorities in Taiwan. In total, 237 families completed the authors' survey between June and September 2015. The results showed that 61.6 per cent of the participants would choose ageing in place with their ageing offspring with ID, while 38.4 per cent of the participants would stay in their previous place without their disabled children, move in with their other children or move to a nursing home. Logistic regression analyses revealed that parents who preferred ageing in place together with their offspring with ID were more likely to own a house ('personal control'), have higher levels of life satisfaction ('self-esteem') and satisfaction with their current community ('self-identity'), and have a lower level of social support than parents who chose another option. To meet the needs of older parents and their ageing offspring with ID, care and housing transitions should be considered as part of long-term care policy. (RH)

ISSN: 0144686X

From : <https://doi.org/10.1017/S0144686X20001038>

- 263/110 Cross-National Perspectives on Aging and Place: Implications for Age-Friendly Cities and Communities; by Ryan Woolrych, Judith Sixsmith, Jamuna Duvvuru, Adriana Portella, Mei Lan Fang, Deborah Menezes, James Henderson, Jenny Fisher, Rebecca Lawthom.

The Gerontologist, vol 62, no 1, February 2022, 119-129.

The age-friendly cities and communities (AFCC) agenda has led to a range of policy initiatives aimed at supporting ageing in place for older people. While there is case study evidence of how people age across urban contexts, there has been little research exploring cross-national understandings of age-friendly places among older people. The objective of this article is to identify the place experiences of older people living across cities and communities in India, Brazil, and the United Kingdom and to discuss implications for the AFCC agenda.

Three hundred semistructured interviews were undertaken with older people across 9 cities and 27 communities in India, Brazil, and the United Kingdom. The data were analysed using thematic analysis undertaken by each national team and then discussed and revised at collaborative workshops with researchers from each of the 3 country teams.

The data capture the ways in which place is constructed from the perspective of older people drawing upon social, community, and cultural dimensions of ageing across diverse urban environments. The study explores how older people negotiate place in the context of their everyday life and identify the relational and interconnected ways in which place attachment, belonging, and identity are constructed. The authors conclude that age-friendly interventions need to attend to the changing physical, social and cultural dimensions of ageing and place. Integrated place-making practices are required to support older people to age in the right place across rapidly transforming urban contexts globally.

From : <https://doi.org/10.1093/geront/gnab170>

- 263/111 Dispossessed, without place and face: the plight of elders; by Michael Brannigan.: Emerald. Working with Older People, vol 25, no 3, 2021, pp 265-271.
This paper presents a philosophical discussion around issues of time, space and alienation in today's world, with particular regard to the plight of older adults. It is argued that older people's history is linked with their geography, where they lived, loved and laboured. The purpose of this paper is to explore how, though they have earned their 'place' in the world, a world now under the hegemony of accelerated time and blurring of distance, many older people feel displaced, 'unseen' and irrelevant. The paper's methodology is in narrative structure, at times referring to contemporary philosophical and art sources. The author's commentary addresses this loss of place and face for today's older people within the context of our failure, in the USA and much of the West, to construct a consistent, coherent philosophy of life stages. Put simply, the thoroughly pragmatic and future-driven culture of youth and productivity assigns no intrinsic value to getting old. Place unfolds in particularities _ my place, our home, etc _ and is critically distinct from space. As we squeeze together time and space through worldviews and technologies, we have erased the importance of place. This poses unique problems for older people for whom place, in particular home, carries special meaning involving time and relationships. For older people in particular, meaning comes through lived, embodied experiences. The author argues that our embodied encounters enable moral meaningfulness, and that it is the face which is the centerpiece of such engagement. Face reveals a moral invitation to authentic person-to-person communication. And in light of this communication, understanding the importance of place and need for face-to-face interaction helps to ground us in our conversations with older people. With our seniors, for whom the greatest gift is our time and attention, it is not only what we say, but how we are with them, through our presence, that matters. (JL)
ISSN: 13663666
From : <https://doi.org/10.1108/WWOP-07-2021-0039>
- 263/112 Emerging evolution trends of studies on age-friendly cities and communities: a scientometric review; by Liqun Xiang, Geoffrey Q P Shen, Yongtao Tan, Xuan Liu.: Cambridge University Press. Ageing and Society, vol 41, no 12, December 2021, pp 2814-2844.
Population ageing, together with urbanisation, has become one of the greatest challenges throughout the world in the 21st century. Approximately one million people turn 60 each month worldwide. By 2050, more than 20 per cent of the global population is predicted to be age 60+. Thus, an increasing need is evident for age-friendly communities, services and structures. This paper aims to provide a comprehensive review of existing literature pertaining to age-friendly cities and communities (AFCCs), and what the key areas and the evolution trends are. A total of 231 collected publications are analysed and visualised by CiteSpace (a Java application for conducting such analyses). According to the keywords and document co-citation networks that are generated, the foundation, hot topics and domains of AFCC research are grouped. Three major themes are identified: the characteristics of AFCCs; the application of the World Health Organization (WHO) framework in urban and rural areas worldwide; and the measurement of cities' and communities' age-friendliness. In addition, a roadmap of AFCC research is developed. (RH)
ISSN: 0144686X
From : <https://doi.org/10.1017/S0144686X20000562>
- 263/113 Examining the role of ageing-in-place organisations in building older adults' disaster resilience; by Claire Pendergrast, Basia Belza, Ann Bostrom, Nicole Errett.: Cambridge University Press. Ageing and Society, vol 41, no 12, December 2021, pp 2888-2913.
Older adults are more susceptible to adverse health outcomes during and after a disaster compared with their younger counterparts. In the United States, ageing-in-place organisations such as day centres and Villages provide social services and programming for older adults and may support older adults' resilience to disasters. This study examines the role of ageing-in-place organisations in building disaster resilience for older adults. Semi-structured interviews were conducted with a purposive sample of 14 ageing-in-place organisation leaders in King County, Washington state. The sample included representatives of five government-run senior centres, seven non-profit senior centres and two Villages. Interviews were audio-recorded and professionally transcribed. The authors used a combined inductive and deductive approach to code and thematically analyse the data. Ageing-in-place organisation leadership recognise disasters as a threat to older adults' health and safety, and they see opportunities to provide disaster-related support for older adults, though the type and extent of participation in resilience-building activities reflected each organisation's unique local context. Organisations participate in a variety of disaster-related activities, though respondents emphasised the importance of collaborative and communication-focused efforts. Findings suggest that ageing-in-place organisations may be best equipped to support older adults' disaster resilience, by serving as a trusted source of disaster-related information and providing input on the appropriateness of disaster plans and messages for the unique needs of older adults ageing-in-place. (RH)
ISSN: 0144686X
From : <https://doi.org/10.1017/S0144686X20000653>

OBESITY

- 263/114 The impact of severe obesity on home health care agency admission: an organizational perspective; by Robert F Schuldt, Holly C Felix, Christine K Bradway.: Taylor and Francis. Home Health Care Services Quarterly, vol 40, no 1, January-March 2021, pp 27-38. Home health care is a growing treatment option for older adults who wish to remain in their homes and communities. However, the growing number of older adults with severe obesity presents a challenge for home health professionals. This study uses survey data from 128 home health care agencies in Arkansas and Pennsylvania to explore home health care agencies' decision-making in admitting patients with severe obesity. The responding agencies indicated that concerns about adequate staffing levels were the primary barriers to entry for severe obesity patients. Existing research on the intersection of obesity and home health care is sparse, and this study adds an organisational perspective to the scant literature on the topic. Additional research on this topic is advised to accommodate the expected growth in home health care utilisation and rising obesity rates among older adults. (RH)
ISSN: 01621424
From : <https://doi.org/10.1080/01621424.2020.1856747>

OLDER WOMEN

- 263/115 The barriers and enablers to service access for older women living alone in Australia; by Marissa Dickins, Goergina Johnstone, Emma Renehan (et al.): Cambridge University Press. Ageing and Society, vol 42, no 4, April 2022, pp 849-867. Older women living alone are at risk of being socially and financially disadvantaged, which affects their well-being. Currently, there is a significant gap in our knowledge relating to older women living alone. This study aimed to identify the barriers and enablers to service access for this group. The authors undertook a qualitative study comprising semi-structured interviews with 37 women in metropolitan Melbourne, Australia between May and August 2017. Thematic analysis was conducted and six key themes were identified: financial; mental and emotional health; mobility and ability; transport; social connections; and knowledge. Access issues for older women living alone are multifaceted and interconnected. Barriers and enablers to service access, as well as their intersections with gender and living situation, should be considered in service design and re-design. (RH)
ISSN: 0144686X
From : <https://doi.org/10.1017/S0144686X20001245>
- 263/116 Women and employment in later life: the impact of long-term health conditions on labour market participation; by Jill Manthorpe.: Emerald. Working with Older People, vol 25, no 4, 2021, pp 304-315. There is increasing interest in long-term conditions experienced singly and in combination. This paper aims to address this by considering the impact of long-term conditions on female labour market participation in later life. This literature review considers a variety of evidence and policy related to long-term conditions as experienced by women. The review suggests the importance of gender when considering long-term conditions and when considering employment because this is often gendered. There are several long-term conditions affecting women in particular that need to be considered by employers and policy makers. (NH/JL)
ISSN: 13663666
From : <https://doi.org/10.1108/WWOP-02-2021-0005>

PALLIATIVE CARE

- 263/117 Improving the quality of community primary palliative care in COPD: a qualitative study of health-care providers; by Yoshihisa Hirakawa, Satoshi Hirahara, Yasuhiro Yamaguchi (et al.): Taylor and Francis. Home Health Care Services Quarterly, vol 40, no 1, January-March 2021, pp 39-53. Primary palliative care is essential for the continuity of care in severe chronic obstructive pulmonary disease (COPD). This study aimed to identify essential factors and aspects to enhance the quality of primary palliative care for adults with severe COPD living in the community. Interviews with medical professionals from six institutions located in two major metropolitan areas in Japan were conducted. Interviews were analysed by using a qualitative content analysis approach. Results indicate that effective collaborative communication among team members, long-term care insurance system and related services, and palliative care techniques were the primary themes. (RH)
ISSN: 01621424
From : <https://doi.org/10.1080/01621424.2020.1845272>

PARTICIPATION

- 263/118 Participation of older adults in the intra-household decision-making activities: evidence from the longitudinal ageing study in India; by Irshad CV, Deepak Kumar Behera, Umakant Dash.: Emerald. Journal of Adult Protection, vol 23, no 5, 2021, pp 325-336. This study aimed to document the participation of intra-household decision-making activities by older adults in India. The study used a nationally representative sample of 21,662 older adults (aged 60 and above) from the Longitudinal Ageing Study of India data of 2017-2018. Intra-household

decision-making participation was measured based on decision making activities that included marriage of daughter/son, buying and selling of property, giving a gift to the family, education of family members and arrangement of social/religious events. The paper used bivariate analysis and binary logistic regression model to examine factors associated with the participation of older adults in the intra-household decision making activities. Results showed that older persons' participation declined with increased age. The study also found a difference in the participation of intra-household decision making activities between male and female, rural and urban older adults, poor and rich older adults. Older adults with good health status who maintained social engagement and a good lifestyle were found to be more likely to participate in the household's decision making activities. Overall findings showed that older adults with better economic and social status were more likely to participate in intra-household decision making activities that made their life happier than the counterpart. Therefore, emphasis should be given to those vulnerable older adults who do not have any social and economic security in society. (JL)

ISSN: 14668203

From : <https://doi.org/10.1108/JAP-03-2021-0013>

PENSIONS AND BENEFITS

- 263/119 A guiding hand: improving access to pensions guidance and advice; by Scott Corfe, Matthew Oakley, Joe Ahern, Social Market Foundation - SMF. London: Social Market Foundation, February 2022, 47 pp.
What do people know about their pensions, and what actions are they taking to ensure they can have the sort of income in retirement that they want?
Based on opinion polling and focus group work, the authors present new evidence on how many people get advice or guidance on their retirement planning, and on how people feel about pensions. This report examines public attitudes towards pensions; the value of pensions advice and guidance; and barriers to receiving and using advice and guidance. It finds that not enough people have the right information or accurate understanding about their pensions and retirement: some will miss out on opportunities by not saving enough, or not make the best use of their money. The report makes four recommendations: expanding the offer made by the government's free service, Pension Wise (which aims to provide guidance on pension options); improving how guidance and advice are defined, to broaden what is on offer; changing the norms around guidance and advice; and launching a nationwide pensions awareness campaign. The research project for this report was supported by Phoenix Insights. (RH)
[https://www.thephoenixgroup.com/sites/phoenix-group/files/phoenix-group/views-and-insights/Guidance%20Gap/A%20Guiding%20Hand%20\(Feb%202022\).pdf](https://www.thephoenixgroup.com/sites/phoenix-group/files/phoenix-group/views-and-insights/Guidance%20Gap/A%20Guiding%20Hand%20(Feb%202022).pdf)
- 263/120 Pensions and the extending working lives agenda in the UK:: The impact on women; by Liam Foster. Journal of Population Ageing, January 2022.
Extending working lives (EWLs) has been a key policy response to the challenges presented by an ageing population in the United Kingdom (UK). This includes the use of pension policies to encourage working longer. However, opportunities and experiences of EWLs are not equal. While much has been written about EWLs more broadly, limited attention has been paid to connecting those EWLs policies associated with pensions and their potentially unequal impact on women. This article aims to address this gap, taking a feminist political-economy perspective to explore the structural constraints that shape EWLs and pensions. Initially it briefly introduces the EWLs agenda, before focussing on pension developments and their implications for EWLs, considering the gendered nature of these policies. Finally, it touches upon potential policy measures to mitigate the impact of these developments on women.
It demonstrates how women's existing labour market and pension disadvantages have been largely overlooked in the development of EWLs policy, perpetuating or expanded many women's financial inequalities in later life. It highlights the need for a greater focus on gendered pension differences in developing EWLs policy to ensure women's circumstances are not adversely impacted on.
From : <https://doi.org/10.1007/s12062-021-09354-2>
- 263/121 The role of pension policies in preventing old-age exclusion; by Jim Ogg. New York: Springer. IN: Social exclusion in later life: interdisciplinary and policy perspectives; Kieran Walsh, Thomas Scharf, Sofie Van Regenmortel, Anna Wanka (eds); (International perspectives on aging, 28), 2021, pp 373-383.
Pension systems play a crucial role in preventing social exclusion in later life. Written before the Covid-19 pandemic, this study concludes that, as countries address current demographic and economic challenges, it will become increasingly important to ensure that all sectors of the society are protected against economic exclusion in old age. This means addressing issues such as the extended working life and the consequences for individuals excluded from paid work, tackling gender pay gaps throughout a working career, increasing the 'portability' of accrued pension rights between countries for migrant workers, and greater recognition of the value of unpaid work through measures that give access to pensions.
It notes that future generations of retirees are likely to have more diverse profiles than current generations, with important sectors of the population who will have accumulated periods of inactivity and low pay. The increasing de-institutionalisation of the life course and the continued spectre of neo-liberal policies based on individual responsibility for the provision of income in older-age pose

specific risks to the sustainability of pension systems hitherto built on the premises of intergenerational solidarity and equity. The study asserts that redistributive measures will continue to be necessary, either being built-in to pension systems or aligned with them. These can be provided by fiscal reforms and the provision of universal basic pensions indexed to the purchasing power of working populations. Given these measures, the risk of economic exclusion in old age can be significantly reduced, allowing individuals and their families to fully participate in all domains of social life. (NL/RH)
From : https://doi.org/10.1007/978-3-030-51406-8_29

PETS

(See 263/127)

REABLEMENT AND REHABILITATION

(See Also 263/125)

- 263/122 Development of an internationally accepted definition of reablement: a Delphi study; by Silke F Metzelthin, Tim Rostgaard, Matthew Parsons, Elissa Burton.: Cambridge University Press.
Ageing and Society, vol 42, no 3, March 2022, pp 703-718.

With an ageing society, the demand for health and social care is increasing. Traditionally, staff provide care for their clients rather than with them. In contrast, reablement aims to support people to maximise their competence to manage their everyday life as independently as possible. There is considerable variation between and within countries regarding the conceptual understanding of the approach. This variation affects the ability to evaluate reablement approaches systematically, compare and aggregate findings from different studies, and hinders the development of robust evidence. Therefore, a Delphi study was conducted in 2018/9 with the aim of reaching agreement on the characteristics, components, aims and target groups of reablement, leading towards an internationally accepted definition of reablement. The study consisted of four Web-based survey rounds. In total, 82 reablement experts from 11 countries participated, reaching agreement on five characteristics (e.g. person-centred), seven components (e.g. goal-oriented treatment plan) and five aims (e.g. increase clients' independency). Furthermore, most experts agreed that reablement is an inclusive approach irrespective of the person's age, capacity, diagnosis or setting. Based on these features, a definition of reablement was developed, which was accepted by 79 per cent of participating experts. This study is a significant step towards providing conceptual clarity about reablement. Future research should focus on evaluating the implementation of agreed reablement components to inform practice, education and policy. (RH)

ISSN: 0144686X

From : <https://doi.org/10.1017/S0144686X20000999>

- 263/123 A review on figure of eight walking in physical therapy rehabilitation of elderly; by Rupinder Kaur Dhillon, Mahesh Sharma.: Emerald.

Working with Older People, vol 25, no 3, 2021, pp 214-219.

The purpose of this study was to see whether figure of eight walking (F8W) is a reliable outcome measure in rehabilitation care especially for older people who need extensive consideration in their practical functional affairs. A literature review was conducted by researching various databases such as Google Scholar. Journals with good impact factors were included in this study. The review suggested that F8W could be a realistic outcome measure for rehabilitation in patients with musculoskeletal and neurological dysfunctions that could identify disability and functional impairments more deeply. Future studies in this field may provide further exploration in physiotherapy rehabilitation. The accustomed routine of manhood accounts for constant twists and turns which is entirely incompatible with a linear walk. In such a manner, walking in the figure of eight could detect the major perplexity faced by an individual in his habitual pursuing affairs predominately in orthopaedics and neurological disorders. (JL)

ISSN: 13663666

From : <https://doi.org/10.1108/WWOP-04-2021-0020>

RELATIONSHIPS (PERSONAL)

(See 263/118)

RELIGION AND SPIRITUALITY

- 263/124 Religiosity and health among Chinese older adults: a meta-analytic review; by Jia Li, Qi Wang.: Cambridge University Press.

Ageing and Society, vol 42, no 2, February 2022, pp 271-305.

Theoretically, religion seemingly plays an important role in improving older people's health. This study uses a meta-analysis review to examine whether believing in religion is related to better health conditions among Chinese older adults (age 55+) living in China, Hong Kong, Macau and Taiwan. Two researchers independently extracted the studies from a comprehensive database and grey literature search and evaluated their scientific quality. From the 3,777 potentially eligible papers, just 76 were selected. The pooled effect size detected no significant difference in overall health and well-being between religious and non-religious Chinese older people. Dividing the outcomes into different categories, religious older

adults reported both a higher level of anxiety (Hedge's $g = -0.392$, 95% confidence interval (CI) = $-0.494, -0.290$; $p = 0.004$), and yet a higher level of happiness (Hedge's $g = 0.342$, 95% CI = $0.074, 0.610$; $p = 0.018$). Having a higher proportion of females in the sample is related to a smaller effect size in overall health outcomes (Beta = -2.205 , 95% CI = $-3.800, -0.613$; $p = 0.007$) and social support specifically (Beta = -4.660 , 95% CI = $-6.261, -3.058$; $p = 0.0001$). This study is among the first to synthesise the quantitative evidence regarding health differences between older believers and non-believers in China. It calls for future studies to investigate the pathways underlying the religion-health relationship. (RH)

ISSN: 0144686X

From : <https://doi.org/10.1017/S0144686X20000835>

RESEARCH

- 263/125 Person-centred research practice: the user involvement in research of older adults with first-hand experience of reablement; by Kari Jokstad, Bjorg Th Landmark, Kirsti Skovdahl.: Cambridge University Press.

Ageing and Society, vol 42, no 1, January 2022, pp 143-156.

User involvement is increasingly common in health-care research, and the ideal is user participation and influence during all research stages. Three Norwegian researchers describe and reflect on the processes and outcomes associated with advisory group-researcher collaboration from a person-centred perspective. When planning a study in which older adults' experiences of reablement were investigated, older people with previous first-hand experience of reablement participated in an advisory group. It was found that the fostering of healthful relationships, in which experiential and research knowledge are considered complimentary and equitable, and all members have the power to exercise their unique roles, seems to be a prerequisite for the co-creation of knowledge. Also, practical arrangements and social relationships constitute important details that are crucial to ensuring contribution from older adults with health-related conditions. While such individuals may be unable to participate during all stages of a research project, their involvement on an advisory level during the initial stages can increase study quality and relevance. Input from the advisory group members contributed to the improvement of the language in the study information sheet, improvement of the study design, development and validation of the interview guide, and insight into how the interviews should be conducted. The personal knowledge and expertise of the advisory group members, which emanated from their immediate sensitivity, contributed to the person-centredness in the study. (RH)

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From : <https://doi.org/10.1017/S0144686X20000781>

RESIDENTIAL AND NURSING HOME CARE

(See Also 263/1, 263/11, 263/100)

- 263/126 'Waiting and wanting': older people's initial experiences of adapting to life in a care home: a grounded theory study; by Marie O'Neill, Assumpta Ryan, Anne Tracey, Liz Laird.: Cambridge University Press.

Ageing and Society, vol 42, no 2, February 2022, pp 351-375.

A grounded theory approach, consistent with the work of Anselm Strauss and Juliet Corbin, was used to undertake semi-structured interviews with 17 older people, to explore their experiences of living in a care home, during the four- to six-week period following the move. The Northern Ireland researchers initially adopted purposive sampling; thereafter, theoretical sampling was employed to recruit individuals identified by care managers within older peoples' community teams and care home managers within a large Health and Social Care Trust in the United Kingdom. Consistent with grounded theory methodology, data collection and analysis occurred simultaneously. Constant comparative analysis underpinned data analysis and data management techniques. Data analysis revealed five distinct categories that captured these experiences. These were: (a) wanting to connect - 'I am so lost here', (b) wanting to adapt - 'Well, mentally you have to make the best of it', (c) waiting for assistance - 'it's a frustration for me', (d) waiting on the end - 'I am making no plans' and (e) wanting to re-establish links with family and home - 'I love getting home and I like getting out to the town'. Together, these five categories formed the basis of the core category, 'Waiting and Wanting', which encapsulates the initial adaptation experiences of the men and women in the study. Findings indicate that individuals were dependent on others to create a sense of belonging, independence and well-being. Moreover, risk averse practices were perceived as a threat to individuals' independence and autonomy. Recommendations include the need to amend policy and practice for the development of a bespoke induction programme for each resident, facilitated by a senior member of the care home staff working in partnership with individuals and families, in addition to the health and social care team, to support a more positive transition for new residents, relatives and care home staff. (RH)

ISSN: 0144686X

From : <https://doi.org/10.1017/S0144686X20000872>

- 263/127 The experience of animal therapy in residential aged care in New Zealand: a narrative analysis; by Gemma Wong, Mary Breheny.: Cambridge University Press.

Ageing and Society, vol 41, no 11, November 2021, pp 2641-2659.

Animal therapy has been shown to have both physiological and psychological benefits for older people,

including improvements in outlook and social interaction. Visits by animals and handlers are intended to improve the quality of life of people in residential care. In New Zealand, informal animal visitation programmes to care facilities are not uncommon, but has been little researched. This project examined the experience of animal therapy in two residential aged care homes that receive animal visits from an animal welfare organisation. In-depth interviews were conducted with seven older people about their experiences of the programme and analysed using narrative analysis. Three overarching narratives were identified: animal therapy as a fleeting pleasure, residential care as a sad environment, and identity outside residential care as highly valued. Older people in residential care do value animal therapy, but it is narrated as a fleeting pleasure, rather than having a long-lasting or far-reaching impact on the daily experience of residential care. In some ways, the structure of the animal therapy programme may underscore the challenges to everyday autonomy and identity experienced in residential aged care. These findings can be used to develop animal visiting programmes which recognise the importance of a valued social identity in later life.

ISSN: 0144686X

From : <https://doi.org/10.1017/S0144686X20000574>

- 263/128 How well do nursing staff assess the wellbeing of nursing home residents?: An explorative study of using single-question scales; by Noortje Kloos, Constance H C Drossart, Ernst T Bohlmeijer (et al): Cambridge University Press.

Ageing and Society, vol 42, no 4, April 2022, pp 812-828.

Person-centred care requires improved documentation of nursing home resident well-being, e.g. by nursing staff proxy assessments. Previous studies have mainly focused on proxy self-report agreement of quality of life of people with dementia, using lengthy questionnaires. This is the first study to investigate how well nursing staff assess residents' well-being after training, using a single-question assessment method of happiness and engagement. The authors conducted a cross-sectional mixed-method study in the Netherlands, including proxy assessments from 49 nursing staff, and self-reports from 49 nursing home residents without dementia (mean age 85). They explored agreement between colleagues, and between proxy assessments and self-reports, and potential nursing staff characteristics associated with this (age, experience, hours worked per week). Brief written motivations were evaluated on nursing staffs' understanding of the happiness and engagement concepts. The results showed low agreement between colleagues, and low agreement between proxy assessments and self-reports. Nursing staff assessed happiness and engagement substantially higher than residents' self-reports. Hours worked per week was related to happiness proxy assessments, but none of the included nursing staff characteristics were related to proxy self-report agreement. Nursing staff interpreted the concepts in diverse ways. Overestimating resident well-being when using this single-question assessment method may undermine subsequent efforts to improve well-being. The authors could not identify which nursing staff could best provide well-being assessments. For now, proxy well-being assessments should always be combined with regular self-reports whenever possible. (RH)

ISSN: 0144686X

From : <https://doi.org/10.1017/S0144686X20001178>

- 263/129 Living in a care home during COVID-19: a case study of one person living with dementia; by Ian Davies-Abbott, Catrin Hedd Jones, Gill Windle.: Emerald.

Quality in Ageing and Older Adults, vol 22, nos 3/4, 2021, pp 147-158.

This paper aimed to understand the lived experience of a person living with dementia in a care home during the COVID-19 pandemic. In particular, the paper adopted a single case study design applied thematic analysis to semi-structured interview data to discover the experiences of one person living with dementia in a care home during a period of lockdown.

Five themes revealed how the participant responded to the practical and emotional challenges of the pandemic: autonomy; fears; keeping connected; keeping safe and other people living with dementia. These themes highlighted the participant's ability to adapt, accept and dispute lockdown restrictions, revealing considerable insight into their situation. The pandemic has restricted access to care homes, which informed the single case study design. This approach to the research may restrict the generalisability of the findings. Other researchers are encouraged to include the voices of people with dementia living in care homes in further studies. (JL)

ISSN: 14717794

From : <https://doi.org/10.1108/QAOA-02-2021-0024>

- 263/130 Qualities of the environment that support a sense of home and belonging in nursing homes for older people; by Karin Johansson, Lena Borell, Lena Rosenberg.: Cambridge University Press.

Ageing and Society, vol 42, no 1, January 2022, pp 157-178.

The aim of this Swedish study was to contribute with knowledge about how a sense of home and belonging is enacted and can be supported in everyday life, with a particular focus on the relationships that connect everyday life and the environment in nursing home contexts. The concepts 'a sense of home' and 'belonging' were chosen with the ambition to grasp values grounded in experiences and everyday practices, with an openness for various aspects that can support an enjoyable life and comfort for nursing home residents. The study focused on communal areas, e.g. dining room, kitchen, corridors and gardens, that serve as arenas where nursing home residents' everyday lives expand beyond the private room. Ethnographic methods were applied to identify and explore situations where a sense of home and belonging were enacted in nursing homes that had been acknowledged as good examples of nursing

home environments. Through the analytic process, four qualities were identified: (a) a cornerstone for stability and everydayness, (b) the beating heart, (c) spatial dynamics, and (d) magnetic places. Following from the chosen methodology, the findings provide a situated understanding of how communal areas in nursing homes can invite a sense of home and belonging for the residents. (RH)
ISSN: 0144686X
From : <https://doi.org/10.1017/S0144686X20000896>

263/131 The relationship of nursing home culture change practices with resident quality of life and family satisfaction: toward a more nuanced understanding; by Yinfei Duan, Christine A Mueller, Fang Yu (et al).: Sage.

Research on Aging, vol 44, no 2, February 2022, pp 174-185.

Transforming nursing homes (NHs) from restrictive institutions to person-centred homes, referred to as NH culture change, is complex and multifaceted. This study is based on a survey of administrators in 102 nursing homes in Minnesota NHs. It tested the domain-specific relationships of culture change practices with resident quality of life (QOL) and family satisfaction, and examined the moderating effect of small-home or household models on these relationships. The findings reveal culture change to be operationalised through physical environment transformation, staff empowerment, staff leadership, and end-of-life care; and was positively associated with at least one domain of resident QOL and family satisfaction, while staff empowerment had the most extensive effects. Implementing small-home and household models had a buffering effect on the positive relationships between staff empowerment and the outcomes. The findings provide meaningful implications for designing and implementing NH culture change practices that best benefit residents' QOL and improve family satisfaction. (RH)

ISSN: 01640275

From : <https://journals.sagepub.com/doi/pdf/10.1177/01640275211012652>

263/132 Relationships and material culture in a residential home for older people; by Melanie Lovall.: Cambridge University Press.

Ageing and Society, vol 41, no 12, December 2021, pp 2953-2970.

Residents of older people's homes furnish their rooms with belongings that are associated with meaningful relationships. Previous research shows how material culture symbolises residents' past and existing relationships, helping residents to remain embedded within familial and social networks. Less attention has been paid to how relationships are actively (re)constituted through socio-material interactions, and to the potential for objects to facilitate new relationships. This article presents findings from an ethnographic study into the everyday experiences of residents of an older people's care home in northern England. Using observations of daily life and in-depth interviews with residents, it demonstrates how residents used material culture in gift-giving, divestment practices and in mundane social interactions. In this way, residents used objects to not only maintain relationships with family members outside the home, but form new relationships inside the home with other residents and members of staff. Combining theories of materiality, relationality and social practice, the author argues that residents' interactions with material culture helped to facilitate new social interaction and meaningful relationships. This is important in a social context where loneliness has been identified as a significant threat to residents' mental and physical health. Residential homes for older people can develop guidance on practical activities and strategies that can use material culture to increase social interaction and enhance quality of life for residents. (RH)

ISSN: 0144686X

From : <https://doi.org/10.1017/S0144686X20000690>

263/133 Self-funders: still by-standers in the English social care market?; by Melanie Henwood, Jon Glasby, Steve McKay, Catherine Needham.: Cambridge University Press.

Social Policy and Society, vol 21, no 2, April 2022, pp 227-241.

The Care Act 2014 gave local authorities in England broad duties around wellbeing, and responsibility to ensure the availability of good quality, personalised social care and support services for people who need them. These responsibilities are for all people needing support, whether that is publicly or privately funded. In exercising their duties, councils have a responsibility for 'market shaping': that is, understanding the supply and demand for care, and the types of services and support needed now and in the future, and steering the market accordingly. Changes to the implementation of the Care Act removed some of the levers that might have brought self-funders into the mainstream of local authority responsibilities. This article draws on 64 qualitative interviews undertaken as part of a larger study on market shaping and personalisation of care, and reflects on the experience of self-funders and the approach to them adopted by local authorities and provider organisations. The findings indicate that self-funders are still largely bystanders to local authority market shaping strategies, despite being both impacted by those strategies and significantly influencing the markets in which they operate. (JL)

ISSN: 14747464

From : <https://doi.org/10.1017/S1474746420000603>

RETIREMENT

(See Also 263/103)

- 263/134 Conditions of existence and subjective perceptions of retirement: qualitative evidence from France; by Benedicte Apouey.: Cambridge University Press.
Ageing and Society, vol 42, no 3, March 2022, pp 564-587.
This article explores subjective perceptions of retirement in France, using original quantitative data on the customers of a not-for-profit insurance company. The sample contains individuals aged 40-84, who are either in the labour force (N = 923) or retired (N = 705). Perceptions of retirement are measured using closed questions on views of the retirement transition (these views can be positive, negative or neutral) and definitions of retirement (retirement can be interpreted as a period of freedom, boredom, greater risk of precariousness, etc.). The authors use a number of different social indicators to examine whether differences in social conditions translate into heterogeneous perceptions. They also investigate whether social differences in perceptions fade away with increasing age. Both working-age individuals and retirees generally have a positive view of the retirement transition and often define retirement as a period of freedom. Perceptions of retirement are shaped by social conditions: a higher level of education and income, greater wealth, better health and stronger social involvement go hand-in-hand with rosier perceptions. Moreover, the authors uncover a strengthening of this social gradient with increasing age. Finally, perceptions are positively correlated with satisfaction in various domains, for retirees. (RH)
ISSN: 0144686X
From : <https://doi.org/10.1017/S0144686X20001002>
- 263/135 From plans to action? Retirement thoughts, intentions and actual retirement: an eight-year follow-up in Finland; by Satu Nivalainen.: Cambridge University Press.
Ageing and Society, vol 42, no 1, January 2022, pp 112-142.
This study applies Feldman and Beehr's three-step model to examine retirement as a decision-making process, leading from retirement thoughts to retirement plans, and from retirement plans to actual retirement. The results show that retirement thoughts have a clear independent effect on retirement plans, as measured by intended retirement age. Furthermore, retirement plans have an isolated effect on retirement patterns. Intended retirement age is the strongest predictor of actual retirement age. Retirement intentions can be thought to represent the effect of unobservable characteristics on retirement, such as preference and motivation. Retirement plans materialise with quite high accuracy. Several key factors are associated with intended and actual retirement age in a similar manner. Unemployment and higher income are connected with earlier planned and actual retirement. Health has a pronounced effect: better health is conducive to later retirement while weaker health (sickness absences) is conducive to earlier retirement. This applies both to retirement intentions and actual retirement and to the difference between the two. The most important way for organisations to extend working lives is to look after the health of older employees. Giving older workers an increased sense of control and lowering job demands helps to prevent premature retirement. Supporting older workers' continued employment is significant for the retention of older workers, while layoffs targeting older workers shorten working lives. (RH)
ISSN: 0144686X
From : <https://doi.org/10.1017/S0144686X20000756>
- 263/136 Private retirement systems and sustainability: insights from Australia, the UK, and the US; by Nathan Fabian, Mikael Homanen, Nikolaj Pedersen, Morgan Slebos, Pension Research Council, Wharton School, University of Pennsylvania. Philadelphia, PA: Pension Research Council, The Wharton School, University of Pennsylvania, July 2021, 34 pp (Pension Research Council Working Paper, no 2021-11). Retirement system sustainability is defined as the ability of plan boards and managers to be responsible investors, active stewards, and allocators of capital to economic activities with desirable social and environmental outcomes. In this paper, the authors examine the policy frameworks and important structural variables pertinent to private retirement systems in Australia, the UK, and the US. By analysing various reports, interviewing experts, and using data from the Principles of Responsible Investment as well as national pension and retirement authorities, the authors identify key structural challenges within national retirement systems. These include market fragmentation, principal-agent conflicts in personal pensions, and the role of service providers. The results provide insight into how, or whether, retirement systems can facilitate desirable economic, social and environmental outcomes. (RH)
From : <https://dx.doi.org/10.2139/ssrn.3885848>

RETIREMENT COMMUNITIES

(See 263/74)

RISK

- 263/137 Positive risk taking: debating the research agenda in the context of adult protection and COVID; by Erin King, Karen Davies, Michele Abendstern.: Emerald.
Journal of Adult Protection, vol 23, no 5, 2021, pp 317-324.
The purpose of this paper was to present the case for examining the concept of positive risk taking (PRT) in the context of adult protection. The paper argues the need for empirical research to understand the application of and attitudes to PRT to explore whether the concept has moved beyond a principle to make an identifiable difference to service users. By investigating evidence from policy, literature and professional opinion, the paper presents the ethical tensions for professional practice in adult protection between respecting a service user's freedom to make choices to enhance their independence while preserving safety for service users and society. This is considered in the context of risk in health and social care and the recent changes in society resulting from COVID-19. Inherent tensions are apparent in the evidence in health and social care between attitudes propounding safety first and those arguing for the benefits of risk taking. This indicates not only a need for a paradigm shift in attitudes but also a research agenda that promotes empirical studies of the implications of PRT from service user and professional perspectives. This paper draws attention to the relatively limited research into both professionals' and service user perspectives and experiences of PRT in practice. (JL)
ISSN: 14668203
From : <https://doi.org/10.1108/JAP-03-2021-0011>

RURAL ISSUES

- 263/138 Older people's views about ageing well in a rural community; by Stephen Neville, Sara Napier, Jeffery Adams, Kay Shannon, Valerie Wright-St Clair.: Cambridge University Press.
Ageing and Society, vol 41, no 11, November 2021, pp 2540-2557.
Maintaining physical, psychological and social well-being is integral to older adults being able to age well in their community. Therefore, an environment that facilitates and supports ageing well is imperative. Informed by the World Health Organization's 'Global age-friendly cities: a guide' (WHO, 2007), this New Zealand study explored the views of older people about their preparation for ageing well in a rural community. Forty-nine community-dwelling older people aged between 65 and 93 years participated in a semi-structured and digitally recorded interview. The resulting qualitative data were analysed using a thematic approach. Three main themes were identified: (a) 'sensible planning: the right place and the right people'; (b) 'remaining independent: "it's up to me"'; and (c) 'facing challenges: "accepting my lot"'. Findings from this study identify that across all age groups, these older people were actively and realistically preparing for ageing well. All valued their independence, believing individually they were responsible for being independent and planning for their future. Consequently, environmental planners, policy makers and practitioners need to understand that older people are a heterogeneous group, and ageing policies should be geared towards older people's individual abilities and circumstances. Consideration of diversity enables inclusion of older people with a wide range of abilities and needs to achieve the perceived goals of ageing well. (RH)
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From : <https://doi.org/10.1017/S0144686X20000458>

SENSORY LOSS

- 263/139 Cost-effectiveness of hearing-screening in older adults: a scoping review; by Amber K Hsu, Sarah M Bassett, Linda C O'Dwyer (et al.): Sage.
Research on Aging, vol 44, no 2, February 2022, pp 186-204.
Age is the most common predictor of hearing loss; however, many older adults are not screened. Hearing screening could improve healthcare access, participation and outcomes. Establishing whether hearing screening in older adults is cost-effective could improve its availability and utilisation. The authors searched nine databases in January 2020. Studies with populations aged 50+ that provided data on the cost-effectiveness of hearing screening were included in the review. Five studies met the inclusion criteria; and all found hearing screening programs to be cost-effective compared to no hearing screening, regardless of screening method (i.e., instrument or strategy). The maximum number of repeated screenings, coupled with younger ages, were found the most cost-effective. This review suggests that hearing screening in older adults is cost-effective; however, the evidence is limited. There is pressing need for research focused on economic impacts of hearing healthcare in older people to inform research, policy and practice. (RH)
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From : <https://doi.org/10.1177%2F01640275211008583>

SOCIAL CARE

(See Also 263/83)

- 263/140 How the responsibility of digital support for older people is allocated?: The Swedish welfare system at the crossroads; by Sofia Alexopoulou, Joachim Astrom.
Research on Ageing and Social Policy, vol 10, no 1, 2022, pp 48-76.
A great welfare challenge today is to promote opportunities for more digitisation, while limiting social inequalities from digital divides, especially for older people. While the digital divide is a dynamic problem, shifting from physical access to skills and usage, public policies to close the divide do not necessarily follow. This study explores who is providing digital support in Sweden by looking at three institutions: (1) the municipal eldercare system, (2) popular education institutions, and (3) the family. The results show that the Swedish policy relies heavily on popular education and family arrangements, leaving many young-old Swedes in need of digital support without public support, while the opposite occurs for very old Swedish people who are mostly consumers of welfare technologies. Issues of dependency or the other way around arise. Given this, the role of the Swedish welfare state - which sets the tone of the Swedish welfare regime - needs to be re-evaluated, especially in light of the demographic challenge (a growing number of older people). (OFFPRINT) (RH)
ISSN: 20146728
From : <http://dx.doi.org/10.17583/rasp.8883>
- 263/141 People at the heart of care: adult social care reform White Paper: presented to Parliament by the Secretary of State for Health and Social Care; by Department of Health and Social Care - DHSC.
On 7 September 2021, the Prime Minister announced £5.4 billion for adult social care reform in England over the next 3 years. At the Autumn Spending Review 2021, it was confirmed that £1.7 billion of this funding would be for major improvements across the adult social care system. This White Paper sets out how some of this money will be spent, for example, on new investments in: housing and home adaptations; technology and digitisation; workforce training and well-being support; support for unpaid carers, and improved information and advice; and innovation and improvement. (RH)
<https://www.gov.uk/government/publications/people-at-the-heart-of-care-adult-social-care-reform-white-paper>

SOCIAL NETWORKS

(See 263/91)

STROKE

- 263/142 Two-level multi-methodological evaluation of a new complex primary support programme for stroke care-givers in Germany; by Theresia Krieger, Frans Feron, Elisabeth Dorant.: Cambridge University Press.
Ageing and Society, vol 42, no 1, January 2022, pp 1-31.
Family care-givers are the backbone of the long-term support system for care receivers at home. Care for stroke survivors after rehabilitation primarily rests on the shoulders of family members, often of older age themselves. The authors report the outcomes of a new complex support programme, the Care-givers' Guide, on both individual and system levels. Psychosocial support and personalised information were the main ingredients of this intervention, which had been developed by the multidisciplinary team of the Institute for Health Research and Social Psychiatry (IGSP) in the Catholic University of Applied Sciences North Rhine Westphalia, in Aachen, Germany. A two-level multi-methodological approach was needed, with two concurrent interconnected studies. First, family caregivers reflected on outcomes at an individual level in a quant-QUAL study with a pre-post quantitative questionnaire and a post-intervention qualitative semi-structured interview. Second, practitioners participated in a QUAL-QUAL study ex post interview, reflecting on the outcomes on the care-givers and on their own stroke care system. Individual family caregivers showed an increase in health literacy and level of psychosocial health. Qualitative analysis revealed improvement in knowledge, capability to act and individual empowerment; and stabilisation of sense of certainty, life balance and emotional well-being. Practitioners observed an optimisation of the stroke support system by improving professionals' daily routine, augmenting the institutional support offer, securing the quality of patient care, and increasing inter-institutional co-operation attempts. Positive outcomes of the support programme were observed on both evaluation levels: family caregivers showed improved health literacy and psycho-social health, whereas the professionals noticed an optimisation of the support system. (RH)
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From : <https://doi.org/10.1017/S0144686X20000665>

TRANSPORT

263/143 Accessibility and informational barriers to an age friendly railway; by Charles Musselwhite, Kelly Roberts.: Emerald.

Quality in Ageing and Older Adults, vol 22, no 2, 2021, pp 114-129.

Being mobile and able to travel in later life is linked to a good quality of life. Against a backdrop of an increase in the number of older people in the UK and an increase in the amount of travel per person for this age group, the number of older people using the railway is in decline. The purpose of this paper was to report on an investigation on issues around accessibility and information provision for older rail passengers. Rolling stock and station audits were carried out by older people across a rail network in the South West of the UK. A total of 72.2 hours of auditing took place across different sizes of station and different types of rolling stock. Two main themes were found across both rolling stock and station audits: accessibility and information provision. With regards to accessibility, boarding and especially alighting from the train was the key issue. Across stations and in rolling stock inadequate lighting was a key issue for older people. Use of stairs between platforms, especially when stations were crowded was an issue. In terms of information, key issues were found with signage being too cluttered, small, hidden and inconsistent and audible announcements being difficult to decipher. There must be improvements made to railways to help older people feel more safe and secure using them. It is suggested step free and level accessibility is found boarding and alighting from the train, but also from station entrance to carriage. Better signage is needed throughout the station and on trains, with large repeated fonts used. Lighting needs to be revisited throughout to ensure areas are bright and well-lit both on station platforms and on board. Further research needs to look at these findings in relation to slips, trips and fall accident rates. There is very little research on older people's perceptions and barriers to railway use. This adds value in being one of the only studies to do so, especially from the perspective of older people themselves as co-researchers. (JL)

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TRAUMA, CONFLICT AND WAR

(See 263/113)

VOLUNTEERING AND THE VOLUNTARY SECTOR

263/144 Perceived neighbourhood safety and volunteerism among older adults; by Erin G Grinshteyn, Judith A Sugar.: Cambridge University Press.

Ageing and Society, vol 41, no 12, December 2021, pp 2914-2932.

Previous research shows the benefits of volunteerism to individuals and communities. The purpose of this study was to determine whether lower perceived neighbourhood safety is associated with reduced volunteerism and whether this association differs by sex. Data from the 2008 Health and Retirement Study (HRS) in the United States of America were used (N = 13,009 adults age 60+). Multivariate logistic regression models were estimated to assess the association between perceived neighbourhood safety and volunteerism while controlling for potential confounders. Perceived neighbourhood safety was associated with volunteering. The odds of volunteering were higher for those who rated their perceived neighbourhood safety as excellent, compared with those rating their perceived neighbourhood safety as fair/poor. Those rating their perceived neighbourhood safety as very good also had greater odds of volunteering than those rating their perceived neighbourhood safety as fair/poor. Results differed somewhat by gender. Men who perceived their neighbourhood safety as excellent had increased odds of volunteering. The association of neighbourhood safety with volunteerism was significant for women rating their perceived neighbourhood safety as excellent or very good. Among men, being married was associated with increased odds of volunteering; and being completely or partly retired was associated with increased odds of volunteering among women. Initiatives aimed at improving older adults' perceptions of safety would help improve volunteerism, which is beneficial to both older adults and communities. (RH)

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WELLBEING

(See 263/58)