

New Literature on Old Age

EDITOR

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ABUSE, SAFEGUARDING AND PROTECTION

- 265/1 Adult protective services training: insights from California caseworkers; by Pi-Ju Liu, Alicia Neumann, Kate Radcliffe, Anna Chodos.: Taylor and Francis.
Journal of Gerontological Social Work, vol 64, no 3, April-May 2021, pp 274-290.
Adult Protective Services (APS) training is critical to the mission of APS in supporting the workforce but not much is known from caseworkers' perspectives. To learn more, 63 caseworkers in five California counties, from urban, suburban, and rural areas, participated in focus groups. Discussion was organised around three open-ended questions regarding implementation of the National Adult Protective Services Association (NAPSA) training content in practice: (1) What trainings have changed your practice and how? (2) How could training be changed to make it easier to implement? (3) What characteristics of your work environment interfere with implementation of learning? Through iterative reading and review of focus group transcripts, four themes emerged: (1) motivations, (2) barriers, (3) facilitators, and (4) impact. Caseworkers also made recommendations to improve training for better implementation of concepts and skills. Caseworkers involved in this study were quick to assert the need for increased access to training, more sophisticated content and experiential learning. Moreover expanding and enhancing safety training was recommended, as was aligning training with local needs and policies. Since the NAPSA approved APS core competencies and advanced topics are also offered and used in other counties and states, considering how to improve training could benefit caseworkers nationwide. (JL)
ISSN: 01634372
From : <https://doi.org/10.1080/01634372.2020.1870605>

- 265/2 Tackling abuse of older people: five priorities for the United Nations Decade of Healthy Ageing (2021-2030); by World Health Organization - WHO. Geneva: World Health Organization, 2022, 30 pp. Globally, 1 in 6 people aged 60+ experience abuse in the community every year, with potentially severe physical and mental health, financial and social consequences. This document presents priorities for tackling elder abuse in a coordinated, strategic way within the United Nations Decade of Healthy Ageing (2021-2030). A systematic review of the literature and 26 interviews with key informants were used to identify factors that account for elder abuse having such a low global priority. Five priorities for tackling the problem are outlined: combat ageism; generate more and better data on the prevalence and on risk and protective factors; develop and scale up cost-effectiveness solutions; make an investment case; and raise funds. By implementing these priorities, governments, United Nations agencies and development organisations, civil society organisations, academic and research institutions and funders could finally start to prevent abuse of older people globally, and hence contribute to improving their health, well-being and dignity. (RH)
From : <https://apps.who.int/iris/handle/10665/356151>

ACTIVE AGEING

(See 265/126)

AGEING (GENERAL)

(See 265/71, 265/93)

AGEING IN PLACE

(See 265/112)

AGEISM AND AGE DISCRIMINATION

- 265/3 Acknowledging systemic discrimination in the context of a pandemic: advancing an anti-racist and anti-ageist movement; by Ernest Gonzales, Stacey Gordon, Cliff Whetung (et al).: Taylor and Francis.
Journal of Gerontological Social Work, vol 64, no 3, April-May 2021, pp 223-237.
The purpose of this commentary was to draw together the confluence of current events, namely the COVID-19 pandemic and racial injustice. It is argued that vulnerability to COVID-19 cannot be understood by age alone but within the context of inequity. The authors first review how COVID-19 has disproportionately affected Black and Latino populations across the life span with the latest data from New York City Department of Health. They then discuss critical race theory and analyse longstanding inequities in health, economic and social conditions that heighten the risk for vulnerability. The study concludes with a discussion for the social work profession on the issues of defunding the police to undoing stereotypes. (JL)
ISSN: 01634372
From : <https://doi.org/10.1080/01634372.2020.1870604>

- 265/4 The Comparative Macro-Level Ageism Index: an international comparison; by Ju-Hyun Kim, Ahyoung Song, Soondool Chung (et al.): Taylor and Francis.
Journal of Aging and Social Policy, vol 33, no 6, November-December 2021, pp 571-584.
Ageism, the socially constructed discrimination against older people, influences their quality of life. This study aimed to compare ageism in 15 Organisation for Economic Cooperation and Development (OECD) countries using the scientifically developed Comparative Macro-Level Ageism Index (CMAI). A research team developed the CMAI by reviewing previous index research on the life of older people and by conducting expert interviews using a Delphi method. They identified five domains, economic status, health, employment, environment, and social participation, and 17 indicators of ageism. Standardised ageism scores were compared across 15 OECD countries. The results indicated that the overall ageism score was highest in Turkey and lowest in Japan. Turkey was the most likely while South Korea was the least likely to practice age discrimination in the workplace. Yet, South Korea had the highest score for discriminating against seniors based on economic status while Spain had the lowest score in this domain. Japan had favourable conditions for economic status, health status and social participation for older adults. Implications of this study and suggestions for further studies on developing an objective indicator of structural age discrimination are discussed. (RH)
ISSN: 08959420
From : <https://doi.org/10.1080/08959420.2020.1750540>
- 265/5 Embodied ageism: "I don't know if you do get to an age where you're too old to learn"; by Sarah Vickerstaff, Mariska van der Horst.
Journal of Aging Studies, vol 62, September 2022, 8 pp (pre-publication).
More people are extending their working lives through choice or necessity; and as a result, there is an increasing focus on the experiences of older workers. Access to training and development at work are seen to be one way of maintaining older workers' motivation, productivity and job satisfaction; but at the same time, we know that older workers typically get less training at work than younger members of the workforce. This article explores how ageist environments in society and in work organisations affect how older workers view the opportunities for training at work. Speech about training and development is analysed in semi-structured interviews conducted with 104 older workers, 25 line managers and 27 human resource and occupational health managers in the United Kingdom. Managers commonly spoke in ageist terms about older workers being less motivated or less able to undertake training and development. These stereotypes were also embodied or internalised by many older workers, who expressed the view that they were now 'too old' for training and/or promotion, either because of their career stage, or because of the 'inevitable' physical and cognitive decline that comes with age and which makes learning new things more difficult. As access to training and development are recognised as one way of facilitating good and longer working lives, understanding the impact of ageist environments as well as direct discrimination against older workers is necessary to enable, encourage and motivate older workers to engage in development activities. (OFFPRINT). (RH)
ISSN: 08904065
From : <https://doi.org/10.1016/j.jaging.2022.101054>
- 265/6 How to avoid ageist language in aging research?: An overview and guidelines; by Carmen Bowman, Weng Marc Lim.: Taylor and Francis.
Activities, Adaptation and Aging, vol 45, no 4, October-December 2021, pp 269-275.
Language carries and conveys meaning that feeds assumptions and judgments. Such is the case with ageist language which perpetuates prejudice, stereotyping and discrimination against people based on their age. Of particular interest in this article is the widespread use of ageist language in research on ageing and the need for guidelines to mitigate it. In 'The economic, social and cultural rights of older persons' (1995), the United Nations Committee on Economic, Social and Cultural Rights rejected the term "elderly" in preference for "older persons". However, a search on Google Scholar for the term "elderly" in the titles of articles published between 2000 and 2020 returns more than 140,000 results, and a search for the term anywhere within articles returns more than 2,000,000 results. These observations highlight the prevalence of ageist language in the literature. The authors suggest guidelines for and provide exemplars of age-related language in two areas: language describing older people, and language describing activities. In doing so, they hope to address the problem of ageist language and to promote dignified and respectful language use in commentaries and studies on ageing. This is in line with the World Health Organization Decade of Healthy Ageing (2021-2030), a plan of action for combating ageism. (RH)
ISSN: 01924788
From : <https://doi.org/10.1080/01924788.2021.1992712>

ALCOHOL AND DRUG MISUSE

- 265/7 Alcohol consumption among older women in the United States; by Corliss A Solomon, Sarah B Laditka, Melinda Forthofer, Elizabeth F Racine.: Taylor and Francis.
Journal of Women and Aging, vol 33, no 1, January-February 2021, pp 100-117.
Few studies have examined alcohol consumption among older women. This study uses the nationally representative US National Survey on Drug Use and Health (NSDUH, 2012-2016) to examine binge, moderate and no alcohol consumption among women ages 50+ (n = 21,178). The authors calculated population prevalence by age, and used multivariate logistic regression, controlling for seven sociodemographic factors. In adjusted results, women ages 65+ were more likely to have moderate or no alcohol consumption than those 50-64. Hispanic and African American women were more likely to engage in binge consumption than whites (all p .01). More research is needed to understand binge alcohol consumption among older women in racial and/or ethnic minorities. (RH)
ISSN: 08952841
From : <https://doi.org/10.1080/08952841.2019.1684176>
- 265/8 Binge drinking among Hispanic older adults: 2015-2019; by R Andrew Yockey.: Taylor and Francis.
Journal of Gerontological Social Work, vol 64, no 5, July-August 2021, pp 471-479.
Previous research has shown that older adults show a high propensity to report unhealthy alcohol habits. Much is to be gleaned regarding these relationships among older Hispanics. The purpose of the present study was to examine correlates to binge drinking among a national sample of Hispanic older adults. Pooled data from the 2015-2019 National Survey on Drug Use and Health were analysed among 4,152 Hispanic individuals. Findings revealed that a sizable percentage (17.9%) of individuals reported binge drinking in the previous 30 days. Of the sample 15.1% of individuals diagnosed with diabetes reported binge drinking and high co-morbid substance use was found. Findings can address critical gaps in Hispanic health care, prevention messaging and harm reduction. (JL)
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From : <https://doi.org/10.1080/01634372.2021.1905128>

ARTS, CRAFT AND MUSIC

(See Also 265/105, 265/106)

- 265/9 Conceptual art for the aging brain: piloting an art-based cognitive health intervention; by Colette J Brown, Andrea Fernanda Cortes Chirino, Cristina Mala Cortez (et al).: Taylor and Francis.
Activities, Adaptation and Aging, vol 45, no 1, January-March 2021, pp 39-69.
Art-based interventions have shown promise in improving quality of life and emotional well-being among older adults, but few have focused on improving cognition and reducing dementia risk. This mixed methods pilot study investigated whether healthy older adults, who participated in a 12-week art-based cognitive health intervention, driven by a Conceptualist art approach, demonstrated improvements in their cognitive functioning and psychosocial well-being. Participants were cognitively normal, community-dwelling older adults who completed pre and post cognitive and psychosocial assessments, and qualitative interviews post-intervention. Results revealed statistically significant improvements in executive function, cognitive flexibility (set-switching), and life satisfaction. Qualitative exploration of older adults' perceived outcomes from the intervention revealed that they experienced 'Personal Growth and Learning' from the skills and knowledge gained. Specifically, they reported becoming more open-minded and critically engaged, being challenged in positive ways, and gaining a better understanding of cognitive health. Participants also reported that the course material was intellectually stimulating and personally relevant. Connections between quantitative and qualitative findings, and how they should guide future interventions, are discussed. This study supports the need to further explore conceptual art for its associations to dementia risk and well-being for older individuals. (RH)
ISSN: 01924788
From : <https://doi.org/10.1080/01924788.2020.1719584>
- 265/10 Improv as creative aging: the perceived influences of theatrical improvisation on older adults; by Ruth H Yamamoto.: Taylor and Francis.
Activities, Adaptation and Aging, vol 45, no 3, July-September 2021, pp 217-233.
This article adds to the literature on improvisation and creative ageing. It reports on a phenomenological qualitative study of six older women's experiences with improvisation through a course for older people offered at a Mid-Atlantic community college in Largo, Maryland. Data took the form of two individual interviews and a focus group. Participants reported that improv classes helped them build community, provided an avenue to grow, and gave them a place to play. Older adults often battle negative stereotypes of ageing. Improv may be a catalyst for creative ageing which helps combat negative stereotypes and gives older improvisers the means to age positively. (RH)
ISSN: 01924788
From : <https://doi.org/10.1080/01924788.2020.1763075>

- 265/11 Music and memory: the impact of individualized music listening on depression, agitation, and positive emotions in persons with dementia; by Andreas Huber, Sandra Oppikofer, Laura Meister (et al.): Taylor and Francis.
Activities, Adaptation and Aging, vol 45, no 1, January-March 2021, pp 70-84.
This Swiss study aimed to investigate the impact of a music-based intervention on depression, agitation, and positive emotions among 23 people with dementia, using a crossover design. Along with a caregiver, each participant received a total of 16 sessions of individualised music listening. All sessions were filmed, resulting in 362 videos, and the content was analysed. Depression scores decreased significantly over time while agitated behaviour showed a constant moderate level without any significant decreases. Positive emotions occurred significantly more often than negative emotions during the music listening. Individualised music listening induced positive emotions and reduced depression scores over time. (RH)
ISSN: 01924788
From : <https://doi.org/10.1080/01924788.2020.1722348>

ASSISTED DYING

- 265/12 A systematic review of older adults' request for or attitude toward euthanasia or assisted-suicide: Evidence from an asymmetric fixed effects analysis of community dwelling adults in Germany; by Dolores Angela Castelli Dransart, Sylvie Lapierre, Annette Erlangsen (et al.): Taylor and Francis.
Aging and Mental Health, vol 25, no 3, March 2021, pp 420-430.
Prevalence rates of death by euthanasia (EUT) and physician-assisted suicide (PAS) have increased among older adults and public debates on these practices are still taking place. In this context it seemed important to conduct a systematic review of the predictors (demographic, physical health, psychological, social, quality of life, religious, or existential) associated with attitudes toward, wishes and requests for, as well as death by EUT/PAS among individuals aged 60 years and over. A search for quantitative studies in PsycINFO and MEDLINE databases was conducted three times from February 2016 until April 2018. 327 articles of probable relevance were assessed for eligibility. Of these, 306 studies that only presented descriptive data were excluded. This review identified 21 studies with predictive analyses, but in only four did older adults face actual end-of-life decisions. Most studies (17) investigated attitudes toward EUT/PAS (nine through hypothetical scenarios). Younger age, lower religiosity, higher education and higher socio-economic status were the most consistent predictors of endorsement of EUT/PAS. Findings were heterogeneous with regard to physical health, psychological, and social factors. Findings were difficult to compare across studies because of the variety of sample characteristics and outcomes measures. Future studies should adopt common and explicit definitions of EUT/PAS, as well as research designs (e.g. mixed longitudinal) that allow for better consideration of personal, social, and cultural factors, and their interplay, on EUT/PAS decisions. (JL)
ISSN: 13607863
From : <https://doi.org/10.1080/13607863.2019.1697201>

ASSISTIVE TECHNOLOGY

- 265/13 Reducing loneliness and improving well-being among older adults with animatronic pets; by Rifky Tkatch, Lizi Wu, Stephanie MacLeod (et al.): Taylor and Francis.
Aging and Mental Health, vol 25, no 7, July 2021, pp 1239-1245.
Studies consistently demonstrate that older adults who are lonely have higher rates of depression and increased mortality risk. Pet ownership may be a solution for loneliness, however challenges related to pet ownership exist for older adults. Hence researchers and practitioners are examining the use of animatronic pets to reduce loneliness. The aim of this study was to determine the feasibility of an animatronic pet programme and whether ownership of animatronic pets would decrease loneliness and improve wellbeing among lonely older adults. Eligible individuals were identified as lonely through a prior survey. Participants were provided with the choice of an animatronic pet and completed T1/T2/T3 surveys. Attrition was high; 168 (63%) participants completed T1/T2 surveys, and 125 (48%) also completed a T3 survey. Post survey data indicated that loneliness decreased, while mental wellbeing, resilience and purpose in life improved. Frequent interactions with the pets were associated with greater improvement in mental wellbeing and optimism. Animatronic pets appear to provide benefits for the wellbeing of lonely older adults. Future studies should employ randomised controlled designs examining the impact of animatronic pets. (JL)
ISSN: 13607863
From : <https://doi.org/10.1080/13607863.2020.1758906>

- 265/14 Shall I compare thee ... to a robot?: an exploratory pilot study using participatory arts and social robotics to improve psychological well-being in later life; by Noelle Fields, Ling Xu, Julienne Greer, Erin Murphy.: Taylor and Francis.
Aging and Mental Health, vol 25, no 3, March 2021, pp 575-584.
Research suggests that the use of creative artistic activities in later life may positively impact the psychological wellbeing of older adults. Social robots have been utilized in research with older adults,

however few studies have integrated participatory arts (e.g. theatre) into social robotic platforms for the purpose of implementing a psychosocial intervention with this population. In this study an interdisciplinary team designed and delivered an intervention integrating theatre and social robotics with the aim of improving the psychological wellbeing of study participants both with and without cognitive impairment who lived in a residential care setting. A purposive sample of 15 older adults age 65 and older participated in this 3-session pilot study that involved a Shakespeare participatory art activity using the robot, NAO. Pre and post tests were conducted before and after each session with measures of depression, loneliness, and a simplified face scale for mood were asked. Results from Repeated Measurement Analysis of Variance (ANOVA) showed that depression, loneliness and face scores had significantly decreased across six time periods and these declines differed between people with dementia and those without dementia. In addition, only significant changes of depression before and after the intervention were found between persons with and without dementia. The authors discuss the promising aspects of using social robotics as a platform for participatory arts interventions with older adults and offer lessons learned from the use of innovative technology in residential care settings. (JL)

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From : <https://doi.org/10.1080/13607863.2019.1699016>

ATTITUDES TO AGEING

(See Also 265/55)

- 265/15 "No matter how old I am, I don't like what my stomach looks like.": Lifespan perspective on the changes in self-assessment of attractiveness and life satisfaction in women; by Katarzyna Skalacka, Grzegorz Pajestka.: Taylor and Francis.

Journal of Women and Aging, vol 33, no 6, November-December 2021, pp 683-691.

The study aimed to examine the association between self-assessment of attractiveness and life satisfaction in women, where age was a potential moderator of this relationship. A cross-sectional study of 360 Polish women aged 18 to 89 was performed. Participants assessed their overall attractiveness, the attractiveness of their individual body parts, and their life satisfaction. The relationship between the assessment of attractiveness of particular body parts and life satisfaction depended on age. The results indicate that not only overall self-attractiveness, but also the perceived attractiveness of particular body parts (different in each distinguished age group: 18-25, 30-45 and 60+) can be considered predictors of life satisfaction in women. (RH)

ISSN: 08952841

From : <https://doi.org/10.1080/08952841.2020.1781509>

- 265/16 Age-based healthcare stereotype threat during the COVID-19 pandemic; by Molly Maxfield, Allie Peckham, M Aaron Guest, Keenan A Pituch.: Taylor and Francis.

Journal of Gerontological Social Work, vol 64, no 6, September 2021, pp 571-584.

Older adults have been identified as a high-risk population for COVID-19 by the United States Centers for Disease Control and Prevention (CDC). Although well-intentioned this nonspecific designation highlights stereotypes of older adults as frail and in need of protection, exacerbating negative age-based stereotypes that can have adverse effects on their wellbeing. Healthcare stereotype threat (HCST) is concern about being judged by providers and receiving biased medical treatment based on stereotypes about one's identity _ in this case age. Given the attention to older adults' physical vulnerabilities during the pandemic, older adults may be especially worried about age-based judgments from medical providers and sensitive to ageist attitudes about COVID-19. In this study an online data collection (April 13 to May 15 2020) with adults aged 50 and older examined age-based HCST. Respondents who worried that healthcare providers judged them based on age also reported more negative COVID-19 reactions, including perceived indifference toward older adults, young adults' lack of concern about health and unfavourable media coverage of older adults. The results highlight the intersection of two pandemics: COVID-19 and ageism. The study closes with consideration of the clinical implications. (JL)

ISSN: 01634372

From : <https://doi.org/10.1080/01634372.2021.1904080>

- 265/17 Ethics and aesthetics in injection treatments with Botox and Filler; by Anna Abellsson, Anna Willman.: Taylor and Francis.

Journal of Women and Aging, vol 33, no 6, November-December 2021, pp 583-595.

The medical nature of "aesthetic" treatments is confusing, since the boundaries between medicine and beauty are unclear. A person's autonomous decision is an indicator for aesthetic treatments that will improve their self-image, self-esteem and appearance to others. Robust ethical consideration is therefore necessary for the medical aesthetician in each meeting with the client. This Swedish study aims to describe medical aestheticians' perceptions of ethics and aesthetics in injection treatments with Botox and Filler. The results are described in three categories: understanding what different clients desire; reaching a mutual understanding of expectations and possibilities; and taking responsibility for beauty. (RH)

ISSN: 08952841

From : <https://doi.org/10.1080/08952841.2020.1730682>

- 265/18 The generations game: The stereotypes that limit us when we think about age groups; by Bobby Duffy.: RSA.
RSA Journal, no 22, 2022, pp 10-15.
This article argues that, although young people are always at the leading edge of change in cultural norms, around race, immigration, sexuality and gender equality and identity. and young people are less set in their ways and more comfortable with change than older people, the gaps between young and old on emergent cultural issues are no larger than gaps in the past. Indeed, in many cases there were bigger gaps between Baby Boomers in their youth and their parents than we see between young and old today. Although the issues have changed, for example, moving from sexual orientation to gender identity, the size of the gap between generations is entirely unsurprising.
ISSN: 09580433
From : <https://www.thersa.org/comment/2022/06/the-generations-game>
- 265/19 Re-imagining personhood: dementia, culture and citizenship; by John Swinton.: Taylor and Francis.
Journal of Religion, Spirituality and Aging, vol 33, no 2, 2021, pp 172-181.
This paper explores the issue of personhood and citizenship. It looks at some of the philosophical and cultural challenges that accompany the experience of dementia and offers a way of thinking that can hold together the vital relationality that comes with certain models of philosophical personhood with the more concrete and politically engaged understandings of dementia that come through a focus on citizenship in general and social citizenship in particular. It suggests that if we bring together relational models of personhood with citizenship approaches, we can end up with a politically informed spirituality that has much potential in terms of developing and protecting the wellbeing of people living with dementia and those who seek to offer care and support. (JL)
ISSN: 15528030 From : <https://doi.org/10.1080/15528030.2020.1845278>
- 265/20 What ritual teaches about life, humor and ageing. Or vice versa?: Teaching and pastoral care: a 40 year reflection on milestones, mentors and life passages; by Alan Niven.: Taylor and Francis.
Journal of Religion, Spirituality and Aging, vol 33, no 2, 2021, pp 223-235.
Reflective practice, based on narrative case studies, highlights the need for practitioners to observe and integrate their own lifecycle rituals and thus become more open to collaborative ritual-making. This paper reviews 40 years of texts and research that have resourced and informed ritual practice that addressed later life, ageing, life review, spiritual reminiscence and dying. The pastoral and spiritual care formation of the author owes much to patients and parishioners who joined with him in the *communitas* of liminal moments where ritual transforms and transcends the hierarchy of caregivers in the community of caregiving. (JL)
ISSN: 15528030 From : <https://doi.org/10.1080/15528030.2020.1850604>

BEREAVEMENT

- 265/21 Life goes on: the influence of the perceived quality of social relations on older women's mental health after the loss of a partner in Europe; by Jordi Gumà, Celia Fernández-Carro.: Taylor and Francis.
Aging and Mental Health, vol 25, no 1, January 2021, pp 53-60.
The loss of a spouse or partner is a major stressor undermining one's mental health, especially in midlife and old age. Social ties are key moderators of the impact of bereavement, serving to enhance psychological resilience and facilitating social engagement and access to resources. The aim of this study was to explore the association between depression levels and the interaction between the composition of and level of satisfaction with social networks among women who had lost their husband. The study was undertaken from a crossnational perspective, examining women throughout Europe. The research used data from the sixth wave of the SHARE (Survey of Health, Ageing and Retirement in Europe) Survey. Using linear regression models the study found that negative evaluations of social relations influenced the mental health of European widows, mostly when relatives exclusively composed their social network. The perceived quality of that network had more impact on the mental health of older widows in Northern and Western European countries than in their Southern and Eastern counterparts. (JL)
ISSN: 13607863 From : <https://doi.org/10.1080/13607863.2019.1675141>

BLACK AND MINORITY ETHNIC GROUPS

(See Also 265/3, 265/88)

- 265/22 Dating behaviors of older Black women; by Margaret A Salisu.: Taylor and Francis.
Journal of Gerontological Social Work, vol 65, no 3, April 2022, pp 337-357.
The complexities of older Black women's dating behaviours and preferences were uncovered in this phenomenology study with 14 older Black single and/or widowed women. The participants recognised that, as older Black women, their sexuality did not simply pertain to whether they were dating, it encompassed various factors that influenced their decisions about whether to date. These factors were

categorised into three major themes: pursuing intimacy, dating preferences and barriers to dating. The adoption of the Black feminist standpoint theory helped to understand their dating experiences in the context of the participants' Blackness. The women's subjective experiences with dating and the challenges that they faced as older Black women demonstrated the complexities and intersections of race, gender, class and age within this contextual analysis. These findings hold important practical implications for understanding the influence of the older women's Blackness on their experiences and how it shaped their dating behaviour. These understandings will help social workers and gerontologists better appreciate and validate older Black women's self-determination in their dating choices and the need to support them. (JL)

ISSN: 01634372

From : <https://doi.org/10.1080/01634372.2021.1967547>

265/23 How do Black Caribbean-born women living in the UK construct their experience of retirement?: A discursive psychology analysis; by Melissa Butler, Jacqui Farrants.: Taylor and Francis. *Journal of Women and Aging*, vol 33, no 5, September-October 2021, pp 503-521.

The present research explores how Caribbean-born women think about what retirement means to them. Eight participants (self-identified as retired) were recruited using purposive and snowball sampling. Data were obtained using individual semi-structured interviews and analysed using discursive psychology. Findings centre around a discussion of the negotiating difference discourses. This construction consists of two sub-creations: work and retirement, and home. Both creations present participants engaging in a process of negotiation to merge the life they once knew with their retirement experience. Implications for participants and the construction of retirement are considered; and suggestions are made for future research for clinicians working with the studied population. (RH)

ISSN: 08952841

From : <https://doi.org/10.1080/08952841.2020.1718580>

265/24 Living in a paradox: how older single and widowed Black women understand their sexuality; by Margaret A Salisu, Jagadisa-Devasri Dacus.: Taylor and Francis.

Journal of Gerontological Social Work, vol 64, no 3, April-May 2021, pp 303-333.

The current phenomenological study explored how single and/or widowed older Black women understand their sexuality in the context of their Black matriarchal role and through their relational interactions with their children, families, friends and their extended social networks. The women spoke about their sexuality in the contexts of Black matriarchy, concept of self and communication. Black matriarchy was defined as the tenacity with which, as Black women and Black mothers, participants occupied a centralised role in their families, while concept of self reflected heavily on conflicting perceptions they held of their understanding of themselves as sexual beings. Regarding communication, many participants felt constrained in self-disclosing their sexual feelings and relationship status. Living in a paradox exemplified the study's interpretation of the women's struggles as they tried to balance the expectations of the roles they occupied in society with their own identity as a sexual being. These findings offer a nuanced exploration of the various dimensions about how they understood themselves by providing invaluable insight into their world as older Black women. Implications for policy and practice pertain to assessing the fundamental historical and contemporary issues that older Black women face while simultaneously considering the convergence of race, gender and sexuality. (JL)

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From : <https://doi.org/10.1080/01634372.2020.1870603>

CARERS AND CARING

265/25 Health of aging families: comparing compound and noncompound caregivers; by Fei Wang, Christina N Marsack-Topolewski, Rosanne DiZarro-Miller, Preethy S Samuel.: Taylor and Francis.

Journal of Gerontological Social Work, vol 65, no 3, April 2022, pp 290-304.

Providing care to a family member with disabilities takes a toll on the health of the caregiver and the family. Among ageing caregivers, compound caregiving (i.e., caring for two or more family members) has become an increasingly common scenario. However few research studies have focused on compound caregivers. Extant literature describes individual-level outcomes, with sparse knowledge on family-level outcomes. The family quality of life framework was used in this study to examine differences in the individual and family health of aging compound and non-compound caregivers. Web-based cross-sectional data collected from 112 ageing caregivers (age 50 and older) were analysed using chi-square and independent sample t-tests to examine differences between caregivers. Compound caregivers had poorer perceptions of personal health than non-compound caregivers. In terms of family health, although all caregivers shared similar perceptions on the importance, opportunities, initiative, and stability, compound caregivers had lower attainment and satisfaction than non-compound caregivers. Multivariate regression analyses indicated that compound caregiving was associated with poorer family health. Personal health was positively associated with family health. Study findings have practice implications for identifying caregivers' multiple responsibilities. It is necessary to develop individual and family level programs focused on health promotion and caregiver training. (JL)

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COVID-19

(See Also 265/3, 265/16, 265/53, 265/64, 265/79, 265/85, 265/87, 265/94, 265/96, 265/98, 265/104)

- 265/26 "A healthier future for all": findings from the COVID-19 impact inquiry in the United Kingdom; by Cara Leavey, Heather Wilson.: European Observatory on Health Systems and Policies. *Eurohealth*, vol 27, no 2, 2021, pp 41-44.
The COVID-19 pandemic has profoundly affected people's health and livelihoods in the United Kingdom. By mid-March 2021, the pandemic contributed to 119,000 excess deaths, and in 2020 caused a 9.9% drop in GDP. This article summarises findings from the Health Foundation's COVID-19 Impact Inquiry, published in July 2021. The analysis explores how people's pandemic experiences were influenced by pre-existing health, and how actions taken in response to COVID-19 impacted on health. It highlights the unequal burdens carried by different population groups and regions across the UK, and suggests areas for action to support a recovery which improves health and reduces inequalities. (RH)
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<https://apps.who.int/iris/bitstream/handle/10665/352274/Eurohealth-27-2-41-44-eng.pdf?sequence=1>
- 265/27 Age-related differences in the perception of COVID-19 emergency during the Italian outbreak; by Irene Ceccato, Rocco Palumbo, Adolfo Di Crosta (et al.): Taylor and Francis. *Aging and Mental Health*, vol 25, no 7, July 2021, pp 1305-1313.
Older adults have been identified as a high-risk population for COVID-19, hence it is crucial to understand how they perceived and reacted to the emergency. The present study examined age-related differences in emotions, cognitive attitudes and behavioural responses to the COVID-19 crisis. Based on the Socioemotional Selectivity Theory the research expected to find a positive approach in older adults which may translate into lower compliance with restrictive measures. The authors analysed data from a nationwide online survey conducted across Italy during April 2020. A comparison was made between young (18-29 years), middle-aged (30-50 years) and older (65-85 years) adults' self-reported emotions, attitudes toward the emergency and compliance with governmental rules. Older adults showed lower negative emotions than young and middle-aged adults. Also older adults were more confident about COVID-related information received, more favourable toward the restrictive measures and perceived lower underestimation of the emergency compared to the other age groups. However older people anticipated a longer time for the emergency to resolve. No age-related differences in compliance with the rules emerged. Overall, older people showed a positive attitude toward the emergency. This attitude was confined in the here and now and did not extend to expectations for the future. Compliance with rules was high across the sample. However less compliant individuals were also less confident in COVID-related information received by the media and official sources, suggesting the importance of providing precise and reliable information to promote adherence to restrictive measures. (JL)
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From : <https://doi.org/10.1080/13607863.2020.1856781>
- 265/28 COVID-19 and long-term care policy for older people in Japan; by Margarita Estevez-Abe, Hiroo Ide.: Taylor and Francis. *Journal of Aging and Social Policy*, vol 33, nos 4-5, July-October 2021, pp 444-458.
Japan's initial response to COVID-19 was similar to that of the US. However, the number of deaths in Japan has remained very low. Japan also stands out for the relatively low incidence of viral transmission in Long-Term Care Facilities (LTCFs) compared to both European countries and the United States. The authors argue that Japan's institutional decision to lockdown Long-Term Care facilities as early as mid-February - weeks earlier than most European countries and the US - contributed to lowering the number of deaths in LTCFs. Lessons from the Japanese experience are highlighted: first, the presence of hierarchically organized government agencies whose sole missions are caring for older people; second, the presence of effective communication channels between LTCFs and the regulatory authorities; and third, the well-established routine protocols of prevention and control in LTCFs. (RH)
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From : <https://doi.org/10.1080/08959420.2021.1924342>
- 265/29 COVID-19 pandemic and resilience of the transnational home-based elder care system between Poland and Germany; by Maglалena Nowicka, Susanne nartig, Theresa Schwass, Kamil Matuszczyk.: Taylor and Francis. *Journal of Aging and Social Policy*, vol 33, nos 4-5, July-October 2021, pp 474-492.
As COVID-19 puts older people in long-term institutional care at the highest risk of infection and death, the need for home-based care has increased. Germany relies largely on migrant caregivers from Poland. Yet the pandemic-related mobility restrictions reveal the deficiencies of this transnational elder care system. This article asks if this system is resilient. In order to answer this question, the research team conducted interviews with 10 experts and randomly selected representatives of brokering and sending agencies in Germany and Poland. The team interviewed 13 agencies in Germany and 15 in Poland on the agencies' characteristics, recruitment strategies, challenges of the pandemic, and impact of legal

regulations in the sector. The analysis shows that the system could mobilise adaptive capacities and continue to deliver services, but its absorptive capacity is limited. To enhance resilience, policies working toward formalisation and legalization of care services across national borders are required. (RH)
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From : <https://doi.org/10.1080/08959420.2021.1927615>

- 265/30 Elderly people with dementia admitted for COVID-19: how different are they?; by Noel Roig-Marín, Pablo Roig-Rico.: Taylor and Francis.
Experimental Aging Research, vol 48, no 2, March-April 2022, pp 177-190.
Patients with a dementia diagnosis and COVID-19 sometimes manifest an atypical clinical picture. However, differences between older COVID-19 patients with dementia and those not having dementia have not been described previously, nor had in-hospital mortality or out-of-hospital mortality from either group been reported. This Spanish study aims to determine whether there is a significant difference between in-hospital and out-of-hospital mortality in older patients admitted for COVID-19, compared to those with or without dementia. A secondary aim is to determine whether there are significant clinical and laboratory differences between older COVID-19 patients with dementia and without dementia. The study used data collected on hospitalisations of older patients aged 70+ admitted for COVID-19 in 2020 at the Hospital de San Juan de Alicante.
In-hospital mortality in a context of admission for COVID-19 is significantly higher in patients without dementia. However, post-discharge out-of-hospital mortality is significantly higher in patients with dementia. The out-of-hospital mortality of older patients with dementia appears to be significantly higher than those who do not. Therefore, the importance of caring for older patients with dementia after being discharged from hospital should be emphasised. (RH)
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From : <https://doi.org/10.1080/0361073X.2021.1943794>
- 265/31 The impact of COVID-19 on nursing homes in Italy: the case of Lombardy; by Marco Arlotti, Costanzo Ranci.: Taylor and Francis.
Journal of Aging and Social Policy, vol 33, nos 4-5, July-October 2021, pp 431-443.
Italy was the first western country strongly hit by the COVID-19 outbreak. This Perspective focuses on the large number of deaths that occurred in nursing homes during the first wave of the pandemic, and the weak capacity of public policy to provide them with adequate protection. The analysis focuses on the case of the Lombardy Region, where the mortality rate due to COVID-19 in nursing homes was the highest in Europe. In the search for possible causes, the authors investigate the situation of such facilities before the pandemic. Two aspects are analysed: their institutional embeddedness, and recent trends in their management. The authors conclude by arguing that the negative impact of COVID-19 stems from the poor development of long-term care policy and from the marginality of residential institutions within the healthcare system. (RH)
ISSN: 08959420
From : <https://doi.org/10.1080/08959420.2021.1924344>
- 265/32 The impact of COVID-19 on social isolation in long-term care homes: perspectives of policies and strategies from six countries; by Charlene H Chu, Jing Wang, Chie Fukui (et al): Taylor and Francis.
Journal of Aging and Social Policy, vol 33, nos 4-5, July-October 2021, pp 459-473.
Preventing the spread of COVID-19 in long-term care homes is critical for the health of residents who live in these institutions. As a result, broad policies restricting visits to these facilities were put in place internationally. While well meaning, these policies have exacerbated the ongoing social isolation crisis present in long-term care homes prior to the COVID-19 pandemic. This perspective highlights the dominant COVID-19 LTC policies from six countries: Brazil, China, Canada, Japan, Switzerland and the US. Five strategies are proposed to address or mitigate social isolation during the COVID-19 pandemic that can also be applied in a post-pandemic world, the first being increased monitoring and resident support to identify and mitigate negative impacts of situation restrictions. The other four are: maintaining and supporting safe resident interactions; formation of a leadership and management task force; use of technologies to connect residents with the outside world; and clear and timely communication of policies. (RH)
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From : <https://doi.org/10.1080/08959420.2021.1924346>
- 265/33 Old overnight: experiences of age-based recommendations in response to the COVID-19 pandemic in Sweden; by Gabriella Nilsson, Lisa Ekstam, Anna Axmon, Janicke Andersson.: Taylor and Francis.
Journal of Aging and Social Policy, vol 33, nos 4-5, July-October 2021, pp 359-379.
The Swedish response to the COVID-19 pandemic included age-based recommendations of voluntary quarantine specifically for those 70 years of age or older. This paper investigates the experiences of a sudden change of policy in the form of an age restriction that trumped the contemporary active ageing ideal. A web-based qualitative survey was conducted in April 2020. Through manual coding of a total of 851 responses, six different ways of relating to the age-based recommendations were identified. The results show that age is not an unproblematic governing principle. Instead, in addition to protecting a

vulnerable group, the age-based recommendation meant deprivation of previously assigned individual responsibility and, consequently, autonomy. It is shown how respondents handled this tension through varying degrees of compliance and resistance. Findings highlight the importance of continuously tracking the long-term consequences of age-based policy to avoid negative self-image and poorer health among older adults. (RH)

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From : <https://doi.org/10.1080/08959420.2021.1925042>

- 265/34 Older adults' experiences of social distancing and the role of the community center during COVID-19; by Lauren Wolman, Lynda Atack, Sanjana Khan (et al).: Emerald.
Quality in Ageing and Older Adults, vol 23, no 2, 2022, pp 42-53.

Although very much needed from an infection control perspective, there is deep concern about the impact of social distancing during COVID-19, particularly on older adults. The study reported used a phenomenological design to gain insight into older adults' experiences of living with social distancing during the first wave of COVID-19. Semi-structured interviews were conducted with eight older adults at the Miles Nadal Jewish Community Centre (MNJCC) in Toronto. Six themes were identified: a smaller life, feelings of unease, resilience, connection to the community centre, technology (which was a boon, but one with limitations), and the way through social distancing. This study captures older adults' experiences early in COVID-19. Findings indicate that there is much we can learn from these older people regarding social isolation that could apply to other older people, and potentially other age groups during the time of pandemic and beyond. (RH)

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From : <https://doi.org/10.1108/QAOA-01-2021-0005>

- 265/35 Older adults' risk perception during the COVID-19 pandemic in Lombardy region of Italy: a cross-sectional survey; by Erika Guastafierro, Claudia Toppo, Francesca G Magnani (et al).: Taylor and Francis.

Journal of Gerontological Social Work, vol 64, no 6, September 2021, pp 585-598.

During the COVID-19 pandemic older adults are the segment of the population at higher health risk. Given the important role that risk perception has in influencing both their behaviours and psychological wellbeing it would appear useful to explore this factor in this segment of the population. Although different studies have already described factors influencing risk perception few have focused on older adults. Hence this study investigated risk perception in 514 people aged over 60 years during lockdown. The authors administered a structured interview collecting socio-demographic information, sources of information used, actions undertaken to avoid contagion and risk perception. Risk perception related to COVID-19 was significantly lower than the perceived risk associated with other threats, and it was correlated to the number of sources of information used but not to the actions undertaken. Furthermore there was found to be a higher risk perception in people who knew others who had been infected, and a negative correlation between risk perception and age, with over 75s perceiving a lower risk of getting infected compared to younger participants. These results should be taken as informative for future studies. Indeed further studies on older adults and risk perception during similar emergencies are needed to better orient both communication and supporting strategies. (JL)

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From : <https://doi.org/10.1080/01634372.2020.1870606>

- 265/36 Telephone-based emotional support for older adults during the COVID-19 pandemic; by Liora Bar Tur, Michal Inbal-Jacobson, Sharon Brik-Deshan (et al).: Taylor and Francis.

Journal of Aging and Social Policy, vol 33, nos 4-5, July-October 2021, pp 522-538.

Isolation and lockdowns stemming from the COVID-19 pandemic exacerbate older adults' vulnerability to emotional harm. This paper stresses the importance of establishing an ongoing system of distant emotional care by experienced gerontologists as a routine practice, parallel to physical healthcare services. It introduces a tele-based emotional support program for older adults operated by the Israel Gerontological Society during COVID-19. Experience with the telephone-support initiative suggests it to be an effective and meaningful means of providing emotional support to older adults and their families and assisting community caregiving agencies. Policymakers and gerontologists should address older adults' needs for emotional support and develop effective tele-support solutions in routine times as a promising relief for homebound, frail or lonely older adults. Tele-based emotional support can substitute for in-person meeting, and easily and quickly reach out to many older adults who otherwise would not receive support. (RH)

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From : <https://doi.org/10.1080/08959420.2021.1924414>

DAY CARE

- 265/37 Does the Meeting Centre Support Programme decrease the experience of stigmatisation among people with cognitive deficits?; by Katarzyna Malgorzata Lion, Dorota Szczesniak, Katarzyna Bulinska (et al).: Taylor and Francis.
Aging and Mental Health, vol 25, no 1, January 2021, pp 160-169.
This was the first study to focus on the role and impact of a psychosocial intervention, the Meeting Centre Support Programme (MCSP), for people living with dementia and mild cognitive impairment (MCI) on the experience of stigmatisation across three different European countries. A pre/post-test control group study design compared outcomes for 114 people with dementia and/or MCI in Italy, Poland and the UK who received either the MCSP or usual care (UC). The 'Stigma Impact Scale, neurological disease' (SIS) was administered at two points in time, six months apart. The Global Deterioration Scale (GDS) was used to assess the level of cognitive impairment. Although statistical analysis did not show any significant differences between MCSP and UC at pre/post-test for the three countries combined, there were significant results for individual countries. In Italy, the level of SIS was significantly lower in the MCSP group following the intervention. The level of Social Isolation increased significantly in the UC group at follow-up in Poland. The level of Social Rejection was significantly higher over time for UK participants receiving MCSP compared to UC. The experience of stigma by people living with dementia and MCI is complex and there may be different country specific contexts and mechanisms. From these results it is not possible to confirm or disconfirm the impact of a social support programme such as MCSP on this experience. Difficulties in directly measuring the level of stigma in this group also requires further research. (JL)
ISSN: 13607863
From : <https://doi.org/10.1080/13607863.2019.1683815>
- 265/38 Meeting centres support programme highly appreciated by people with dementia and carers: a European cross-country evaluation; by Dorota Szczesniak, Joanna Rymaszewska, Francesca Lea Saibene (et al).: Taylor and Francis.
Aging and Mental Health, vol 25, no 1, January 2021, pp 149-159.
The Meeting Centres Support Programme (MCSP) offers a combined approach to providing practical, emotional and social support to people living with mild to moderately severe dementia and their family carers in the community. In this study a mixed methods explanatory design was used. The evaluation took place within the framework of the international Joint Programme - Neurodegenerative Disease Research (JPND) - MEETINGDEM study in nine Meeting Centres in Italy, Poland and the United Kingdom. 87 people with dementia and 81 family carers completed a user evaluation survey after three months and 83 people with dementia and 84 carers after six months of participation in MCSP. 32 people with dementia and 30 carers took part in focus groups after nine months. The percentage of people with dementia who were very satisfied with the programme increased significantly over time. The majority of carers reported that they felt less burdened after three months of participation in MCSP (48.1% much less; 35.4% a little less). After six months, this percentage increased significantly to 91%. Focus group analysis showed that people with dementia and carers in all countries/centres improved their ability to maintain emotional balance. The MCSP is highly appreciated by people with dementia and carers in all countries and it confirms the results of previous research into MCSP in the Netherlands. These findings indicate that MCSP is a model that can help its users to increase their capacity to deal with the challenges caused by dementia and can promote emotional balance. (JL)
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From : <https://doi.org/10.1080/13607863.2019.1683814>

DEATH AND DYING

- 265/39 Regret of family caregivers in Israel about the end of life of deceased relatives; by Jiska Cohen-Mansfield, Shai Brill.: Taylor and Francis.
Aging and Mental Health, vol 25, no 4, April 2021, pp 720-727.
This study aimed to clarify the content of different types of regrets or lack of regret, and the frequency of feeling regret among family caregivers who assisted their relatives during their end of life stage. 70 primary informal caregivers in Israel were interviewed (17 spouses, 52 children and one cousin) concerning their regret about the end of life of their deceased relative, including a general question about regret and questions about regret concerning life-sustaining treatments. After calculating the frequency of regrets and lack of regret the authors conducted a qualitative analysis, using a thematic approach to identify themes and interpret data. A majority of caregivers (63%) expressed regret and about 20% expressed ambivalence involving both regret and denial of regret. Regrets pertained to care given, suffering experienced and the caregiver's behaviour towards and relationship with the deceased, including missing opportunities to express love and caring toward relatives. Caregivers viewed almost 30% of 75 administered life-sustaining procedures as misguided. Most regrets involved inaction, such as not communicating sufficiently, or not fighting for better care. This article provides a comprehensive description of EoL regrets, and helps clarify the complexity of regrets, lack of regrets, and ambivalence concerning regrets, though the study is limited to one country. Analysis suggests the need for public

education concerning the EoL process, and for changes within the health care system to improve communication, to improve understanding of the needs of the terminally ill and to provide more instruction to family caregivers to help them understand EoL. (JL)
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DEMENTIA

(See Also 265/30, 265/62)

- 265/40 Awareness in severe Alzheimer's disease: a systematic review; by N J O'Shaughnessy, J E Chan, R Bhome (et al.): Taylor and Francis.
Aging and Mental Health, vol 25, no 4, April 2021, pp 602-612.
There is limited understanding about how people in the severe stages of Alzheimer's disease (AD) experience and demonstrate awareness. This study synthesised all available evidence with the aim of understanding how awareness is preserved or impaired in severe AD and what evidence there is for different levels of awareness according to the levels of awareness framework. A systematic search of the following databases: Embase, PsycINFO, MEDLINE and Web of Science was carried out. A narrative synthesis and analysis was conducted of all included studies. All studies were assessed for quality using the AXIS and CASP tools. Study findings suggested that lower level sensory awareness is relatively maintained in severe AD. Findings for higher level awareness are variable and this may be related to the diversity of methods that have been used to explore awareness in these circumstances. Awareness is complex, heterogeneous and varies significantly between individuals. Environmental and contextual factors have a significant impact on whether awareness is observed in people with severe AD. Adaptation of the environment has the potential to facilitate the expression of awareness while education of caregivers may increase understanding of people with severe AD and potentially improve the quality of care that is received. (JL)
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From : <https://doi.org/10.1080/13607863.2020.1711859>
- 265/41 Bridging the divide between biomedical and psychosocial approaches in dementia research: the 2019 INTERDEM manifesto; by Myrra Vernooij-Dassen, Esme Moniz-Cook, Frans Verhey (et al.): Taylor and Francis.
Aging and Mental Health, vol 25, no 2, February 2021, pp 206-212.
The aim of this study was to provide a new perspective on integrated biomedical and psychosocial dementia research. Dementia is being recognised as a multifactorial syndrome but there is little interaction between biomedical and psychosocial approaches. A way to improve scientific knowledge is to seek better understanding of the mechanisms underlying the interaction between biomedical and psychosocial paradigms. One rationale for integrating biomedical and psychosocial research is the discordance between neuropathology and cognitive functioning. The concept of social health might bridge the two paradigms. It relates to how social resources influence the dynamic balance between capacities and limitations. It is hypothesised that social health can act as a driver for accessing cognitive reserve in people with dementia through active facilitation and utilisation of social and environmental resources. Thereby the study links lifestyle social and opportunities to the brain reserve hypothesis. A Manifesto is then provided on how to significantly move forward the dementia research agenda. (JL)
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From : <https://doi.org/10.1080/13607863.2019.1693968>
- 265/42 Cognitive stimulation therapy (CST) for dementia: a systematic review of qualitative research Evidence from an asymmetric fixed effects analysis of community dwelling adults in Germany; by Luke Gibbor, Lauren Yates, Anna Volkmer, Aimee Spector.: Taylor and Francis.
Aging and Mental Health, vol 25, no 6, June 2021, pp 980-990.
Cognitive Stimulation Therapy (CST) is a well-established intervention for people with dementia shown to improve cognition and quality of life. Past research includes development of a longer term 'maintenance CST' and an individual CST programme. Previous reviews of CST have focused on quantitative outcomes or excluded certain formats of CST. This review aimed to fill this gap by evaluating how the voices of facilitators, carers and people with dementia in qualitative studies of CST can contribute to our understanding of its implementation and how it is experienced. The current systematic review explored the experience and perspectives of people with dementia, facilitators and carers. Thematic analysis was used to analyse this data, alongside guidance on synthesising qualitative findings. A systematic literature search retrieved ten relevant studies using qualitative methodology. 18 themes were generated, which were grouped into three categories: 'Acceptability and feasibility', 'Features of CST' and 'Key outcomes'. This is the first review to explore solely qualitative studies of CST. Findings provided insight into the shared features, outcomes and factors affecting implementation, and suggested theories for discrepancies between quantitative and qualitative findings in the literature. Some of the common themes were also in keeping with past reviews. (JL)
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- 265/43 A feasibility randomised control trial of individual cognitive stimulation therapy for dementia: impact on cognition, quality of life and positive psychology
Evidence from an asymmetric fixed effects analysis of community dwelling adults in Germany; by Luke Gibbor, Lycia Forde, Lauren Yates (et al.): Taylor and Francis.
Aging and Mental Health, vol 25, no 6, June 2021, pp 999-1007.
This study aimed to evaluate the feasibility of a 14-session programme of individual Cognitive Stimulation Therapy (iCST) for people with dementia (PWD). It addressed potential limitations in previous literature of iCST and evaluated possible impact on cognition, quality of life (QoL) and positive psychology. The 14-session iCST programme was developed using existing manuals for group and individual CST and consultation with experts in the field. 33 PWD were recruited from care homes and randomly assigned to iCST (14, 45-min sessions) or treatment as usual (TAU) over seven weeks. Outcomes measures were assessed at baseline and follow-up after the intervention. The intervention appeared feasible with high attendance to sessions, minimal levels of attrition, and ease of recruitment. Analysis of covariance indicated significant improvements in cognition (Alzheimer's Disease Assessment Scale-Cognitive subscale) for PWD receiving iCST compared to TAU. There were no significant differences between groups on follow-up scores on the standardised Mini Mental State Examination, measures of positive psychology or self- and proxy- reported QoL.
A 14-session programme of iCST delivered by professionals was feasible and acceptable to PWD and may provide benefits to cognition. A larger randomised control trial would be necessary to fully evaluate intervention impact on cognition, as well as QoL and positive psychology. (JL)
ISSN: 13607863
From : <https://doi.org/10.1080/13607863.2020.1747048>
- 265/44 Field-testing an iCST touch-screen application with people with dementia and carers: a mixed method study
Evidence from an asymmetric fixed effects analysis of community dwelling adults in Germany; by Harleen Kaur Rai, Rebecca Griffiths, Lauren Yates (et al.): Taylor and Francis.
Aging and Mental Health, vol 25, no 6, June 2021, pp 1008-1018.
The purpose of this study was to test an individual Cognitive Stimulation Therapy (iCST) application using touchscreen tablet technology with people with dementia and carers in order to modify and refine the application and improve its usability. In an iterative development process, two different prototypes were used to elicit the subjects' views and preferences. This application may address the current need for more innovative approaches to support people with dementia and their carers. An opportunistic sample of 13 people with dementia and 13 carers participated in four focus groups and ten semi-structured interviews to obtain feedback in key areas including the layout and content of the application and the experience of its use as a dyad. Data were audio-recorded, transcribed and analysed thematically. An additional 18 people with dementia and 16 carers completed a short usability and acceptability questionnaire regarding a subsequent version of the iCST application prototype. Most participants expressed enthusiasm about the iCST application, its usability, design and content. Participants highlighted the importance of adaptability to individual preferences, indicating a need for a wider range of activities and flexibility in the use of the application. Furthermore participants reported perceived benefits including mental stimulation, quality time spent together and enjoyment. The application was rated slightly better by carers than people with dementia in terms of usability and acceptability. This study gives insights from people with dementia and carers concerning the usability, feasibility and perceived benefits of the iCST application. The feedback will be incorporated in an updated version of the iCST application for commercial release. (JL)
ISSN: 13607863
From : <https://doi.org/10.1080/13607863.2020.1783515>
- 265/45 Group-based cognitive stimulation therapy for dementia: a qualitative study on experiences of group interactions
Evidence from an asymmetric fixed effects analysis of community dwelling adults in Germany; by Stavros Orfanos, Luke Gibbor, Catherine Carr, Aimee Spector.: Taylor and Francis.
Aging and Mental Health, vol 25, no 6, June 2021, pp 991-998.
Cognitive Stimulation Therapy (CST) is an evidence-based group intervention shown to improve cognition and quality of life in dementia and is widely implemented across the NHS. However no attempt has been made to understand the possible advantages and/or disadvantages of delivering CST in a group format. The main aim of the present study was to explore experiences of group interactions in CST and longer-term maintenance CST (MCST) groups. A total of 21 semi-structured in-depth interviews were conducted across four separate groups delivered in London, the East Midlands, South West and South East of England, including two CST and two MCST groups. Group members with mild to moderate dementia and facilitators from these groups were interviewed. Thematic analysis was used to analyse the data using NVivo software. The final analysis identified six themes: 'benefits and challenges of group expression', 'importance of companionship and getting to know others', 'togetherness and shared identity', 'group entertainment', 'group support' and 'cognitive stimulation through the group'. The inter-connecting relationship between these themes were synthesised and

summarised. Findings supported the notion that therapeutic advantages inherent to the group format exist in group-based CST. New insights into the challenges related to a group format are also highlighted and discussed. Future research may benefit from exploring the relationship between the identified experiences of group interactions and clinical outcomes. (JL)

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265/46 Participation as means for adaptation in dementia: a conceptual model; by Sylwia M Górska, Donald Maciver, Kirsty Forsyth.: Taylor and Francis.

Aging and Mental Health, vol 25, no 3, March 2021, pp 499-511.

There are a number of conceptual models of dementia, capturing a range of biopsychosocial factors. Few integrate the lived experience of dementia. The aim of this study was to develop a conceptualisation grounded in the first-hand accounts of living with the condition and reflecting its complexity. This study was conducted within an explanatory, critical realist paradigm. An overarching narrative approach, informed by a previously completed systematic review and metasynthesis of research on the lived experience of dementia and the assumptions of complexity theory, was used to guide data collection and analysis. Data were contributed by 31 adults, including 12 people living with dementia and 19 family caregivers. The experience of living with dementia was conceptualised as a process of adaptation through participation, emerging from ongoing, dynamic and nonlinear interactions between the adaptive capacity of a person with dementia and the adaptive capacity within the environment. The proposed conceptual model described contexts and mechanisms which shaped this capacity. It identified a range of potential outcomes in dementia. These outcomes reflected interactions and the degree of match between the adaptive capacity of a person and the adaptive capacity within the environment. By recognising and exploring the potential for adaptation and enduring participation in dementia, findings of this research can support practitioners in facilitating positive outcomes for people affected by the condition. (JL)

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265/47 Psychosocial interventions for dementia in low- and middle-income countries (LMICs): a systematic review of effectiveness and implementation readiness

Evidence from an asymmetric fixed effects analysis of community dwelling adults in Germany; by Charlotte R Stoner, Monisha Lakshminarayanan, Helen Durgante, Aimee Spector.: Taylor and Francis. Aging and Mental Health, vol 25, no 3, March 2021, pp 408-419.

Despite wide uptake in high-income countries (HICs), less is known about the effectiveness and implementation of psychological, social and cognitive interventions in low- and middle-income countries (LMICs). Despite this such interventions are increasingly used. The aim of this review was to appraise the effectiveness and implementation readiness of psychosocial interventions for people with dementia in LMICs. The authors undertook a systematic search of databases from 1998 to 2019. Studies were rated on two scales assessing quality and implementation readiness. 17 articles describing 11 interventions in six countries were evaluated. Interventions included Cognitive Stimulation Therapy (CST), a Multidisciplinary Cognitive Rehabilitation Programme (MCRP), singing interventions, occupational therapy and reminiscence therapy. The quality of included studies was variable, and many had low sample sizes. Evidence for improving both cognition and quality of life was found in two interventions: Cognitive Stimulation Therapy (CST) and a Multidisciplinary Cognitive Rehabilitation Programme (MCRP). Implementation issues were more likely to be explored in studies of Cognitive Stimulation Therapy (CST) than in any other intervention. Of the included studies here, CST appears to be the most implementation ready, improving both cognition and quality of life with implementation readiness effectively explored in two LMIC countries: India and Tanzania. (JL)

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265/48 Relationship between depressive symptoms and capability to live well in people with mild to moderate dementia and their carers: results from the Improving the experience of Dementia and Enhancing Active Life (IDEAL) programme; by Yu-Tzu Wu, Linda Clare, Fiona E Matthews.: Taylor and Francis.

Aging and Mental Health, vol 25, no 1, January 2021, pp 38-45.

Depression is a common condition in dementia and has a substantial impact on quality of life and wellbeing. There is limited evidence on how depressive symptoms in the person with dementia impact on the carer, and vice versa. The aim of this study was to investigate dyadic relationships between depressive symptoms and capability to live well in both people with dementia and their carers and to examine whether people with dementia who do not have a carer are more vulnerable to the impact of depressive symptoms than those who have a carer. Using a large cohort study of 1,547 community-dwelling people with mild to moderate dementia and 1,283 carers in Great Britain, a Bayesian analysis framework was developed to incorporate 981 dyads, 127 people with dementia whose carers did not participate, 137 people with dementia who did not have a carer, and 302 dyads with missing data and estimate actor and partner relationships between depressive symptoms and capability to live well, which was expressed as a latent factor derived from measures of quality of life, life

satisfaction and wellbeing. Depressive symptoms in people with dementia and carers had negative associations with capability to live well both for the individual and for the partner. Compared to those who had a carer, depressive symptoms had a greater impact on capability to live well in people with dementia who did not have a carer. The impact of depression may extend beyond the person experiencing the symptoms. Future interventions for depressive symptoms should utilise this potential wider impact to understand and optimise treatment effects. (JL)

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DEMENTIA CARE

(See Also 265/30, 265/37, 265/38, 265/42, 265/43, 265/44, 265/45, 265/101, 265/119)

- 265/49 "The world was shifting under our feet, so I turned to my devotionals as his dementia worsened": the role of spirituality as a coping mechanism for family caregivers of Alaska Native elders with dementia; by Benjamin Fife, Lauren Brooks-Cleator, Jordan P Lewis.: Taylor and Francis.
Journal of Religion, Spirituality and Aging, vol 33, no 3, 2021, pp 252-270.
Providing direct care for an individual with Alzheimer's Disease and related dementias (ADRD) is a source of chronic stress for caregivers. Spirituality and religion are important to Alaska Native (AN) identity and this study explored the role of spiritual practices as a coping mechanism for dementia caregivers. The aim of the study was to (1) identify stressors experienced by AN people caring for someone with dementia and (2) describe the role of spirituality in coping with those stressors. This exploratory study conducted interviews with 21 AN caregivers of those with dementia. The study employed thematic analysis to interview transcripts to examine relationships among the narratives and explore themes that populated the participants' understandings of ADRD in each of the domains of Kleinman's Explanatory Model of Illness. AN caregivers reported chronic stress related to caregiving, and subthemes included poor health, lack of support and lack of education on dementia. Caregivers reported using spiritual practices to cope with stress. The use of spiritual practices is identified as a primary resource during challenging caregiving experiences. Community organisations and health care providers should incorporate spiritual practices as part of the support they provide to AN dementia caregivers. (JL)
ISSN: 15528030
From : <https://doi.org/10.1080/15528030.2020.1754995>
- 265/50 Breaking bread: a dementia awareness café - a theatre installation for dementia awareness; by Samantha Bews.: Taylor and Francis.
Journal of Religion, Spirituality and Aging, vol 33, no 2, 2021, pp 182-193.
'Breaking Bread: A Dementia Awareness Café' was a theatre installation held on the forecourt of a busy city café in regional Victoria, Australia over three days during September 2018. The aim of the work was to reduce the fear and stigma associated with dementia by engaging an audience in an imaginative, participatory artwork, which challenged prejudice inherent within a medical term used to diagnose dementia. Included in the installation was the Loss and Nourishment Book, a collection of edited interviews with people experiencing the effects of dementia. The installation was successful in attracting a large and diverse audience, and in fostering conversation about dementia in a non-threatening manner. (JL)
ISSN: 15528030
From : <https://doi.org/10.1080/15528030.2020.1845280>
- 265/51 Dementia care partners' reported outcomes after adaptive riding: a theoretical thematic analysis; by Rebecca Lassell, Beth Fields, Jennifer E Cross, Wendy Wood.: Emerald.
Quality in Ageing and Older Adults, vol 23, no 1, 2022, pp 14-25.
This case study explored the appropriateness of an adaptive (therapeutic) horse-riding programme for people living with dementia, by examining family members' (care partners) reported outcomes. The authors used convenience sampling to recruit people living with dementia and their care partners in Northern Colorado, who after meeting inclusion criteria, were invited to participate in the adaptive riding programme. The 8-week programme was held weekly, in hour-long sessions. Field notes were collected during each session, and semi-structured interviews were conducted with five care partners after the programme and analysed using theoretical thematic analysis. Care partners found the adaptive riding programme appropriate. Reported outcomes identified these themes: well-being, meaning through social connections and function in daily life, and aligned with positive emotions, engagement, relationships, meaning, accomplishment (PERMA) theory of well-being. To the best of the authors' knowledge, this is the first study to explore the appropriateness of an adaptive riding programme for people living with dementia and their care partners, who broadened understandings of the emotional, social and physical benefits. Findings support the inclusion of care partners in adaptive riding, and may inform health-care providers' recommendations for such programmes and projects. (RH)
ISSN: 14717794
From : <https://doi.org/10.1108/QAOA-01-2022-0007>

- 265/52 Exploring the needs of people with dementia living at home reported by people with dementia and informal caregivers: a systematic review and meta-analysis
Evidence from an asymmetric fixed effects analysis of community dwelling adults in Germany; by Eleanor Curnow, Robert Rush, David Maciver (et al.): Taylor and Francis.
Aging and Mental Health, vol 25, no 3, March 2021, pp 397-407.
The aim of this study was to provide prevalence estimates of needs of people with dementia living at home and to determine sources of variation associated with needs for this population. A systematic review and meta-analysis was performed searching CINAHL, MEDLINE, PsycINFO and ASSIA databases. Following quality checks random effects meta-analysis produced prevalence estimates for needs reported by people with dementia and by their informal caregivers. Fixed effects models were undertaken to compare caregiver and person with dementia reported needs. Heterogeneity was explored through sensitivity analysis. The study protocol was registered with Prospero #CRD42017074119. Six retrieved studies published between 2005 and 2017 including 1,011 people with dementia and 1,188 caregivers were included in the analysis. All data were collected using Camberwell Assessment of Need for the Elderly. Prevalence estimates were provided for 24 needs reported by participants in The Netherlands, United Kingdom, Poland, Ireland, Germany, Norway, Portugal, Italy and Sweden. Most prevalent needs reported by people with dementia were Memory, Food, Household activities and Money. Caregivers reported greater prevalence than people with dementia did for 22 of 24 needs although the priority ranking of needs was similar. Exploration of heterogeneity revealed that people with young onset dementia were the major source of variation for 24 out of 48 analyses. An increased understanding of prevalence of needs of people with dementia and associated heterogeneity can assist in planning services to meet those needs. (JL)
ISSN: 13607863
From : <https://doi.org/10.1080/13607863.2019.1695741>
- 265/53 Impact of COVID-19 related social support service closures on people with dementia and unpaid carers: a qualitative study; by Clarissa Giebel, Jacqueline Cannon, Kerry Hanna (et al.): Taylor and Francis.
Aging and Mental Health, vol 25, no 7, July 2021, pp 1281-1288.
Accessing social care and social support services is key to support the wellbeing of people living with dementia (PLWD) and unpaid carers. COVID-19 has caused sudden closures or radical modifications of these services, and is resulting in prolonged self-isolation. The aim of this study was to explore the effects of COVID-19 related social care and support service changes and closures on the lives of PLWD and unpaid carers. PLWD and unpaid carers were interviewed via telephone in April 2020. Transcripts were analysed using thematic analysis. Demographic characteristics including household Index of Multiple Deprivation score and weekly hours of social support service usage before and since the COVID-19 outbreak were also collected. Paired samples t-tests was used to compare the mean of weekly hours of social support service usage before and since the outbreak. 50 semi-structured interviews were conducted with 42 unpaid carers and eight PLWD. There was a significant reduction in social support service usage since the outbreak. Thematic analysis identified three overarching themes: (1) Loss of control; (2) Uncertainty; (3) Adapting and having to adapt to the new normal. Carers and PLWD were greatly affected by the sudden removal of social support services and concerned about when services would re-open. Carers were worried about whether the person they cared for would still be able to re-join social support services. PLWD and carers need to receive specific practical and psychological support during the pandemic to support their wellbeing which is severely affected by public health restrictions. (JL)
ISSN: 13607863
From : <https://doi.org/10.1080/13607863.2020.1822292>
- 265/54 The prevalence and predictors of loneliness in caregivers of people with dementia: findings from the IDEAL programme; by Christina R Victor, Isla Rippon, Catherine Quinn (et al.): Taylor and Francis.
Aging and Mental Health, vol 25, no 7, July 2021, pp 1232-1238.
The aim of this study was to establish the prevalence of loneliness among family caregivers of people with dementia and to identify potential risk factors for loneliness. Using data from the baseline wave of the Improving the Experience of Dementia and Enhancing Active Life (IDEAL) cohort study the authors examined loneliness in 1,283 family caregivers of people with mild to moderate dementia living in Great Britain. Multinomial regression was used to examine the relative influence of a series of risk factors for caregiver loneliness. Almost half, 43.7%, of caregivers reported moderate loneliness and 17.7% reported severe loneliness. Greater social isolation and increased caregiving stress were linked with both moderate and severe loneliness. Better quality of relationship with the person with dementia along with increased levels of wellbeing and life satisfaction were associated with a lower relative risk of reporting both moderate and severe loneliness. This study examined the prevalence and predictors of loneliness in a large sample of family caregivers of people with dementia. Notably over two-thirds of caregivers in the sample reported feeling lonely. Interventions aimed at reducing caregiving stress and supporting meaningful relationships may go some way towards helping to reduce loneliness. (JL)
ISSN: 13607863
From : <https://doi.org/10.1080/13607863.2020.1753014>

DEPRESSION

(See Also 265/48, 265/103)

- 265/55 Associations between body dissatisfaction, importance of appearance, and aging anxiety with depression, and appearance-related behaviors in women in mid-life; by Isabelle Carrard, Marios Agyrides, Xaris Ioannou (et al.): Taylor and Francis.
Journal of Women and Aging, vol 33, no 1, January-February 2021, pp 70-83.
The impacts of body dissatisfaction have been widely studied among adolescent girls, but much less in women in mid-life. The authors used data from an online survey of 331 French-speaking women aged 45-65 to evaluate the associations between body dissatisfaction, psychological health and behaviours used to manage age-related changes.
The data were collected as part of Appearance Matters: Tackling the Physical and Psychosocial Consequences of Dissatisfaction with Appearance, a cross-cultural project conducted by a working group of the European COST Action (COST IS1210, 2013-2017). Results indicate that body dissatisfaction, importance of appearance and age anxiety were associated with higher depression scores. Moreover, the importance of appearance and age anxiety were associated with the probability of using "anti-ageing" behaviours. It seems that with age, for a subgroup of women, the pressure to stay young may be added to that of staying thin. (RH)
ISSN: 08952841
From : <https://doi.org/10.1080/08952841.2019.1681882>
- 265/56 Depressive symptoms among elderly men and women who transition to widowhood: comparisons with long term married and long term widowed over a 10-year period; by Jiao Yu, Eva Kahana, Boaz Kahana, Changming Han.: Taylor and Francis.
Journal of Women and Aging, vol 33, no 3, May-June 2021, pp 231-246.
This study explores gender differences in mental health sequelae of transition to widowhood among old-old people living in retirement communities. Data are based on a prospective panel survey of 748 older adults (mean age = 78) in a large retirement community on the west coast of Florida; follow-ups were conducted over a 10-year period. Mixed-effects models suggest that older widows and widowers experienced sharp increases of depressive symptoms subsequent to spousal loss. Men showed stable increases of depressive symptoms after widowhood, whereas an inverted U-shape curve of depressive symptoms was prominent for older women. Findings indicate that women are more resilient and are better able to cope with spousal loss than are their male counterparts. (RH)
ISSN: 08952841
From : <https://doi.org/10.1080/08952841.2019.1685855>
- 265/57 Do gender differences in housework performance and informal adult caregiving explain the gender gap in depressive symptoms of older adults?; by Jennifer Tabler, Claudia Geist.: Taylor and Francis.
Journal of Women and Aging, vol 33, no 1, January-February 2021, pp 41-56.
The authors assess whether gender differences in domestic time-use, including informal adult caregiving and housework, explain the gender gap in depression among older adults. They use data from the 2009 and 2013 Disability and Use of Time (DUST) supplement of the US Panel Study of Income Dynamics (PSID) to model depressive symptoms as a function of informal adult caregiving and housework. The analytic sample includes 539 men and 782 women. Findings suggest informal adult caregiving is associated with increased depressive symptoms for women (p .05) and men (p .05). Time spent on housework is associated with decreased depressive symptoms for women and female caregivers (p .01). Women may experience elevated depressive symptoms relative to men, despite their domestic time-use. (RH)
ISSN: 08952841
From : <https://doi.org/10.1080/08952841.2019.1681243>
- 265/58 Effects of mindfulness meditation interventions on depression in older adults: a meta-analysis; by Chuntana Reangsing, Tanapa Rittiwong, Joanne Kraenzle Schneider.: Taylor and Francis.
Aging and Mental Health, vol 25, no 7, July 2021, pp 1181-1190.
This study aimed to examine the effects of mindfulness meditation interventions (MMIs) on depression in older adults and to explore the moderating effects of participant, methods and intervention characteristics. The authors systematically searched 15 databases through June 2019 without date restrictions. Inclusion criteria were primary studies evaluating MMIs with adults 65 years old and above with depression measured as an outcome, a control group, and written in English. Two researchers independently coded each study and compared for discrepancies and consulted a third researcher in cases of disagreement. The study used random-effects model to compute effect sizes (ESs) using Hedges' g, a forest plot, and Q and I² statistics as measures of heterogeneity. Moderator analyses were also examined. 19 studies included 1,076 participants with an average age of 71.8 years. Overall MMIs showed significantly improved depression compared to controls. With regards to moderators, Asians had a greater improvement in depression than Europeans and North Americans. Less than five weeks of

MMIs showed greater improvement in depression than longer periods. MMIs with guided meditation reduced depression more than MMIs without. Only one quality indicator, a priori power analysis, showed greater effects on depression than no power analysis. Overall MMIs improved depressive symptoms in older adults. MMIs might be used as adjunctive or alternative to conventional treatment for depressed older adults. (JL)

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From : <https://doi.org/10.1080/13607863.2020.1793901>

265/59 Exploring the role of built environments and depressive symptoms in community-dwelling older adults: a case of Taiwan

Evidence from an asymmetric fixed effects analysis of community dwelling adults in Germany; by Nuan-Ching Huang, Shiann-Far Kung, Susan C Hu.: Taylor and Francis.

Aging and Mental Health, vol 25, no 6, June 2021, pp 1049-1059.

Depression in older adults is a growing public health concern, however limited research has focused on the issues of physical environments and depression in older people in Asia. The purpose of the study was to examine the relationship between built environments and depressive symptoms in older adults using Taiwan as an example. Two national datasets were used in this study including the 2009 National Health Interview Survey and the 2006 National Land Use Investigation in Taiwan. A total of 2,155 older adults were recruited and eight built environments were examined among 161 townships. Depressive symptoms were measured using a 10-item CES-D scale and four sophisticated models were built using a multi-level analysis. Five types of built environments were found to be significantly associated with depressive symptoms in older adults. Among them, two types of built environments, 'health and medical services' and 'schools' were highly related to a lower CES-D score and lower odds of being depressed, whereas the other three built environments, 'cultural and historical facilities,' 'recreational and amusement areas,' and 'playgrounds and sports venues' were significantly associated with an increasing risk of being depressed. Different built environments had different effects on depression and some even showed a dose-response relationship. These results can help urban planners or city designers reconsider how to facilitate the construction of built environments in neighbourhoods that may improve the mental health of older adults. (JL)

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From : <https://doi.org/10.1080/13607863.2020.1755826>

DIET AND NUTRITION

265/60 Older, greener, and wiser: charting the experiences of older women in the American vegan movement; by Corey Wrenn, Alexis Lizardi.: Taylor and Francis.

Journal of Women and Aging, vol 33, no 6, November-December 2021, pp 653-675.

Vegan feminist theory argues that women and other marginalised groups frequently experience discrimination in the vegan movement, given its failure to apply intersectional praxis. The authors report on interviewing a small sample (number unspecified) of older vegan women in America, who, they hypothesise, would report feeling particularly vulnerable to discrimination, given the vegan movement's patriarchal leanings and its heavy focus on health and vitality. Results, however, are mixed. Some viewed older age as an asset that strengthened their ability to commit to veganism, while others reported stressed social interactions, under-representation in the movement, and lack of support by doctors. (RH)

ISSN: 08952841 From : <https://doi.org/10.1080/08952841.2020.1749501>

EMPLOYMENT

265/61 Age differences in open-mindedness: from 18 to 87-years of age; by Daniel R Edgcumbe.: Taylor and Francis.

Experimental Aging Research, vol 48, no 1, January-February 2022, pp 24-41.

As health care improves and more people work into later age, it is important to understand what impacts open-mindedness has on decision-making. This paper examined the role of ageing on open-mindedness. Open-mindedness was measured across 12 studies before data amalgamation. The Actively Open-minded Thinking (AOT) scale and Actively Open-minded Thinking about Evidence (AOT-e) scale measured open-mindedness in this sample (n = 9010) of participants aged 18 to 87 years old. Summary AOT positively correlated with AOT-e (r = 0.27). For two sub-factors derived from factor analysis based on the AOT, scores for both sub-factors positively correlated with AOT-e (sub-factor-1: r = 0.17/sub-factor-2: r = 0.31) but negatively correlated with age (sub-factor-1: r = -0.01/sub-factor-2: r = -0.16). Age negatively correlated with both AOT (r = -0.11) and AOT-e (r = -0.13). Regressions revealed that open-mindedness decreased with ageing. Age marginally predicted the change in open-mindedness; sex differences were not a predictor. It is proposed that the observed differences are the result of a reluctance to change long-established values and ideas at the cognitive level and cortical changes that occur with ageing. In an ageing population where more adults work into later life, the decrease in open-mindedness could influence many areas of judgments of decision-making. Importantly, this demonstrates that open-mindedness varies across the lifespan. (RH)

ISSN: 0361073X From : <https://doi.org/10.1080/0361073X.2021.1923330>

- 265/62 Dementia in the workplace: are employers supporting employees living with dementia?; by Valerie Egdell, Mandy Cook, Jill Stavert (et al.): Taylor and Francis.
Aging and Mental Health, vol 25, no 1, January 2021, pp 134-141.
As working lives extend and there is better recognition of early onset dementia, employers need to consider dementia as a workplace concern. With suitable support people living with dementia can continue in employment, although this may not be appropriate for all. The requirement for employers to support employees living with dementia has human rights and legal foundations. This article considers whether employers consider dementia as a workplace concern, and the policies and/or practices available to support employees living with dementia. It then develops understanding of whether employers are meeting their human rights/legislative obligations. A sequential mixed-methods approach was employed, with data collection undertaken in Scotland. An online survey was sent to employers across Scotland, with 331 participating. Of these, 30 employer interviews were conducted with the survey results informing the interview approach. The survey and interview data were analysed separately and then combined and presented thematically. The themes identified were (1) Dementia as a workplace concern, (2) Support for employees living with dementia and (3) Employer policy development and awareness raising. These findings demonstrate dementia awareness but this knowledge is not applied to employment situations. There is little evidence suggesting that the rights of employees living with dementia are consistently upheld. This research sends out strong messages about the rights and legal position of people living with dementia which cannot be ignored. The continuing potential of employees living with dementia and their legal rights are not consistently recognised. This highlights the need for robust training interventions for employers. (JL)
ISSN: 13607863
From : <https://doi.org/10.1080/13607863.2019.1667299>

FALLS

- 265/63 Memories of falls: resolved or unresolved memories?; by Karim Gallouj, Emin Altintas, Mohamad El Haj.: Taylor and Francis.
Experimental Aging Research, vol 48, no 1, January-February 2022, pp 58-67.
There is burgeoning interest in how older adults remember their falls; and research in this area has demonstrated how falls can reshape memory retrieval in older adults. The authors pursued this line of research by assessing whether older adults succeed in integrating memories of falls into their life stories. The authors invited 44 older adults (24 women and 20 men, mean age 63.42 years) from medical centres in France to remember their falls. These memories were analysed as to whether they were integrated or non-integrated.
Analysis demonstrated no significant differences between the number of integrated and non-integrated memories. Critically, however, higher anxiety and depression was observed in participants who produced non-integrated memories than in those who produced integrated ones. The ability to integrate memories of falls in older adults is likely to be associated with anxiety and depression. Anxiety may result in avoidance of processing of the meaning of falls, and depression may hamper the ability to extract meaning from them, resulting in difficulties for older adults to integrate falls into their life story. Non-integrated memories of falls in older adults may be seen as unresolved memories and deserve special clinical attention. (RH)
ISSN: 0361073X
From : <https://doi.org/10.1080/0361073X.2021.1926829>

FAMILY AND INFORMAL CARE

- 265/64 Concerns of family caregivers during COVID-19: the concerns of caregivers and the surprising silver linings; by Elizabeth Lightfoot, Rajean Moone, Kamal Suleiman (et al.): Taylor and Francis.
Journal of Gerontological Social Work, vol 64, no 6, September 2021, pp 656-675.
COVID-19 has had an enormous impact on older people around the world. As family caregivers provide a good portion of the care for older people their lives have also been drastically altered. This study was an in-depth exploration of the greatest concerns of family caregivers in the United States during COVID as well as their perspectives on the benefits of caregiving during the pandemic. The authors conducted in-depth interviews with a diverse sample of 52 family caregivers in the United States between May and September 2020 over video conferencing using a semi-structured interview guide. Thematic analysis was conducted to ascertain the participants' perceptions. Caregivers' concerns were organised into six main themes including social isolation, decline in mental health, decline in physical and cognitive functioning, keeping their family members safe from COVID, lack of caregiving support and caregiving stress. Themes related to the benefits of caregiving during COVID included: enjoyed the slower pace, increased time to spend together, deepened relationships, recognising the resilience of family members and caregiving innovations. This study may help social workers to understand the nature of caregiving stress during COVID as well as the positive aspects of caregiving, even during a global pandemic. (JL)
ISSN: 01634372
From : <https://doi.org/10.1080/01634372.2021.1898512>

- 265/65 The health of older family caregivers: a 6-year follow-up; by Lena Sandin Wrangler, Solve Elmstahl, Fagerstrom Cecilia.: Taylor and Francis.
Journal of Gerontological Social Work, vol 64, no 2, March 2021, pp 190-207.
It is unclear whether caregiving has an impact on the physical, mental and functional health of older caregivers. This study aimed to describe physical, mental and functional health in relation to family caregiving in people aged 60 or above over a six-year period. The study comprised 2,294 randomly selected individuals aged between 60 and 96 years from the Swedish National Study on Aging and Care, who answered the question on whether they were caregivers and who were followed up six years later. The prevalence of family caregivers was 13.1% and the incidence was 12.4%. Four tracks (T) were identified: T1) Family caregiver both at baseline and follow-up; T2) Family caregiver at baseline but not at follow-up; T3) Non-caregiver at baseline but family caregiver at follow-up; T4) Non-caregiver both at baseline and follow-up. Only non-caregivers (T4) reported a decline in mental health. Worries about health increased significantly in T2 and T4. The prevalence of caregivers was 13.1% with a high turnover. There are differences between family caregivers and non-caregivers in deterioration in physical and mental health as well as physical function over a six-year period. (JL)
ISSN: 01634372
From : <https://doi.org/10.1080/01634372.2020.1843098>

FRAILITY

- 265/66 Ageing and frailty: a spiritual perspective of the lived experience; by Elizabeth MacKinlay.: Taylor and Francis.
Journal of Religion, Spirituality and Aging, vol 33, no 2, 2021, pp 236-249.
Frailty awaits many of us if we live long enough. Frailty may often be seen as a precursor to the process of dying and as such can be a confronting life and death challenge _ one that we cannot fully comprehend until or unless we are experiencing it ourselves. It is only through listening to the narrative of those making these final life journeys that we can learn, first what the experience is like, find commonalities and differences in the experience and then to begin to learn how we may more effectively walk beside those who are making this crucial final life journey. This paper outlines current understandings of frailty from a biomedical and psychosocial perspective before considering a spiritual perspective of the lived experience of frail older people in residential and community care through their stories. (JL)
ISSN: 15528030
From : <https://doi.org/10.1080/15528030.2020.1845279>
- 265/67 Psychological and social factors associated with coexisting frailty and cognitive impairment: a systematic review; by Alison Ellwood, Catherine Quinn, Gail Mountain.: Sage.
Research on Aging, vol 44, nos 5-6, May-June 2022, pp 448-464.
Those living with coexisting frailty and cognitive impairment are at risk of poorer health outcomes. Research often focuses on identifying biological factors. This review sought to identify the association psychological and social factors have with coexisting physical and cognitive decline. Six databases were systematically searched in July 2020. Studies included individuals aged 60 years or older identified as being both frail and cognitively impaired. A narrative synthesis examined patterns within the data. Nine studies were included, most employed a cross-sectional design. Depression was investigated by all nine studies, those with coexistent frailty and cognitive impairment had higher levels of depressive symptoms than peers. Findings were mixed on social factors, although broadly indicate lower education, living alone and lower material wealth were more frequent in those living with coexistent decline. Further research is needed to explore potentially modifiable psychological and social factors which could lead to the development of supportive interventions. (RH)
ISSN: 01640275
From : <https://doi.org/10.1177/01640275211045603>

GRANDPARENTS

- 265/68 The experience of grandparenting young children; by Yuxin Huang, Qian Zhao, Nancy R Reynolds (et al.): Taylor and Francis.
Journal of Gerontological Social Work, vol 65, no 3, April 2022, pp 305-319.
This study examined the experience of grandparents providing regular childcare to their young grandchildren in China. Due to unique cultural and social factors regular childcare provided by grandparents is becoming increasingly common in China. Unfortunately, published research on this topic does not provide a sufficient understanding of the experiences of grandparents who provide the regular care and the impact this has on their life. A qualitative, cross-sectional study was conducted in an urban village setting in Changsha China, where 11 participants were recruited using purposive sampling. Data were collected between April and June 2019 and thematically analysed using a seven-step modified procedure established by Colaizzi. Three key themes were identified: (1) Dominant factors motivating grandparenting; (2) Sweet burden of grandparenting; and (3) Unmet needs. Study findings showed that

while the Chinese grandparents perceived value and benefits to providing regular childcare, there were also significant challenges that needed to be addressed. Interventions at a household and community level can be implemented to improve their childcare role. (JL)
ISSN: 01634372 From : <https://doi.org/10.1080/01634372.2021.1965687>

- 265/69 What are the social consequences of beginning or ceasing to care for grandchildren?: Evidence from an asymmetric fixed effects analysis of community dwelling adults in Germany
Evidence from an asymmetric fixed effects analysis of community dwelling adults in Germany; by Eleanor Quirke, Hans-Helmut Konig, André Hajek.: Taylor and Francis.
Aging and Mental Health, vol 25, no 5, May 2021, pp 969-975.
The aim of this study was to examine the influence of a change in one's caregiving status, i.e. beginning to provide grandchild care or ceasing to provide grandchild care on feelings of loneliness and one's social network size. A longitudinal study was conducted using data drawn from a population-based sample of community-based individuals aged over 40 years. This data was analysed using asymmetric fixed effects models. Perceived loneliness was measured using a short version of the De Jong Gierveld Loneliness Scale. The number of important people with whom respondents had regular contact was used as an outcome variable. All respondents were asked whether they privately cared for children that were not their own. Beginning to undertake care of a grandchild was associated with an increase in loneliness scores among men. Beginning to undertake care of a grandchild also increased the social network size among male grandparents. Ceasing to undertake grandchild care was not found to have an impact on feelings of loneliness or social network size among male nor female grandparents. This study identifies a positive association between caring for one's grandchild and one's social network. Men were found to experience increases in feelings of loneliness where women did not, suggesting possible divergences and experiences of this role. Grandfathers in particular should receive additional support when commencing the care of a grandchild to mitigate possible feelings of loneliness. This study builds on the growing literature exploring the implications of a grandparents undertaking supplementary care of their grandchildren. (JL)
ISSN: 13607863 From : <https://doi.org/10.1080/13607863.2020.1727846>

HEALTH AND WELLBEING

(See 265/89)

HEALTH CARE

- 265/70 Towards a beating cardiovascular disease plan for Europe; by Birgit Beger.: European Observatory on Health Systems and Policies.
Eurohealth, vol 27, no 2, 2021, pp 37-40.
Cardiovascular disease (CVD) is the leading cause of mortality in Europe and globally, and creates a substantial economic burden for health systems. It is therefore imperative that action is taken to address and improve prevention, treatment and management of CVD. Yet, political strategy and leadership to build a sustainable environment for cardiovascular health in Europe is lagging behind.
The COVID-19 pandemic has demonstrated weaknesses in health systems and highlighted the burden of CVD. With the current political momentum behind cardiovascular health, the CEO of the European Heart Network (EHN) proposes the creation of an EU action plan on CVD, underpinned by multi-stakeholder cooperation and dialogue with policymakers. (RH)
ISSN: 13561030
<https://apps.who.int/iris/bitstream/handle/10665/352273/Eurohealth-27-2-37-40-eng.pdf?sequence=1>

HEALTHY AGEING

- 265/71 The art of living well and the gaining of practical wisdom in later life: perspectives for undertaking future work in the intergenerational field; by Terence Seedsman.: Taylor and Francis.
Journal of Intergenerational Relationships, vol 19, no 3, 2021, pp 392-406.
The concept 'practical wisdom' is introduced, in order to improve our understanding of its nature, characteristics and contribution to positive intergenerational relationships. Older people who display aspects of practical wisdom are more likely to have acquired value orientations that affirm concern for life beyond oneself. This paper offers a range of perspectives on living well in later life, while acknowledging that there is no predefined formula, single pathway or personal style for doing so. In essence, its aim is to stimulate debate, reflection and ongoing conversations among scholars and students of gerontology, in the interests of opening new ways of thinking. These include the possibility of identifying a viable framework for research opportunities arising from a focus on positive aspects of old age that relate to: 1) living well in later life; 2) the acquisition and application of practical everyday wisdom; and 3) establishing partnership arrangements with older people that can facilitate the transmission of understandings on wisdom and the art of growing old as part of their commitment to the development of future generations. (RH)
ISSN: 15350770 From : <https://doi.org/10.1080/15350770.2020.1767256>

- 265/72 A framework for understanding spirituality and healthy ageing: perspectives from Aotearoa New Zealand; by Richard Egan, Mei-Ling Blank.: Taylor and Francis.
Journal of Religion, Spirituality and Aging, vol 33, no 2, 2021, pp 112-126.
Spirituality permeates the people of New Zealand: it is inherent in Maori culture, often explicit for new migrants, but frequently ignored or tokenistically acknowledged in mainstream culture. Older New Zealanders are a pluralistic population, often fiercely secular, with a small but active religious population. How society now treats older people requires work, and needs careful consideration and vision. As a country, New Zealand has embraced the notion of 'wellbeing', with the first 'wellbeing budget' announced in 2019. But well-being, or hauora as it is known in Maori, is incomplete without spirituality. This paper examines the place of spirituality, based on understandings and observations grounded in the New Zealand context, which comprises four interrelated areas: zeitgeist, scope and definitions, models, and evidence. It is suggested that this framework is a useful approach to examining what can be an ineffable personal experience and challenge to society's provision of aged care and healthy ageing. (JL)
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From : <https://doi.org/10.1080/15528030.2020.1843588>

HOME CARE

(See 265/29, 265/52, 265/91)

HOUSING

(See 265/59)

HOUSING WITH CARE

- 265/73 Consistent interactions with residents in assisted living facilities significantly improved the social and emotional competencies of 4 year olds; by Julie L Brant, Bethani Studebaker.: Taylor and Francis.
Journal of Intergenerational Relationships, vol 19, no 3, 2021, pp 362-376.
Social and emotional deficiencies in preschool classrooms is a growing concern and a consistent conversation among preschool teachers, caregivers and parents of preschool children. This American mixed methods study explored whether consistent interaction with residents in an assisted living facility would have any affect on the social and emotional competencies (self-awareness, self-management, social awareness, relationship skills and responsible decision-making) of 4 year olds. Data collected from teacher interviews, observations of the children, and a pre-post-rating scale (the Social and Emotional Competency Rating Scale) illuminated the positive impact of the intergenerational preschool on the five social and emotional competency skills of 4 year olds. Implications from these findings are examined with primary emphasis on practice. (RH)
ISSN: 15350770
From : <https://doi.org/10.1080/15350770.2019.1677278>

- 265/74 Linking service quality attributes to meaning-in-life outcomes for residents who have transitioned to an assisted living community; by Cynthia Mejia, Denver Severt.: Taylor and Francis.
Journal of Gerontological Social Work, vol 64, no 2, March 2021, pp 151-174.
The growing number of people aged 65 and above, combined with their greater reliance on care outside the family unit, has contributed to the rapid growth of older people residing in assisted living (AL) communities. Given the increased attention paid to service standards in older adults' housing models, this qualitative study was conducted in AL to generate residents' perspectives on service and meaning-in-life outcomes. Utilising the attributes of service quality through a transition theory lens, the data revealed empathy and responsiveness as most essential to the perceptions of service and meaning-in-life among residents. Theoretical results from this study suggest that linking current service theory to meaning-in-life outcomes would be of benefit to AL service standards research. Practical application of the research outcomes revealed how appropriate personalised attention provided in a timely manner to residents is critical to their wellbeing and to their successful transition to AL. (JL)
ISSN: 01634372
From : <https://doi.org/10.1080/01634372.2020.1830329>

INCOME AND PERSONAL FINANCE

- 265/75 Dynamics of financial hardship in the United States: health and retirement study 2006-2016; by Gillian L Marshall, Gulgun Bayaz-Ozturk, Eva Kahana (et al.): Taylor and Francis.
Journal of Gerontological Social Work, vol 65, no 3, April 2022, pp 241-251.
The purpose of this study was to examine the temporal trends and dynamics of financial hardship among older adults in the U.S. between 2006 and 2016 using the Health and Retirement Study. The study sample included 13,537 eligible person observations with a median age of 68 years. Financial hardship

included measures of difficulty paying bills, food insecurity, taking less medication due to cost and ongoing financial strain. Regression analyses were performed using a three-wave quadrennial model to estimate the prevalence of financial hardship over time, to explore temporal patterns and identify persistent hardship. Findings revealed that 51% of respondents who experienced food insecurity at one or more waves were transient. This pattern was similar to respondents who experienced ongoing financial strain (52% transient). Respondents who reported difficulty paying bills (68%) and reduced medications due to cost (62%) were also transient. Significant predictors across all four domains of financial hardship included age, years of education, marital status and self-rated health. Being African American was positively associated with reduced medication use and food insecurity. This study provides insight into the temporal dynamics of financial hardship in later life. It also highlights the contiguous, intermediate and transient nature of financial hardship among older adult populations. (JL)
ISSN: 01634372

From : <https://doi.org/10.1080/01634372.2021.1953662>

265/76 Financial outcomes of interventions designed to improve retirement savings: a systematic review; by Julie Birkenmaier, Youngmi Kim, Brandy Maynard.: Taylor and Francis.

Journal of Gerontological Social Work, vol 64, no 3, April-May 2021, pp 238-256.

Many Americans are struggling to save for retirement and may not be on track to have adequate savings. This systematic review focused on examining the effects of interventions that facilitated retirement savings through a financial capability approach, which combined financial education and financial access. Systematic review procedures were used to search for published and unpublished experimental studies in multiple databases and grey literature sources that met eligibility criteria. Four research projects published through May 2020 were eligible for the review. Results suggested that, thus far, there is no clear rigorous evidence that the interventions that use a financial capability approach to promote retirement savings improve individual financial behaviours or financial outcomes. Policy and practice implications are discussed. (JL)

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265/77 The Money Smart for Older Adults program: a qualitative study of the participants' financial well-being; by Kathy Lee, Weizhou Tang, Sarah Jones (et al.): Taylor and Francis.

Journal of Gerontological Social Work, vol 64, no 2, March 2021, pp 120-134.

Money Smart for Older Adults is a programme that is tailored to older adults to raise awareness of the risks of financial exploitation and to teach them how to plan and make informed financial decisions. The purpose of this study was to examine financial circumstances of older adults enrolled in the programme and to explore how it could better support their financial wellbeing. Individual, in-depth interviews were conducted with 29 older adults who attended the programme provided by a local agency in northern Texas. Three themes emerged when exploring financial circumstances of the participants: (1) victims of financial fraud scams, (2) struggles with money management, and (3) inability to make ends meet. The programme has been serving older adults, particularly ethnically diverse older adults and low income older adults who may not have access to financial education workshops or seminars provided by private financial institutions. The Programme was perceived as helpful among the participants because it raised awareness of the importance of their financial wellbeing and it also supported their financial decision making. (JL)

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From : <https://doi.org/10.1080/01634372.2020.1814477>

INFORMATION AND COMMUNICATION TECHNOLOGY

(See Also 265/44, 265/97)

265/78 Development of the 'SNS older adults measure' (SNS-OA) to examine social network site use in older adults; by Loveday Newman, Charlotte Stoner, Anne Corbett (et al.): Taylor and Francis.

Aging and Mental Health, vol 25, no 1, January 2021, pp 68-77.

Social Networking Sites (SNSs) may ameliorate loneliness in later life but no measure of SNS use for this population exists. This study described the development of the 'SNS Older Adults measure' (SNS-OA), to improve understanding of older adults' SNS use and its relationship to social wellbeing. The SNS-OA underwent initial development, including literature reviews and consultation with a target population, experts, piloting studies and evaluation of psychometric properties. The final measure comprised three 'motive' scales (using SNSs to maintain close ties, maintain and strengthen weaker ties and diversion), and two 'affect' scales (positive/negative). Whilst many items were weakly endorsed by participants, the measure demonstrated good reliability and some convergent validity, with some subscales correlating with a personality measure in hypothesised directions. No statistically significant correlations were observed between the measure and social wellbeing. Despite the measure's limitations, this research has enabled a better understanding of SNS use in older adults and has important implications for research in this area. Findings also suggest a complex relationship between social wellbeing and SNS use in later life. (JL)

ISSN: 13607863 From : <https://doi.org/10.1080/13607863.2019.1673700>

- 265/79 Digital inclusion of older adults during COVID-19: lessons from a case study of Older Adults Technology Services (OATS); by Joyce Weil, Thomas Kamber, Alexander Glazebrook (et al): Taylor and Francis.
Journal of Gerontological Social Work, vol 64, no 6, September 2021, pp 643-655.
Older adults' relationship to information and communications technology (ICT) is often discussed in terms of the digital divide or technology gap. Older adults aged 65 or above are seen as excluded or marginally represented in the digital sphere, even though data show their use of technology is increasing. Challenges in technology adoption and models for improving digital inclusion are both well-known, but the COVID pandemic and its general shift to digital life have created a critical need to increase digital inclusion of older people. A case study of Older Adults Technology Services (OATS) and the organisation's migration from in-person to virtual programming is used as an example of reframing the way the relationship of older adults to technology is seen in the field and in practice. Policy and programming implications of this new view of technology are discussed in the conclusion. (JL)
ISSN: 01634372
From : <https://doi.org/10.1080/01634372.2021.1919274>
- 265/80 Exploring the benefits of proactive participation among adults and older people by writing blogs; by Montserrat Celdran, Rodrigo Serrat, Feliciano Villar, Roger Montserrat.: Taylor and Francis.
Journal of Gerontological Social Work, vol 65, no 3, April 2022, pp 320-336.
The use of information and communication technologies (ICTs) for information seeking, social contact and leisure activities is increasing in adults and older people. However little is known about adults and older people who are already actively using ICTs to write a blog. The aim of this Spanish study was to describe the benefits that adults and older people gained from having a blog. 23 older adult bloggers aged between 60 and 83 years, mostly college graduates and retired, were interviewed. A thematic analysis identified four different benefits related to blogging: (1) a general sense of satisfaction from producing the blog; (2) relational benefits; (3) cognitive benefits; and (4) identity benefits. Results showed that adults and older people experienced a variety of benefits that broadened the distinction between personal and social benefits found in previous research. Blogging in later life challenges the traditional passive/consumer and online user experience view of adults and older people and seems to be a good example of proactive participation through websites. (JL)
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INTERGENERATIONAL ISSUES

(See Also 265/71)

- 265/81 "Give and receive": the impact of an intergenerational program on institutionalized children and older adults; by Maria Raquel Barbosa, Anabela Campinho, Graca Silva.: Taylor and Francis.
Journal of Intergenerational Relationships, vol 19, no 3, 2021, pp 283-304.
A mixed-method approach was used in this Portuguese study to describe the effects of a intergenerational programme on self-esteem, loneliness, depression and happiness of a sample of six institutionalised children and six institutionalised older people. This 1-year programme of 2-hour meetings held monthly each comprised three key parts: a warm-up in which each participant shared something about his/her past month; an activity suggested by a theme from reading an excerpt from Antoine de Saint-Exupery's 'The Little Prince'; and reflecting on the processes experiences together. Positive outcomes occurred in purpose, well-being and positive emotions, intergenerational sharing and community involvement. Difficulties found were mobility constraints, low emotional expression and alphabetisation (in older people), difficulty in establishing affective bonds (in children), also length and periodicity. The implications of the psychosocial impact of such programmes on the various aspects implicated in the intergenerational relationships are highlighted. (RH)
ISSN: 15350770 From : <https://doi.org/10.1080/15350770.2020.1742844>
- 265/82 Do demographics change the intergenerational borderline between working and retiring generations?: A cross-national study for OECD countries; by Filip Chybalski, Malgorzata Gumola.: Taylor and Francis.
Journal of Intergenerational Relationships, vol 19, no 2, 2021, pp 209-227.
This paper aims to use an effective retirement age as a proxy for the borderline between generations and verifies whether deteriorating demographics are a stimulating factor of quantitative relations between generations through retirement age policy.
Regression models for cross-sectional time series covering 20 OECD countries in the period 1971-2013 are employed. The results show that an increasing life expectancy, resulting in a growing ageing population, worsens the situation of the working generation as compared to the pensioners' generation. This creates a need to extend duration of working life through efficient retirement age policy and human resource management (HRM) strategies in multigenerational workplaces. This work was supported by the National Science Centre, Poland. (RH)
ISSN: 15350770 From : <https://doi.org/10.1080/15350770.2020.1738304>

- 265/83 Economic evaluation of intergenerational programs: suggested measures and design; by N Vecchio, T Comans, P Harris (et al.): Taylor and Francis.
Journal of Intergenerational Relationships, vol 19, no 4, 2021, pp 421-440.
There are aspects of intergenerational programmes which present challenges for evaluators' and broader measures and perspectives are needed, particularly for informing economic evaluations, This study aims to: (1) Identify impact measures suitable for an economic evaluation of a mixed generation programme; and (2) Design an economic evaluation that compares these programme impacts with current services. The suggested evaluation design includes perspectives from children, parents, adult care recipients, caregivers and service providers. Measures for inclusion were based on the literature and were selected using a set of criteria and stakeholder interviews. To inform economic evaluations of mixed generation programmes, the authors recommend a quasi-experimental design using measures of experience and/or satisfaction, quality of life and/or well-being, willingness to pay, burden of care and service use. The suggested economic evaluation measures and design will guide future programmes of mixed generations in the pursuit of cost-effective and sustainable service options in this rapidly evolving service environment. (RH)
ISSN: 15350770
From : <https://doi.org/10.1080/15350770.2020.1810194>
- 265/84 Exploring the role of language and goal attainment in intergenerational gameplay; by Jeremy R H Sng, Younbo Jung.: Taylor and Francis.
Journal of Intergenerational Relationships, vol 19, no 3, 2021, pp 325-343.
As the world population ages, interactions between youth and older adults in everyday life become more frequent, yet scholars are noting language barriers between different generations across the world. Drawing from social identity theory, a longitudinal field experiment was conducted in Singapore with 50 intergenerational pairs over 3 weeks to investigate effects of language (common vs no common language) and goal attainment (successful vs unsuccessful) on interaction outcomes. Results showed that digital gameplay reduced intergroup anxiety and improved intergenerational attitudes, and introduction of common goals circumvented language barriers. Theoretical contributions and practical implications of using technology to improve intergenerational perceptions are discussed. (RH)
ISSN: 15350770
From : <https://doi.org/10.1080/15350770.2020.1763228>
- 265/85 Frequency of contact and explanations for increased contact between grandchildren and their grandparents during the COVID-10 pandemic; by Meghan McDarby, Catherine H Ju, Brian D Carpenter.: Taylor and Francis.
Journal of Intergenerational Relationships, vol 19, no 2, 2021, pp 163-178.
This study examined grandparent-grandchild contact during the COVID-19 pandemic, using principles of Intergenerational Solidarity Theory as a framework. In April 2020, the authors recruited 175 undergraduate students with at least one living grandparent from across the United States, of whom 165 completed an online survey about their contact with grandparents before and during the pandemic. Participants also provided ratings of affectual solidarity toward grandparents and grandparents' physical and mental health. A subsample of 31 participants explained reasons for increased telephone contact with grandparents. Median frequency of grandchild-initiated contact with grandparents increased marginally during the pandemic: higher ratings of affectual solidarity toward grandparents were significantly associated with increases in frequency of contact. Ratings of grandparents' physical and mental health were not significantly associated with changes in frequency of contact from before the pandemic to during the pandemic. The most common explanation for increased contact with grandparents during the pandemic reported by study participants was concern about COVID-19. Findings support Intergenerational Solidarity Theory and underscore its interaction with historical moments, including the COVID-19 pandemic. (RH)
ISSN: 15350770
From : <https://doi.org/10.1080/15350770.2020.1852995>
- 265/86 Intergenerational learning in the family as an informal learning process: a review of the literature; by Abigail Stephan.: Taylor and Francis.
Journal of Intergenerational Relationships, vol 19, no 4, 2021, pp 441-458.
As an informal learning process, intergenerational learning in the family acts as a mechanism for the reciprocal transmission of knowledge between young people and adults. This scoping review synthesises recent research relevant to intergenerational learning in the family between both adjacent and non-adjacent generations. The review's aim was to gain a deeper understanding of how familial interactions align with three core principles of intergenerational learning experiences: learning about one's own generation and other generations; reciprocal and equal exchanges; and shared commitments. The review revealed a fourth category, relationship building, which is unique to intergenerational experiences within the family context. Additional results are discussed, and recommendations for future research around familial intergenerational learning are provided. (RH)
ISSN: 15350770 From : <https://doi.org/10.1080/15350770.2020.1817830>

- 265/87 Intergenerational living during the pandemic; by Rachel Stevenson, Jean Atkinson.: Emerald. Quality in Ageing and Older Adults, vol 23, no 2, 2022, pp 38-41.
This is an opinion piece provided by Rachel, 31, and her grandmother, Jean, 97, who have been living together for two and a half years, since Rachel became unwell with myalgic encephalomyelitis (ME), also known as chronic fatigue syndrome (CFS). Each author shares their experiences of intergenerational living through the pandemic. Their findings outline what each of them has learned about intergenerational living during the COVID pandemic and mutual support, also what has surprised them, including how it has improved quality of life for both of them. This is an unusual intergenerational first-person account of intergenerational mutually supportive living during the pandemic, with insider insights. (RH)
ISSN: 14717794
From : <https://doi.org/10.1108/QAOA-05-2022-0029>
- 265/88 Mothers' functional limitations and relationship quality with adult children: exploring the moderating roles of race and gender; by Catherine Stepniak, J Jill Sutor, Megan Gilligan.: Sage. Research on Aging, vol 44, nos 5-6, May-June 2022, pp 414-425.
Theory and research on intergenerational relations emphasize the salient role that mothers and their adult children play in one another's lives. However, little is known about how mothers' health may shape mother-child relationship quality in later-life. The authors used data from the us Within Family Differences Study (WEDS) to explore how mothers' functional limitations affect multiple dimensions of mother-child relationship quality, as reported by mothers and their offspring, with particular emphasis on whether race, child's gender, or generational position moderated these associations. Although mothers' reports of relationship quality were not predicted by their functional limitations, adult children reported higher ambivalence when they perceived their mothers had limitations. Further, adult children in White families reported higher ambivalence when mothers had limitations than did those in Black families. This study highlights the importance of considering the roles of structural factors in shaping the conditions under which health limitations affect mother-child ties. (RH)
ISSN: 01640275
From : <https://doi.org/10.1177/01640275211044834>
- 265/89 New program in the field: enhancing wellness in older adults through intergenerational community-engaged learning programs in long-term care settings; by Shelly Beaver, Kelly Munly, Sherri McGregor.: Taylor and Francis. Journal of Intergenerational Relationships, vol 19, no 2, 2021, pp 272-279.
The authors offer intergenerational professionals a unique approach to enhancing the physical, social and emotional health of older adults living in nursing homes. The authors present a flexible framework for the adoption, adaptation and facilitation of a university-driven intergenerational community-engaged learning project to engage residents in large group fitness activities. Strategies for development and implementation of such a project are discussed using the Penn State Altoona and Old Dominion University Senior Wellness program as a flexible model that promises reciprocal benefits for older people and professionals-in-training. (RH)
ISSN: 15350770
From : <https://doi.org/10.1080/15350770.2021.1908042>
- 265/90 Patterns and processes of intergenerational estrangement: a qualitative study of mother-adult child relationships across time; by Megan Gilligan, J Jill Sutor, Karl Pillemer.: Sage. Research on Aging, vol 44, nos 5-6, May-June 2022, pp 436-447.
Drawing from the life course perspective, the authors explored patterns of estrangement between mothers and their adult children across time, and the processes through which these ties remained estranged, or moved in or out of estrangement. A prospective design was used in which data were collected in face-to-face semi-structured interviews with 61 older mothers about their relationships with their 274 adult children at two time points 7 years apart. The patterns of stability and change in intergenerational estrangement were examined, and movement in and out of estrangement across time was identified. Qualitative analyses of the processes underlying estrangement revealed that movement in and out of estrangement reflected nuanced changes in contact and closeness over time, rather than abrupt changes resulting from recent transitions in either mothers' or children's lives. Taken together, these findings illustrate the complexity of patterns and processes of intergenerational estrangement in later-life families. (RH)
ISSN: 01640275
From : <https://doi.org/10.1177/01640275211036966>

INTERNATIONAL AND COMPARATIVE

(See Also 265/27, 265/28, 265/29, 265/136)

- 265/91 "This life is normal for me": a study of everyday life experiences and coping strategies of live-in carers in Taiwan; by Mai Camilla Munkejord, Tove M Ness, I-An W S Gao.: Taylor and Francis. Journal of Gerontological Social Work, vol 64, no 5, July-August 2021, pp 533-546. Recruiting migrant live-in carers has become the main strategy to address the rapid increase in the number of older people with intensive care needs in many parts of the developed world. This is also the case in northern Taiwan where this study took place. 13 live-in carers from Indonesia and the Philippines were interviewed during 2019 in which their two main coping strategies were discussed as follows: a) "accepting destiny", which referred to carers accepting their life and viewing their role as a live-in carer as a job that allowed them to meet their parents' expectations of financial support; and b) "connecting to significant others", which was the most important way carers found the motivation to keep going. However despite their coping strategies, working as a live-in carer was experienced as a challenging and precarious lifestyle. In conclusion the authors discuss how professional social workers in collaboration with decision-makers and non-governmental organisations in Taiwan could contribute to fostering a system that would support live-in carers in ways that allow them and the older people they care for to thrive. (JL)
ISSN: 01634372 From : <https://doi.org/10.1080/01634372.2021.1917032>
- 265/92 Believers, Islamic Brotherhood and mosque-based emotional and informal social support system among Muslims in Pakistan; by Zain Ul Abideen, Farrukh Abbas.: Taylor and Francis. Journal of Religion, Spirituality and Aging, vol 33, no 1, 2021, pp 54-85. Many studies have been conducted on congregational-based social support systems, however studies among Muslims on mosque-based social support networks remain unexplored. The purpose of this study was to understand and empirically examine religious behaviour-based and demographic-related correlates of mosque-based social support among 240 Muslim believers in Pakistan. The study was based on dimensions that included providing and receiving emotional support, anticipating emotional support, and non-positive interactions with other believers at the local mosque. Results indicated that one in every five respondents received higher levels of emotional support from their co-religionists, whereas half of all respondents received moderate levels of emotional support. Involvement in congregations and mosque attendance indicated positive relationships with receiving, providing, and anticipating social support from other believer congregants. Thus, co-religionists who were actively involved in their congregations received, provided and anticipated higher levels of emotional support from other believers as compared to respondents not actively involved in such congregations and who did not attend the mosque frequently. Female believers were provided with and anticipated receiving higher levels of support from other believers than did male believers. Co-religionists who attended mosques frequently were expected to have high levels of emotional support compared to those who attended mosques less frequently. Respondents with high school or less education received more emotional support than their counterparts with higher education. However believers with higher qualifications reported fewer negative interactions with other believers than those having lower education levels. Overall the findings showed that Muslim believers do care, provide support and assistance, cooperate and help other believers, instead of criticising them. Such selflessness results in creating and strengthening social ties that keep co-religionists connected with each other backed by the bond of Islamic brotherhood, in which a believer provides support to others, considering it a religious obligation. (JL)
ISSN: 15528030 From : <https://doi.org/10.1080/15528030.2020.1827480>
- 265/93 The gender gap in reaching old age in the Russian Federation: a regional approach; by Stuart Gietel-Basten, Vladimir Mau, Sergei Scherbov (et al.): Taylor and Francis. Journal of Aging and Social Policy, vol 33, no 6, November-December 2021, pp 600-610. Reaching older age and longevity in later life is determined by health and mortality across the life course. In the case of Russia, the history of high male mortality skews the interaction between population ageing and gender. These differentials can be viewed through a spatial lens in order to both understand their causes, and to better determine policy responses, especially in a federal political system. The authors use alternative conceptualisations of the "boundary to old age" and data for 2017 to produce the first estimates of the gender gap in reaching "old age" for all Russian Federal Subjects. They identify some regional differentiations, but uncertainties around the consistency of registration as well as overall heterogeneity mean that clear-cut regional patterns are hard to ascribe. Their analysis shows the highly significant gender gap at the age of "becoming old" in Russia when disaggregated by region. When looking at the regional level and comparing to other countries, the range of male "boundaries to old age" is almost as great as the global range. The researchers argue that when applying alternative "old-age thresholds", this gap represents a more accurate representation of interaction between space, gender and mortality in Russia. They conclude with policy and research priorities to better understand and ameliorate the drivers of these spatial and gendered inequalities. (RH)
ISSN: 08959420 From : <https://doi.org/10.1080/08959420.2020.1777823>

LGBT

- 265/94 Senior centers and LGBTQ participants: engaging older adults virtually in a pandemic; by Suzanne Marmo, Manoj Pardasani, David Vincent.: Taylor and Francis.
Journal of Gerontological Social Work, vol 64, no 8, December 2021, pp 864-884.
Upon the outbreak of Covid-19, recommendations to cease all non-essential in-person services were mandated across the United States to prevent transmission to non-infected individuals. As a result, approximately 96% of all senior centers in the United States were closed to in-person programming. Senior centers have had a long history of engaging older adults, maintaining community connections, enhancing social support and reducing social isolation. SAGE, the first publicly funded senior center for LGBT older adults in the US, serves a traditionally underserved population with a vast array of services and programmes. This exploratory cross-sectional study utilised an online survey to evaluate the experiences of 113 SAGE members after the Covid-19 pandemic closed their senior center. Participants reported a relatively easy adaptation to technology, steady participation in programmes and services, satisfaction with virtual senior center programming and a stable sense of engagement with their peers. Higher levels of engagement with senior center programmes was associated with stronger feelings of social support. Additionally stronger perceptions of social support and participation in exercise and fitness programming were associated with higher life satisfaction and lower depression and anxiety. Implications and recommendations for other gerontological service providers are offered. (JL)
ISSN: 01634372
From : <https://doi.org/10.1080/01634372.2021.1937431>

- 265/95 Single LBQ women of the baby boom planning for later life; by Erin S Lavender-Stott.: Taylor and Francis.
Journal of Women and Aging, vol 33, no 2, March-April 2021, pp 201-213.
The aim of this study was to understand how sexual minority women of the baby boom cohort viewed their social connections and planned for their later years. Framed by feminist and life course perspectives, this study used semi-structured interviews and constructivist grounded theory. Thirteen single sexual minority baby boom women from across the United States. were interviewed. The women were active in their communities and viewed their social connections with local community, family of origin and of choice. The women had formal and informal plans for their future, anticipating the possibilities of ageing-related issues related to housing and support. (RH)
ISSN: 08952841
From : <https://doi.org/10.1080/08952841.2020.1806690>

LIVING ALONE

(See 265/96)

LONELINESS AND SOCIAL ISOLATION

(See Also 265/13, 265/32, 265/54, 265/78)

- 265/96 Change in loneliness experienced by older men and women living alone and with others at the onset of the COVID-19 pandemic; by Maureen Wilson-Genderson, Alison R Heid, Francine Cartwright (et al): Sage.
Research on Aging, vol 44, nos 5-6, May-June 2022, pp 369-381.
Building on theory suggesting that loneliness is distinct from living arrangements, social isolation and perceived social support, the authors examined change in loneliness for older people at the onset of the COVID-19 pandemic. This multilevel mixed-effects analysis uses data collected between 2006 and 2020 from the state-wide panel of older adults from New Jersey - ORANJ BOWL (Ongoing Research on Aging in New Jersey: Bettering Opportunities for Wellness in Life). The authors found higher levels of loneliness among people living alone, people more socially isolated, and people with less perceived support. Gender affected changes in loneliness, controlling for social isolation, perceived support, living arrangements, age, education, income, health and marital status. Women, whether living alone or with others, experienced increases in loneliness; women living alone reported the greatest increase in loneliness. Men living alone reported high levels of loneliness prior to the pandemic, but only a slight increase over time. These analyses, which demonstrate that loneliness changed at the onset of the pandemic as a function of gender and living arrangement identify older people most likely to benefit from intervention. (RH)
ISSN: 01640275
From : <https://journals.sagepub.com/doi/pdf/10.1177/01640275211026649>

- 265/97 Decreasing loneliness and social disconnectedness among community-dwelling older adults: the potential of information and communication technologies and ride-hailing services; by Craig A Talmage, Richard C Knopf, Teresa Wu (et al.): Taylor and Francis.
Activities, Adaptation and Aging, vol 45, no 2, April-June 2021, pp 89-117.
This study explores self-reports of 241 older Americans (aged 63-95) regarding loneliness and social disconnectedness, and the potential for information and communication technologies (ICT) and ride-hailing services to mitigate these phenomena. The samples are drawn from four retirement communities in Maricopa County, Arizona. Lonelier older adults and older adults desiring greater social connections with friends, family and outsiders appear to use ICT less and might benefit from ride-hailing services more than their less lonely and more socially connected counterparts. These findings are nuanced and depend on ICT device, type of ride-hailing service and purpose of use. While desires for ride-hailing services were generally low, these services show promise in alleviating loneliness and increasing social connectedness, especially as older adults prepare to cease driving. Advice for implementing interventions and strategies to decrease the loneliness and increase social connectedness of community-dwelling older adults is elucidated. (RH)
ISSN: 01924788
From : <https://doi.org/10.1080/01924788.2020.1724584>
- 265/98 Loneliness during the COVID-19 pandemic; by Lena Dahlberg.: Taylor and Francis.
Aging and Mental Health, vol 25, no 7, July 2021, pp 1161-1164.
Responses to the COVID-19 pandemic in terms of social distancing risk collateral damage such as increased loneliness. Older adults have been identified as being at higher risk of poor outcomes if infected and in many countries have been subjected to greater restrictions on physical contacts with others. Most research so far points towards an increase in loneliness during the pandemic. However there has been a lack of prospective studies based on representative samples of older adults with the oldest old, older adults with low or no Internet usage and those in poor health currently underrepresented. Despite the significance of cultural norms for individuals' standards for social relations and thus the experience of loneliness, there has been a lack of comparative research on loneliness in older adults during the pandemic. Reviews have found little evidence for what interventions and what elements of interventions are effective in reducing loneliness. There is potential for social relations to be maintained via technology-based solutions although there is a risk of excluding older adults with limited resources who are both least likely to use technology and most vulnerable to loneliness. Furthermore remote social contacts cannot fully compensate for the loss of physical contacts. Where stay-at-home orders are not imposed, supporting neighbourliness and the community use of accessible open spaces are other options. Finally policy responses to the pandemic need to be more nuanced and non-ageist in order to avoid unnecessary increases in loneliness in older adults. (JL)
ISSN: 13607863 From : <https://doi.org/10.1080/13607863.2021.1875195>
- 265/99 Managing loneliness: a qualitative study of older people's views; by K Kharicha, J Manthorpe, S Iliffe (et al.): Taylor and Francis.
Aging and Mental Health, vol 25, no 7, July 2021, pp 1206-1213.
Engaging with older people who self-identify as lonely may help professionals in mental health and other services understand how they deal with loneliness. The evidence base for effective interventions to address loneliness is inconclusive. This study aimed to explore how lonely older people in England manage their experiences of loneliness. 28 community-dwelling older people identifying as lonely, based on responses to two loneliness measures (self-report and a standardised instrument), participated in in-depth interviews between 2013 and 2014. Of these, 15 lived alone. Thematic analysis of transcribed interviews was conducted by a multidisciplinary team including older people. Participants drew on a range of strategies to ameliorate their distress which had been developed over their lives and shaped according to individual coping styles and contexts. Strategies included physical engagement with the world beyond their home, using technologies, planning, and engagement with purpose in an 'outside world', and acceptance, endurance, revealing and hiding, positive attitude and motivation, and distraction within an 'inside world'. Strategies of interests and hobbies, comparative thinking, religion and spirituality and use of alcohol straddled both the inside and outside worlds. Participants conveyed a personal responsibility for managing feelings of loneliness rather than relying on others. This study included the experiences of those living with loneliness whilst also living with other people. When developing policy and practice responses to loneliness it is important to listen attentively to the views of those who may not be engaging with services designed for 'the lonely' and to consider their own strategies for managing it. (JL)
ISSN: 13607863 From : <https://doi.org/10.1080/13607863.2020.1729337>
- 265/100 The role of solitary activity in moderating the association between social isolation and perceived loneliness among U.S. older adults; by Ke Li, Fengyan Tang.: Taylor and Francis.
Journal of Gerontological Social Work, vol 65, no 3, April 2022, pp 252-270.
Social isolation has been recognised as a critical public health problem. As the most vulnerable population, older adults are disproportionately affected by social isolation during the COVID-19 pandemic. The purposes of this study were to examine the association between social isolation and

loneliness among U.S. older adults and to explore the moderating effect of solitary activity by using data from the Health and Retirement Study (HRS). Social isolation was measured by six indicators, including marital status, living arrangement, social participation in any clubs or social organisations, and the frequency of social contact with children, family members and friends. Loneliness was assessed by eleven questions derived from the UCLA Loneliness Scale. Solitary activity included 11 types of activities that respondents could perform alone with limited or no social interaction. Results from the multivariate regression analyses indicated that unmarried status and lower frequency of social contact were associated with more perceived loneliness. Solitary activity significantly moderated the negative effects of the low frequency of social contact with family members on loneliness. Study findings implicate that social work programmes and interventions can aim to expand social networks and provide more opportunities for solitary activities, particularly for isolated older adults. (JL)

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From : <https://doi.org/10.1080/01634372.2021.1958115>

LONG TERM CARE

(See Also 265/28, 265/32)

- 265/101 Factors influencing the cost of care and admission to long-term care for people with dementia in Ireland; by Sharon Walsh, Maria Pertl, Paddy Gillespie (et al).: Taylor and Francis. *Aging and Mental Health*, vol 25, no 3, March 2021, pp 512-520.

The aim of this study was to explore factors associated with the cost of care and admission to long-term care (LTC) for people with dementia living at home in Ireland. Data on formal and informal resource use for people with dementia and their LTC admission were obtained from a national study of spousal dementia caregivers. Functional status was measured using the Bristol Activities of Daily Living Scale, while behavioural and psychiatric symptoms were evaluated using the Neuropsychiatric Inventory. Multivariable regression analysis was used to model costs and the predictors of LTC admission. Physical and cognitive symptoms were significantly associated with costs. Severely impaired functional ability was associated with a €2,308 increase in mean total 30-day monthly costs. Psychosis was associated with a €335 increase in primary and community 30-day monthly care costs. These factors also made it more likely that a person with dementia would be admitted to LTC. Having an older caregiver also increased the risk of admission to LTC while living in a rural area and having a female caregiver reduced the likelihood of admission. In conclusion, dependency matters for the cost of care. Physical and cognitive symptoms, caregiver age and gender, and geographic location are all significant predictors of admission to LTC. (JL) ISSN: 13607863 From : <https://doi.org/10.1080/13607863.2019.1699901>

- 265/102 How do social workers working in long-term care understand their roles?: using British Columbia, Canada as an example; by Karen Lok Yi Wong.: Taylor and Francis.

Journal of Gerontological Social Work, vol 64, no 5, July-August 2021, pp 452-470.

A common problem faced by social workers working in long term care is that they are not given the opportunity to tell how they understand their roles and thus their roles are neither understood nor recognised by other professionals. There is a need for social workers to tell how they understand their roles so that these can be better understood and recognised. A research study was conducted in the province of British Columbia in Canada to explore how social workers working in long-term care understand their roles. 14 semi-structured interviews were conducted. Five themes were identified, including advocating for the most vulnerable, humanising long term care, balancing between self-determination and safety, dancing with the systems and facilitating collaboration. The results reiterated but also supplemented the existing literature. This research study also proposes future research studies on the roles of social workers working in long term care. (JL)

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LONGEVITY

(See 265/93)

MENTAL HEALTH

(See Also 265/21, 265/36, 265/47, 265/57, 265/67)

- 265/103 Can mild cognitive impairment with depression be improved merely by exercises of recall memories accompanying everyday conversation?: A longitudinal study 2016-2019; by Chang-Hoon Gong, Shinichi Sato.: Emerald.

Quality in Ageing and Older Adults, vol 23, no 1, 2022, pp 26-35.

As the number of older people increases around the world, the number with with diseases associated with older age (including dementia) is increasing rapidly. Mild cognitive impairment (MCI), a pre-stage to dementia, is a critical treatment time to slow disease progression. However, there is currently no appropriate medication. Furthermore, MCI patients with depression are more difficult to treat. In this

3-year Japanese study, the authors sought to identify a simple cognitive intervention method to use with older people living alone who suffered from MCI and depression, and thereby demonstrate the intervention's effectiveness. Cognitive interventions were conducted for memory retrieval and steadily stimulated the brain by performing tasks to solve problems during daily conversations. The intervention group (n=52) showed improved Mini-Mental State Examination (MMSE) and Montreal Cognitive Assessment (MoCA) scores on the domains of cognitive function and also instrumental activities of daily living (IADLs) in the domain of motion when compared to the non-intervention group (n=52). Moreover, significant improvements in 15-item Geriatric Depression Scale (GDS-15) and quality of life scales enabled the patients to maintain stable living compared to before the intervention. In addition, the intervention group showed a change in patterns that allowed them to voluntarily devote time to going out at the end of the study. This study was originally planned to compare the rates of transmission from MCI to dementia by tracking over five years (2016-2021). However, due to the impact of COVID-19, which began to spread around the world in 2020, further face-to-face visits and cognitive intervention became impossible. Thus, only half of the data in the existing plans were collected. Although it is difficult to present accurate results for the rate of transmission from MCI to dementia, the tendency was confirmed, indicating sufficient implications as an intervention. (RH)

ISSN: 14717794

From : <https://doi.org/10.1108/QAOA-09-2021-0069>

265/104 COVID-19 worries and mental health: the moderating effect of age; by Jenna M Wilson, Jerin Lee, Natalie J Shook.: Taylor and Francis.

Aging and Mental Health, vol 25, no 7, July 2021, pp 1289-1296.

Older age (60+ years) increases the risk of contracting and dying from COVID-19, which might suggest worse mental health for those in this age range during the pandemic. Indeed greater worry about COVID-19 is associated with poorer mental health. However older age is generally associated with better emotional wellbeing, despite increased likelihood of negative events (e.g. death of a spouse) with age. This study examined whether age moderated the relation between COVID-19 worries and mental health. A national sample of 848 adults aged 18 between 18 and 85 years across the USA completed an online survey between March and April 2020. The survey assessed anxiety, depression, general concern about COVID-19, perceived likelihood of contracting COVID-19, social distancing, self-quarantining, current mood, health and demographics. Older age was associated with better mental health (i.e. lower levels of anxiety and depression). Greater perceived likelihood of contracting COVID-19 was related to higher anxiety. However this effect was moderated by age. At younger ages (18-49 years) the positive association between perceived likelihood of contracting COVID-19 and anxiety was significant but the association was not significant at older ages (50+ years). Older age may buffer against the negative impact of the COVID-19 pandemic on mental health. More research is necessary to understand the potential protective nature of age during the pandemic as well as the recovery period. (JL)

ISSN: 13607863

From : <https://doi.org/10.1080/13607863.2020.1856778>

265/105 Does playing a musical instrument reduce the incidence of cognitive impairment and dementia?: A systematic review and meta-analysis; by Sebastian Walsh, Robert Causer, Carol Brayne.: Taylor and Francis.

Aging and Mental Health, vol 25, no 4, April 2021, pp 593-601.

High levels of life course intellectually-stimulating activity are hypothesised to produce a cognitive reserve that mitigates against overt cognitive impairment in the face of neuropathology. Leisure-time musical instrument playing could be a viable source of that stimulation, but to date no systematic review has been undertaken to investigate the effect of musical instrument playing on the incidence of cognitive impairment and dementia. This was a systematic review and meta-analysis including any study with musical instrument playing as the exposure, and cognitive impairment and/or dementia as the outcome. 1,211 unduplicated articles were identified from literature searching, of which three articles were included: two cohort studies and one twin study. All studies were of good methodological quality, and reported large protective effects of musical instrument playing. The twin study reported that musicians were 64% less likely to develop mild cognitive impairment or dementia after additionally adjusting for sex, education and physical activity. A meta-analysis of the cohort studies found a 59% reduction in the risk of developing dementia within the study follow up. The evidence base was limited by size, small sample sizes and the risk of reverse causality. The three identified studies that investigated the specific relationship of musical instrument playing and subsequent incidence of cognitive impairment and dementia all reported a large protective association. The results are encouraging but should be interpreted with caution. Larger, more focused studies are required to further explore this association with a particular need to consider the cumulative lifetime quantity of music playing. (JL)

ISSN: 13607863

From : <https://doi.org/10.1080/13607863.2019.1699019>

- 265/106 Group singing improves quality of life for people with Parkinson's: an international study; by J Yoon Irons, Grenville Hancox, Trish Vella-Burrows (et al.): Taylor and Francis. *Aging and Mental Health*, vol 25, no 4, April 2021, pp 650-656. Group singing has been reported to enhance quality of life (QoL) and mental health in older people. This paper explored whether there are differences in the effects of group singing intervention on people with Parkinson's (PwPs) in Australia, UK and South Korea. The study included PwPs (N = 95; mean age = 70.26; male 45%) who participated in a standardised six-month weekly group singing programme. Parkinson's health-related QoL measure (PDQ39) and mental health assessment (DASS) were administered at baseline and follow-up. ANOVAs (Analyses of Variance) were performed with significance set as p .05. The ANOVAs revealed main effects of Time on the Stigma and Social Support subscales of PDQ39; both showed a small but significant improvement over time. However the social support reduction was moderated by country. Social support was improved only in South Korean participants. The reduction in stigma was greater than previously reported minimal clinically important differences, as was the social support reduction in South Korean participants. In terms of mental health, ANOVAs revealed that the scores of Anxiety and Stress domains of DASS significantly decreased from pre-test to post-test with small effect sizes. This first international singing study with PwPs demonstrated that group singing can reduce stigma, anxiety and stress and enhance social support in older adults living with Parkinson's. The findings are encouraging and warrant further research using more robust designs. (JL)
ISSN: 13607863 From : <https://doi.org/10.1080/13607863.2020.1720599>
- 265/107 Impaired financial decision-making as an early indicator of cognitive decline: a commentary; by Ashley Taeckens-Seabaugh, Jessica King McLaughlin, Jennifer C Greenfield (et al.): Taylor and Francis. *Journal of Gerontological Social Work*, vol 64, no 4, June 2021, pp 340-347. Cognitive impairment and dementia are public health concerns with significant financial implications for both individual households and public insurance systems. Though research has refined diagnostic tools for cognitive impairment and dementia diseases, little attention has focused on how cognitive decline may impact financial security. Research indicates that financial decision making may be one of the first cognitive abilities impacted by cognitive decline, putting individuals at risk of financial fraud and exploitation. However financial decision making is not directly assessed in cognitive screenings. Identification of prodromal decline in financial decision making may help individuals to preserve their financial security and reduce the likelihood of relying on public benefits. This commentary outlines the need for social workers and researchers to better understand the relationship between cognitive health, financial decision making and financial security in later life to formulate culturally responsive strategies that can uphold and benefit financial statuses, especially for minority communities. (JL)
ISSN: 01634372 From : <https://doi.org/10.1080/01634372.2021.1894522>
- 265/108 Mediators of the socioeconomic status and life satisfaction relationship in older adults: a multi-country structural equation modeling approach; by Darío Moreno-Agostino, Javier de la Fuente, Matilde Leonardi (et al.): Taylor and Francis. *Aging and Mental Health*, vol 25, no 3, March 2021, pp 585-592. Socioeconomic status (SES) relates to life satisfaction in old age although the underlying mechanisms remain unclear. Health and subjective social status have shown to be related to both SES and life satisfaction. This study aimed to test the mediating role of health and subjective social status in old age, and to analyse whether these potential mediations varied among three European countries with different socioeconomic characteristics and welfare regimes. The sample comprised 7,272 participants aged 50+ from COURAGE in Europe study, a household survey carried out in 2011_2012 on nationally representative samples from Finland, Poland and Spain. A Multiple Indicators, Multiple Causes approach based on multi-group Structural Equation Modelling was implemented to test mediating effects. The structural invariance model showed an adequate fit. Health and subjective social status invariantly mediated the relationship between SES and life satisfaction across countries with different socioeconomic characteristics and welfare regimes. SES direct effects explained 0.83_0.85% of life satisfaction variance, whilst indirect effects explained 2.29_2.36% of life satisfaction variance via health, 3.30_3.42% via subjective social status and 0.06% via both mediating variables. Policies aimed at increasing the SES of older adults may entail multiple benefits, resulting in better subjective social status, health and life satisfaction outcomes, thus fostering healthy ageing of the population. (JL)
ISSN: 13607863 From : <https://doi.org/10.1080/13607863.2019.1698513>
- 265/109 The scales of psychological well-being - a validation, usability and test-retest study among community-dwelling older people in Finland; by Milla Saajanaho, Katja Kokko, Katja Pynnonen (et al.): Taylor and Francis. *Aging and Mental Health*, vol 25, no 5, May 2021, pp 913-922. The aim of this study was to validate the Finnish version of the 42-item Scales of Psychological Well-Being among community-dwelling older people. The study also examined the test-retest reliability and usability, i.e. user experience of the scales in this age group. The 42-item version of the SPWB was administered as part of a face-to-face interview among 968 men and women aged 75, 80 or 85 years. The subsample for test-retest analyses comprised 42 participants, who in addition to 11 interviewers also

answered questions concerning the usability of the scales. Exploratory and confirmatory factor analyses, Cronbach's alpha coefficients, Pearson and intra-class correlation coefficients, and Kendal's Tau B were used in the analyses. The factor analyses did not support the theory-based six-factor structure of the scales. The Cronbach's alphas showed high internal consistency reliability for the total scale, but modest for the subscales. The intercorrelations between the subscales were moderate. The total score and the subscale scores of the SPWB correlated positively with quality of life and life satisfaction, and negatively with depressive symptoms. The interviewers reported that while most of the participants responded to the scales without marked difficulties, others could only answer after clarifications of some statements. The reliability of the 42-item version of the SPWB was modest. The factor structure was inconsistent among the three age groups studied, but the scales were feasible to use. The current results call for further methodological consideration to optimise assessment of eudaimonic wellbeing in old age. (JL)

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From : <https://doi.org/10.1080/13607863.2020.1725801>

MENTAL HEALTH CARE

- 265/110 Characteristics and effectiveness of cognitive behavioral therapy for older adults living in residential care: a systematic review; by Phoebe Chan, Sunil Bhar, Tanya E Davison (et al.): Taylor and Francis. *Aging and Mental Health*, vol 25, no 2, February 2021, pp 187-205.
- Cognitive behaviour therapy (CBT) for depression and anxiety for older adults living in residential aged care facilities (RACFs) needs to accommodate the care needs of residents and the circumstances of RACFs. This systematic review examined the delivery and content characteristics of these interventions in relation to participant satisfaction, staff appraisal, uptake rate, attrition rate and treatment effectiveness. Such a review could provide important information for the development of future CBT-based interventions. Studies that examined the application of CBT for depression or anxiety in RACFs were identified by systematically searching a number of relevant databases. Reference lists of all included studies were examined and citation searches on the Web of Science were conducted. Two independent reviewers were involved in screening articles and in extracting data and assessing methodological quality of the selected studies. Across the 18 studies included in this review the most common therapeutic strategy was pleasant activities scheduling. Studies varied on treatment duration (2-24 weeks), number of sessions (6-24) and length of sessions (10-120 min). Residents and staff members were satisfied with the CBT interventions. The average uptake rate was 72.9%. The average attrition rate was 19.9%. Statistically significant results were reported in eight of the 12 randomised controlled trials (RCTs). In these eight RCTs, CBT was characterised by psychoeducation, behavioural activation and problem solving techniques. Furthermore the therapists in six of these studies had training in psychology. BT interventions for depression and anxiety are acceptable to RACF residents and judged positively by staff members. Effective studies differed from non-effective studies on content and training characteristics but not on other delivery features. (JL)

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From : <https://doi.org/10.1080/13607863.2019.1686457>

MENTAL ILLNESS

- 265/111 Serious mental illness in nursing homes: roles and perceived competence of social services directors; by Denise Gammonley, Xiaochuan Wang, Kelsey Simons (et al.): Taylor and Francis. *Journal of Gerontological Social Work*, vol 64, no 7, October-November 2021, pp 721-739.
- Providing nursing home psychosocial care to people with serious mental illness (SMI) requires an understanding of comorbidities and attention to resident rights, needs and preferences. This quantitative study reported how 924 social service directors (SSDs) taking part in the National Nursing Home Social Service Director survey identified their roles and competence, stratified by the percentage of residents with SMI. More than 70% of SSDs, across all categories of homes, reported that the social services department was 'always' involved in conducting depression screening, biopsychosocial assessments and Preadmission Screening Resident Review (PASRR) planning. SSDs in homes with lower concentrations of residents with SMI reported less involvement in anxiety screening. Those employed in homes with higher concentrations of residents with SMI reported lower involvement conducting staff interventions for resident aggression or making referrals. More than one-fifth of SSDs lacked confidence in their ability to compare/contrast dementia, depression and delirium or to develop care plans for residents with SMI. SSDs' perceived competence in developing care plans for residents with SMI was associated with education and involvement in care planning. About one-quarter of social services directors reported not being prepared to train a colleague on how to develop care plans for residents with SMI. Training in SMI could enhance psychosocial care. (JL)

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From : <https://doi.org/10.1080/01634372.2021.1912241>

NEIGHBOURHOODS AND COMMUNITIES

(See Also 265/59)

- 265/112 A critical approach to aging in place: a case study comparison of personal and professional perspectives from the Minneapolis metropolitan area; by Jessica M Finlay, Hayley R McCarron, Tamara L Statz, Rachel Zmora.: Taylor and Francis.
Journal of Aging and Social Policy, vol 33, no 3, May-June 2021, pp 222-246.
The concept of ageing in place attracts older adults, scholars, policymakers and service providers alike. Interviews with 125 independently-living men and women (mean age 71 years) and ten policymakers and/or community service providers queried for elements of urban and suburban contexts that strengthen or weaken desires and abilities to age in place. Overall, interviewees emphasised the need for accessible and affordable housing, reliable services, robust transportation infrastructure, and suitable options for health and care. The perspectives of low-income participants diverged notably from mainstream conceptions: those in perilous subsidised housing desired to move to safer and more comfortable settings; and homeless participants did not have a stable home or community to age in place. Planning and implementation of ageing in place framed in highly individualistic, resourced and ableist conception did not address their everyday struggles, including the lack of affordable housing and defunding of supportive social services. (RH)
ISSN: 08959420 From : <https://doi.org/10.1080/08959420.2019.1704133>
- 265/113 Neighborhood attributes and well-being among older adults in urban areas: a mixed-methods systematic review; by Miguel Padeiro, Jose de Sao Jose, Carla Amando (et al).: Sage.
Research on Aging, vol 44, nos 5-6, May-June 2022, pp 351-368.
Expanding urbanisation rates have engendered increasing research examining linkages between urban environments and older adults' well-being. This mixed-methods systematic review synthesises the evidence for the influence of urban neighbourhoods' attributes on older adults' well-being. This review follows the Preferred Reporting Items for Systematic Reviews and Meta-Analyses (PRISMA) guidance for systematic reviews. The authors searched for literature published up to December 2020 across six databases and performed quality assessment and thematic analysis. The results, based on 39 identified studies, showed that natural areas in neighbourhoods and a sense of community are the attributes most often associated with positive effects on well-being. Transit-related variables, urban furniture and access to healthcare are also positively related to well-being. Neighbourhoods may promote well-being more effectively when these elements are considered. However, almost half of the studies did not include all environmental dimensions simultaneously, and self-reported instruments were largely preferred over more objective assessments of the environment. Future research should thus holistically examine physical, social and service-related attributes in order to produce evidence which is more robust.
ISSN: 01640275 From : <https://doi.org/10.1177/0164027521999980>

OLDER OFFENDERS

- 265/114 Testing a portion of the Oklahoma aging inmate forgiveness model; by G Kevin Randall, Alex J Bishop.: Taylor and Francis.
Journal of Religion, Spirituality and Aging, vol 33, no 4, 2021, pp 430-447.
The study tested a portion of the Oklahoma Aging Inmate Forgiveness Model predicting that religiosity would be positively and significantly associated with the mediator, forgiveness (self, other, and situation), and the mental health outcome, valuation of life. Further, the study asked, "Does crime type moderate the relationships in the model?" Cross-sectional data from 249 older male inmates affirmed that religiosity and forgiveness matters for participant mental health. Discussion focused on the fact that not one size fits all. Inmates and their unique backgrounds, crime type and various assessments presented opportunities for needed psychological, religious and forgiveness involvement, training and therapeutic intervention. (JL)
ISSN: 15528030 From : <https://doi.org/10.1080/15528030.2021.1891187>

OLDER WOMEN

(See Also 265/7, 265/22, 265/24, 265/55, 265/123)

- 265/115 Familization risks, defamilization risks and older women; by Ruby C M Chau, Sam W K Yu.: Taylor and Francis.
Journal of Women and Aging, vol 33, no 3, May-June 2021, pp 312-327.
The risks of familisation and defamilisation faced by older women are generated by the lack of one or both of two conditions: the freedom to choose whether or not to perform certain family roles; and the capacity to maintain a reasonable standard of living. Examples are drawn from findings of a qualitative study in Hong Kong, in which 40 older women aged 65+ were interviewed, to discuss their experiences of issues relating to the risks and their diverse preferences of how these issues should be handled. (RH)
ISSN: 08952841 From : <https://doi.org/10.1080/08952841.2019.1692630>

PENSIONS AND BENEFITS

- 265/116 How did increasing the state pension age from 65 to 66 affect household incomes?; by Jonathan Cribb, Laurence O'Brien, Institute for Fiscal Studies - IFS.: Institute for Fiscal Studies, 2022, 35 pp (IFS report R211).
One response by the UK government to the challenges of rising life expectancy and an ageing population has been to increase the earliest age at which people can claim a state pension (the state pension age, or SPA). The SPA for women began rising from age 60 in April 2010, achieving parity with the men's SPA of 65 in late 2018. The SPA for both men and women then increased from 65 to 66 between December 2018 and October 2020. This report uses data from the Family Resources Survey (FRS) to examine and calculate the effects and consequences of this latter reform on individual income and government finances. Whereas reduced payments of state pensions coupled with the resulting higher direct tax payments have boosted the public finances by around £4.9 billion a year, this latest increase in SPA led to a larger increase in income poverty than that seen following earlier increases in the female SPA. The authors also consider how household incomes have been affected by the SPA increase: households near the bottom of the income distribution are likely to be pushed into income poverty. The Institute for Fiscal Studies (IFS) acknowledges funding from the Centre for Ageing Better (CfAB). (RH)
https://ifs.org.uk/sites/default/files/output_url_files/R211-How-did-increasing-the-state-pension-age-affect-household-incomes.pdf

PERSONALISATION

- 265/117 Emergent issues in directly-funded care: Canadian perspectives; by Christine Kelly, Aliya Jamal, Katie Aubrecht, Amanda Grenier.: Taylor and Francis.
Journal of Aging and Social Policy, vol 33, no 6, November-December 2021, pp 626-646.
Direct Funding (DF) provides individuals with a budget to arrange their own home care instead of receiving publicly arranged services. DF programs have evolved in a number of countries since the 1970s, such as in the UK, where it is known as direct payments. In Canada, while small-scale DF programs have existed since the early 1970s, the research on these programs remains limited. Responding to gaps identified by an umbrella review and using a health equity framework, this research extends the knowledge base on DF programs from a Canadian perspective through an environmental scan. The research asks: What are the features of DF programs across Canada? What are the emerging issues related to program design and policy development? The study employed a qualitative environmental scan design, gathering data through questionnaires and semi-structured interviews (n = 23). The findings include a summary table describing features of 20 programs and two interview themes: a lack of information on DF workers, and concerns about the growing role of home care agencies. This study has the potential to contribute to long-term health equity monitoring research. The findings suggest that as DF expands in Canada, promoting hiring from personal networks may address inequities in rural access to home care services and improve social outcomes for linguistic, cultural, and sexual minorities. However, the findings underscore a need to monitor access to DF programs by people of lower-socioeconomic backgrounds in Canada and discourage policy design that requires independent self-management, which disadvantages people with compromised decision-making capacities. (RH)
ISSN: 08959420 From : <https://doi.org/10.1080/08959420.2020.1745736>

PHYSICAL ACTIVITY

- 265/118 Aquatic exercise for improving immune function and mental stress in pre-frailty elderly women; by Eunjae Lee, Seung-Taek Lim, Woo-Nam Kim.: Taylor and Francis.
Journal of Women and Aging, vol 33, no 6, November-December 2021, pp 611-619.
The effect of aquatic exercise on immune response was investigated in 40 pre-frailty older women who were recruited from a Community Centre in Barsan, South Korea. The supervised aquatic exercise intervention ran 3 days per week for 12 weeks. IgA, IgG, and IgM immunoglobulins were significantly increased, and IgE was significantly decreased in the exercise group. Tension-anxiety, depression and confusion were significantly decreased, and anger-hostility was significantly increased in the exercise group. This study indicates that an aquatic exercise is an effective lifestyle intervention strategy for improving immune function and mood state in pre-frailty older women. (RH)
ISSN: 08952841 From : <https://doi.org/10.1080/08952841.2020.1735287>
- 265/119 Barriers, motivators and facilitators of physical activity in people with dementia and their family carers in England: dyadic interviews
Evidence from an asymmetric fixed effects analysis of community dwelling adults in Germany; by Nicolas Farina, Alice Williams, Kirsty Clarke (et al.): Taylor and Francis.
Aging and Mental Health, vol 25, no 6, June 2021, pp 1115-1124.
Physical activity may have a number of physical and mental health benefits for people with dementia and their carers, however there is limited evidence about factors that influence physical activity participation in these groups. This study looked at the barriers, facilitators and motivators of physical activity in

people with dementia from both the perspective of the person with dementia and their carer. 30 participants (15 sets of community-dwelling people with dementia and their family carers) were recruited from the South East of England. The participants took part in semi-structured dyadic interviews about their views of physical activity. Interviews were analysed using inductive thematic analysis at an individual level and comparisons were made between the groups. Common motivator themes across people with dementia and family carers were emotional and physical wellbeing and social connectedness. Physical health was seen as a common barrier in both groups. Physical activity in the person with dementia was encouraged and supported by the family carer. For the carer, their caring role and limited time acted as barriers to their participation. Themes such as social connectedness, positive emotion and health were seen as key motivators to physical activity which indicated that people with dementia and carers use physical activity as a means to maintain and improve their quality of life. Supporting family members to better facilitate such activities could encourage physical activity in people with dementia. (JL)

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From : <https://doi.org/10.1080/13607863.2020.1727852>

- 265/120 Effectiveness of functionally based physical activity programs on physical, psychological, cognitive, and adverse outcomes in older adults living in nursing homes: systematic review; by Eva Barrett, Blathin Casey, Marie Dollard, Bernard McCarthy, Dymphna Casey.: Taylor and Francis. *Activities, Adaptation and Aging*, vol 45, no 4, October-December 2021, pp 306-347.

This systematic review aimed to examine the effectiveness of function-oriented physical activity programs on the physical, psychological, cognitive and adverse outcomes of older adults living in nursing homes. An extensive search was conducted. Two reviewers independently applied eligibility criteria and assessed sources of bias using the Revised Cochrane Risk of Bias Tool for Randomized Trials and the Risk of Bias in Non-randomized Studies of Interventions. Data were analysed using a narrative synthesis. Twenty-three studies were included. Intervention types categorised were walking programs (n = 9), activity of daily living practice (n = 6), and functional exercise programs (n = 8). Eighteen studies were rated as serious or high risk of bias, and five were rated at moderate or some risk of bias. Walking interventions and functional exercise programs may be effective for improving physical outcomes in nursing home residents. None of the three types of physical activity demonstrated effectiveness for improving psychological outcomes. Cognitive outcomes were only evaluated by a small number of studies in the walking program category, which suggested mixed results. Adverse events were not associated with these interventions. Nursing home residents, including people with dementia, were able to safely engage with and experience benefits from functional physical activity interventions embedded into nursing home care. (RH)

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From : <https://doi.org/10.1080/01924788.2020.1794352>

- 265/121 Evaluation of aquafitness exercise on the physical and mental health of older women: a pilot study; by Krystal M Perkins, Nora Munguia, Aracely Angulo (et al.): Taylor and Francis. *Journal of Women and Aging*, vol 33, no 6, November-December 2021, pp 569-582.

Physical activity is a priority for improving health. However, a sedentary lifestyle is increasingly becoming the norm. For example, in Mexico, sedentary behaviour has increased, especially among older women. This study evaluated the effects of aquafitness (water aerobics) on the health of older women in Mexico. Healthy older women performed aquafitness exercise and were compared to a control group of comparable women. Outcome assessments performed at baseline and after 17-weeks included psychological and physical/ anthropometric measures. Participants in aquafitness became more optimistic, and lost more weight, body fat and a subsequent decrease in body mass index (BMI), compared to controls. The results suggest important avenues for future research. (RH)

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From : <https://doi.org/10.1080/08952841.2020.1730681>

- 265/122 Older adults and exergames Olympics: feasibility and fun; by Elizabeth M Orsega-Smith, Paula J Kalksma, Whitney Harris, Brittany Drazich.: Taylor and Francis.

Activities, Adaptation and Aging, vol 45, no 2, April-June 2021, pp 118-134.

Seventy-five percent of older adults do not participate in regular physical activity, so innovative and non-traditional approaches to exercise are needed. For example, exergames refer to video games which require some form of physical activity or exercise to play the games: they are a new subject of research with older adults. This study aimed to determine the impact of older adults' participation in Xbox Kinect and Nintendo Wii games. Twelve members of a senior centre in New Castle, Delaware (9 women, 3 men aged 62-79) played a variety of exergames for 6 weeks. They experienced improvements in the Berg Balance, non-significant improvements in Chair Stands and the Timed-Up and Go, and no changes in psychosocial measures. Older adults' participation Xbox Kinect exergames may promote physical activity in a fun, social supportive and positive community environment, and improve their physical activity. (RH)

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From : <https://doi.org/10.1080/01924788.2020.1728044>

RELATIONSHIPS (PERSONAL)

(See Also 265/115)

- 265/123 The development of gendered health-related support dynamics over the course of a marriage; by Mieke Beth Thomeer, Kirsten Ostergren Clark.: Taylor and Francis.
Journal of Women and Aging, vol 33, no 2, March-April 2021, pp 153-169.
For married adults with chronic illnesses or functional limitations, informal support from a spouse is often essential for their well-being, but support around health issues is not confined to later life. Attention to processes of support throughout the entire intimate relationship can provide insight into support dynamics in later life. Additionally, health-related support from a spouse tends to be gendered, with women providing more support. This analysis of relationship timeline interviews with 23 older adult couples in the southeastern United States demonstrates that these gendered support dynamics develop and are sustained throughout a marriage. Three patterns of support are identified. First, acknowledged gender inequality in support, in which women readily provided support when their husbands had health issues but men provided support less consistently for their wives' health issues throughout the relationship. Second, mutual support, in which both spouses provided support for the other whenever there were health needs. Third, independence, in which men and women provided relatively little support to one another, viewing each other as responsible for their own health and well-being. These support patterns are established early within marriages and continue as health issues intensify. These patterns of spousal support are linked to broader systems of gender inequality and societal messages about gender. This study moves away from conceptualisations of support provisions around health issues as only being situated in later life. Instead, the study shows how dynamics of support are developed and normalised throughout a marriage, and suggests that spousal support studies should take into account long-term marital dynamics. (RH)
ISSN: 08952841
From : <https://doi.org/10.1080/08952841.2020.1826624>
- 265/124 Friends, family, and romantic partners: three critical relationships in older women's lives; by Jacob Shane, Anna Luerssen, Cheryl L Carmichael.: Taylor and Francis.
Journal of Women and Aging, vol 33, no 4, July-August 2021, pp 378-395.
How are different social relationships jointly and uniquely associated with older women's health and well-being, and what is the directionality of these associations? The authors use longitudinal data from the Midlife in the United States study to answer these questions. They find that relationship quality with romantic partners, family and friends is positively linked with better health and well-being, concurrently and longitudinally. Cross-lagged analyses indicate that romantic relationships are more predictive of, than predicted by, health and well-being; family relationships are more predicted by, than predictive of, health and well-being; and friendships are both predicted by, and predictive of, health and well-being. (RH)
ISSN: 08952841
From : <https://doi.org/10.1080/08952841.2020.1838238>
- 265/125 Implications of relationships with family, friends, and neighbors for changes in women's well-being in late life; by Heather R Fuller.: Taylor and Francis.
Journal of Women and Aging, vol 33, no 4, July-August 2021, pp 362-377.
Data for 224 women (mean age, 80) from the author's Social Integration and Aging Study, conducted in an area of North Dakota in 2013-2015 were used to examine whether their relationships with family, friends and neighbours were associated with their well-being. Age differences were also explored. The study found that greater satisfaction with family and friend relationships were positively associated with well-being, while the number in a network was not. Age-related effects for family and friend relationships suggested potential protective effects for the oldest women. Findings highlight unique facets of older women's relationships, suggesting future directions for examining age issues and sources of support. (RH)
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From : <https://doi.org/10.1080/08952841.2020.1847712>

RELIGION AND SPIRITUALITY

(See Also 265/49, 265/72, 265/92, 265/114)

- 265/126 Gerotranscendence and active aging: the lived experience; by Fatemeh Raeesi Dehkordi, Ahmad Ali Eslami, Fereshteh Zamani Alavijeh, Hossein Matlabi.: Taylor and Francis.
Journal of Religion, Spirituality and Aging, vol 33, no 3, 2021, pp 271-297.
Active ageing is a comprehensive and subjective concept that depends on an individual's personal experiences. The theory of gerotranscendence focuses on older people and the ageing process. This process would be of great value in dealing with the challenges that come in that period of life. The

authors conducted this study to explore the lived experience of gerotranscendence and active ageing among seniors. Following a directed content analysis procedure, the study conducted semi-structured individual interviews with 39 community-dwelling seniors from the age of 60 including both genders living in Isfahan, Iran, selected by purposeful sampling. Data collection and analysis were concurrent. The reliability of data was fulfilled by following Lincoln and Guba criteria. The study stopped data collection when no new concept was added and data saturation was achieved. Based on the experience of elders, three categories were identified: 1) Self-transcendence, 2) Social transcendence, and 3) Cosmic level. These portrayed gerotranscendence as a continuous process confronting age-related change. The finding suggests that gerotranscendence was introduced as a dynamic process that occurred simultaneously with active ageing accompanying the journey of life. (JL)

ISSN: 15528030

From : <https://doi.org/10.1080/15528030.2020.1770662>

- 265/127 The mindful way of Falun Gong for graceful and positive aging; by Margaret Trey.: Taylor and Francis. *Journal of Religion, Spirituality and Aging*, vol 33, no 2, 2021, pp 139-154.

The promotion of mind-body and spiritual health for graceful and positive ageing has undergone cultural changes and requires ongoing considerations. People from diverse cultures are exploring options, looking to Eastern mind-body, spiritual practices for creative health-wellness solutions. Falun Gong, an ancient Chinese practice, based on Buddhist and Taoist philosophies, offers a viable alternative. The values of Falun Gong, Truthfulness-Compassion-Forbearance, are qualities recognised by all spiritual traditions and can be embraced by older people from all walks of life. This paper introduces and provides knowledge about Falun Gong, and outlines how the mindful way is beneficial for graceful ageing. (JL)

ISSN: 15528030

From : <https://doi.org/10.1080/15528030.2020.1847238>

- 265/128 Spirituality: the Hindu perspective from a gerontologist's viewpoint; by Mehta Kalyani K.: Taylor and Francis.

Journal of Religion, Spirituality and Aging, vol 33, no 2, 2021, pp 127-138.

This article focuses on synthesising spirituality and the gerontology perspective, with Hindu concepts and the search for meaning and purpose at the micro-level. Drawing from past research, empirical studies and interviews conducted in Asian communities the author applies the concepts of 'karma', 'advaita' and 'consciousness'. The Hindu belief that every human being has the potential to connect with the divine is discussed. The positive effects of spiritual pursuits and spiritual care are reviewed. The paper concludes with recommendations for greater self-awareness (at individual level), and mainstreaming of spirituality into psychosocial and medical care for older people. (JL)

ISSN: 15528030

From : <https://doi.org/10.1080/15528030.2020.1843590>

- 265/129 This mortal life: ageing and spirituality after the Great Transition; by Stephen Pickard.: Taylor and Francis.

Journal of Religion, Spirituality and Aging, vol 33, no 2, 2021, pp 101-111.

This study addresses the implications for ageing and pastoral practice of the rapid increase in life expectancy that has occurred over the past 150 years, often referred to as 'The Great Transition'. Following a discussion of this feature of human life the author briefly considers some theological dimensions of ageing and the purpose of life in older years. Consideration is given to the denial of death and the consequent loss of a sense of human mortality and our status as creatures. The article concludes with a brief discussion of the dignity of people associated with a theological understanding of human beings as bearers of the image of God. The pastoral implications of this affirmation show the importance of a richer understanding of the human person that transcends the biomedical paradigm. (JL)

ISSN: 15528030

From : <https://doi.org/10.1080/15528030.2020.1837331>

- 265/130 Transforming spirituality through aging: coping and distress in the search for meaning in very old age; by Anna Janhsen, Heidrun Golla, Pauline Mantell, Christiane Woopen.: Taylor and Francis.

Journal of Religion, Spirituality and Aging, vol 33, no 1, 2021, pp 38-53.

Problem-centred interviews were conducted with 20 oldest old individuals aged 80 and above. Responses were then evaluated via qualitative content analysis to answer the research question of how age- and cultural-specific experiences challenge and transform spirituality in oldest age. The study revealed that socio-cultural and age-related changes do not only support a reconsideration of existential questions of life expressed in faith, but also a re-evaluation of life, rethinking of meaningful engagement and redefinition of fundamental constituents of identity. On affective, reflective as well as performative dimensions of spirituality these changes bear scopes for different forms of spiritual support and spiritual crises, which themselves transform spirituality in old age. Spirituality is for older people thereby not a matter of gaining theoretical insights and knowledge, but rather a matter of coherence between perceptions of life, interpretation of life and approaching life _ hence primarily a matter of successful conduct of life on a practical level. (JL)

ISSN: 15528030

From : <https://doi.org/10.1080/15528030.2019.1676362>

REMINISCENCE

- 265/131 Intergenerational health review: learning about older adults' reminiscence through a college course project; by Alan Lai, Solna Lin Na Xing.: Taylor and Francis.
Journal of Intergenerational Relationships, vol 19, no 4, 2021, pp 478-486.
Intergenerational Health Review (IHR) postulates that reminiscence of personal history is a reconciling process beneficial to individuals, since it helps to find meaning in life and gain a better sense of well-being. This paper presents a college course project in China, within which students documented reminiscence stories in older adults' lives, based on an event of recovery from illness. Because of the Covid-19 pandemic and social distancing, all sessions and interviews were conducted online. Evaluation of findings indicated that the pilot IHR project benefited students and older participants. Future studies should investigate how a college project such as IHR can work on promoting the goal of intrinsic motivation, rather than just focusing on grades. (RH)
ISSN: 15350770
From : <https://doi.org/10.1080/15350770.2021.1897727>

RESEARCH

(See Also 265/41)

- 265/132 "Acting ethically is down to you": applying ethical protocols in qualitative fieldwork in care homes; by Tamara Backhouse, Rachel Louise Daly.: Emerald.
Quality in Ageing and Older Adults, vol 23, no 1, 2022, pp 2-13.
Research ethics committees (RECs) and ethical standards govern research. To conduct research involving participants, researchers must first gain a favourable opinion on their protocol from a REC. The authors draw on research experiences in care homes to consider reliance on researchers to be authentic and morally driven over and above formal ethical approvals, and to be open about applying agreed ethical protocols in practice. Using examples from qualitative fieldwork in two care home studies, the authors critically reflect on the issues encountered when applying ethics committee agreed protocols in real-world situations. They reflect on three areas of research practice: recruitment and consent; approach to observations; and research processes, shared spaces and access to data. The interface between researcher and participant did not always mirror textbook scenarios. Ultimately, this left researchers accountable for taking ethically acceptable actions while conducting research. The authors conclude that the researcher is the bridging agent between ethical protocols and ethical practice in the field. As such, researchers need to be open and reflexive about their practices in fieldwork. (RH)
ISSN: 14717794
From : <https://doi.org/10.1108/QAOA-06-2021-0050>

RESIDENTIAL AND NURSING HOME CARE

(See Also 265/31, 265/110, 265/111, 265/120, 265/132, 265/139)

- 265/133 The association between staff retention and English care home quality; by Stephen Allan, Florin Vadean.: Taylor and Francis.
Journal of Aging and Social Policy, vol 33, no 6, November-December 2021, pp 708-724.
The Adult Social Care Workforce Data Set 9ASC-WDS, formerly the National Minimum Dataset for Social Care, NMDS-SC), a national database of social care providers' staffing, is used to examine the association between workforce retention and related staffing measures and the quality of English care homes. The analysis finds significant correlations between quality and the levels of staffing vacancies and retention of both residential and nursing homes. However, no association was found between quality and the use of temporary contract workers, nor in the resident to staff ratio. Only for staff vacancy rates was there a significant difference in the size of these relationships between types of home. The findings suggest that quality could change for the average care home with a relatively small alteration in staffing circumstance. Long-term care is a labour-intensive industry, and many countries face relatively high levels of staff turnover and job vacancy rates. These findings are therefore of interest for policy internationally and for England in particular, where the development of social care recruitment and retention strategies are ongoing. (RH)
ISSN: 08959420
From : <https://doi.org/10.1080/08959420.2020.1851349>
- 265/134 Social services involvement in care transitions and admissions in nursing homes; by Colleen Galambos, Laura Rollin, Mercedes Bern-Klug (et al.): Taylor and Francis.
Journal of Gerontological Social Work, vol 64, no 7, October-November 2021, pp 740-757.
Care transitions (CT) are critical junctures in the healthcare delivery process. Effective transitions reduce the need for subsequent transfers between healthcare settings including nursing homes. Understanding social services (SS) involvement in these processes in nursing homes is important from a quality and

holistic care perspective. Using logistic regression, this study examined structural and relational factors identified with higher involvement of SS in care transitions and admissions. SS directors from 924 nursing homes were evaluated in relation to SS involvement in care transitions and admissions processes. Results suggested that the level of SS involvement in care transitions and admissions are associated with structural factors such as size of facility, geographical location, ratio of full time equivalent (FTE) staff to beds, ownership status, and standalone SS departments, as well as relational factors, including perceptions and utilisation of SS staff by facility leadership, coworkers, and family. Additionally, SS staff with higher levels of expertise and with social work degrees are less involved in admissions tasks. (JL)

ISSN: 01634372

From : <https://doi.org/10.1080/01634372.2021.1917031>

- 265/135 Structural characteristics of nursing homes and social service directors that influence their engagement in disaster preparedness processes; by Nancy Kusmaul, Susanny Beltran, Tommy Buckley (et al): Taylor and Francis.

Journal of Gerontological Social Work, vol 64, no 7, October-November 2021, pp 775-790.

Nursing home residents are an at risk population during disaster situations and nursing homes face unique challenges in managing disasters. Social service departments can support nursing homes in meeting the needs of residents during disasters, yet there is little research exploring their involvement. To address the gap this study used secondary data from the 2019 National Nursing Home Social Service Directors' study to explore social service directors' and their departments' involvement in disaster preparedness and response, and personal- and nursing home-level characteristics that predicted involvement. Results showed that nursing home social service directors and their staffs are predominantly involved, with 61.9% of respondents stated 'always participating', and an additional 20.3% 'usually participating' in disaster planning. The age of the director significantly predicted involvement, with older directors being most likely to always be involved. Further research is needed to understand why some nursing homes involve their social service directors in disaster planning and others do not, what roles those directors play, and to identify strategies to increase involvement within this role. (JL)

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From : <https://doi.org/10.1080/01634372.2021.1933293>

RETIREMENT

(See Also 265/23, 265/76, 265/82)

- 265/136 Retirement trajectories in countries with flexible retirement policies but different welfare regimes; by Isabel Baumann, Ignacio Madero-Cabib.: Taylor and Francis.

Journal of Aging and Social Policy, vol 33, no 2, March-April 2021, pp 138-160.

The authors examine how both the welfare regime and health affect retirement trajectories in countries with flexible retirement policies using longitudinal methods and harmonised panel data from two social-democratic (Sweden and Denmark) and two liberal welfare regimes (Chile and the United States). An early retirement trajectory, which represents retirement in the early 60s, is the most frequent in all countries, although it is less prevalent in liberal than in social-democratic regimes. Adverse health conditions are more frequent among early retirees in liberal but not in social-democratic regimes. Overall, no evidence is found for an inciting effect of flexible retirement policies on working life extension. However, welfare regimes substantially affect late-life labour force participation. (RH)

ISSN: 08959420

From : <https://doi.org/10.1080/08959420.2019.1685358>

- 265/137 Towards an active and happy retirement?: Changes in leisure activity and depressive symptoms during the retirement transition; by Georg Henning, Andreas Stenling, Allison A M Bielak (et al): Taylor and Francis.

Aging and Mental Health, vol 25, no 4, April 2021, pp 621-631.

Retirement is a major life transition in the second half of life and it can be associated with changes in leisure activity engagement. Although theories of retirement adjustment have emphasised the need to find meaningful activities in retirement little is known about the nature of changes in leisure activity during the retirement transition and their association with mental health. Based on four annual waves of the 'Health, Aging and Retirement Transitions in Sweden' study, the authors investigated the longitudinal association of leisure activity engagement and depressive symptoms using bivariate dual change score models. The study distinguished intellectual, social and physical activity engagement. There were found to be increases in all three domains of activity engagement after retirement. Although level and change of activity and depressive symptoms were negatively associated, the coupling parameters were not significant, thus the direction of effects remained unclear. The results highlight the need to consider the role of lifestyle changes for retirement adjustment and mental health. (JL)

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From : <https://doi.org/10.1080/13607863.2019.1709156>

ROBOTICS

(See 265/14)

SOCIAL CARE

(See 265/134)

SUICIDE

- 265/138 Empirically evaluated suicide prevention program approaches for older adults: a review of the literature from 2009-2021; by Marissa Wallace, Vivian J Miller, Noelle L Fields (et al.): Taylor and Francis. *Journal of Gerontological Social Work*, vol 64, no 5, July-August 2021, pp 480-498. Mental health in later life and suicide risk among older adults are important topics for social work. There is evidence-based research to support the use of selective and indicated strategies for suicide prevention, yet universal prevention approaches are also needed. However the extent to which the broader contexts of suicide have been examined remains largely absent from the literature. This article presents findings from a systematic review of articles published between 2009 and 2021, focusing on what types of empirically evaluated suicide prevention programs effectively prevent and reduce suicidality in older adults. Using PICO and PRISMA guidelines, a final sample of eight articles were systematically reviewed. The articles were categorised into three types of programmes: 1) primary and home health care, 2) community-based outreach, and 3) counselling. The articles also examined the involvement of social workers in these programmes. Following a description of the articles, the authors assess each study using the GRADE rating system. Lastly they discuss the role of the social worker in mental health promotion and prevention strategies. (JL)
ISSN: 01634372
From : <https://doi.org/10.1080/01634372.2021.1907495>
- 265/139 Social services directors' roles and self-efficacy in suicide risk management in US nursing homes; by Xiaochuan Wang, Kelsey Simons, Denise Gammonley (et al.): Taylor and Francis. *Journal of Gerontological Social Work*, vol 64, no 7, October-November 2021, pp 791-810. Nursing home (NH) residents have many risk factors for suicide in later life and transitions into and out of NHs are periods of increased suicide risk. The purpose of this study was to describe NH social service directors' (SSDs) roles in managing suicide risk and to identify factors that influence self-efficacy in this area. This study used data from the 2019 National Nursing Home Social Services Directors survey. One-fifth (19.7%) of SSDs reported a lack of self-efficacy in suicide risk management, as indicated by either needing significant preparation time or being unable to train others on intervening with residents at risk for suicide. Ordinal logistic regression identified SSDs who were master's prepared, reported insufficient social service staffing as a minor barrier (versus a major barrier) to psychosocial care, and those most involved in safety planning for suicide risk were more likely to report self-efficacy for training others. Implications include the need for targeted training of NH social service staff on suicide prevention, such as safety planning as an evidence-based practice. Likewise sufficient staffing of qualified NH social service providers is critically important given the acute and chronic mental health needs of NH residents. (JL)
ISSN: 01634372
From : <https://doi.org/10.1080/01634372.2021.1936331>

TRANSPORT

(See 265/97)

TRAUMA, CONFLICT AND WAR

(See 265/135)

