

New Literature on Old Age

EDITOR

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Contents for vol 46 no 267, 2023

Subject Headings	Page
Abuse, safeguarding and protection	1
Active ageing	1
Advance directives	1
Age-friendly communities	1
Ageing without children	2
Alternative therapies	2
Arts, craft and music	3
Attitudes to ageing	3
Bereavement	3
Black and minority ethnic groups	4
Carers and caring	4
Consumer perspectives	6
Covid-19	6
Crime	7
Dementia	7
Dementia care	7
Diet and nutrition	9
Education and training	10
Employment	11
End-of-life care	11
Family and informal care	11
Frailty	12
Grandparents	12
Health and wellbeing	13
Health care	14
Health services	14
Healthy ageing	14
HIV and AIDS	15
Home care	15

Continued...

Subject Headings	Page
Hospital care	16
Housing	16
Income and personal finance	18
Information and communication technology	18
Intergenerational issues	19
International and comparative	21
Leisure	21
LGBT	22
Loneliness and social isolation	23
Long term care	23
Mental health	24
Mental health care	25
Neighbourhoods and communities	25
Older men	26
Older women	26
Oldest old	27
Participation	28
Person centred care	28
Personalisation	29
Physical activity	29
Problem behaviour	30
Relationships (personal)	30
Religion and spirituality	31
Reminiscence	32
Residential and nursing home care	32
Retirement	34
Sensory loss	34
Sleep	35
Social care	35
Social inclusion	35
Social networks	36
Social policy and theory	36
Trauma, conflict and war	36

ABUSE, SAFEGUARDING AND PROTECTION

- 267/1 Carers and domestic abuse: the elephant in the room?; by Amanda Warburton-Wynn.: Emerald. Journal of Adult Protection, vol 25, no 1, 2023, pp 14-19.
The issue of carers as victims, and sometimes perpetrators, of domestic abuse is being overlooked by statutory organisations. Carers often do not fit the traditional patterns of abusive relationships, and the complexities of the caring role can make typical safety options unsuitable. However, caring responsibilities are a feature of an increasing number of domestic homicide reviews, and current statutory safeguarding options exclude most carers from support and risk not identifying perpetrators. This short paper highlights some of the shortfalls around identifying the needs of carer victims and/or survivors of domestic abuse and carer-perpetrators of domestic abuse; and it explores ways in which identification and support could be improved. Carers as victims or survivors of domestic abuse, and as abusers, is an issue that requires more attention from researchers and Adult Social Care, NHS, Carer Support Organisations and Domestic Abuse specialists need to work together to explore these issues and offer workable options. Little data or research exists around carers as victims or perpetrators of domestic abuse. (RH)
ISSN: 14668203
From : <https://doi.org/10.1108/JAP-09-2022-0018>

ACTIVE AGEING

- 267/2 Are older adults' leisure patterns consistent with the active ageing model?: The influence of the ageist stereotypes; by Jose Maria Failde Garrido, Maria Dolores Dapia Conde, Miguel Angel Vasquez Vasquez (et al).: Cambridge University Press.
Social Policy and Society, vol 21, no 4, October 2022, pp 575-596.
More and more studies indicate that leisure plays a fundamental role in active ageing. This study describes the current leisure patterns of older adults, comparing them with other age groups. Consequently, 445 Spanish adults, stratified by age (young, middle-aged and older adults), were selected and subsequently administered a set of tests. The results indicate that older people claim having more time for their leisure activities; however, the diversity of activities performed is lower, showing a negative gradient based on age. The leisure patterns of older people reflect a predominance of passive leisure, little cultural leisure time and moderate levels of social and physical leisure activities. Older people's leisure seems to be influenced by ageist stereotypes and attribution biases. The findings imply that these results could be used to design and implement programs aimed at promoting leisure styles that contribute to increase active ageing. (RH)
ISSN: 14747464
From : <https://doi.org/10.1017/S1474746421000221>

- 267/3 The effect of roles prescribed by active ageing on quality of life across European regions; by Martin Lakomy.: Cambridge University Press.
Ageing and Society, vol 43, no 3, March 2023, pp 664-688.
The active ageing approach supports a set of roles or activities that are supposed to be beneficial for older adults. This paper reassesses the benefits of activities for the quality of life by: analysing many activities at the same time to control each other; using panel data to detect the effects of activities over time; and performing separate analyses for four European regions to test the context-specificity of the effects. The effects of roles in later life are tested on panel data from three waves of the Survey of Health, Ageing and Retirement in Europe (SHARE) project. The results of fixed-effects regression show that only some activities - volunteering, participating in a club and physical activity - increase the quality of life, and that care-giving within the household has the opposite effect. Moreover, the beneficial effects are much weaker and less stable than the other types of regression suggest; they are beneficial only in some regions, and their effect is much weaker than the effects of age, health and economic situation. Therefore, the active ageing approach and activity theory should reflect the diverse conditions and needs of older adults to formulate more context-sensitive and less normative policy recommendations.
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From : <https://doi.org/10.1017/S0144686X21000726>

AGE-FRIENDLY COMMUNITIES

(See 267/74, 267/75, 267/76)

AGEING WITHOUT CHILDREN

- 267/4 Residential reasoning: how childless older adults choose between ageing in place (AIP) and institutionalisation in rural China; by Shirly H Z Chen, Vivian W Q Lou.: Cambridge University Press. *Ageing and Society*, vol 43, no 3, March 2023, pp 516-534.
The decision of whether to grow old in one's home (also referred to as ageing in place (AIP)) or relocating to an institution is an ongoing negotiation process, which involves residential decisions and adaptation. This research aims to explore how childless older adults in rural China choose between AIP and institutionalisation. A qualitative study conducted in rural China among childless older adults explored their reasons for making certain residential choices and how they adapted during the decision process. Twenty-five childless participants (aged 60-83) were interviewed. Findings suggested that they referred to the term *ku* (literally meaning 'bitterness'; and a metaphor referring to 'conducting farming and farm-related activities') to explain their residential decisions. If a person could endure *ku* - sustain food and basic living through farming and farm-related activities, they tended to choose to age in place; otherwise, they chose to relocate to institutions. *Ku* represents a sense of mastery, encompassing the stressfulness and suffering aspect that requires adaptation. Three adaptive strategies were identified: positive reappraising of the negative aspect of *ku*; routinising *ku*; and transcending the narrative of *ku* into a toughness identity. The findings suggest that childless older people struggled to achieve residential mastery while making residential decisions, even though a sense of mastery was shaped by the individual and structural constrictions. (RH)
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From : <https://doi.org/10.1017/S0144686X2100074X>

ALTERNATIVE THERAPIES

- 267/5 Pilot study of tai chi and qigong on body composition, sleep, and emotional eating in midlife/older women; by Dara James, Linda K Larkey, Bronwynne Evans, Ann Sebren, Kimberley Goldsmith, Lisa Smith.: Taylor and Francis.
Journal of Women and Aging, vol 34, no 4, July-December 2022, pp 449-459.
Weight gain and related adverse changes in body composition are prevalent in middle aged and older women and contribute to chronic disease (e.g. type 2 diabetes, hypertension, depression). Tai Chi (TC) and Qigong (QG), forms of Meditative Movement, demonstrate improved physical and/or psychological symptoms and body composition. The authors used a standardised TC/QG protocol to explore pre/post intervention differences in percentage body fat and factors related to body composition in middle aged and older women. In the context of a single-group pilot study, females aged 45-75 (N = 51) enrolled in an 8-week TC/QG intervention. Primary outcome measures of body composition, sleep quality, emotional eating and select secondary outcome psycho-emotional factors (perceived stress, mood state, mindfulness, self-compassion, body awareness) were collected. Change in the percentage of body fat did not reach statistical significance ($p = .30$, $M = 0.35$, 95% CI [- 0.32, 1.0]). Sleep quality improved significantly, $p = .04$, $M = - 0.88$, 95% CI [-1.71, - 0.04]. Emotional eating changed in the expected direction, but not significantly, $p = .08$, $M = -0.16$, 95% CI [-0.34, 0.02]. Significant differences were found in body awareness, $p = .01$, $M = 0.36$, 95% CI [0.08, 0.63] and perceived stress, $p = .05$, $M = -2.36$, 95% CI [-4.76, 0.04]. Preliminary results are promising, as results showed improvements in factors related to healthy body composition. Refined research is needed to understand if and/or how TC/QG may improve body composition among middle aged and older women. (RH)
ISSN: 08952841
From : <https://doi.org/10.1080/08952841.2021.2018924>
- 267/6 A qualitative study exploring middle-aged women's experiences with yoga; by Anne E Cox, Jennifer Brunet, Amanda K McMahon, Jenson Price.: Taylor and Francis.
Journal of Women and Aging, vol 34, no 4, July-December 2022, pp 460-472.
The purpose of this study was to explore how yoga impacts body-related thoughts, feelings, perceptions and attitudes, well-being and self-care behaviours in a sample of middle-aged women who regularly engage in yoga in their communities. The sample included 22 women (age 45-64): 10 self-identified as beginners or novices, and 12 self-identified as experienced in yoga. Interpretive phenomenological analysis guided the data collection, analysis and interpretation. Four key themes were identified around the topics of: supportive yoga environment, mindfulness, self-care behaviours, and body-related perceptions. Results highlight potential elements of yoga that can support positive body-related experiences in middle-aged women. (RH)
ISSN: 08952841
From : <https://doi.org/10.1080/08952841.2021.1944752>

ARTS, CRAFT AND MUSIC

(See Also 267/20, 267/23)

- 267/7 Theatre production: a positive metaphor for dementia care-giving; by Christine Brown Wilson, Jan Hinson, Jacinda Wilson (et al): Cambridge University Press.
Ageing and Society, vol 43, no 1, January 2023, pp 89-104.
Language can shape and reinforce attitudes and stereotypes about living with dementia. This can happen through use of metaphors. However, common metaphors may not capture the complexity of experience of dementia from the perspective of the individual person or a family carer. This paper presents an alternative metaphor - that of a theatre production - based on the strategies used by carers to support people with dementia to live well in the community. The authors conducted face-to-face semi-structured interviews with 12 family members caring for someone with dementia in the community in Queensland, Australia. The aim was to explore the strategies these carers used to provide support. Interview recordings were fully transcribed and thematically analysed. The authors identified positive care-giving strategies that described multiple roles that carers fulfilled when feeling increasingly responsible for day-to-day decision making. Family carers explained how they supported the person with dementia to remain a central character in their lives and continued to support the person to be themselves. To achieve this, family carers embodied roles identified by the authors as similar to roles in a theatre production: director, stage manager, supporting cast, scriptwriter, and costume designer and wardrobe manager. By using a metaphor of a theatre production offers a fresh perspective in exploring the experience of informal care-giving in the context of dementia. (RH)
ISSN: 0144686X From : <https://doi.org/10.1017/S0144686X21000428>

ATTITUDES TO AGEING

- 267/8 The effects of social comparisons on subjective age and self-related health; by Maayan Sayag, Gitit Kave.: Cambridge University Press.
Ageing and Society, vol 42, no 9, September 2022, pp 2140-2153.
Older adults consistently report young subjective age and provide high ratings of their subjective health. This Israeli research examined which social comparisons older adults make when they assess their subjective age and health, as well as the effects of experimentally manipulated social comparisons on these assessments. In Study 1, 146 participants (aged 60 and over) reported to whom they compared themselves when assessing their subjective age or health. In Study 2, 100 participants (aged 60 and over) reported their subjective age and health after receiving feedback that compared them to younger adults or to their peers. Study 1 shows that participants compared themselves primarily to their peer group. Yet, individuals who selected a younger comparison group when assessing subjective age reported a younger subjective age, better self-rated health and more positive expectations regarding ageing relative to those who selected their peers as a comparison group. No equivalent differences emerged in any of the measures when participants were divided by their selection of comparison group after providing their self-rated health ratings. In Study 2, feedback that emphasised the performance of younger people led to reports of younger subjective age relative to feedback that emphasised peer performance, with no equivalent difference for self-rated health. These findings help explain why older adults feel younger and healthier than they actually are. The authors suggest that older adults use social comparisons as a strategy that protects them from the negative effects of ageing on self-perception. (RH)
ISSN: 0144686X From : <https://doi.org/10.1017/S0144686X20002056>

BEREAVEMENT

- 267/9 The gendered experience of social resources in the transition to late-life widowhood; by Linda Isherwood.: Cambridge University Press.
Ageing and Society, vol 43, no 3, March 2023, pp 689-705.
Social resources - close relationships, support exchange and social engagement - can play an important role in successful adjustment to widowhood in later life. However, it is not clear whether access to, and the utilisation of, social resources are different for men and women during late-life widowhood. This study provides a qualitative exploration of the experience of social resources in the lives of older widowed men and women across the transition to widowhood (from pre-widowhood to later widowhood). Using a life course theory lens, in-depth interviews were conducted with 20 widowed participants from the Australian Longitudinal Study of Ageing (ALSA). The interview data were analysed using the framework approach. Four phases in the transition to widowhood were identified: 'illness and caring'; 'relocation and separation'; early bereavement'; and 'life goes on'. Widowhood brings great change to the accessibility and utilisation of social resources, and each of these transitional phases was associated with differential usage of these resources. Gender differences were observed in the availability of social resources across the transition to widowhood, with widowed men typically found to have smaller friendship networks, receive less support, and be at increased risk of social isolation. Particular attention is required to ensure that all older widowed men and women have access to sufficient social support and contact following bereavement.
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BLACK AND MINORITY ETHNIC GROUPS

(See Also 267/79)

- 267/10 Access to health care among racialised immigrants to Canada in later life: a theoretical and empirical synthesis; by Shen (Lamson) Lin.: Cambridge University Press. *Ageing and Society*, vol 42, no 8, August 2022, pp 1735-1759. Evidence that immigrants tend to be underserved by the health-care system in the hosting country is well documented. While the impacts of immigration and migration on health-care utilisation patterns have been addressed to some extent in the existing literature, the conventional approach tends to homogenise the experience of racialised and White immigrants, the intersecting power axes of racialisation, immigration and old age have been largely overlooked. This paper aims to consolidate three macro theories of health and/or behaviours: Bronfenbrenner's ecological theory, the World Health Organization's paradigm of social determinants of health, and Andersen's Behavioral Model of Health Service Use. The aim is to develop and validate an integrated multilevel framework of health-care access tailored for racialised older immigrants. Guided by this framework, a narrative review of 35 Canadian studies was conducted. Findings reveal that racial minority immigrants' vulnerability in accessing health services are intrinsically linked to a complex interplay between racial-nativity status with numerous markers of power differences. These multilevel parameters range from socio-economic challenges, cross-cultural differences, labour and capital adequacy in the health sector, organisational accessibility and sensitivity, inter-sectoral policies, to societal values and ideology as forms of oppression. This review suggests that, counteracting a prevailing discourse of personal and cultural barriers to care, the multilevel framework is useful to inform upstream structural solutions to address power imbalances and to empower racialised immigrants in later life. (RH)
ISSN: 0144686X
From : <https://doi.org/10.1017/S0144686X20001841>
- 267/11 Older parents and filial support obligations: a comparison of family solidarity norms between native and immigrant populations in Italy; by Marco Albertini, Debora Mantovani.: Cambridge University Press. *Ageing and Society*, vol 42, no 11, November 2022, pp 2556-2587. Although older migrants in Southern Europe are increasing in number, relatively little attention has been paid to their care needs and resources. The availability of informal care is an important determinant of well-being in later life, and norms regulating filial obligations have an important role in affecting the quality and quantity of support received. Using data from a qualitative survey conducted in Bologna province, Italy, this article sheds light on the social norms regulating filial obligations towards older parents among natives and three groups of immigrants: Maghrebi, Chinese and Filipinos. The results indicate a number of commonalities between the four different groups considered, such as: the principle of delayed reciprocity at the basis of filial support obligations; a gender bias in attributing the most psychologically, physically and time-demanding caring obligations to adult daughters and daughters-in-law; and a preference for intergenerational residential autonomy shared by Italian, Filipinos and, to a lesser extent, Maghrebi respondents. At the same time, numerous differences emerge between natives and immigrants, and between immigrant groups. The most significant differences are observed regarding: the possibility of resorting to a paid care-giver, which is more common among Italians and, to a lesser extent, Filipino respondents; and a stronger gender bias among the Chinese and Maghrebi groups, i.e. they attribute the majority of personal care responsibilities to daughters and daughters-in-law. (RH)
ISSN: 0144686X
From : <https://doi.org/10.1017/S0144686X21000106>

CARERS AND CARING

(See Also 267/1, 267/65)

- 267/12 Are Australians willing to pay more tax to support wage increases for aged care workers?: Findings from a national survey; by Matthew Crocker, Rachel Milte, Gordon Duff (et al.): Wiley. *Australasian Journal on Ageing*, vol 41, no 4, December 2022, pp 513-521. The aim of this study was to explore public perceptions regarding Australia's aged care workforce, including their willingness to pay more tax to fund better pay and conditions for aged care workers. An online survey was developed and administered to a representative sample of Australian adults aged over 18 by age group, gender and Australian state. Survey respondents completed a series of attitudinal statements to elicit their perceptions of the value of Australia's aged care workforce and were asked to indicate their willingness to pay more tax to fund better pay and conditions for aged care workers. Those who gave a positive response were then asked to indicate what percentage of additional tax per year they would be willing to pay to ensure better pay and conditions for said workers. A total of 2,033 adult respondents completed the survey. A majority (78%) of respondents either 'agreed' or 'strongly agreed' that aged care workers should be paid more. Approximately half of the respondents (50.57%) expressed a willingness to pay more tax to ensure better pay and conditions for aged care workers. The mean

willingness to pay was 1.31% additional tax overall, and mean percentage additional tax values were relatively consistent across key socio-demographic indicators. A majority of the Australian public are in favour of improving the wages and employment conditions of aged care workers. However only one in two Australians is willing to pay more tax to ensure better pay and conditions for them. (JL)

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From : <https://doi.org/10.1111/ajag.13094>

- 267/13 Functional difficulties and toileting among older adults in Ghana: evidence from the World Health Organization Study on global AGEing and adult health (SAGE) Ghana Wave 1; by Kofi Awuviry-Newton, Kofi Awuviry-Newton, Kylie Wales, Meredith Tavener, Paul Kowal, Julie Byles.: Cambridge University Press.

Ageing and Society, vol 43, no 1, January 2023, pp 53-75.

Ghana's older population is projected to increase in the coming decades, and as a result will see increasing care needs. Understanding the functional difficulties and associated factors older adults experience will help identify relevant interventions to assist older adults in meeting their care needs. This study analyses the prevalence of functional difficulties experienced by older Ghanaians. It also examines how the World Health Organization International Classification of Functioning, Disability and Health (WHO-ICF) conceptual framework can relate to toileting difficulty, to understand the factors that increase older adults' care needs. Data were for 5,096 adults aged 50+ from the WHO Study on global AGEing and adult health (SAGE) Ghana Wave 1. Difficulties were assessed using self-reported difficulty on 22 functional items, including toileting. Multivariate logistic regression tested associations between toileting and other factors as related to the WHO-ICF conceptual framework. Older adults reported climbing one flight of stairs without resting as a common functional difficulty. Difficulty eating was the item least identified. Toileting difficulty was ranked second among five total activities of daily living (ADL) difficulties. Age, marital status, self-reported health, memory, bodily pain, short- and far-distance vision, obesity, stroke, chronic lung disease, trust at individual and neighbourhood level, toilet facility type, socialising with co-workers, and public and religious meeting attendance were statistically significantly associated with toileting difficulty in the final parsimonious model. Post-hoc analysis testing interaction revealed that interaction existed between female sex and never married marital status ($p = 0.04$), and obesity and widowed marital status ($p = 0.01$), with toileting as the outcome. A significant level of functional difficulty existed among Ghanaian older adults in this sample. Toileting difficulty was associated with factors across different components in the WHO-ICF, emphasising functional, social and environmental factors related to this fundamental human activity. (RH)

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From : <https://doi.org/10.1017/S0144686X21000453>

- 267/14 The global care network and its impact on sending and receiving countries: current knowledge and future directions; by Liat Ayalon.: Cambridge University Press.

Ageing and Society, vol 42, no 10, October 2022, pp 2244-2261.

Research concerning the effects of migrants on elder care in affluent receiving countries has been substantial, but we know little about the effects of migrant care on elder care in sending countries. There also is limited research on elder care in the context of the return migration of migrant care workers. This theoretical article explores the potential relevance of a social network perspective, which views individuals and countries as being interconnected, even when they are miles apart. A multi-level framework that considers macro-, meso- and micro-level perspectives is introduced to better account for current migrant care arrangements. The macro-level perspective takes into account country-level characteristics including policies, geography and cultural preferences; the meso-level perspective takes into account the characteristics of the entire network, which may spread over different countries; and the micro-level perspective concerns the unique characteristics of the individuals who make up the network. This approach proposes that the effects of migrant home care go way beyond the care recipient - care-giver dyads or triads to incorporate many individuals and countries that are transnationally interconnected via the work of care. This article also aims to increase public and scientific awareness to the potential impact of migrant care and return migration on elder care in the sending countries by stressing a transnational social network perspective. (RH)

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From : <https://doi.org/10.1017/S0144686X21000027>

- 267/15 Understanding unmet aged care need and care inequalities among older Australians; by Trish Hill.: Cambridge University Press.

Ageing and Society, vol 42, no 11, November 2022, pp 2665-2694.

In Australia, numerous reviews and inquiries have documented concerns about inadequate access to, and the quality of, aged care. Despite those concerns, research is yet to appraise fully how care needs are assessed, prioritised and met or left unmet. This paper asks two interrelated questions: (1) How should we conceptualise and measure unmet care need and care inequalities among older people? (2) What are the policy parameters for assessing needs, prioritising access to support and monitoring quality in aged care in Australia? Key insights from academic literature are used to critically review Australian policy documents describing rights, assessments, prioritisation, quality standards and performance indicators

for the aged care sector. Using the concepts of care inequalities and care poverty, the paper develops a framework for understanding and measuring needs and unmet needs in aged care, and for encompassing fundamental and valued aspects of life for older people, their carers and their care network. The paper argues that the concept of care poverty opens the space to discuss what level of unmet need and inequality in access to aged care in any society may be considered intolerable. (RH)

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From : <https://doi.org/10.1017/S0144686X21000222>

CONSUMER PERSPECTIVES

267/16 Ageing consumers and e-commerce activities; by Maria Rybaczewska, Leigh Sparks.: Cambridge University Press.

Ageing and Society, vol 42, no 8, August 2022, pp 1879-1898.

Technology, and particularly the internet, has transformed consumer and business behaviours. An ageing population is impacted by these contextual and operational changes. Understanding these impacts within an ageing population is important for businesses, organisations and individuals, and their e-commerce activities. This study increases understanding about the online behaviour of older consumers. The authors' research question is: What is the impact of age and individual and household characteristics on the online behaviour of older consumers? This is important, given the increasing assumption that all consumers are digitally enabled. The authors use data from the first wave of an innovative longitudinal study in Scotland (HAGIS - Healthy Ageing in Scotland) to explore ageing consumers and e-commerce activities. The United Kingdom (including Scotland) is the world's third largest e-commerce market, thus providing a suitable context. The authors' findings point to a shifting relationship between ageing consumers and e-commerce activities. Age is related to e-commerce activities, but the 'break-point' for these activities is older than normally identified in academic and business practice. Sex is not a differentiator of activity, but marital status is. Age and the contextual situation have an impact on e-commerce, and have implications for access and capability, and link to questions over isolation. Important issues are raised for business and organisational practice, around service and other delivery for older people. (RH)

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From : <https://doi.org/10.1017/S0144686X20001932>

COVID-19

(See Also 267/21, 267/49, 267/93)

267/17 COVID-19 and mental health: impact on symptom burden in older people living with mental illness in residential aged care; by Eleanor Curran, Liam Nalder, Digsu Koye (et al).: Wiley.

Australasian Journal on Ageing, vol 41, no 4, December 2022, pp 522-529.

COVID-19 related restrictions for residential aged care (RAC) have been significant. However the mental health impacts for residents already living with mental illness remain poorly understood. This Australian study aimed to examine change in mental health symptom burden for this group and potential associations with clinical and contextual factors.

The study retrospectively reviewed medical records of patients of a specialist aged mental health clinical service for RAC. Change in symptoms (measured by the Neuropsychiatric Inventory, Nursing Home version [NPI-NH]) between pre-pandemic and two pandemic time points were analysed using Wilcoxon signed-rank tests. Potential associations with baseline diagnosis or severity of 'lockdown' restrictions in RAC were assessed using linear regression. Data from 91 patient files were included. The median NPI-NH score slightly increased during wave one and fell during wave two, but changes were not statistically significant. Adjusting for age and gender, an association between neurocognitive disorder diagnosis and NPI-NH score during wave one was statistically but not clinically significant. No other significant associations were identified. Accounting for pre-pandemic symptoms, the study found no clinically relevant evidence of worsening mental health during COVID-19 for a group of older people living with mental illness in RAC. This adds to evidence of relatively stable mental health in older people during the pandemic. Research and policy should consider underpinning mechanisms and emphasise patient- and carer-centred interventions. (JL)

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From : <https://doi.org/10.1111/ajag.13042>

267/18 Impact of social isolation due to COVID-19 on vulnerable geriatric population: a study of physical and psychological wellbeing; by Purvi Pujari, Anuj Kumar, Pranjali Pujari.: Emerald. Working with Older People, vol 27, no 1, 2023, pp 69-74.

In this study, researchers in India aimed to gain a deeper understanding of the impact of social isolation due to COVID-19 on the vulnerable geriatric population. Ten individual interviews and observation of people aged 70+ were conducted in 2021. The geriatric population faced physical challenges such as poor sleep and digestive health along with neglect of their persisting ailments, which needed attention. Mental issues - such as fear of death, anxiety, stress and depression - were also very serious. This paper urges policymakers to focus on coming up with support systems for the geriatric population, and finding

long-term solutions to mitigate the repercussions faced by them. This paper attempts to underline the mostly unnoticed physical and psychological issues troubling a usually neglected section of the population, since they do not constitute an income-earning segment. (RH)

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CRIME

(See 267/78)

DEMENCIA

(See Also 267/75)

- 267/19 A multiple perspective view of personhood in dementia; by Niamh Hennelly, Eamon O'Shea.: Cambridge University Press.

Ageing and Society, vol 42, no 9, September 2022, pp 2103-2121.

Personhood has been a key influence on the development of person-centred care models in dementia. However, there is ambiguity around the concept and interpretation of personhood, and what it means in practical terms for the delivery of care to people with dementia. This study examines the conceptualisation of personhood within the formal care system for people with dementia in Ireland. A multiple perspective study design examines the experiences of personhood in dementia from the perspectives of people with dementia, family carers and a range of formal carers. Semi-structured interviews with participants were conducted in both community and long-term care settings. Interpretative phenomenological analysis is used to examine the data. A total of 31 participants were interviewed: eight people with dementia, eight family carers and 15 formal carers. There is general consensus on the core elements of personhood among all participants: interests and preferences; lifecourse experiences; social interaction; family; and place. However, there is ambiguity among family carers and formal carers in the interpretation of changes to personhood as the disease progresses. Interpersonal and structural barriers to supporting personhood are identified by all participants. The findings provide guidance on the traits of personhood-enhancing care, including effective communication skills, and the potential of health and social care reform to support the core elements of personhood among people with dementia. (RH)

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From : <https://doi.org/10.1017/S0144686X20002007>

DEMENCIA CARE

(See Also 267/7)

- 267/20 Art, authenticity and citizenship for people living with dementia in a care home; by Julian C Hughes, Jordan Baseman, Catherine Hearne, Mabel Leng Sim Lie, Dominic Smith, Simon Woods.: Cambridge University Press.

Ageing and Society, vol 42, no 12, December 2022, pp 2784-2804.

This paper reports on a study which examined the notions of authenticity and citizenship for people living with cognitive impairment or dementia in a care home in the North-East of England. The authors demonstrate that both notions were present; and they were encouraged by engagement with an artist, where this involved audio and visual recordings and the creation of a film. The artist's interactions were observed by a non-participant observer using ethnographic techniques, including interviews with the residents, their families and the staff of the care home. The data were analysed using grounded theory and the constant comparative method of qualitative analysis. The authors' findings suggest that participatory art might help to maintain and encourage authenticity and citizenship in people living with dementia in a care home. Certainly, authenticity and citizenship are notions worth pursuing in the context of dementia generally, but especially in care homes. (RH)

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From : <https://doi.org/10.1017/S0144686X21000271>

- 267/21 Caring for a person with dementia during the COVID-19 pandemic: a qualitative study with family care-givers; by Sabrina Cipolletta, Benedetta Morandini, Silvia Caterina Maria Tomaino.: Cambridge University Press.

Ageing and Society, vol 43, no 3, March 2023, pp 535-555.

The authors explored the experience of family care-givers of people with dementia during the COVID-19 pandemic in the Veneto region of Italy, to understand how and the extent to which the emergency has affected care-givers' lives and care routines. Twenty adult children of an ill person were interviewed via phone and video call, in adherence with the restrictions against COVID-19. Thematic analysis showed five main themes: the care-giver's experience, the care recipient's experience, relationships with care recipients, changes in the care routine and resources. Results pointed out that the time needed in the care routine and everyday activities increased during the pandemic, together with the

need to find alternatives to physical activity at home. Depending on one's personal experience of COVID-19 and approach to preventive rules, the availability of resources, and formal and informal support, three main approaches to care were identified: apprehensive, mindful and fatalistic ones. The pandemic amplified the differences between these already-existing approaches to care as well as the typical challenges and difficulties experienced by family care-givers; and it resulted in an increased burden connected to practical difficulties, emotional stress and difficulties in reaching for help. These results underline the importance of strengthening the external support network for older people to help family care-givers, especially during emergencies. (RH)

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267/22 Experiences of stigma and discrimination among people living with dementia and family carers in Brazil: qualitative study; by Deborah Oliveira, Fabiana Araujo Figueiredo Da Mata, Elaine Mateus (et al).: Cambridge University Press.

Ageing and Society, vol 43, no 2, February 2023, pp 447-468.

A critical narrative inquiry methodology was used in this study which aimed to understand stigma in relation to people living with dementia in Sao Paulo, Brazil. Home-based semi-structured interviews were conducted between January and March 2020 with six people living with dementia and 15 family carers. Data analysis was conducted using inductive and deductive techniques. The latter was informed by Link and Phelan's sociological theory of stigma. The authors found that dementia was commonly viewed by people living with dementia as part of ageing, and carers reported low levels of knowledge and awareness about the condition. To avoid negative reactions from others, those living with dementia managed the negative views of dementia by minimising and normalising the condition, by expressing their ability to live an active life, and by emphasising the positive impacts of dementia in their lives. Fear of negative reactions appeared to lead to a selective disclosure of their diagnosis. Among carers, stigmatising attitudes coincided with a strong willingness to provide good care, to protect the person cared for, as well as to understand and validate their own caring experiences, rather than to cause any harm. In doing so, however, carers ended up depersonalising and infantilising people living with dementia, underestimating their capacities, demanding 'obedience', and restricting the person's freedom. There is a need to increase awareness about dementia, and to provide support and training on person-centred and ethical care for carers in Brazil. (RH)

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267/23 In the moment with music: an exploration of the embodied and sensory experiences of people living with dementia during improvised music-making; by Robyn Dowlen, John Keady, Christine Milligan, Caroline Swarbrick, Nick Ponsillo, Lucy Geddes, Bob Riley.: Cambridge University Press.

Ageing and Society, vol 42, no 11, November 2022, pp 2462-2664.

The term 'in the moment' has received growing interest in the context of music programmes for people living with dementia. Indeed, music therapists, family carers, health-care professionals and people living with dementia themselves report the value of framing musical experiences in the 'here and now'. Although this term is being used more frequently within the literature, there has yet to be a formal examination of such 'in the moment' musical experiences and how they might benefit a person living with dementia. The authors used a multiple-case study approach to develop a thematic framework of 'in the moment' musical experiences within the context of Manchester Camerata's Music in Mind, a music-making programme for people living with dementia. The research followed six people living with dementia and four family carers, and used video-observation and video-elicitation interviews to capture and analyse 'in the moment' experiences. Four thematic observations were developed which captured 'in the moment' musical experiences: Sharing a life story through music; Musical agency 'in the moment'; Feeling connected 'in the moment'; and Musical ripples into everyday life. These findings showcase the creativity and musical abilities of people living with dementia, whilst affirming music as a medium to connect people living with dementia with their own life story, other people and the environments in which music-making takes place. (RH)

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267/24 Re-imagining care transitions for people with dementia and complex support needs in residential aged care: using co-designed sensory objects and a focused ethnography to recognise micro transitions; by Louisa Smith, Lyn Phillipson, Pat Knight.: Cambridge University Press.

Ageing and Society, vol 43, no 1, January 2023, pp 1-23.

The concept of transition is often used in health and life-course research to understand a significant movement from one state or place to another. While people with dementia experience more major transitions than their peers, they are often excluded from transitional care research. This study set out to develop meaningful transitional supports for people with dementia and complex support needs who were undertaking a significant planned geographical transition from their current residential aged care facility to a new purpose-built facility. Using the language of complex support needs acknowledges that participants in this Australian study have a breadth and depth of need, including cognitive, physical, psycho-social and communication impairments and social and cultural disadvantage associated with

ageing, institutionalisation and social isolation. To support their move, Participatory Action Research was used to support the co-creation of transitional objects (personalised scarves and blankets) with 15 people with dementia, their families and care staff. Whilst these objects were useful in supporting transition, it was not in the way we imagined. Whilst our initial focus had been on supporting a significant geographical transition, rather it was four types of micro transitions in which the transitional objects were used: small physical transitions (from one place to another); social transitions (entering or exiting personal interactions); activity transitions (moving between activities); and time travel (moving between different times). Reimagining transitions from the perspective of people with dementia and complex support needs involves the recognition of the need for supports for micro as well as macro transitions. Personalised objects to support these everyday micro transitions have the potential to make the lives of people with dementia and complex support needs more manageable, meaningful and comprehensible. Reimagining transitions in dementia in this way helps us reimagine dementia itself, as a constantly fluid, dynamic and responsive series of moments which also has implications for the re-imagination of dementia care. (RH)

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DIET AND NUTRITION

- 267/25 Determinants of food insecurity among elderly people: findings from the Canadian Community Health Survey; by Moses Mosonsieyire Kansang, Yujiro Sano, Isaac Bayora (et al).: Cambridge University Press.

Ageing and Society, vol 42, no 9, September 2022, pp 2067-2081.

Food insecurity among older people is a major public health concern due to its association with several health conditions. Despite growing research and implementation of diverse income-based policy measures, food insecurity among older people remains a major policy issue in Canada. Additional research could inform food policy beyond strategies that target improving older people's financial resources. Drawing data from the Canadian Community Health Survey (N = 24,930), the authors explored the correlates of food insecurity among older adults using negative log-log logistic regression techniques. Their findings show that certain categories of older people are more prone to food insecurity. These segments include seniors who are visible minorities (OR = 1.29, p 0.01), live alone (OR = 1.13, p 0.05), have a very weak sense of community belonging (OR = 1.40, p 0.001), in poor physical health (OR = 1.20, p 0.01), and those in lower age and income categories. These findings corroborate previous studies that demonstrate that food insecurity among older people is a complex phenomenon influenced by diverse socio-economic factors. In Canada, food security policies targeted at older people have largely prioritised poverty alleviation through income support programmes. While these programmes can improve older people's purchasing power, they may not be sufficient in ensuring food security. There is a need to embrace and further investigate an integrated approach that pays attention to other contextual socio-economic dynamics. (RH)

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From : <https://doi.org/10.1017/S0144686X20002081>

- 267/26 Family involvement in low-salt diet for hypertensive older adults; by Suhamo Usman, Andi Masyitha Irwan, Rosyidah Arafat.: Emerald.

Working with Older People, vol 27, no 1, 2023, pp 1-14.

The effect of family involvement in educational sessions and follow-up meetings on compliance with the low-salt diet for hypertensive older adults are examined. A randomised controlled trial (RCT) was used in this Indonesian study of 30 hypertensive older adults divided into two groups (n = 15). The intervention group involved one family member during the educational sessions and follow-up meetings. Conversely, no family member was involved in the control group. The intervention group showed a significant (p 0.05) increase in compliance level on the attitude (knowledge) and subjective norm (psychomotor and family support) sub-scales. The perceived obstacle sub-scale and the salt concentration in food and urine excretion significantly decreased both after educational sessions and follow-up meetings (p 0.05). However, the control group did not. A relatively small number of samples would have affected the results, but randomisation was applied in sample collection in this study. Encouraging family members' involvement in educational sessions and follow-up meetings could enhance compliance of low-salt diet among hypertensive older adults. The findings and outputs provide a combination of family involvement and the Geragogy learning model through educational sessions and follow-up meetings that could enhance a low-salt diet adherence among older adults with hypertension in the community. (RH)

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EDUCATION AND TRAINING

- 267/27 Increasing autonomy through improved care: effects of a professional care-giver training programme on the functional status of older adults; by Elena Navarro, Miriam Sanjuan, M Dolores Calero.: Cambridge University Press.
Ageing and Society, vol 43, no 2, February 2023, pp 324-341.
The aim of this Spanish research was to evaluate the effectiveness of a care-giver training programme that trains professional care-givers in cognitive stimulation strategies for functional maintenance in care-dependent older adults. The sample contained 69 older adults (37 in the treatment group, 32 control group) assessed with the Barthel Index, the Mini-Mental State Examination (MMSE) and the Clifton Assessment Procedure for the Elderly (Cognitive Scale). Participants in the treatment group were treated by professional care-givers who were trained with the programme CUIDA-2, in communication and cognitive stimulation strategies. The CUIDA-2 programme also trains care-givers in strategies relating to physical and emotional stimulation. The programme is based on the model of person-focused care, and uses mediation-based methodology, with guidelines for care-givers on how to train older adults as part of their day-to-day care-giving. The results from the Barthel Index showed significant differences in the post-intervention assessment and in the follow-up assessment, where the treatment group obtained higher scores; and there were significant differences within the treatment group between the initial assessment and the post-treatment assessment, as well as between the initial assessment and the follow-up. The data obtained reflect that a training programme to train professional care-givers produced functional benefits in the older adults, and these improvements persisted over time. Moreover, the care-givers saw themselves as more competent and more satisfied with their work. (RH)
ISSN: 0144686X
From : <https://doi.org/10.1017/S0144686X21000519>
- 267/28 The neoliberal university, social work and personalised care for older adults; by Malcolm Carey.: Cambridge University Press.
Ageing and Society, vol 42, no 8, August 2022, pp 1964-1978.
This article critically examines the impact of the neoliberal university on social work education, research and practice relating to older people. This article appraises market-led pedagogical reforms, including of the training of social workers who go on to work with older adults, such as in support of policies including personalisation. Influence is drawn from the work of Nancy Fraser, specifically her understanding of 'progressive neoliberalism', or the improbable fusion of free market ideals with the politics of recognition to create a rejuvenated hegemonic bloc. This theoretical framework is utilised to analyse the prevalence of emancipatory constructs such as empowerment, participation, anti-oppression, equality, choice and independence within the acutely underfunded, bureaucratic and risk-averse fields of social care and social work. While benefiting some older 'service users', it is argued that personalisation policy regularly disadvantages or excludes older people within fragmented adult social care sectors. Progressive neoliberalism has helped to promote supply-led training and policies which envisage participative and asset-based self-care, whilst more often excluding or objectifying older adults, especially those with higher-level needs. (RH)
ISSN: 0144686X
From : <https://doi.org/10.1017/S0144686X20001919>
- 267/29 A qualitative exploratory study of training requirements for general practitioners attending older people resident in care homes; by Sarah Ruaux, Neil Chadborn.: Emerald.
Journal of Integrated Care, vol 31, no 1, 2023, pp 64-74.
Older people living in care homes have varying access to and quality of medical care; in the UK, this is provided by general practitioners (GPs). The authors explored the experiences of trainee GPs in delivering integrated care, and discussed with senior GPs, opportunities to improve training. Two trainees and 13 senior GPs were recruited through professional networks and participated in semi-structured interviews. Transcriptions were analysed using thematic analysis, and the theory of negotiated order was used to interpret findings. Trainees received no specific training on working with care homes. Exposure to the care home setting was variable, and could be negligible, depending on the GP practice placement. Senior GPs expressed concerns about patient safety, due to practical challenges of the consultation and a sense of lack of control. In considering the theory of negotiated order, where GPs had trusting relationships with care home staff, input from staff could mitigate the sense of risk. Care plans could communicate needs and preferences within the team and may be a way of extending the negotiated order, for example giving care homes authority to implement end-of-life care when the GP is not present. The authors identified a need for trainees to engage with the organisational aspect of the care home to deliver integrated care. Trusted relationships with staff led to improved consultations, care plans and better management of risk. This study of learning needs for GP trainees to provide integrated care for older care home residents suggests that complex multidisciplinary relationships are an important part of good quality care, and that the experience of these ways of working should be part of GP training. (RH)
ISSN: 14769018
From : <https://doi.org/10.1108/JICA-11-2021-0060>

EMPLOYMENT

(See Also 267/41, 267/73)

- 267/30 'We don't talk about age': a study of human resources retirement narratives; by Rebecka Arman, Roland Kadefors, Ewa Wikstrom.: Cambridge University Press.
Ageing and Society, vol 42, no 11, November 2022, pp 2588-2614.
At the societal and policy level, delaying retirement is generally agreed upon to solve the problem of the increasing proportion of older workers in Sweden, as in many other countries. At the same time, two co-existing narratives that create legitimacy for early versus delayed retirement were found in this study, among both societal- and organisational-level actors. Older workers are viewed as either representatives of productive ageing and a solution to labour shortage problems, or as a barrier to recruiting younger, more promising employees with new skills. Through inductive qualitative analysis, this study shows in what way human resources departments are taking part in the institutional work of maintaining retirement-timing narratives in Swedish workplaces. The existing general organisational narrative of 'the business case' is used to mute discussion about delaying the retirement age, except for a select few. Their maintenance of this narrative is supported by the way in which the societal-level narratives target the individual, often backgrounding the role of employers. (RH)
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From : <https://doi.org/10.1017/S0144686X21000246>

END-OF-LIFE CARE

- 267/31 Dying in place: factors associated with hospice use in assisted living and residential care communities in Oregon; by Taylor Bucy, Paula Carder, Ozcan Tunalilar.: Taylor and Francis.
Journal of Aging and Environment, vol 36, no 4, October-December 2022, pp 339-356.
Hospice use among assisted living residents may support ageing in place. A cross-sectional survey was used to characterise variation in the health and personal care needs of Oregon assisted living and residential care (AL/RC) residents who did and did not receive hospice services. All AL communities licensed in Oregon as of fall 2019 were asked to answer questions about three randomly selected residents. A final sample of 998 residents was included in the analysis. Multiple variable logistic regression was used to examine associations between resident- and community-level characteristics and hospice use. While hospice services provide supplemental support for AL residents' end-of-life process, the survey's findings show that residents often receive continued assistance from AL staff as their condition deteriorates. (RH)
ISSN: 26892618 From : <https://doi.org/10.1080/26892618.2021.1942382>

FAMILY AND INFORMAL CARE

(See Also 267/26)

- 267/32 Adult children's gender, number and proximity and older parents' moves to institutions: evidence from Sweden; by Alyona Artamonova, Maria Branden, Brian Joseph Gillespie, Clara H Mulder.: Cambridge University Press.
Ageing and Society, vol 43, no 2, February 2023, pp 342-372.
Older people's ability to thrive independently of their adult children is an important feature of a universal welfare system. However, population ageing puts this notion under stress. In separate multinomial logistic regression models for older men and women, the authors examined whether adult children's gender, number and proximity were associated with older parents' relocations into residential care facilities, and whether the effects of these children's characteristics on older parents' institutionalisation vary by parents' severe health problems, operationalised as closeness to death - specifically, dying within the two-year observation period. Analyses were based on Swedish register data between 2014 and 2016 (N = 696,007 person-years). Older parents with at least one co-resident child were less likely to move or become institutionalised than those without a co-resident child. The authors did not find a relationship between older adults' institutionalisation and the closest child's gender. The negative effect of having a non-resident child living nearby on the likelihood of becoming institutionalised was more pronounced for mothers than fathers. Having a child nearby decreased the likelihood of moving to an institution more for mothers who had severe health problems than for those in better health. No evidence was found of a relationship between number of children and likelihood of institutionalisation. (RH)
ISSN: 0144686X From : <https://doi.org/10.1017/S0144686X21000556>
- 267/33 Geographic distance and social isolation among family care-givers providing care to older adults in Canada; by Lun Li, Andrew Wister.: Cambridge University Press.
Ageing and Society, vol 43, no 2, February 2023, pp 298-323.
Family care-giving is associated with social isolation, which can lead to adverse health and well-being outcomes among family care-givers. The role of geographic distance in care-giver social isolation (CSI) is unclear and has received mixed research findings. Framed by the Ecological Model of Caregiver Isolation, this study examined the relationship between geographic distance and CSI, including the

interaction between geographic distance and care-giving intensity for CSI. Linear regression and analysis of covariance were used to test these hypotheses using a sub-set of family care-givers from the 2012 Canadian General Social Survey (N = 2,881). Care-givers living a short distance from receivers reported lower levels of social isolation than co-resident, moderate-distance and long-distance care-givers. Being involved in higher-intensity care-giving as the primary care-giver, undertaking more care-giving tasks and providing care more frequently resulted in higher CSI scores. Long- and moderate-distance care-givers reported greater CSI than co-resident and short-distance care-givers only when providing higher-intensity care-giving. Employing a granulated measure of geographic distance positioned within an ecological framework facilitates an understanding of the nuanced association between geographic proximity and CSI. Furthermore, the identified interaction effects between geographic distance and care-giving intensity on CSI further explicate the complexity of care-giving experiences. The findings are relevant for programmes supporting care-givers in different contexts, especially distance care-givers. (RH)

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From : <https://doi.org/10.1017/S0144686X2100060X>

FRAILITY

267/34 A cross-cultural investigation of the conceptualisation of frailty in northern Tanzania; by Emma G Lewis, Jane Rogathi, John Kissima (et al.): Cambridge University Press.
Ageing and Society, vol 43, no 1, January 2023, pp 127-160.

Frailty prevalence is higher in low- and middle-income countries (LMICs) compared with high-income countries when measured by biomedical frailty models, the most widely used being the frailty phenotype. Frailty in older people is becoming of global public health interest as a means of promoting health in old age in LMICs. As yet, little work has been done to establish to what extent the concept of frailty, as conceived according to 'western' biomedicine, has cross-cultural resonance for a low-income rural African setting. This study aimed to investigate the meaning of frailty contextually, using the biomedical concept of the frailty phenotype as a framework. Qualitative interviews were conducted with a purposive sample of older adults, their care-givers and community representatives in rural northern Tanzania. Thirty interview transcripts were transcribed, translated from Kiswahili to English and thematically analysed. Results reveal that despite superficial similarities in the understanding of frailty, to a great extent the physical changes highlighted by the frailty phenotype were naturalised, except when these were felt to be due to a scarcity of resources. Frailty was conceptualised as less of a physical problem of the individual, but rather, as a social problem of the community, suggesting that the frailty construct may be usefully applied cross-culturally when taking a social equity focus to the health of older people in LMICs. (RH)

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267/35 How latent patterns of interprofessional working may lead to delays in discharge from hospital of older people living with frailty: 'Patient more confused than usual?'; by Sabi Redwood, Heather Brant, Adriano Maluf (et al.): Cambridge University Press.
Ageing and Society, vol 43, no 3, March 2023, pp 576-597.

Unnecessarily delayed discharges from hospital of older people living with frailty can have negative consequences for their health and add significant costs to health services. The authors report on an ethnographic study at two English hospitals and their respective health and social care systems, in which 37 patient journeys were followed. The study's aim was to understand why delays occur. The findings indicate that working practices in the study hospitals may have inadvertently contributed to delays. While many pieces of patients' clinical and social information were collected, recorded and accessed in different ways by different professionals, to facilitate a discharge, these pieces needed to be re-found, integrated and re-constructed. A key component of this process was information related to patients' social, family and functional background. This was often missing, not accessed, or perceived to be of low value compared to other more readily available clinical information. Re-construction of patients' situations was thus often incomplete, or insufficient to reduce the clinical and prognostic uncertainty associated with frailty, or to manage risks inherent in older people's discharge. Where this key component was present and integrated into decision-making in multi-disciplinary team working, uncertainty and risk were managed more constructively and sometimes avoided an escalation of care needs. (RH)

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GRANDPARENTS

267/36 Does grandparental child-care provision affect number, satisfaction and with whom leisure activities are done?; by Merih Ates, Valeria Bordone, Bruno Arpino.: Cambridge University Press.
Ageing and Society, vol 42, no 10, October 2022, pp 2370-2392.

This study investigates the impact of non-intensive and intensive supplementary grandparental child care on grandparents' involvement in leisure activities. Three aspects of leisure activities are investigated: the number and frequency of activities, with whom they are carried out, and the subjective satisfaction with them. Beside the possibility of a cumulation effect, the literature suggests that providing

grandparental child care might compete with other activities, especially for women. Thus, the authors consider role enhancement and role strain theories to derive their hypotheses. They use longitudinal data from the German Ageing Survey (DEAS) which contains rich information on the leisure activities of people aged 40 and older. To account for selection into the provision of grandparental child care, a within-unit estimation approach (fixed-effects panel models) is used. Results show that both grandfathers and grandmothers tend to engage in more leisure activities when they provide grandparental child care. While care-giving grandfathers become more likely to engage in activities with family members without changing their engagement outside the family, no effect was for women in this respect. Nevertheless, grandparental child-care provision modifies satisfaction with leisure activities only for women, reducing it, independently from with whom leisure activities are carried out. These findings suggest that a higher quantity of leisure activities does not necessarily imply higher quality. (RH)

ISSN: 0144686X

From : <https://doi.org/10.1017/S0144686X2100009X>

- 267/37 Grandmothers raising grandchildren: managing, balancing and maintaining family relationships; by Elizabeth M Tracy, Rashon Braxton, Christina Henrich (et al.): Taylor and Francis. *Journal of Women and Aging*, vol 34, no 6, July-December 2022, pp 757-772.

Most grandparents raising grandchildren are embedded in a network of family members who either help them carry out the caregiving task or complicate that role. This study examined how grandmothers described family relationships, that is, with the grandchild's parents, grandmother's spouses and/or partners, and other relatives. Data were drawn from 457 weekly journal entries submitted by 129 grandmother caregivers. Using thematic analysis, a three-person team coded using NVIVO 12. Grandmothers described three overarching relationship themes: managing conflicted relationships with the grandchild's parents; balancing relationships with their spouse or partner; and maintaining relationships with other relatives. Implications for practice are provided. (RH)

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From : <https://doi.org/10.1080/08952841.2021.1951114>

HEALTH AND WELLBEING

(See Also 267/27, 267/62, 267/67)

- 267/38 Constructions of older people's identities in Indonesian regional ageing policies: the impacts on micro and macro experiences of ageing; by Made Diah Lestari, Christine Stephens, Tracy Morison.: Cambridge University Press.

Ageing and Society, vol 42, no 9, September 2022, pp 2046-2066.

As Indonesia experiences rapid growth of its ageing population, the government's attention has turned to older people's well-being. This study aims to review critically the construction of older people's identity and care within regional ageing policies in Indonesia.

Working from a critical gerontology perspective, a critical discourse analysis of 16 regional ageing policies identified two constructions, labelled 'material' and 'cultural' ageing, which were used to position older people. The analysis showed that 'material ageing' positions older people at the intersection of 'decline' and 'successful ageing' discourses, while 'cultural ageing' positions older people's welfare at the intersection of 'public responsibility' and 'family obligation' discourses. These discursive constructions in the policy documents have both micro (interpersonal) and macro (structural) constructive effects. At the micro-level, the regional ageing policies stand at a crossroad between empowering and marginalising older people and their families. While the dominant discourse of 'successful ageing' encourages older people to be healthy, it marginalises those who do not, or cannot, meet its criteria, undermining a rehabilitative approach as a policy priority. In addition, the rights of the family are overlooked, despite being a pivotal element of cultural ageing. At the macro level, a moral dilemma appears in defining the public and private domains of older people's welfare. Eligibility requirements for state assistance (due to budgetary constraints) ensure that elder care is often relegated to the private sphere, without support. Recommendations for policy improvement are discussed, including the recognition of families' rights and the importance of local cultural practices in providing care for older people. (RH)

ISSN: 0144686X

From : <https://doi.org/10.1017/S0144686X20001907>

- 267/39 Life satisfaction among older adults in urban China: does gender interact with pensions, social support and self-care ability?; by Mengni Chen, Yaunyuan Fu, Qingsong Chang.: Cambridge University Press. *Ageing and Society*, vol 42, no 9, September 2022, pp 2026-2045.

In urban China, the social welfare system and the family structure have changed dramatically, while gender norms are still deep-rooted, particularly among older adults. Under this social, demographic and cultural context, this study aims to take a gender-specific perspective to investigate whether and how gender moderates the roles of pensions, social support and self-care ability on older adults' life satisfaction. Based on the survey data collected from 2,047 older adults aged 65 years and over in urban China in 2018, multiple linear regressions were applied to explore the moderation effects. The results show that the pension is important to older adults' life satisfaction, regardless of gender. For social support, the association between family support and life satisfaction is stronger for older men than for

older women; interdependent social support, especially being a confidant person, matters more to women than to men. The interaction between self-care ability and gender reveals some interesting patterns: self-care ability is found to have a positive association with women's life satisfaction but a negative association with men's. This study contributes to the existing literature by demonstrating how gender intertwines with the most important factors of older adult's life satisfaction in China - a society with strong gender norms and a patriarchal culture. These findings could be relevant to other Asian societies. (RH)

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From : <https://doi.org/10.1017/S0144686X20001877>

HEALTH CARE

(See Also 267/10, 267/64, 267/66)

- 267/40 Healthcare provider selection for elderly patients suffering from NCD's: an analysis with the combined approach of DEMATEL and AHP; by Ankit Singh, Ajeya Jha, Shankar Purbey, Priya Ravi.: Emerald. *Journal of Integrated Care*, vol 31, no 1, 2023, pp 3-15.

Older patients suffering from non-communicable diseases (NCDs) face a dilemma in the selection of healthcare providers. This study relates to the healthcare sector in India. It uses a combination of Decision-making Trial and Evaluation Laboratory (DEMATEL) and analytic hierarchy process (AHP) techniques, in order to identify the appropriate healthcare destination. An integrative approach utilising DEMATEL and AHP is used to reach the ideal solution for healthcare provider selection decisions. The DEMATEL approach is used to segregate cause and effect variables. Similarly, the AHP is used to identify the weights of the top five cause-inducing variables, and the paired comparison method is used to select the healthcare provider. The study finds that variables such as dependency on family members, easily accessible services, and patient autonomy play a vital role in the selection decision of healthcare providers for older patients suffering from NCDs. In order of priority, home healthcare should be considered the preferred provider, followed by neighbourhood registered medical practitioners and hospitals. This is the first study of its kind which has attempted to solve the healthcare provider selection decision with the combined approach of DEMATEL and AHP. (RH)

ISSN: 14769018

From : <https://doi.org/10.1108/JICA-11-2021-0056>

- 267/41 Leaving early or staying on?: Retirement preferences and motives among older health-care professionals; by Mikael Stattin, Carita Bengs.: Cambridge University Press. *Ageing and Society*, vol 42, no 12, December 2022, pp 2805-2831.

There is a need for improved knowledge about how workplace conditions and organisational factors may obstruct or facilitate work in late life. By means of both quantitative and qualitative data, this study aims to explore retirement preferences among employees (aged 55 and older) in a large Swedish health-care organisation and to identify work-related motives influencing their retirement preferences. The quantitative analysis showed large variation in retirement preferences in the organisation. The qualitative results were summarised into two overarching types of motives for late and early retirement preferences, general and group-specific. The general motives were shared by the early and late preference groups, and included recognition, flexibility, health and work motivation. The group-specific motives were exclusively related to either an early or a late retirement preference. Criticism towards the organisation and strenuous working conditions were specific motives for an early retirement preference, while positive accounts of work and a wish to utilise one's own competencies as well as being financially dependent on work was stated as specific motives for wanting to retire late. The results illustrate the need to improve organisational practices and routines, as well as working conditions, in order to make an extended working life accessible for more than already-privileged groups of employees. (RH)

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From : <https://doi.org/10.1017/S0144686X2100026X>

HEALTH SERVICES

(See 267/79)

HEALTHY AGEING

(See Also 267/80, 267/106)

- 267/42 Identification of determinants of healthy ageing in Italy: results from the national survey IDAGIT; by Erika Guastafierro, Ilaria Rocco, Rui Quintas (et al.): Cambridge University Press. *Ageing and Society*, vol 42, no 8, August 2022, pp 1760-1780.

Healthy ageing is a public health problem globally. In Europe, the dependency ratio of older people is expected to increase by 21.6 per cent to 51.2 per cent in 2070. The World Health Organization (WHO) study on healthy ageing started in 2002 as a concept, whereby all people of all ages should be able to live in a healthy, safe and socially inclusive way. This study presents preliminary results of the project

Identification of Determinants of Healthy Ageing in Italy (IDAGIT) that aimed to collect data on the active and healthy ageing of the Italian population aged over 18, using the conceptual framework of the WHO's ageing model. To link the determinants of the IDAGIT studies to those of the WHO model, the authors performed a confirmatory factor analysis which reported these variables as significant (in order of factor loading): smoking, cognition score, comorbidity, outdoor built environment, participation, working expertise and income. Considering comorbidity, 83.8 per cent of the sample declared not having any chronic diseases or to have only one; and regarding neurological diseases, only nine people had received a diagnosis of stroke. Regarding gender, the personal determinants and physical and social environments did not result in statistically significant differences, whereas the authors found statistical differences between the oldest age groups in all variables analysed. These results provide a first bio-psycho-social perspective on ageing in the Italian population. (RH)

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HIV AND AIDS

267/43 Social network characteristics and HIV testing among older adults in South Africa; by Jin A Lee, Markus H Schafer.: Cambridge University Press.

Ageing and Society, vol 43, no 3, March 2023, pp 499-515.

Drawing from theory and research on the role of social networks in promoting or undermining preventative public health measures, this article considers how structural, compositional and functional aspects of older adults' close social networks are associated with HIV testing in the context of rural South Africa. Analyses use data from the population-based Health and Aging in Africa: A Longitudinal Study of an INDEPTH Community in South Africa (HAALSI) - a sample of rural adults age 40+ (N = 4,660). Results from multiple logistic regression show older South African adults with larger, more heavily non-kin and more literate networks were most likely to report testing for HIV. People whose network members provided frequent information were also most likely to be tested, though interaction effects indicate that this pattern is primarily found among those with highly literate networks. Taken together, the findings reinforce a key insight from social capital perspectives: network resourcefulness - literacy in particular - is crucial for promoting preventative health practice. The synergy between network literacy and informational support reveals the complex interplay between network characteristics in shaping health-seeking behaviour. Continued research is needed on the connection between networks and HIV testing among sub-Saharan older adults, as this population is not currently well served by many public health efforts in the region. (RH)

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Price : ; International and comparative

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HOME CARE

(See Also 267/79)

267/44 Choice, needs or equality?: Discursive struggles about defining home care for older people in Sweden; by Elin Peterson, Helene Brodin.: Cambridge University Press.

Ageing and Society, vol 42, no 10, October 2022, pp 2433-2453.

Focusing on Swedish home care for older people, this article explores the discursive (re)production of home care as an institution. Equality and universal service provision have been described as defining features of the Nordic care regime. At the same time, Nordic research has highlighted a shift in social care policy, from a focus on universalism and egalitarian ideals towards a focus on freedom of choice, diversity and individualised services. This article takes as a starting point that home care for older people is formed by different and potentially conflicting ideas. We understand home care as a contested formation and define institutional change in terms of ongoing discursive struggles. The analysis draws on qualitative semi-structured interviews with key informants, including politicians, local authority officials and representatives of interest organisations. Informants were engaged in policy making, implementation or advocacy related to care for older people. The authors examine the meanings attached to home care for older people and the analysis reveals three different discourses - on choice, needs and equality. By comparing and contrasting discourses, we can reveal silences, conflicts and tensions, and highlight the politics involved in (re)creating home care as an institution. (RH)

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267/45 Influence of socio-economic profile of neighbourhoods on the selection of home care strategies for older dependants; by Albert Julia, Sandra Escapa, Pedro Gallo.: Cambridge University Press.

Ageing and Society, vol 42, no 10, October 2022, pp 2414-2432.

Care strategies for older dependants are determined not only by individuals or network characteristics, but also contextual factors. The objective of this study is to determine whether urban contexts (neighbourhoods) are linked to the use of family care (informal), public services or private care at home (formal). The authors applied logistic regression analysis to data from the Survey of People in a Situation

of Dependency 2018. The sample comprised 530 older people (age 55+) living in two types of socio-economic groups of neighbourhoods in Barcelona, Spain. The type of neighbourhood is relevant in explaining the home care that older dependants receive. In neighbourhoods with a high socio-economic level, dependants are more likely to use private services and less likely to use informal care services and public services, even after controlling for household income, degree of dependency, sex, age and the number of people in the household. Understanding the factors that determine the use of public care services, private care services or family care-giving is important due to the increment in the number of older people in the population. These results suggest that differences in urban socio-economic contexts determine some inequalities in the use of services, even after controlling for socio-economic individual differences. The characteristics of neighbourhoods should be considered to adjust care policies for older dependants. (RH)

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HOSPITAL CARE

(See 267/35)

HOUSING

- 267/46 Challenges experienced by subsidized housing residents with dementia or cognitive impairment: a scoping review; by Helen R Lam, Kelly Fleming, Jeff Lee (et al): Taylor and Francis. *Journal of Aging and Environment*, vol 36, no 4, October-December 2022, pp 381-409. Older adults with dementia or cognitive impairment face unique challenges to living safely and independently in subsidised housing. This scoping review summarises previous studies to develop an understanding of the challenges faced by older populations with dementia or cognitive impairment. Three medical databases, five social science databases, and two grey literature databases were searched. Six themes emerged: tenants' demographic profile; physical challenges; mental, social or psychological challenges; behavioural challenges; inadequate services or inappropriate environment; and barriers posed by policy and practice. The authors conclude that housing providers and practitioners should collaborate in ensuring that tenants with dementia or cognitive impairment living in subsidised housing are well supported. Areas for future research are suggested. (RH)
ISSN: 26892618
From : <https://doi.org/10.1080/26892618.2021.1963387>
- 267/47 The impact of the sense of home on the quality of life of older adults in Tabriz, Iran; by Minou Gharebaglou, Hamed Beyti, Shole Rezaei Zunuz.: Taylor and Francis. *Journal of Aging and Environment*, vol 36, no 4, October-December 2022, pp 410-432. With the advent of an increasingly ageing population, older people's quality of life has become an ever more imperative focus of research. However, the impact of a sense of home on the older people's quality of life has still not received the recognition it deserves. This study is based on two assumptions. The first is that older people living in residential care facilities would have a better understanding of what it feels like to live in one's home, precisely because of living away from home. The second is that older people living at home would be affected in terms of quality of life by their subconscious perceptions of sense of home, despite lacking an explicit familiarity with the concept. This study aims to identify the concept of a sense of home, and to evaluate its impact on older people's quality of life. The authors qualitatively analysed interviews with 15 older people living in three residential care facilities in Tabriz, Iran, and extracted the main themes of a sense of home. To ensure reliability, the authors also tested the extracted themes quantitatively, and administered a questionnaire to a wider population of 200 older people living in different areas of Tabriz. The findings indicate that on the one hand, older people feel satisfied with the residential aspect of where they live if they are provided with privacy, easily navigable routes and collective spaces. On the other hand, they can also achieve physical, social and mental health and feel satisfied with the care provision dimension of where they live, if they are provided with internal and external facilities, such as easily walkable paths to avoid collapse or injury, accessible health care options, and chances of social interaction, as well as peace and serenity. The conclusion is that by providing a context for privacy, social interaction, independence and memorability, a place can leave a positive impact on self-esteem, happiness, life satisfaction and ultimately quality of life among older people. (RH)
ISSN: 26892618
From : <https://doi.org/10.1080/26892618.2021.1987370>
- 267/48 More than a roof: challenges for older women renters in British Columbia, Canada; by Alexandra Stewart, Denise Cloutier.: Taylor and Francis. *Journal of Women and Aging*, vol 34, no 5, July-December 2022, pp 582-595. The growing issue of housing affordability is an increasing challenge worldwide as the financialisation of housing markets undermines housing as a basic human right. One of the most vulnerable segments of the population affected by rising housing costs are older, low-income women. The authors draw on qualitative interviews with older women in British Columbia, Canada to explore lived experiences of

housing insecurity from a feminist political ecology perspective. The findings reveal substantial challenges as well as the creative solutions that are employed by these women to stay in place. More targeted and age- and gender-inclusive housing policies, programmes, supports and services are critically needed. (RH)

ISSN: 08952841

From : <https://doi.org/10.1080/08952841.2021.1948791>

267/49 What determines the supply of housing for the elderly, and how is it related to the spread of COVID-19?; by Maria Kulander, Mats Wilhelmsson.: Taylor and Francis.

Journal of Aging and Environment, vol 36, no 4, October-December 2022, pp 357-380.

As in many other countries, the population of Sweden is getting older. This means that the number of older people will increase in absolute numbers and relative terms. Consequently, the need for housing for older people will increase, and the cost of these investments will be high. This study quantitatively analyses the spatial distribution of the number and size of housing units for older people in Sweden 2013-2018. The number of such housing units per capita is not evenly distributed, which largely be explained by the fact that the number of older people is not evenly distributed between municipalities. Nevertheless, it can also be stated that a municipality's income level and tax base, as well as the geographical size and degree of urbanisation, do play a role. If the municipality has a surplus or deficit in the supply of special housing for older people, it does not correlate with the distribution of COVID-19 cases. The authors note a concentration of COVID-19 cases in the metropolitan regions (particularly Stockholm). Even so, municipalities' decisions to build more social housing units for older people have not affected COVID-19 cases among Sweden's age 70+ population. (RH)

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INCOME AND PERSONAL FINANCE

(See Also 267/61)

267/50 Income growth in the United Kingdom during late career and after retirement: growing inequalities after deindustrialisation, educational expansion and development of the knowledge-based economy; by Alberto Veira-Ramos, Paul Schmelzer.: Cambridge University Press.

Ageing and Society, vol 43, no 2, February 2023, pp 393-420.

This article shows how late-life incomes from work and pensions evolved in the United Kingdom between 1991 and 2007, the year the Great Recession began.

The authors' main focus concerns changes across cohorts in different educational groups, while also considering the gender divide. Their statistical analyses based on the British Household Panel Survey (BHPS) suggest that deindustrialisation, the expansion of jobs in the knowledge economy, and pension reforms affected senior workers' incomes before and after retirement. Highly qualified older male workers have profited from increasing income across the cohorts more than any other social group. Such a trend is not observed among highly qualified female workers. Male and female low-qualified older workers do not show major income losses, but have not benefited to the same extent as highly educated male workers. As a result, pension income inequalities between highly qualified men and the rest have increased. The increasing pensions gap between educational groups can be traced back to the improving situation on the labour market for highly qualified male workers, and to reforms benefiting private pension schemes, where the highly qualified are over-represented. Thus, the shift in pension provision towards private pension schemes is clearly disadvantageous for low-qualified male workers and for women of all educational levels, and contributes to the increase of social inequalities. (RH)

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From : <https://doi.org/10.1017/S0144686X21000581>

267/51 Worry about debt is related to social loneliness in older adults in the Netherlands; by Cazilia Loibl, Madeleine A Drost, Martijn Huisman, Bianca Suanet, Wändi Bruine de Bruin, Simon McNair, Barbara Summers.: Cambridge University Press.

Ageing and Society, vol 42, no 12, December 2022, pp 2869-2891.

The amount of financial debt held by older adults has grown substantially over the past two decades in Europe. This study examines the association of objective and subjective debt burden with social and emotional loneliness among 1,606 older adults in the Netherlands. Objective debt burden is based on financial terms - such as debt-to-income ratio - whereas subjective debt burden measures the psychological distress caused by financial debt. Data are from the 2015/2016 wave of the Longitudinal Aging Study Amsterdam (LASA). First, the authors use means-comparison tests to examine whether older adults who experience social and emotional loneliness differ from older adults who do not experience loneliness regarding their subjective and objective debt burdens. Subsequently, using linear regression models two questions are addressed: whether social loneliness and emotional loneliness are associated with objective and subjective debt burden; and whether social participation, social network size, anxiety and depression mediate these relationships. The authors find that subjective debt burden (i.e. the worry related to debt) is a significant predictor of social loneliness, above and beyond the role of social and psychological measures. In contrast, objective debt burden is unrelated to social and

emotional loneliness. Social participation, social network size, anxiety and depression do not mediate the debt-burden-to-loneliness relationships. The results point to the importance of subjective debt burden in understanding social loneliness and designing interventions. (RH)

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From : <https://doi.org/10.1017/S0144686X21000325>

INFORMATION AND COMMUNICATION TECHNOLOGY

(See Also 267/84)

- 267/52 Access denied: accessing council services without the internet; by Age UK London. London: Age UK London, January 2023, 9 pp.
As part of its Mind the Digital Gap campaign, in July 2022 Age UK London sent Freedom of Information (FOI) requests to all 33 London councils asking for information on the availability of support for people without online access. This report finds that, of the 29 responding, 9 do not offer offline access to council tax reductions or housing benefit, 8 do not offer offline access to Blue Badge applications, and 5 do not offer any offline access to council tax rebates, council tax reduction, housing benefit and Blue Badge applications. The report outlines findings from a mystery shopping exercise with 12 local authorities who reported offering offline support. Mystery shoppers found that in under half of cases they were unable to obtain the information they sought on behalf of a relative or friend; more than half reported a negative experience; and problems were reported about the quality of information received. Some councils regarded offline support as an 'optional extra' rather than part of the service. Age UK London's recommendations on equal access range from ensuring that equal access is not dependent on having to rely on others, to providing websites and systems that are easy to use for all. Moreover, councils in London should assess the impact that providing services online has for different groups protected by the Equality Act and the Public Sector Equality Duty. (RH)
https://www.ageuk.org.uk/wp-assets/globalassets/london/documents/ageuk_london_mtdg_foi_final.pdf
- 267/53 Are social media users more satisfied with their life than non-users?: A study on older Italians; by Emanuela Sala, Gabriele Cerati, Alessandra Gaia.: Cambridge University Press.
Ageing and Society, vol 43, no 1, January 2023, pp 76-88.
Despite older people's increasing use of social media (SM), there is relatively little research investigating the impact of SM use on well-being in an ageing population. This study investigates the relationship between SM use and life satisfaction, a key dimension of well-being, in three age groups. The focus is on older Italians, particularly relevant because Italy is one of the countries both with the highest incidence of older people and the lowest uptake of SM in Europe. The Applying linear regression modelling techniques, the authors analyse data from the 2018 Multipurpose Survey - Aspects of Everyday Living, a large probability-based household survey. For two age groups, the authors find a positive relationship between SM use and life satisfaction, which weakens after controlling for older people's demographic and socio-economic characteristics, health conditions and social network characteristics. Given the grey digital divide that still exists in some European countries, the authors conclude with a call for urgent interventions to remove the hurdles that prevent frail older people from enjoying the benefits of an active ageing, fully exploiting the potential of SM use. (RH)
ISSN: 0144686X
From : <https://doi.org/10.1017/S0144686X21000416>
- 267/54 The role of social communication technologies in cognition and affect in older adults; by Jessica Resor, Steph Cooke, Benjamin Katz.: Cambridge University Press.
Ageing and Society, vol 43, no 1, January 2023, pp 24-52.
Affect and cognition have both been associated with communication across one's social network during ageing. Thus, it is important to consider how communication varies by different aspects of one's social network, and by communication mode, including phone, email and social media. This study investigated the relationship between technology-mediated communication, depression and an executive function-related fluid-reasoning measure among older adults. Data were drawn from the US Health and Retirement Study (HRS) data set's 2016 wave. Hierarchical regression analyses were conducted to examine the link between communication modes (phone, email and social media) with children, family and friends with a fluid-reasoning cognition measure and Center for Epidemiologic Studies Depression Scale (CES-D), controlling for demographic covariates, among 3,798 older American adults. Phone and email communication, but not social media, were significantly related to depression and cognition. The model fit was considerably stronger for the analyses with cognition than depression. Curvilinear associations were found for communication via phone and email with cognition, suggesting moderate amounts of communication by phone and email across social groups were most closely linked with higher scores on fluid reasoning. For depression, curvilinear relationships were found for talking on the phone with family and friends, and emailing for children and family, indicating that moderate communication levels revealed the lowest depression levels. Implications for how older adults' social support may contribute to depression and cognition status are discussed. (RH)
ISSN: 0144686X
From : <https://doi.org/10.1017/S0144686X21000386>

267/55 Size matters: locality of residence and media use in later life; by Dennis Rosenberg, Galit Nimrod.: Cambridge University Press.
Ageing and Society, vol 42, no 10, October 2022, pp 2323-2342.
Various factors determine the use of media in later life. Nevertheless, spatial inequalities among older media users have been accorded little attention in academic research. This study aimed to explore differences in variety (number) and intensity (duration) of both traditional and new media use among older adults residing in various types of localities. Data were obtained from the second wave of the ACT (Ageing + Communication + Technology) cross-national survey, comprising 7,927 internet users aged 60 and over from seven countries (Austria, Canada, Finland, Israel, the Netherlands, Romania and Spain). The statistical analyses used in the study were chi-square and analysis of variance tests, and linear regression as a multivariate technique. The results indicated that spatial differences concern variety of media use to a greater extent than its intensity, especially with regard to use of traditional media via new devices. Overall, residents of large cities exhibited greater variety and intensity of media use than did their counterparts from smaller localities, especially rural ones. These findings supported the social stratification hypothesis - according to which individuals from more-privileged social backgrounds have better media literacy, use media to a greater extent, and benefit from its use more than people from disadvantaged groups. The findings should be considered by practitioners and policy makers. (RH)
ISSN: 0144686X
From : <https://doi.org/10.1017/S0144686X21000143>

267/56 Understanding older adults' use of social technology and the factors influencing use; by Gemma Wilson, Jessica R Gates, Santosh Vijaykumar, Deborah J Morgan.: Cambridge University Press.
Ageing and Society, vol 43, no 1, January 2023, pp 222-245.
Having access and skills to use social technology, (i.e. social internet use, social media and social applications) are considered vital to online social connection. Whilst evidence exists around facilitators and barriers to general technology use, evidence is limited as regards the motivators, skills and tangible offline benefits older technology users experience with social technology. This study used a qualitative, exploratory method to understand older adults' experiences of using social technology to connect with others. Semi-structured interviews were conducted with 20 older adults (age 65+) across England, Scotland and Wales. Despite having access to social technology for social connection, and using this technology regularly, multiple barriers affected motivators and skills for use, namely perceived self-efficacy and fear, the culture of online communication, absence of social capital and physical functioning. Some of these barriers to social technology use are reminiscent of barriers to wider technology use, emphasising the importance of addressing these barriers for digital exclusion, as well as social connection. However, some of these barriers were specific to social technology use and should be considered when providing guidance or interventions to increase older adults' online social connection. Social connection was a clear tangible outcome to social technology use, and individuals discussed the benefits of using social technology, particularly visual communication tools, for online connection. (RH)
ISSN: 0144686X
From : <https://doi.org/10.1017/S0144686X21000490>

INTERGENERATIONAL ISSUES

(See Also 267/32, 267/62, 267/71)

267/57 'Keeping silent to keep the peace': changes in grandmother's access to their grandchildren following the loss of the son/father; by Irit Regev, Yael Hochman, Einav Segev.: Cambridge University Press.
Ageing and Society, vol 43, no 3, March 2023, pp 625-642.
Relations between grandmothers and their grandchildren following the loss of the son/father have not been studied to date. The present article focuses on this experience, as reflected in the stories of grandmothers (bereaved mothers) and spouses (widows) after the loss, and explores the perception of grandparenthood following the loss of the son/husband. This Israeli study is based on 20 semi-structured interviews conducted with 10 grandmothers (bereaved mothers) and 10 spouses (widows) who were recruited as a convenience sample. Data were subjected to thematic analysis. The findings revealed three key patterns of the grandmother-grandchild relationship, as perceived by the two groups of women: not seeing, not hearing and not talking (the 'three monkeys' communication style); dynamics of conflict, breakdown in relations and power struggles; and dynamics of split loyalty. The patterns indicate complex relations between widows and bereaved mothers, which have implications for grandmothers' access to their grandchildren and for their perception of grandparenthood. The study sheds light on the patterns of relations in families that have lost the son/husband/father. The change in power balance between family members and the asymmetry in the family structure created by the absence of the son or husband affect grandparenthood relations. The study emphasises the role of the widows, as the middle generation, in shaping or mediating relationships following the loss. The findings stress the importance of clinical intervention with both the bereaved mothers and the widows. (RH)
ISSN: 0144686X From : <https://doi.org/10.1017/S0144686X21000969>

- 267/58 The effects of an old-age allowance programme on intergenerational interactions in Taiwan: heterogeneous effects by adult children's motives for giving; by Chenhong Peng, Julia Shu-Huah Wang, Yiwen Zhu, Yue Zeng.: Cambridge University Press.
Journal of Social Policy, vol 52, no 1, January 2023, pp 129-156.
The effects are examined of the Senior Citizens Welfare Living Allowance (SCWLA) - an old-age allowance programme in Taiwan - on intergenerational financial transfers, living arrangements and contact. The study also examined the heterogeneity of SCWLA's effects by adult children's five types of motives for giving: altruism, exchange, reciprocity, affection, and sense of responsibility. Using 2002, 2004, 2005 and 2006 data from the Panel Study of Family Dynamics, the authors employed a difference-in-difference individual fixed effect model to compare the outcomes across the treatment (aged 65+) and comparison groups (aged 55 to 64) before and after the introduction of SCWLA. The results indicate that SCWLA crowds in intergenerational contact, but does not significantly change financial transfers and co-residence patterns. The increase in intergenerational contact is primarily driven by adult children having lower motives for giving. This suggests that old-age allowances may reduce financial entanglement between adult children and older parents, and change the social norm by raising awareness, respect and concern for older people of "low motivators". Providing public transfer to older people should not be hampered by the fear of distorting family support functions. (RH)
ISSN: 00472794
From : <https://doi.org/10.1017/S0047279421000453>
- 267/59 Intergenerational contact and solidarity, inside and outside the family: patterns in Spain; by Beatriz Jimenez-Roger, Mariano Sanchez.: Cambridge University Press.
Ageing and Society, vol 43, no 2, February 2023, pp 421-446.
Analysis of intergenerational contact and solidarity patterns has generally focused on the family. However, the unprecedented co-existence of a high number of different generations raises the challenge to delve into how such patterns may develop inside and outside the family. To understand better intrafamilial and extrafamilial intergenerational contact and solidarity in Spain, three national surveys were initially studied using cross-tabulation tables and measures of association. Then, factor analysis and logistic regression of most recent data focused on explanatory variables behind two dimensions of intergenerational solidarity. Regarding intergenerational co-residence, the results point to a highly relevant difference between intrafamilial and extrafamilial habits. As regards regular, but non-residential, contact between the generations, two gaps have been identified. The first gap appears between family practices and non-family practices, with a significant and progressive reduction of the latter being detected. According to the second gap, while intergenerational contact drops outside the family, levels of intragenerational contact are comparable in both settings. In this context, patterns of associational and functional intergenerational solidarity towards older relatives and non-relatives have been identified, with age, distance, civil status and especially gender being the key explanatory variables. The paper argues that there is good reason to pay combined attention to both intrafamilial and extrafamilial forms of intergenerational contact and solidarity, something that has been done very little to date. (RH)
ISSN: 0144686X
From : <https://doi.org/10.1017/S0144686X21000659>
- 267/60 Views and experiences of adult children concerning intergenerational relationships with their older kin: a qualitative study from South India; by Teddy Andrews Jaihind Jothikaran, Agness Meerhoek, Lena Ashok, Anja Krumeich.: Cambridge University Press.
Ageing and Society, vol 43, no 2, February 2023, pp 373-392.
The tradition of intergenerational care and support exchanges in Indian families is assumed to be disturbed because of changes in family structure brought on by modern life. Evidence on this is mainly based on studies investigating experiences of older adults regarding the impact of socio-economic change on their care arrangement. However, there is a large gap in understanding the experiences of adult children from a larger relational perspective, more than just care provision to their older relatives. Drawing on 26 in-depth interviews with adult children living in modern and traditional living arrangements from South India, this study explores their experiences with their parents with regard to reciprocity of care and support, the challenges they experience, and strategies they adopt to overcome those challenges. The analysis shows adult children perceive the increased demands of modern work life and their older kin's preferences to be heard, lack of flexibility and related extra domestic work and costs, do cause a bigger burden for them in both living arrangements. However, adult children strive to uphold the traditional values of caring for their older kin and sharing emotional bonding with them. This inspiration helps them to employ strategies to accept their older relatives as they are, focus their attention on the benefits they receive from them, and distribute care tasks with other relatives to overcome the challenges. (RH)
ISSN: 0144686X
From : <https://doi.org/10.1017/S0144686X21000593>

INTERNATIONAL AND COMPARATIVE

(See Also 267/4, 267/11, 267/13, 267/14, 267/15, 267/34, 267/38, 267/39, 267/40, 267/47, 267/63, 267/73, 267/76, 267/80, 267/97, 267/98, 267/102, 267/105, 267/106)

- 267/61 The contribution effect of learning experience on financial well-being of government retirees in North-Central Nigeria; by Benard Alkali Soepding.: Emerald. Working with Older People, vol 27, no 1, 2023, pp 15-25.
This study used correlational and cross-sectional research designs based on a questionnaire survey of 376 civil service retirees drawn from North-Central Nigeria. A confirmatory factor analysis was used to identify the factors of learning experience using the Analysis of Moments of Structures (AMOS) software, version 23. The contributory effect of the confirmed sub-domains of learning experience on these retirees' financial well-being was established using hierarchical regression. Confirmatory factor analysis results confirmed that financial knowledge, financial planning and financial self-efficacy are factors of learning experience. Although the sub-domains of the learning experience are significant predictors of financial well-being, financial knowledge has a significant effect on financial well-being, followed by financial planning and financial self-efficacy. The sub-domains of learning experience collectively explain about 46.5% of the variance in the financial well-being of retirees in North-Central Nigeria. Unlike most other documentation on financial well-being, which has focused on the general effect of the learning experience as a global variable, this study explores the role played by the three dimensions of learning experience. The study methodologically isolates the contribution of each dimension with respect to retirees in developing countries. As such, the authors uncover the reality that all the sub-domains of the learning experience are significant for retirees' financial well-being in a developing country context, though in varying effects. (RH)
ISSN: 13663666
From : <https://doi.org/10.1108/WWOP-07-2021-0037>

- 267/62 The impact of living arrangements and intergenerational support on the health status of older people in China: are rural residents disadvantaged compared to urban residents?; by Yazhen Yang, Maria Evandrou, Athina Vlachantoni.: Cambridge University Press. Ageing and Society, vol 43, no 2, February 2023, pp 469-494.
To date, the impact of intergenerational support has been examined in terms of isolated types of support, or at one point in time, and has failed to provide strong evidence of the complex effect of support on older people's well-being. Using the Harmonised China Health and Retirement Longitudinal Study (CHARLS, 2011, 2013 and 2015), this paper investigates the impact of older people's living arrangements and intergenerational support provision and/or receipt on their physical and psychological well-being, focusing on rural-urban differences. The results show that receiving economic support from one's adult children was a stronger predictor for higher life satisfaction among rural residents compared to urban residents, while grandchild care provision was an important determinant for poor life satisfaction only for urban residents. Having weekly in-person and distant contact with one's adult children reduced the risk of depression in both rural and urban residents. Older women were more likely than men to receive support and to have contact with adult children, but also to report poor functional status and depression. The paper shows that it is important to improve the level of public economic transfers and public social care towards vulnerable older people in rural areas. In addition, more emphasis should be placed on improving urban older residents' psychological well-being, such as arly diagnosis of depression. (RH)
ISSN: 0144686X
From : <https://doi.org/10.1017/S0144686X21000702>

LEISURE

- 267/63 Gendered leisure time-use and its impact on cognitive function among older adults in rural China; by Huijun Liu, Yaolin Pei, Bei Wu.: Cambridge University Press. Ageing and Society, vol 42, no 11, November 2022, pp 2533-2555.
Increasing evidence has shown that an active, socially engaged lifestyle in leisure time might protect older adults against decline in cognitive function. However, it remains unclear which types of leisure activities are more beneficial to maintaining cognitive function, and whether there are gender differences in the association between leisure activities and cognitive function. The authors used data from two waves (2015 and 2018) of the longitudinal Well-being of Elderly Survey in Anhui Province (WESAP) for 1,018 older adults aged 60+. The aim was to examine the lag effects of different types of leisure activities on cognitive functioning, and to identify the gender differences in their impacts on cognition in rural China. Ordinary least-squares regression models showed that high physical activities were associated with better cognitive function. High intensity of cognitive activities and engaging in physical activities have a protective effect on cognitive function among older men rather than older women. Further, the authors found that cognitive activities had a stronger effect on cognitive function among older men than older women. It is important to consider gender-specific interventions in leisure activities to maintain older people's cognitive function. (RH)
ISSN: 0144686X From : <https://doi.org/10.1017/S0144686X21000118>

LGBT

- 267/64 In her own words: understanding the health needs of older lesbians; by Carey Candrian, Leslie Wright, Agnes Callwood (et al.): Taylor and Francis.
Journal of Women and Aging, vol 34, no 5, July-December 2022, pp 596-604.
This project illuminates the unique struggles and barriers lesbians face. A community advisory board (CAB) was developed and 31 in-depth interviews were conducted with lesbians aged 56-84 in the Rocky Mountain region. Interviews were audio recorded, transcribed and coded using critical discourse analysis. Themes included: a culture of identity-hiding; lack of recognition and discrimination in health care; channelling passion, fear and anger into action; concerns about ageing; and identified health needs and opportunities. There is a need for innovative and equitable services that understand the barriers and struggles that older lesbian adults face so that they can receive high-quality care. (RH)
ISSN: 08952841
From : <https://doi.org/10.1080/08952841.2021.1952039>
- 267/65 Learning to deliver LGBT+ aged care: exploring and documenting best practices in professional and vocational education through the World Cafe method; by Trish Hafford-Letchfield, Alfonso Pezella, Sandra Connell (et al.): Cambridge University Press.
Ageing and Society, vol 43, no 1, January 2023, pp 105-126 (with correction, p 249).
Substantial evidence on the adverse impact of ageing on lesbian, gay, bisexual and transgender (LGBT+) populations through the lack of inclusive care services has highlighted the need for education and training of the health and social care workforce to enhance their skills, knowledge and capabilities in this area. The authors describe BEING ME, a cross-national collaboration across four European Union (EU) countries (the Netherlands, UK, Republic of Ireland and Slovenia). This collaboration examined the current pedagogic environment within professional, vocational and community-based education to identify what is most valuable for addressing these needs. The World Café method enabled a process of structured learning and knowledge exchange between stakeholders resulting in: (a) identification of best practices in pedagogies; (b) generation of tailored co-produced educational resources; and (c) recommendations on how to improve the knowledge and capabilities of future care professionals in the area of LGBT+ affirmative practices. Combined with themes from the post-Café evaluation, the findings suggest that underpinning professional and vocational education with a person-in-environment perspective facilitates going some way to acknowledging the historical context of older LGBT+ people's lives. Addressing the unique needs of sub-populations within LGBT+ communities and setting these in the context of holistic and person-centred care may better enable the meeting of their unique diverse needs for ageing. Recommendations are made for learning and teaching strategies to support improved LGBT+ aged care. (RH)
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From : <https://doi.org/10.1017/S0144686X21000441>
- 267/66 A narrative review of literature on the use of health and social care by older trans adults: what can United Kingdom services learn?; by Susan Mary Benbow, Charlotte Eost-Telling, Paul Kingston.: Cambridge University Press.
Ageing and Society, vol 42, no 10, October 2022, pp 2262-2283.
The authors carried out a review drawing on international literature to ascertain what is known about older trans adults' contacts with and use of health and social care services in order to inform UK research and practice. Thirty papers were found: a majority originated in the United States of America. Five themes were identified: experience of discrimination and/or prejudice and disrespect; health inequalities; socio-economic inequalities; positive practice; and staff training and education. The first three themes present challenges for providers and service users. Experiences of discrimination and/or prejudice and disrespect over the course of their lives powerfully influence how older trans adults engage with care services and practitioners. Health and socio-economic inequalities suggest that older trans adults are likely to have greater need of services and care. The remaining two themes offer opportunities for service improvement. The authors conclude that more research is needed, that there is a strong argument for taking a lifecourse perspective in a spirit of cultural humility, and that contextual societal factors influence service users and providers. The authors identify positive trans-inclusive practices which they commend to services. More needs to be done now to make older adult services appropriate and welcoming for trans service users. (RH)
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From : <https://doi.org/10.1017/S0144686X21000039>
- 267/67 Physical and mental well-being, risk and protective factors among older lesbians / gay women in the United Kingdom during the initial COVID-19 2020 lockdown; by Sue Westwood, Trish Hafford-Letchfield, Michael Toze.: Taylor and Francis.
Journal of Women and Aging, vol 34, no 4, July-December 2022, pp 501-522.
This article reports on a subset of findings from a recent UK survey of the impact of COVID-19 on older LGBT+ people in the UK. It considers the responses of 149 lesbian or gay women (137 cisgender, 12 trans) to questions relating to physical and mental health and well-being. Findings indicate that those

women - in couples and singles - who were happy with their living circumstances pre-COVID showed stoicism, adaptability and determined positivity in response to the pandemic and associated lockdown. Some even reported an improved quality of life, better personal relationships and increased neighbourly support. By contrast, those women who were very unhappy with their circumstances prior to COVID-19 - generally women who lived alone and experienced a mismatch between their actual and desired social network - either remained unhappy or became more unhappy, due to its impact on fragile support systems. For trans women, formal support from trans/LGBT+ specific networks - online during COVID lockdown - were central to their well-being. Having access to, and being able to use, online technologies were essential to good mental health during lockdown. These findings reaffirm the diversity among older lesbians and gay women as well as highlighting how COVID-19 has acted as a magnifier to their preexisting circumstances. The narratives of those doing well - generally better-networked, intentionally positive and engaged in practices which promote their well-being - may offer insights for supporting those who find their lives more challenging, both during a public health crisis and more generally. (RH)

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From : <https://doi.org/10.1080/08952841.2021.1965456>

LONELINESS AND SOCIAL ISOLATION

(See Also 267/18, 267/33, 267/51)

- 267/68 Experiences of loneliness among older people living alone: A qualitative study in Quebec (Canada); by Michele Charpentier, Laurie Kirouac.: Cambridge University Press. *Ageing and Society*, vol 42, no 12, December 2022, pp 2832-2853. Current knowledge suggests that loneliness is a significant social issue that can compromise health and well-being, and that older people living alone are at a higher risk of loneliness. In this article, the authors analyse experiences of loneliness among older people living alone. Based on a qualitative methodological approach and semi-structured interviews conducted with 43 people aged 65+ living alone in Montreal (Quebec, Canada), this study sought to understand how they perceive, reflect on and react to loneliness. The results show that these seniors perceive loneliness as a dynamic, and rarely static, experience, which has a very different significance, depending on whether it is chosen or circumstantially imposed. The experience of loneliness recounted by the seniors met by the authors is characterised by its heterogeneity. To varying degrees, such experience involves their relationship to themselves (solitude), to others (family and friends), loneliness (in love) and/or to the world (existential loneliness and aloneness). Lastly, the analyses highlight how social factors, such as age, gender, marital status, social network and socio-economic conditions, shape the experience of loneliness among seniors. These factors also influence the strategies that seniors develop to prevent or alleviate loneliness, strategies that yield very mixed results. (RH)
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LONG TERM CARE

- 267/69 (In)Decent work conditions and quality care: an issue for long-term care policy; by Ana Paula Gil.: Cambridge University Press. *Ageing and Society*, vol 42, no 9, September 2022, pp 2154-2179. The availability of informal care will remain a key factor influencing future demand for formal services and the analysis cannot be dissociated from formal care. Based on the 'unpaid care work, paid work, paid care work circle', proposed by the International Labour Office (ILO), this paper focuses on the individual, interpersonal and organisational determinants that most influence quality care. This paper is based on 40 semi-structured interviews with care workers, in 16 Portuguese care homes, in one council in the metropolitan area of Lisbon. In spite of social change processes in the care worker profession in Portuguese nursing homes, in the last decade, in terms of numbers, age and education, the interviews allowed the author to unveil qualitatively what the numbers hid: precarious working conditions, insufficient staffing, excessive workloads and long working hours, high rotation and insufficient skills. All these determinants have consequences, not only on the quality of the care that these care workers can offer, but also on their physical and mental health, job satisfaction and work environment. The high demand of care needs due to the ageing of the population, calls for continued efforts in improving working conditions, and a national strategy to promote recruitment of a diverse, younger and more-qualified workforce. The professionalisation of care work must be integrated with migration and employment policies (improvement of job quality and working conditions). (RH)
ISSN: 0144686X From : <https://doi.org/10.1017/S0144686X20002032>
- 267/70 Socio-economic inequality in long-term care: a comparison of three time periods in the Netherlands; by Jens Abbing, Bianca Suanet, Marjolein Broese van Groenou.: Cambridge University Press. *Ageing and Society*, vol 43, no 3, March 2023, pp 643-663. As a result of the rapid ageing of societies, meeting the demands for long-term care has become increasingly difficult. In the Netherlands, informal care is recognised as a key element to compensate for cut-backs in formal care provision. However, formal, informal and privately paid long-term care services are not used equally across socio-economic groups (SEGs). Whether these inequalities have

been reduced or exacerbated over time has not been researched. This study investigates to what extent educational and income inequalities in the use of formal, informal and privately paid care have changed over time. Data from the Longitudinal Aging Study Amsterdam (LASA) was used from three points in time: 1995 (N = 787), 2005 (N = 550) and 2015 (N = 473). Participants were between 75 and 85 years of age and living independently. The results indicate that lower SEGs are consistently more likely to use formal and informal care, and less likely to use privately paid care compared to higher SES groups. An increase in inequality was only found in the use of informal care; while informal care use is stable among lower SEGs, it decreases steeply among higher SEGs. These findings highlight the importance of education for explaining variation and changes over time in care use. Governmental efforts to mobilise informal care-givers might be outweighed by trends towards less long-term care. (RH)

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MENTAL HEALTH

(See Also 267/17, 267/46, 267/54, 267/63, 267/77)

267/71 Adult children's education and trajectories of episodic memory among older parents in the United States of America; by Manacy Pai, Wentian Lu, Baowen Xue.: Cambridge University Press.
Ageing and Society, vol 43, no 3, March 2023, pp 598-624.

The purpose of this study is to assess the relationship between adult children's education and older parents' cognitive health, and the extent to which this relationship is moderated by parents' own socio-economic and marital statuses.

The study uses data drawn from Waves 5 (2000) to 13 (2016) of the US Health and Retirement Study (HRS), a nationally representative panel survey of individuals age 50 and above in the United States of America (USA). Older parents' cognitive functioning is measured using episodic memory from Waves 5-13. Adult children's education is measured using years of schooling, on average, for all adult children of a respondent. Analyses based on multilevel linear growth curve modelling reveal that parents with well-educated adult children report higher memory score over time compared to their counterparts whose children are not as well-educated. The authors also find that the positive effect of children's education on parents' cognitive health is moderated by parents' own education, though not by their income, occupation or marital status. This work contributes to the growing body of research on the 'upward' flow of resources model that assesses the ways in which the younger generation's personal and social assets shape the older generation's health and wellbeing. These findings are particularly relevant to the USA, given the enduring linkage between socio-economic status and health, and the limited social and economic protection for those of lower social status. (RH)

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From : <https://doi.org/10.1017/S0144686X21000775>

267/72 Age-related differences in valence and arousal of emotion concepts; by Radek Trnka, Josef Mana, Martin Kuska.: Cambridge University Press.
Ageing and Society, vol 42, no 9, September 2022, pp 1991-2007.

Emotion concepts are representations that enable people to make sense of their own emotions and those of others. Theoretically driven by the conceptual act theory, this Czech study explores the overall spectrum of emotion concepts in older adults and compares them with the emotion concepts of younger adults. Data from 178 older adults (age 55+) and 176 younger adults (age 20-30) were collected using the Semantic Emotion Space Assessment task. The arousal and valence of 16 discrete emotions - anger, fear, sadness, happiness, disgust, hope, love, hate, contempt, guilt, compassion, shame, gratefulness, envy, disappointment, and jealousy - were rated by the participants on a graphic scale bar. The results show that, (a) older and younger adults did not differ in the mean valence ratings of emotion concepts, which indicates that older adults do not differ from younger adults in the way they conceptualise how pleasant or unpleasant emotions are. Furthermore, (b) older men rated emotion concepts as more arousing than younger men; (c) older adults rated sadness, disgust, contempt, guilt and compassion as more arousing; and (d) jealousy as less arousing than younger adults. These results indicate that age-related differentiation of conceptual knowledge seems to proceed more in the way that individuals understand how arousing their subjective representations of emotions are, rather than how pleasant they are. (RH)

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From : <https://doi.org/10.1017/S0144686X20001865>

267/73 Working in old age in Mexico: implications for cognitive functioning; by Francisca S Rodriguez, Joseph Saenz.: Cambridge University Press.
Ageing and Society, vol 42, no 11, November 2022, pp 2489-2509.

Previous studies indicate that a person's occupation might affect cognitive functioning in late life. As people in low- and middle-income countries often have to work until late life, the authors sought to investigate whether there are cognitive benefits to working later into life, and whether cognitive function deteriorates after leaving the labour force. The authors analysed longitudinal data from the Mexican Health and Aging Study (MHAS), a nationally representative sample of Mexican adults age 50+ (N =

7,375), that assessed cognitive functioning by verbal learning, delayed recall and visual scanning. Analyses were carried out using mixed-effects modelling, corrected for the influence of gender, instrumental activities of daily living (IADLs), diabetes, stroke, hypertension, depression, income and marital status. Results suggest that working actively, compared to leaving the workforce, was associated with cognitive performance only in the context of occupation. Domestic workers had a faster decline in verbal learning ($b = -0.02$, $p = 0.020$) and delayed recall ($b = -0.02$, $p = 0.036$) if they continued working actively and people working in administration ($b = 0.03$, $p = 0.007$), sales ($b = 0.02$, $p = 0.044$) and educators ($b = 0.03$, $p = 0.049$) had a slower decline in visual scanning if they continued working in old age. These findings indicate that continued participation in the labour force in old age does not necessarily come with cognitive benefits. Whether or not working actively in later life protects or even harms cognitive functioning is likely to depend on the type of job. (RH)

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MENTAL HEALTH CARE

(See 267/81)

NEIGHBOURHOODS AND COMMUNITIES

(See Also 267/45)

267/74 Age-friendly interventions in rural and remote areas: a scoping review; by Jed Montayre, Jann Foster, Ivy Yan Zhao (et al.): Wiley.

Australasian Journal on Ageing, vol 41, no 4, December 2022, pp 490-500.

In 2007 the World Health Organization (WHO) published a guide on age-friendly cities. However little is known about interventions that have been implemented to promote age-friendly communities in rural and remote areas. This paper from Australia presents findings from a scoping review undertaken to locate available evidence of interventions, strategies and programmes that have been implemented in rural and remote areas to create age-friendly communities. This review used the Joanna Briggs Institute (JBI) methodology. 219 articles were included in the review. No intervention studies were referred to as 'age-friendly'. However there were interventions (mostly healthcare-related) that have been implemented in rural and remote areas with older people as participants. There were also non-evaluated community programmes that were published in grey literature. This review identified the common health interventions in older people and the indirect relevance to the WHO age-friendly framework domains in rural and remote contexts. The eight age-friendly domains were not explicitly utilised as a guide in the development of interventions for older people in rural and remote settings. Implementation of age-friendly interventions in rural and remote areas requires a multisectoral approach that is tailored to address the specific needs of individual communities. Age-friendly interventions also need to consider socio-ecological factors to adequately and holistically address community needs and ensure long-term sustainability. (JL)

ISSN: 14406381

From : <https://doi.org/10.1111/ajag.13101>

267/75 Beyond the shrinking world: dementia, localisation and neighbourhood; by Richard Ward, Kirstein Rummery, Elzana Odzakovic, Kainde Manji, Agneta Kullberg, John Keady, Andrew Clark, Sarah Campbell.: Cambridge University Press.

Ageing and Society, vol 42, no 12, December 2022, pp 2892-2913.

'Dementia-friendly communities' herald a shift toward the neighbourhood as a locus for the care and support of people with dementia, sparking growing interest in the geographies of dementia care and raising questions over the shifting spatial and social experience of the condition. Existing research claims that many people with dementia experience a 'shrinking world' whereby the boundaries to their social and physical worlds gradually constrict over time, leading to a loss of control and independence. This paper reports a five-year, international study that investigated the neighbourhood experience of people with dementia and those who care for and support them. The authors interrogate the notion of a shrinking world, and in so doing highlight an absence of attention paid to the agency and actions of people with dementia themselves. The paper draws together a socio-relational and embodied-material approach to question the adequacy of the shrinking world concept as an explanatory framework and to challenge reliance within policy and practice upon notions of place as fixed or stable. The authors argue instead for the importance of foregrounding 'lived place' and attending to social practices and the networks in which such practices evolve. Their findings have implications for policy and practice, emphasising the need to bolster the agency of people living with dementia as a route to fostering accessible and inclusive neighbourhoods. (RH)

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From : <https://doi.org/10.1017/S0144686X21000350>

- 267/76 Productive engagement and ageing in productivist welfare regimes: questing for an age-friendly city in Hong Kong; by Zhuoyi Wen, Ka Ho Mok, Padmore Adusei Amoah.: Cambridge University Press. *Ageing and Society*, vol 42, no 11, November 2022, pp 2510-2532.
The population aged 65 years and above in Hong Kong is projected to rise from 15 per cent in 2014 to 38.4 per cent in 2069. The quest for creating age-friendly conditions and the promotion of active ageing has therefore become a priority for the Hong Kong Government and stakeholders in the city. Using a cross-national comparative framework for productive engagement in later life, this article examines the predictors of productive engagement (perceived voluntary engagement) in two districts (the Islands and Tsuen Wan) of Hong Kong - a typical productivist welfare regime in Asia. Two waves of district surveys were conducted with 1,638 people aged 60+ in 2016 and 2018, to ascertain their perceptions of an age-friendly city and active ageing. The results indicate some differences in the perception of the key determinants in both districts, but the factors associated with productive engagement were consistent, namely social atmosphere, social provisions and the built environment. The findings are discussed within the broader discourse on social gerontology, age-friendly cities and productivist welfare regimes. (RH)
ISSN: 0144686X
From : <https://doi.org/10.1017/S0144686X21000167>

OLDER MEN

- 267/77 Exploring ageing and time as resources in men's mental health experiences; by Kerstin Roger, Rachel Herron, Mairo Ahmadu, Jonathan A Allan, Candice M Waddell.: Cambridge University Press. *Ageing and Society*, vol 42, no 12, December 2022, pp 2854-2868.
While research on men's mental health is increasing, it has not typically focused on the intersections between ageing, masculinity and mental health in a rural context. Given the significant increase not only in our global ageing population, but also our growing awareness of mental health problems in the general population, understanding men as they grow older in relation to mental health is a notable gap in research. In this paper, the authors explore the ageing experiences of male participants over 50 with self-identified mental health problems in rural Manitoba, Canada. They draw on semi-structured qualitative interviews from a larger project which focused on the diversity of rural men's perceptions, experiences and expressions of mental health and wellness. Specifically, they explore how these men reflect on their mental health and wellness. Participants in the study described their experiences as a cumulative process of making meaning, developing strategies, resources and a more positive sense of self - but sometimes also simply for survival. Men's sense of time over time - looking back and reflecting on the present and the future - appears to be a critical resource and a positive coping strategy associated with ageing for these men. The main themes include sustaining relationships; work, retirement and volunteering; and reflections on physical and emotional health. This paper concludes with a discussion of the implications for new research on ageing men's mental health in a rural context. (RH)
ISSN: 0144686X
From : <https://doi.org/10.1017/S0144686X21000362>

- 267/78 No place for old men?: Meeting the needs of an ageing male prison population in England and Wales; by Louise Ridley.: Cambridge University Press. *Social Policy and Society*, vol 21, no 4, October 2022, pp 597-611.
Recent years have witnessed a significant increase in numbers of older men imprisoned in England and Wales, a phenomenon experienced across the western world. Those aged fifty and over represent the fastest-growing demographic group in prison in England and Wales. This article summaries explanations for and implications of this increase, and considers the characteristics, needs and lived experiences of this population. It critically reflects on current policy and practice responses, and how responses highlight definition and policy ambiguities around older prisoners. The article discusses a multi-agency initiative developed at one prison in northern England that recognised the uniqueness of older prisoners, modified regimes and changed physical environments. Impact is benchmarked against Her Majesty's Inspectorate of Prisons' four tests of a healthy prison, followed by discussion of findings and implications for policy and practice. The article argues for expanded collaboration to better manage challenges posed by older prisoners, supported by a national strategy. (RH)
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From : <https://doi.org/10.1017/S1474746421000178>

OLDER WOMEN

(See Also 267/5, 267/6, 267/48, 267/67, 267/107)

- 267/79 Aging, care and dependency in multimorbidity: how do relationships affect older Bangladeshi women's use of homecare and health services?; by Mohammad Hamiduzzaman, Stacy Torres, Amber Fletcher (et al).: Taylor and Francis. *Journal of Women and Aging*, vol 34, no 6, July-December 2022, pp 731-744.
Gender issues can create major barriers to healthcare utilisation for older women with multimorbidity, especially in developing countries like Bangladesh. Older women in rural areas of Bangladesh are the poorest of the poor, and the women with multimorbidity live in a regulated family atmosphere. This

study explored the relationship dimensions of older women with multimorbidity in homecare and their usage of health services. To gain a deeper understanding of these complex issues, a qualitative case study was conducted. Semi-structured, in-depth interviews were conducted with 11 health staff and 22 older women with multimorbidity living in three residential communities of the Sylhet District, Bangladesh. For their analysis, the authors used critical thematic discourse, a technique developed from Axel Honneth's recognition and misrecognition theory. Seven relationship dimensions have been identified, and grouped under three major themes: intimate affairs [marital marginalisation and parent-children-in law dynamics]; alienation in community relationships [patriarchal sibling relationships, neighbourhood challenges, and gender inequality in interactions]; and legal disconnections [ignorance of rights and missed communication]. The findings revealed a lack of understanding of the women's multimorbid care needs and the patriarchal marginalisation that existed in families. This lack of understanding, together with poor peer-supports in healthcare, is perpetuated by misrecognition of needs from service providers, resulting in a lack of quality and poor utilisation of homecare and health services. Understanding the high needs of multimorbidity and the complexities of older women's relationships can assist in policy decisions. This study deepens our understanding of how gender inequality intersects with cultural devaluation to reduce the well-being of older women in developing countries. (RH)

ISSN: 08952841

From : <https://doi.org/10.1080/08952841.2021.1951115>

267/80 **Embodying ageing: middle-aged and older women's bodily fitness and aesthetics in urban China;** by Li Sheng.: Cambridge University Press.

Ageing and Society, vol 42, no 8, August 2022, pp 1844-1862.

This article explores the embodied practices of anti-ageing among middle-aged and older Chinese women (damas) who engage in plaza dancing (guangchangwu) as a leisure activity in urban areas. The author draws on data collected from three months of participant observation in three different plaza dance groups and 29 semi-structured interviews with older Chinese women in Nanning. First, she investigates her participants' experiences of plaza dancing in terms of health-keeping and bodily maintenance. She then analyses their usage of cosmetic products at a time when the beauty economy is booming during the post-Mao era. These female plaza dancers' bodily regulation and 'beautification' indicate not only older women's strategies and struggles in the face of the double standard of ageing, but also a change in the age hierarchy under the transforming socio-cultural landscape of urban China, which is generating new social norms. (RH)

ISSN: 0144686X

From : <https://doi.org/10.1017/S0144686X20001774>

267/81 **Mothering in later life: older mothers and their challenging adult children;** by Judith R Smith.: Cambridge University Press.

Ageing and Society, vol 42, no 8, August 2022, pp 1822-1843.

This study uses constructivist grounded theory to explore older women's responses to the unexpected need to provide financial, emotional and residential support to their adult children who were experiencing problems with mental illness, substance abuse and/or absence of employment. Twenty-nine American women (>60) were interviewed: 55 per cent were poor and half were women of colour. Using the theoretical model of intergenerational ambivalence, three types of structural ambivalence are discovered: mothers' reactions to their adult children's behaviour that violate expectations for reciprocity; women's dismayed reactions to their adult children's aggressive behaviours towards themselves as their mothers; and the women's struggle regarding balancing their role as a mother to protect their adult children alongside their wish and identified needs for self-care. All of the conflicts were expressed within the frame of their role of mother. The internalised mandate to be 'a good mother' resulted in many experiencing shame, self-blame and guilt, and this self-blame was an obstacle to reaching out for help. This study adds to the growing body of feminist gerontological research and examines the ideological and structural variables that influence the predominance of female unpaid family care-givers in later life. The dilemma for older women with troubled adult children is both personal and political. (RH)

ISSN: 0144686X

From : <https://doi.org/10.1017/S0144686X20001798>

OLDEST OLD

267/82 **Sociodemographic characteristics and social exclusion among the oldest old;** by Naomi Paine, Jerome N Rachele, Gavin Turrell.: Wiley.

Australasian Journal on Ageing, vol 41, no 4, December 2022, pp 563-572.

The socioeconomically disadvantaged oldest old (people aged 85 years and over) are more vulnerable to social exclusion than the general population. Using a population representative sample, this paper examined associations between sociodemographic characteristics and social exclusion among the oldest old. This cross-sectional study included 307 participants aged 85 years and over from the Household, Income and Labour Dynamics in Australia (HILDA) Survey. Sociodemographic characteristics were measured using household composition, country of birth, housing tenure, income, education and neighbourhood-level disadvantage. Three social exclusion domains were derived representing

unsupportive relationships, neighbourhood exclusion and community disengagement. Analysis was undertaken separately for men and women. Among men, living alone was associated with higher levels of unsupportive relationships and having a lower income was associated with lower levels of neighbourhood disunity. Among women, living alone was associated with lower levels of community disengagement and neighbourhood disadvantage was associated with lower levels of neighbourhood disunity. Both men and women with lower levels of education had higher levels of community disengagement. This study showed few and unexpected associations between sociodemographic characteristics and social exclusion among oldest-old Australians, suggesting a homogeneous effect of advancing age. Government approaches aimed at reducing social exclusion in this age group should consider gender and taking action across all socioeconomic stratification. Further research is warranted to understand the underlying mechanisms linking sociodemographic characteristics to social exclusion. (JL)

ISSN: 14406381

From : <https://doi.org/10.1111/ajag.13074>

PARTICIPATION

267/83 Analysing co-creation and co-production initiatives for the development of age-friendly strategies: learning from the three capital cities in the Basque Autonomous Region; by Martin Zuniga, Tine Buffel, Felix Arrieta.: Cambridge University Press.

Social Policy and Society, vol 22, no 1, January 2023, pp 53-68.

Driven by the ageing process taking place in the Basque Autonomous Region (BAR), the 'Age-Friendly Cities and Communities' (AFCC) initiative has become a major political reference for the development of ageing policies in the territory. This article addresses this subject by means of a qualitative study that analyses how the three main capital cities in the region (Bilbao, Donostia / San Sebastian and Vitoria-Gastiez) are implementing age-friendly strategies, with a focus on co-creation and co-production processes. In this article co-creation is understood as a process by which two or more parties collaborate, or participate, in creating value for themselves or others. Co-production is likewise linked to the involvement of users in the implementation of a certain policy or service. The article examines the challenges the three cities are currently facing in the development of the aforementioned participatory processes. The authors' research suggests that political involvement, even if necessary, is meaningless if the strategy is not embedded in the work of influential stakeholders. Moreover, the success of communities in becoming more age friendly will, to a large extent, depend on whether older people, including those facing social exclusion, become involved as key actors in future research and policies around age-friendly developments. (RH)

ISSN: 14747464

From : <https://doi.org/10.1017/S1474746421000282>

267/84 Enacting citizenship through participation in a technological society: a longitudinal three-year study among people with dementia in Sweden; by Sophie Nadia Gaber, Louise Nygard, Camilla Malinowsky (et al).: Cambridge University Press.

Ageing and Society, vol 43, no 2, February 2023, pp 276-297.

The role of Everyday Technology (ET) use is presented as subsidiary or neutral in policy for age- and dementia-friendly communities; and yet, research suggests that older people, especially those with dementia, experience increased challenges using ET in their everyday lives. Through the lens of micro-citizenship, this Swedish study aims to deepen our knowledge about how use of ET outside the home (including portable ETs) relates to participation in places visited within public space among people with dementia over time. Using a longitudinal study design, 35 people with dementia were recruited at baseline and followed over three years. Data were collected through semi-structured interviews using standardised questionnaires: the Participation in ACTivities and Places OUTside Home Questionnaire (ACT-OUT) and the Everyday Technology Use Questionnaire (ETUQ). Random intercept modelling and descriptive statistics were used to analyse the data. Throughout the three-year study, decreasing use of ET outside the home, including portable ETs, was associated with decreasing participation in places visited within public space, in a statistically significant way when controlling for age ($F = 7.59$, $p = 0.01$). The findings indicate that facilitating access and use of ET outside the home, among people with dementia, should be integral to promoting and maintaining participation in age- and dementia-friendly communities. (RH)

ISSN: 0144686X

From : <https://doi.org/10.1017/S0144686X21000544>

PERSON CENTRED CARE

(See 267/98)

PERSONALISATION

- 267/85 'They made an excellent start... but after a while, it started to die out': tensions in combining personalisation and integration in English adult social care; by Kerry Allen, Emily Burn, Kelly Hall, Catherine Mangan, Catherine Needham.: Cambridge University Press. *Social Policy and Society*, vol 22, no 1, January 2023, pp 172-186. This article seeks to understand the challenges of combining the distinct aims of personalisation and integration in adult social care. Addressing the local context of service delivery in England through interviews with key stakeholders, the authors identify how personalisation and integration activities require different, and potentially conflicting, approaches. They observe direct tensions when structural integration with health systems distracts focus from achieving personalised delivery of care, or where a focus on clinical outcomes takes precedence over broader well-being aspirations. Integration can entail the prioritisation of health over social care and a population rather than personal orientation. It is suggested that personalisation and integration are in 'policy conflict' (Weible and Heikkila, 2017), and that policy-makers need to acknowledge and address this rather than promise the 'best of both worlds'. (RH)
ISSN: 14747464
From : <https://doi.org/10.1017/S1474746422000392>
- 267/86 Tailored and seamless: individualised budgets and the dual forces of personalisation and collaboration; by Catherine Needham, Michele Foster, Karen R Fisher, Eloise Hummell.: Cambridge University Press. *Social Policy and Society*, vol 22, no 1, January 2023, pp 127-138. This article reviews the design and delivery features of individualised budgets for disabled and older adults to understand the mechanisms for disaggregation and collaboration in the way support is organised and delivered. Individualised funding is often assumed to be a fragmenting force, breaking down mass provision into personalised and tailored support and stimulating diverse provider markets. However, disability campaigners and policy makers are keen that it also be an integrative force, to stimulate collaboration such that a person receives a 'seamless' service. The article brings out these tensions within the individualisation of funding and support for older and disabled people in the United Kingdom and Australia, and considers whether there is scope for reconciling these dual forces. (RH)
ISSN: 14747464
From : <https://doi.org/10.1017/S1474746422000434>

PHYSICAL ACTIVITY

- 267/87 (In/Ex)clusive fitness cultures: an institutional ethnography of group exercise for older adults; by K Harvey, M Griffin.: Cambridge University Press. *Ageing and Society*, vol 43, no 2, February 2023, pp 251-275. Older adults benefit greatly from being physically active, yet they are the least active generation. To appeal to older consumers, to reduce barriers older adults experience to becoming physically active and to increase the number of physically active older adults, the exercise market has been divided into mainstream fitness and age-segregated programming that specifically targets older adults. This research used an institutional ethnography approach to understand better the social discourses and material practices that shape socially inclusive and/or exclusive physical cultures for older exercisers in both mainstream and older-adult group exercise classes. The Canadian and American participants were 11 female and 3 male exercisers (age range 64-84) and 19 female and 3 male instructors (age range 26-80s). Textual analyses, interviews and field observations revealed that the material and discursive work practices intended to promote inclusivity in group exercise physical cultures actually engendered age-exclusive markets. Herein, the authors discuss how the guidelines and policies put forward by these certifying bodies, and the training curricula they publish, govern group exercise practices in a manner that tends to align with dominant ideological discourses conflating age and ability. The authors conclude by arguing that in order to create more inclusive physical cultures, mainstream fitness providers need to embrace options that appeal to potential group exercise consumers of all abilities, regardless of age. (RH)
ISSN: 0144686X
From : <https://doi.org/10.1017/S0144686X21000507>
- 267/88 Care home residents on the move: the significance of cultural context for physical activity; by Alison Bowes, Alison Dawson, Corinne Greasley-Adams, Ruth Jepson, Louise McCabe.: Cambridge University Press. *Ageing and Society*, vol 42, no 8, August 2022, pp 1899-1920. Increased physical activity is widely promoted as beneficial for older people, but previous research indicates this may be difficult to implement in care homes, especially for people with dementia who form an increasing proportion of residents. However, care home cultures can mitigate against physical activity for residents. This paper builds understanding of care home cultures of physical activity through qualitative, empirical research in five care homes (two in Scotland, and three in England). Key findings are that culturally framed views about physical activity, sometimes reflecting stereotypical views of dependency, can be seen in care homes.

Managers, staff and residents may be invested in or resistant to physical activity, and dominant managerial or societal views may be reflected or contested. The relatively closed boundaries of care homes reinforce sedentary behaviour, and resident involvement in either chosen or enforced physical activity is varied. Interactions demonstrate potential to negotiate physical activity more or less effectively in any given care home. Rigid routines, external regulations and pressure on staffing can be negative, but management commitment has positive potential. In conclusion, the paper identifies that to increase physical activity in a sustainable manner, any intervention needs to address issues of culture change and individual needs and preferences. (RH)

ISSN: 0144686X

From : <https://doi.org/10.1017/S0144686X20001920>

267/89 Effects of a resistance training community programme in older adults; by Majid Mufaqam Syed-Abdul, Chrissa L McClellan, Elizabeth J Parks, Stephen D Ball.: Cambridge University Press.

Ageing and Society, vol 42, no 8, August 2022, pp 1863-1878.

Ageing is associated with reduced muscle mass, strength, flexibility and balance, resulting in a poor quality of life (QoL). Past studies conducted in highly controlled laboratory settings have provided strong support in determining whether similar gains can be made in community programmes.

The Stay Strong, Stay Healthy (SSSH) is a strength training programme which has been designed for older people by professionals at the University of Missouri Extension. SSSH is conducted widely across Missouri and being expanded into five other states. This study reports on 20 participants enrolled in one such 8-week community-based resistance training programme (mean age = 61.3 (standard error (SE) = 0.9) years); Body Mass Index = 32.0 (SE = 1.3) kg/m²). All participants completed surveys to assess outcomes associated with QoL. Given the relationship between muscle function and nerve health, nerve conduction studies (NCS) were also conducted in a separate group of participants (mean age = 64.9 (SE = 2.0) years; BMI = 32.6 (SE = 1.9) kg/m²). Although weight loss was not the primary outcome of the study, participants reduced their body weights ($p < 0.001$), by primarily reducing fat mass ($p = 0.007$), while maintaining muscle mass. Significant improvements were observed in muscle strength (2.2%), flexibility and balance (3.2-464.2%, $p = 0.05$ for all). Improvements were also observed in plasma glucose ($p = 0.05$), haemoglobin A1C ($p = 0.06$) and aldolase enzyme levels ($p < 0.001$). Scores for surveys on memory and sleep improved ($p < 0.05$). Improved QoL was associated with increased lean mass ($r = -0.714$, $p = 0.002$), decreased fat mass ($r = -0.702$, $p = 0.003$) and improved flexibility and balance ($r = -0.627$, $p = 0.008$). This 8-week community-based resistance training programme significantly improved QoL in older adults. (RH)

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From : <https://doi.org/10.1017/S0144686X20001786>

PROBLEM BEHAVIOUR

267/90 Gambling and ageing: less illusion but more risk; by Maylis Fontaine, Valerie Le Floch, Celine Lemercier.: Cambridge University Press.

Ageing and Society, vol 43, no 3, March 2023, pp 556-575.

So far, there has been only limited research on gambling and its risk factors for older people; but studies conducted among younger adults suggest that the illusion of control is a key factor, leading players to develop strategies that increase their risk-taking in gambling. Time perspective (TP) is a good indicator of risky behaviours in a number of different areas, including health and the environment. In this French study, the authors sought to identify the age-specific cognitive mechanisms underlying gambling behaviour in normal ageing. The authors asked 115 emerging adults (mean age = 20.86 years), 86 young adults (mean age = 30.59), 82 middle-aged adults (mean age = 44.57) and 108 seniors (mean age = 65.19) to play an online game. For each, their illusion of control, risk-taking and TP were rated. Analysis revealed that seniors took more risks and had less illusion of control than younger adults. The fatalistic-present TP positively influenced the illusion of control, such that perceiving the present as being determined by uncontrollable forces increased the perceived level of control. Finally, an influence of age on TP was found. These results suggest that seniors constitute a specific population in terms of gambling-related cognitions and behaviours. Including TP in risky behaviour assessments would allow the development of tailor-made preventive measures. (RH)

ISSN: 0144686X

From : <https://doi.org/10.1017/S0144686X21000714>

RELATIONSHIPS (PERSONAL)

267/91 Marital offence-specific forgiveness as mediator in the relationships between personality traits and marital satisfaction among older couples: perspectives on Lars Tornstam's theory of gerotranscendence; by Pawl Brudek, Kinga Kaleta.: Cambridge University Press.

Ageing and Society, vol 43, no 1, January 2023, pp 161-179.

As a result of the gerotranscendence process, marital satisfaction becomes especially important in old age. At the same time, researchers emphasise that the effect of older people's personality on their marital satisfaction depends on many mediators. The analysis of literature suggests that one such variable might be forgiveness. The present research investigated whether forgiveness mediates the

relationship between personality traits and marital satisfaction in late adulthood. The study involved 315 participants aged 60-75 in various parts of Poland. Three psychological methods were used: the Marital Satisfaction Questionnaire for Older Persons; the NEO-Five Factor Inventory; and the Marital Offence-Specific Forgiveness Scale. The analyses undertaken revealed a number of significant associations. Neuroticism was positively related to resentment avoidance, and negatively to benevolence and marital satisfaction, whereas extraversion, agreeableness and conscientiousness were negatively correlated with resentment and positively with benevolence and satisfaction. The results also showed that both dimensions of dyadic forgiveness mediated the relationships between personality traits and marital satisfaction in ageing persons. The results suggest that forgiveness of a spouse, when enhanced, could work as a buffer against the negative impact of neuroticism on marital happiness, as well as allowing the transfer of positive aspects of extraverted, agreeable and conscientious tendencies into marriage. Practical implications of the study for counselling older adults are recommended. (RH)

ISSN: 0144686X

From : <https://doi.org/10.1017/S0144686X21000465>

267/92 Sexual satisfaction of older adults: testing the Interpersonal Exchange Model of Sexual Satisfaction in the ageing population; by Pablo Santos-Iglesias, E Sandra Byers.: Cambridge University Press.

Ageing and Society, vol 43, no 1, January 2023, pp 180-202.

Having a satisfying sex life is important to older adults. This Canadian study aimed to provide information about the sexual satisfaction of older adults in a relationship, using the Interpersonal Exchange Model of Sexual Satisfaction (IEMSS) as a theoretical framework. Participants were 187 sexually active individuals (98 men and 89 women) in a romantic relationship (age 65-75 years). They were recruited using Amazon's Mechanical-Turk, and completed the IEMSS questionnaire and two open-ended questions asking what they enjoyed most and least about their sexual relationship. On average, participants were highly sexually satisfied. In keeping with the IEMSS, greater sexual satisfaction was predicted by a more favourable balance of sexual rewards to costs, greater equality of sexual costs and higher satisfaction with the non-sexual aspects of the relationship. Four themes emerged regarding what participants liked most and least about their sexual relationship: emotional aspects of the relationship, physical aspects of the relationship, dyadic aspects of the relationship, and age-related aspects of being sexual. None of the four themes were specific to men or women, although some gender/sex differences were found. The results paint a positive picture of the sexual relationships of older adults and support the utility of the IEMSS as a framework to understand sexual satisfaction in older adults. (RH)

ISSN: 0144686X

From : <https://doi.org/10.1017/S0144686X21000489>

RELIGION AND SPIRITUALITY

267/93 Buffering role of positive religious coping against the helplessness of elderly people under COVID stress; by M J Antony Wilson, Surendra Kumar Sia.: Emerald.

Working with Older People, vol 27, no 1, 2023, pp 26-33.

This study aims to understand the relationship between Covid stress and helplessness among the elderly people in Tirunelveli district of Tamil Nadu, a southern state of India; and moreover whether positive religious coping can have any influence on this relationship. Following a field study approach, data were collected from 187 people aged 60+ in different parts of the Tirunelveli district. Moderated regression analysis was carried out to examine the moderating role of positive religious coping on the relationship between Covid stress and helplessness. In line with the formulated hypotheses, the findings reveal a significant positive contribution of Covid stress toward older people's helplessness. However, despite Covid stress, the helplessness gets reduced for those older people with a higher level of positive religious coping. The findings substantiate the conservation of resources theory, and suggest the role of positive religious coping as a personal resource against the stress experienced by older people. This study's findings indicate the responsibility of government agencies, community leaders, family members as well as religious leaders in providing the scope to the older people for religious interactions as well as practices that may facilitate positive religious coping among them. The present study is one of its kind to be carried out among community-dwelling older people during the pandemic crises. Moreover, the buffering role of positive religious coping as a personal resource to withstand the difficult situation has been examined in this study in an empirical manner. (RH)

ISSN: 13663666

From : <https://doi.org/10.1108/WWOP-02-2022-0006>

REMINISCENCE

- 267/94 Simplified olfactory reminiscence to help maintain the mental health in community-dwelling older adults; by Hideaki Hanaoka, Toshiaki Muraki, Fumiko Kaneko, Shingo Yamane, Hitoshi Okamura.: Cambridge University Press.
Ageing and Society, vol 42, no 11, November 2022, pp 2475-2488.
The effects were examined of simplified reminiscence practice using olfactory stimuli on depression and cognitive function in community-dwelling older people in Japan. Accordingly, 61 individuals (age 65+) were randomly divided into two groups. In the intervention group, 12 sessions of reminiscence were performed using olfactory cards. In the control group, reminiscence sessions were similarly performed, but with language cards. The Geriatric Depression Scale-15 (GDS-15) was used to measure mental health status, and the Five Cognitive Test was used to measure cognitive function at baseline and after completion of the intervention. The final sample included 27 participants in the intervention group and 23 participants in the control group. Basic characteristics of the participants at baseline were compared and a significant difference was observed between the two groups in age ($p = 0.029$). Repeated-measures analysis of covariance (with age as the covariate) revealed a significant interaction between time and group on the GDS-15 ($p = 0.04$). Furthermore, a before and after comparison using a paired t-test showed a significant difference only in the intervention group ($p = 0.01$). The results of this study suggest that simplified reminiscence practice using olfactory cards could serve as an intervention to help maintain community-dwelling older people's mental health. (RH)
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From : <https://doi.org/10.1017/S0144686X21000076>

RESIDENTIAL AND NURSING HOME CARE

(See Also 267/20, 267/24, 267/32, 267/88)

- 267/95 Decent work in care homes: lessons and implications of the pandemic experience from Scotland; by Stephen Gibb, Hartwig Pautz.: Emerald.
Working with Older People, vol 27, no 1, 2023, pp 34-43.
Decent work has long been highlighted as integral to improving social care for older people. The COVID-19 pandemic experience reveals lessons and implications about the systemic absence of decent work in one place, Scotland, in care homes. The main lesson and implication is a need for change beyond the focus on levels of pay and systemic advocacy of decent work as it is conventionally understood. In this study, semi-structured interviews were conducted with 20 frontline care workers in care homes regarding their experiences at the height of the pandemic first wave. A range of care system institutional stakeholders and representatives was also interviewed. The study finds that decent work in social care may only be progressed to the extent that a culture change is achieved, transcending the institutional stasis about who owns and engages with progressing decent work. Effective culture change for decent work in care homes needs to be a higher research priority. More explicit culture policies can be a mechanism by which overall decent work and system change may be catalysed and sustainably secured together. Explicit culture change is here set out with respect to operational, institutional and national domains. There needs to be social policy and political support for situating decent work as part of a broader culture change around care work with older people. A culture-oriented change plan as well as new resourcing and structures can together ensure that the nadir of the pandemic experience was a historical turning point towards transformation, rather than being just another low point in a recurring cycle. The care workers want strong and consistent support from their managers; and the interviewees suggested that this was not always the case before the crisis, and not always the case during the pandemic. (RH)
ISSN: 13663666
From : <https://doi.org/10.1108/WWOP-02-2022-0007>
- 267/96 Ethical dilemmas: balancing choice and risk with a duty of care in extending personalisation into the care home; by Emma Miller, Karen Barrie.: Cambridge University Press.
Ageing and Society, vol 42, no 8, August 2022, pp 1800-1821.
Personalisation, which originated in community-based social services, has recently been extended into UK care homes. This article reports on a study undertaken in a Scottish local authority, which explored understandings of and possibilities for personalisation from the perspectives of a seldom-heard group, frontline care home staff. Behind the conceptual sword and shield of 'choice and control' associated with personalisation in the UK lie irreconcilable flaws, thrown into sharp relief in this context. This service development has been stimulated by a desire to promote a humane response to caring for an ageing population, whilst containing costs. Seemingly promoting a relational approach, personalisation also entails consumerist underpinnings, with consequent tensions resulting in weakened policy mechanisms. Discussing findings pertaining to 'food and eating', the article illustrates the complex interplay between supporting resident capabilities with poor staff ratios; when choice is not really choice at all; balancing choice, risk and the duty of care; and responding to diverse perspectives about what matters. This complexity reflects the highly skilled nature of care work, as promoted by care ethicists. The tensions permeated care home life and found parallels in the wider system of care. Honesty about

the limitations of choice and control is essential, to achieve ethical care in care homes. The care home constitutes fertile ground for exposing and exploring the shortcomings of the 'logic of choice', and for advancing a more relational, inclusive and sustainable conceptualisation of personalisation. (RH)
ISSN: 0144686X
From : <https://doi.org/10.1017/S0144686X20001737>

267/97 Institutional traits in an African residence for older adults: an obstacle to community care?; by Catharina Nord.: Taylor and Francis.

Journal of Aging and Environment, vol 36, no 4, October-December 2022, pp 433-449.

This ethnographic study explores an old age home (OAH) in a former township in Walvis Bay, Namibia as an institution, to investigate its potential for being interwoven with community care services for older adults. Interviews with older adults from the community revealed highly negative opinions about the residence that equated it to an institution. These opinions are compared with conditions in the care home and the residents' views. The OAH was much more heterogenous as regards the composition of residents than what was perceived by older people who lived in the community, who considered the home an option only for people who were childless or had been abandoned. Older people who voluntarily lived alone in the home represented a new lifestyle that challenged the traditional family care practice that is the norm in later life. However, there was some truth in the interviewees' perceptions of coercive elements, both in terms of practices and architectural design. The paper argues that it is necessary to reduce the stigma that prevents residential care from being an accepted part of community care and a housing option in the future. The study result shows the potentialities that can contribute to this. (RH)
ISSN: 26892618

From : <https://doi.org/10.1080/26892618.2021.1987372>

267/98 Person-centred Australian residential aged care services: how well do actions match the claims?; by Sylvia Sing Lynn Seah, Lynn Chenoweth, Henry Brodaty.: Cambridge University Press.

Ageing and Society, vol 42, no 12, December 2022, pp 2914-2939.

Recent inquiries into residential aged care services, including the 2018-2019 Australian Royal Commission into Aged Care Quality and Safety, have informed revisions to the 2019 Australian Aged Care Quality Standards. Reforms to the Standards include a greater focus on person-centred services, consumer-directed care and authentic participation in decision-making on service provision by residents and their family members. In respect of person-centred services, the revised Standards reflect the four elements of the 'Valuing, Individualised Care, Personal Perspective, Social Environment' (or VIPS) framework for quality aged (social) care services in the United Kingdom. This qualitative study investigated whether the quality of services in a convenience sample of seven Australian aged care homes, which claimed to be person-centred, aligned with the four elements and 24 indicators of the VIPS framework. Data were obtained via semi-structured interviews with a volunteer sample of people associated with these seven aged care homes: 12 residents, 15 family members and 18 staff members in various roles. Data were analysed deductively with a priori reference to the 24 VIPS framework indicators, achieving data saturation for four common themes which indicated more person-centredness and ten common themes indicating less person-centredness. Only two of seven homes adhered to the four elements and 24 indicators of the VIPS framework across most service offerings. The remaining five homes offered some aspects of a person-centred service. The study findings provide insight to the factors which support and hamper the implementation of the VIPS-informed indicators of a person-centred aged care service, and therefore what is needed to help meet person-centred requirements as outlined in the 2019 Australian Aged Care Quality Standards. (RH)

ISSN: 0144686X

From : <https://doi.org/10.1017/S0144686X21000374>

267/99 Progressing towards a freer market in Australian residential aged care; by Susana F Cochrane, Alice L Holmes, Joseph E Ibrahim.: Cambridge University Press.

Social Policy and Society, vol 22, no 1, January 2023, pp 69-93.

The Royal Commission into Aged Care Quality and Safety has again focussed attention on the failings of the Australian aged care system. Residential aged care in Australia has become increasingly market-driven since the major reforms of the Aged Care Act 1997. The aims of increased marketisation include providing residents with greater choice, higher quality services, and increasing providers' efficiency and innovation. However, marketisation is not meeting these aims, predominantly due to asymmetries of knowledge and power between residents and aged care providers. These asymmetries arise from inadequate provision of information, geographic disparities, urgency for care as needs arise acutely, and issues surrounding safety, including cultural safety. The authors of this article propose a human rights framework, supported by responsive regulation, to overcome the failings of the current system and deliver an improved aged care system which is fit for purpose. (RH)

ISSN: 14747464

From : <https://doi.org/10.1017/S1474746421000786>

267/100 The relation between older adults' trust beliefs in nursing home carers and adjustment to residential care; by Ken J Rotenberg, Lucyna Chmielowiec, Sanjay Patel.: Cambridge University Press. *Ageing and Society*, vol 42, no 10, October 2022, pp 2454-2470.
The study examined the relation between older adults' trust beliefs in nursing home carers (NHCs) and adjustment to residential care. Seventy-six older adults (mean age = 83 years, standard deviation = 7 years from UK nursing homes completed standardised scales of trust beliefs in NHCs and adjustment to residential care (satisfaction with care-giving, social engagement in the nursing home, loneliness and a latent measure). As expected, trust beliefs in NHCs were linearly associated with adjustment to residential care on all measures. There were quadratic relations between trust beliefs in NHCs and on given measures of adjustment to residential care (latent measure, satisfaction with care-giving and loneliness). Adults with very high and those with very low trust beliefs in NHCs showed depressed levels on those measures of adjustment to residential care relative to older adults with the middle range of trust beliefs. The research highlights the importance of older adults' trust beliefs in NHCs for adjustment to nursing homes. The findings show though, that older adults who hold very high, as well those who hold very low, trust beliefs in NHCs are at risk for lower levels of adjustment. (RH)
ISSN: 0144686X
From : <https://doi.org/10.1017/S0144686X21000301>

267/101 The scope of safety in English older adult care homes: a qualitative analysis of Safeguarding Adult Reviews; by Nick Smith, Stacey Rand, Sarah Morgan (et al).: Emerald. *Journal of Adult Protection*, vol 25, no 1, 2023, pp 2-13.
The authors explore the content of Safeguarding Adult Reviews (SARs) from older adult care homes, to understand how safety is understood and might be measured in practice. SARs relevant to older adult care homes from 2015 onwards were identified via the Social Care Institute of Excellence (SCIE) SARs library. Using thematic analysis, initial inductive coding was mapped to a health-derived safety framework, the Safety Measurement and Monitoring Framework (SMMF). The content of the SARs reflected the dimensions of the SMMF. However, to gain a deeper understanding of safety in older adult care homes requires additional understanding of how this unique context interacts with these dimensions to create and prevent risks and harms. This review identified the importance of external factors in care home safety; provides an insight into the scope of safety issues within care homes using the SARs content; and in doing so, improves understanding of how it might be measured. The measurement of safety in care homes needs to acknowledge that there are factors external to care homes, of which a home may have little knowledge and no ability to control. (RH)
ISSN: 14668203
From : <https://doi.org/10.1108/JAP-03-2022-0006>

RETIREMENT

267/102 Older workers' retirement preparation and roles of corporation top leaders in South Korean workplace; by Eunkyung Kim.: Emerald. *Working with Older People*, vol 27, no 1, 2023, pp 59-68.
This paper aims to explore how the heads of South Korean workplaces perceive their older workers' retirement preparation, and their roles in accordance with life design perspective. Qualitative in-person interviews were conducted with the top leaders of 15 corporations in small- and medium-sized enterprises (SMEs), and analysed using a conventional content analysis. Top leaders in corporations consider that older Korean workers whose retirement preparation is their own responsibility have not been actively preparing for their post-retirement life. Nevertheless, some of these heads are attempting to assist with career development or career transition. Some believe that older workers should work as long as they are capable, and should be retained after the official retirement age. These exploratory findings are preliminary: the top-down mechanism might work differently in a specific sector. Future research merits a large-scale investigation of each specific business. It is implied that policy initiatives should support SMEs with subsidies for older workers' employment, empowering longer working as healthy pathways to post-retirement. This is a pilot study which indicates some degree of possible roles of top corporate leaders for workers' retirement preparation, in terms of older workers' career development and career transition and retainment. (RH)
ISSN: 13663666
From : <https://doi.org/10.1108/WWOP-04-2022-0016>

SENSORY LOSS

267/103 No fuss please! I'm deafblind: a personal point of view and some friendly suggestions; by Roger Wilson-Hinds.: Emerald. *Working with Older People*, vol 27, no 1, 2023, pp 44-48.
The author offers practical suggestions as to factors needing consideration when meeting, interacting with, or assessing the needs of an older person living with acquired deafblindness. He draws on his personal experience of living with acquired deafblindness to offer practical suggestions. His paper offers an experiential definition of acquired deafblindness, before providing practical suggestions related to engaging with deafblind people, distinguishing between acquired deafblindness and cognitive decline,

and assessing hearing and sight levels.

There is a paucity of literature on the lived experience of older people living with acquired deafblindness. This paper offers both a unique insight into this experience combined with practical suggestions for those in contact with older deafblind people. (RH)

ISSN: 13663666

From : <https://doi.org/10.1108/WWOP-03-2022-0013>

- 267/104 Reconnecting to others: grounded theory of social functioning following age-related hearing loss; by Elizabeth Fowler, Jayne V Woodside, Frank Kee, David Loughrey, Brian Lawlor, Joanna McHugh Power.: Cambridge University Press.

Ageing and Society, vol 42, no 9, September 2022, pp 2008-2025.

Age-related hearing loss (ARHL) is common and a known risk factor for social disengagement in later life. This study explored social functioning following a diagnosis of ARHL. Using a constructivist grounded theory approach we developed an interview schedule to advance a grounded theory from data collected from six older adults (3 from Belfast and 3 from Dublin) who used either hearing aids or cochlear implants. Interview questions concerned social functioning as well as focusing on their perspective of the impact of ARHL on cognitive functioning. The authors describe a grounded theory conceived as Reconnecting to Others. This theory posits that participants faced social challenges in relation to their ARHL, and resolved these challenges partly through the use of hearing aids and cochlear implantation. The theory also emphasises the importance of help from other hearing aid users for new users, and corroborates prior findings about strategies older adults with ARHL use to cope with their hearing impairment in various social situations. Once hearing aids and cochlear implants are used and adapted to with the help of peers, participants completed their journey by helping others who had received diagnoses of ARHL. Additionally, participants spoke of the pleasure of hearing again. Interestingly, no participant felt that their ARHL had impacted their cognitive functioning. The Reconnecting to Others theory provides a basis for explaining existing quantitative findings as well as creating new hypotheses for future testing. (RH)

ISSN: 0144686X

From : <https://doi.org/10.1017/S0144686X20001853>

SLEEP

- 267/105 Socio-demographic and behavioural factors associated with status change of sleep quality and duration among Chinese older adults; by Yen-Han Lee, Yen-Chang Chang, Po-Ju Chang, Mack Shelley.: Cambridge University Press.

Ageing and Society, vol 42, no 9, September 2022, pp 2206-2223.

China has faced challenges related to the rapid growth of its ageing population, and sleep is one of the public health challenges to this demographic group. This study examines the socio-demographic and behavioural factors associated with status change of sleeping patterns among Chinese older adults, using longitudinal data from the Chinese Longitudinal Healthy Longevity Survey (CLHLS). Socio-demographic factors were selected from the 2012 wave of the CLHLS to examine the sleep status change in the 2014 wave. Multivariable logistic and multinomial regressions were used to study older adults' changes of sleep quality and daily sleep duration. Older adults, 65 years old or above, were selected as study participants. A higher level of education was negatively associated with poor sleep quality and longer sleep duration (>8 hours). Increasing age was positively associated with both shorter and longer sleep duration. Being female was negatively associated with longer sleep duration. However, exercise status, smoking behaviour and alcohol use all were neither positively nor negatively associated with status change of sleeping patterns. Participants' education, age and gender might be important factors associated with sleep status change. However, the effects of behavioural factors should be studied further. Policy implications and further research directions are discussed, based on empirical results. (RH)

ISSN: 0144686X

From : <https://doi.org/10.1017/S0144686X21000015>

SOCIAL CARE

(See 267/28, 267/66)

SOCIAL INCLUSION

(See 267/82)

SOCIAL NETWORKS

(See Also 267/104)

- 267/106 Social support and health among older adults: the Singapore Chinese Health Study; by Jon Barrenetxea, Yi Yang, Kyriakos S Markides (et al.): Cambridge University Press.
Ageing and Society, vol 42, no 8, August 2022, pp 1921-1937.
While having social support can contribute to better health, those in poor health may be limited in their capacity to receive social support. The authors studied the health factors associated with social support among community-dwelling older adults in Singapore. They used data from the third follow-up interviews (2014-2016) of 16,943 participants of the Singapore Chinese Health Study, a population-based cohort of older Singapore Chinese. Participants were interviewed at a mean age of 73 years (range 61-96 years) using the Duke Social Support Scale (DUSOCS). Ordinary least squares regression was applied to DUSOCS scores, which found that those with instrumental limitations, poor self-rated health, cognitive impairment and depression had lower social support scores. Next, latent class analysis was applied to DUSOCS answer patterns, revealing four groups of older adults based on the source and amount of social support. Among them, compared to the 'overall supported' group (17%) with the highest social support scores and broad support from family members and non-family individuals, the 'family restricted' (50%) group had the lowest social support scores and only received support from children. Health factors associated with being 'family restricted' were instrumental limitations (odds ratio (OR) = 1.33, 95% confidence interval (CI) = 1.19-1.49), poor self-rated health (OR = 1.40, 95% CI = 1.28-1.53), cognitive impairment (OR = 1.19, 95% CI = 1.04-1.37) and depression (OR = 2.50, 95% CI = 2.22-2.82). It was found that while older adults in poor health have lower social support scores, they were more likely to receive a lot of support from children. These results showed that lower social support scores among Singaporean older adults in poor health may not indicate lack of social support, rather that social support is restricted in scope and intensified around children. These results may apply to other Asian societies where family plays a central role in elder-care. (RH)
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SOCIAL POLICY AND THEORY

(See 267/91)

TRAUMA, CONFLICT AND WAR

- 267/107 It gets better: childhood sexual abuse and trauma symptoms in female older adults; by Molly Wolf, Nancy Kusmaul, Brooke Mucha.: Taylor and Francis.
Journal of Women and Aging, vol 34, no 6, July-December 2022, pp 800-809.
While there has been a great deal of research conducted on the effects of child sexual abuse (CSA) on trauma symptoms in children and adults, there is less knowledge on the effects on trauma symptoms in older women CSA survivors. This study investigated current symptoms of trauma in adult female survivors of child sexual abuse across each successive decade, beginning with eighteen year olds. This retrospective, anonymous online study gathered a sample of 223 adult female survivors of CSA, 38 of whom were aged 50-59 (17%), and 20 of whom were aged 60+ (9%); their trauma history and their current symptomatology were surveyed. In this sample, the survivors with the most severe trauma symptoms were between 18 and 29 years old. Each subsequent decade reported fewer trauma symptoms, with respondents in the 60+ age group reporting the lowest trauma symptom severity. While a cross-sectional study does not allow us to evaluate individuals' experiences over time, these results suggest that the negative impacts of CSA may abate over the life course. Future research should consider these questions longitudinally to explore whether these results are related to survivorship (those with worse outcomes dying younger) and whether these effects endure as female older adults experience physical and mental challenges in later life. (RH)
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