

## British Society of Gerontology 41<sup>st</sup> Annual Conference

# Book of Abstracts



**Wednesday 11<sup>th</sup> July – Friday 13<sup>th</sup> July 2012**  
**Keele University**



new dynamics of ageing  
a cross-council research programme



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# Keynote Presentations

**Toni Calasanti**

## **Different or Unequal? Considering Power Relations**

In neo-liberal societies of the global North, responsibility for “ageing well” is often placed on individuals, and interventions or attempts at “empowerment” tend to follow suit. Although gerontologists have become increasingly aware of and attentive to diversity among the older population, this more individualistic approach has often led to describing differences and working for personal or social change at that level, rather than considering the power relations that underlie such differences. Focusing on gender and age, I discuss what can occur when we do not dismantle the power relations that lead to inequalities before we construct interventions. For instance, failing to address gendered ageism as we formulate successful ageing can lead to a celebration of the anti-ageing industry as empowerment. This can allow ageing men and women to maintain youth-based, gendered bodies that simultaneously exclude the bodies of “other” elders while maintaining the inequalities that underlie such ideals. Likewise, ignoring the political economic bases of the rhetoric of “too many old people” in policy debates over insurance and pensions, leads to strategies that not only reinforce ageism but also exacerbate inequalities among old people. I conclude that inattention to power dynamics leads to knowledge and interventions that run the risk of failure while also reinforcing existing inequalities and resultant problems.

**Murna Downs**

## **From Invisible Patient to Citizen and Activist: Dementia Comes of Age**

Our understanding of dementia has changed significantly in the last 15 years. What was once regarded as a hopeless and helpless personal tragedy for the person and their family is now regarded as shameful neglect and denial on the part of government and community. National and international contemporary policy requires that we transform our approach to health and social care of people with dementia and their families. Central to creating this transformational change is the involvement of people with dementia and their families, as experts by experience, in research and service development. Alongside these initiatives is the emphasis on creating communities which take positive action to ensure that people with dementia can live their lives as citizens with rights and entitlements. Such ‘dementia-friendly’ communities are seeing an unprecedented growth, nationally and internationally. Complementing these government-led initiatives, people with dementia are themselves organising and engaging as activists in defining the problem and the terms of the debate. I present an overview of these initiatives and consider their implications for our futures with dementia.

## **Panel Discussion: The Future of Ageing Research**

The final plenary session will comprise a panel discussion on the future of research into ageing, chaired by Chris Phillipson (Keele University). The session will follow a question and answer format exploring issues relating to priorities for research, strengths and weaknesses of current research, the role of users, issues for funders and related themes. Members of the panel will be: Sally-Marie Bamford (International Longevity Centre-UK), Mark Gorman (HelpAge International), Philly Hare (Joseph Rowntree Foundation) and Peter Lansley (University of Reading).

## **Oral and Symposia Presentations**

### **NOTE**

The time given for each presentation is the time for the session of which it is a part; please refer to the overview in the Conference Handbook for the timing of individual presentations within a session.

**Stream: Arts and Humanities**

**Date:** Wednesday 11 July 2012 **Time:** 14:00–15:40

**Abstract ID:** 212

**Title:** Meaning and spirituality in later life

**Method:** Symposium

**Author:** Malcolm Johnson

**Institution:** University of Bath

**Co-authors:**

Paul Higgs

Joanna Walker

Keith Albans

**Chair:** Malcolm Johnson

The purpose of the symposium is to bring together a group of researchers and writers on spirituality and ageing; to distil the latest advances in knowledge and thinking – and to engage in vigorous discussion about how we can interpret this learning for the benefit of older people and those who seek to serve them.

**New cultures of ageing**

Paul Higgs (University College London)

This paper situates contemporary later life in the social and cultural changes that have made the designation of old age problematic. In particular it argues that the social space that older people now exist in is substantially removed from the worlds of old age that have previously provided the coordinates for organized religion. Utilizing the 'Cultures of Ageing' as a lens to understand the impact of the generationally-based culture of the Third Age on religious and spiritual practices it argues that many of the assumptions that held together both the 'natural' and standardized life course have been transformed by the emphasis on agency, choice and lifestyle, which now constitute the desirable objectives of post-work life. This transformation of ageing presents a whole number of challenges for thinking about religion and spirituality.

**Spiritual development in later life: a learning experience?**

Joanna Walker (Diocese of Guildford)

Is spiritual development something that can be learned and, if so, can it be learned by anyone or only achieved by a few? Or does it develop naturally with age? Are we all on a spiritual journey whether we acknowledge it or not? This paper wishes to argue that learning is an integral part of 'spiritual ageing' in a number of ways. There appear to be three main arenas for learning that support spiritual ageing: the processes described by human life-long development models; reflection on experience leading to ways of knowing/believing; conscious learning as part of spiritual journeying. Some ways and means for learning opportunities to address these will be briefly suggested.

## **Meeting spiritual needs in old age: older people on the final lap**

Keith R. Albans (Methodist Homes (MHA), UK)

Spiritual needs in older age, and particularly towards the end of life, vary from person to person, but in residential care settings it is vital to encourage all staff to see that they have a role in addressing and meeting these needs.

The End of Life Care Strategy encourages meaningful conversation about end of life wishes. This paper will outline an approach to training social care staff that gives them the confidence to become companions to older people in their care and advocates for them in working to ensure that their wishes are carried out. It also examines the role of remembering those who have died as a significant means of reassuring residents that their own needs will be addressed when the time comes.

## **Spirituality, biographical review and biographical pain at the end of life old age**

Malcolm Johnson (University of Bath)

As individuals move into the later stages of life, they spend more time in reflection about the life lived. In part this is due to the onset of infirmities, as chronic diseases take their toll on mobility and autonomy. Unchosen solitude and the frustration of a failing body, both prompt recollections of more engaged times and draw attention to the deficits of old age. The evidence of biographical interviews indicates that the predominant self-evaluation is of disappointment, unworthiness and having failed to 'come up to expectation'. To be troubled in this way may be one of the undiscovered norms of old age. But when it is accompanied by profound guilt, anger at the dishonesty, misuse and abuse of others and shame, there is reason to be deeply concerned. This paper will explore the evidence of spiritual self judgement in old age, the conditions in which biographical pain arises and how it might be addressed.

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**Stream:** Arts and Humanities

**Date:** Wednesday 11 July 2012 **Time:** 16:10–17:10

**Abstract ID:** 179

**Title:** To what extent is religion a source of empowerment for older women?

**Method:** Oral

**Author:** Sharon Wray

**Institution:** University of Huddersfield

In the UK, there has been a lack of attention paid to religion and faith within mainstream gerontology and the sociology of ageing. Few studies have sought to examine how older women perceive and experience religion and the impact this has on their life-satisfaction and self-fulfilment. Most of the research in this area is American and whilst this provides interesting insights it does not build knowledge and understanding of the UK context. Consequently, the extent to which religion may act as a source of empowerment for older women has been neglected.

This paper questions the extent to which religious belief and faith empower older women to cope with difficult life events and circumstances. It presents findings from two qualitative research projects that set out to explore older women's quality of life across ethnic and cultural diversity. The findings suggest religion plays an important role in the lives of older women. For example religion was used to prevent loneliness, gain 'peace of mind', build social support networks, and as a source of comfort for those who had been widowed. The paper concludes by arguing for approaches to the study of ageing that are sensitive to the potential impact of religious belief on the everyday lives of older women.

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**Stream:** Arts and Humanities

**Date:** Wednesday 11 July 2012 **Time:** 16:10–17:10

**Abstract ID:** 159

**Title:** Contemporary visual art and the well-being of older people: policy and practice

**Method:** Oral

**Author:** Anna Goulding

**Institution:** Newcastle University

**Co-author:** Andrew Newman

This paper presents the initial findings of 'Contemporary visual art and the wellbeing of older people: policy and practice', funded by a Follow-on Fund grant from the ESRC (Jan 2012-Jan 2013). The aim is to build upon the results of a previous project 'Contemporary visual art and identity construction – wellbeing amongst older people' and produce research-informed arts policy and arts interventions designed to improve the lives of older people. Three seminars will be undertaken: the first will explore the research/policy and practice landscape; the second will focus upon the development of evidence-based interventions and the third present the results of an intervention working with those with early stage dementia.

This paper will present the results of the first seminar, considering the perspectives of the stakeholders including academic researchers, policy makers, arts practitioners and agencies working in the sector. We want to address the following issues:

- The difficulty the arts have influencing health policy and how to overcome this;
  - While the importance of arts to the wellbeing of older people is recognized by arts policy makers (Arts Council, England, 2007) and is demonstrable through research (Cohen et al, 2006) it is not priority policy area in England;
  - As UK public policy follows the principles of the New Public Management (Osborne, 2010) a biomedical approach to research is privileged, which in turn influences the evidence that is required to support funding decisions by government departments.
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**Stream:** Arts and Humanities

**Date:** Wednesday 11 July 2012 **Time:** 16:10–17:10

**Abstract ID:** 73

**Title:** Creative ageing: exploring social capital and arts engagement in later life

**Method:** Oral

**Author:** Jackie Reynolds

**Institution:** Staffordshire University

This paper presents findings from PhD research exploring the meanings that older people attach to their participation in group arts activities throughout their lives. Existing literature on arts engagement and ageing is limited, especially in the UK context, and does little to reveal the complex factors that shape people's participation. Much existing research approaches the subject from an arts and health perspective, meaning that issues for older people who are actively engaged in their communities are largely unexplored, and their voices are absent. Reflecting a narrative approach and the need to adopt a life-course perspective, the research presented in this paper involved qualitative interviews with participants who were recruited through a range of groups in a case study town. These included choirs, dancing, amateur dramatics, and arts and crafts groups. The study's findings highlight the key roles played by people's childhood experiences at home, school and church, in shaping arts engagement. There are important gender and class differences in participants' experiences, and these in turn are significantly influenced by historical context. In challenging a common 'deficit' approach to research with older people, the study uses the concept of social capital as a basis for analysis. This emphasizes the critical importance of people's relationships and communities in shaping participation. Findings offer qualitative understandings of the ways in which older people experience and invest social capital through their group arts engagement, and of the dynamics of mutual support and reciprocity that can thus be seen in the lives of older people.

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**Stream:** Arts and Humanities

**Date:** Thursday 12 July 2012 **Time:** 08:40–10:20

**Abstract ID:** 38

**Title:** Theatre, ageing and community memory (1): international perspectives

**Method:** Symposium

**Author:** Miriam Bernard

**Institution:** Keele University

**Co-authors:**

Anne Basting

Janet Fast

Susan Feldman

Michelle Rickett

**Chair:** Miriam Bernard, Keele University

**Discussant:** Anne Basting, University of Wisconsin–Milwaukee

A growing interest in the arts and ageing is reinforced by an evidence base – especially from North America – which continues to demonstrate the benefits of participation in creative and meaningful activities. Whilst located in this growing evidence base, the projects presented in this symposium all focus on theatre and drama. Contributors present findings that emphasize the importance of continuing to challenge stereotypes that creativity declines/ceases in old age and demonstrate how theatre/drama can be developed as a medium for the inclusion of older adults and young people with associated implications for positive health outcomes and community cohesion.

**Creating home with Homer**

Anne Basting

The Penelope Project was a collaboration between Luther Manor care facility, Sojourn Theatre, and the University of Wisconsin Milwaukee. This paper reports their endeavour to jointly devise a professionally produced play (inside the care facility for an outside, paying audience) inspired by discussions of the story of Penelope from Homer's *Odyssey*. The project evaluation tracks the impact on students, residents, audience members, staff, artists, and families, and offers insights into how extended, collaborative, and rigorous arts programming that integrates rather than separates people by disability can be used to change the culture of long-term care – particularly of dementia care.

**Theatre and ageing: participation, belonging and intergenerational creativity**

Michelle Rickett et al.

The Ages & Stages project is funded under the multidisciplinary NDA programme and is a partnership with the New Vic Theatre, Newcastle-under-Lyme. Through an innovative mixed method approach, it has provided both theoretical and practical understandings of the role that theatre continues to play in the lives of older people and in the wider community. In this paper, we explore the participation of older people within the life of the New Vic Theatre, as well as the potential of drama to enhance intergenerational understanding and well-being. Our analysis draws from qualitative narrative interviews with over 90 people, and also the experiences of an intergenerational group of participants who are working with us to produce a new piece of documentary drama about ageing and theatre.

## **"Age is just a silly thing": confronting age stereotypes through intergenerational theatre**

Janet Fast, et al.

This paper reports on findings from the Canadian CIHR/NDA funded project Health and Creative Aging: Theatre as a Pathway to Healthy Aging. Linked with Ages & Stages, and in partnership with 'GeriActors and Friends', an established intergenerational community-based theatre company, the project examines links between engagement in the arts and healthy ageing. Findings reported in this symposium illustrate the ways in which sharing and translating personal stories into a creative format and engaging together in a playful approach to theatre develops trust, openness, mutual understanding and respect, ultimately breaking down negative stereotypes of, and the generational divide between, older adults and today's youth.

## **More than a dead man's wife: from thesis to theatre**

Susan Feldman

For over six years Dr Feldman has been involved in touring the play 'Wicked Widows' (based on her PhD research) to community groups around Victoria and other states in Australia as well as running linked public forums. This paper presents community-based theatre as a tool for communicating research findings and health promotion messages to the general public. 'Wicked Widows' was a collaborative project between Alan Hopgood, a leading Australian playwright, and the researcher. The performance has been attended by over 6000 people and staged in over 40 locations. Substantial evidence, including comments from audiences during and after forums, and a formal evaluation process indicates that there is significant value associated with theatre as a knowledge transfer tool.

**NOTE:** this symposium is linked to: **Theatre, ageing and community memory (2): translating research into performance**

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**Stream:** Arts and Humanities

**Date:** Thursday 12 July 2012 **Time:** 14:00–15:40

**Abstract ID:** 40

**Title:** Theatre, ageing and community memory (2): translating research into performance

**Method:** Symposium

**Author:** Miriam Bernard

**Institution:** Keele University

**Co-authors:**

Anne Basting

Jill Rezzano

David Barnet

**Co-Chairs:**

Anne Basting, University of Wisconsin–Milwaukee

Miriam Bernard, Keele University

Anne Basting will set the scene for this practice-based symposium by briefly outlining the growing evidence base – especially from North America – which continues to demonstrate the benefits of participation in creative and meaningful activities in later life. The main focus of the symposium will then explore, in practical terms, the ways in which two intergenerational theatre companies – one from the UK and one from Canada – have been involved in projects in which research, practice, experience and memories come together into performance pieces.

**Translating research into performance: intergenerational drama as creative practice**

Jill Rezzano

Drama is by nature inter-generational and, from its very beginnings, has thrived on multi-age relationships in all their complexities and drawn on our collective emotions and concerns about where we stand in relation to our elders and offspring. In this workshop, we discuss the process of transforming research findings from the Ages & Stages project into the performance piece being presented at the New Vic theatre on the opening evening of the BSG's 41<sup>st</sup> annual conference. The final year of the project has involved a series of workshops with both older people and members of the Vic's Youth Theatre, and has used materials generated from the archival research and from a series of 79 individual/couple interviews (96 people in total) and 9 focus groups (51 people).

Jill Rezzano, the New Vic's Head of Education, will be asking participants to reflect on a number of questions such as: What is the purpose of participatory inter-generational drama as a distinct practice? Does it offer the opportunity for participants of varying ages to construct, for themselves, work that reflects not only a variety of perspectives but also the commonality of human journeys? How is it possible to value experience equally, and what does the process of constructing and negotiating meaning through drama give to the creative expression of all participants?

**“We don’t even buy green bananas”: a look at an intergenerational theatre company**

David Barnet

GeriActors and Friends, is an intergenerational theatre company from Edmonton, Canada, now in its twelfth year. It integrates seniors with graduate and undergraduate university students, and (more recently) high school students, in the creation of plays based on the stories and issues of the participants. It also runs extensive community outreach programs (in Performance Improvisation, Rock 'n Roll, Storytelling, etc) and produces FEST (Festival of Edmonton Seniors Theatre) as part of Edmonton's annual Creative Age Festival. Its mandate is to introduce the concept of 'creative ageing' and produce theatre of meaning for the actors and their

audiences, which are families, seniors and caregivers. The work is based on playfulness and improvisation, the discovery of commonalities (between seniors and generations), and good food, which seems to be essential for community building.

David Barnet, the Artistic Director, will describe, with some DVD examples, the development of the company's recent plays, and discuss some of the issues they face, such as variety of recruitment, biography versus invention in story development, and playwriting. Conference members will be invited to participate in some of the playful and musical approaches to theatre used by the GeriActors.

**NOTE:** this symposium is linked to: **Theatre, ageing and community memory (1): international perspectives**

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**Stream:** Arts and Humanities

**Date:** Thursday 12 July 2012 **Time:** 16:40–18:20

**Abstract ID:** 139

**Title:** Using cinema and film to explore ageism across the generations: a small pilot

**Method:** Oral

**Author:** Catherine Bailey

**Institution:** Northumbria University

**Co-authors:**

Rose Gilroy

Vincent O'Brien

Ian Convery

Within the UK, increasing numbers of older people living longer, numbers of young people decreasing and economic recession, are said to be placing pressure on state services and social protection. Stereotypes and prejudices may lead to intergenerational tensions. Daily spaces of education, work and leisure are often age segregated. Mass media, including cinematic portrayal of age specific roles and relationships between generations, alongside powerful consumer marketing, entrench what may be uncritically reproduced in everyday practices. One response is intergenerational practice (IP), activities that bring together older and young people or children, particularly in relation to a more equitable sharing of skills and knowledge. Challenges persist including: how to reach a wide section of the population, choose appropriate activities, sustain effective relationships with partner organizations, attract long-term funding and commitment to sustainable strategies. Yet at a time of reductions in local authority spending and a health service restructuring, IP can contribute to government policy and address social issues, in a holistic, locally appropriate way. This paper reports on preliminary findings from an innovative intergenerational pilot project. Younger and older people from communities in Newcastle upon Tyne, England, are engaging in educational workshops using the medium of film and producing a short documentary to explore and counter, shared aspects of ageism. Within the 2012 European Year of Active Ageing and Intergenerational Solidarity, materials produced can be used across community groups, including the more disadvantaged, to promote age aware, intergenerational local policy strategies and to challenge ageism rooted in everyday life.

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**Stream:** Arts and Humanities

**Date:** Thursday 12 July 2012 **Time:** 16:40–18:20

**Abstract ID:** 35

**Title:** The circle of life: nice girls round the corner

**Method:** Oral

**Author:** Ruth Basten

**Institution:** Keele University

My current PhD thesis looks in detail at two of Peter Cheeseman's ground breaking musical documentaries; *Fight for Shelton Bar* (1972) and *Nice Girls* (1993). These documentaries were created by Peter Cheeseman and his company at the Victoria Theatre and New Victoria theatre, Stoke-on-Trent. The original documentaries were created from verbatim transcripts of interviews and other research material. All material relating to the productions has been archived and is currently kept at Staffordshire University. I aim to discuss the similarities and differences between the source materials from which the documentaries were constructed; and across these documentaries themselves. The project will develop a specific focus on the way that these musical documentaries dealt with ageing and intergenerational relations within a very specific social context.

This presentation, created as part of my PhD, will explore, through the medium of a rehearsed play reading, the life courses of those involved as actors at the Vic and New Vic theatres as well as the participants in the documentary *Nice Girls*. The archive has allowed me to return to the material and to extend this material with current narrative interviews, exploring the life courses of those involved, especially with regard to their links with their communities both within the theatre and within Stoke-on-Trent. I have chosen to not draw a halt to the narratives of those involved but rather to continue these narratives to the present day through the medium of a play.

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**Stream:** Arts and Humanities

**Date:** Thursday 12 July 2012 **Time:** 16:40–18:20

**Abstract ID:** 208

**Title:** Evidence for intergenerational engagement: a case study of 'On Aging', a devised theatrical performance

**Method:** Oral

**Author:** Rebecca Johnson

**Institution:** Buehler Center for Aging

This paper is based on the findings of a case study of enhancing intergenerational practice through a performance of devised theatre in London in September 2010. It argues that On Ageing is an interesting outlier when considered within the context of prevailing reminiscence and intergenerational practice, as well as associated community and health policy initiatives, and measures of the success of theatrical performances. The piece was performed by 7 children recruited from local community schools in Southwark and Lambeth (none of whom were considered to be 'at risk') and 9 'active' adults over 65 (none of whom were resident in care or considered 'vulnerable') (Springete et al 2008, p.5). The project was led by professional artists whose main aim was to deliver a creditable performance on a national stage (the Young Vic). The findings suggest that when measured against community-based criteria for good intergenerational practice, the project scores highly in terms of cross-community networking, but relatively low in terms of sustaining relations and reciprocity between generations. Indeed, as the project progressed towards the inaugural performance, the opportunities for children and older people to interact lessened. However, concurrent analysis of the impact of the performance on the audience suggests that the performance generated greater 'generational intelligence' amongst younger participants and heightened the awareness of age and ageing amongst audiences of all ages. The paper ends by arguing that performance is an under-utilized concept in critical gerontology and draws on the work of applied anthropologists and drama researchers in order to articulate how the concept could be useful to gerontologists.

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**Stream:** Arts and Humanities

**Date:** Thursday 12 July 2012 **Time:** 16:40–18:20

**Abstract ID:** 55

**Title:** "There's a reason we're here": an archival analysis of community-based intergenerational theatre

**Method:** Oral

**Author:** Sally Chivers

**Institution:** Trent University

**Co-authors:**

Janet Fast

David Barnet

Jacquie Eales

This paper reports findings from a collaborative project, "Theatre as a Pathway to Healthy Aging" funded by the Canadian Institutes for Health Research. The primary goal is to offer a new way to understand the contributions of creative ageing (specifically seniors' involvement in theatre) to health outcomes for ageing adults. To do so, the research team is working closely with an intergenerational theatre company in Edmonton, Alberta.

The GeriActors and Friends (G & F) unites seniors and younger generations in exploring common issues and stories through the process of performer-created play development. They work in a tradition of community-based theatre: performances come from the actors' own experiences and convey their values, interests, and concerns. The resulting oeuvre reflects an engaging combination of humour, reminiscence, and serious commentary.

Complementing qualitative interviews reported on elsewhere at BSG, this component of the project comprises textual analysis of a range of archival materials gathered since the inception of G & F. After joining the company, a university student recorded in her journal "seniors are a library of experience." Yet the G & F repertoire repeatedly turns to themes of invisibility and the importance of finding a voice. A chronological analysis of the play scripts and ancillary materials will support the words of one GeriActor: "There's a reason we're here." The paper shows how G&F have made the seniors' "library of experience" public.

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**Stream:** Arts and Humanities

**Date:** Thursday 12 July 2012 **Time:** 16:40–18:20

**Abstract ID:** 116

**Title:** Documentary theatre and the place of ageing: representation and the role of the archive

**Method:** Oral

**Author:** Lucy Munro

**Institution:** Keele University

**Co-author:** David Amigoni

Drawing on research carried out for 'Ages and Stages: The Place of Theatre in Representations and Recollections of Ageing' (Keele University, 2009-12; <http://www.keele.ac.uk/agesandstages/>), this paper argues that the pioneering social documentary work of Peter Cheeseman at the Victoria Theatre, Stoke-on-Trent, UK, represents an under-explored source for the study of ageing and intergenerational relations. The importance of this work lies in the complexity of documentary drama's interactions with ageing and the life-course, and in the richness of the Victoria Theatre's archive – which preserves prompt-books, draft scripts, photographs and the interviews with local people that were used as source materials for the shows – as a repository for multiple viewpoints and narratives.

Older members of the community were an important source for the theatre's documentaries, their testimonies and life-stories woven into broader narratives, and preserved in the archive. They were represented on stage, often by younger actors who doubled multiple roles within one production; in some cases their own voices were heard as voice-over within the theatre. Moreover, the theatre – itself a 'young' institution in the 1960s – rhetorically adopted the place of older people within the locality; Cheeseman commented that his theatre had a responsibility to take the place of 'old men' as preservers and purveyors of community memory. The archive valuably multiplies the range of 'older' voices that can now be reassessed, some of which were not heard or were marginalized in the original productions. The archive is thus not only a source, but also a critical object in our enquiry.

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**Stream:** Arts and Humanities

**Date:** Friday 13 July 2012 **Time:** 08:40–10:00

**Abstract ID:** 181

**Title:** Ethical reflections on life style, self-realization and existential meanings in late modern ageing

**Method:** Symposium

**Author:** Jan Baars

**Institution:** University of Humanistic Studies

**Co-authors:**

Joseph Dohmen

Hanne Laceulle

Peter Derkx

**Chair:** Jan Baars

In contemporary society the ways in which ageing should be approached have become diffuse as traditional models are fading away and emerging perspectives are changing rapidly. In this sense, ageing is being affected by the destabilization that has become a major theme in studies of late modern life. In this context, the concepts of 'lifestyle', 'self-realization' and 'meanings in life' play a major role in articulating perspectives that try to give some clarity and orientation. In this seminar these three perspectives will be discussed from an ethical approach to ageing well.

In his paper "Lifestyle as a 'practice of freedom'. Michel Foucault as a guide for ageing well", Joseph Dohmen understands the function of a 'lifestyle' as clarifying preferences (needs), organizing practices and providing unity to one's life. Thus, a distinctive life style creates and supports some degree of autonomy in late modernity, where situations can change rapidly and adaptation and choice are inevitable. In this paper, Dohmen will explore the possibilities to use the concept of lifestyle to bridge the gap between the two concepts of agency and structure, following a proposal by Hendricks & Hatch (2009). Hendricks and Hatch show that agency is generally connected with 'life choices', whereas structure is linked to 'life chances' – or the lack of these. The concept of 'lifestyle' refers to the interaction between life choices and life chances and is meant to represent the various ways in which people are ageing, particularly applicable to choices of behaviour in relation to one's health. Drawing on the later writings of Michel Foucault, Dohmen will discuss how Foucault's concept of 'practice of freedom' can be used to overcome the dichotomy between agency and structure and can play a role in developing a meaningful perspective on ageing well.

In her paper "Some reflections on self-realization and ageing well in late modernity", Hanne Laceulle how individuals have become the architects of their own life course, autonomously shaping their lives according to self-defined goals and values; how they are at least (implicitly) expected to fulfill this role (cf. Giddens 1991; Beck 2002). Such a view can be challenged from an empirical perspective as critical gerontological work has shown deeply intervening structural and institutional arrangements and dominant cultural scripts regarding later life. However, self-realization as a moral orientation also requests a further reaching scope. It's not just about upholding a reasonable degree of agency opposite the structural influences shaping the life course and diminishing negative consequences of the latter. Self-realization implies more than that. A viable perspective on what 'ageing well' means under late modern circumstances also requires a view on how people confront questions of meaning and value in their lives. Drawing on the works of, for instance, Charles Taylor, Axel Honneth and Dieter Thomä, Laceulle will reflect on self-realization as a moral orientation, searching for viable new views on what 'ageing well' in late modernity could mean.

In his paper "Meaning, well-being and ageing", Peter Derkx will argue that the meaning of life does not exist: people have different views in this regard and even for one person there are many aspects to a meaningful life, not just one. He will begin by explicating the concept of a meaningful life and its different dimensions. After that a further exploration of meanings in ageing will be given through a meta-analysis of empirical research on 'well-being' in ageing. Although the concept of 'well-being' shows considerable overlap with 'meanings', much

research has been done on 'well-being', much less on 'meanings'. An analysis of research on 'well-being' sheds also light on the concept of 'meanings in life'. Two strands of research on 'well-being' in ageing will particularly be considered: the "subjective well-being" approach of Ed Diener and colleagues and the "psychological well-being" approach of Carol D. Ryff and colleagues.

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**Stream:** Arts and Humanities

**Date:** Friday 13 July 2012 **Time:** 10:30–11:30

**Abstract ID:** 110

**Title:** Talking about old records: generational musical identity among older people

**Method:** Oral

**Author:** Matt Connell

**Institution:** Nottingham Trent University

This paper explores some ethnographic findings gathered during my work as a DJ and academic, particularly in relation to a community arts project called Talking About Old Records. This project brings together teenagers and older people from a range of backgrounds at collaborative workshops using DJ technology and old records. These facilitate conversations about what music means to the participants. This paper puts the emphasis on the older people, exploring the emergence of generational musical identities from the 1940s onwards. Relationships between the spread of personal listening technologies, 'youth music' and the birth of the teenager in the 1950s are explored in the context of older peoples' fears about a loss of musical sociality, fears that are articulated against a background of cyclical manifestations of intergenerational musical conflict and scandal.

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**Stream:** Arts and Humanities

**Date:** Friday 13 July 2012 **Time:** 10:30–11:30

**Abstract ID:** 123

**Title:** "I'd rather have music": impacts of music for people with dementia approaching the end of life and their carers

**Method:** Oral

**Author:** Claire Garabedian

**Institution:** University of Stirling

Music can access parts of the brain that remain unaffected by dementia; therefore providing the possibility of communication where other avenues have become greatly lessened, thus promoting better quality of life and perhaps more meaningful engagement with others (Cuddy and Duffin 2005). As the lifespan of people in developed countries continues to expand, the demand for non-invasive and non-pharmaceutical ways of providing care and support for people who have dementia and who are very frail is also increasing. However, this important population remains relatively under-researched due to complex ethical and communication issues involved. This paper reports findings from fieldwork conducted at five care/nursing homes in Scotland as part of a PhD exploring the potential effects of live and recorded self-chosen music on people with dementia who are very frail and their carers. Based on the realist evaluation model (Pawson & Tilley 1997), this paper discusses what worked for whom and in what circumstances. Primary themes of engagement, loss, and resilience that emerged from analysis of the data are examined; merits and limitations of chosen fieldwork methods (e.g. video observation, interviews, rating scales, biomedical measurements) and analytical strategies are also examined, providing suggestions for future related research.

References:

Cuddy LL & Duffin J (2005) Music, memory, and Alzheimer's disease: is music recognition spared in dementia, and how can it be assessed? *Medical Hypotheses*, 64; 229-235.

Pawson R Tilley N (1997) *Realist Evaluation*. Sage Publications, London

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**Stream:** Arts and Humanities

**Date:** Friday 13 July 2012 **Time:** 10:30–11:30

**Abstract ID:** 101

**Title:** Participation in community arts for the health and well-being of people with dementia, their carers, and the communities in which they live – implications for research, policy and practice

**Method:** Oral

**Author:** Gill Windle

**Institution:** Bangor University

People with dementia experience negative societal attitudes and social exclusion. Currently there is no cure for dementia, so attempts to maintain quality of life and well-being are crucial. Changing awareness and understanding about dementia, enabling people to participate and 'live well' in dementia supportive communities should be a normal part of everyday life. There has been an upsurge from research, policy, and practice in interest in the positive effects engagement in the arts can have on quality of life, health and well-being. In the UK, there is considerable activity around delivering art programmes to people with dementia. This presentation highlights some findings of research development work recently funded by the Arts and Humanities Research Council. It identifies a number of research gaps and methodological issues – for example anecdotal evidence is strong and the positive effects are regularly noted – but the scientific evidence is weak in comparison. It discusses some of the challenges around researching this topic, and what might be needed to build on best practice, make an impact on policy and contribute to the vision of dementia supportive, resilient communities.

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**Stream:** Critical Perspectives

**Date:** Wednesday 11 July 2012 **Time:** 14:00–15:40

**Abstract ID:** 93

**Title:** Sex in later life: from sin to salvation

**Method:** Oral

**Author:** Chris Gilleard

**Institution:** UCL London

In the Middle Ages, understandings about and representations of sex in later life were transformed. The dominant view in Classical Greece and Rome had treated sex in later life as a kind of tragi-comedy. For the Middle Ages and throughout the Renaissance, it became a mortal danger, affecting both body and soul. With the rise of medical and scientific thinking came a new understanding of sexual difference and sexual reproduction. This culminated within the modern medical school by the triumph of physiology over anatomy. The examination of and explorations into sexual difference that were pursued by the physiologists of the 19<sup>th</sup> century were still influenced by moral and religious views concerning sex and sexual difference and many investigators were still entangled by the vestiges of 'pre-scientific' medical thinking. But the birth of endocrinology and the discovery of hormones in the late nineteenth and early twentieth century lead physiologists and their medical colleagues to begin considering the sexual constitution of men and women as 'fluid' and alterable. Such potential for achieving change was not confined to matters of sexuality. It became possible to make sex the means to alter the lifespan. Despite the continuing beliefs about the premature ageing effects of sex, the idea of sex as a rejuvenant began to dominate medical thinking, a change that has led to the contemporary view that successful sex is part and parcel of successful ageing. This paper will concentrate upon the late 19th century when this change in perspective arguably began.

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**Stream:** Critical Perspectives

**Date:** Wednesday 11 July 2012 **Time:** 14:00–15:40

**Abstract ID:** 158

**Title:** Older women's sexualities: experiences and transitions

**Method:** Oral

**Author:** Rhiannon Jones

**Institution:** Manchester Metropolitan University

An overview of the literature in the field of sexuality and ageing has identified a dearth of qualitative research that explores older women's experiences of their sexuality within the context of ageing. A PhD research study was undertaken to broadly explore these experiences, the methodology of which, was informed by an earlier part of the study where a group of older women were asked their views on how to research sexuality and ageing (Jones 2011). One main recommendation was that researching sexuality and ageing needs to take place in a critical, challenging and inclusive framework and to this end a wide definition of sexuality needed to be used.

The aims of this research are to identify; if, and how, ways of viewing and expressing sexuality changes as women age; how any changes are dealt with; and any subsequent impact on their view of themselves. A purposive sample of sixteen older women (70 years +) were recruited to take part in individual semi-structured interviews. The interview schedule used a social constructionist definition of sexuality enabling the participants to discuss a wide range of issues such as relationships, identities, desires, beliefs, behaviours and practices (Weeks 2003). This paper focuses on presenting an overview of the main themes that were identified inductively from the data using thematic analysis (Braun and Clarke 2006).

#### References:

Braun V. and Clarke V. (2006) Using thematic analysis in psychology. *Qualitative Research in Psychology*, 3, 77-101.

Jones R. (2011) Researching sexuality and ageing. In Dunk-West P and Hafford-Letchfield T. *Sexual Identities and Sexuality in Social Work: research and reflections from women in the field*. Ashgate.

Weeks J. (2003) *Sexuality*, 2<sup>nd</sup> edn. Routledge.

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**Stream:** Critical Perspectives

**Date:** Wednesday 11 July 2012 **Time:** 14:00–15:40

**Abstract ID:** 215

**Title:** The dynamics of bodily changes and self in older women: a comparative study

**Method:** Oral

**Author:** Francesca Ghillani

**Institution:** Oxford Institute of Population Ageing

Focusing on the interaction between the body and self during old age, this research investigates how and to what extent changes in social and cultural conditions affect these dynamics. Ageing, as both a multiform social and bodily process, is constructed throughout the entire life span. Therefore, it is surprising that only a few studies underline the importance of a Life-Course perspective. Moreover, several studies have highlighted the complexity of the relationship between body and self in the lives of women, especially when bodily changes lead to strong shifts in social roles.

Applying qualitative methods, I have been carrying out interviews with members of two populations:

- Women, aged 60 to 70, born in a small Italian village, who moved to London in their adulthood;
- Women, aged 60 to 70, born in the same village and still living there.

All the subjects were exposed to the same social conditions in their youth and are now becoming older in two different social environments.

During the interviews, participants have explored the process of ageing in relation to bodily changes and the experience of their selves adapting to such transitions.

In my talk, I would like to present the preliminary results of the qualitative analysis of my data through a careful comparison between the two samples. In particular, the presentation will focus on the differences in beauty habits and medical practices as expressed by the interviewees, reflecting about the influence of the two distinctive social contexts in which they are becoming older.

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**Stream:** Critical Perspectives

**Date:** Wednesday 11 July 2012 **Time:** 14:00–15:40

**Abstract ID:** 219

**Title:** Making connections visible: social connectivity, embodiment and daily life

**Method:** Oral

**Author:** Wendy Martin

**Institution:** Brunel University

**Co-author:** Veronika Williams

Whilst the significance of social relationships and connectivities are well recognized in research with people in mid to later life, these connections are rarely situated within the context of their daily lives. The aim of this paper is to explore the significance of connectivity within the ordinary and day-to-day lives of people in mid to later life. In particular, the texture, rhythm, spatiotemporal and embodied nature of social connections will be highlighted.

We will draw on data collected as part of an empirical study funded by the ESRC; in particular, of 16 participants (age range 50–70 years; 12 women, 4 men) who have different daily routines. Data collection methods included self-directed photography (photo diaries) and in-depth interviews (photo-elicitation). Visual and textual data were analysed using thematic analysis.

The importance of connectivity, i.e. connections with family, partners, friends and the locality, as well as wider inter/national communities was apparent. These connections were maintained or created virtually (social networking, emails) and in shared space and/or time (telephone, living together, visits). Other themes including mobility, engagement in local communities, and work related patterns, further related to concepts of social connectivity, and appeared to promote, or sometimes hinder, participants' connections and relationships.

Exploring the routines and patterns that underpin the everyday lives of people as they grow older has enabled us to make visible how people build, maintain and experience their social connections. The paper will conclude by highlighting the significance of embodied co-presence and the increasing nature of virtual connectivities.

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**Stream:** Critical Perspectives

**Date:** Wednesday 11 July 2012 **Time:** 14:00–15:40

**Abstract ID:** 253

**Title:** Photographing physical activity: movement, rhythm and the phenomenology of ageing

**Method:** Oral

**Author:** Cassandra Phoenix

**Institution:** European Centre for Environment and Human Health

**Co-author:** Noreen Orr

Engaging with the phenomenology of the body offers one way to portray and understand embodied perspectives of ageing more fully. Phenomenology, with its focus upon the here and now of bodily existence and presence, acknowledges the centrality of the body in the relationship between self-consciousness and the self. Yet gaining insight into perceptions of the world through the body (as opposed to merely being a body in the world) is no easy task. It requires an understanding of bodily practices that have become habitual and taken for granted.

Taking as our starting point Merleau-Ponty's proposition that perception of the world is inextricably linked with motion, in this presentation we present data gathered from a group of physically active older adults. We share researcher produced visual images of the body 'doing' physical activity. We then discuss our use of these images as a tool to "grasp at" (Hockey & Allen-Collinson, 2007) the participants embodied experiences of physical activity and its central components of rhythm and movement.

This presentation uses data from the 'Moving Stories' project; An ESRC funded piece of research, which is examining the impact of physical activity on perceptions and experiences of (self-)ageing.

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**Stream:** Critical Perspectives

**Date:** Wednesday 11 July 2012 **Time:** 16:10–17:10

**Abstract ID:** 142

**Title:** Give me your money! How stereotypical representations of older people influence donations to charity.

**Method:** Oral

**Author:** Hannah Swift

**Institution:** University of Kent

In two studies, this research examined how real images used by two different charities, that both represent the needs and views of older people in the UK, influence people's willingness to donate money to each charity. Using the Stereotype Content Model as a theoretical basis, Study one (n=20) established that the images these charities use portray older adults in stereotypically different ways. Study two (n=44), an experiment, investigated how the content of the stereotypes activated by the different images inform participant's choices to donate money to either charity. Results showed that participants (mean age = 22) were significantly more likely to donate money to the charity that represented older adults in a stereotypically more negative manner. Findings are discussed in relation to stereotyping processes and the perpetuation of negative age-stereotypes in the media.

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**Stream:** Critical Perspectives

**Date:** Wednesday 11 July 2012 **Time:** 16:10–17:10

**Abstract ID:** 104

**Title:** Growing old and incompetent? The behavioural effects of ageing stereotypes

**Method:** Oral

**Author:** Ruth Lamont

**Institution:** University of Kent

**Co-authors:**

Hannah Swift

Dominic Abrams

This paper reviews evidence showing that age stereotypes impact on older people's mental and physical abilities. Mental and physical decline are often accepted as inevitable biological consequences of the ageing process. However, a growing body of research is concerned with the way that negative expectations (stereotypes) of ageing may directly affect older adults' mental capabilities. Research has established that features of a test situation (e.g. instructions that the test is about 'memory', or that the test is looking at 'age differences') can invoke negative ageing stereotypes of competency. Then, older adults' cognitive performance is impaired, confirming these negative stereotypes. Younger adults, for whom the stereotype does not apply, do not experience these negative effects on performance given the same prompting. This phenomenon is known as 'stereotype threat' and has been shown to affect the memory and maths performance of older adults. Explanations for cognitive effects of stereotype threat include factors such as anxiety, arousal, motivational factors and use of flawed strategies when performing tasks. Additionally, certain factors can reduce people's susceptibility to stereotype threat, one of these being greater contact with younger generations or even just imagining contact. Research is now examining the new question of whether age stereotypes also affect physical capabilities in later life. This research has implications for the wellbeing and independence of those in later life. In reviewing this research I will identify unanswered questions and areas in need of further development and consider practical implications of the evidence so far.

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**Stream:** Critical Perspectives

**Date:** Wednesday 11 July 2012 **Time:** 16:10–17:10

**Abstract ID:** 90

**Title:** Internalized ageism: the hidden prejudice

**Method:** Oral

**Author:** Paul Nash

**Institution:** Swansea University

**Co-authors:**

Ian Stuart-Hamilton

Peter Mayer

Within the UK there is a pervasive and wide reaching negative attitude towards older people (Turner & Crisp, 2010). These attitudes are acquired throughout the life course from continued exposure to negative stereotypes (Levy et. al., 2000; Zebrowitz & Montpare, 2000). These negative attitudes do not dissipate when an individual transitions into old age but instead are assimilated and internalized (Nemmer, 2005). This can lead to functional decline in cognitive ability (Levy, 1996) as well as physical inactivity and disengagement from society (Butler, 1987; Levy & Banaji, 2002).

The Fraboni Scale of Ageism (Fraboni, Saltstone & Hughes, 1990) and a bespoke Implicit Association Test (Greenwald, McGhee & Schwartz, 1998) were used to measure both explicit and implicit attitudes towards older people. Using a community sample of older people to compare with data previously collected from younger cohorts, the aim was to assess older people's comparable attitudes towards older people. A between-subjects ANOVA indicated a significant main effect for explicit attitudes ( $F(1,39)=4.339$ ;  $p<0.05$ ) where older people were less ageist than the control adult sample. Results from the implicit tests indicated a negative attitude towards older people in both groups but this was not significantly different between samples ( $F(1,39)=.096$ ; N.S.).

Results suggest that older people hold similarly negative implicit attitudes towards their ingroup as younger people do to their respective outgroup. The difference in explicit attitudes could reflect the desire to increase the perceived worth of the identified ingroup by the older sample. These results support previous research with explanations including increased self-monitoring internalization of negative societal bias.

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**Stream:** Critical Perspectives

**Date:** Thursday 12 July 2012 **Time:** 08:40–10:20

**Abstract ID:** 99

**Title:** Stimulating ageing research

**Method:** Oral

**Author:** Peter Lansley

**Institution:** University of Reading

Since the mid 1997 the UK research councils have promoted ageing research through a number of dedicated programmes and networks, initially on their own account but more recently through two cross-research council programmes, NDA and LLHW. With 15 years' experience of such programmes and two major multidisciplinary ageing research programmes virtually complete (EQUAL and NDA) and another in full flight (LLHW) 2012 is a good time to pose a series of questions especially about the way they have been organized.

What can we learn from these programmes and networks? What has been successful and what gives cause for disappointment? How far have successive programmes and networks recognized lessons from previous programmes and networks? What has happened to the capacity of the UK science base to undertake for ageing research? What has been the role of older people and those who work with and for them? Who have been the real beneficiaries?

The paper will address these questions: firstly, by considering trends in research funding and researcher involvement in the programmes since 1997; secondly, by identifying two contrasting approaches to organizing programmes during the period; and, thirdly, by suggesting some ingredients to programme management that appear to have enhanced successful outcomes.

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**Stream:** Critical Perspectives

**Date:** Thursday 12 July 2012 **Time:** 08:40–10:20

**Abstract ID:** 129

**Title:** Emergent epistemic communities of ageing and later life

**Method:** Oral

**Author:** Martin Hyde

**Institution:** Stress Research Institute

**Co-author:** Paul Higgs

Globalization has become a key issue in contemporary social gerontology. However, a number of writers have argued that global political, rather than economic, forces have had the greatest impact on the well-being of older people. This paper sets out to explore this claim by identifying and examining three emergent epistemic communities of ageing and later life: i) the new pension orthodoxy, ii) active ageing and iii) the global (anti-)ageing enterprise. These epistemic communities are networks of knowledge-based experts, potentially drawn from a variety of fields, who share a common belief in specific truths, a set of normative and causal beliefs, patterns of reasoning, and discursive practices. A series of empirical and conceptual maps will be presented, which aim to explore the extent and membership of these epistemic communities. These will form the basis of a discussion about the nature of power relations within and between these different communities. It will be shown that ageing is an uneven landscape in which a number of different epistemic communities are operating but none has managed to gain hegemony. These communities do not only pose an empirical challenge to the study of later life. Although they often contain departments from national government these communities operate in a post-national space. This represents a theoretical challenge to the methodological nationalism of traditional state-centric forms of social gerontology.

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**Stream:** Critical Perspectives

**Date:** Thursday 12 July 2012 **Time:** 08:40–10:20

**Abstract ID:** 39

**Title:** Reflections on being both an insider and an outsider in qualitative research on ethnicity

**Method:** Oral

**Author:** Rosalind Willis

**Institution:** Centre for Research on Ageing

This paper reports on the process of conducting a research project on informal support among older people from different ethnic groups in Britain. The research sought to explore the extent to which ethnicity and culture could be seen as determining factors for informal support transfer. Qualitative interviews were carried out with older people from five different ethnic groups. Interview topics included experiences of providing and receiving informal support, and the motivations for providing support.

Past research has advocated matching the ethnic group of the researcher with the participant because this is thought to improve rapport, eliminate power differentials, and ensure a shared language. However, another perspective is that being of a different ethnic group from the participant is an advantage because the participant will not assume shared knowledge, and there is a reduced concern about confidential information reaching a shared community.

In this study interviews were conducted by a White Irish researcher with participants from five ethnic groups in Britain. One of these groups was White Irish, so the researcher was an insider in some interviews and an outsider in others. This presentation will reflect on the way the researcher's White Irish identity influenced the research process in three key areas: recruitment, rapport, and responses. An unexpected experience of 'hiding in plain sight' will also be discussed. It is concluded that conducting research across ethnic boundaries can yield valid data.

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**Stream:** Critical Perspectives

**Date:** Thursday 12 July 2012 **Time:** 08:40–10:20

**Abstract ID:** 160

**Title:** Towards a grounded theory of intergenerational solidarity in Ireland: critical reflections on methods and methodology

**Method:** Oral

**Author:** Gemma Carney

**Institution:** Irish Centre for Social Gerontology

**Co-authors:**

Thomas Scharf

Virpi Timonen

Catherine Conlon

As populations age, the extent and depth of intergenerational solidarity in modern societies is becoming increasingly salient in debates surrounding welfare state reform. Some previous research on generations has tended to identify older people as 'third agers' without any critical assessment of how such an identity might be related to earlier life experience or expectation for the future. Rarely have studies of intergenerational relations attempted to construct a general theory of intergenerational solidarity at the societal level, which is inclusive of all generations. It is important that appropriate research methods are devised to investigate the complexity of intergenerational issues, given the changes facing ageing welfare states. This paper presents critical reflections on a grounded theory approach to investigating intergenerational solidarity in the Republic of Ireland. Based on one hundred in-depth interviews with a diverse sample of citizens living in Ireland in 2011–12, the study probes intergenerational solidarity at individual, family and societal levels. Reflections on research design, sampling, recruitment, coding and categorizing a large-scale qualitative study are presented. The grounded theory approach promises to reveal much about the fundamental link between attitudes towards one's own and other generations, and the broader question of age-based resource allocation now and in the future.

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**Stream:** Critical Perspectives

**Date:** Thursday 12 July 2012 **Time:** 08:40–10:20

**Abstract ID:** 255

**Title:** Mixed methods in critical gerontology

**Method:** Oral

**Author:** Bernadette Bartlam

**Institution:** Keele University

**Co-authors:**

Miriam Bernard

Jennifer Liddle

Thomas Scharf

Julius Sim

As a multi-disciplinary field, critical gerontology often addresses the sorts of mixed-disciplinary questions that lend themselves to a mixed-methods approach. Housing and care is an area of practice with a focus on innovation and on challenging taken-for-granted assumptions around the needs of older people. As such, it provides an excellent example of a complex setting that often generates mixed questions requiring mixed methods. This paper discusses the benefits of using mixed methods to explore the experiences of ageing in purpose-built retirement villages. It illustrates the ways in which various methods can complement each other at different stages in the research process, from verifying the existence of constructs through to testing emerging hypotheses and confirming findings. The research was guided by initial overarching research questions and predetermined procedures, whilst at the same time attempting to retain the flexibility to explore previously unanticipated avenues of enquiry. In doing so, the aim was to contribute to the development of a wide-ranging and rigorous evidence base. This paper outlines a framework within which individual methods can work in close synergy in order to capture the complexity of causal explanation and trace changes over time. It identifies a range of challenges facing researchers including: how best to identify those research questions that lend themselves to mixed methods, and the types of mixed designs, and the degree and nature of mixing, that might best respond to those questions.

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**Stream:** Critical Perspectives

**Date:** Thursday 12 July 2012 **Time:** 14:00–15:40

**Abstract ID:** 245

**Title:** Critical perspectives on exclusion and inclusion in later life

**Method:** Symposium

**Author:** Thomas Scharf

**Institution:** Irish Centre for Social Gerontology

**Co-authors:**

Norah Keating

Chris Phillipson

Peter Lloyd-Sherlock

Hannah Swift

**Co-chairs:**

Thomas Scharf

Norah Keating

Reflecting the different contexts that influence older adults' lives, this symposium offers a critical perspective on key issues relating to social inclusion and exclusion in old age. Four papers, drawn from a range of disciplines and national settings, address conceptual features of debates on inclusion/exclusion as well as the domains and drivers of exclusion relevant to ageing and older people.

**Social exclusion in later life: a global challenge**

Thomas Scharf and Norah Keating

Within the context of the widening inequalities that affect our ageing societies and the re-emergence of intergenerational conflict rhetoric, this paper sets the scene to the symposium. It reviews contrasting interpretations of exclusion and inclusion, providing a conceptual orientation point for subsequent papers.

**Globalization, economic recession and social exclusion: policy challenges and responses**

Chris Phillipson

Framed by the current global economic recession, this paper assesses the ways in which processes arising from globalization are transforming later life. Although population ageing has frequently been constructed as a global problem and issue, the paper argues that the on-going reduction of expenditure on public programmes increasingly acts to transfer risks to individual older people and their families. This process – encompassing 'exclusionary risks' and 'exclusionary services' – creates new and distinctive forms of inequality. The paper examines competing trends in the inclusion/exclusion debate in light of such global processes, and considers potential approaches to challenging social exclusion in old age.

## **Social inclusion of older people in developing countries: relations and resources**

Peter Lloyd-Sherlock, Armando Barrientos and Julia Mase

With social exclusion debates originating in western nations, there have been few attempts to extend the inclusion/exclusion lens to the situation of older people in developing nations. This omission is surprising given that globalization processes are transforming the traditional social roles played by older people in their households and communities. This paper examines older people's access to material and social resources in two middle-income countries (Brazil and South Africa). Framing the analysis within the context of Cowgill's (1976) classic study on the effects of development and modernization, the paper uses original empirical data to provide a more subtle perspective on what have become mainstream views about ageing, development and exclusion.

## **Age discrimination as a source of exclusion in Europe: the need for a human rights plan for older persons**

Dominic Abrams, Astrid Stuckelberger, Philippe Chastonay and Hannah Swift

The problem of social exclusion based on age may take different forms in different countries, reflecting their diverse age profiles and expectations as well as differing cultural orientations to age. The very complexity of these differences calls for a reconsideration of the application of distributive justice and highlights the need for a human rights based approach that includes the old and very old. In this presentation we address the theme of social exclusion based on age discrimination in Europe, reviewing core processes of discrimination and exclusion based on old age – ageism, stigmatization and stereotyping – and presenting recent European data to illuminate these processes. We evaluate policy responses to age discrimination and exclusion in the form of legislative instruments available in European nations. Extending the lens beyond Europe, the focus then moves towards a variety of mechanisms and programmes initiated by the United Nations (UN) in the field of older persons' human rights.

## **Revisiting social exclusion of older adults: next steps for social gerontology**

Norah Keating and Thomas Scharf

A concluding paper synthesizes key arguments raised by the contributing papers, identifying a number of cross-cutting issues that merit closer reflection by researchers. The paper highlights a number of challenges that lie ahead in relation to the risks of exclusion faced by ageing adults around the world. It is suggested that responding to such challenges, with the goal of promoting greater inclusion in later life, should represent a major goal for policy makers, practitioners and the research community.

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**Stream:** Critical Perspectives

**Date:** Thursday 12 July 2012 **Time:** 16:40–18:00

**Abstract ID:** 122

**Title:** "Age" is just a word

**Method:** Oral

**Author:** Ludwig Amrhein

**Institution:** University of Vechta, Centre for Research on Ageing and Society

This paper argues that “age” is a symbolic token to establish and to legitimize field-specific social inclusions and exclusions, whereas “ageing” represents the widening and narrowing of life chances due to irreversible trajectories. Both concepts are part of a multi-level model of the social construction of age and ageing, with macro-levels of institutional age-structures and cultural discourses of ageing and meso- and micro-levels of interactive “doing age” and narrative age identities.

The discussion is based on a reconstruction of Bourdieu’s manifold but scattered statements on “age” as a socially constructed category. In his article “youth is just a word” he claims that “one is always somebody’s senior or junior” and therefore “the divisions, whether into age-groups or into generations, are entirely variable and subject to manipulation”. Bourdieu nevertheless omitted the formulation of an explicit theoretical contribution on age and ageing. This is in contrast to his approach towards “gender” in his work on “masculine domination”. In addition, Bourdieu made few and very generalized statements on old age, equating it with social decline and loss of power. To overcome these gaps, some scholarly attempts have been undertaken to apply his concepts on age and ageing. Unfortunately they are far too often intermixed with incongruous postmodern or poststructuralist ideas.

Thus, reconstructing and broadening Bourdieu’s substantial statements on age and ageing proves to be a useful contribution that provides an added value to critical gerontology.

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**Stream:** Critical Perspectives

**Date:** Thursday 12 July 2012 **Time:** 16:40–18:00

**Abstract ID:** 91

**Title:** Generations: compacts, conflicts and changes

**Method:** Oral

**Author:** Chris Gilleard

**Institution:** University College London

**Co-author:** Paul Higgs

Generational relationships are often represented through the relationship between young adult children and their older adult parents. Such relationships have been used to represent wider societal conflicts between 'old' and 'new' ideas, values and ways of living. Over the last three decades, generational relationships have begun to influence political thinking and generational accounting and inter-generational accountability have become key debates in Europe and North America. The stability of inter-generational relationships has been questioned and older people represented as 'greedy geezers' spending their children's inheritance. The present paper explores the idea of 'generation' and 'generational relationships' through distinct layers of thinking from Erikson's psychosocial model of generativity to Kotlikoff's system of national generational accountancy. Replacing the 1960s concerns over youth culture and its destabilizing influence, current anxiety over the declining 'generational compact' has focused less upon the young as agents of subversive counter-cultures than as oppressed subjects burdened by the costs incurred by an older generation of profligate consumers. As we find ourselves in 'an age of austerity' the future seems darker and its failure to grow a major political concern. We consider what it is about generational relationships that has changed and what remains unchanging. We suggest that changing conceptualizations of Erikson's model of generativity and the changing balance between horizontal and vertical social relationships in later life can be understood as the consequences of change in the part that states and markets play in shaping later life.

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**Stream:** Critical Perspectives

**Date:** Thursday 12 July 2012 **Time:** 16:40–18:00

**Abstract ID:** 70

**Title:** Transitions from midlife to old age: steering mismatching expectations

**Method:** Oral

**Author:** Cynthia Meersohn-Schmidt

**Institution:** SASS, Durham University

**Co-author:** Keming Yang

The objective of this paper is to develop a conceptual model of the transition from the midlife to the old one. Among studies on ageing and life course, a major concern is with the inequalities between age groups, which are usually represented in institutional procedures that discriminatively allocate resources across these groups. Regardless of their perspectives, these studies tend to take the transition from the middle age groups to the old ones for granted. However, such transition has become increasingly important for us to understand the ageing process and the relations between stages during the life course. How do people still in their midlife project an image of themselves in their old age? How will such view affect the actual transition from middle ages to the old ones? Some of the traditional markers of transition between midlife and old age, such as chronic illness and exit from work, have already started to spread across the entire age range, which in turn will alter the way in which people in midlife construct their own images, affect how old people construct themselves as an age group, and shape the way in which people reflect on the resources and the constraints during their transitions from one age stage to another. The prospective and the retrospective views are in a constant dialogue, during which the biographical actor attempts to articulate mismatching expectations.

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**Stream:** Critical Perspectives

**Date:** Thursday 12 July 2012 **Time:** 16:40–18:00

**Abstract ID:** 64

**Title:** Moving beyond fixed forms: rethinking transition in late life

**Method:** Oral

**Author:** Amanda Grenier

**Institution:** McMaster University

The concept of transition is widely used in academic scholarship, policy, and practice, to denote continuity and change in late life. Yet, as the contemporary landscape of ageing shifts, the dominant age- and stage-based models used to understand and make sense of ageing and late life may become less relevant. Grounded in a critical perspective to the study of ageing, this paper draws on the narratives of older people in order to reconsider knowledge and understandings with regards to transitions in late life. Extracted from a larger sample of 60 narrative interviews, a subset of six illustrations from older people that correspond with the 3rd and 4th-age group constructs are set against standard models of ageing and transition in late life. The lived experiences documented in their stories call into question dominant assumptions about ageing and late life and highlight embedded tensions in current understandings of transition. Their accounts suggest the need to reconsider transitions and provide directions for alternate paths based on fluidity, intersecting transitions, social location, linked experiences, and constraints as a means to broaden the debate. Implications for research and practice that are more in line with older people's experiences of transition are discussed.

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**Stream:** Critical Perspectives

**Date:** Friday 13 July 2012 **Time:** 08:40–10:00

**Abstract ID:** 241

**Title:** Gendered ageing: critical perspectives, future challenges – roundtable

**Method:** Symposium

**Author:** Wendy Martin

**Institution:** Brunel University

**Co-authors:**

Clary Krekula

Neal King

Toni Calasanti

Ian Rees Jones

Debora Price

**Chair:** Wendy Martin

During the last decades gender perspectives on ageing and age relations have frequently been addressed in social gerontological research. Few discussions have, however, problematized and summarized the contributions developed within this field of research.

In this roundtable we aim to bring together academics and researchers from different countries, and with a variety of research perspectives, to reflect on and debate the role of research in promoting our understanding of men and women's experiences and perspectives on age and ageing.

In particular, the participants will consider and explore aspects of the following questions:

- What is the significance of gender to social gerontological research?
- In what ways has a focus on gender added to our knowledge of age and ageing?
- What are the future challenges associated with research into gender and ageing?

This roundtable aims to contribute to the debates and future challenges associated with research into gendered ageing. The format will involve each participant highlighting key issues and perspectives for 5 – 8 minutes followed by a question and answer format that will involve discussion amongst and between the panel members and amongst and between the audience.

Toni Calasanti (Virginia Tech, USA) will talk and debate about future directions for gender and ageing in social gerontology

Neal King (Virginia Tech, USA) will talk and debate on gender as one of a range of intersecting inequalities to which the study of social gerontology contributes

Ian Rees Jones (Bangor University, UK) will talk and debate on class, gender and later life

Clary Krekula (University of Karlstad, Sweden) will talk and debate on gendered ageing, age coding and the future of gendered ageing research

Debora Price (Kings College London, UK) will talk and debate on gendered ageing in the context of social policy, with a focus on pensions.

Organizers of the Roundtable: Wendy Martin (Brunel University, UK) & Clary Krekula (University of Karlstad, Sweden)

**Stream:** Critical Perspectives

**Date:** Friday 13 July 2012 **Time:** 10:30–11:30

**Abstract ID:** 204

**Title:** Financial capability, housing equity, and the politics of income in later life

**Method:** Oral

**Author:** Debora Price

**Institution:** King's College London, Institute of Gerontology

**Co-authors:**

Lynne Livsey

Dinah Bisdee

Tom Daly

In the governing of ageing populations, a 'financial capability' agenda is essential for the neo-liberal idea that financial welfare should be provided by the financial services industry to have any coherence. When this agenda is examined, it is shown to be underanalysed, poorly specified, and failing. Increasingly therefore, government is turning to housing equity to fill the gaps in financial welfare. In the politics of home ownership however, the acquisition of housing equity has been valorized by neo-liberal politics as a symbol of personal financial success, with consequences for the meaning that housing equity has for older people.

In this paper we present a neo-Foucauldian analysis of the financial capability agenda showing the deployment by government of discourses that serve to shift the responsibility for welfare failures to older people both as individuals and as regulators. This then legitimates government interference in the private domain of housing to fund the growing costs of care and support. However shifting cultural expectations of housing mean that those of modest means are now 'abandoned saver citizens'. Having behaved as responsible savers, they have endured falling interest rates, poor returns and capital losses, and now face the appropriation of their housing too. An analysis of qualitative data drawn from interviews with 45 older couples shows that rather than there being a general resistance to the use of housing wealth to fund later life, there is a deeply held resistance to utilization of housing wealth for care costs, which are associated with failure and waste.

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**Stream:** Critical Perspectives

**Date:** Friday 13 July 2012 **Time:** 10:30–11:30

**Abstract ID:** 132

**Title:** Tensions in grass-roots practice: some issues in the work of Kilburn Older Voices Exchange (2001 to the present)

**Method:** Oral

**Author:** Mel Wright

**Institution:** Kilburn Older Voices Exchange

**Co-author:** John Miles

Here we consider some of the issues for practitioners that arise within a ten-year low-budget community project developed with and by older people (Wood and Wright, 2011). Kilburn Older Voices Exchange was set up in 2001 at the initiative of Camden Council in London. Based in an older people's resource (formerly 'day') centre, it serves both a deprived urban area characterized in one study as being home to 'people from here and elsewhere' (Hickman et al, 2008) and a better-off hinterland. Campaigning work has focused primarily on home care and the built environment, and developed through an intensive use of multi-media. For this presentation, we're in the roles of community development worker (Mel is KOVE's coordinator) and external adviser and occasional evaluator (John). Using selected examples, we reflect on four issues: the power of individual testimony on film; the complexity of sharing such material with professionals whose practice is under scrutiny; the challenge, for a bottom-up organization, of being dependent for funds on official commissions; the constraints and affordances of trying to work across diverse cultural groups.

[www.kove.org.uk](http://www.kove.org.uk)

#### References:

Hickman, M Crowley, H and Mai, N 2008 Immigration and social cohesion in the UK: the rhythms and realities of everyday life. Joseph Rowntree Foundation

Wood, C and Wright, M 2011 Promoting involvement of older people in shaping policy and practice. *Working with Older People* 15(2): 80–86

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**Stream:** Critical Perspectives

**Date:** Friday 13 July 2012 **Time:** 10:30–11:30

**Abstract ID:** 19

**Title:** Big Society, civic engagement and older people: historical and contemporary perspectives

**Method:** Oral

**Author:** Robin Means

**Institution:** University of the West of England

The UK Coalition Government has received wide publicity for its emphasis upon 'the Big Society'. This ambitious agenda has been linked to major public expenditure cutbacks, by reducing Quangoes and central and local bureaucracies, and by relying on the capacity of communities to meet their own needs through a mixture of volunteering and locally based third sector provision. This paper outlines the centrality of older people to this agenda both as consumers of support, and as key providers of voluntary effort through civic engagement, as well as the implicit (and sometimes explicit) hostility to the ageing 'baby boom' generation. The current debate is explored within an historical context, analysing the changing role of volunteers and the third sector in the social care of older people from World War Two through to the present time. It illustrates the deep routes of much of 'the Big Society' agenda in policy debates but also draws out what is new about the present emphasis.

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**Stream:** Environment and Ageing

**Date:** Wednesday 11 July 2012 **Time:** 14:00–15:40

**Abstract ID:** 203

**Title:** ILC-UK research and policy showcase "Housing and Care"

**Method:** Symposium

**Author:** David Sinclair

**Institution:** International Longevity Centre – UK

**Co-authors:**

Dylan Kneale

Sally-Marie Bamford

Jessica Watson

**Chair:** David Sinclair

ILC-UK will use this symposium to highlight our work over the last year on the broad themes of housing and care. This symposium will also provide opportunity to understand the different sort of work undertaken by ILC-UK. And, in the context of the presentations, there will be opportunity to discuss how BSG members can work with ILC-UK.

Sally Marie Bamford will present her work on dementia, relationships and sexuality. The last taboo: A guide to dementia, sexuality, intimacy and sexual behaviour in care homes, sponsored by the Department of Health provides care home workers and managers with information and practical advice on this complex, controversial and sensitive issue. The need for affection, intimacy and relationships for people with dementia in care homes has too often been ignored and side-lined in policy and practice. The onset of old age or a cognitive impairment does not erase the need for affection, intimacy and/or relationships. While the issues involved can be complex, controversial and sensitive and may challenge our own beliefs and value system, it is essential that we understand more about them to foster a more person-centred approach to dementia care. Care home residents with dementia often have complex care needs and trying to understand and respond to the more intimate and sexual aspects of a resident's personality can be challenging. Aimed at care home workers and managers, the guide not only provides essential information on this aspect of dementia care but offers practical advice to support current work-based practices. It also provides a possible pathway for care home managers to develop a guiding policy on sexual expression in dementia.

Dylan Kneale will present his work on Extra Care Housing. His research draws on the data collected from three providers of Extra Care housing and examines the outcomes for residents. It explores some of the factors associated with more successful outcomes among the residents, and also compares some of these outcomes with those of residents who share similar characteristics but who reside in general-purpose housing in the community. This is one of the first studies to examine the outcomes for Extra Care residents using longitudinal data, tracking the outcomes for residents who in some cases moved into Extra Care housing as long as 15 or more years ago up to the present day. In this study, ILC-UK focus upon outcomes related to health status, usage of health services and usage of institutional accommodation.

Jessica Watson, Research and Public Affairs Officer at ILC-UK will present her evidence review of the literature on sight problems and sight checking practices in care homes across the UK, supported by the Thomas Pocklington Trust. The key findings of this review highlight that despite the estimates of very high levels of undetected sight loss in care homes, eye health is often overlooked in regulations and guidance, and subsequently is often not prioritized by care home staff or highlighted by patients or their families. This review forms part of an awareness-raising campaign aimed at multiple levels of stakeholders including health, social care and policy professionals; key politicians and other stakeholders; families and carers of residents; and care home staff.

David Sinclair will present a new report, the future of the care home. This 'Futures' report will set out to understand and explain how care homes will need to change to adapt to a changing world. It will identify new models of care and set out a series of recommendations for Government and providers with a view to ensuring that the care home sector has a sustainable future.

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**Stream:** Environment and Ageing

**Date:** Wednesday 11 July 2012 **Time:** 16:10–17:10

**Abstract ID:** 199

**Title:** The spatiality of ageing

**Method:** Oral

**Author:** Sheila Peace

**Institution:** Open University

Environment as context captures both space and place. The spatiality of ageing displays the social construction of place where power relations determine boundaries or levels of inclusion. Laws (1997) considers the impact not only of factors directly related to the individual (mobility, motility) but also of those impacting on personal identity (accessibility, spatial scale and spatial segregation). It is within an over-arching analysis of the spatiality of ageing that specific aspects of environment are defined as macro or micro. For example at a macro level (global, national, neighbourhood), the current concerns of the WHO/IFA Age-Friendly cities and communities network is explored at a global perspective (WHO, 2007) recognizing structural, political and intergenerational dimensions. While at a personally situated micro level, intimacies of ageing in place and understanding of meaning, belonging and attachment can range from familiarity with home in housing both mainstream and supportive to issues of disorientation and environmental support for those with cognitive impairment. This paper uses empirical research from a study of the town of Aylesbury (Holland et al, 2007) to focus on the spatiality of ageing in the macro environment and identify features of intergenerational interaction such as shared and contested use of space; safety and security in public spaces, and the management of space and place that are central to a discussion of the definition of an Age-Friendly Community.

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**Stream:** Environment and Ageing

**Date:** Wednesday 11 July 2012 **Time:** 16:10–17:10

**Abstract ID:** 154

**Title:** Ageing in place and attachment to urban neighbourhoods

**Method:** Oral

**Author:** Marjaana Seppänen

**Institution:** University of Lapland

“Ageing in place” is a concept that refers to ageing in a familiar environment. It is one of the guiding principles of ageing policies in many European countries, including Finland. Finnish society generally assumes that ageing in place is a priority for ageing people as well as an economically desirable goal in terms of providing services.

However, more knowledge is needed to understand how older people consider the idea of ageing in place and how the spatial context and its characteristics affect their desire to stay in one place. The aim of this presentation is to explore how attachment to a neighbourhood is connected to one’s opinions about ageing in place. How important is it to older adults to be able to stay in their neighbourhood? Is this importance connected to their relationship with the physical and social environment provided by their neighbourhood, and if so, how are they connected? “Physical environment” is understood here as the experience and use of a place, while “social environment” refers to one’s social relations with neighbours. Finally, this presentation will ask how the relationship between an ageing person and their environment is affected by one’s level of functional capability.

The data consist of a questionnaire that was distributed in 2010 to the residents of a Finnish suburb, Liipola, which is regarded as a segregated neighbourhood. This presentation will focus on the oldest age group; 65 years and older (449 respondents, response rate 53%).

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**Stream:** Environment and Ageing

**Date:** Wednesday 11 July 2012 **Time:** 16:10–17:10

**Abstract ID:** 59

**Title:** Re-imagining age-friendly communities during a long-term earthquake recovery process

**Method:** Oral

**Author:** Sally Keeling

**Institution:** University of Otago, Christchurch,

**Co-authors:**

Mike Annear

Tim Wilkinson

In the year from September 2010, the city of Christchurch New Zealand was shaken by a series of major and minor earthquakes, some of which caused significant loss of life, and extensive damage to housing, infrastructure, and land.

The immediate and cumulative effects of two of these major events have been recorded and analysed in a participatory action research project involving 355 community residents over the age of 65, living in 12 diverse urban and suburban areas within the city. This study began with a participatory design with the aim of understanding how local urban environments support or inhibit active ageing (in WHO terms). Findings from the four phases of data collection and analysis allow a testing of traditional theories of security and continuity in later life, to explore changing biographies of place attachment.

In Becker's terms, people experience radical disruption in their lives yet "create meaning in a chaotic world". Our data focus on the immediate personal and shared effects for older people in the weeks and months following two major earthquakes, as participants in the study describe their experiences and activities in and around the earthquake stricken city.

Now that longer term recovery and implications for the city are projected to span decades ahead, we investigate how this might play out for current and future older people.

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**Stream:** Environment and Ageing

**Date:** Thursday 12 July 2012 **Time:** 08:40–10:20

**Abstract ID:** 134

**Title:** The role of transport and mobility in maintaining independence, health and wellbeing in later life

**Method:** Symposium

**Author:** Charles Musselwhite

**Institution:** Centre for Transport & Society, University of the West of England, Bristol, UK.

**Co-authors:**

Sally Edge

Ian Shergold

Graham Parkhurst

**Chair:** Charles Musselwhite

Older people are more healthy and active as a cohort than ever before (Tomassini, 2004). This coupled with an ever increasing hypermobile society, where services, shops, work and families are increasingly dispersed, linked only by increasing the distance travelled, means they have greater mobility needs and desires than previous generations. However, older people are the age group still most likely to suffer social isolation and loss of independence as a result of mobility deprivation. Physiological, cognitive and psychological issues associated with ageing have a significant effect on an individual's ability to be mobile. The importance of mobility has been linked to life satisfaction and quality of life for older people (Schlag, et al., 1996) and lack of mobility in later life can have devastating consequences in terms of mental and physical health and is strongly correlated with an increase in depression and loneliness (Fonda, et al., 2001; Ling and Mannion, 1995). This symposium will look the relationship between mobility, health and wellbeing in later life, emphasizing potential solutions based on research evidence that help maintain independence and reduce social isolation in later life.

**How the pain of driving cessation can be reduced**

Charles Musselwhite

The paper will draw on qualitative research with older people to show how positive experiences might be found in a life beyond the car, with increased community participation and social interaction that can be found when using public, community transport and active travel (Musselwhite and Shergold, 2011; Pellerito, 2009). Variance in the process will be examined, based on practical issues, such as the availability of lifts from family and friends and the availability and accessibility of public or community transport, especially in rural areas (Musselwhite and Haddad, 2010; Shergold et al., 2011). Social or psychological issues, for example older people not wanting to be a burden to family and friends (Davey, 2007; Musselwhite and Haddad, 2010).

**Information provision, confidence and travel behavior**

Sally Edge and Charles Musselwhite

This paper will report findings from qualitative and quantitative data collected on the difficulty in accessing transport information in rural Dorset. Discussion will focus on the need for both informal and formal information on mobility and for agencies to be proactive in providing information to people earlier on in life. The role of confidence in using transport provision will be explored alongside information provision. Differences between rural and urban areas, age bands and types of impairment will also be highlighted.

**The role of community transport (CT) in maintaining health, wellbeing and independence**

Ian Shergold

This paper reports findings from a case study in Norfolk, highlighting the importance of CT provision for older people. Efficient transport is seen as vital for promoting health and wellbeing, and CT specifically as a tool for combating isolation and helping older people to live happier, more fulfilled lives (Audit Scotland, 2011). At a time of growing reliance on CT, particularly in rural communities, this project has employed a new 'lighter-touch' Social Return on Investment (SROI) approach using data from a range of CT operators in Norfolk to explore and quantify the health and well-being impacts of such schemes.

### **A continuum of mobilities for understanding connectivity amongst older people**

Graham Parkhurst

This paper will draw the research together by presenting a new conceptual framework developed through the examination of data from 900 quantitative surveys completed in six communities, 45 semi-structured interviews with older people recruited to represent different mobility lifestyles and 10 phenomenological interviews with participants of different health and wellbeing statuses. The model emphasizes different types of mobility within which older people engage in later life, emphasizing the gradual shift from physical mobility, through to virtual, potential and imaginative mobility. The framework emphasizes the shift from hypermobility through to hypomobility and the need, difficulties and advantages to forming new localized relationships. The paper concludes by drawing out the significance for social care and transport policy and practice.

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**Stream:** Environment and Ageing

**Date:** Thursday 12 July 2012 **Time:** 14:00–15:40

**Abstract ID:** 198

**Title:** Kitchen living: past and present

**Method:** Oral

**Author:** Sheila Peace

**Institution:** Open University

**Co-authors:**

John Percival  
Martin Maguire  
Colette Nicolle  
Russ Marshall  
Ruth Sims  
Clare Lawton

Across the life course, the kitchen can be a central hub of activity. Long discussed as gendered space, in ageing populations the kitchen provides a perfect case study for addressing issues of person-environment interaction where age, gender, class, culture, health and well-being are central.

This paper reports on research, involving social gerontologists, ergonomists and designers, which studied 'Transitions in Kitchen Living' (TiKL) as part of the ESRC's New Dynamics of Ageing Programme. The aim was to work with a purposive sample of people in their 60s, 70s, 80s, and 90s living across the range of mainstream and supportive housing where the kitchen was still very much a part of everyday life. Following detailed pilot work, two interviews were conducted with 48 older participants (aged 61 to 91 years, born between 1919 and 1949) in Bristol and Loughborough. Prior to the first interview, people were asked to record a housing history and then using an oral history approach people's experiences of kitchens throughout their lives were recorded prompted by key life events. A second Interview concerned their contemporary kitchen and how well it met their needs. Other tools gathered personal demographic details, routine activities, and photographs recorded aspects of the kitchen that were particularly liked or disliked.

This paper compares data from the past and the present demonstrating the complexity of the micro-environment of the kitchen and issues of continuity and change. Similarities and differences between current experience of the kitchen in 'mainstream' and 'supportive' housing are also explored.

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**Stream:** Environment and Ageing

**Date:** Thursday 12 July 2012 **Time:** 14:00–15:40

**Abstract ID:** 20

**Title:** Exploring mealtimes in residential care settings for older people: methodological challenges

**Method:** Oral

**Author:** Christine Raiswell

**Institution:** Public Health Manchester

**Co-authors:**

Anna Wasielewska  
Barbara Drummond  
Sarah Barnes

Improving the mealtime experience of people living in residential care can be a major facilitator in improving the care, well-being and QoL of this vulnerable group. Research evidence, taken alongside inspection data and anecdotal feedback suggests that, despite an abundance of guidance on the subject of food, nutrition and hydration, there are still concerns.

Whilst there is a range of methods to research and assess the quality of food provision in homes, such as traditional inspection regimes, contract compliance monitoring and interviewing stakeholders, there is a challenge in capturing the experiences of those residents who are unable or unwilling to describe their feelings and experiences because of frailty, impaired communication or other vulnerability.

This paper draws on experience from a wider project exploring food provision in Residential Care Settings in Manchester. A small-scale, observational study was carried out in 7 dining rooms in 4 residential care homes. An adapted dementia care mapping tool was used to record and describe resident behaviour during the mealtime as well as accounting for their well-being/ill-being. Field notes were taken to make recommendations for improvements.

The study highlighted a number of methodological issues relating to recruiting and researching residents in care settings. The process of engaging Managers, obtaining consent from everyone present in the dining room and identifying proxies for those lacking capacity to provide consent presents challenges for research design and resource allocation. However the importance of including these groups in research means that researchers need to rise to these challenges in future studies.

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**Stream:** Environment and Ageing

**Date:** Thursday 12 July 2012 **Time:** 14:00–15:40

**Abstract ID:** 106

**Title:** Feeling in control: comparing older people's experiences in different care settings

**Method:** Oral

**Author:** Ann-Marie Towers

**Institution:** Personal Social Services Research Unit

**Co-author:** Lisa Callaghan

The promotion of choice and control for older people is a policy priority for health and social care services in the UK and is at the heart of recent drives to personalize services (Department of Health, 2010). Increasingly, we are seeing a move away from institutionalized care (e.g. in care homes) towards 'prevention', with more services being delivered in community-based settings (WHO, 2002; Windle et al., 2009; Department of Health, 2010). Housing with care, such as extra care housing, has been promoted as a purpose-built, community-based alternative to residential care for older people and is seen as a positive option for older people in current social care policy. However, whilst accounts of users' experiences in particular service types are plentiful, the use of different instrumentation and measures makes comparison between settings difficult.

The authors combined data from three studies: (1) a survey of older home care recipients; (2) a study measuring outcomes of care home residents and (3) an evaluation of social well-being in extra care housing. All of these studies asked participants to rate their control over daily life, using the Adult Social Care Outcomes Toolkit (ASCOT). This paper presents the results of an ordinal logistic regression analysis showing that, after controlling for differences in age, ability to perform activities of daily living, and self-rated health, extra care housing residents were the most likely to feel in control and home care recipients the least. Implications for policy and practice are discussed.

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**Stream:** Environment and Ageing

**Date:** Thursday 12 July 2012 **Time:** 14:00–15:40

**Abstract ID:** 12

**Title:** People, pets and care homes: a story of ambivalence

**Method:** Oral

**Author:** Randall Smith

**Institution:** University of Bristol

**Co-authors:**

Julia Johnson

Sheena Rolph

It has been calculated that between a quarter and a third of households in the UK own cats or dogs. This paper reviews the evidence regarding the therapeutic benefits of companion animals for older people. A key issue is what happens to a pet when an older person moves into a care home. Less than half of the care homes in the UK have a pets' policy. Risk assessments suggest a wary concern about the possibility of disease and about the work implications for care home staff. Preference tends to be expressed for "communal" pets and/or visiting arrangements for the re-homed pets of residents. In recent years, attempts to get legislation through Parliament that would require residential care providers to have an explicit policy in regard to pets have failed. Drawing on our own research, we explore the ambivalence towards pet ownership in care homes at both the policy and practice level and argue that the way forward may be through example rather than prescription.

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**Stream:** Environment and Ageing

**Date:** Thursday 12 July 2012 **Time:** 14:00–15:40

**Abstract ID:** 234

**Title:** ASSET: Adult Social Services Environment and Settings – towards a typology of models of adult social care in housing with care schemes

**Method:** Oral

**Author:** Robin Darton

**Institution:** Personal Social Services Research Unit

**Co-authors:**

Simon Evans  
Randall Smith  
Ailsa Cameron  
Rachael Dutton  
Jeremy Porteus

Housing with care (comprising extra care housing schemes and retirement villages) has become increasingly popular in the UK in recent years. A key feature is the availability of on-site care and support that meets the changing needs of a diverse range of residents. The provision of care and support involves a range of partners, requiring considerable flexibility to deliver services that maximize quality of life. Whichever model is used, adult social care (ASC) input is crucial. For many residents their needs and eligibility for funding are assessed by their local adult social services department. Councils are also responsible for developing strategic approaches to enhance the housing with care choices for older people. Little information is available about how ASC is provided in housing with care schemes. The aim of this project is to explore how best to deliver ASC, in order to maximize quality of life of residents and make the best use of resources.

ASSET is an independent research project commissioned and funded by the Department of Health's NIHR School for Social Care Research. The project began in February 2012 with a review of ASC and housing with care literature, intended to inform the development of a survey of commissioners and providers to identify models of ASC. This will be followed by detailed case studies to develop recommendations for best practice and future investment decisions. The presentation will discuss the findings of the review and provide a preliminary typology of the models of ASC.

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**Stream:** Environment and Ageing

**Date:** Thursday 12 July 2012 **Time:** 14:00–15:40

**Abstract ID:** 85

**Title:** Growing older in a foreign land: The importance of identity for rural migrant men

**Method:** Oral

**Author:** Susan Feldman

**Institution:** Monash University

**Co-author:** Harriet Radermacher

Being a man presents unique risks to both physical and mental health. Being a man who is growing older in an Australian rural community, and is a member of a culturally and linguistically diverse (CALD) group exacerbates these risks. This presentation draws on the findings from a qualitative study of how older CALD men living in a rural Victorian community perceive and make sense of their own health and wellbeing. Undertaken from 2009 to 2011, we conducted interviews with 26 men from Italian, Macedonian, Turkish, and Albanian backgrounds, and four women from Italian and Albanian backgrounds. Service providers and community leaders also contributed their views and thus enabled us to identify the challenges they face in addressing the health needs of this group of men. The experiences of these older men challenge the dominant biomedical perspective on ageing. The study underlines the importance of considering the complex and interconnecting experiences of migration, gender, family and personal identity in understanding the men's lives. In particular, it indicates the need for supportive interventions that go beyond a focus on narrowly defined concepts of 'health' to pay cognizance to the diverse influences of older CALD men's experiences. Specifically, we highlight the importance of identity maintenance in response to a lifetime punctuated by change.

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**Stream:** Environment and Ageing

**Date:** Thursday 12 July 2012 **Time:** 14:00–15:40

**Abstract ID:** 243

**Title:** Pensions among older people from ethnic minorities: patterns and prospects

**Method:** Oral

**Author:** Athina Vlachantoni

**Institution:** Centre for Research on Ageing and ESRC Centre for Population Change

**Co-authors:**

Maria Evandrou

Jane Falkingham

According to the 2001 Census, individuals from black and minority ethnic (BME) groups comprised about 10% of the total UK population, while the younger age structure of the BME population means that BME groups comprise less than 4% of the population aged 50 and over. Academic literature over the last two decades has emphasized the health and socio-economic disadvantage experienced by BME groups, as well as the key policy challenge associated with the ageing of the BME population, and with their pension protection in particular. For example, more than half of Pakistani and Bangladeshi older people, half of Indian older people and about one-third of Black Caribbean older people, are in the bottom fifth of the income distribution, while pensioners from these groups are more likely to rely on means-tested benefits. This paper analyses data from the first wave of Understanding Society, in order to explore patterns of state pension receipt and the determinants of membership in an occupational pension scheme among older people aged 65 and over in five ethnic minority groups: Bangladeshi, Indian, Pakistani, Caribbean and African. In addition, the paper revisits existing research exploring the interaction of ethnicity and gender to the detriment of pension protection for both women and men from the Bangladeshi and Pakistani communities.

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**Stream:** Environment and Ageing

**Date:** Thursday 12 July 2012 **Time:** 14:00–15:40

**Abstract ID:** 27

**Title:** Transitions, ties and temptations: the experiences of first and second generation Bangladeshi women living in Cardiff

**Method:** Oral

**Author:** Jasmin Chowdhury

**Institution:** Swansea University

**Co-authors:**

Joy Merrell

Barry Bogin

Petra Meier

Michael Heinrich

Vanja Garaj

Bablin Molik

Janice L Thompson

Bangladeshis are one of the recently migrated, major immigrant communities in the UK, with the largest concentration migrating in the 1970s. The British Bangladeshi community is one of the most disadvantaged groups in terms of socio-economic and health status. The morbidity and mortality rates from chronic disease are high amongst this community and access to health services is challenging due to communication and cultural barriers (Hawthorne et al. 2005). The paucity of information about the experiences of this community, particularly within Wales, leads to a lack of accessible information and inappropriate services with a mismatch in expectations.

Drawing on the findings from a transnational, mixed-methods study of Migration, Nutrition and Ageing Across the Lifecourse in Bangladeshi Families (MINA), we discuss the influence of migration on the changing role and status of Bangladeshi women, their experiences of ageing as well as their diet and food practices. Purposive samples of 40 Bangladeshi women (aged 45+) who migrated to the UK, 40 of their daughters (aged 18–35) and 40 women of the same age groups living in Bangladesh were recruited. Multiple methods of data collection included: heel bone density and anthropometric measurements, semi-structured questionnaires and qualitative interviews. Responding to other work in the subject area notably by Phillipson (2003), Gardner (2002) and Burholt (2004), we discuss the changes and continuity in the experiences of British Bangladeshi women and the implications for policy and practice in health and social care.

Project funded by the ESRC, New Dynamics of Ageing Programme (RES-354-25-0002)

**Stream:** Environment and Ageing

**Date:** Thursday 12 July 2012 **Time:** 14:00–15:40

**Abstract ID:** 18

**Title:** Safer homes for stroke survivors

**Method:** Oral

**Author:** Shona Martin

**Institution:** Melin Homes Ltd

**Co-author:** Lorraine Morgan

In November 2010 with the agreement of The Stroke Association, the local NHS organization, OPAN Cymru and local Care & Repair agencies a pilot project was set up to offer a home visit and environment check to recent stroke survivors. During the visit a range of matters were assessed that may impact on an older persons health and wellbeing.

The intended benefit of the project is that stroke survivors will be introduced to services and advice that helps them more adequately cope with the stresses caused by the stroke and, therefore, maintain better health.

During the project it was discovered that the needs of stroke survivors may only be fully understood once they have returned home.

This paper will discuss the original objectives of the project and key lessons learned. The outputs and outcomes from which older people may benefit include:

- stroke survivors had more unmet need on discharge from hospital than other patients;
- older people have a diverse range of needs following stroke, requiring advice and information in relation to modifications to the physical, material and social environment in order to improve or protect their physical and/or mental wellbeing.

The conclusions and recommendations may see the project being expanded, implemented and evaluated over a larger geography and population. For instance, the project found greater levels of unmet need for benefits advice and aids and adaptations than identified by The Stroke Association survey (The Stroke Association, 2010). The timing of the visit within the project seemed to be crucial.

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**Stream:** Environment and Ageing

**Date:** Thursday 12 July 2012 **Time:** 14:00–15:40

**Abstract ID:** 88

**Title:** Imagery and imaginaries of island identity: older people and migration in Irish small-island communities

**Method:** Oral

**Author:** Vanessa Burholt

**Institution:** Centre for Innovative Ageing

**Co-authors:**

Thomas Scharf

Kieran Walsh

This paper examines the imagery and imaginaries of islander identity and makes an original contribution to the fields of gerontology and nissology. Drawing on data collected through in-depth interviews with 19 older residents of two small-island communities located off the island of Ireland, we address the central roles played by older people in creating and sustaining islander identities. Reflecting both public and private representations of islander identity, the paper contrasts an island 'imagery' with an island 'imaginary', resulting in a complex 'imag(in)ery' of islander identity. This paper explores three main themes:

1. To what extent do older residents of island communities perceive an 'imag(in)ery' of islander identity?
2. In what ways do older islanders contribute to, substantiate or perpetuate the imag(in)ery of the islander identity?
3. Are there alternative imag(in)eries of the islander identity for different groups of older people who live in island communities?

Our analysis identified two imag(in)eries of islander identity. An historical islander identity was structured by the shared hardships and enforced self-sufficiency associated with residence in remote communities. Contemporary islander identities are founded on the positively perceived isolation of islands, an historical and cultural sense of belonging, frequent social interaction within cohesive, safe and secure communities, and a persistence of 'traditional' values. Older people were actively engaged in the (re)production of islander identity such as helping visitors discover their island origins, producing traditional cultural artefacts and passing cultural knowledge down through the generations. However, narratives revealed a hierarchy in relation to claims to islander status.

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**Stream:** Environment and Ageing

**Date:** Thursday 12 July 2012 **Time:** 16:40–18:20

**Abstract ID:** 267

**Title:** Constructing age-friendly communities: critical perspectives

**Method:** Symposium

**Author:** Chris Phillipson

**Institution:** Keele University

**Co-authors:**

Tine Buffel  
Liesbeth De Donder  
Dominique Verté  
Sarah Dury  
Mo Ray  
Sally Chandler

**Co-Chairs:**

Chris Phillipson  
Tine Buffel

This symposium reviews the development of age-friendly communities in the context of research findings about the nature of place and community within urban environments. The four papers review both empirical findings and also innovative methods aimed at developing age-friendly approaches. The papers link theoretical, empirical and policy perspectives.

**Developing age-friendly cities**

Chris Phillipson

This presentation will focus on outlining both the case for 'age-friendly communities' and the strategies that need to be adopted to promote strong ties within neighbourhoods. The paper will give particular emphasis to issues facing urban areas, these experiencing both population ageing and the rapid changes arising from globalization and migration. The discussion will provide a summary of the case for age friendly cities; assess what is known from research examining the planning of urban space; assess the benefits as well as the barriers to achieving strong connections within communities; outline the basis of a strategy for securing age-friendly communities.

**Feelings of unsafety and social exclusion: creating age-friendly environments as intervention strategy**

Liesbeth De Donder, Sarah Dury, Nico De Witte, Tine Buffel, An-Sofie Smetcoren, Dominique Verté (VUB, Brussels)

This paper explores feelings of unsafety as a driver of social exclusion in disadvantaged communities. The data for the present research are derived from the Belgian Ageing Studies, a project that uses structured questionnaires to collect information about various aspects of quality of life among older adults at the level of municipalities. Using data from over 67,000 older adults this study identifies how feelings of unsafety can create exclusion from community life and particular urban spaces. Moreover this contribution offers a critical overview of several distinct practices and approaches on tackling feelings of unsafety. The argument will be developed that the process of creating age-friendly cities can be a framework to increase feelings of safety in later life and consequently reduce social exclusion.

**Place attachment among older adults living in four communities in Flanders, Belgium**



There is strong evidence that age brings an increasing attachment to social and physical environments. However, the extent to which the experience of place attachment may vary between different types of locations remains under-explored in ageing research. Using a mixed-method approach, this paper identifies contextual factors that either promote or impede older people's attachment to place. Quantitative data from the Belgian Ageing Studies were used to purposively select four municipalities: two with relatively strong, and two with relatively weak place attachments among the older population. In the qualitative phase, two focus groups with local stakeholders and 20 semi-structured interviews with older residents were conducted in order to explain and build on the quantitative results. The qualitative findings focus on contextual factors that have been linked to place attachment. The study identifies the various pathways between these factors and older people's attachments. The article concludes by discussing policy issues raised by the research.

### **Developing an 'age friendly' workforce: The Manchester experience**

Mo Ray (Keele University) and Sally Chandler (Manchester City Council)

The World Health Organization 'age friendly city checklist' (WHO, 2007) identifies a range of standards that embrace inclusivity for older people using civic amenities and resources. The checklist does not specifically address the importance of an age friendly city being supported by an appropriately trained workforce. Nevertheless, it is implicit in the range of criteria that an appropriately skilled workforce is necessary to achieve aspirations for inclusivity. The Valuing Older People team with Keele University to develop a series of eight accredited modules constituting an 'ageing studies certificate' for the Manchester City workforce. This paper will highlight the experience of developing an ageing studies certificate for a diverse workforce and reflect on its success in achieving its stated outcomes. The contribution of the ageing studies certificate in its impact on practice and organizational cultures will be addressed.

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**Stream:** Environment and Ageing

**Date:** Friday 13 July 2012 **Time:** 08:40–10:00

**Abstract ID:** 180

**Title:** 'I'm not moving again': older adults' perceptions about living in their current home when they are older and frailer

**Method:** Oral

**Author:** Wendy Wrapson

**Institution:** University of Exeter

**Co-author:** Patrick Devine-Wright

Continuing to live in one's home as opposed to moving to an institutional care setting is a consistent wish and expectation of older people. Most residential housing, however, is geared to younger adults and may not be suitable for age-related conditions such as reduced mobility. As part of a research project investigating domestic thermal comfort, we conducted in-depth interviews in 17 older person households in rural areas and incorporated questions about how long participants expected to live in their current home, the challenges they thought they might face to maintain their independence as they aged, and any anticipated future moves to different housing. We found that attachment to their home and uncertainty about how the ageing process would personally affect them meant there was little planning for the future. Participants strongly felt that the place they were currently living 'would suit them forever' because, even if they became frail, care services could still be provided to them in their own home. These findings have implications for the future care needs of older people.

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**Stream:** Environment and Ageing

**Date:** Friday 13 July 2012 **Time:** 08:40–10:00

**Abstract ID:** 121

**Title:** Push and pull factors for moving at old age.

**Method:** Oral

**Author:** An-Sofie Smetcoren

**Institution:** Free University of Brussels (Vrije Universiteit Brussel/Leerstoel Active Ageing)

**Co-authors:**

Nico De Witte

Liesbeth De Donder

Sarah Dury

Tinie Kardol

Tine Buffel

Dominique Verté

The aim of this study is to investigate whether moving at old age differs among people in terms of socio-demographic variables (age and gender), physical health, income and marital status. In addition, the study also explores the main reasons why older people decide to move. These causes of moving at old age can be situated in a 'push/pull' framework.

The data for this contribution are derived from the Belgian Ageing Studies among people aged 60 and over (n=63,075) living in 138 municipalities and cities in Flanders, Belgium. In order to answer the research questions, frequencies and bivariate analyses are performed.

14% of the respondents have moved within the last ten years. The results indicate that recent movers have a lower income, a poorer physical health condition, and they are more likely to be divorced or cohabiting compared to people who did not move in the last decade. Results conclude that moving-behavior has similar proportions within three age groups (60–69 years, 70–79 years and 80+). Moving to a more pleasant environment (pull-factor) was the main reason why older people decided to move in the past ten years. Second and third most important reasons were problems concerning health (push-factor), and problems relating to the current housing situation (push-factor). Additionally, individual differences in moving reasons are examined.

The findings revealed the various multidimensional inequalities among movers in later life. Additionally, differences in push- and pull components were detected as main reasons for moving.

**Stream:** Environment and Ageing

**Date:** Friday 13 July 2012 **Time:** 08:40–10:00

**Abstract ID:** 16

**Title:** So much choice? Women's decision-making and the move to a retirement village in Australia

**Method:** Oral

**Author:** Louise Hynes

**Institution:** University of South Australia

The expanding ageing demographic, with its changing values, expectations and generational relationships, presents new challenges to the provision of appropriate accommodation. 'Retirement villages' seem to present one solution and are found in many countries. Unlike nursing homes, they offer very independent low-maintenance living, generally without significant care-facilities but in an active community of older people.

This paper explores the experiences, hopes and expectations of some older Australian women as they deal with the micro-decisions around whether to stay in their existing home or move into housing that is specifically targeting older people. Each seemingly small decision can be the site of competing demands around power and agency. Working through representation, as well as memories, objects and key places around the home this study adopts an interdisciplinary approach, from a cultural studies perspective.

For many older women in Australia the contemporary context of decisions around moving home are profoundly affected by both enhanced government provision for remaining in the existing home and by a rapid growth in the number, diversity and promotion of 'retirement villages' and the challenges of living in a multicultural society. They are also affected by living in a society in which older women frequently experience various forms of marginalization and discrimination.

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**Stream:** Environment and Ageing

**Date:** Friday 13 July 2012 **Time:** 08:40–10:00

**Abstract ID:** 57

**Title:** How age-friendly are purpose-built retirement communities? Towards a conceptual and empirical understanding of age-friendliness

**Method:** Oral

**Author:** Thomas Scharf

**Institution:** Irish Centre for Social Gerontology

**Co-authors:**

Jennifer Liddle

Bernadette Bartlam

Miriam Bernard

Julius Sim

This paper contributes to emerging conceptual debates around age-friendly environments, providing evidence relating to the relative age-friendliness of purpose-built retirement communities. While such communities have emerged as a housing option for growing numbers of older people, they have not yet been subject to critical examination through the lens of age-friendliness. The paper combines both theoretical and empirical approaches. It reviews the emerging literature around age-friendly environments to identify the core elements of an age-friendly community. Drawing on a new definition of age-friendly communities, the paper then examines available empirical evidence arising from UK-based studies of purpose-built retirement communities to assess the degree to which such communities may be regarded as being age-friendly. Findings are then reported from the mixed-methods Longitudinal study of Ageing in a Retirement Community (LARC) to explore age-friendliness in a more comprehensive way. LARC involved: two waves of a questionnaire survey with residents (n=122 at Wave 1; n=156 at Wave 2); interviews and focus groups with key stakeholders involved in the staffing, management and design of the community; and other qualitative data collected from community residents in the form of 'directives' (i.e. invitations to residents to write on particular topics). Drawing the different components together, the paper concludes by identifying implications for future research, policy and practice development in relation to age-friendly environments. The paper argues that purpose-built retirement communities need to commit to the genuine involvement of residents in a regular cycle of planning, implementation, evaluation and continual improvement in order to facilitate active ageing.

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**Stream:** Environment and Ageing

**Date:** Friday 13 July 2012 **Time:** 10:30–11:30

**Abstract ID:** 216

**Title:** Age-related rural social exclusion: a framework

**Method:** Oral

**Author:** Kieran Walsh

**Institution:** Irish Centre for Social Gerontology, NUI Galway

**Co-authors:**

Eamon O'Shea

Thomas Scharf

Our understanding of social exclusion and how it affects the lives of older people in diverse rural settings is poorly developed. Indeed, while previous work has identified particular domains of exclusion for older people, research has rarely considered rural places as a context for those domains. We have little knowledge of how age, the life-course and place – individually and in combination – impact on the potential for rural-dwelling older people to experience exclusion in later life. Nor do we have insight into how older people conceptualize, react to and deal with exclusion in later life. In this paper we draw on 106 semi-structured interviews with older people, to explore how age and rurality combine over the life-course to impact on the likelihood of exclusion in later life. Participants were drawn from 10 community sites across Ireland and Northern Ireland, with each site representing either a village, dispersed, island, remote or near-urban rural setting. The findings demonstrated that age-related rural social exclusion in these communities was both multidimensional – in terms of the various domains of exclusion in terms of which older people could be excluded – and multi-layered – in terms of how a deeper set of mediating factors, concerning place, life-course and individual elements, could influence the depth and extent of exclusion for rural older people. The findings are discussed with reference to the literature and future work.

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**Stream:** Environment and Ageing

**Date:** Friday 13 July 2012 **Time:** 10:30–11:30

**Abstract ID:** 61

**Title:** Promotion of wellbeing amongst isolated older adults in deprived urban and rural areas

**Method:** Oral

**Author:** Pauline Banks

**Institution:** University of the West of Scotland

**Co-authors:**

Helen Kane

Angela Kydd

Yvonne Simpson

**Background:** Although many people are now living longer and healthier lives, research shows that loneliness is a common problem. Volunteering has been harnessed successfully to support a range of individuals at risk of isolation including disabled children and people with learning disability.

**Aim:** The aim of the project was to determine whether the quality of life of isolated older people (aged 60+) living in the community could be improved through working with older volunteers (aged 50+) to promote social inclusion and greater independence.

**Method:** Volunteers and isolated older people were identified and recruited through a variety of channels. Volunteers fulfilled two roles, volunteer and research participant. Following a training programme, volunteers were matched with an older person for a period of six months in order to identify health or social problems and negotiate potential solutions. A member of the research team carried out one-to-one interviews with volunteers on joining the project (Time 1), and both volunteers and older people once they had worked together for six months (Time 2). Both volunteers and older people completed a number of standardized measures of health and wellbeing at Times 1 and 2.

**Findings:** Volunteers ranged in age from 56 to 83. A majority had a history of volunteering and were involved in a number of voluntary roles concurrently. Isolated older people ranged in age from 62 to 82; factors contributing to isolation varied. Discussion focuses on the experiences of both volunteers and isolated older people including challenges and perceived benefits.

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**Stream:** Environment and Ageing

**Date:** Friday 13 July 2012 **Time:** 10:30–11:30

**Abstract ID:** 222

**Title:** Loneliness and perceptions of age friendliness among community based older adults

**Method:** Oral

**Author:** Ann O'Hanlon

**Institution:** Netwell Centre, Dundalk Institute of Technology

**Co-authors:**

McConville Catherine

McEvoy John

Bond Rodd

Loneliness is a pressing global issue impacting adversely on psychosocial health and well-being. It has been described as unpleasant and distressing (Peplau & Perlman, 1982), aversive and undesirable (Ceçen, 2007), and something most people experience at some point in their lives (Rokash 2000). Indeed some researchers call loneliness the social equivalent of physical pain, hunger, and thirst (Hawkley & Cacioppo, 2010). The current study sought to test a new measure of loneliness, and to examine its relationship to age friendliness, i.e. community factors that can support (or impede) quality of life and well-being for adults in middle and later life.

Adults aged 50+ years were recruited from the community, through the geodirectory and through convenience sampling. Items for the new loneliness measure were developed from a detailed literature review and from focus groups. Age friendliness measures were developed from focus groups and a literature review on each of eight themes including respect & social inclusion, housing, social participation, transportation, and communication & information.

Replicated across samples, results indicated that the newly developed measure had good psychometric properties. Additionally, even when controlling for negativity and levels of depression, loneliness was significantly associated with community based challenges including transport problems and less access to information and technology supports.

The newly developed General Loneliness Scale has good psychometric properties, and is easy to read and score. The new measure may be useful for professionals and others interested in promoting age friendliness and adding quality of life and health to later years.

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**Stream:** Environment and Ageing

**Date:** Friday 13 July 2012 **Time:** 10:30–11:30

**Abstract ID:** 51

**Title:** It's all life: ageing bodies and the postwar generation

**Method:** Oral

**Author:** Naomi Woodspring

**Institution:** University of the West of England

The post-war generation is now clustered around that mythical age of 64. Their lives have been marked by social rupture in the 60s and later, by changes in patterns of gender, sexuality and work. Throughout their cohort lives, they have been the shapers of history and have shape-shifted within the context of history. It is those kids, the core of the post-war generation, who are now entering the ranks of 'old'. As these hippies, mods, rockers, and those young people who did not affiliate with any subculture group but were, nevertheless, influenced by contemporaneous cultural shifts, enter old age, they most likely will not be put aside as 'other' quietly.

Body and embodiment have been at the core of this cohort's experience: body dancing through the sixties, working, running, sitting on the couch through the middle years, moving to, body entering old age and the notions of successful ageing. Body and identity may be taking on new meanings.

This paper reflects the mid-stages of interpretation of interview data from a cross-class study of adults born between 1945 and 1955, exploring meanings they attribute to the biological body changes they are currently experiencing. Participants come from diverse backgrounds: some were deeply involved in the 60s and some were somewhat perplexed by the ruckus. This paper explores the post-war generation's response and reflection to their changing bodies and the meanings they attribute to embodied experience within the context of demographic changes raises questions about their ageing identity.

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**Stream:** Environment and Ageing

**Date:** Friday 13 July 2012 **Time:** 10:30–11:30

**Abstract ID:** 58

**Title:** Transitions in loneliness and social isolation

**Method:** Oral

**Author:** Deborah Morgan

**Institution:** Swansea University

**Co-author:** Vanessa Burholt

This paper presents the findings of a literature review that aimed to understand how the risk factors related to loneliness and social isolation in later life influence transitions and changes in levels of loneliness and social isolation.

An extensive search of health, psychology and social science databases showed that a number of factors increased the risk of experiencing loneliness and social isolation. Specific areas examined included social demographic factors, life events and health related factors. The literature review revealed that the majority of studies have been cross sectional and focused on risk and prevalence of loneliness, with little focus on the transient nature of loneliness.

This mixed method study will address the lack of research exploring changing patterns in loneliness and social isolation. Multilevel analysis will be used to identify which groups of older people are likely to demonstrate an improvement or deterioration in levels of loneliness and isolation. Narrative interviews will explore stability and transitions in loneliness and isolation as well as temporal aspects. This paper will provide an overview of the literature and a detailed plan of the proposed analysis.

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**Stream:** Environment and Ageing

**Date:** Friday 13 July 2012 **Time:** 10:30–11:30

**Abstract ID:** 190

**Title:** Lifestyle aspirations in retirement: implications for environmental sustainability

**Method:** Oral

**Author:** Susan Venn

**Institution:** University of Surrey

**Co-authors:**

Kate Burningham  
Birgita Gatersleben  
Ian Christie  
Tim Jackson

Recent research focuses on opportunities offered at points of transition in the life course for people to adopt more sustainable lifestyles. It has been suggested that retirement affords opportunities to engage in more pro-environmental behaviour, particularly in terms of transport use, energy saving and waste reduction.

As the baby-boomer generation approaches retirement, however, this active group are distinctive by their engagement in a 'consumerist habitus', whilst also rejecting the constraining identity of 'old age', by exercising individual agency, and freedom of choice in all areas of later life. Such freedom of choice is manifested in practices such as global travel, home-improvements, and increased engagement in leisure activities, all of which may be environmentally detrimental.

This paper examines competing narratives of expectations for retirement and explores the extent to which retirement may lead to the onset of more sustainable lifestyles. Data will be presented from a longitudinal qualitative study of 40 men and women transitioning to retirement. Their narratives reveal expectations of increased consumption that are justified through an awareness of a finite time to achieve personal goals, alongside a belief that they have earned the right to do as they wish through years of hard work. This belief may even over-ride concerns for the environment, or the legacy for future generations and coexists with a mindfulness of the disparity of their chosen lifestyles with that of their parents' generation, which focused on 'make do and mend' and a desire to save for future generations.

Research supported by ESRC, Defra and Scottish Government (2010–2013).

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**Stream:** Health, Wellbeing and Care

**Date:** Wednesday 11 July 2012 **Time:** 14:00–15:40

**Abstract ID:** 188

**Title:** A life course approach to physical capability: findings from the HALCYon research programme

**Method:** Oral

**Author:** Diana Kuh

**Institution:** MRC Unit for Lifelong Health and Ageing

**Co-authors:**

Rachel Cooper

Rebecca Hardy

and the HALCYon study team

Physical capability, the capacity to undertake the physical tasks of daily living, is an important component of healthy ageing, and can be assessed by objective tests of muscle strength and physical performance and self-reports of everyday function. There is growing evidence that social and biological factors across life affect the peak levels of physical capability achieved in adult life and/or their subsequent rate of decline, and that, in turn, physical capability predicts subsequent health and length of survival.

We will first summarize findings from cross-cohort analyses, including up to 8 British cohort studies, participating in the HALCYon research programme, which aimed to address important research gaps identified. These include (1) the influence of body size on physical capability; (2) the association of childhood socioeconomic circumstances with physical capability; (3) the relationship between biomarkers of ageing and physical capability; (4) the association between physical capability and subsequent positive wellbeing.

We will then present results from work on the MRC National Survey of Health and Development that has allowed us to explore some of the associations found across the HALCYon cohorts in-depth. This will include the association of lifetime weight gain with key components of muscle structure and function in early old age.

We conclude that HALCYon has demonstrated that understanding and promoting healthy ageing requires comparative and in-depth research on physical capability using longitudinal studies, preferably with data on characteristics across the whole of life.

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**Stream:** Health, Wellbeing and Care

**Date:** Wednesday 11 July 2012 **Time:** 14:00–15:40

**Abstract ID:** 145

**Title:** Reflective accounts of painful episodes/experiences by people who consider themselves to have aged successfully

**Method:** Oral

**Author:** David Collis

**Institution:** Keele University

**Co-author:** Jackie Waterfield

**Background:** Despite an ageing population and an increased prevalence of chronic pain, no literature has evaluated the effects of chronic pain on the concept of successful ageing. The aim of this research was to explore older people's views on past and present experiences of pain and whether these experiences influenced their perception of successful ageing.

**Methods:** Semi-structured interviews were undertaken with six participants aged 75 years or older who considered themselves to have aged successfully, to explore what this meant to them and their experience of pain. Data were analysed using a grounded theory approach and two higher-order themes emerged: 'Perception of self' and 'Health ethos'.

**Findings:** None of the participants could recall painful experiences from their lives that were not attributable to trauma. There was a belief that pain is a natural consequence of the ageing process. While some accepted this with little resistance, others felt frustration at what they considered a dismissive attitude towards elderly people in pain from health care practitioners.

**Conclusions:** It is hypothesized that predictable experiences of pain throughout life as one ages may contribute to an acceptance of pain as a biomedical certainty, a belief reinforced by both health professionals and society. However, it is possible to have chronic pain and yet consider oneself to have successfully aged, and it should therefore be recognized that there is a distinction between having pain and having a problem with pain.

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**Stream:** Health, Wellbeing and Care

**Date:** Wednesday 11 July 2012 **Time:** 14:00–15:40

**Abstract ID:** 111

**Title:** Chronic pain and later life: 'I try and smile, I try and be cheery.' Older adults' accounts of their encounters with health care professionals.

**Method:** Oral

**Author:** Amanda Clarke

**Institution:** Northumbria University

**Co-authors:**

Denis Martin  
Derek Jones  
Pat Schofield  
Paul McNamee  
Breda Anthony  
Blair Smith

Chronic non-malignant pain is recognized as one of the most pervasive and costly health-care challenges. The vast majority of the burden of chronic pain, however, rests on those personally affected: this is most apparent amongst the older population who may also be affected by comorbidities that compound the impact of pain. As the population ages, the number of people with chronic pain will increase; this, together with the promotion of home care as a preferable (and usually cheaper) alternative to institutional care, calls for a deeper understanding of what it is like to live with chronic pain in the community. This paper reports a narrative exploration of community-dwelling men and women's experiences of living with chronic pain. 23 men and women (aged 66-89) in NE Scotland participated in one or two interviews about how they 'made sense' of their chronic pain and its impact on their lives. Data were transcribed verbatim and subjected to thematic and narrative analysis. Six main themes emerged relating to older adults' initiating and managing encounters with health care professionals: the beginning of pain, seeking help, putting up and keeping going, the importance of diagnosis, being listened to and being heard and, thinking about the future. Findings should help inform health professionals' approach to older adults with chronic pain, specifically with respect to communication, diagnosis and expectations.

This study was funded by the Medical Research Council as part of the Lifelong Health and Wellbeing programme.

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**Stream:** Health, Wellbeing and Care

**Date:** Wednesday 11 July 2012 **Time:** 14:00–15:40

**Abstract ID:** 67

**Title:** Adult survivors of childhood liver transplant: personal narratives of an emerging 'new' ageing population

**Method:** Oral

**Author:** Karen Lowton

**Institution:** King's College London

**Co-authors:**

Chris Hiley

Paul Higgs

Alongside the profound social and economic changes arising from general population ageing, the past half century has seen the emergence of what have been termed 'new' ageing populations (Lowton, 2009; Iles & Lowton, 2010; Lowton & Higgs, 2010). These populations have emerged through rapid medical progress in tandem with changes in social attitudes to issues surrounding disability and chronic illness. This has led to increasing numbers of people with rare and/or complex disease or disability surviving into adulthood and living considerably longer lives than was historically possible. Many are pioneers; it is likely they will face issues as they age that have never been encountered before, either by themselves or by professionals leading their treatment and care.

We report an ongoing study of the very first cohort of paediatric liver transplant recipients in the world. Childhood liver transplantation, initially an experimental procedure, began in the early-mid 1980s in the UK and North America. Thirty years later, many of the British pioneers are living adult lives yet have never been discharged from specialist centre care. While clinical outcomes have been well documented, social and ontological issues for these adults, who have lived their whole lives within the context of their body as a project, have never been studied.

We explore not only the health and social implications of living with transplanted livers from infancy but also the wider existential questions of having had such transforming 'experimental' surgery within the context of a much more reflexive and ontologically insecure society.

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**Stream:** Health, Wellbeing and Care

**Date:** Wednesday 11 July 2012 **Time:** 14:00–15:40

**Abstract ID:** 80

**Title:** Altruism and participation in longitudinal health research? Insights from the Whitehall II Study

**Method:** Oral

**Author:** Gill Mein

**Institution:** Faculty of Health and Social Care Sciences, Kingston University/St George's, University of London

**Co-authors:**

Clive Seale

Helen Rice

Suneeta Johal

Richard Ashcroft

Anthea Tinker

Research that follows people over a period of time (longitudinal or panel studies) is important in understanding the ageing process and changes over time in the lives of older people. Older people may choose to leave studies due to frailty, or illness and this may diminish the value of the study. However, people also dropout of studies for other reasons and understanding the motivation behind participation or dropout may prevent further loss of valuable longitudinal information and assist the continuation of longitudinal studies.

This study examines qualitative data from interviews and focus groups with participants of the Whitehall II study, and investigates the reasons participants give for participating in longitudinal health studies, and the recommendations they give for encouraging continued participation as they grow older.

Findings are explored in the light of the influence of altruism or reciprocity. Rather than being wholly motivated by altruism, participants were motivated by the benefits they perceived, particularly information and care received during the medical examinations and the sense of loyalty and membership associated with being part of the study. Despite dislike of the questionnaires, participants greatly valued information the medical examinations provided, requesting additional explanations about results and further measures of their health status. These requests and the findings support the view participation in research studies is motivated by altruism, and a degree of implicit and explicit reciprocity. To try and maintain participation in longitudinal health studies this project recommended gathering further information from exit interviews with participants who drop out of studies.

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**Stream:** Health, Wellbeing and Care

**Date:** Wednesday 11 July 2012 **Time:** 14:00–15:40

**Abstract ID:** 105

**Title:** Physical activity promotion: current issues and developments

**Method:** Symposium

**Author:** Samuel Nyman

**Institution:** Bournemouth University

**Co-authors:**

Jo Coulson

Maria Horne

Rita Newton

**Chair:** Samuel R Nyman

**Discussant:** Christina Victor

Physical activity directly benefits older people's health and wellbeing and is a core component of the active ageing agenda. To retain functional capacity and independence in older age, people need to lead physically active lifestyles. However, physical inactivity continues to be highly prevalent in the UK, especially amongst older people. The objective, therefore, of this symposium is to provide a forum for BSG delegates to discuss the important issue of physical activity promotion. A multidisciplinary team – representing health psychology, nursing, urban engineering, and public health – will bring together the latest research in their area across four inter-related papers:

**Current status of older people's participation in exercise interventions for the prevention of falls**

Samuel R Nyman

A recent authoritative Cochrane systematic review evaluated interventions to prevent falls among community-dwelling older people (Gillespie et al, 2009). Among the randomized controlled trials (RCTs), exercise interventions were found to be the most effective strategy. However, the Cochrane review did not consider older people's participation in the interventions. This paper presents a re-analysis of the 99 single and multi-factorial RCTs with a focus on exercise interventions. Rates for recruitment, attrition, and adherence will be presented to highlight that many interventions are only effective with a sub-group of those targeted.

**Barriers and facilitators to physical activity uptake and adherence among South Asian older adults: A systematic review of qualitative studies [18mins]**

Maria Horne

In the UK, only 11% of South Asian men and 8% of South Asian women aged 55+ undertake the recommended levels of physical activity (PA) (Sproston & Mindell, 2006). At the same time these individuals experience greater levels of heart disease, stroke and type 2 diabetes; conditions that can be prevented or improved through regular PA. Therefore, promoting uptake and adherence of PA in SA communities for primary and secondary prevention of these conditions remains a public health priority. This paper presents a systematic review of the qualitative literature (published 2000–2011) to inform our understanding of how to tailor PA interventions appropriately to the needs of this group.

**Modifying the built environment to promote active ageing**

Rita Newton

One of the most effective ways of maintaining physical fitness in older age is to achieve recommended levels of 'healthy walking' (2.5 hours per week). Research by Inclusive Design for Getting Outdoors (IDGO) has found that a supportive built environment plays a crucial role in enabling older people to walk within their neighbourhood. This presentation will focus on what 200 UK citizens aged 65+ identified as their needs and preferences for the attributes of streets that make it easy to go outdoors, as well as objective measurements of 'enablers' and 'barriers'. It will also report on a current study of the impact of tactile paving on older people's mobility.

### **Physical activity in community-dwelling older adults: Lessons learned from the 'Older People and Active Living' Project**

Jo C Coulson

This presentation will summarize findings from Project OPAL. The study aimed to discover what affects physical activity behaviour in 240 community-dwelling adults aged <sup>3</sup>70. Using objective measures of physical activity and function, activity patterns will be described, including the contribution of daily journeys from home (particularly shopping, and bus-usage), and the importance of 'walkable' amenities. Relationships between participants' residential level of deprivation and activity levels will be explained. Illustrative cameos, revealed through case-checking of our qualitative data, will also be highlighted. Suggestions will be made for how this research might inform intervention design and policy-making for promoting active lifestyles among older people.

### **Discussion**

Christina Victor

The symposium will conclude with time for questions and an overall discussion of the key issues raised in the presentations.

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**Stream:** Health, Wellbeing and Care

**Date:** Wednesday 11 July 2012 **Time:** 16:10–17:10

**Abstract ID:** 220

**Title:** Experiencing elder abuse: coping strategies adopted by older people

**Method:** Oral

**Author:** Attracta Lafferty

**Institution:** NCPOP, University College Dublin

**Co-authors:**

Gerard Fealy

Margaret Pearl Treacy

Imogen Lyons

A major limitation of research in the field of elder abuse is the fact that few studies have examined older people's own accounts of their experiences of abuse. Such accounts can provide important evidence on which to develop services that support older people in coping with their experiences of abuse.

To address this lacuna in research, a study was conducted to examine older people's experiences of elder abuse, as told by older people themselves. The study involved depth interviews with a purposive sample of nine older people, recruited through the senior case workers responsible for managing cases of elder abuse in Ireland. The interviews were conducted in the period May to November 2011.

The age range of participants was 67 to 83 years and all experienced one or more forms of abuse, including physical, psychological, financial abuse and neglect. Participants spoke about the nature of the abusive experience, the impact of the abuse on them, the outcomes of the abuse and their experiences of support. They also spoke about the strategies that they used to help them to cope with their experiences. Six coping strategies emerged from the interview data. These were: avoidance, confrontation, personal strengths, affirmation, finding a place of sanctuary and rationalizing the abuse. These strategies suggest that older people appear to draw on their own internal resources to help them to cope and may suggest areas for possible interventions and supports that optimize their own coping strategies.

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**Stream:** Health, Wellbeing and Care

**Date:** Wednesday 11 July 2012 **Time:** 16:10–17:10

**Abstract ID:** 44

**Title:** Preventing financial abuse in dementia

**Method:** Oral

**Author:** Kritika Samsi

**Institution:** King's College London

**Co-authors:**

Jill Manthorpe

Karishma Chandaria

Financial abuse of people with dementia is of concern to many family carers, voluntary sector staff and professionals. Interest in prevalence, prevention and response is also growing in gerontological research. Although there is potential for community prevention and early alerts, little is known about preventative and early response practice among community services staff. Through an online survey responded to by 86 local Alzheimer's Society staff across England, we sought information about the risks associated with managing money among people with dementia and factors that may protect someone from financial abuse. We asked staff about their roles in helping people with dementia manage money and their views on indicators of abuse, which were supplemented by open ended responses. Almost all respondents had encountered people with dementia experiencing problems with money management, with almost half reporting cases of financial abuse over the past year. Most were alert to a range of warning signs and vulnerabilities and offered suggestions relevant to policy and practice about prevention and risk minimization. As with other forms of elder abuse, supporters of people with dementia should be alert to the risks of financial abuse and able to identify preventive measures or means to respond to them.

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**Stream:** Health, Wellbeing and Care

**Date:** Wednesday 11 July 2012 **Time:** 16:10–17:10

**Abstract ID:** 17

**Title:** Detection and prevention of elder financial abuse: applying the bystander intervention framework to understand the role of social care and health professionals.

**Method:** Oral

**Author:** Mary Gilhooly

**Institution:** Brunel University

**Co-authors:**

Miranda Davies  
Priscilla Harries  
Ken Gilhooly  
Deborah Cairns

**Objectives:** Bystander intervention theory offers a novel approach to consideration of elder financial abuse and decision making by professionals in such cases. The research aim was to establish the factors that have the greatest influence on professionals' detection of elder financial abuse and the likelihood of intervention.

**Design:** Elder financial abuse case scenarios were developed applying a factorial survey design. Findings from a preceding qualitative research phase were used to establish the seven key pieces of information (factors) that should be included in the scenarios.

**Methods:** Health and social care professionals (n=152) viewed a single sample of 65 elder financial abuse case scenarios presented on line, including 15 repeats, and judged certainty of abuse and likelihood of action. Multiple regression analysis and incremental F tests were conducted to compare the impact of each factor on professionals' judgements.

**Results:** Factors that had a significant influence on judgements included the nature of the financial problem suspected and the older person's mental capacity. Mental capacity accounted for more than twice the variance in likelihood of action than the type of financial problem.

**Conclusions:** In the context of the bystander intervention framework, the findings raises questions as to whether professionals consider situations as more critical where mental capacity is of concern; however professionals need to be willing to intervene in cases of abuse even when older people have full mental capacity. The findings have been used to develop an on line decision training aid, which is currently being testing using a randomized controlled trial.

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**Stream:** Health, Wellbeing and Care

**Date:** Wednesday 11 July 2012 **Time:** 16:10–17:10

**Abstract ID:** 69

**Title:** Explaining loneliness amongst adults in Europe: a two-level and cross-national study

**Method:** Oral

**Author:** Keming Yang

**Institution:** University of Durham

**Co-author:** Christina Victor

Researchers in social gerontology, including authors of this paper, have consistently demonstrated national and cultural variations of the prevalence of loneliness. However, publications that rigorously map out such variation across a large number of nations remain rare. In this paper we build upon the variation we described in the prevalence of loneliness across 25 European countries by exploring both individual as well as national factors that may explain the likelihood of adults reporting loneliness. Using contemporary data from the European Social Survey (round 3 in 2006 and round 5 in 2010), we follow a two-stage analytical strategy: in step one, we explore the factors in the 2006 dataset with the greatest statistical power in explaining the prevalence of loneliness (defined as feeling often or always lonely) with an aim of discovering the most effective statistical model; in step two, we employ this model to predict loneliness in the 2010 datasets in order to test the validity of the model. A two-level and multi-category logistic regression modelling approach will be used for all countries in order to discover common and distinctive factors for each country (or group of countries). Implications of the findings for academic research and policymakers will be discussed.

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**Stream:** Health, Wellbeing and Care

**Date:** Wednesday 11 July 2012 **Time:** 16:10–17:10

**Abstract ID:** 143

**Title:** Virtual community diminishing loneliness in rural areas?

**Method:** Oral

**Author:** Arja Kilpeläinen

**Institution:** University of Lapland

The situation of small villages in remote areas is under continuous discussion in Finland. Finnish welfare policy has undergone great changes during the last two decades. From the point of view of an individual, loneliness is one of the most important detractors from well-being. Even so, it is a very personal dimension and not necessarily dependent on the numbers of social contacts.

The use of information technology (IT) has been seen as an important opportunity to improve communication and community in remote villages. The use of IT provides possibilities to meet others even if they live far away. However, more knowledge is needed to determine how the elderly react to new ways of communication. In this paper my purpose is to describe the phenomenon of technology-mediated sociality among the elderly. I localize my study to Finland, where the distances are huge and technology is needed. I analyse the elements that enhance the use of technology among the elderly. The data have been collected from villages in Lapland, in the northern part of Finland.

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**Stream:** Health, Wellbeing and Care

**Date:** Wednesday 11 July 2012 **Time:** 16:10–17:10

**Abstract ID:** 230

**Title:** Preventing loneliness and social isolation

**Method:** Oral

**Author:** Jennifer Francis

**Institution:** Social Care Institute for Excellence

**Co-authors:**

Karen Windle

Caroline Coomber

There are a number of population groups vulnerable to social isolation and loneliness, (e.g., young care leavers, refugees and those with mental health problems). Nevertheless, older people (as individuals as well as carers) have specific vulnerabilities owing to 'loss of friends and family, loss of mobility or loss of income'. This presentation will be based on a recent systematic review that identified those statutory and voluntary services effective in mitigating social isolation and loneliness.

The concept of prevention will be discussed and the distinct meaning of the concepts of loneliness and social isolation explored. The different structure and processes of the interventions will be demonstrated before identifying the reported impact of these services on reducing loneliness and improving health, quality of life and well-being. The outcomes from this literature will then be briefly compared with an empirical case study of a preventative service, that of Care Navigators; an analysis used to support the Social Care White Paper. Bringing together the data from the systematic review and our case study, we will identify for whom (e.g. which population groups) such preventative services may be effective. Gaps in the research evidence will be outlined and the validity of the systematic review evaluated. Finally, we will identify those policy and practice implications that stem from our review.

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**Stream:** Health, Wellbeing and Care

**Date:** Thursday 12 July 2012 **Time:** 08:40–10:20

**Abstract ID:** 72

**Title:** Pain in older people

**Method:** Symposium

**Author:** Jane Richardson

**Institution:** Keele University

**Co-authors:**

Fiona MacKichan

Ross Wilkie

Kate Lillie

Andrew Moore

**Chair:** Jane Richardson

**Discussant:** Clare Jinks

Epidemiological data suggest that up to 60% of older adults living in the community in the UK experience persistent pain. Chronic musculoskeletal pain impacts on older people's health and well-being, and is associated with increased use of health and social care services and reduced quality of life. With the ageing of the population issues associated with chronic pain will become more pertinent. There is growing concern over demand for NHS services, a drive to promote a healthier old age and to prevent the disabling effects of chronic pain. This symposium presents four papers that address these issues.

**More pain, less help seeking? Older adults' experiences and expectations of chronic pain**

Fiona MacKichan

There is evidence that many older adults do not consult for chronic pain and may be less likely to seek help for pain than for other health problems. Societal expectations of ageing have been suggested as a key factor influencing use of services: subscription to normative views may subdue expression of pain and inhibit help seeking.

Data from a mixed method study of pain in older people will be used to explore the genesis and consequences of age-related expectations. Survey data show age-related variations in pain characteristics and use of services. Analysis of interviews suggests that many subscribe to notions of pain as normal in older age. Such a perspective can be both a pragmatic and a culturally desirable response, and whilst serving an adaptive function, it may also mask unmet need for support.

**The impact of pain on successful ageing**

Ross Wilkie

Successful ageing is a multi-faceted state, involving preservation of biomedical, physical, psychosocial and lay components to enable well-being, social participation and quality of life. Musculoskeletal pain is considered as a stressor that impacts on a number of body functions.

Subjects from a cohort study of older adults were classified into those reporting no pain, regional pain and widespread pain, and a successful ageing index constructed. The results indicate that pain has a significant adverse effect on successful ageing. At baseline, individuals with regional and widespread pain have

accumulated significantly more signs of less successful ageing than those with no pain. The longitudinal results indicate that increasing pain significantly accelerates the rate of less successful ageing.

### **Managing interference from chronic pain through meaningful activities**

Andrew Moore

This study used a cohort survey of older people to create three groups ('no pain', 'pain with no interference'; 'pain with interference') and conducted in-depth interviews to explore how chronic pain interferes, or does not interfere, in people's lives.

Findings suggest that pain with no interference can be a long-term state but some participants appeared able to control its effects, in part through remaining active. We explore what this means in the context of people's lives and explore the importance of understanding lay beliefs in this area.

### **Caring for people with arthritis at the end of life**

Kate Lillie

It is anticipated that the number of older people dying in the UK will rise by 17% in the next 20 years, leading to an increase in the number of older people living and dying with osteoarthritis. The presence of arthritis as a co-morbid disease is strongly associated with pain at the end of life. This highlights the necessity of ensuring that arthritic pain continues to be controlled even when the primary focus of care is directed towards treatment of other life limiting disease.

This presents a challenge to end-of-life care services as many of the recommended treatments for osteoarthritis may not be appropriate due to advancing co-morbid disease. The dearth of research data means that it is difficult to make recommendations about how best to provide pain relief to older people with osteoarthritis. This paper will explore how multidisciplinary input might enhance care of this vulnerable patient group.

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**Stream:** Health, Wellbeing and Care

**Date:** Thursday 12 July 2012 **Time:** 08:40–10:20

**Abstract ID:** 260

**Title:** Sustainable homes: what are the benefits of Care and Repair services to the independence and quality of life of older people living in Gwynedd and Anglesey?

**Method:** Oral

**Author:** Cath Brannan

**Institution:** Bangor University

**Co-authors:**

Gill Windle

Bob Woods

**Purpose:** An overwhelming research finding is that given the choice, elders wish to 'age in place'. This research examines some of the services provided by the Care and Repair agency in North West Wales, as part of Masters by Research study. Care and Repair provides a range of services to assist elders who wish to remain in their own home.

**Objectives:** 1. To ascertain if the service has increased the service recipient's independence/QoL in the home in reference to perceived increased physical capabilities;  
2. To ascertain if the service has empowered the service recipient enabling him/her to make choices about their own home; 3. To obtain the service recipient's perception of the standard of service received.

**Methods:** A mixed method design was used (qualitative and quantitative). 200 questionnaires were sent out to potential participants. Participants were geographically representative of the area and randomly selected from Care and Repair's database. 10 participants were selected for the semi-structured interviews using convenience sampling. The participants were interviewed pre and post intervention in order to obtain a perceived expectation of the service and then to record the impact of the service on independence and QoL.

**Results:** This paper presents the main findings of the study. It discusses them in relation to the impact on policy, future service delivery and the potential for 'ageing in place'.

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**Stream:** Health, Wellbeing and Care

**Date:** Thursday 12 July 2012 **Time:** 08:40–10:20

**Abstract ID:** 196

**Title:** Opening the "black box" of home care for older people

**Method:** Oral

**Author:** José São José

**Institution:** University of Algarve, Faculty of Economics, CIEO

**Co-author:** Ana Teixeira

This presentation intends to present and discuss the main findings of ethnographic work on home care for older people (work in progress at the time of the submission of this abstract). The purpose of this work is to understand, in depth, the care encounter. We pay special attention to the elders' experiences of receiving home care: processes, actions/interactions, and the "inner experiences" in a phenomenological sense.

Concerning the processes, we observed both what is done and how it is done. With regard to the former aspect, the observations revealed that home care is, except in one case, the same as body work, which means, from the point of view of the elders' experiences, being naked, being touched and being watched. Nevertheless, the elders' experiences of receiving home care are not circumscribed to the work focused on their bodies. Other experiences include, for example, watching verbal fighting between a family carer and the home care workers. With regard to the latter aspect, the observations revealed that home care is undertaken in a routinized way, and most of the times it takes no more than fifteen minutes. Furthermore, we identified four main types of interactional approaches undertaken by home care workers towards the elders: a close approach, a distant approach, an affective approach and a cognitive approach.

Regarding the "inner experiences", we captured the following feelings: loss of independence and autonomy, feeling that it is not worthwhile to continue alive, fear of going to a nursing home, and loneliness.

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**Stream:** Health, Wellbeing and Care

**Date:** Thursday 12 July 2012 **Time:** 08:40–10:20

**Abstract ID:** 92

**Title:** Reablement – a cultural shift in the practice of paid carers.

**Method:** Oral

**Author:** Margaret Cook

**Institution:** Northumbria University

**Co-authors:**

Martha Chinouya

Norman Rickard

Enabling adults with disabilities and various ill health conditions to live personalized, cost effective and independent lives is widely promoted in UK national practice and policy frameworks. National policy frameworks are increasingly promoting reablement approaches as these enable service users to 'quickly' regain their independence using cost effective techniques with health and social care practices.

Reablement represents a cultural shift in care approaches, emphasizing 'doing with' rather than 'doing for', to empower service users to quickly regain their independence. The reablement service is offered 'free of charge' following an initial assessment, as a short-term (maximum of 6 weeks) intervention that seeks to maximize the person's independent daily living skills.

A council in the Northeast of England launched its reablement service in 2010 and drew staff from the well-established long-term domiciliary care service. The selected paid carers attend regular specific training involving input from both occupational and physiotherapists to facilitate the cultural shift in working practice.

Northumbria University undertook a qualitative evaluation of the reablement service, which involved 22 service users, 8 managers and 40 council paid carers. This presentation will focus upon the views and reported impact of reablement on paid carers regarding the culture shift in practice.

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**Stream:** Health, Wellbeing and Care

**Date:** Thursday 12 July 2012 **Time:** 08:40–10:20

**Abstract ID:** 167

**Title:** Measuring performance in intermediate care: just a pipe dream?

**Method:** Oral

**Author:** Naomi Jayanetti

**Institution:** University of Southampton

Since the National Service Framework for Older People was created in 2001, intermediate care as a concept has become widespread in varied service models and settings. Over a similar period, the requirement of health and social care services to demonstrate their accountability and effectiveness has also risen. However, the diversity in models of intermediate care, which is its strength in addressing the needs of older people, has hindered attempts to create a robust evidence base for its efficacy.

This study uses quantitative and qualitative techniques to evaluate the process of early supported discharge by an intermediate care service in Dorset. A thorough evaluation was conducted using literature review, quantitative analysis of activity (n=47), piloting of a pro forma to collect data on outcomes and qualitative interviews with patients, carers and staff (n=19).

The author reports on the outcomes achieved by this intermediate care service, and reflects on the process of service evaluation. No evidence of excessive adverse events in those discharged with support from intermediate care was found, while there was an association between the provision of support and a lower rate of hospital readmission within 30 days of discharge. Patient and carer satisfaction with the service was generally high, although patients expressed concerns that they were discharged too early from hospital.

The author concludes that performance measurement in intermediate care is feasible and useful, although more practical methods of applying it could be explored, such as computerized data collection software and postal satisfaction surveys.

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**Stream:** Health, Wellbeing and Care

**Date:** Thursday 12 July 2012 **Time:** 08:40–10:20

**Abstract ID:** 171

**Title:** The temporal and spatial nature of falls in acute mental health settings

**Method:** Oral

**Author:** Angela Dickinson

**Institution:** University of Hertfordshire

**Co-authors:**

Charles Simpson

Venkat Narayanan

Christina Victor

Deborah Humphrey

Caroline Griffiths

**Introduction:** Falls are the most commonly reported patient-safety incident in mental health settings for older people with approximately 36,000 falls reported from these settings per year. Risk of falling is exacerbated by mental health problems, such as impaired mental status due to dementia and depression, and their treatments. However, we have very little understanding of either the context or best way to prevent falls in these settings. This paper will present phase 1 findings from a mixed-methods exploratory case study.

**Methods:** Methods included retrospective analysis of reported falls for a 12 month period, non-participatory observation (300+ hours), focus-groups with staff (n=5) and interviews with senior managers (n=6).

**Findings:** We will use the data to explore the temporal and spatial nature of falls within 5 acute mental health settings. We found falls were not evenly distributed across the course of the day, with peaks occurring in the morning, and early afternoon. Staff reflections on this data during focus group discussions, and our observations of the temporally-determined flow of activity and use of space by staff, patients and visitors to the ward have enabled us to understand some of the patterns and possible factors that contribute to falls in these settings.

**Conclusions:** Use of routinely collected data, enhanced by staff reflection and observation can aid understanding of factors contributing to falls in acute mental health settings. Data of this nature could be used by organizations seeking to manage risk, improve patient safety, and develop appropriate interventions.

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**Stream:** Health, Wellbeing and Care

**Date:** Thursday 12 July 2012 **Time:** 14:00–15:40

**Abstract ID:** 237

**Title:** Free to care? Contextual influences on caregiving

**Method:** Symposium

**Author:** Jan Oyeboode

**Institution:** University of Birmingham

**Co-authors:**

Hareth Al-Janabi

Fiona Carmichael

Karan Jutlla

Jo Ward-Brown

Amy Elliott

Gerry Riley

**Chair:** Jan Oyeboode

This symposium draws together recent research that sheds light on the full complexity of caring, recognizing that tasks are embedded in personal, relational and societal contexts. The first paper (Al-Janabi et al.) sets the scene by presenting an analysis of data on motivations for caregiving, focused on perceived free choice vs constraint. The following papers each explore particular influences on caring for a relative with dementia – Karan Jutlla's biographically based study considers cultural influences; Jo Ward-Brown's IPA study presents analysis of how life-long relationships daughters have with their mothers impact on caring; and Amy Elliott uses questionnaires to explore whether early life experiences (evidenced by attachment style) connect with carers' sense of continuity in the relationship with the cared-for.

**Is informal care a free choice? A study of UK carers' motives and wellbeing**

Hareth Al-Janabi, Jan Oyeboode, Fiona Carmichael

There is little empirical study of carers' motives. We set out to investigate whether caring was perceived to be a free choice. We examined data collected on the quality of life and caring role of 5000+ people in a UK city. Around 80% stated that caring was a free choice, with half also constrained in their decision by money, a lack of social support or duty. Contextual characteristics did not predict whether caring was a free choice, but free choice was strongly associated with elevated levels of wellbeing. We conclude that freely entering into a caring role seems to provide an important boost to wellbeing and thus appears to warrant further study.

**A qualitative study of the experiences of Sikh carers of people with dementia in Wolverhampton – cultural norms and positions in the family**

Karan Jutlla

Whilst the evidence of barriers in service provision for Asian carers is relatively well rehearsed, there is less understanding about why these barriers exist. Taking a biographical approach, this study explored how migration and personal histories influence experiences of care amongst Sikh carers in Wolverhampton. My findings highlight how being part of a migrant community impacts on experiences of caring, revealing, for example, that cultural norms about gendered roles and positions in the family often resulted in carers' initial refusal of formal support from services. Participants' experiences were dependent upon their complex (re)positioning between the role of carer and their relational role to the cared-for person.



## **The influence of daughters' earlier relationships with their mothers on the dementia caregiving relationship**

Jo Ward-Brown, Gerry Riley, Jan Oyebode

For daughters caring for a mother with dementia, caregiving takes place in the context of a lifelong relationship in which the mother was previously a dominant force as a controlling or nurturing figure. In this study we explored the subjective experiences and meanings that daughters give to their relationship with their mother before dementia developed and how they understand relationship changes after the development of dementia. Five adult daughters were interviewed about their relationships prior to and since the development of dementia. Emergent themes reflect complex connections between past and present, highlighting issues of power and control, and demonstrating how the past overshadows the current caregiving relationship.

## **The connection between dementia carers' attachment security and their perceptions of the caring relationship**

Amy Elliott, Jan Oyebode, Gerry Riley

Some spouses caring for a partner with dementia maintain a sense of continuity of the relationship and the person with dementia, whereas others feel they have lost the person and their relationship. The concept of attachment may help to explain why some couples experience discontinuity while others maintain a meaningful sense of connection.

We used questionnaires to explore the relationship between attachment and perceived continuity. We conclude that there may be interplay between aspects of anxious attachment and degree of perceived continuity, with this relationship being stronger after the initial period post-diagnosis. Encouraging perceived continuity might reduce preoccupation with the relationship and engender lower attachment anxiety in caregivers.

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**Stream:** Health, Wellbeing and Care

**Date:** Thursday 12 July 2012 **Time:** 14:00–15:40

**Abstract ID:** 221

**Title:** Measuring outcomes in care homes using ASCOT

**Method:** Oral

**Author:** Nick Smith

**Institution:** PSSRU/QORU

**Co-authors:**

Ann-Marie Towers

Ann Netten

Julie Beadle-Brown

The Adult Social Care Outcomes Toolkit (ASCOT) is a set of tools for measuring outcomes in social care. These tools can be used across a wide range of user groups and care and support settings. The toolkit contains a multi-method version designed specifically for use in residential settings (CH3). Developed as part of the Measuring Outcomes for Public Services Users project (MOPSU), CH3 combines structured observation alongside interviews with service users, relatives and staff in order to measure service users' outcomes in a context where many service users would struggle with the highly structured survey format. This paper will outline both the development and the key features of CH3, before going on to look at how it has been used by a variety of organizations in the two years since it became publically available. Feedback and consultations with existing users has informed our thinking for future developments of the toolkit. We conclude by outlining our plans for the future, including adapting the tool for local authority quality monitoring purposes, revisiting the proxy interviews and developing a more qualitative interview for service users.

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**Stream:** Health, Wellbeing and Care

**Date:** Thursday 12 July 2012 **Time:** 14:00–15:40

**Abstract ID:** 75

**Title:** The Older People's Commissioner for Wales' review of the advocacy arrangements for older people in care homes in Wales, UK

**Method:** Oral

**Author:** Sarah Stone

**Institution:** Older People's Commission for Wales

**Co-authors:**

Christian Beech  
Joanna Stevens

This paper reports on the current review of advocacy arrangements for older people who live in care homes in Wales by the Older People's Commissioner for Wales. The Commissioner, an independent public body set up to safeguard the interests of older people in Wales, has the power to review arrangements for advocacy, through powers and functions derived from Section 5 of the Commissioner for Older People (Wales) Act 2006.

The purpose of the review is to explore whether existing advocacy arrangements in care homes are effective in safeguarding the interests and rights of residents. The Commissioner can require a prescribed person to provide information for the purpose of reviewing advocacy arrangements, and has the power to enter premises, other than private dwellings, to interview an older person, with their consent.

Information was sought from a range of public bodies and care homes in relation to their existing advocacy provision. In-depth interviews were conducted with residents, relatives, managers and staff of care homes to explore people's understanding and experiences of advocacy in care settings. The Commissioner will prepare a report setting out her findings, conclusions and recommendations.

Emerging themes from the data suggest that a more robust understanding of advocacy is needed. Advocacy is being arbitrarily defined, leading to confusion and fragmentation in commissioning and delivery of services. Also of concern is the lack of consistency in monitoring and assessing the efficacy of existing advocacy services in care homes and where the responsibility for this scrutiny should be located.

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**Stream:** Health, Wellbeing and Care

**Date:** Thursday 12 July 2012 **Time:** 14:00–15:40

**Abstract ID:** 233

**Title:** Managing and administering medication in care homes for older people

**Method:** Oral

**Author:** Nat Lievesley

**Institution:** Centre for Policy on Ageing

As part of the 'Integrated approach to medication in care homes' project, funded by the Department of Health (England), the Centre for Policy on Ageing produced a report on Managing and administering medication in care homes for older people.

Older people in care homes are among the most vulnerable members of our society, reliant on care home staff for many of their everyday needs. A combination of complex medical conditions may lead to multiple medications with care home residents taking 7-8 medications on average. This 'polypharmacy' in turn increases the risk of medication error. Medication errors may occur as a result of a failure in prescribing, dispensing, administering or monitoring medication.

The principle of the 5Rs of correct medication administration in care homes remains sound, right resident, right medication and right dose by the right route at the right time. In addition, the welfare and rights of the older person receiving medication have to remain at the heart of the process.

The Care Homes Use of Medicines (CHUMS) study observed that errors occur on 8.4% of medication administration events. That would mean that a care home resident being administered medication three times a day would be 99.9% certain to receive at least one medication administration error every month.

This presentation focuses on the administering of medication in care homes, the prevalence of error, common causes and how these can be addressed through simple low cost changes in practice, appropriate training and more substantive changes in care home systems.

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**Stream:** Health, Wellbeing and Care

**Date:** Thursday 12 July 2012 **Time:** 14:00–15:40

**Abstract ID:** 8

**Title:** Hearing in residential care settings

**Method:** Oral

**Author:** Helen Pryce

**Institution:** Centre for Hearing and Balance Studies, University of Bristol

**Co-author:** Rachael Gooberman-Hill

Hearing loss is a common experience in older age. In residential care settings as many as 90% of residents experience hearing loss and so it is an experience that directly influences communication and subsequent opportunities to interact socially and to develop relationships. This paper presents findings from a study of the impact of hearing on communication in residential care settings in Bath. An observational ethnographic approach was taken to examine day to day communication, including structured and unstructured activities and mealtimes. These observations were supplemented by in depth interviews with residents and staff, which explored their views about hearing and communication. We identified that social and contextual factors influence the impact of hearing loss. Hearing loss is one part of a communication difficulty in which behaviours and background noise also have an influential role in determining opportunity to participate in day to day communication. To address the access problems incurred with hearing loss requires adjusting levels of background noise and communication behaviours, not simply provision of hearing tests and hearing aids.

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**Stream:** Health, Wellbeing and Care

**Date:** Thursday 12 July 2012 **Time:** 14:00–15:40

**Abstract ID:** 202

**Title:** The senses at night: an insight into English care home residents experiences

**Method:** Oral

**Author:** Ingrid Evers

**Institution:** University of Vechta

This paper presents an in-depth study of care home life at night and evaluates residents' sense of security, belonging, continuity, purpose, achievement and the significance of care experienced during the night. In 10 care homes quantitative and qualitative data were collected from 183 residents aged 65-100. For a period of two weeks diaries denoting residents' daily life were maintained and interviews were conducted with 10 managers and 30 care staff employed in the sampled homes. To gain a deeper insight into care home life 240 hours of observational data were collected with an emphasis on the time from 6 p.m. to 8 a.m.

The findings indicate a discrepancy between night staffs perception of sleep and residents actual experience of sleep. Regular surveillance undertaken by care staff within the context of a duty to care, and intending to facilitate the sense of security, is in conflict with residents need to experience restorative sleep in order to function cognitively and physically the following day.

The significance of sleep and its role within the context of an individual's wellbeing during both night and day is not fully appreciated within care homes. These findings exemplify the need for service providers to consider the role of the senses at night, in order to facilitate restorative sleep that can be expected to have a positive impact on a residents day time abilities.

This research is supported by the New Dynamics of Ageing initiative, a multidisciplinary research programme funded by AHRC, BBSRC, EPSRC, ESRC and MRC (RES-339-25-0009)

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**Stream:** Health, Wellbeing and Care

**Date:** Thursday 12 July 2012 **Time:** 16:40–18:00

**Abstract ID:** 148

**Title:** Conducting health care research with care homes: three sides of the same story – care home, researcher and primary health care perspectives.

**Method:** Symposium

**Author:** Sue Davies

**Institution:** CRIPACC

**Co-authors:**

Sarah Amador  
Christina Victor  
Claire Goodman  
Angela Dickinson  
Helen Masey  
Steve Iliffe

**Chair:** Sue Davies

Care homes play a vital role in the provision of care and support to older people and are an increasing focus for future research. These papers give three different perspectives on research in care homes, from the researcher, care home staff and residents, and health care professionals.

**The ENRICH network of research enabled care homes**

Dementia treatment and care has been the focus of much recent policy and research. Around 250,000 people with dementia live in care homes but little research takes place in this setting. Networks of research care homes have been proposed to improve care, share expertise, raise standards, develop staff and facilitate recruitment in care homes (Ministerial Advisory Group on Dementia Research 2009). DeNDRoN (Dementia and Neurodegenerative Diseases Research Network) has led on an initiative to develop a care home research website and is also supporting the development of a network of research enabled care homes.

ENRICH aims to increase access to people resident in care homes, to augment the amount and quality of care home research; provide information and support, and improve their links with researchers.

Phase one will map the level and nature of care home involvement in research. In phase two, four local DeNDRoN research networks will identify and recruit at least 10 care homes to the Enrich network for a period of six months. The evaluation will focus on the costs and process of setting up the network and its impact on recruitment.

The discussion will highlight challenges and rewards of a network of research care homes and the implications for future research.

**Promoting collaborative working between care homes and health care professionals for end-of-life in dementia**

Most care homes that provide long-term care to older people with dementia (OPWD) have no on-site registered nursing. Care home staff and visiting health care professionals (HCP) have to negotiate how they provide end of life (EOL) care and in particular how to support the transition from living with to dying with or from dementia.

A two-phased study tracked the events and care experienced by 133 OPWD living in six residential care homes over 12 months. Results showed that 15-20% of the residents died each year. Even with access to EOL support

tools, dealing with uncertainty and shared decision making were key issues for care home staff and visiting HCPs. Three care homes participated in the intervention phase, a participatory research approach that engaged participants, recognized their capabilities and knowledge, and led to the co-development of collaborative tools and practice for EOL care.

We will present findings and discuss wider applicability of participatory research in care homes involving visiting HCPs.

### **Including the voices of residents, relatives and staff in care home research: the APPROACH project**

Much research in care homes focuses on resident's health and social care needs; evaluation of specific interventions or the nature of the care home work force; resident's, relative's and staff perspectives are rarely heard. APPROACH was a three year NIHR SDO funded study on integrated working between care homes and primary care\*.

Thirty nine residents across 6 care homes were followed for a year to record the services they received and their perception of them. Data collection included care home notes reviews (n=127), face to face interviews with residents (n=87), care home staff (n=31), NHS and social care staff (n=38) involved in their care, and relatives (n=4).

Care home staff had extensive knowledge about resident's needs, not always recognized by NHS staff; residents expected care home staff to act as their mediators when dealing with primary health care staff. These perspectives will be linked with those of primary care staff to explore these differing narratives and illustrate the resonances and, dissonances between them.

The findings indicate the importance of including the voice of residents, their families and the care home staff in care home research. This paper will discuss the findings and their implications for designing and conducting care home research.

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**Stream:** Health, Wellbeing and Care

**Date:** Thursday 12 July 2012 **Time:** 16:40–18:00

**Abstract ID:** 197

**Title:** Teamwork amongst care home staff and responses to challenging situations

**Method:** Oral

**Author:** Rebekah Luff

**Institution:** University of Southampton

This paper examines the way in which care staff in care homes for older people work together on a shift, usually in pairs. Building on current literature and drawing on qualitative examples, the way in which effective or poor teamwork can impact on some of the more challenging care situations with residents is examined.

Semi-structured interviews were conducted with 36 care assistants across 5 residential care homes in the South of England. The interviews were analysed using an interpretative approach to understand the perspectives of the care staff.

Care staff were readily able to identify negative attributes of some of their colleagues. These included laziness, poor care provision, critical communication styles and also language or culture barriers. It was found that when staff worked well together they felt able to ask for help or support and to admit to struggling with a resident. They did not have to cope alone in challenging situations and these situations were therefore less likely to escalate. In contrast, where there was little or no perceived teamwork, staff dealt with emotional and physical challenges alone, potentially having a negative effect on the outcome for both the resident and the staff member.

The paper concludes that while teamwork is often a buzzword within organizations, within care homes, effective teamwork between pairs of care staff on duty both reduces the incidence of excessive emotional labour and provides emotional support to staff, which may then enable them to provide a better quality of care to the resident.

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**Stream:** Health, Wellbeing and Care

**Date:** Thursday 12 July 2012 **Time:** 16:40–18:00

**Abstract ID:** 63

**Title:** Improving the fairness and sustainability of the care home funding system in England

**Method:** Oral

**Author:** Kate Thompson

**Institution:** University of Southampton

The current care home funding system is unfair, and is subject to a high level of political debate at present. In this paper the current care home funding system in England is critically reviewed using evidence from academic literature, policy documents, and independent reviews. Specifically, the reports of the Law Commission and the Commission on Funding of Care and Support (the Dilnot report), as well as the recently published report on social care by the House of Commons Health Committee are used to highlight current inequalities within the system and how these could be improved or exacerbated under the recently proposed systems.

The current system ensures that social care is free to the poorest within the population, with the greatest care needs. However, there are many criticisms relating to care home funding including inconsistent eligibility criteria, inadequate fees paid by local authorities, and inequalities existing between publicly funded and self-funding older people, single people and couples, men and women, and those with differing care needs.

The proposals within these recent reports are encouraging, and the Government White Paper is eagerly awaited. However, this paper concludes that a stronger partnership is required between individuals, their families, health and social care professionals, local authorities and the Government in order to produce a more equitable and sustainable funding system. Greater integration between health and social care is crucial if the system is to be made fairer for all.

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**Stream:** Health, Wellbeing and Care

**Date:** Thursday 12 July 2012 **Time:** 16:40–18:00

**Abstract ID:** 183

**Title:** The closure of care homes for older people in Wales: recommendations and amendments to statutory guidance on managing escalating concerns with, and closures of care homes for older people.

**Method:** Oral

**Author:** Christian Beech

**Institution:** Swansea University

**Co-authors:**

Vanessa Burholt

Judith Phillips

Care home closure is an emotive topic often the subject of media coverage and commonly believed to have an impact on the health and mortality of older residents. In 2009, the Welsh Government (WG) published guidelines entitled 'Escalating Concerns with, and Closures of, Care Homes Providing Services for Older Adults'. This paper will report on findings from the study, The Closure of Care Homes for Older People in Wales: Prevalence, Process and Impact, which recommends a series of amendments to the existing statutory guidance in Wales that addresses the management of (1) escalating concerns with, and (2) closures of care homes. These recommendations aim to clarify the responsibilities of health and social care agencies and offer principles of good practice in the event of care home closures to reduce the effects poor support and relocation planning have on older people who live in care homes. This study used mixed methods including case studies and in-depth interviews with older residents; relatives; care home providers and managers; and care staff during the closure of care homes, and in care homes saved from closure. In addition, secondary analysis of CSSIW (Care and Social Services Inspectorate Wales) data supplemented with telephone interviews with CSSIW inspectors and managers of care homes that have closed were used to better understand the complex reasons and circumstances surrounding the closure of care homes.

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**Stream:** Health, Wellbeing and Care

**Date:** Thursday 12 July 2012 **Time:** 16:40–18:00

**Abstract ID:** 246

**Title:** It's a scandal! Comparing the causes and consequences of public outrage over conditions in care homes in five national settings

**Method:** Oral

**Author:** Liz Lloyd

**Institution:** University of Bristol

**Co-authors:**

Albert Banerjee

Frode Fadnes-Jacobsen

Charlene Harrington

Marta Szebehely

In recent years episodes of public outrage over care homes for older people have emerged in a range of different welfare systems. Drawing on on-going research based in Canada (Re-imagining Long Term Care: An International Study of Promising Practices) this paper compares recent scandals concerning care homes for older people in England, the USA, Canada, Sweden and Norway. These scandals developed from exposures of financial irregularities as well as violations of the law and abusive and undignified practices directed at staff and residents. Comparing the processes of the scandals within different cultural and policy contexts highlights a number of important lessons for the study of ageing and the provision of support for older people who live in care homes. Key issues concern the influence of international trends in the ownership and financing, changes in the regulation of care home industries and trends in conditions of employment and staff training. The paper explores the impact scandals have on public awareness, on policies and practices in care and how these are affected by the exposure of bad practice. An important question for the study of ageing concerns the longer term consequences of such episodes and the potential for fundamental change in care homes.

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**Stream:** Health, Wellbeing and Care

**Date:** Thursday 12 July 2012 **Time:** 16:40–18:00

**Abstract ID:** 29

**Title:** Our invisible addicts – a report of the Royal College of Psychiatrists

**Method:** Oral

**Author:** Ilana Crome

**Institution:** Keele University

**Co-authors:**

Tony Rao

Andrew Tarbuck

Karim Dar

Stefan Janikiewicz

The presentation will outline key aspects in the 2011 Report of the Royal College of Psychiatrists on Substance Misuse and Older People. The objectives were to examine the extent of the problem, identify precipitants and complications, highlight best practice guidance, explore training opportunities and develop future strategic developments in clinical treatments, service developments, policy and research. The report produced an enormous reaction from the profession and the media, the latter focusing largely on safe limits for alcohol consumption. The findings demonstrated that national surveys of consumption of alcohol and drugs, presentations to specialist services and hospital admissions identified increasing prevalence of substance misuse (alcohol, illicit drugs, prescribed medications) in older people, with projected doubling in the next two decades. It drew attention to the fact that although impressive strides had been made in improving treatment for substance misusers, older people had not received the appropriate level of attention compared with young and adult substance misusers. Furthermore, in order for treatment programmes to be implemented, practitioners need to be trained to assess and screen older people, while the public need to be made aware of the problem and seek help. The effectiveness of treatment in this group was underlined, thereby dispelling the myth that older people were unlikely to benefit. Indeed, older people might do better than their younger counterparts. Finally, since it called for better coordination of older people's mental health, addiction and geriatric services, underpinned by dedicated research funding, this neglected topic is likely to generate debate.

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**Stream:** Health, Wellbeing and Care

**Date:** Thursday 12 July 2012 **Time:** 16:40–18:00

**Abstract ID:** 120

**Title:** Living together with age related macular degeneration: an interpretative phenomenological analysis

**Method:** Oral

**Author:** Amy Bennion

**Institution:** Aston University

**Co-authors:**

Rachel Shaw

Jonathan Gibson

Elizabeth Peel

Age related macular degeneration (AMD) is the leading cause of registerable blindness in the UK. AMD is a progressive disease that leads to deterioration in central vision. The prevalence of AMD in older people is high; 8% of over the 65s have AMD, with this percentage increasing with age.

Most qualitative research focuses on individuals; while this has benefits for the development of high quality in-depth data there are inherent limitations. Disability is a shared experience influenced by multiple perspectives, such as the interaction between spouses. The present study explored the unique experience of a married couple living together with AMD. We present a case study of an 82-year-old man with advanced, untreatable wet AMD, and a 77 year old woman with dry AMD. This case study is part of a wider mixed methods project investigating the experience of living with AMD.

Interpretative Phenomenological analysis was employed and elicited three themes: 1) living together with AMD (sharing the load, living half a life, and relationship strains); 2) making sense of diagnosis (conflicting experiences, confusion about cause, and registering as partially sighted); and 3) the future with AMD (other health problems, and living alone). These findings provide a greater understanding of how AMD is experienced by a couple living together and highlights that disability in old age does not occur in isolation. Clinicians therefore need to acknowledge patients life contexts and relationships when discussing care decisions.

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**Stream:** Health, Wellbeing and Care

**Date:** Thursday 12 July 2012 **Time:** 16:40–18:00

**Abstract ID:** 229

**Title:** Age is no barrier to the expertise of stroke survivors

**Method:** Oral

**Author:** Kathleen Lane

**Institution:** University of East Anglia

**Co-author:** Simon Horton

SCIP-R (Supported Communication to Improve Participation in Rehabilitation) is a NIHR-funded Phase II Clinical Trial investigating the efficacy of an intervention to support the recovery of stroke patients who have aphasia. Central to the development of the research intervention has been the inclusion of stakeholder views, involving service users with aphasia and hospital staff (nursing, therapy and other staff). The perceptions of different stakeholder groups can offer important information for identifying potential areas for improvement in care quality. For example, it has been argued that young stroke survivors have particular needs compared with older patients.

This paper will discuss methods used for incorporating the views of service users (both younger and older stroke survivors with aphasia) and of nursing and therapy staff who work with older people in the rehabilitation stage after a stroke. Inclusion of the views of stakeholders and staff in the development of the intervention is a distinctive feature of SCIP-R; the challenges and benefits of this strategy will be examined. Findings to be discussed include: i) the construction of group identity and (expert) roles among stroke survivors in terms of common experiences of stroke (e.g., personal factors such as frustration, isolation) and stroke services (e.g., staff skills) rather than age differences; ii) hospital staff perceptions of stroke and aphasia in terms of staff training needs and stroke survivors' functional limitations without reference to age.

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**Stream:** Health, Wellbeing and Care

**Date:** Thursday 12 July 2012 **Time:** 16:40–18:00

**Abstract ID:** 223

**Title:** Getting evidence into practice: an intervention to optimize primary care professionals' use of evidence based care for chronic obstructive pulmonary disease (COPD).

**Method:** Oral

**Author:** Roger Beech

**Institution:** Keele University

**Co-authors:**

Rosemary Piggott

Faye Foster

COPD is the second largest cause of emergency hospital admissions in the UK. Its prevalence and impacts in terms of excess morbidity and mortality are highest amongst socio-economically deprived populations. Many individuals with COPD are elderly with multimorbidity so face the challenge of managing cumulative effects of their illnesses. Improving care for COPD is a national priority and a pressing problem in Stoke and North Staffordshire. Stoke has high levels of social deprivation and around 7000 individuals with COPD; 70% of whom have at least one comorbidity and 31% at least one hospital admission for COPD per year.

We have developed an innovative training programme to support the use of evidence based care for COPD by 'primary care teams'. Unlike previous initiatives, which focused primarily on changing patient behaviour, our initiative focuses on generating behavioural change amongst professionals, who in turn will be given additional skills to help them bring about behavioural change amongst their patients and professional colleagues. To facilitate this process some training sessions actively involve COPD patients and carers.

Training is being delivered to teams from 15 Primary Care Practices from Stoke and North Staffordshire. To assess its impact, within each Practice quantitative evaluation will monitor changes in care delivery processes and hospital admission rates. Qualitative assessment of "whether" the training works will assess the ability of staff to use the content of the training in everyday practice, whilst assessment of "how" it works will document factors that facilitate or constrain adoption of good practice.

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**Stream:** Health, Wellbeing and Care

**Date:** Friday 13 July 2012 **Time:** 08:40–10:00

**Abstract ID:** 268

**Title:** Social care, who cares?

**Method:** Symposium

**Author:** James Goodwin

**Institution:** Age UK

**Co-authors:**

Matthew Norton

Jose Iparraguirre

**Chair:** James Goodwin

Social care is not fit for purpose. Many of those who need help and support do not get high-quality services, while others who are in significant need are being left to fend for themselves. Two widely anticipated reports setting out proposals for care reform have been published: the Law Commission on the legislative framework for care and the Commission on Funding of Care and Support led by Andrew Dilnot (the Dilnot Commission). This symposium will examine data from economic modelling and government statistics to examine the financial crisis in social care and the Government's response to this in the forthcoming White Paper.

**Paper 1**

Matthew Norton, Age UK

Care and support for people in later life has reached financial crisis. The system has been starved of cash and the numbers of people requiring care and support is rising. This paper will examine historical data to explore the historical funding of social care and attempt to explain the problems that have led to the current crisis. It will examine:

1. Historical funding, including impact of the current deficit reduction programme
2. Changes in demand for social care
3. Impact on local councils and older people

It will then use analysis of data from the PSSRU dynamic micro-simulation model, which examines demand for social care services, to examine future funding implications. These will be analysed in the context of the White Paper published in the spring of 2012.

**Paper 2**

Jose Iparraguirre, Chief Economist, Age UK

This paper examines the relationship between social care spending and service provision by looking into the social care provision in local authorities with Adult Social Services Responsibilities in England. It uses data from the NHS-IC and DCLG to run pooled OLS regression models, fixed-effects and random-effects models. The services included in this paper comprise the following services – and only to people aged 65 and over: residential and nursing homes, home care, day care, and community meals. These services account for about 80 per cent of total gross current social care expenditure on people aged 65 and over. The paper will attempt to answer a number of key questions:

1. Is social care spending related to the amount of social care services provided?
2. Are budget cuts in social care reflected in reductions in service provision?

3. Would the volume of care services provided increase if more money were spent in the sector by local authorities?

The paper presents the results of the econometric modelling and will explore some of the potential reasons for the results.

### **Paper 3: Policy and practice implications**

Speaker tbc (either Age UK Policy Adviser/academic/Policy Analyst)

This paper will reflect on the findings from the previous two papers and explore policy implications of the crisis in social care – examining the impact of various scenarios on older people. It will explore the options for reform going forward, comparing those set out in the Social Care White Paper with other options for reform.

It will also explore the funding options – analysing potential revenue streams and outlining how much revenue each is likely to raise.

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**Stream:** Health, Wellbeing and Care

**Date:** Friday 13 July 2012 **Time:** 08:40–10:00

**Abstract ID:** 114

**Title:** What is the role of holistic spirituality in positive ageing and health?

**Method:** Symposium

**Author:** Anthony Chiva

**Institution:** Chiva Associates, Life Academy and School of Insight and Intuition

The paper will detail and explore the multiple ways/routes by which spiritual energetics can be used to promote positive ageing and health.

This will include the main ways of accessing and using spiritual energy for health. This paper builds and integrates the work of such authors as Deepak Chopra, Anodea Judith, William Bloom, and Barbara Anne Brennan.

The session will involve lecture, discussion and short accessible practical activities.

Initially, the human energy system will be described. Including the main elements and the ways these relate to each other. Particular elements of the human energy system will be considered in more detail in relation to enhancing health.

Important aspects like: the role of the blue print of health; the energetic fields around the body, and the energy centers within the body, will be discussed.

Ways to positively use and apply this understanding will be illustrated. Practical ways to harness energy, manage emotional blocks and barriers to health will be demonstrated, including the use of meditations, visualizations, and psycho-neuro-immunity such as endorphinating. The practice of safe and secure integrative approaches will be identified and discussed.

By the end of the paper participants will be able to:

- describe and apply energy of spirit for their own positive ageing
- experienced several ways to harness holistic spirituality for personal healing and health gain
- more deeply appreciate the role of spiritual energetics in health and positive ageing

**Stream:** Health, Wellbeing and Care

**Date:** Friday 13 July 2012 **Time:** 08:40–10:00

**Abstract ID:** 100

**Title:** Preparing for end of life among Manchester Chinese community

**Method:** Oral

**Author:** Louise Yuen Ming Wong

**Institution:** Wai Yin Chinese Women's Society

**Co-authors:**

Mei Lan Fang

Judith Sixsmith

Sandy Lo

End of life care requires attention to mental health, religious practices and beliefs and health care systems and supports to help individuals cope with bereavement. To date, there is limited research examining end of life care and the needs of ethnic minority populations in the UK. Understanding end of life care expectations in relation to these groups is important for informing the development of new health policy and service initiatives. As such, the purpose of this study is to explore the mental health, religious practices and beliefs and any services and support systems needed by this community to cope with end of life care and bereavement. This project was conducted in collaboration with the Wai Yin Chinese Women's Society in Manchester, UK. Fourteen semi-structured in-depth interviews were conducted with a group of Chinese migrants – primarily women working within the margins of UK's formal economy. The participants were recruited as a part of Wai Yin's Sunshine Project, which aimed to train Chinese migrants to improve their knowledge of employment and immigration rights and language skills to enable them to access support services. Preliminary themes from the transcribed data include: the notion that cremation differs between the two countries (where cremation is the law in China); the importance of filial duty and end of life care in the next generation; and the comfort and security of coping with end of life within the intimate care relationship.

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**Stream:** Health, Wellbeing and Care

**Date:** Friday 13 July 2012 **Time:** 08:40–10:00

**Abstract ID:** 161

**Title:** Place of death and space for death? End-of-life-care for the dying older patient and their older loved ones.

**Method:** Oral

**Author:** Christine Dobbs

**Institution:** Swansea University

This paper presents findings that are part of a larger study in urban and rural Wales (n=73) comprising semi-structured, one-to-one interviews, consultation workshops implementing Nominal Group Technique, and summative consultation workshops where road-maps for change were developed. Specifically we present experiences, challenges and wishes articulated by older people, clinical staff, spiritual mentors operating within and outside of the NHS and policy-makers and –influencers (e.g. HB members, NGOs and RCN representatives).

Firstly and briefly we challenge the assumption that the preferred place of death for the older person is in the home setting. We demonstrate how policies and procedures may hinder the discharge to home *and* the admission to hospital, where both issues are exacerbated by the problems that rural health-care delivery poses.

Secondly and in more depth we question fundamentally the degree to which health-care decision-makers and management understand the difference and interaction between space (the physical environment; public or private) and place (the meaning attached to that space) (Harrison & Dourish, 1997). For the patient and loved ones, space can mean freedom (or lack of) and place security (or insecurity). For staff, the ward may be the work place and work space. We also argue that space must be provided culturally in order to stop the disenfranchisement of grief and loss.

Finally, we stress the tenets of upholding dignity, privacy and respect, not least for the bereaved and their continuing journey of grief. Indeed, *'how people die remains in the memory of those who live on'* (Dame Cicely Saunders).

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**Stream:** Health, Wellbeing and Care

**Date:** Friday 13 July 2012 **Time:** 08:40–10:00

**Abstract ID:** 65

**Title:** Morale and spirituality in care homes in the UK and NZ: analysis of interviews collected using questionnaires

**Method:** Oral

**Author:** Kay de Vries

**Institution:** Graduate School of Nursing Midwifery and Health, Victoria University of Wellington

**Co-authors:**

Vasso Vydelingum

Carol Leppa

Analysis of audio-recorded interviews of administration of two questionnaires: the Philadelphia Geriatric Morale Scale (PGCMS); and the WHOQOL Spirituality, Religiousness and Personal Beliefs (SRPB) Importance Scale, was conducted with 14 residents in care home facilities in UK and NZ. Two aspects were examined: 1) discourse analysis was conducted following Hanneke Houtkoop-Streenstra's approaches; and 2) analysis of the narrative that occurred during questionnaire administration was carried out. The results show that: 1) the interviewer reformulated questions when respondents failed to understand the question or purpose of the question, which raises questions of validity; and 2) questions about morale and spirituality create a milieu for residents to openly express emotions about being old, potential dying and living in an institution. Furthermore, it was observed that the mood of some residents was progressively lowered as a result of a conversation that was based on a series of closed questions.

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**Stream:** Health, Wellbeing and Care

**Date:** Friday 13 July 2012 **Time:** 08:40–10:00

**Abstract ID:** 60

**Title:** Bridging the gap between policy and practice: dignity in care for older people

**Method:** Oral

**Author:** Deborah Cairns

**Institution:** Brunel University

**Co-authors:**

Christina Victor

Veronika Williams

Wendy Martin

David Oliver

Sally Richards

Andree le May

This paper presents the preliminary findings of a thirty month project, funded by the Dunhill Medical Trust. The project aims to explore: (1) how dignified care for older people is understood and delivered by the health and social care workforce and; (2) how organizational structures and policies can promote and facilitate, or hinder, the delivery of dignified care. There has been a growing emphasis on ensuring dignity when caring for older people. However, a wealth of empirical evidence and high profile reports continues to highlight examples in which the practice of dignified care does not occur suggesting there are gaps between policy and practice. This study focuses on NHS Trusts that have been recognized externally as providing dignified care. Data collection is ongoing and consists of a case study approach, using both quantitative (questionnaire survey) and qualitative (interviews and focus groups) methods in a range of settings where older people are cared for. This paper provides preliminary findings from the survey, which explores health and social care staff's understandings and meanings of what dignity is and the key aspects when promoting the delivery of dignified care. Meanings of dignity included: respect, being treated as an individual, being involved in decision making and privacy. Participants rated privacy and being treated as an individual as the most important aspects of dignified care with physical tasks (e.g. direct physical care, helping with meals) attributing much less importance.

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**Stream:** Health, Wellbeing and Care

**Date:** Friday 13 July 2012 **Time:** 10:30–11:30

**Abstract ID:** 205

**Title:** Approaches to screening older people for elder abuse

**Method:** Oral

**Author:** Amanda Phelan

**Institution:** University College Dublin

**Co-authors:**

Margaret Pearl Treacy

Gerard Fealy

Nora Ann Donnelly

There is considerable controversy regarding the topic of elder abuse and many studies have identified barriers to its identification. Elder abuse screening tools may offer a method of identifying older people at risk of abuse or have a greater probability of being subject to abuse. This is particularly relevant in a global ageing population (Economic and Social Research Institute 2009) and in terms of the negative outcomes for older people who are subjected to abuse (Lachs et al. 1998; Lachs et al. 2002; Dong et al. 2009). The first part of this presentation examines the myriad of elder abuse screening tools and identifies which tools may be suitable for particular environments, such as community or acute settings. The use of a standardized, reliable and valid screening tool(s) will facilitate generic understandings and inter-rater reliability, providing adequate training and education is given to the healthcare professionals who use the tool.

The second part of the presentation focuses on current Irish research by the National Centre for the Protection of Older People in relation to piloting of elder abuse screening tools. This research commenced in September 2011 and is due for completion in October 2013.

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**Stream:** Health, Wellbeing and Care

**Date:** Friday 13 July 2012 **Time:** 10:30–11:30

**Abstract ID:** 242

**Title:** Organizational dynamics of respect and elder care

**Method:** Oral

**Author:** Anne Killett

**Institution:** University of East Anglia

**Co-authors:**

Diane Burns

Paula Hyde

Fiona Poland

Richard Gray

Andrea Kenkmann

**Problem:** Mistreatment of older people cared for in care homes is a global and persistent concern that has tended to be examined at the level of individuals. However this focus draws attention away from understandings of how and why mistreatment may arise, despite the best intentions of staff and managers of care homes.

**Aim:** To examine the organizational dynamics associated with abuse, neglect and/or loss of dignity of older people cared for in care homes.

**Research approach:** This study combined participatory research approaches with ethnographic case study. A scoping review informed collection of ethnographic data from a purposive sample of eight care homes in East and North England varying in size and provider type. Comparative case study methodology (Eisendhardt and Graebnor, 2007) was used to examine the organization of care in these homes, focusing on organizational factors, care practices and experiences of providing and receiving care.

**Findings:** Organizational dynamics may include external factors beyond the control of staff and residents and can lead to a) care that is inconsistent at different times or places in a home or b) entrenchment of practices in routines, norms and organizational cultures. Both poor care and good care may remain hidden. Contrastingly interaction of organizational factors can contribute to robust systems responding positively to challenges.

**Implications:** Inspectors, managers and care staff need to better identify institutional abuse and quality assurance processes need to consider organizational dynamics in care homes. A resource to support the identification of organizational dynamics within care homes is proposed.

This paper is based on a research study funded by the Department of Health and Comic Relief. The views expressed in this paper are not necessarily the views of the Department of Health or Comic Relief.

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**Stream:** Health, Wellbeing and Care

**Date:** Friday 13 July 2012 **Time:** 10:30–11:30

**Abstract ID:** 113

**Title:** Mind the gap – improving criminal justice agencies and social support agencies responses to intimate partner violence against older women

**Method:** Oral

**Author:** Bridget Penhale

**Institution:** University of East Anglia

**Co-author:** Bill Goreham

**Context:** This EU-funded (Daphne III programme) study on Intimate Partner Violence (IPV) and Older women includes partners from Austria, Germany, Great Britain, Hungary, Poland, and Portugal. The project is running between March 2011 and March 2013 and addresses the issue of how to improve responses by criminal justice and social support agencies to intimate partner violence against older women. Until now, comparatively little has been known about this issue and this project helps to address that knowledge deficit. This work builds on previous work in this area, specifically a study undertaken between 2009 and 2011.

**Method:** The first phase of the study consisted of analysis of case files held by the police and other criminal justice agencies in each country. Phase two consists of the development of guidance and training material for criminal justice agencies. The final phase consists of the development of guidance and PR and awareness raising material in conjunction with social support agencies.

**Results:** The case file analysis was undertaken in 7 different police forces across England and Wales and 150 cases were analysed across a number of different fields. Likewise the expert workshops with criminal justice and social support agency representatives consisted of representatives from both countries, who contributed to the development of guidance, training and PR materials concerning intimate partner violence and older women. The results of the case file analysis will be presented and work in progress in the subsequent phases of the project will be described and discussed.

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**Stream:** Health, Wellbeing and Care

**Date:** Friday 13 July 2012 **Time:** 10:30–11:30

**Abstract ID:** 83

**Title:** Building resilience in older age: summary of findings of a qualitative project involving 30 older people and carers

**Method:** Oral

**Author:** Goetz Ottmann

**Institution:** Deakin University

What is the meaning of resilience for older people and how do they think resilience can be fostered? This paper addresses this question by drawing on a qualitative research project involving 30 older people and their carers. Based on a preliminary focus group discussion and 30 in depth interviews with older people (aged 60+), this paper provides an overview of how older people define resilience and the strategies they employed to overcome adversity. The paper summarizes the key conceptual domains of resilience that surfaced in this sample and provides an overview of the resilience strategies employed. The paper argues that, beyond the aspirational and moral connotations of the concept, (a) resilience is not only gendered, it also harbours class and cultural meanings that are often glossed over in the research literature; (b) in older age resilience strategies are complex, multi-faceted, personal, and shaped by circumstances encountered over the life course; (c) also, resilience strategies tend to be adversity specific. In addition, the research highlights the resilience-enhancing qualities of environmental support structures that assist research participants to overcome difficult life circumstances. Finally, the paper provides suggestions as to how resilience can be fostered within a social care context.

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**Stream:** Health, Wellbeing and Care

**Date:** Friday 13 July 2012 **Time:** 10:30–11:30

**Abstract ID:** 86

**Title:** Japan's male carers: confronting the realities

**Method:** Oral

**Author:** Utae Mori

**Institution:** Osaka University of Economics (University of Leeds)

Japan enjoys a world-wide reputation of strong family care, in which responsible and dedicated children – predominantly female – care for older relatives within the extended family. Such care is regarded as desirable and cost-effective, a commendable social asset likely to resonate with Britain's Big Society agenda.

In reality, however, the picture is more complex and diverse. This paper will provide a candid and up-to-date picture of Japanese family carers, focusing upon often neglected, yet increasingly 'male' working-age carers. Using in-depth interviews, the paper explores how these carers juggle their caring tasks, paid work and personal lives. It will examine Japan's care reform of 2000 and identify problems – namely an excessive focus on older people living alone and lacking support of family carers. It also explores the resulting social problems created where old people care for other older people, the loss of employment due to caring responsibilities, and so called 'Care-giving Hell'.

It will identify some specific experiences of male working-age carers in the context of Japan's traditions and cultural norms, and associated strong expectations and gender division surrounding the care of older people. The paper is intended to indicate lessons that might be relevant to Britain and other countries.

The paper's findings highlight a marked gender difference in approaches to care, continuing problems in accessing services, the financial, physical and emotional strains of providing care, the inhibitions felt by male carers in a traditionally female dominated role, and the importance of assistance to carers from their employers.

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**Stream:** Health, Wellbeing and Care

**Date:** Friday 13 July 2012 **Time:** 10:30–11:30

**Abstract ID:** 49

**Title:** Round-the-clock carers: who are they and how are they faring?

**Method:** Oral

**Author:** Athina Vlachantoni

**Institution:** Centre for Research on Ageing and ESRC Centre for Population Change

Against the background of public expenditure cuts that threaten the level of support provided to older people and their carers, individuals who provide informal care to another person 'round-the-clock' can risk falling through the net of eligibility for state support, which can impact upon their caring activity. This paper uses data from wave 4 of the English Longitudinal Study of Ageing to explore the characteristics of the under-researched group of round-the-clock-carers in later life, and the extent to which they are disadvantaged compared to other types of carers. The results show that in terms of their health, socio-economic situation and receipt of state support, round-the-clock carers fare worse than other types of carers, raising critical questions about the adequacy of social policy for this group of carers at a time of expenditure cuts.

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**Stream:** New Ageing Populations/New Approaches

**Date:** Wednesday 11 July 2012 **Time:** 14:00–15:40

**Abstract ID:** 77

**Title:** HIV and later life – findings from the HALL study

**Method:** Symposium

**Author:** Dana Rosenfeld

**Institution:** Keele University

**Co-authors:**

Jane Anderson

Valerie Delpech

Damien Ridge

Jose Catalan

Genevieve Von Lob

Memory Sachikonye

**Chair:** Dana Rosenfeld

Largely due to effective medication, the HIV population is ageing. Estimates that by 2015, half of those living with HIV in the west will be aged 50+ reflect the fact that the older HIV-positive population includes both those who entered their 50s having lived with HIV for several years (mainly men who have sex with men, or MSM) and those infected and/or diagnosed later in life. Within this second group, in the UK, 33% are heterosexual men (half of whom are Black African), and 25% are heterosexual women (of whom 68% are Black African), while 40% are MSM, most of whom are White. Thus the HIV population is both growing and rapidly diversifying along lines of age, time spent living with HIV, sexual orientation, ethnicity, and gender.

Drawing on the HALL project's stakeholder interviews, and on focus group, life-history interviews and mental health survey data gathered from 90+ older people living with HIV, the proposed symposium will provide an overview of research into ageing with HIV in general and the HALL study in particular; present some of HALL's research findings; and consider the ethical and methodological challenges of conducting empirical research into, and with the help of, older people living with HIV. We envision the symposium lasting 90 minutes, including 30 minutes for questions and discussion.

**Ageing with HIV: the epidemiological and clinical picture**

Jane Anderson and Valerie Delpech

The ageing and diversifying HIV community faces distinctive health challenges introduced by the complex interplay between ageing, HIV, and the positive and negative effects of medical treatment. Further complicating this medical scenario are late infection (more common among older heterosexuals) and/or late diagnosis (significantly higher for older adults, particularly among women and MSM).

This session outlines the shifting epidemiological and clinical landscape of HIV, with particular attention to the ageing of the HIV community.

## **Ethical and methodological challenges of researching HIV in later life**

Genevieve Von Lob

While ethical and methodological dimensions of research tend to be conceptualized as independent entities, they often overlap in the field.

Given the distinctive sensitivities, history, and challenges experienced by the HIV communities, these overlaps are particularly evident to those engaged in gathering data on the experiences and circumstances of older people living with HIV. This session considers some of these overlaps and what they can tell us about the population being researched.

## **Managing HIV in later life: insights from life history interviews**

Dana Rosenfeld

Complementing the clinical and psychological foci of much related research, life histories of people ageing with HIV illuminate how such deeply social concerns as stigma, privacy and disclosure, romantic and family relationships, and imagined futures shape the lived experience of HIV in later years. This paper considers how the experience, management and impact of the medical and social aspects of HIV are filtered through older persons' histories and circumstances.

## **Ageing with HIV, social context and wellbeing: emerging mental health constructions**

Damien Ridge and Jose Catalan

Preliminary analyses of HALL's qualitative data uncover the distinctive ways in which people living with HIV, and those providing services for them, construct subjective wellbeing. These constructions will be discussed against the background of research into the social-psychological dimensions of ageing with HIV.

## **HIV and ageing from a community perspective**

Memory Sachikonye

Playing an increasingly significant role in shaping and informing research into the lived experiences of e.g. members of local communities, and groups of people living with specific conditions and in certain circumstances, community advisory boards can provide unique insight into these communities and the into best and most ethical ways to engage them in research. This paper considers the experience of research from the perspective of the groups being studied – here, older people living with HIV – and outlines ways in which the priorities of research teams and of the HIV community can be best brought together.

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**Stream:** New Ageing Populations/New Approaches

**Date:** Wednesday 11 July 2012 **Time:** 14:00–15:40

**Abstract ID:** 210

**Title:** Conditioning demand: older people, diversity and thermal experience

**Method:** Symposium

**Author:** Alan Lewis

**Institution:** University of Manchester

**Co-authors:**

Ralf Brand  
Sam Brown  
Patrick Devine-Wright  
Catherine Grandclement  
Simon Guy  
Nicholas Humes  
Andrew Karvonen  
Louis Neven  
Christopher Tweed  
Wendy Wrapson  
Gordon Walker

**Chair:** Alan Lewis

What role, if any, does ageing play in shaping the daily practices by which older people stay warm and keep cool in the home? This issue is investigated in the research project “Conditioning Demand”. The study takes a socio-technical approach, in which energy consumption is regarded as not merely a technical matter, but rather an assemblage of social, economic and technical factors, and explores domestic energy use in relation to thermal comfort. The project is funded by the Research Councils UK Energy Programme and the European Centre Laboratories for Energy Efficiency Research (ECLEER).

**Heating care homes sustainably: risks, reputations and hidden benefits**

Louis Neven, Sam Brown, Gordon Walker

Very few care homes in the UK use sustainable heating technologies. This seems surprising, as care homes tend to require a lot of energy for heating and hot water. Moreover, energy prices are already high and margins are under pressure, hence the cheap heat that sustainable heating technologies deliver should seem attractive. Based on semi-structured interviews with care home owners, care managers, care workers, maintenance personnel and older residents, this paper analyses the way sustainable heating technologies are perceived by care home owners and managers, and how these technologies intervene in the everyday practices of care homes. This paper will demonstrate that specific technical characteristics of these technologies clash with the business of running a care home, particularly in terms of finance, risk and reputation. However, this paper will also show that installing sustainable heating technologies can improve resident safety, health, comfort and resident-carer and carer-management relations.



## **'There's always ways around something': the home heating practices of older people in rural areas**

Wendy Wrapson, Patrick Devine-Wright

Proportionally there are more households 'off the gas grid' housing a person over the age of 60 than other age groups and heating a home with fuels such as oil, LPG and electricity is more expensive than with mains gas. We conducted in-depth interviews in older person households in rural areas to find out how people maintained a comfortable temperature in their home. A variety of space heating technologies were used ranging from conventional night storage heaters to state of the art biomass boilers. This paper discusses how people adapt their practices and use of heating technologies to their own particular domestic environment.

## **A field study of how older people interact with new heating technologies to condition thermal comfort**

Nicholas Humes, Christopher Tweed

This is a study of older private-homeowners' uptake and use of low-carbon heating technologies. The study draws on semi-structured interviews conducted over four seasons with 11 homeowners aged 55+, combined with quantitative data on participants' homes documenting temperature and relative humidity, and buildings' energy-efficiency as assessed through environmental performance certificates and thermographic imagery. Focusing on energy costs and the spatial aspects of heat delivery in the home, the study reveals important changes to established practices of domestic energy use prompted by the use of low-carbon heating technologies.

## **The role of the imagined user in the design of energy-efficient Extra-Care housing schemes**

Alan Lewis, Ralf Brand

Implicit in the concept of specialist housing, designed specifically for the typical needs of older people, is the notion of a 'special' occupant, an imagined older person. This user representation is often inscribed in design features. Through semi-structured interviews with housing providers and building designers, this paper explores how user representations are constructed and inscribed in extra-care housing design, and investigates how these user representations compare with reality through interviews with residents. The paper shows how a building's energy-efficiency performance depends upon the occupants' compliance with certain anticipated 'scenarios of use' or 'scripts'. Conversely the occupants' ability to control their thermal environment depends on the level of 'fit' between these scripts and the daily practices by which older occupants maintain thermal comfort.

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**Stream:** New Ageing Populations/New Approaches

**Date:** Wednesday 11 July 2012 **Time:** 16:10–17:10

**Abstract ID:** 89

**Title:** The role of information and communication technology in later life

**Method:** Oral

**Author:** Miranda Leontowitsch

**Institution:** St George's University of London

There is a prevailing assumption that older people are reluctant to use information and communication technology (ICT) and that we are steering towards a digital divide that is defined by age, in which older people make up the group of non-ICT users. Such a perspective ignores the fact that older people are making the digital conversion in increasing numbers, and that older people are the fastest growing segment of internet users. It is estimated that in the UK 41 per cent of people aged 65+ use the internet (Ofcom, 2009), with similar figures for the USA, Canada, New Zealand, and Sweden (Centre for Digital Future, 2009). Recently published data from the Office of National Statistics (ONS) about internet access and usage by age group shows that older age groups use ICT in much the same way as other age groups. Moreover, they outdo younger age groups in some areas such as buying medicine and computer software (including video games). This calls for research that acknowledges the role of ICT in later life, and investigates how the internet and the use of computers are changing the fabric of later life and perceptions around ageing. The talk will look at the ONS data more closely and present insights from a case study of a nonagenarian and his computer. The paper will argue that age tells us little about whether and how older people use ICT, and that other factors, such as place and health, are more indicative.

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**Stream:** New Ageing Populations/New Approaches

**Date:** Wednesday 11 July 2012 **Time:** 16:10–17:10

**Abstract ID:** 250

**Title:** Using social media technologies to extend social inclusion in care homes

**Method:** Oral

**Author:** Malcolm Johnson

**Institution:** University of Bath

**Co-authors:**

Rachid Hourizi

Tony Walter

This paper will report the early stages of a substantial representative study to investigate the extent to which digital and 'social' media technologies (e.g. Facebook, LinkedIn, Twitter and email) can be employed to facilitate greater social inclusion for care home residents – including those with dementia. In order to consider the potential support that these technologies might provide, we must understand inclusion to be both multi-faceted and complex. More specifically, we hope to support contact between residents in at least three areas: (i) to promote increased interaction between residents and people who matter most to them: family and friends. (ii) with visitors and volunteers. (iii) to promote the Homes' growing role as a social hub i.e. to put residents in touch with each other, with other local residents and (potentially) with the services and facilities provided by other organizations (such as the local authority, social workers, health staff and others who might assist them to regain lost autonomy, such as lawyers, funeral directors, CAB etc). Existing studies focus on older people in the 3<sup>rd</sup> age. To address the potential contribution to those in the 4<sup>th</sup> age requires intensive listening to expressed needs rather than to be concerned with overcoming barriers to IT. Then to use this data in engagement with computer scientists, in fashioning interfaces with people and technologies that might achieve their ends.

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**Stream:** New Ageing Populations/New Approaches

**Date:** Wednesday 11 July 2012 **Time:** 16:10–17:10

**Abstract ID:** 87

**Title:** Independence matters: using design and technology to improve quality of life of older people

**Method:** Oral

**Author:** Anthea Tinker

**Institution:** King's College London

**Co-authors:**

Marianne Guldbrandsen

Ursula Davies

Kelly Wilson

Jackie Marshall-Cyrus

This paper describes an innovative programme to engage young and old in designing for older people. The programme is Independence Matters: a joint programme between the Technology Strategy Board and the Design Council. Its aim is to stimulate the development of innovative services that will help older adults to live independent and fulfilling lives. Independence Matters consists of two streams of work: Home & Away focusing on issues of nutrition and mobility, and Keeping Connected, focusing on addressing issues of social connection, social isolation and intergenerational links.

Keeping Connected uses two different methods: a schools challenge and a business challenge. The schools challenge started in March 2011 and ran in fifteen schools across the UK. Over 300 students (aged 11-14) worked with 150 older adults to discover how they connect to younger people, their community and the wider world. The participating schools used design methods and process, which provided a framework for collaborative working between generations. The challenge produced innovative service solutions that have been implemented by the schools. These will be described. The schools challenge inspired the Keeping Connected Business Challenge, a £495,000 competition to fund innovative service ideas for keeping older adults better connected. Four teams of businesses and designers were awarded funding in December 2011 for six months to work on relevant projects.

Both challenges demonstrate that design-led approaches and the innovative application of existing technologies can be used to develop new services that are commercially viable and have a positive outlook for older adults.

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**Stream:** New Ageing Populations/New Approaches

**Date:** Wednesday 11 July 2012 **Time:** 16:10–17:10

**Abstract ID:** 240

**Title:** Gay men and the future of care: to what extent are 'families of choice and other life experiments' applicable to characterize gay men's lives in later life?

**Method:** Oral

**Author:** Tung Suen

**Institution:** Oxford Institute of Population Ageing

Lesbian and gay people have been seen as exemplar of the self-making aspect of identities in a period of reflexive modernization (Giddens 1991, 1992). They have been described to actively create 'families of choice' (Weeks, Heaphy and Donovan 2001) unbound by 'conventional' understanding of 'family' based on kinship. They are seen to be engaged in 'other life experiments', breaking rules and boundaries such as 'traditional' monogamous relationships. These suggestions position lesbian and gay people as highly reflexive but have been criticized to under-estimate the significant influences of power and differences within the population (Heaphy 2008). Whether these ideas can be extended to older LGBT people have also been under-explored.

This paper asks whether and to what extent are the ideas of 'families of choice and other life experiments' applicable to characterize gay men's lives in later life? First, I draw on data from in-depth (2-6 hour) life story interviews with older gay men who have been single most of their life time to discuss their perceived 'ideal' arrangements of care in later life. Second, with data from an 18-month action research project I discuss care home staff's attitudes towards older LGBT issues, and show the pervasiveness of heteronormativity in care practice. I thereby suggest that there may be discrepancies between gay men's 'ideal' and the 'actual' care that they receive. I conclude by questioning the limits of using the concepts to characterize older gay men's lives by highlighting some structural disadvantages that older gay men may face in later life.

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**Stream:** New Ageing Populations/New Approaches

**Date:** Wednesday 11 July 2012 **Time:** 16:10–17:10

**Abstract ID:** 112

**Title:** Investigating the relational networks of older lesbian, gay and bisexual people in planning for future and end of life care in later life.

**Method:** Oral

**Author:** Kathryn Almack

**Institution:** University of Nottingham

**Co-author:** Jane Seymour

This paper examines ways in which sexual orientation may impact on experiences of ageing, end of life care and bereavement. It draws on data from group and follow up discussions (6) carried out with 15 older lesbians, gay men and bisexuals (LGB elders) aged between 55 and 85 (several also wrote additional pieces about their experiences). These formed part of a larger project investigating a range of older people's concerns about planning for future and end of life care in later life. We set the findings in the context of debates about broader changes to family forms alongside social change and demographic shifts. Our focus on end of life care and bereavement sheds light on a series of relatively neglected issues associated with LGB ageing and, more broadly, the topics of care and support within 'non-traditional' relational lives. Although based on a small data set, respondents' accounts provide insights into understandings of personal networks, which challenge the traditional primacy of meanings of family that involve blood or marital relationships. Respondents' networks are a mix of social and biological family links, friendships and inter-generational connections. In addition, these accounts highlight how relational and personal networks do not remain static, particularly as one gets older. These are areas worthy of further investigation in explorations of the relational processes of older people's everyday lives.

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**Stream:** New Ageing Populations/New Approaches

**Date:** Wednesday 11 July 2012 **Time:** 16:10–17:10

**Abstract ID:** 206

**Title:** Contemplating inclusive and anti-discriminatory residential care provision in Wales: perceptions from Older LGB (lesbian, gay, and bisexual) people

**Method:** Oral

**Author:** Penny Miles

**Institution:** Swansea University

**Co-author:** Paul Willis

Sexuality and sexual health are an integral aspect of health and wellbeing throughout the lifecourse. However, older people are often assumed to be asexual (Bauer et al, 2009), and for older people within residential care environments, the priority of care needs can overshadow their sexual health needs (Windle & Burholt, 2006). Too frequently older people are also presumed to be heterosexual, neglecting social differences in sexual orientation. Consequently, older lesbian, gay and bisexual (LGB) people can experience dual discrimination through the heterosexist assumptions of care providers and through ageist beliefs circulating in LGB communities (Clarke et al, 2010). The work presented here forms part of a broader project, funded by the Welsh Government, which explores the provision of residential care services for older LGB people in Wales. The study seeks to examine the translation and implementation of Welsh policy in the context of residential care environments in Wales, including Extra-Care, residential care settings and nursing homes. This paper focuses on initial findings from interviews conducted with over 25 older individuals from across Wales who identify as lesbian, gay or bisexual. The qualitative interviews explored people's hopes, fears and expectations regarding future care provision, as a means of increasing social understanding of LGB sexuality and ageing and helping to promote anti-discriminatory practice in care environments. The outcomes of the research aim to assess the standard of care provided in a) respecting and promoting the sexual lives of residents, and b) meeting the relationship and support needs of LGB residents.

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**Stream:** New Ageing Populations/New Approaches

**Date:** Thursday 12 July 2012 **Time:** 08:40–10:20

**Abstract ID:** 84

**Title:** Older women and homelessness: looking beyond global stereotypes to devise local responses

**Method:** Oral

**Author:** Harriet Radermacher

**Institution:** Monash University

**Co-author:** Susan Feldman

Anecdotal reports suggest the number of older women seeking housing assistance is increasing. In response to these reports, a local government department in Melbourne, Australia, initiated a program of activities to inform a proactive and more effective response to reduce and address the risk of homelessness in the local area. As part of this program, a qualitative research study was conducted to identify the factors that contribute to older women becoming homeless or at risk of homelessness. Thirteen single women aged between 55 and 84 participated in individual semi-structured interviews. Thematic analysis revealed the key and interlinking factors contributing to homelessness were: decreasing and limited opportunities for employment, deteriorating and co-occurring health issues and the associated reduced capacity to earn an income. A slow service system response, limited access to information and reluctance to ask for help accentuated their experiences. Rather than one tipping point to homelessness, the women spoke about the accumulation of a lifetime of challenges, regardless of their background. Despite these hardships, the women's accounts were underscored by resilience and determination and a desire to contribute to society. This research has highlighted the lack of understanding and discrepancy between definitions of homelessness. This accentuates the stereotypes and stigma associated with homelessness, and has significant implications for whether and when women seek support. The women also talked about what had helped them, and in retrospect what might have been helpful, and this data will be important to inform future, and preferably earlier, intervention strategies.

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**Stream:** New Ageing Populations/New Approaches

**Date:** Thursday 12 July 2012 **Time:** 08:40–10:20

**Abstract ID:** 11

**Title:** Women ageing actively: the potential conflict between physical activity and work

**Method:** Oral

**Author:** Fiona Carmichael

**Institution:** University of Birmingham

**Co-authors:**

Jo Duberley

Isabelle Szmiglin

This study contributes to the wider policy debate that is concerned with the promotion of active ageing and the extension of working lives. These policy aims have gained prominence in many industrialized countries because of population ageing. Within this context, the research explores the factors that enable, motivate and constrain the participation of older women in sport and other physical recreational activities. In this investigation, the role of employment is given particular attention. Theoretical considerations suggest that there are potentially both positive and negative links between participation in activity and participation in paid work. These relationships are explored using both quantitative and qualitative methods. The quantitative analysis uses data from 18 waves of the British Household Panel Survey and three Sport England Active People Surveys. The qualitative research involved interviews with key stakeholders and women in their 50s, 60s and 70s. The research confirms that in most cases participation in recreational activity declines with age and is negatively related to participation in employment but there are exceptions. The strength and direction of these relationships varies according to factors such as type of employment, reason for not working and level and type of activity. Gender and gendered roles such as caring are also a factor as are psychological aspects linked to age. These findings suggest that the attitudes of older women toward physical activity are complex and individualized. They are shaped and influenced by a range of factors incorporating psychological, social, environmental and economic aspects.

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**Stream:** New Ageing Populations/New Approaches

**Date:** Thursday 12 July 2012 **Time:** 08:40–10:20

**Abstract ID:** 213

**Title:** Women and health: negotiations between self-sacrifice and self-preservation

**Method:** Oral

**Author:** Atulya Saxena

**Institution:** University of Oxford

This paper explores the relationship between the stages of ageing and the processes of negotiation between self-sacrifice and self-preservation in women as imbibed in their roles of health providers and health recipients within the family. It further explores the influence of globalization on this relationship and its implications for the future on the dimensions of health. The theories presented in this paper are based on a research study conducted in Udaipur, Rajasthan. 50 in-depth interviews were conducted with individuals over the age of 40. The analysis of the data provided evidence to suggest that a constant negotiation between self-sacrifice and self-preservation existed throughout the life of these women. This seemed to be the result of the two conflicting roles of health provider and health recipient that were prescribed to them. It was noted that as the women aged and entered different stages of their lives their family structure also changed. This in turn changed the reasons behind their decision making during these processes of negotiation. The influence of globalization was seen in further differences that entered in the decision making processes between the women of different age groups. Changing family structures, market products, forms of communication, and economic policies were dominant forces among the influences of globalization that had an impact on the dimensions of health. Finally, it is asserted that these roles persist despite the changing family structures and influences of globalization. They should be understood better to protect the women attending to these roles.

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**Stream:** New Ageing Populations/New Approaches

**Date:** Thursday 12 July 2012 **Time:** 08:40–10:20

**Abstract ID:** 15

**Title:** 'Health by stealth'? Addressing the needs of older men through Men in Sheds activity interventions

**Method:** Oral

**Author:** Christine Milligan

**Institution:** Lancaster University

**Co-authors:**

Christine Milligan

Zoe Cockshott

Sheila Payne

Amanda Bingley

One in five of the UK population is an older man – around one million of whom live alone. Research has shown that for at least 400,000 of these older men, loneliness is a major issue. Social isolation, loneliness and stressful social ties are associated with elevated blood pressure, poor physical and mental health including depression, suicide and dementia. Indeed, Illiffe et al (2007) go so far as to claim that the magnitude of health risk associated with social isolation is comparable to that of cigarette smoking. This can be of particular concern for lone-dwelling older men who can find it harder to make friends in later life relative to older women. Supportive social ties and the creation of inclusionary activity spaces that meet the needs of older people can be important for enhancing quality of life and wellbeing, but older men can find it off-putting to join community-based social groups that are often dominated by older women. This suggests an important role for the development of gender-based activity interventions in addressing the needs of socially isolated older men. Drawing on the 'Men in Sheds' initiative, a concept originating in Australia, this paper reports on the evaluation of an innovative pilot programme developed by Age UK. It discusses older men's experiences of the Shed interventions, the impact on their health and wellbeing and assesses the extent to which gender-based activity interventions might provide a fruitful route for addressing the needs of lonely and isolated older men.

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**Stream:** New Ageing Populations/New Approaches

**Date:** Thursday 12 July 2012 **Time:** 08:40–10:20

**Abstract ID:** 54

**Title:** Widowers do have friends: the changing nature of male-to-male friendships

**Method:** Oral

**Author:** Kate Bennett

**Institution:** University of Liverpool

**Co-author:** Deborah K van den Hoonaard

There is relatively little research focusing on older widowers' friendships and it is commonly assumed that older widowers do not have close male friendships. This paper examines the nature of widowers' friendships with other men. The data are taken from qualitative interviews with 66 British and 26 North American older widowers. The results suggest that male-to-male friendships are not uncommon but that their nature is more hidden than in women's friendships. A number of themes emerge from the data. Men have friendships through common interests. They are characterized by doing things together side-by-side rather than face-to-face. There is evidence of homophily, i.e. Men being friends with people like themselves. The British men talked, too, counter to our expectations, about life-long friendships and close supportive friendships. On the other hand, the North American men talked about friendships without firm commitments that allowed for spontaneous, unplanned activities. The nature of these two ways of being friends is explored in detail, with a focus on their function, on reciprocity and on cross-cultural similarities and differences. Finally, the hidden nature of close male-to-male friendships is discussed in relationship to the preservation of masculinity.

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**Stream:** New Ageing Populations/New Approaches

**Date:** Thursday 12 July 2012 **Time:** 08:40–10:20

**Abstract ID:** 108

**Title:** Lesbian, gay, bisexual and trans ageing (1): research perspectives

**Method:** Symposium

**Author:** Sue Westwood

**Institution:** Keele University

**Co-authors:**

Nancy Knauer

Brian Heaphy

James Taylor

Rebecca Jones

Jane Traies

**Chair:** Dana Rosenfeld

Despite great progress in lesbian, gay, bisexual and trans (LGBT) equality in recent decades, many older LGBT people continue to experience significant inequalities in later life. Contributors present findings from the USA and UK on those inequalities from the perspectives of law, policy and lived experience. Researching LGBT ageing offers scope for a widening of our understanding of how age, gender and sexuality interact for all older people, heterosexual as well as LGBT.

### **LGBT Ageing in the US: legal and policy reform**

Nancy Knauer, Temple University, Philadelphia, USA

Many older LGBT people face daily challenges of ageing isolated from family, detached from the larger LGBT community, and ignored by mainstream ageing initiatives. This paper outlines a number of the factors that contribute to the vulnerability of older LGBT individuals, including the continuing influence of pre-Stonewall history, the absence of comprehensive research data, wide economic disparities, fear of anti-LGBT bias, and the use of the closet as an adaptive strategy. It also proposes policy interventions designed to insure dignity and equity in ageing regardless of sexual orientation or gender identity.

### **The changing contexts of LGBT ageing**

Brian Heaphy

This paper discusses findings from a study of LGB ageing that I undertook with colleagues ten years ago, reconsidering them in light of the socio-cultural and legal changes that have taken place since. Some of the major concerns that older LGB expressed about 'exclusion, marginalization and prejudice' seem to have been tackled by legislation and policy in the ensuing years, but not all of them. New challenges have also emerged, not least the growing sense amongst the heterosexual mainstream and some younger LGB that sexual equality is 'done', which contributes to making invisible old and new patterns of inequalities. To understand these patterns we need to take seriously the differences that exist amongst LGB and how resources influence their day-to-day living.

### **The Stonewall survey**

James Taylor, Stonewall

Stonewall have conducted research into the health and social care needs of lesbian, gay and bisexual people in Britain. The research uncovered evidence on LGB people's health and social care needs, relations with family and social networks, their experiences and expectations in regards to accessing services and how they would like to see those services delivered. 1,000 heterosexual and 1,000 LGB people participated, making this the largest comparative study ever conducted in Britain regarding ageing and the LGB community. This presentation will give an insight into the findings and recommendations for the health and social care sector.

### **The disappearing “B” in LGBT ageing**

Rebecca Jones

While there are shared experiences and needs across the LGBT spectrum, there are also significant differences between the groups that can be lost in the umbrella term. In particular, the 'B' in 'LGBT' seems to keep disappearing. Empirical research into the experiences of older bisexual people is almost entirely lacking. This paper asks why and draws on empirical work where a group of predominantly middle-aged bi-identified adults imagined their own ageing and later life. This research suggests some ways in which ageing as a bisexual person may pose both particular challenges and particular opportunities.

### **Older lesbians in the UK**

Jane Traies

This paper draws on a research project involving some 400 lesbians over 60. The project's aim is to provide a comprehensive account of the lives and experiences of this previously under-researched group. Although all the participants now identify as lesbian, their stories are so diverse as to call into question homogenous categories such as 'lesbian' or 'old'. The paper illustrates some of the ways in which these women challenge cultural stereotypes, and suggests what they might offer to a society looking for new ways to be old.

**NOTE:** this symposium is linked to: **LGBT ageing (2): rights and advocacy**

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**Stream:** New Ageing Populations/New Approaches

**Date:** Thursday 12 July 2012 **Time:** 14:00–15:40

**Abstract ID:** 166

**Title:** Lesbian, gay, bisexual and trans ageing (2): rights and advocacy

**Method:** Symposium

**Author:** Sue Westwood

**Institution:** Keele University

**Chair:** Elizabeth Peel, Senior Lecturer, Life & Health Sciences, Aston University

**Co-authors:**

Mark Hughes

Andrew King

Lee-Ann Fenge

Antony Smith

**Chair:** Sue Westwood

Advocates on behalf of older LGBT people emphasize the need to change attitudes within society in general, and among health and social care service providers in particular. Contributors from Australia and the UK present findings from research that seeks to empower older LGBT through the use of participative methods, in the devising of training tools, through community activist interventions, and via a range of awareness-raising strategies. Consideration is also given to future directions in advocating with and on behalf of older LGBT.

**Towards the Inquiry into Aged Care and beyond: the promise of new era in LGBTI ageing in Australia**

Mark Hughes

In 2011, in a landmark move, Australia's Productivity Commission acknowledged the particular issues faced by sexually and gender diverse communities in the aged care system. It recommended the development of a national LGBTI (Lesbian, Gay, Bisexual, Trans and Intersex) ageing plan, the national roll-out of sensitivity training to aged care providers, and the resourcing of organizations to provide aged care packages to LGBTI communities. This presentation documents some of the strategies used by individuals and community organizations in promoting the issue of LGBTI ageing and getting it onto the Productivity Commission's agenda. It also highlights some of the challenges and opportunities in a post-Inquiry environment where consumer choice will be maximized and competition between providers of aged care services will be increased.

**Putting policy into practice: improving services for older LGBT adults**

Andrew King et al

In this paper we discuss our experiences of working with service providers on a project, initially in East London, called "Putting Policy into Practice". It enabled us to work with service providers and local authority policy makers, as well as older LGBT activists and community members, to try to improve services for older LGBT people. Firstly, we discuss the key findings of our previous research, explaining how this prompted the development of the PPIP project. We then outline the way the PPIP project was designed, explaining what we did to engage key stakeholders. Finally, we consider some of the things we learned from this work and discuss some of the problems and possibilities for future research and policy making.

**Two participative projects**

This paper reports on the development of an educational training tool to promote understanding of the needs and experiences of older lesbians and gay men amongst their peers, communities and service providers with UK society. The tool is in the form of a Method Deck of cards, which includes information and activities to promote good practice with older people from sexual minority groups. Its content is informed by the findings of two recent research projects. This paper presents a discussion of themes that have arisen from these research projects, and the wider literature in this area. It will consider how this has informed the development of a tool, within an overarching participatory framework and advisory group.

### **The Opening Doors Project**

Antony Smith, Age UK

Opening Doors is the Age UK programme that launched mainstream organizational support for older lesbian, gay, bisexual and trans people in the UK some 10 years ago. This presentation outlines the rationale for developing a dedicated service for lesbian, gay, bisexual and trans people in later life, in the absence of any major UK research into LGBT ageing at the time. It goes on to provide an overview of the development of the programme at national and local service delivery levels, the views of older lesbian, gay, bisexual and trans service users themselves, and some pointers for future directions – in the light of the changing legal and social framework, the ageing of the baby boomer generation and the latest research findings.

**NOTE:** this symposium is linked to: **LGBT ageing (1): research perspectives**

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**Stream:** New Ageing Populations/New Approaches

**Date:** Friday 13 July 2012 **Time:** 08:40–10:00

**Abstract ID:** 189

**Title:** Innovation in meeting the social care needs of older adults: exploring the case of time banking, with examples from the UK and Japan.

**Method:** Symposium

**Author:** Ruth Naughton-Doe

**Institution:** University of Bristol

**Co-authors:**

Keith Sumner

Mayumi Hashami

**Chair:** Ruth Naughton-Doe

The UK faces what has been termed an 'agequake'. How will our social care system cope as ever greater numbers of people live longer, experience chronic illness and disability and are supported by a shrinking proportion of working adults? This symposium considers an innovation that seeks to address this problem: time banking initiatives. Through exploring international examples through the literature, and discussing recent empirical research in both the UK and Japan, this symposium will explore current models, benefits and challenges for time banking as a means of providing social care for older adults.

#### **Time banking with older people: a review of the literature**

Ruth Naughton-Doe

Time banking is an intervention where participants are paid in time for the reciprocal exchange of skills and services in both community and institutional settings. Time banking emerged independently but at the same time in both Japan and the USA as an initiative targeted at providing social care for older people through informal support networks as an alternative to government or private sector provided services.

However, despite having existed as a social intervention for nearly thirty years, there is a surprising lack of evidence on the outcomes of time banking. The extent and quality of the current research evidence base is surprisingly weak. This paper will present findings from a PhD literature review that considers current models, mechanisms and outcomes of time banks, with a specific focus on older people.

#### **Care4Care – can a rediscovery of mutualism help a social care system under hammer?**

Keith Sumner

At a time when the health and social care services are being asked to make extra-ordinary levels of savings, measured in the tens of billions, something fundamental has to change in the way care is funded and delivered, if our aspirations of addressing rising levels of unmet need are to be addressed. What should these new systems of delivery look like? What place is there for models of care and support based on mutualism and reciprocity?

This paper describes the origins of an initiative, created by Professor Heinz Wolff (Brunel University), and his team – Care4Care – analysing its potential impact on our evolving care system and looks at the emerging outcomes from England's first Care4Care pilot site established on the Isle of Wight, with the local Age UK.

This approach to generating additional care and support resources springs from his belief that the most important technology for assisting older people is a pair of “helping hands” and prioritizes the development of a vehicle to increase the numbers of people actively engaged in supporting older people.

### **Japan’s mutual help networks: a model for the ‘Big Society’?**

Mayumi Hayashi

Both Britain and Japan face pressing challenges in the caring of growing older populations. This paper examines one interesting Japanese initiative; Fureai Kippu system of mutual help networks, involving exchanges of time credits (‘time-banking’). The system expanded rapidly during the 1990s, enabling volunteers to earn time credits for hours spent caring for older people in their community. These credits can be accumulated and used to ‘buy’ care later in life. Similarly, ‘long-distance care’ through credit transfers from adult children to frail parents is particularly significant as living patterns change, globalization proceeds, and ‘traditional’ family care declines.

Politicians and care experts in the UK have seen Fureai Kippu as a potential solution to some of Britain’s problems. Yet relatively little is known of the variations or operational details and problems experienced in Japan beyond simplistic and optimistic generalizations. This paper uses historical analysis and field work research to offer a more candid and objective picture of Fureai Kippu, and examines whether it really meets the needs of older people who may be unable to participate in an exchange-based system.

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**Stream:** New Ageing Populations/New Approaches

**Date:** Friday 13 July 2012 **Time:** 10:30–11:30

**Abstract ID:** 191

**Title:** Learning and sustaining use of ICTs by older people: identifying the barriers

**Method:** Oral

**Author:** Jatinder Sandhu

**Institution:** Loughborough University

**Co-author:** Leonie Ramondt

Although the internet as a key technology for communication and transaction is becoming embedded in our society, a substantial number of people – particularly older people – are not participants in this digital revolution. Many have never connected online while others have become digitally disengaged after using Information Communication Technologies (ICT's) in the past. The study reported in this paper examines both the entry barriers to ICT use and some of the barriers encountered to sustaining usage. Research methods include a review of the literature, focus groups, interviews and a questionnaire survey.

Findings indicate that entry barriers include lack of confidence and fear of using ICTs, the absence of adequate support, the cost of training, memory problems, technical jargon, pop-ups and spam. Some of these barriers reduce in impact with growing familiarity with ICTs but some persist. Examples include problems with updates, viruses, poorly designed software and hardware, inadequate support, and difficulties finding suitable on-going ICT learning provision. These issues and case studies based upon interview data will be presented to illustrate the challenge of the learning journey for older entrants to cyberspace. Finally some recommendations for action to sustain older people in their use of ICTs as they age will be presented.

**Acknowledgements:** This paper emerges from research conducted as a part of the Sus-IT Research Project, which is funded by the ESRC's New Dynamics of Ageing Programme (Grant Number RES-353-25-0008) and led by Leela Damodaran and Wendy Olphert at Loughborough University, UK.

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**Stream:** New Ageing Populations/New Approaches

**Date:** Friday 13 July 2012 **Time:** 10:30–11:30

**Abstract ID:** 228

**Title:** Ageing populations in the information age: the experiences, perspectives and needs of ICTs in Japan

**Method:** Oral

**Author:** Shizuka Abe

**Institution:** University of Bristol

Proponents of information and communication technologies promise access to a networked world, but do these technologies offer benefits to ageing populations? As of 1<sup>st</sup> October 2010, around 30 million people in Japan were aged 65 or over, comprising 22.5% of the total population of 128 million. Like their younger counterparts, these elderly people also live in the information society. This paper attempts to provide a contemporary examination of elderly people's experiences, perspectives and needs in relation to Information and/or Communication Tools/Technologies.

The qualitative data interpreted in this paper are derived from semi-structured, in-depth interviews conducted in Kyoto in 2010 with 36 retired people aged 63 to 75. The participants in the fieldwork spoke of experiencing tremendous changes in ICT use as a result of Japan's post-war economic development. The current younger elderly belong to the cohort that is undecided about the use and non-use of new media, and to build and/or maintain their social relations they have to use both old and new media effectively; for some elderly, new media are crucial. Among the elderly, people who have good social relationships are willing to use new technologies.

In the context of the Japanese demographic movement towards a matured society, that is to say a low birth-rate, rapid ageing, and a shrinking population, information and communication technologies have already benefited Japan's elderly, and show even greater promise for the future. However, to enable enjoyment of the full benefits of new technologies more initiatives from government and business are needed.

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**Stream:** New Ageing Populations/New Approaches

**Date:** Friday 13 July 2012 **Time:** 10:30–11:30

**Abstract ID:** 235

**Title:** Emergence of a user-generated strategy for future community-based ICT training and support

**Method:** Oral

**Author:** Leela Damodaran

**Institution:** Loughborough University

**Co-author:** Wendy Olphert

Keeping older people digitally 'connected' for as long as possible has wide ranging benefits to them as individuals, to society and to the economy. Ongoing research is providing a rich understanding of what older people require to enable them to remain connected as they age. The findings have informed a participative process to develop a realizable specification for universal learning and support services for older ICT users, reflecting their diverse needs. This process in two sequential facilitated workshops has taken the debate about provision of ICT learning and support to a strategic level. In the first workshop, older people and other key stakeholders from academia, Government and third sector organizations conducted a lively exploration of user experience of ICT learning and support and enabled a specification of the needs of older ICT users to be formulated. This specification informed the deliberations of a second workshop convened to develop collaboratively a shared vision of ICT learning and support provision for the UK and a strategy for achieving it. The output that will be presented in the paper is a blueprint for sustainable, community-based ICT learning and support centres.

**Acknowledgements:** This paper emerges from research conducted as a part of the Sus-IT\* Research Project, which is funded by the ESRC's New Dynamics of Ageing Programme (Grant Number RES-353-25-0008) and led by Leela Damodaran and Wendy Olphert at Loughborough University, UK.

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**Stream:** Participation and Engagement

**Date:** Wednesday 11 July 2012 **Time:** 14:00–15:40

**Abstract ID:** 257

**Title:** Patient and public involvement in ageing research

**Method:** Symposium

**Author:** Clare Jinks

**Institution:** Keele University

**Co-authors:**

Bernadette Bartlam

Sophie Staniszewska

Tracey Williamson

**Chair:** Clare Jinks

The need to involve users in health care research is now explicit in health and social care policy. One model for involvement in research has been developed by INVOLVE, comprising 3 levels of involvement (consultation, collaboration and user control), and includes involvement when identifying and prioritizing topics for research, designing, managing, commissioning, undertaking and disseminating research. This symposium gives an insight into patient and public involvement in ageing research. Drawing on data from 4 recent initiatives the aims are twofold (1) highlight methods of PPI (2) explore challenges, opportunities and experiences of involvement. The structure is as follows:

**Age differences in public priorities for joint pain research**

Clare Jinks and a member of Arthritis Research UK Primary Care Centre's Research Users' Group (Keele University).

This talk will describe a study that aimed to identify priorities for joint pain research from a large cohort study, and identify characteristics associated with these priorities. A question asking about research priorities was developed in collaboration with the Arthritis Research UK Primary Care Centre's Research Users' Group. The question was embedded in a postal survey to adults with self-reported joint (hand, hip, foot or knee) pain aged 56 and over in North Staffordshire. 1756 (88%) responded to the survey. Keeping active was rated the top priority by 38%, followed by research around joint replacement (9%), and diet/weight loss (9%). Two clusters of people were identified. 62% preferred lifestyle/self-management topics (e.g. keeping active, weight loss) and 38% preferred medical intervention topics (e.g. joint replacement, tablets). Those who preferred the medical options tended to be older and have hip or foot pain.

**Developing a strategy for user engagement**

Bernadette Bartlam (Keele University)

The Centre for Social Gerontology at Keele University promotes user participation across all areas of its work. This paper reports on one initiative to take this work forward by engaging in a process of consultation and discussion with a variety of potential partners and users. The intention was to identify ways of integrating diverse community partners and their perspectives into the aims and aspirations of the Centre and to develop reciprocal and mutually beneficial opportunities for collaboration.

## **Guidance for reporting involvement in research**

Sophie Staniszewska (University of Warwick).

Recent systematic reviews have been helpful in identifying a range of impacts that were attributed to patient and public involvement in research. However it is clear from these studies that the underlying evidence base is relatively poor, primarily because of poor reporting. This talk will describe a study that developed guidance for reporting involvement of patients and public (GRIPP) in research. The GRIPP checklist represents the first international attempt to enhance the quality of PPI reporting. Better reporting will strengthen the PPI evidence-base and so enable more effective evaluation of what PPI works, for whom, in what circumstances and why.

## **Inclusive design of technical outdoor walking clothing for older people: Insights from an ESRC New Dynamics of Ageing research study**

Tracey Williamson (University of Salford).

This presentation will illuminate the considerations made when involving older people as study advisers in an ESRC New Dynamics of Ageing study that inclusively designed technical outdoor walking clothing for older adults. Within-project evaluation was undertaken and an insight into lay adviser's experiences of involvement elicited through informal audio-recorded interviews will be shared. Methods of co-design that aided lay advisers to contribute effectively to the garment design process will be explored, for example mystery shopping and a manufacturer's warehouse visit to view collections. Critical reflections will be shared as to what worked well and less well in the engagement of older people and strategies to manage these.

The symposium will conclude with a discussion of the issues surrounding PPI in ageing research as explored in the papers presented, and will be led by Lucy Simons, Public Involvement Advisor, INVOLVE.

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**Stream:** Participation and Engagement

**Date:** Wednesday 11 July 2012 **Time:** 16:10–17:10

**Abstract ID:** 155

**Title:** Exploring connectivity and rural ageing: issues and challenges from the 'Grey and Pleasant Land?' project

**Method:** Oral

**Author:** Robin Means

**Institution:** University of the West of England

**Co-authors:**

Catherine Hennessy

Vanessa Burholt

'Grey and Pleasant Land? An Interdisciplinary Exploration of Older People's Connectivity in Rural Civic Society' was a New Dynamics of Ageing project based on a collaboration between five universities and the project contained seven different work packages varying from a community survey to a work package seeking to engage older people in the research through the internet. Outputs have included peer review articles, a project website, and project newsletters but also films and exhibitions.

From the outset, the challenge of 'holding' such diversity was recognized and 'connectivity' was adopted as an 'heuristic device' to help keep all the different elements of the project together. During the life of the project, the popularity of the term 'connectivity' took off in assorted policy and research funding documents with AHRC leading the multi Research Council programme on 'Connected Communities'.

This paper argues that the exploratory power of connectivity make it much more than an heuristic device (a kind of convenient research Cellotape). Drawing on the work packages, the diverse ways in which rural elders connect will be illustrated. It will be argued that connection to place still matters to many rural elders but that overall they are starting to transition from place based to a more geographically dispersed connectivity. This movement is driven by greater mobility (many more of us move from place to place throughout the lifecourse) but also by the transformational power of the internet. The paper concludes with a Connectivity Continuum that embraces the full spectrum of connectivity options from 'place' to the 'virtual'.

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**Stream:** Participation and Engagement

**Date:** Wednesday 11 July 2012 **Time:** 16:10–17:10

**Abstract ID:** 103

**Title:** The perceived benefits of participating in voluntary activity: do they differ by volunteer characteristics?

**Method:** Oral

**Author:** Sheelah Connolly

**Institution:** Irish centre for Social Gerontology

**Co-author:** Eamon O'Shea

**Introduction:** There is an extensive literature documenting the beneficial effects of volunteering, especially among older people. However, it is unclear whether some subgroups benefit more than others. The aim of this paper is to examine the perceived benefits of volunteering among older people and to determine whether the benefits differ across groups.

**Methods:** A quantitative approach was adopted including 261 volunteers aged 55 and over, contributing to two national volunteering programmes. Postal questionnaires were sent to volunteers, with respondents providing their perspective on the extent to which their volunteering activities benefit themselves (across seven domains), service recipients and the wider community.

**Results:** Older people reported a wide range of benefits emerging from their volunteering. Respondents perceived the most benefit to themselves in terms of increased socialization and self-worth. There was some evidence of differences in perceived benefit across groups with the older-old and those contributing more voluntary hours deriving the greatest benefit in terms of self-worth. In addition, there was evidence to suggest that volunteering benefits widowed and retired people by providing a sense of being needed at a time when other roles and activities are less important.

**Discussion:** The vast majority of older volunteers perceive significant benefits accruing to themselves, service recipients and the wider community from their volunteering activity. Different subgroups sometimes derive different benefits from voluntary activity. Recognizing the potential benefits of volunteering to different groups is important in the recruitment and retention of volunteers.

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**Stream:** Participation and Engagement

**Date:** Wednesday 11 July 2012 **Time:** 16:10–17:10

**Abstract ID:** 150

**Title:** "There aren't enough people to volunteer, so they take anybody": Is engagement the key to sense of belonging in rural communities?

**Method:** Oral

**Author:** Jacquie Eales

**Institution:** University of Alberta

**Co-authors:**

Norah Keating

Verena Menec

Active engagement of older persons has been viewed as an important indicator of their sense of belonging and community connectedness. Engagement is seen as protecting against loneliness (Fast & Gierveld, 2008), fostering social inclusion (Scharf & Keating, 2012) and as a responsibility of citizenship (Dryzek, 2000). In Canada, there are strong beliefs that rural communities are close-knit and inclusive, providing excellent opportunities for older persons to retain or enhance their sense of being fully functioning community members. Yet the diversity of rural communities and of rural older persons belies this assumption (Curry & Fisher, in review). In our previous research, we found that communities differ considerably in their supportiveness as do rural residents in their propensity for engagement (Eales, Keefe, & Keating, 2008). In this presentation we explore the relationship between community engagement and sense of belonging among older rural persons. Data are drawn from 3 rural community case studies that included 152 interviews with older adults and other community stakeholders. Communities were chosen from census analysis of 2759 rural communities in Canada to reflect diversity in geographic location, migration patterns and economic well-being. All were small (1020 – 2854) and had high proportions of older people (22.6% – 41.0%). Findings indicate three distinct profiles: high belonging/high engagement, high belonging/low engagement and low belonging/low engagement. Discussion is focused on how community characteristics influence both engagement and belonging of differing groups of older persons and on older persons at risk of social isolation, loneliness and exclusion.

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**Stream:** Participation and Engagement

**Date:** Thursday 12 July 2012 **Time:** 08:40–10:20

**Abstract ID:** 79

**Title:** The rhetoric of participation in policy discourse: toward a new form of exclusion for disabled seniors?

**Method:** Oral

**Author:** Emilie Raymond

**Institution:** McGill University

**Co-author:** Amanda Grenier

Recent discourses on ageing emphasize the value of older people's activity and participation. While these ideas are generally met with enthusiasm, they also contain normative and prescriptive elements that may not fit with the realities, needs and wishes of all seniors. This paper explores and challenges the unanimous claim for seniors' participation that is promoted in policy discourse, and the inherent concerns raised for persons ageing with disabilities. It reports on the findings of a critical discourse analysis of the concept of participation in ageing policy in the Canadian province of Québec between 2005 and 2012. Results demonstrate how current definitions of participation are problematic for disabled seniors. First, documents revealed a shift in thinking from a focus on older people's well-being to their usefulness, with participation increasingly rooted in productivity and contributions rather than seniors' conditions. Second, over time, the location of participation changed from the social level to the individual, and in particular, from a being defined as a collective responsibility to a question of personal choice and adjustment. Third, the policy documents reflected a growing polarization between activity and a loss of autonomy, revealing that the pairing of health and participation is problematic where impairment is concerned. Together, the results suggest that the modern articulation of participation lacks the politics from which to discuss difference, otherness, and access to participative spaces. It is argued that these new suggested directions for ageing may deprive disabled older people from the possibilities and tools of meaningful participation.

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**Stream:** Participation and Engagement

**Date:** Thursday 12 July 2012 **Time:** 08:40–10:20

**Abstract ID:** 31

**Title:** Loss and bereavement in someone with dementia

**Method:** Oral

**Author:** Jenny Henderson

**Institution:** Alzheimer Scotland

**Co-authors:**

Pauline Banks

Julie Miller

This information sheet has been written by Alzheimer Scotland, supported by the University of the West of Scotland and seeks to address the paucity of help and information available for formal and informal carers of people with dementia who are bereaved. It is recognized that carers experience anticipatory losses when caring for someone with dementia and advice is available to help them. However the experience of Alzheimer Scotland's Helpline and carer support services have highlighted the challenges that bereavement poses for people with dementia in coming to terms with their losses both past and present.

People with dementia may not have the cognitive skills to resolve or make sense of their grief; however loss of cognition should not be confused with an absence of emotion and this may be expressed by a variety of behaviours including fear, agitation, restlessness, distress, and suspicion. Impaired short-term memory adds to the distress of bereavement as difficulties in retaining information mean that the loss of the person is relived anew each time there is discussion about the person who has died.

A literature search revealed little direct information on this topic, the authors therefore relied on best dementia practice and this includes person centred care, validation therapy and reminiscence work. It also provides practical tips and advice on telling the person, planning and attending the funeral and after the funeral. There are also strategies for coping with 'awkward' questions

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**Stream:** Participation and Engagement

**Date:** Thursday 12 July 2012 **Time:** 08:40–10:20

**Abstract ID:** 43

**Title:** A relational approach to the participation of people with dementia

**Method:** Oral

**Author:** Jane Tooke

**Institution:** Alzheimer's Society

Approaches to service user involvement emphasize the importance of empowerment. Increasingly empowerment is understood as involving complex and multiple power relations. Asymmetrical relations are cited as contributing towards the limited nature of participatory initiatives often due to the use of professionally orientated formats and processes that do not take the specificities of the user group into account. Existing good practice suggests that when involving people with dementia considerations should include communication, cognitive, and spatial specificities.

This paper details an Alzheimer's Society initiative to establish Service User Review Panels (SURPs) to involve people with dementia in the work of the organization. It takes a relational approach that envisages involvement as a process of 'connectedness' that can enhance the empowerment of both staff and service users. It outlines how the organization and facilitation of SURPs accommodates communication and other needs. Results demonstrate how involving service users with dementia can significantly improve organizational tools, materials, and processes as well as help to empower staff and service users. The relational approach was seen as a key enabler because it emphasizes getting the space right so that 'connections' between staff and service users can be maximized.

This paper argues that participatory initiatives need to take the specificities of the user group into account because the form and place within which communication takes place influences the power dynamics between service users and staff. If such practices are adopted, participatory environments have the potential to be spaces that help empower both staff and service users.

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**Stream:** Participation and Engagement

**Date:** Thursday 12 July 2012 **Time:** 08:40–10:20

**Abstract ID:** 28

**Title:** The health information seeking behaviour of older people: preliminary findings

**Method:** Oral

**Author:** Gillian Hurst

**Institution:** Anglia Ruskin University

**Co-authors:**

Patricia Wilson

Angela Dickinson

**Background:** Key to UK health policy are the concepts of the informed patient, self-care, self-management and empowerment, which allow individuals to make informed choices and gives them rights and control over their own health and care (Department of Health, 2008). Older people need health information as it will help them make decisions about their health and its maintenance. This presentation will explore preliminary findings from a study exploring the health information seeking behaviours of older people.

**Aim:** To identify, explore and evaluate the health information seeking behaviours of older people.

**Methods:** A qualitative study drawing on grounded theory methodology has been utilized using diaries and interview methods to gather data. Nine older people kept a diary over a 2 month period, and on completion each diarist was interviewed.

**Findings:** The preliminary findings suggest that numerous factors affect older people's health information seeking behaviours including why they sought health information (events such as deteriorating health, screening requests), how they used this information and factors affecting this (values, beliefs, attitudes), the various sources used and their next actions once they had gained this information.

**Conclusion:** This study is generating new knowledge of older people's experiences and views on their health information seeking behaviour. By understanding these health information seeking behaviours, Health Care Professionals will be better placed to promote strategies that improve older people's access to appropriate health information and support its effective use.

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**Stream:** Participation and Engagement

**Date:** Thursday 12 July 2012 **Time:** 08:40–10:20

**Abstract ID:** 71

**Title:** Involving older people in health and social care research: an example from the PEOPPLE Project

**Method:** Oral

**Author:** Julie Udell

**Institution:** University of Portsmouth

**Co-author:** Karen Burnell (on behalf of the PEOPPLE project team)

Involving older people in research that affects them can yield many benefits, but in most cases involvement is 'top-down' through consultations on pre-decided research topics. As such, 'important' issues are usually researcher driven and may not address research areas that would truly impact on older people's lives. Consequently, a 'bottom-up' approach is considered best practice, because older people lead and shape the research by formulating research questions, and working as part of the research team to answer them.

We present the PEOPPLE (Putting Evidence for Older People into Practice in Living Environments) Project, which has fostered partnerships and meaningful engagement with older people in Portsmouth to identify and prioritize research questions tailored to meet their needs as identified by them. The research process consists of four dynamic, active phases aiming to put local solutions in place to address unmet needs. These include identifying important, relevant issues; establishing research questions based on these needs; synthesis of evidence base to determine feasible practical projects; projects carried out to establish or evaluate local solutions.

The PEOPPLE approach is meaningful. The research has benefited from listening to the lived experiences of older people to produce relevant, tangible solutions. Older people, our partners, have felt empowered and able to do something for their community as well as meeting others and sharing tips and resources. Without them, the objectives of the PEOPPLE Project could not be achieved.

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**Stream:** Participation and Engagement

**Date:** Thursday 12 July 2012 **Time:** 16:40–18:00

**Abstract ID:** 200

**Title:** Involving older people in research: experiences from the New Dynamics of Ageing programme

**Method:** Symposium

**Author:** Alan Walker

**Institution:** The University of Sheffield

**Co-authors:**

Mary Sinfield  
Michael Murray  
Sarah Howson  
Lorna Warren  
Jill Rezzano  
Miriam Bernard

**Chair:** Alan Walker

This symposium examines the involvement of older people in research and research dissemination drawing directly on the New Dynamics of Ageing (NDA) Research Programme. Participants will hear about the process of involvement not only from NDA researchers but also from members of the Older People's Reference Group that advises the projects and the Director. The symposium will discuss the barriers to older people's involvement as well as the benefits.

**From interviews to acting: participating in the Ages and Stages project**

Michael Murray, Jill Rezzano, Miriam Bernard, Michelle Rickett, David Amigoni and Lucy Munro (Keele University)

The Ages and Stages research project was designed to explore the role of the theatre in representing and socially constructing ageing in a particular community. A central part of this project was the conduct of extensive interviews with older people who had different types of involvement with a local theatre. These included audience members, volunteers and actors. From these interviews a play was developed through a series of workshop sessions with a number of the participants. This session will review the process of moving from interviews to performance. Some of the participants will engage in discussion about the research process and how it has impacted on their views of themselves, ageing and research.

**User Involvement and Community Impact**

Sarah Howson and Lorna Warren

This presentation addresses the conference themes of 'Ageing and the Arts and Humanities' and 'Intergenerational perspectives' by the example of an intergenerational workshop organized in a school in Sheffield.

This paper examines the nature of collaboration between young and older people and looks at the importance of involving older people in research. The Look at Me project based at Sheffield University is a unique project that challenged the current societal perceptions of older women. The Second World Assembly on Ageing in 2002 recognized a need to challenge stereotyped images of ageing, particularly in relation to older women. As encouraged in the PSHE guidelines, the workshop provided the opportunity for children to engage with the wider community through the involvement of older people. Members of this group collaborated on the design of the event and also participated over the 2 days. Through direct engagement with older people, the children were



encouraged to develop intergenerational relationships with members of the wider community and think collaboratively about methods and means for challenging and overcoming negative perceptions of older people, as well as respecting differences.

### **Older Peoples' Perspectives on Involvement**

Mary Sinfield, on behalf of the Older Peoples Reference Group

The purpose of this paper is quite straight forward: to give a perspective on the involvement of older people in research from those who are actually being involved. The presentation will involve two members of the NDA Older Peoples Reference Group (OPRG) – a group created specifically to engage older people in both the 34 individual NDA projects and the programme as a whole. We will, first of all, describe our own personal experiences of 'being' involved and what this has meant in practice. We will also draw on the accounts of other OPRG members. Then we will highlight the main barriers we have encountered in trying to get involved finally we will evaluate our contributions against the impact criteria agreed by the OPRG and NDA Programme Director.

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**Stream:** Participation and Engagement

**Date:** Friday 13 July 2012 **Time:** 08:40–10:00

**Abstract ID:** 126

**Title:** Participation and beyond: ways of understanding the impact and value of older people's involvement in ageing research

**Method:** Symposium

**Author:** Lizzie Ward

**Institution:** University of Brighton

**Co-authors:**

Marian Barnes

Denise Tanner

Rosemary Littlechild

Jill Bindels

**Chair:** Lizzie Ward

**Discussant:** Mo Ray

There has been increasing recognition that research provides a significant site of involvement for health and social care service users and that co-production of knowledge is an important way of achieving change. In relation to older people, social gerontologists have long argued for the necessity of understanding the lived experiences of ageing and involving older people in research has been identified as a priority in the recent Futurage road map for European ageing research. Yet there remains much work to be done not only in evolving detailed research practice with (rather than on) older people, but crucially in gaining recognition for the value of experiential knowledge of ageing and old age from policy makers, practitioners and academic peers.

Involving older people in research can mean different things – from consultation, advising, developing, carrying out and commissioning research. Whilst demonstrating ‘impact’ is not unique to participatory research with older people involvement places particular responsibilities on academic researchers to consider how and in what ways involving older people as active participants in the research will ‘make a difference’ to the research process and to the outcomes.

## **Objectives**

This symposium explores the challenges and benefits of working beyond traditional academic boundaries to involve older people both in research processes and in the application of research findings and dissemination. We will also be considering how participation processes can be opened up to practitioners. The papers, which are based on three different projects in which older people were co-researchers, reflect different dimensions of impact and how involving older co-researchers made a difference to the research process, to those who undertook the research and to the ways in which the research was disseminated.

It aims to stimulate discussion on:

- the relationship between substantive research findings and the ways in which research is carried out;
- the challenge to power relations and hierarchies in knowledge production that underlie involvement;
- how we understand ‘impact’ on the process and outcomes of this type of research;
- how to achieve genuine openness to transforming the way in which knowledge is produced through older people's involvement.

## **Older people as co-researchers: a collaborative journey**

Jill Bindels

This paper draws on an evaluation of a research collaboration between two academic researchers and three older people as co-researchers. A detailed description of the collaboration is provided here, using the metaphor of a journey to illustrate the dynamics and the learning process of the participants. It explores the role of co-labouring, expressing mutual expectations, discussing role divisions, and information sharing in achieving a successful collaboration.

## **"So what's next?" Participation beyond the interviews**

Rosemary Littlechild, Denise Tanner

This paper draws on a Department of Health-funded research project exploring the experiences of transitions between care services of older people and their carers.

The paper focuses on the impact of involving 'seldom heard' older co-researchers in the implementation and dissemination activities with the agencies. It draws upon the evaluation completed during the project and on reflections undertaken by key players after the research was complete. The paper examines why the research team considered it important to involve co-researchers in the implementation phase and the different ways in which they were engaged.

## **From co-production to co-application of knowledge with older people**

Lizzie Ward

This paper reports on an ESRC[1] funded knowledge exchange based on an ethic of care framework. It brings together older people, practitioners and academic researchers who are interested in effective participation of older people in developing good practice in social care services. It draws on substantive findings and methodological learning from a research project on older people and well-being in which older people participated as co-researchers. We reflect on the work to date to consider the issues and challenges of bringing together older people, practitioners and academics in the co-application of knowledge to develop practice to enable older people's well-being.

[1] Grant no ES/J001058/1

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**Stream:** Participation and Engagement

**Date:** Friday 13 July 2012 **Time:** 10:30–11:30

**Abstract ID:** 48

**Title:** An intercalated BSc in Gerontology: a critical account.

**Method:** Oral

**Author:** Anthea Tinker

**Institution:** King's College London

**Co-authors:**

Ruth Stewart

Jade Landers

May Wells

Kathryn Price

In September 2011 the Institute of Gerontology, King's College London, opened its doors to its first cohort of undergraduate medical students. Four students from three Medical Schools were accepted. This unique intercalated BSc aims to provide an additional year of education; widening knowledge of the ageing process and developing skills in research. A critical account of their experience is presented; examining this course's potential as an approach for other BSc's and exploring the benefits of a social science degree for medical students. Following student group discussions they have developed a balanced account of their experiences. Critique of the course will include: the relevance to medical students of a social gerontological perspective; awareness of policy relating to the care of older people; a social approach and its applicability to inter-professional relationships in a medical setting and training in research methods. Based on their experiences, they suggest that gaining a social perspective on patient health and care is an important but under-represented facet of medical education. They therefore argue that it should be the focus in more intercalated BSc's. However, there are difficulties associated with undertaking a degree in social science coming from a medical background, and these need to be taken into account when designing the teaching methods, structure, and level of student support. They also feel that there are implications for medical education as a whole in their experience.

Key words Gerontology Education

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**Stream:** Participation and Engagement

**Date:** Friday 13 July 2012 **Time:** 10:30–11:30

**Abstract ID:** 115

**Title:** The mediating effect of age on lifelong education and self-efficacy

**Method:** Oral

**Author:** Ben Chi-pun Liu

**Institution:** Brunel University

**Co-author:** Dion Sik-yee Leung

**Objective:** This panel study aims to assess whether age has mediating effects on Chinese adult learners' lifelong education and self-efficacy over a year's time.

**Method:** About 6,500 Chinese adult learners joined a lifelong learning programme, which comprised face-to-face and radio-broadcasting courses, in Hong Kong in 2008. 988 of them participated in this study, and were re-assessed in 2009. Key measurements include General Self-Efficacy Scale and respondents' study patterns in the Programme.

**Results:** At follow-up, respondents' mean age was 53.7 (SD = 6.9), of whom 99% were females. Structural equation modelling result shows that age did not mediate the effects of increased interest in lifelong education and self-efficacy at baseline on respondents' level of self-efficacy and total number of enrolled courses at follow-up (RMSEA = .026, 90% CI = .000, .093; CFI = .997, Chi-square (df,1) = 1.699,  $p = .192$ ). That is, respondents, regardless of their age, would develop a better level of self-efficacy over time if their interest in lifelong education was increased after participating in the Programme, and if they have had a good level of self-efficacy at baseline. A positive correlation between increased interest in lifelong education and self-efficacy was also found indicating that the more the respondents were interested in learning, the better their self-efficacy would be, and vice versa. The model can explain 43% of variance in predicting the level of self-efficacy over time.

**Conclusion:** Our study confirms the positive effects of active involvement in learning across the lifespan. It also counteracts the stereotypes on ageing that have negatively shaped the self-concepts of older adults and restricted their involvement in lifelong learning, and challenges the dispositional barriers to participation in adult education e.g. "too old to learn". Implications for practice and policy will be discussed.

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**Stream:** Participation and Engagement

**Date:** Friday 13 July 2012 **Time:** 10:30–11:30

**Abstract ID:** 146

**Title:** Educational trajectories and wellbeing: a lifecourse perspective

**Method:** Oral

**Author:** Andrew Jenkins

**Institution:** Institute of Education, University of London

**Co-author:** Dick Wiggins

This project presents new quantitative evidence for contemporary 'third age' individuals on the relationship between their individual histories of learning and subsequent well-being. In the European Union there is a mounting policy interest in the influence of learning on a range of outcomes, notably health and wellbeing. However, much of the research to date has tended to focus on younger adults and the immediate benefits of participating in courses. The longer term outcomes, such as the potential of accumulated learning experience for enriching later life, have been neglected. Our research therefore adopts a lifecourse approach to participation in learning and the potential benefits of learning. We will present typologies of participation in learning through the lifecourse into early old age, and then to relate these differing learning 'trajectories' to wellbeing at age 50. We use data from the UK's National Child Development Study (NCDS). This is a large-scale survey that contains information on all those born in Britain in one week in 1958. Follow-up data collection has taken place at various points in childhood and adulthood, most recently at age 50. Wellbeing at 50 is analysed as an outcome in path analyses and structural equation models. Our results will show, firstly, the extent to which engagement in learning has an impact on wellbeing at 50 after allowing for other factors and, secondly, whether the various learning trajectories have differential effects on wellbeing.

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**Stream:** Understanding Dementia

**Date:** Wednesday 11 July 2012 **Time:** 14:00–15:40

**Abstract ID:** 26

**Title:** "The living death of Alzheimer's"? Representations of dementia in media and carer discourse

**Method:** Oral

**Author:** Elizabeth Peel

**Institution:** Aston University

Understanding dementia is a pressing challenge as societal awareness increases; the economic care burden is recognized; and calls for redress of the legacy of research underfunding amplify. This paper draws on the British Academy funded 'Dementia Talking: Care conversation and communication' project, which aims to understand how talk about, and to, people with dementia (PWD) is constructed, with the goal of improving communication with PWD. One aspect in understanding dementia is exploring how PWD are represented in societal discourse. In this paper I draw on the construction of PWD manifest in two data-sets – a corpus of 350 recent UK national newspaper articles about dementia and qualitative data derived from informal carers of PWD in focus groups (n=15) and in-depth interviews (n=12). These data were analysed using thematic discourse analysis. A 'panic-blame approach' was evident in much of the print media coverage, with dementia being presented as 'worse than death' juxtaposed with behavioural change recommendations to 'stave off' the condition exemplified in headlines like 'Take a Walk to Keep Dementia at Bay'. Conversely, carers' articulated awareness of stigma, ageism and taboo in the societal representation of dementia and offered a range of perspectives on how PWD are discussed in society. Contrary to media discourse, there was scant mention in carers' accounts of individual responsibility for health, and its corollary blame and accountability for dementia; when this was discussed participants did so critically. In conclusion, suggestions are provided about how the cultural representation of PWD could be improved.

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**Stream:** Understanding Dementia

**Date:** Wednesday 11 July 2012 **Time:** 14:00–15:40

**Abstract ID:** 117

**Title:** A narrative approach to understanding dementia: perspectives on quality of life among older people with dementia and carers

**Method:** Oral

**Author:** Jane Robertson

**Institution:** University of Stirling

This research examines narratives about the quality of everyday life with dementia. The aim of the PhD study was to compare and contrast differing perspectives about the impact of ageing and dementia upon the lives of older people with dementia. Fifty interviews with six older people with dementia and ten family and paid carers were conducted over a two-year period. Narrative analysis was used to examine the content and structure of individual accounts to understand different perspectives on what matters most to people living with dementia. This in depth analysis enabled an exploration of different social concepts and narrative constructions that people draw upon in making sense of their experiences of caring and living with dementia. The analysis demonstrated that older people incorporate ageing and dementia into a continuing sense of self. The emphasis is on living an ordinary life while responding to the challenges associated with cognitive impairment and social stigma. For family and paid carers, perceptions of a meaningful life depend on how the identity of the older person with dementia is positioned relative to past social roles and relationships. Perspectives are influenced by how the person is perceived to conform to social standards of normality. These findings show that, for all, finding meaning in everyday life depends upon making sense of that life as normal and ordinary.

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**Stream:** Understanding Dementia

**Date:** Wednesday 11 July 2012 **Time:** 14:00–15:40

**Abstract ID:** 34

**Title:** Dementia stories: from invisible to visible?

**Method:** Oral

**Author:** Allison Kirkman

**Institution:** Victoria University of Wellington

Taking up the theme of the proposed conference keynote address by Professor Murna Downs – From Invisible Patient to Citizen and Activist: Dementia Comes of Age – this paper explores the narratives and images of people with dementia and their families, friends and carers. Late 20<sup>th</sup> century representations of people with dementia in the media were almost always through the voices of their families or carers and this has been described as a ‘social death’ for the person with dementia. This paper examines publicly available sources including the print media, Alzheimer organization publications and websites to illustrate the shift that has taken place. Today there are more narratives from people with dementia although the narratives of the carers or family members still predominate. How these narratives are shaped within the context of the prevailing discourses of health and illness is identified. Some unintended consequences of the current narratives and images are also examined, especially the way the increasing focus on younger people with dementia leads once again to the absence of older people being represented. This research was carried out in New Zealand and Australia but parallels are drawn between the findings for these societies and other similar societies.

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**Stream:** Understanding Dementia

**Date:** Wednesday 11 July 2012 **Time:** 14:00–15:40

**Abstract ID:** 46

**Title:** Change and continuity in dementia

**Method:** Oral

**Author:** Kritika Samsi

**Institution:** King's College London

**Co-author:** Kritika Samsi

Change is apparent in most discussions around the lived experience of dementia. The concept of continuity, however, is less well understood. This paper explores the significance of continuity, and using it as a means to cope on a daily basis. Using Interpretative Phenomenological Analysis, 9 people with dementia and their 9 carers were interviewed about managing with dementia on a daily basis. Inherent within narratives was the emphasis placed by people with dementia and carers on continuity and retained factors, abilities that could be managed and components of their lives that had remained intact, such as lifelong personality characteristics and habits. Change was rarely identified at the outset and, when probed, participants with dementia discussed change in relation to techniques used to manage change. Techniques of management used often related to past habits and characteristics, which in turn further reinforced continuity of their sense of self. Reports of positive quality of life were found to be related to the level of continuity people with dementia expressed. The role of carers in supporting these feelings is also explored. This is the first study to look in detail at how elements of continuity can enhance the lives of people with dementia and carers and enable them to cope more effectively and experience greater well-being. This study has methodological relevance for the field of quality of life, as well as to develop long-term support strategies for people with dementia.

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**Stream:** Understanding Dementia

**Date:** Wednesday 11 July 2012 **Time:** 14:00–15:40

**Abstract ID:** 33

**Title:** Dementia as a cultural metaphor

**Method:** Oral

**Author:** Hannah Zeilig

**Institution:** Institute of Gerontology, King's College, London

'If we are what we remember, what are they  
That don't have memories as we have ours...'

(From 'The Mother of the Muses', Tony Harrison)

It is now widely accepted that the category 'dementia' should be questioned. Recourse to a solely biomedical model of dementia has been criticized and the importance of considering the social construction of the condition has been emphasized. Critical gerontology affords some of the most useful perspectives for considering dementia as a cultural phenomenon. It encourages us to probe the cultural and historical influences that have shaped our understanding of this condition and queries how societies have constructed and defined 'dementia'. Critical gerontology references a wide range of cultural sources as a means of mapping the interiority of dementia. This paper will examine some of the ways in which contemporary culture has framed 'dementia' (drawing on film, theatre, memoirs, novels and poetry). These representations will be examined as they either perpetrate or challenge stereotypes about living with dementia. They will also be interrogated as a means for understanding the subjectivity of living with dementia. Analysis of these discourses will be guided by some of the questions that are fundamental to critical gerontology. These include the ways in which the socio-cultural construction of dementia shapes our understanding and the extent to which 'dementia' is a diachronic phenomenon. Above all, the paper will consider the term 'dementia' as it is a metaphorical device in our society.

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**Stream:** Understanding Dementia

**Date:** Wednesday 11 July 2012 **Time:** 16:10–17:10

**Abstract ID:** 66

**Title:** Emotional responses to observation research in the field of dementia care: ethical and moral considerations

**Method:** Oral

**Author:** Kay de Vries

**Institution:** Graduate School of Nursing Midwifery and Health, Victoria University of Wellington

**Co-authors:**

Dawn Brooker

Jenny La Fontaine

Tom Porter

The place of 'emotionality' is a neglected area of research and until recently there has been a reluctance of many researchers to publish their own emotional reflections regarding the research process. These emotional responses may also have considerable impact on researchers that go beyond the everyday practice of being a professional conducting research and the impact may be long term. This presentation addresses the experiences and emotional responses of four researchers in developing an observation tool to be used to observe the everyday life of people with dementia in care home settings to assess for potential for abuse, neglect and loss of dignity. During the experience of observation we found ourselves experiencing a powerful range of emotional responses to the experiences of the people with dementia who we were observing. In discussing these in detail during our debriefing meetings we reflected on our moral and ethical position as non-participant observers of people with dementia who were not in a position to understand our reasons for being present in their environment.

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**Stream:** Understanding Dementia

**Date:** Wednesday 11 July 2012 **Time:** 16:10–17:10

**Abstract ID:** 118

**Title:** The role of assistive technology for personal care in enabling families to care for relatives with dementia in their location of choice

**Method:** Oral

**Author:** Suzanne Hardy

**Institution:** King's College London

**Co-authors:**

Karen Glaser

Anthea Tinker

The UK's National Dementia Strategy (Department of Health, 2009) objectives include; i) ensuring that people with dementia live well (whether in their own home or in a care home) and ii) a call for more research on the role of AT to address the needs of people with dementia and their carers. The aims of this PhD are to investigate whether, and if so, how, Assistive Technology (AT) can be used to assist people with dementia to conduct personal care Activities of Daily Living (ADLs). These include hygiene matters such as washing, toileting and continence, grooming and feeding oneself. This study is examining the role AT can play in enabling those caring for a relative with dementia to make choices about their location of care. An in-depth multiple contrasting case study design is exploring perceptions of formal (care home keyworkers) and familial carers of care home residents with a clinical diagnosis of dementia on AT use for personal care ADLs.

The project further aims to explore the link between physical and psychological co-morbidities, AT use and changes in care circumstance using English Longitudinal Study of Ageing (ELSA) data.

Four care homes will act as gatekeepers to enable access to potential participants.

The results from the different stages will then be triangulated to ascertain the difficulties and preferences carers of people with dementia have when attaining, using and maintaining AT and its contribution to the quality-of-life of such individuals.

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**Stream:** Understanding Dementia

**Date:** Wednesday 11 July 2012 **Time:** 16:10–17:10

**Abstract ID:** 22

**Title:** An exploration into how the general public understand and respond to dementia

**Method:** Oral

**Author:** Patricia McParland

**Institution:** University of Stirling

**Objectives:** The way the general public understands dementia influences interactions with someone who has dementia, the institutions we create and the type of care we provide. While considerable research has examined the attitudes of professionals and carers to dementia, there is a dearth of research examining the attitudes of the general public. The objective of this study was to explore how the general public understands dementia and how it might impact on the way the people respond to dementia.

**Methods:** This was a three year mixed methods study, including an attitudinal survey of 1200 people across Northern Ireland, 5 focus groups and 9 interviews carried out with a random selection of participants from the survey. Survey data were analysed using SPSS and qualitative data were analysed thematically.

**Results:** Findings indicate the influence of age, education and whether or not the respondent knew someone with dementia. Little distinction is made between those who have just been diagnosed and those who have been living with dementia for a long time suggesting a stereotypical view of dementia. There is significant evidence of stigma and in particular of participants' need to see people with dementia as "other". There is also evidence to suggest that participants view life with dementia as a life not worth living.

**Conclusions:** The general public understands dementia in a way that results in a deeply stigmatizing response to people with dementia.

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**Stream:** Understanding Dementia

**Date:** Thursday 12 July 2012 **Time:** 08:40–10:20

**Abstract ID:** 98

**Title:** Behavioural and psychological symptoms of dementia (BPSD) and their management – a postal survey to care homes

**Method:** Oral

**Author:** Tamara Backhouse

**Institution:** University of East Anglia

**Context:** Behavioural and psychological symptoms of dementia (BPSD) are common. They can diminish the quality of life of people with dementia, can be difficult for carers to cope with and can impact on caregiver burden. At present, much attention is focused on how best to manage BPSD. This issue is particularly pertinent for care homes; yet, little is known about how BPSD are currently managed within these settings.

**Aim:** To determine which behaviours can cause difficulties for care home staff and the range of strategies used within care homes in England to cope with challenging behaviours.

**Method:** Short postal surveys were sent to the care home managers of all care homes registered for older people or/and dementia within 4 counties in the East of England (n=747).

**Results:** Of the 40% response rate 85% of care homes reported caring for people with dementia and 43% had experienced an episode of challenging behaviour within the last week. Aggression was perceived by 38% of managers as being one of the most difficult behaviours to manage. Reminiscence and music therapy were the strategies most used in care homes and 12% of care home residents were reported to be prescribed antipsychotic medication.

**Conclusions:** With numerous behaviours creating challenges for care home staff the management of BPSD is an important issue within care homes. Care staff are using multiple strategies to help cope with these behaviours. Despite the recent English Government strategy to reduce antipsychotic use it still appears to be considerable within care homes.

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**Stream:** Understanding Dementia

**Date:** Thursday 12 July 2012 **Time:** 08:40–10:20

**Abstract ID:** 36

**Title:** Everyday independent and joint decision-making by people with dementia and carers

**Method:** Oral

**Author:** Kritika Samsi

**Institution:** King's College London

**Co-author:** Jill Manthorpe

The Mental Capacity Act 2005 (MCA), implemented in England and Wales in 2007, provided frameworks to enable people with dementia to make their own decisions or with the assistance of others, if required. These decisions may include everyday decisions, as well as major decisions about care, treatment and finances. We wanted to investigate if the MCA had impacted on everyday decision making for people living at home and their carers. Our qualitative longitudinal case study research followed 12 dyads (comprising person with dementia and carer) over 9-12 months to explore their accounts of everyday decision-making (2011-12). We analysed types of decisions made, who made the decisions, how joint decisions were arrived at, and what (if any) sources of support were sought. Findings revealed a range of decision-making styles. Although most people with dementia supported principles of independent decision-making, when it came to everyday decisions, they were often happy to leave it to their trusted carer. Spouse carers appeared more likely to rely on knowledge of their relative's personality and preferences when making a decision for them, while adult children carers relied on past conversations. Principles of the MCA appeared to underlie most everyday decision-making. A modification of the best interests principle, akin to that outlined in the MCA, emerged when some carers talked of weighing up the significance of a decision that needed to be made yet making the decision on behalf of their relative if it seemed to be insignificant.

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**Stream:** Understanding Dementia

**Date:** Thursday 12 July 2012 **Time:** 08:40–10:20

**Abstract ID:** 37

**Title:** Experiences of advanced care planning amongst family caregivers of people with advanced dementia.

**Method:** Oral

**Author:** Susan Ashton

**Institution:** Liverpool John Moores University

**Co-authors:**

Brenda Roe

Barbara Jack

Bob McClelland

**Background:** The implementation of advance care planning (ACP) was studied in one long-term specialist dementia unit within the independent sector.

**Aim:** The purpose of this study was to gain an understanding of the experiences that family caregivers had as proxy decision makers for a relative with advanced dementia during ACP discussions with care setting staff.

**Methods:** Semi structured interviews with family caregivers provided data on the experience of the implementation of the advance care planning process. Close family relatives were selected through purposeful sampling for inclusion into the study.

**Results:** Study participants were clear on what the ACP included and expressed benefits of undertaking open and honest discussions with care staff. ACP discussions were not always welcomed and often required some preparation before study participants were ready to engage in these discussions. Participants expressed some reservations about how the ACP would be put into practice and cited variations in care provision and attitudes of health professionals.

**Conclusion:** ACP is a valuable activity to undertake with the family carers of residents with advanced dementia. However the previous experiences of family caregivers may influence the timing and execution of ACP discussions and should therefore be supported by health professionals with appropriate knowledge and experience.

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**Stream:** Understanding Dementia

**Date:** Thursday 12 July 2012 **Time:** 08:40–10:20

**Abstract ID:** 23

**Title:** Living with dementia in small-scale and traditional long-term care settings in the Netherlands and Belgium

**Method:** Oral

**Author:** Letje de Rooij

**Institution:** Tranzo, Tilburg University, The Netherlands

**Co-authors:**

Jos Schols

Anja Declercq

Katrien Luijkx

**Background:** The number of people living with dementia worldwide is increasing, resulting in a need for more residential care. In response to criticism of the traditional medical approach to residential dementia care, many large nursing homes are transforming their traditional care facilities into more home-like small-scale living facilities.

**Objective:** This study examined the assumed benefits of small-scale living for residents with dementia, compared to traditional long-term care in the Netherlands and Belgium. The primary outcome was quality of life, divided into nine different domains.

**Design:** The study had a longitudinal design within a one-year time interval. Five long-term care settings in the Netherlands and Belgium containing four traditional and twelve small-scale living units participated in the study. Data were obtained from 179 residents with dementia. Nurses and nursing assistants were trained to fill in the questionnaires.

**Results:** In the Netherlands, residents in small-scale settings had higher mean scores on 'Social Relations', 'Positive affect', and 'Having something to do' than residents in traditional settings. In Belgium, residents experienced less 'Negative affect' than those in traditional settings. However, over time residents 'Felt more at home' in traditional settings, whereas no such increase was found for small-scale settings.

**Conclusions:** Both small-scale and traditional settings appear to have beneficial effects on different domains of quality of life of residents with dementia. Future research should focus more on the quality and content of the care provided, than on the effects of the scale and design of the environment in long-term care settings.

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**Stream:** Understanding Dementia

**Date:** Thursday 12 July 2012 **Time:** 08:40–10:20

**Abstract ID:** 45

**Title:** ALCOVE: sharing knowledge to enlighten healthcare policies in Europe for people living with dementia and their carers

**Method:** Oral

**Author:** Simon Evans

**Institution:** University of Worcester

**Co-authors:**

Dawn Brooker

Jenny La Fontaine

Jennifer Bray

The last 50 years have seen a dramatic increase in healthy life expectancy and a corresponding elevation in diseases linked to ageing, particularly dementia. Given the high prevalence, cost, and profound impact on society of dementias they are a public health priority at the EU level.

This presentation reports on Alzheimer's COoperative Valuation in Europe (ALCOVE), a Joint Action co-financed by the European Commission and comprised of 30 partners from 19 EU Member States.

ALCOVE's main objectives are: 1) To establish a European network of healthcare institutions; 2) to inform and advise policymakers, healthcare professionals, caregivers, and citizens through convergent recommendations; 3) to reduce the risks associated with psychotropic drug use, particularly antipsychotics.

ALCOVE aims to improve data on dementia prevalence; access to early dementia diagnosis; care for those living with dementia, especially those with behavioural and psychological symptoms; and the rights of people with dementia.

This presentation will briefly describe the work of ALCOVE, which is being carried out across 7 work packages: Coordination (led by France); Dissemination (Spain), Evaluation (Slovakia); Epidemiology (Italy); Early diagnosis (United Kingdom); Care and services (Finland); and Rights and Dignity (Belgium)

We then focus on the initial findings arising from work package 5 in two main areas:

- Comparing national systems for the diagnosis of dementia in order to access to a common definition with associated operational criteria; and
  - Evaluating diagnostic systems in EU member states in order to formulate recommendations for improving early diagnosis, both in community and nursing home settings.
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**Stream:** Understanding Dementia

**Date:** Thursday 12 July 2012 **Time:** 14:00–15:40

**Abstract ID:** 24

**Title:** Development, delivery and evaluation of a training programme to prepare the NHS and Social Services Dementia Champions in Scotland

**Method:** Symposium

**Author:** Pauline Banks

**Institution:** University of the West of Scotland

**Co-authors:**

Anna Waugh

Barbara Sharp

Jenny Henderson

Margaret Brown

Jo Oliver

Angela Kydd

**Chair:** Pauline Banks

Background: Current figures suggest that 84,000 people in Scotland have dementia, and that this number will double in the next four decades. Recognition of the importance of dementia as the population ages has resulted in a spate of policy documents across the UK. Dementia Strategies in Scotland and England have been followed by further reports and guidelines focusing on the process of achieving improved care for people with dementia. Recognition that knowledge and understanding of dementia amongst health and social care staff, including non-specialist staff in general hospital settings and/or Accident and Emergency impacts on the experiences of people with dementia who are admitted to hospital, and their carers, has prompted the Scottish Government, through NHS Education for Scotland, to commission the development, delivery and evaluation of a training programme to prepare 100 NHS and Social Services Dementia Champions as Change Agents.

This symposium will include four papers relating to the Dementia Champions Programme, which was delivered across Scotland between October 2011 and February 2012:

### **The Scottish Dementia Champions Programme**

Paper 1 will set the context and background drivers to the development, delivery and evaluation of the Scottish Dementia Champions Programme. Details of the programme content, methods of delivery, support for participants, and exit strategy will be presented. The programme, which was delivered via blended learning, comprised five study days on four sites, a half day spent in a local community setting, and e-learning and support using UWS's Virtual Learning Environment (VLE). Participants were able to access materials, communicate with each other, and receive support from members of the education/evaluation team using the VLE. In order to complete the programme and graduate participants were required to complete and submit reports relating to three activities, 1) A half day spent in a community setting for people with dementia, 2) An evaluation of their clinical area, 3) Planned changes/actions. These reports were included in their portfolio of practice, and also used by the training team to contribute to the programme evaluation.

## Supporting Change

Paper 2 presents information relating to the development of a workbook, *Supporting Change*, which was designed to enable the Champions to assess their workplace, priorities areas of need and plan and implement actions to directly improve care. The workbook, which was inspired by the work by Brooker (2007), comprised elements of good practice derived from current best evidence, social policy and practice, including the Standards of Care for Dementia in Scotland. Participants on the Dementia Champions programme used the material included in the workbook as a benchmark to evaluate their own work places, and on the basis of these evaluations, to develop plans for change.

## Evaluation

The evaluation of the project adopted a two-pronged approach:

- 1: Participants were asked to evaluate the pre-course materials and study day input for each of the five study days, as well as their satisfaction with the VLE and personal tutor support.
2. Because the programme was delivered over a period of six months, it was not possible to gauge the impact on outcomes such as patient experience, length of inpatient stay etc. However, we aimed to measure distance travelled using scores derived from the Approaches to Dementia Questionnaire (Lintern, 1996) completed at Study Days 1 and 5, and qualitative data derived from the three written assignments.

Analysis of data derived from the ADQ and 100 reflective reports of the community experience indicate that participants' perceptions of people with dementia shifted significantly during the programme.

## Moving on

The final paper in this symposium presents an analysis of data derived from assignments 2 and 3, Clinical Evaluation & Action Planning, and Change Assignment. Findings indicate that participants utilized the *Supporting Change* workbook to facilitate identification of a range of issues that should be addressed with a view to improving the experiences of people with dementia in acute settings. Examples of proposed and on-going development are presented.

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**Stream:** Understanding Dementia

**Date:** Thursday 12 July 2012 **Time:** 16:40–18:00

**Abstract ID:** 153

**Title:** Connecting with the world through physical activity: an exploration of the perceptions and experiences of people with dementia

**Method:** Oral

**Author:** Alan Wright

**Institution:** University of Huddersfield

**Co-authors:**

Mike Lucock

Sharon Wray

In the past dementia research involving physical activity has tended to adopt a biomedical perspective. Defining dementia in terms of an illness has had several consequences. The highly individual experience of dementia is simplified and presented as stepwise process involving cognitive and functional loss. Physical activities such as exercise and dance are seen purely as treatment options with which to manage problematic symptoms or as a means of avoiding the condition in the first place. Meanwhile, the viewpoint of the person experiencing dementia and the social meanings that they and their carers attach to physical activity has been neglected.

When asked about living with dementia it is clear that the experience varies markedly between individuals. It is also recognized that many people with dementia maintain a complex relationship with physical activity that has little to do with managing the effects of an illness. For them, engaging in physical activity enables them to gain a sense of wellbeing through self-expression and a connection with the world around them.

This qualitative study based in West Yorkshire used participant observation and semi-structured interviews to explore the views and experiences of people with dementia. Participants originated from a variety of different ethnic backgrounds and attended a number of day centres and “wellbeing cafes”. Some participants managed to overcome significant barriers in order to engage in physical activities. Others had their need to engage in activities thwarted. This presentation will discuss the factors that make physical activity based interventions effective and valuable to people with dementia.

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**Stream:** Understanding Dementia

**Date:** Thursday 12 July 2012 **Time:** 16:40–18:00

**Abstract ID:** 226

**Title:** Not just for art's sake: promoting quality of life for older people with dementia through creative arts

**Method:** Oral

**Author:** Maria Parsons

**Institution:** Creative Dementia Arts Network

**Co-author:** Sarah Plumb

Lost in Time and Space is project involving younger people and older people with dementia and their carers who are introduced to the ideas of memory, perception and identity through the work of Kerry Tribe and Shezad Dawood. Working with artists, filmmakers and writers the younger participants are facilitating reminiscence and helping older participants explore their collective and personal histories including memories of Oxfordshire. Other ways of stimulating ideas about memory and the brain as a museum have included visits to the Pitt Rivers Museum with its huge anthropological collection as well as work with haptic objects. Preparatory activities are being documented by the younger people who will be leading the filming of a documentary or mock-documentary, including imagery and metaphor, that consider changes, challenges and choices in the lives of older people with dementia. Both groups are marginalized to some degree yet the experience of creating a film together offers opportunities to learn skills in film making and editing and to be exposed to different art forms in a modern gallery setting. A structured evaluation is being carried out to evidence a range of outcomes for both older and younger participants including reduction in social isolation and increase in confidence and self-esteem. Early results are showing the capacity of older people to learn new skills and recall learnt skills whilst younger peoples' understanding of dementia has increased and their attitudes have changed. Outputs include an exhibition at Modern Art Oxford and a film that will be widely disseminated.

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**Stream:** Understanding Dementia

**Date:** Thursday 12 July 2012 **Time:** 16:40–18:00

**Abstract ID:** 224

**Title:** Implementing outcomes focussed approaches with people with dementia: lessons from the Talking Points programme

**Method:** Oral

**Author:** Ailsa Cook

**Institution:** University of Edinburgh

The National Dementia Strategies for Scotland and England promote an outcomes focus to commissioning and assessment, care planning and review to achieve overarching policy goals of personalization and early intervention (Department of Health, 2009; Scottish Government, 2010). However evidence to date suggests that implementation of outcomes focussed approaches is patchy and requires substantial organizational and systemic change (e.g. Glendinning et al, 2007; Miller, 2012).

This paper presents findings from a five year programme of knowledge exchange that sought to support and inform the development and implementation of outcomes focussed approaches in practice. The 'Talking Points' programme was led by two academic researchers and the Joint Improvement Team of the Scottish Government and carried out with more than 40 organizations. This programme used a range of collaborative researcher and practitioner led methods to understand and share practice, identify solutions to common issues and to trial and evaluate changes in practice including: local and national workshops, action learning sets, local pilots and independently conducted national reviews.

This work found that people with dementia were routinely excluded by participating organizations from development work around outcomes. Low staff confidence and skills in engaging with people with dementia and concerns as to the reliability of information were critical factors. Collaborative work across organizations led to the identification of a range of strategies and approaches to overcome these difficulties, including focus on conversational approaches, use of Talking Mats and shifting recording practices. The paper concludes with implications of the findings for dementia policy and practice more broadly.

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**Stream:** Understanding Dementia

**Date:** Thursday 12 July 2012 **Time:** 16:40–18:00

**Abstract ID:** 251

**Title:** A mobile therapy unit for older people diagnosed with dementia: the Brain-bus

**Method:** Oral

**Author:** Alison Bowes

**Institution:** University of Stirling

**Co-authors:**

Barbara Graham

Michael Wilson

Cognitive stimulation and engagement in activities are widely recommended for care home residents who have dementia, but the precise impacts of these remain under-researched. This paper explores the effects of a mobile therapy unit for the people with dementia who used it and the staff who supported them in care homes. The evaluation involved quantitative and qualitative data collection over ten months of Brain bus use, employing a two group repeated measures design with control and intervention groups at each of two care homes. Key findings were that bus users showed improvements in general health, lower levels of depression, increased mobility and cognition and enhanced interaction and engagement with staff. Staff were able to engage with bus users one-to-one, getting to know them well and therefore being able to support their personal choices of activities on the bus. Bus users chose their preferred activities, and expressed enjoyment of the bus. The activities supported capacity, and users showed learning over the months of the evaluation. The musical activities were especially popular, and supported individual choice and engagement. In conclusion, we reflect on the implications of these findings for understandings of person centred approaches to support for people with dementia, and the provision of activities in care homes.

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**Stream:** Understanding Dementia

**Date:** Friday 13 July 2012 **Time:** 08:40–10:00

**Abstract ID:** 30

**Title:** National Audit of Dementia: key results and recommendations

**Method:** Symposium

**Author:** Peter Crome

**Institution:** Keele University

**Co-authors:**

Rosemary Wooley

Chloe Hood

**Chair:** Peter Crome

The majority of patients in acute hospitals are older people and approximately 30% have dementia or other cognitive impairments. It is recognized as a priority to improve the care of this group who are at greater risk of complications and prolonged hospital stays. The National Audit of Dementia, which took place in 99% of acute hospitals in England and Wales, surveyed the patient experience by case-note review, staff and relative questionnaires, environmental and organization checklists and, importantly, direct observation. None of the hospitals met all of the standards that were regarded as essential. Wide variations were seen and there was a major gap between what hospitals said they did and what practice identified by case-note review. Care pathways were infrequently in place and speedy access to support from psychiatry was limited. Inadequate training and staffing levels were reported. Recommendations on care pathways, the appointment of clinical leads, improved assessment, training, the environment and staffing were made. The observation identified elements of person-focussed communication underpinning best practice. With the further growth of the older population, hospitals must be designed and run by trained staff who are aware of the needs of people with dementia. Problematic issues related to the care and treatment of people with dementia within the acute hospital setting should not be resolved by denying admission when needed.

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**Stream:** Intergenerational Perspectives

**Date:** Thursday 12 July 2012 **Time:** 14:00–15:40

**Abstract ID:** 261

**Title:** International perspectives on Intergenerational relationships

**Method:** Symposium

**Author:** Alan Hatton-Yeo

**Institution:** The Beth Johnson Foundation

**Co-authors:**

Valerie Kuehne  
Susan Feldman  
Sarah Wellard

**Chair:** Alan Hatton-Yeo

Intergenerational work has never had a higher profile. 2012 is the European Year of Active Ageing and Intergenerational Solidarity. At the same time the current global economic crisis is raising questions about the nature of the relationships between and across the generations and this debate raises questions about the nature and strength of the intergenerational ties that contribute to the cohesion of our Society. This symposium will take an international perspective on this debate to explore the current state of relationships between the generations and use this as an opportunity for discussion and debate on the differing perspectives that range from intergenerational work as a major contributor to cohesion to the baby boomers as the people who have stolen the inheritance of the young.

Paper one will draw on a recently completed paper for the United Nations written as part of the anniversary of the First United Nations Policy for the Family. The paper explores a global perspective on intergenerational relationships both within the family and across the wider community.

Paper two will be delivered from a Canadian perspective and will summarize the current evidence and research base for intergenerational work and present conclusions as to how this emerging area of study is developing globally.

Paper three will focus down on an Australian programme that has recognized that food poverty is one of the great challenges for our Society and will present findings from an Australian programme to address this.

Paper four will present the rationale and methodology of a study currently being undertaken by Kings College and GrandparentsPlus on grandparenting across Europe. It will present the rationale and background for this study.

The Symposium has been designed to ensure there will be time for questions and elaboration

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**Stream:** Intergenerational Perspectives

**Date:** Thursday 12 July 2012 **Time:** 16:40–18:00

**Abstract ID:** 170

**Title:** Perceptions of ageing among UK's Chinese older people and their families-the implications for culturally sensitive services from intergenerational perspectives

**Method:** Oral

**Author:** Xiayang Liu

**Institution:** Northumbria University

Chinese people represent the fastest growing ethnic group in the UK. Meanwhile this group is ageing fast, with an increase of 2% over 8 years in the number of elderly people. Chinese older people are reported to have low healthcare service utilization, to experience a lack of social support, to have a high level of mental health problems, and to seldom take any physical exercise.

This research aims to explore ageing perceptions and experiences among the UK's older Chinese people and their families, to provide evidence for decision makers to ensure appropriate care and better public services for Chinese older people, and thus to improve their quality of life.

The research employs grounded theory as methodology and used focus groups: in stage 1, for baseline information and semi-structured one-to-one interviews; in stage 2, for in-depth understanding. Participants include Chinese older people aged over 60, and adult children of Chinese older people.

Themes that have evolved from the data so far include: 1) parent–child relationship, which is weakened, reversed, meanwhile bridging in the UK context; 2) needs of support, which could be grouped into emotion, social care, and information support; 3) facilitators for activities participation; 4) Chinese community; 5) household and living patterns

At the current stage, it has been found that children are the main resource of help and emotional support for Chinese older people, and the intergenerational support for Chinese older people could be grouped into emotion, language, information, and financial support.

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**Stream:** Intergenerational Perspectives

**Date:** Thursday 12 July 2012 **Time:** 16:40–18:00

**Abstract ID:** 25

**Title:** The new filial piety: Implications for Chinese daughters and elderly parents

**Method:** Oral

**Author:** Patricia O'Neill

**Institution:** University of Oxford

Xiao, or filial piety, is a patriarchal, hierarchal and collective construct historically binding Chinese families. Under Xiao, family members subscribe to a strict moral and social ordering featuring respect, obedience, loyalty, obligation and family honour, thereby creating an unbreakable bond of interdependence.

The demarcation between sons and daughters is central to perpetuating Xiao. Traditionally, sons were heavily invested in. Daughters, lacking economic value, were not. Daughters were either “married out” to become the domestic caregiver of their husband’s family, or remained with their own parents if unmarried. They were not educated nor permitted to work outside the home.

This paradigm has changed. Increasingly well-educated and employed, today adult Chinese daughters are often independent and financially self-sufficient. Nonetheless, elevated status and financial success have not necessarily translated into a commensurate diminution of filial responsibility.

This paper will explore how modern Chinese daughters view filial piety, whether it has changed from the past, and how it is being interpreted in terms of caregiving obligations to their own or their husband’s family.

During 2011 and 2012, semi structured interviews were conducted in Singapore and Hong Kong with thirty-eight Chinese women aged 31 to 65, three women over 65, and six foreign domestic workers. Qualitative analysis is currently being conducted using a thematic approach and Critical Incident Technique. Initial analysis suggests that commitment to the family remains strong in theory but not necessarily in practice. In this sample, respect, loyalty and duty still drive child-parent relations, but often conditionally rather than absolutely.

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**Stream:** Intergenerational Perspectives

**Date:** Thursday 12 July 2012 **Time:** 16:40–18:00

**Abstract ID:** 252

**Title:** Terminal care for Muslim patients with end-stage dementia: a cultural and family-centric approach

**Method:** Poster

**Author:** Jeffrey Ahmed

**Institution:** Imperial College London

**Co-authors:**

Sarah Alexander

Roderic Jenkin

Sushen Bhattacharyya

**Background:** The care of patients with end-stage dementia demands an holistic approach that inculcates the patient's values and beliefs. Complicating this care is the fact that patients in this situation are unable to articulate their wishes, unless an advance directive has been created. Patients' wishes may be expressed best by their close family. Palliative care as understood by clinicians – removing attempts at curative therapy to instead provide comfort and compassionate care – may be seen as unacceptable to members of some faith groups. Some Muslims consider the withdrawal of active curative medical therapy as an act of commission congruous to murder.

**Case:** We describe the care of a Muslim patient with end-stage dementia who developed terminal illness during an acute admission to our institution. The clinical team's opinion was that active medical therapy should be replaced by careful palliation. This was unacceptable to the patient's family, who became considerably distressed at the suggestion. Considering the patient holistically we modified her management to provide modest fluid resuscitation and antibiotic therapy – classically modalities of active therapy – while simultaneously beginning standard palliative measures. In so doing, the patient was not harmed nor did suffering occur, but the patient's family were relieved of significant grief. The patient died without pain or distress two days later.

**Conclusions:** The patient's family were thankful that the care she received was both compassionate but respectful of her religious belief. It is important that those involved in geriatric care understand the term empathy – identification with the feelings and thoughts of another – and apply this to compassionate palliative medicine to deliver the end-of-life care that patients of all belief systems deserve.

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**Stream:** Intergenerational Perspectives

**Date:** Thursday 12 July 2012 **Time:** 16:40–18:00

**Abstract ID:** 94

**Title:** The prevalence of inter- and intra-generational informal care within six black and minority ethnic groups living in England and Wales

**Method:** Oral

**Author:** Vanessa Burholt

**Institution:** Centre for Innovative Ageing

**Co-authors:**

Christine Dobbs

Christina Victor

The 2000/01 General Household Survey (GHS) data indicate that 10.7% of adults aged under 60/65 were providing care to an older person as were 14.7% of those aged 65+. These data demonstrate an established pattern of caring relationships amongst the general population. However, GHS data has insufficient sample sizes to facilitate explicit analysis of caring within minority communities; and the 2001 census data provide broad estimates of caring across ethnic groups but does not permit examination of detailed study of patterns of caring across and between generations. The concept of care implicit within the census/GHS questions represent a limited task orientated instrumental activity based 'caring for' underpinning and emphasizes the 'exceptionality' of caring focussing upon responsibilities over and above what is 'normal'. This paper presents preliminary analysis from a new study. It draws on data for 1,200 people from six black and minority ethnic (BME) groups (Caribbean, African, Indian, Pakistani, Bangladeshi and Chinese) and from two generational groups (200 per ethnic group; 600 aged 65+ and 600 aged 40–64) to establish the prevalence of informal family based care amongst minority communities in England and Wales and how this varies across the groups. Replication of GHS/census 'carer' questions facilitate explicit comparisons with existing data and enable us to generate robust prevalence estimates for these BME populations, whilst data on the provision and receipt of support for activities of daily living captures the extent to which caring activities form part of daily life within minority communities.

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**Stream:** Intergenerational Perspectives

**Date:** Friday 13 July 2012 **Time:** 10:30–11:30

**Abstract ID:** 157

**Title:** The role of grandparents within Italian transnational families in South Wales

**Method:** Oral

**Author:** Robin Mann

**Institution:** Bangor University

**Co-authors:**

Emanuela Bianchera

Sarah Harper

In recent years research has increasingly addressed the roles of grandparents as providers of care in the context of ageing societies and changing family and intergenerational practices. At the same time, multigenerational family structures have been highlighted within minority ethnic communities. The role of grandparents as conveyors of cultural or ethnic identities within migrant and minoritized families however is comparatively under researched. Drawing on ethnographic research and life history interviews with families of Italian descent in South Wales, this paper pays particular attention to the role of grandparents within Italian transnational families.

Italian migrant communities are typically considered to be characterized by strong kinship solidarity based on family and peer networks. The peculiar spatial concentration of Italian multigenerational families in parts of South Wales offers insights into the dynamics of cultural continuity, negotiation and transformation with intergenerational relations. Results from our study highlight the importance of grandparents as keepers of inheritance, anchors to Italian identity and maintaining links with the motherland. Findings also point to gender differences amongst grandparents in what gets 'passed on' and how: Grandmothers place emphasis upon food culture, gathering 'around a table', and transnational care with Italian relatives and extended family bonding. In contrast, grandfathers' contribution lies in community and social roles, family businesses and cafes as family gathering points, financial transfers, the management of community and social gatherings, as well as home and land owning in Italy, fostering regular returns.

We gratefully acknowledge the support of the Leverhulme Trust in funding this research.

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**Stream:** Intergenerational Perspectives

**Date:** Friday 13 July 2012 **Time:** 10:30–11:30

**Abstract ID:** 217

**Title:** Exploring gendered constructions of age: the social geographies of grandfatherhood

**Method:** Oral

**Author:** Anna Tarrant

**Institution:** Open University

Attius-Donfut and Segelen (2002) argue that grandparenthood is considered synonymous with old age. However grandparent scholarship focuses almost exclusively on women, to the exclusion of men, so much so that grandparent has also come to be constructed as grandmother (Harper 2005). Men have always been involved in intergenerational relationships with their grandchildren however, and recently it has been recognized that they are as involved in the child care of their grandchildren as women (Leeson 2009). At the same time, demographic and social changes means that grandparenthood is a role increasingly bridging middle to old age. This paper, which is based on qualitative interview data collected for my doctoral work, argues that men who are grandfathers resist negative assumptions constructed around their age identities, through uses of space and place that reproduce and reflect their dominance through performances of masculinity. Rather than become genderless and asexual (Spector-Mersel 2006), men actively perform and construct their male identities through their use of gendered spaces and a continuation of masculinity scripts throughout the lifecourse. It is through these spaces and places that men experience varying levels of control and power over their grandchildren, reflecting how male power is reworked and altered over the lifecourse. The data demonstrates that a gendered and geographical perspective on intergenerational relationalities can begin to challenge and resist normative assumptions of old age and ageing identities and actually demonstrate how people in later life, such as grandfathers, negotiate and rework power relations geographically and intergenerationally.

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**Stream:** Intergenerational Perspectives

**Date:** Friday 13 July 2012 **Time:** 10:30–11:30

**Abstract ID:** 262

**Title:** A UK perspective on intergenerational practice

**Method:** Oral

**Author:** Alan Hatton-Yeo

**Institution:** The Beth Johnson Foundation

In the last decade there has been a growing policy interest in intergenerational approaches to building active citizenship, better connected communities and to building respect and understanding between the generations. All four nations of the UK have developed differing policy responses to this and this work has gained additional importance recently given the concerns over unemployment and potential generational conflict for resources. The Author of this paper has the lead on policy development in all four nations and will draw out the current policy status of IP and the opportunities and challenges that currently present themselves. The paper will also contextualize this work to both Active Ageing and Age Friendly Cities to reflect the theme on the current European Year.

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**Stream:** Arts and Humanities

**Abstract ID:** 244

**Title:** From the beautiful to the visceral: the significance of aesthetics in the care of older people.

**Method:** Poster

**Author:** Joanna Cross

**Institution:** University of Bristol

This proposed poster will crystallize principal findings from research exploring the potential of an aesthetic paradigm for evaluating older people's embodied, affective experience of care across social and clinical settings. It takes as its theoretical impetus the classical formulation of 'Aesthesis', or 'perception through the senses', consistent with Berleant's (2005) proposition that aesthetic experience is foundational to culture and Dewey's (1934) support for a formative, sensuous aesthetic. Insights are also drawn from contemporary art and sensory theory, 'aesthetics of the everyday' approaches and cultural gerontology in advancing an ethic and aesthetic of care.

Coinciding with the rolling-out of the policy imperative of 'personalization' and the rhetoric of 'choice and control', and mindful of ways in which self-determination might find expression through aesthetic preferences, key aims of this research have been to:

- Determine whether aesthetic subjectivity and aesthetic experience shared reveal a deeper understanding of the vulnerability of cultural identity to misrecognition as social and medical interventions increase.
- Enable a greater awareness of power differentials, dehumanization and neglect in meeting the support needs of older people.
- Evaluate care as a creative process.

Fieldwork research addressing these questions has involved a multicultural sample of 32, urban dwelling, older people recruited from social hubs such as lunch clubs and day centres and support groups for those with visual impairments. Research methods integrate auto-driven photo-elicitation or written reflections with in-depth interviews. These methods are organized around nine themes exploring the rituals, cultural attachments and social networks of participants' daily lives.

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**Stream:** Arts and Humanities

**Abstract ID:** 209

**Title:** Examining newspaper reports of care in a nursing home: a discursive analysis

**Method:** Poster

**Author:** Amanda Phelan

**Institution:** University College Dublin

**Co-authors:**

Margaret Pearl Treacy

Imogen Lyons

On May 30th 2005, Radio Telefís Éireann, the Irish national television broadcaster, screened excerpts from an undercover surveillance programme that involved covert filming in a nursing home by one staff member for a period of eight weeks. The Primetime Investigates: Home Truths, programme documented many aspects of care deficits including psychological abuse, neglect and unprofessional practices. Public reaction was emotive and the media provided a significant site of public debate on elder abuse. A critical discourse analysis approach was used to examine newspaper articles in regarding editorial coverage for one month following the television programme.

Findings reveal a plethora of newspaper articles on the nursing home and its maltreatment of older residents. Particular subject positions were constructed within editorials, with distinguishing features of discourse that separated tabloid from broadsheet coverage. Conclusions illustrate the necessity of a balanced newspaper reportage that fosters a comprehensive topic focus rather than an episodic, sensationalist focus.

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**Stream:** Environment and Ageing

**Abstract ID:** 127

**Title:** 'I want to go home': desires and realities experienced by ageing German migrants

**Method:** Poster

**Author:** Anne Harjes

**Institution:** University of Vechta, Centre for Research on Ageing and Society

**Co-author:** Ingrid Eyers

This poster presents the results of a literature review aiming to develop an understanding of the expectation that former German Gastarbeiter (guestworkers) have of older age. About 30% state they want to return to their country of birth or that they are unsure where to live in the future. However, neither age nor the verbalization of the wish to return influences the frequency of actual returns to the country of birth. There has to be a reason why so many fail to take action. Over the life course, changes take place and the intention to return when enough money has been earned, becomes increasingly complex. Looking at different phases of life, based on the "lived circumstance" concept, the indication is that the children's' decision to stay in Germany is the most influential factor. Older migrant parents consequently decide not to return, yet retain the desire to do so.

It's also possible that the statement 'I wish to return' differs from the statement 'I want to go home'. Turkish migrants, for example often speak about their wish to return when they speak about personal visions of old age. The wish to return to Turkey could be seen to reflect the desire to be treated with respect in old age. The indication is that this is the expectation migrants have of Turkish society. Furthermore the desire to return is something many migrants share. It is a talking point between migrants, underpinning a joint membership in a migrant community.

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**Stream:** Environment and Ageing

**Abstract ID:** 239

**Title:** The Louth Age-Friendly Communities Survey: a multidimensional instrument for assessing levels of age-friendliness

**Method:** Poster

**Author:** Ann O'Hanlon

**Institution:** Netwell Centre, Dundalk Institute of Technology

**Co-author:** Rodd Bond

The Louth Age Friendly Communities Project (AFC-L) is an interdisciplinary and multi-site project, which aims to understand and measure levels of age-friendliness in Co. Louth, on the north east coast of Ireland, i.e. the extent to which people feel that their communities support them as they grow older. The study involved extensive consultation processes around Co. Louth with community based mid-life and older adults, multidisciplinary professionals and those with applied and/or academic expertise. Following extensive consultation and piloting, the main study includes interviews with adults aged 50+ years, recruited via the geodirectory and convenience sampling. Information is collected on eight main themes: outdoor spaces and buildings, transportation, housing, social participation, respect and social inclusion, civic participation and employment, communication and information, and hospital and community services. The study draws on international evidence and research to make contributions to knowledge and consider overlaps and inter-relationships with other countries and research centres. The measures developed will be useful to those interested in making communities more supportive and friendly towards adults in mid- and later years.

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**Stream:** Environment and Ageing

**Abstract ID:** 256

**Title:** Making and re-making home in a purpose built retirement village

**Method:** Poster

**Author:** Bernadette Bartlam

**Institution:** Keele University

**Co-authors:**

Miriam Bernard

Jennifer Liddle

Thomas Scharf

Julius Sim

Providing sustainable environments that are capable of supporting individuals in realizing their potential, and will allow them to participate actively and contribute to their communities throughout their lives, is an urgent policy matter and key to enhancing quality of life as we age. One response to this is the move away from traditional housing for older people, generally provided within a framework that fosters dependency, toward more flexible and inclusive approaches designed to provide choice and promote autonomy. Purpose-built retirement communities are one example of such innovation, and are contributing to the rapid transformation of housing options in later life. Fundamental to these developments are notions of 'ageing in place' and 'homes for life'. In this paper, we ask whether such purpose-built retirement communities are places that residents can call 'home' and, if so, whether they do indeed offer 'homes for life'. We explore the vision behind the development of one particular village, the extent to which that vision has translated into an environment allowing residents to successfully engage in the process of 'home-making', and the consequences for their ability to age well in place. We ask how those involved in developing and providing this particular form of accommodation might continue to identify and meet the needs of a growing and increasingly diverse older population.

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**Stream:** Environment and Ageing

**Abstract ID:** 269

**Title:** Four contrasting experiences of life in a purpose-built retirement village

**Method:** Poster

**Author:** Jennifer Liddle

**Institution:** Keele University

The marketing materials for purpose-built retirement communities often emphasize their leisure, social and supportive aspects. However, there are relatively few studies in the UK that explore what everyday life is like for older people living in such environments, particularly once they have had time to settle in and potentially create new social relationships and lifestyles for themselves. Denham Garden Village (DGV) in Buckinghamshire was opened in 1958 to provide accommodation for 250 residents in rented properties. Since 2001, it has been redeveloped into a purpose-built retirement village for residents aged 55 and over, incorporating 326 mixed-tenure properties and a range of facilities including a gym, swimming pool, café bar and Medical Centre. This poster draws on findings from a mixed method PhD study that combines data from 206 DGV residents who took part in one or both of the LARC (Longitudinal study of Ageing in a Retirement Community) surveys in 2007 and 2009, with qualitative interviews conducted with 20 of these residents. The lifestyles and attitudes of four of these residents are used to illustrate their contrasting experiences of life in a retirement village. In particular, the variations in these residents' roles and social relationships, and the extent to which they were engaged in village life, will be explored. Other factors affecting their everyday lives included past experiences, individual preferences, resources and attitudes, and the built and social environments. Looking in depth at the everyday lives of individuals demonstrates the diversity within a community that, from the outside, appears relatively homogeneous.

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**Stream:** Health, Wellbeing and Care

**Abstract ID:** 271

**Title:** Investigation of healthy ageing in ExtraCare villages and schemes

**Method:** Poster

**Author:** Jill Collins

**Institution:** Aston University

**Co-authors:**

Carol Holland

Barbara Hagger

Danielle Clarkesmith

Angela Bradford

The aim of this research is to gain a better understanding of the parameters that contribute to the well-being of older adults living in ExtraCare villages and schemes. ExtraCare residents demonstrate elevated personal well-being in the form of high self-esteem and strong local identity, sustaining the social relationships and community engagement essential for quality of life.

In a three year longitudinal study, a cohort of volunteer new residents will be assessed prior to moving into ExtraCare accommodation in 8 locations (5 small schemes and 3 villages), and then assessed on the same measures at 6, 12 and 18 months after entry. A comparator group of volunteers matched for age and gender will also be assessed at the same intervals.

Information gathered will include standard physiological measures, such as BMI, smoking/alcohol status, blood pressure, blood sugar and cholesterol. Well-being variables, such as activity data and personal perceptions will additionally be collected.

At this preliminary stage of the investigation it is realized that the effect of different geographical locations of each ExtraCare site in the study could not be overlooked, with demographic characteristics varying greatly between areas. Detailed area profiling was conducted for each site.

Investigation is highly cross disciplinary, working beyond fields to address this common aim of society. In particular, to explore whether it is possible to model well-being parameters in such a way that would be informative to those designing, planning and managing similar retirement communities for older people.

**Stream:** Health, Wellbeing and Care

**Abstract ID:** 270

**Title:** Physical activity among older people with sight loss: a qualitative research study to inform policy and practice

**Method:** Poster

**Author:** Cassandra Phoenix

**Institution:** European Centre for Environment and Human Health

**Co-authors:**

Meridith Griffin

Brett Smith

David Howe

Evidence shows that physical activity is a major contributor to good health and wellbeing, that regular physical activity can reduce the risk of many chronic conditions and that even relatively small increases in physical activity bring some protection against chronic diseases and an improved quality of life.

People with sight loss are likely to be affected by physical activity and inactivity in the same way as sighted people. Research shows that people with sight loss, in general, have poorer general health than the sighted population. Experience suggests that limited participation in physical activity is likely to be common among people with sight loss and that they may experience a range of barriers to participation.

Alongside evidence of the benefits of physical activity, public policy and practical initiatives are seeking to increase activity: the Department of Health has recommended targets for activity each day. These initiatives are as relevant to people with sight loss as their sighted peers but have little to say about the involvement of people with sight loss or how their participation can be facilitated.

The research presented in this poster aims to increase knowledge and understanding of participation in physical activity among older people with sight loss. A range of qualitative research methods are being employed to produce in-depth and applied understandings of the influences shaping experiences of physical activity and how these influences can be managed to achieve maximum benefits for visually impaired people as they age. The research is funded by The Thomas Pocklington Trust.

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**Stream:** Health, Wellbeing and Care

**Abstract ID:** 238

**Title:** Targeting low awareness of undetected visual impairment and sight loss in care homes

**Method:** Poster

**Author:** Jessica Watson

**Institution:** International Longevity Centre – UK

The International Longevity Centre – UK, in partnership with Thomas Pocklington Trust, have carried out an evidence review of sight problems and sight checking practices in care homes across the UK. This poster will demonstrate the findings of this report, taking a policy-level view of the current status of this situation in care homes nationwide, summarizing the key issues and making strategic recommendations for change. The key findings of the review highlight that despite the estimates of very high levels of undetected sight loss in care homes, eye health is often overlooked in regulations and guidance. Subsequently eye health is often not prioritized by care home staff or highlighted by residents or their families. In addition to medical complications from eye conditions and a low quality of life, poor eye health is associated with common issues facing care home residents; such as increased confusion for residents with dementia, and an increased likelihood of falls.

The evidence review, published early summer 2012, forms part of the creation of a national awareness campaign aiming to raise the profile of the issue of undetected sight problems in care home residents with stakeholders at all levels. This poster shows the scope of this campaign, which will involve engaging with health, social care and policy professionals; key politicians and other stakeholders, including families and carers of residents and care home staff.

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**Stream:** Health, Wellbeing and Care

**Abstract ID:** 211

**Title:** An ethic of care critique of social care assessment

**Method:** Poster

**Author:** Sarah Webber

**Institution:** University of Bristol

In England, the local authority social care assessment process is vitally important to older people and their carers as it is used to decide who is eligible for state funding and what services they are eligible for. My research uses qualitative methods to explore individual experiences of, and attitudes to, current social care assessment procedures. Looking in depth at the views of front line social workers, charities, family carers and older people, the research evaluates the current system using an ethic of care perspective.

This poster illustrates how the assessment process works both in theory and in practice in 2 different councils in the west of England. It then sets out the main elements of ethic of care theory and uses this to highlight key criticisms of current and proposed assessment legislation and practice, focussing on:

- 'Relational autonomy' and the assessment focus on independence
- 'Responsibility' and the assessment focus on self-sufficiency
- 'The integrity of care' and the interpretation of the assessment as a prior stage to 'care'

Throughout, I draw on the 24 interviews I conducted to illustrate these points.

The poster also demonstrates my thesis. While an ethic of care perspective highlights fundamental difficulties with the very foundations of the assessment process, it also shows that elements of an ethic of care are present in the process as it is carried out in practice. Arguably, these elements can be built upon to improve the system. I also argue that this research can inform ethic of care theory.

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**Stream:** Health, Wellbeing and Care

**Abstract ID:** 192

**Title:** The ASC project: acceptability of and satisfaction with social care among South Asian groups

**Method:** Poster

**Author:** Rosalind Willis

**Institution:** Centre for Research on Ageing, University of Southampton

**Co-authors:**

Maria Evandrou

Pathik Pathak

This poster reports on a study currently underway at the University of Southampton. Evidence indicates that black and minority ethnic (BME) groups report lower levels of satisfaction with social care services when compared with white groups. Examining the reasons for such differences is an important step in improving the provision of services for BME groups. This issue is particularly important because there may be a greater need for services due to higher levels of ill health and disability among certain minority groups. It has been argued that BME groups choose not to use social care services, and instead that they prefer to 'look after their own'. However, recent research has indicated that minority groups and White British people provide similar levels of support to family members.

The study aim is to explore the attitudes of individuals from South Asian communities toward social care services. In addition, the project will investigate attitudes of White British individuals as a comparison group, as well as the views of social service staff members on the reasons behind low satisfaction levels. The study results will facilitate gaining a greater understanding as to why South Asian groups report lower satisfaction with social care services, which it is hoped would in turn contribute to the more informed design of appropriate services in social care.

The poster describes how we intend to achieve these aims. We will also discuss the importance of establishing strong links with voluntary sector community organizations, and the public and private sectors.

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**Stream:** Health, Wellbeing and Care

**Abstract ID:** 140

**Title:** How do care home managers describe working with primary care? A national survey

**Method:** Poster

**Author:** Heather Gage

**Institution:** University of Surrey

**Co-authors:**

Angela Dickinson

Christina Victor

Jerome Cheynel

Peter Williams

Sue Davies

Claire Goodman

**Background:** Older people living in residential care homes (no on-site nursing) present complex health needs due to a range of medical conditions, including mental health problems and frailty. Interventions are required from a range of primary care-based services. Integrated working between professionals, services and organizations to improve access to services, quality of care, user satisfaction and efficiency is a policy expectation.

**Methods:** A self-completion, online-questionnaire was designed, including key dimensions of integrated working. The survey was sent to a random-sample of residential care homes in England with more than 25 beds (n=621) (S1) and a non-random sample of 131 homes (S2) from a major care home provider.

**Findings:** The first survey (S1) achieved a response rate of 15.8% and the second (S2) 78%, overall 27%. Most (S1 81%, S2 92%) worked with more than 1 GP (range 1 to  $\geq 10$ ). On average 14 services had visited homes over the previous 6-months (most frequent: district nursing, chiropody and community psychiatric nurses). Qualitative comments indicate good working relationships with individual NHS staff. Key features of integration, e.g. sharing documentation, are reported by a majority of homes (S1 70.1% and S2 68.0%) but are often non-reciprocal and many (S1 37.6% and S2 48.5%) rarely/never experienced joint training.

**Conclusions:** Care homes are a 'hub' for a wide-range of NHS activity, but there is no recognized way to support working together. Working-relationships reflect patterns of collaborative working rather than integration. The low response rate reflects the difficulty of undertaking research in care homes.

Funded by the National Institute for Health Research Service Delivery and Organisation Programme (project number 08/1809/231).

**Disclaimer:** The views and opinions expressed herein are those of the authors and do not necessarily reflect those of the Department of Health.

The APPROACH Study team: Heather Gage, Angela Dickinson, Christina Victor, Peter Williams, Jerome Cheynel, Sue L Davies, Steve Illiffe, Katherine Froggatt, Wendy Martin, Claire Goodman.

**Stream:** Health, Wellbeing and Care

**Abstract ID:** 128

**Title:** Role reversal: husbands and sons as caregivers

**Method:** Poster

**Author:** Erna Dosch

**Institution:** University of Vechta, Centre for Research on Ageing and Society

This poster presents initial findings from a study of working men who are also caregivers. Within the context of current demographic changes taking place in German family care, the current 30% share of men as primary caregivers is expected to increase. It is consequently of importance to address the role of men as caregivers and to consider how working men experience this role reversal.

For a doctoral thesis, data was analysed from 30 biographical-narrative interviews conducted with caregiving husbands and sons aged between 32 and 64, resulting in 56 hours of interview data. The interviewees ranged from the unemployed to highly paid employees, of which 19 cared for a parent, one cared for a friend and 10 for their partners.

The reconfiguration of gender roles is a key aspect and the initial findings indicate that there are links between the socialization of men and their caring role over the life course. Their new role exemplifies a changing intergenerational relationship that has been determined by circumstance beyond their control and highlights the adaptation process that takes place in men confronted with the unexpected necessity to care for their wife or mother.

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**Stream:** Health, Wellbeing and Care

**Abstract ID:** 74

**Title:** Dignified care? The experiences of older people in hospital in Wales

**Method:** Poster

**Author:** Sarah Stone

**Institution:** Older People's Commission for Wales

**Co-authors:**

Ruth Marks

Rebecca Stafford

This paper will consider how utilizing the United Nations Principles for Older Persons and the rights enshrined in the European Convention on Human Rights can make a real difference to older people accessing health services, and the role of real experiences of older people in securing systemic changes.

The case study highlighted in this paper involves evaluating the Review undertaken by the world's first exclusive statutory Commission for older people – the Older People's Commissioner for Wales – into the treatment of older people as hospital in-patients and the need to maximize dignity and respect. The Older People's Commissioner for Wales has the power to review the functions of health, local authority and 'national/regional' government, through powers and functions derived from Section 3 of the Commissioner for Older People (Wales) Act 2006.

The paper will consider the methodology, conduct, follow-up and outcomes of the review highlighting how a Commission with dedicated statutory powers can secure changes and commitments to improve practices and behaviours.

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**Stream:** Health, Wellbeing and Care

**Abstract ID:** 248

**Title:** Relationship between subjective well-being and self-assessed masticatory ability among the elderly in Japan

**Method:** Poster

**Author:** Muramatsu Masumi

**Institution:** Sapporo City University

**Co-authors:**

Harai Mika

Sakakura Emiko

Muramatsu Tsukasa

**Objectives:** Quality of life and masticatory ability in old age are important. However, there are few studies of quality of life and self-assessed masticatory ability among older people. The aim of this study is to evaluate the relationship between subjective well-being and self-assessed masticatory ability in the elderly in Japan.

**Materials and methods:** This study is a cross sectional study, and was conducted in October 2011. 1,020 elderly people participated as test subjects. They were surveyed using a self-administrated questionnaire sent by mail. We used a revised Philadelphia Geriatric Center Morale Scale (PGC). For ethical reasons, the study was conducted on a voluntary participation basis with protected anonymity; there were no disadvantages by not participating.

**Results:** The 1,020 elderly participants gave informed consent. The response rate was 51.0%. The average age was  $73.3 \pm 6.4$  years old. The median score of PGC was 13 (range 0–17). For self-assessed masticatory ability, 652 people (63.9 %) responded “good”, 278 people (27.8%) as “fair” and 58 people (5.7%) as “poor”. The results showed that there was a statistically significant correlation between the PGC score and the self-assessed masticatory ability in the elderly in Japan (Spearman rank test,  $r_s = -.122$ ,  $p < 0.001$ ).

**Conclusion:** In this investigation, there was a statistical significant correlation between well-being and self-assessed masticatory ability in the elderly.

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**Stream:** Health, Wellbeing and Care

**Abstract ID:** 169

**Title:** Falls screening and assessment tools used in acute mental health settings: an analysis of policies in England and Wales.

**Method:** Poster

**Author:** Venkat Narayanan

**Institution:** Oxford Health NHS Foundation Trust

**Co-authors:**

Angela Dickinson  
Charles Simpson  
Christina Victor  
Deborah Humphrey  
Caroline Griffiths

**Background:** There is an urgent need to improve the care of older people at risk of or who experience falls in mental health settings. Falls are the most frequently reported patient safety incident. NICE Guidelines recommends the use of multidisciplinary fall risk assessment during individualized treatment and in prevention care plans for older people at risk of falls (NICE, 2004). This poster outlines work underway to explore the policy guidance issued by NHS Mental Health Trusts in England and Health Boards in Wales.

**Methods:** We requested fall policies and other relevant documentation from NHS mental health trusts in England (56) and healthcare boards in Wales (6). Policies are being subjected to a quantitative content analysis to explore guidance given to clinical staff and managers.

**Findings:** We obtained falls policies from 42 mental health trusts in England, and two from healthcare boards in Wales. Thirty policies were publically available on the internet. One trust told us they did not have a fall-prevention strategy. One was currently reviewing its policy. Analysis of fall risk assessment tools shows variation in the number of risk-variables included. Few trusts used validated tools such as STRATIFY, FRASE, MORSE, and MHOA, others used customized falls risk assessment tools.

**Conclusions:**

- A wide variety of screening and assessment tools are in use; however, the most commonly used are those developed by individual trusts, or which focus solely on the external environment, with no screening/assessment of individual patients.
  - Use of invalidated tools raises questions of reliability and effectiveness.
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**Stream:** Health, Wellbeing and Care

**Abstract ID:** 141

**Title:** Preventing falls among older people with mental health problems: a systematic review

**Method:** Poster

**Author:** Frances Bunn

**Institution:** University of Hertfordshire

**Co-authors:**

Angela Dickinson  
Charles Simpson  
Venkat Narayanan  
Christina Victor  
Caroline Griffiths  
Deborah Humphrey

**Background:** Falls are a leading cause of mortality and morbidity in older people and these risks are exacerbated by mental health conditions such as depression and dementia. Previous reviews have focused on people with dementia and cognitive impairment, but not those being cared for with other mental health conditions or in mental health settings.

**Objective:** To evaluate the effectiveness of fall prevention interventions for older people with mental health conditions.

**Methods:** We conducted a systematic review of fall prevention interventions for people aged 65 and over in both inpatient and community health settings providing care for patients with mental health conditions. We searched a range of electronic databases and undertook lateral searches to identify both controlled and uncontrolled studies. Studies were assessed for risk of bias on six domains. Due to heterogeneity results were not pooled but are reported narratively.

**Results:** Fifteen studies met our inclusion criteria. Interventions that include multifactorial, multi-disciplinary interventions and those involving increasing staff awareness appear to reduce the risk of falls but the evidence is mixed and quality of the studies varied. Only 2 studies, both undertaken in the US, were undertaken in mental health settings. We found no data relating to process outcomes or patient views.

**Conclusion:** The review provides evidence that fall prevention interventions can be effective in preventing falls in older people with mental health problems. There is a dearth of falls research undertaken in mental health settings or which focus specifically on patients with mental health problems.

**Project Team:** Frances Bunn, Angela Dickinson Charles Simpson, Christina Victor, Venkat Narayanan, Deborah Humphrey, Caroline Griffiths, Wendy Martin.

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**Stream:** Health, Wellbeing and Care

**Title:** Family related factors as a risk for default of depression treatment among elderly: a case control and exploratory study in Malaysia.

**Method:** Poster

**Author:** Rahmah Mohd Amin

**Institution:** UKM Medical Centre

**Co-authors:**

Abdul Rashid Khan Md Jagar Din  
Nor Aini Mohd Noor

Ten percent of elderly people who needed treatment for mental health received it and approximately 50% default the treatment given. This paper will focus on family factors as a risk to defaulting follow-up among elderly patients in selected hospitals in Malaysia.

This was a case-control study using two control groups. Cases were 148 depressed elderly patients who defaulted treatment for more than a month from the date of follow-up for reasons other than death. Two controls were 148 elderly patients with a diagnosis of depression who did not default follow-up and another 148 elderly patients who were on follow-up for any reasons apart from depression. Respondents were recruited from four government hospitals in the northern part of Peninsular Malaysia. In-depth interviews were carried out among ten purposively chosen respondents. Ethically this study was approved by UKM Research and Ethical Committee.

Out of seven family factors studied, four were found as risk factors: respondents' opinion concerning lack of family support to treatment (OR=6.24 95%CI 3.84, 10.15), positive family history of depression (OR=6.32 95% CI 1.62, 23.72), respondents perceived family do not know about their illness (OR=3.28 95% CI 1.95, 5.54) and overall perception on family support (OR=12.85 95% CI 8.01, 20.60). On further exploration, respondents claimed "no one to bring them to hospitals"; "no motivation to go alone" and "felt shy to demand from children".

The role and support from family members are indispensable. Demonstrating a little concern about elderly's illness could help to improve their care.

**Keywords:** elderly, depression, family support, case-control, qualitative exploration.

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**Stream:** Health, Wellbeing and Care

**Abstract ID:** 109

**Title:** Use as abuse: a feasibility study of alcohol-related elder abuse and neglect

**Method:** Poster

**Author:** Mary Pat Sullivan

**Institution:** Brunel University

**Co-authors:**

Mary Gilhooly  
Christina Victor  
Sarah Wadd  
Nick Ellender

The often hidden nature of elder abuse and neglect has meant that current prevalence rates have likely only addressed the tip of the iceberg (Cooper et al., 2009; Tomita, 2006). Alcohol abuse by an older person or a carer is consistently identified as a risk factor for the increased likelihood of abuse. Research in North America has begun to illuminate the impact of alcohol-related elder abuse and neglect and identify strategies for intervention; however, the nature of the problem in the UK remains relatively unexplored. The aim of this feasibility study is to collect substantive pilot data to scope the extent of alcohol-related elder abuse and neglect in the UK, including community-based interventions, and evaluate data sources and research methods to develop a national study of the role of alcohol in cases of elder abuse and neglect. Funded by Alcohol Research UK, this is an 18-month study that began in spring 2012. This poster will present current knowledge exploring alcohol abuse as a significant factor in reported cases of elder abuse, the multiple data sources being evaluated to scope the problem in the UK, and preliminary findings. Further research considerations are also presented.

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**Stream:** Health, Wellbeing and Care

**Abstract ID:** 214

**Title:** Financial abuse of older people

**Method:** Poster

**Author:** Amanda Phelan

**Institution:** University College Dublin

Elder abuse is an increasing concern for many countries, particularly as demographics change and our understandings of the topic become more refined. Elder abuse may be further classified into a number of different typologies: physical abuse, psychological abuse, financial/material abuse, sexual abuse, discriminatory abuse and neglect. Within the spectrum of elder abuse, financial abuse of older people is an increasing challenge for global societies as evidenced by recent prevalence reports (Naughton et al 2010, Acerino 2010). Contributing factors include the ageing of the world's population, a greater wealth pattern in older age groups and an increased variety of innovative ways of perpetrating financial abuse (Malks et al 2003, Kemp & Mosqueda 2005, Reeves & Wysong 2010). This paper considers how financial elder abuse is understood, its manifestations, consequences and dilemmas. The paper also considers international, multi-agency practice in relation to financial elder abuse, legal issues and aspects related to financial institutions. It also considers the growing imperative of health and social care agencies to address financial abuse.

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**Stream:** Health, Wellbeing and Care

**Abstract ID:** 266

**Title:** Seeing is believing? Elder mistreatment, social workers and the cognitive mask

**Method:** Poster

**Author:** Angie Ash

**Institution:** Swansea University

Training professionals to identify and respond to potential abuse of an older person is a key policy goal of UK human services. In England and Wales, national policy to safeguard older people from abuse was introduced in 2000; multi-agency procedures were developed; and extensive programmes of training delivered to staff in health, social care and criminal justice agencies. This poster describes research that looked at the understandings social workers and their managers had of the intention and purpose of policy to safeguard older people from abuse. The multiple-methods research was carried out in a social services department, and involved every social worker, adult protection worker, and manager working in older people's services. Research methods included: analysis of adult protection statistical and documentary data covering a two year period; focus groups; semi-structured one-to-one interviews; and observed adult protection forums. The research found social workers' awareness of elder abuse was low; potential abuse was not always 'seen', or recognized as such. Social workers tolerated the known poor quality of some services to older people, health service colleagues' limited engagement in the adult protection process, and delays in police investigations into alleged elder abuse. These dilemmas were threads woven into social workers' stories, masking any questioning of why such accommodations were accepted. The poster develops the concept of a 'cognitive mask' to explain social workers' not 'seeing' elder abuse, or the impact of wider contexts they work in, on the day-to-day trade-offs they made in their work to safeguard older people from mistreatment.

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**Stream:** Health, Wellbeing and Care

**Abstract ID:** 135

**Title:** Towards a consensus definition of healthy ageing: a systematic literature review of cohort studies

**Method:** Poster

**Author:** Evelyn Barron

**Institution:** Newcastle University

**Co-authors:**

Jose Lara

Martin White

John Mathers

The absence of a consensus definition of healthy ageing and measurement tools based on that definition is an impediment to healthy ageing research. Depp & Jeste (2009) reviewed definitions of healthy ageing and found significant overlap between definitions but also differences in the domains of healthy ageing covered by each definition. Our review will build on the work by Depp & Jeste and will expand it by including further relevant search terms and by searching a broader range of online databases. Once domains of healthy ageing have been elucidated evidence from longitudinal studies about the importance of each domain will be sought.

As this review is in development the exact search criteria are still being defined. Selection criteria include: published in English, published in peer reviewed journals, studies reporting quantitative data from adults over 55, studies that operationalize the definition of healthy ageing as a dependent variable, and cross sectional or longitudinal studies. The full protocol will be registered with PROSPERO.

A summary of the domains of healthy ageing covered by each definition will be presented, e.g. physical activity, social interactions etc., along with evidence for the relative importance of each domain to the healthy ageing phenotype. As part of the work of the LiveWell Programme, this definition will contribute to the development of a panel of measures aimed to capture the Healthy Ageing Phenotype for use as outcome measures with physical activity and other lifestyle based interventions.

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**Stream:** Health, Wellbeing and Care

**Abstract ID:** 131

**Title:** Blood-borne biomarkers of mortality: a systematic literature review of prospective cohort studies

**Method:** Poster

**Author:** Evelyn Barron

**Institution:** Newcastle University

**Co-authors:**

Jose Lara

Martin White

John Mathers

**Background:** The importance and usefulness of ageing biomarkers is widely recognized and increasing literature in this area suggests growing research interests. The search for predictive biomarkers of ageing-related outcomes continues. In addition to “traditional” markers of mortality risks, recent technological advances have allowed the measurement of novel markers in longitudinal population studies. This piece of work focuses on biomarkers of mortality, the ultimate health outcome.

**Aim:** To identify blood-borne biomarkers predictive of mortality in prospective cohort studies.

**Methods:** A systematic search strategy was devised using validated filters to find suitable prospective cohort studies. Just fewer than 8000 studies were identified for potential inclusion. Thirty-one were obtained in full text for further screening and 9 that fulfilled the selection criteria were accepted for data extraction. Study quality was assessed using the Newcastle-Ottawa Scale.

**Results:** Higher levels of high sensitivity C-reactive protein (hsCRP; 126% increase in mortality, p Quality was highest amongst papers looking and hsCRP and lowest for cholesterol papers.

**Conclusions:** Our systematic review identified four biomarkers highly predictive of mortality. Most of these biomarkers are “traditional” markers of cardiovascular mortality risk. NT-proBNP is a novel marker of mortality risk. The low number of studies found highlights the need for further biomarker research using standardized protocols and reporting methods.

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**Stream:** Health, Wellbeing and Care

**Abstract ID:** 144

**Title:** Temporal aspects of loneliness in older people

**Method:** Poster

**Author:** Christina Victor

**Institution:** Brunel University

**Co-authors:**

Mary Pat Sullivan

Mary Gilhooly

The dynamic nature of loneliness has been primarily overlooked by the numerous cross-sectional studies that have sought to establish the prevalence of, and risk factors for, loneliness. A limited number of longitudinal studies (3-25 years) have characterized three loneliness trajectories: (1) regenerative; (2) degenerative; and (3) enduring. However, less is understood about the short-term temporal aspects of loneliness or how loneliness may change across the course of a year. Interviews were held with 45 older people to illuminate the meaning of loneliness in their lives, and how responses to loneliness may vary across the days of week, time of day and seasonally. From the findings we developed a framework of five elements that contributed to participants' vulnerability to (and capacity to combat) loneliness. These included intrapersonal characteristics, interpersonal relationships, the social environment, the macro-social structure, and life events. This paper will discuss how the temporal aspects of loneliness were situated within this framework. It will conclude by outlining a research agenda for exploring and understanding short and longer term variations in loneliness both quantitatively and qualitatively. More specifically, we present a new investigation that is seeking to explore the links between the temporal variations in loneliness and the broader socio-psychological context.

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**Stream:** Health, Wellbeing and Care

**Abstract ID:** 162

**Title:** Evidence based model of a life course approach to promote positive ageing

**Method:** Poster

**Author:** Lynne Wealleans

**Institution:** Beth Johnson Foundation

The purpose of the Beth Johnson Foundation (BJF) is to enhance the quality of life of older people and their experiences of ageing through stimulating and facilitating change.

Over the last ten years BJF has been developing its' Positive Ageing Programme with the main aim of encouraging and supporting people to take more control over their lives to improve health and well-being, promote independence, reduce loneliness and isolation and to increase participation in activities that improve quality of life. The main target group for the programme is people in mid-life since many of our recommended interventions are preventative and health promoting in nature and people in mid-life have an opportunity to prepare and plan for ageing into later life, which can ameliorate some of the more negative aspects of ageing.

With funding from The Headley Trust we have combined desk top research around healthy, active ageing with the evidence from our project work to design, around five core elements, our model of a life course approach to promote positive ageing. The core elements include the recognition of the need for interventions to take place in a range of settings to reflect life experiences (e.g. home, workplace) and that some of us may need to be taught how to build our personal resilience to cope with key life events or transition times that impact upon us along our life journey.

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**Stream:** New Ageing Populations/New Approaches

**Abstract ID:** 263

**Title:** Ageing without children: understanding the implications in older age

**Method:** Poster

**Author:** Mo Ray

**Institution:** Keele University

**Co-author:** Mary Pat Sullivan

Childless older people have traditionally been regarded as uniquely disadvantaged when compared to older people with children. Recently there has been recognition that defining ageing without children as an undifferentiated and inevitably disadvantaged experience is inappropriate. Yet it is still the case that little is known about the diverse contexts in which people age without children or their possible implications. This exploratory study will use biographical interviews to investigate the experience of ageing without children as well as capturing the diversity of contexts in which individuals may age without children. Fieldwork will be developed and conducted by a small research group, which includes older men and women working as co-researchers as well as participating in analysis, writing up the research and disseminating our findings. Specifically, the project aims to comment on the impact or otherwise ageing without children has on the development and maintenance of social and support networks and personal wellbeing, will be explored.

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**Stream:** New Ageing Populations/New Approaches

**Abstract ID:** 184

**Title:** Career resumption for educated baby boomer mothers: an exploratory study

**Method:** Poster

**Author:** Deborah Gale

**Institution:** King's College Institute of Gerontology MAPPA alumni

**Purpose:** Baby boomer women represented the first large cohort of highly educated young females to break through the 'glass-ceiling' to attain high-powered jobs. Higher education shaped their identity and social position in early adult life through novel career opportunities and enhanced personal financial capacity. However, as the UK began to ascend from its post-war malaise to follow the US in becoming a more conspicuously consumptive society, a privileged majority of this cohort reverted to 'traditional' expectations. The economic expansion and wealth creation that followed had enabled many to choose to remain stay-at-home mothers during midlife. Following the global financial crisis of 2007-2009, their re-employability is under consideration here.

**Design and Method:** Comparing educated baby boomer women, in England (London/Thames Valley) and the USA (Silicon Valley/San Francisco Bay Area), through semi-structured interviews, this research explores their career experiences and time out of work to determine what triggers a return to employment and how this decision is negotiated.

**Results:** Findings indicate that resolution of the work-family conflict was hampered by workplace conventions and reinforced by inequitable division of labour in the home. Paradoxically, this was aided by favourable personal financial and economic conditions.

**Conclusions:** Formerly educated women will popularize non-linear career trajectory for employment resumption as a successful ageing strategy. Retention of female talent initiatives in tandem with workplace policies for promoting gender sharing of caring responsibilities across the life course are indicated.

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**Stream:** New Ageing Populations/New Approaches

**Abstract ID:** 236

**Title:** Age and gender: using new media in the context of the German Media-Analyse (MA) by people aged 50-plus

**Method:** Poster

**Author:** Christopher Najork

**Institution:** University of Vechta, Centre for Research on Ageing and Society

**Co-author:** Ludwig Amrhein

This poster illustrates the use of computers by older German women and men. The findings are based on an empirical quantitative analysis undertaken within in the context of a master dissertation. The analysis conducted was based on the German Media-Analyse (MA) – a large scale commercial data source involving respondents that was collated between 1997 and 2007.

The use of new media has rapidly expanded since the 1990s, a development that can be observed in varying degrees in all age-groups. The general expectation that young people use new media more often than older people and males more often than females was confirmed. However, it was identified that older men and women use computers and the internet differently from younger people. Specifically, older people use the internet more selectively and for a shorter period of time. The indication is that the typical non-user can be described as female aged 65plus. The origin of this is multifactorial and based among variables such as education and income. It is further related to the technological requirements of most typical male professions encountered amongst the older population.

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**Stream:** New Ageing Populations/New Approaches

**Abstract ID:** 156

**Title:** Care in business

**Method:** Poster

**Author:** Sarah Hillcoat-Nalletamby

**Institution:** Swansea University

**Co-authors:**

Judith Phillips

Mark Allen

This paper aims to present preliminary results from the 'Care in Business' project. A series of 12 seminars and scoping discussions were held to explore how new assistive living technologies and emerging trends in the ICT sector can be exploited innovatively to meet care needs. Participants have included older people and carers from local communities in South Wales; academic experts in technology and gerontology; SMEs from industries such as computing and travel; carers' organizations and representatives from government and local health authorities.

The project was developed because integrated solutions are needed across sectors to maintain older people's independence and quality of life, and in turn support the role of remote carers. To date, ICT and carers' sectors have had limited opportunity to work together and learn from each other about evolving trends in their fields. The Care in Business project has facilitated these much needed cross-disciplinary exchanges through a series of seminar events in 2011/2012.

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**Stream:** Participation and Engagement

**Abstract ID:** 62

**Title:** Volunteering among older adults: differences in terms of individual characteristics

**Method:** Poster

**Author:** Sarah Dury

**Institution:** Vrije Universiteit Brussel

**Co-authors:**

Liesbeth De Donder

Nico De Witte

An-Sofie Smetcoren

Dominique Verté

Buffel Tine

This study examines whether potential volunteers, volunteers and non-volunteers in later life are different from each other in terms of demographic, socioeconomic, physical and mental health, and family status. Data are derived from the Belgian Ageing studies. The dataset contains 27,128 people aged 60 and over living in 127 municipalities and cities in Flanders, Belgium. Multinomial logistic regressions are applied to analyse the key variables characterizing older volunteers, potential older volunteers, and older non-volunteers.

Analyses indicate that non-volunteers, compared to volunteers, have a lower level of education, have more physical health issues, experience more psychological distress, and are less likely to be unmarried. Potential older volunteers are more likely to have a lower level of education, to be divorced, and are in better physical health than volunteers.

Our findings stress the need for recognizing the various multidimensional factors that affect voluntary work in later life. Thresholds like lower level of education and financial vulnerability explain most of the individual determinants for being a non-volunteer and are crucial for voluntary organizations and social policy. Future research should include and make a distinction between potential older volunteers and older non-volunteers.

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**Stream:** Participation and Engagement

**Abstract ID:** 107

**Title:** Social participation of older people: individual determinants and barriers

**Method:** Poster

**Author:** Liesbeth De Donder

**Institution:** Vrije Universiteit Brussel (0449.012.406)

**Co-authors:**

Sarah Dury

Nico De Witte

An-Sofie Smetcoren

Tine Buffel

Dominique Verté

The purpose of this study was to investigate the social participation of older people in West-Flanders (Belgium). Several dimensions of social participation were examined: informal care, voluntary work, participation in associations, and cultural participation. The specific questions this research addressed included: What is the activity rate of older people? What is the individual profile of (non) participants? What are the main reasons and thresholds to participate? Data from the Belgian Ageing Studies were used. 11258 older people, living in West-Flanders, were questioned using a standardized questionnaire. The findings indicate that older people realize several active roles in society. 30.9% older people deliver informal care and 39.4% provides childcare. Almost 17% volunteers and 69.4% older people are member of an association. One out of two older adults participates in cultural activities. Moreover, the results demonstrate that several older people not yet participate in voluntary activities, but express the desire or willingness to do so in the future. Next, the individual profile of the participants in terms of age, gender marital status, income level, and physical health is discussed. Finally the main reasons (e.g. meeting other people, cosiness, personally asked) and thresholds (e.g. timing, price, interest) to participate are highlighted. The discussion provides an overview of potential vulnerable groups in terms of social participation. Moreover, it focuses on the implications of these findings for local policymakers and social organizations and provides impetus to organize and increase active ageing at the local level.

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**Stream:** Participation and Engagement

**Abstract ID:** 185

**Title:** The benefits of social entrepreneurial activity in later life

**Method:** Poster

**Author:** Bianca Stumbitz

**Institution:** Middlesex University

Demographic changes and social policy concerns have led to a debate regarding the roles and levels of involvement of older people in the economy and society (Curran & Blackburn 2001; Walker 2005; Bowling 2005).

In this context, social entrepreneurship could provide a form of transition or an alternative to retirement, providing an alternative or 'middle way' between 'mainstream' entrepreneurship and voluntary work. At the same time, older people's involvement in social entrepreneurial activity could make a contribution to tackling the issues of an ageing society.

This study aims at examining these trends in more depth and also explores what older people gain through their social entrepreneurial activities. Rather than homogenizing older people as 'frail, poor, lonely and dependent' (Thompson & Thompson 1996), this project recognizes the diversity of the group in terms of gender, race/ethnicity and the wider socio-economic and cultural background in which they are embedded. Furthermore, it identifies those older people who look forward to getting involved in new roles rather than to 'remove themselves socially and economically' (Scase 1999).

Our research has shown that older people's social entrepreneurial activity does not only benefit society, but also offers a unique blend of benefits to those involved in social entrepreneurial activity, such as opportunities for self-fulfilment, personal growth and development, while also contributing to a better quality of life.

The findings presented are based on 55 in-depth interviews, as well as a database of 1000 social entrepreneurs over 50.

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**Stream:** Understanding Dementia

**Abstract ID:** 119

**Title:** Five dementia-friendly parishes: innovation in Devon rural communities

**Method:** Poster

**Author:** Helen McFarlane

**Institution:** Plymouth University

**Co-authors:**

Ian Sherriff

Catherine Hennessy

Barriers to service provision and access for individuals with dementia and their carers living in rural areas are well-established and include factors such as distance, transport difficulties, lack of training of primary care staff and stigma surrounding the condition. As part of a plan to implement the National Dementia Strategy for supporting people with dementia and their carers, Devon County Council (DCC) has set up memory cafés/support groups based in coastal and market towns in partnership with voluntary agencies. To address the needs of people with dementia and their carers living in isolated rural communities, DCC is collaborating with the University of Plymouth Dementia Research Team (PDRT), the Alzheimer's Society and five Parish Councils in a pilot project to develop new approaches for promoting the delivery of dementia friendly services. The Parish Councils have constituted the Dementia Friendly Parishes around the Yealm Steering Group, including the project collaborators, the Senior Council of Devon, Newton and Noss Caring, South Hams CVS, Saltram Rotary, and the NHS. The Steering Group has developed a position description for a Community Project Development Worker whose role will be to raise local awareness about dementia as part of an inclusive community approach for people with dementia and their carers. This includes liaison with GPs and other health and social care professionals to develop individual services/opportunities in consultation with people with dementia and their carers. This poster presentation will describe the implementation of the pilot project and the planned process evaluation of this model by the PDRT.

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**Stream:** Understanding Dementia

**Abstract ID:** 176

**Title:** Community pharmacists and people with dementia: reflections on ethical and governance procedures

**Method:** Poster

**Author:** Veronica Smith

**Institution:** University of Stirling

This study seeks to explore interactions between community pharmacists and people affected by dementia. This paper presents the associated necessary ethical procedures and accessibility negotiations with gatekeepers.

**Aims:**

- To identify potential study participants
- To gain ethical approval to include participants in the study
- To gain access to contact details of potential study participants

**Research design:** The study is designed in two parts.

Part one – Individual interviews with pharmacist in influential positions. Interviews with general practice managers.

Part two – The second part of the study is a series of case studies conducted in areas matched with the practice manager's locations. Interviews will be conducted with community pharmacists, people with dementia and their carers.

**Discussion:** The University ethical review committee granted approval for stage one of the project. Potential case study participants needed to be identified for stage two. The Scottish Dementia Clinical Research Network (SDCRN) hold a database of contact details of people with dementia and their carers who are willing to consider taking part in research. Access to this database requires adoption by the network. To be adopted by the network, appropriate ethical approval is necessary. The NHS review body in Scotland decided ethical approval was not required for stage two. They provided a letter confirming this. The SDCRN accepted this and the researcher received adoption into the network. Communication with people employed in the SDCRN and the NHS ethical review body was imperative for the ethical processes needed for this study and in identifying gatekeepers to potential study participants.

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The community pharmacist is a trusted health professional with whom older people interact regularly, and with whom they are likely to be willing to talk (Hobson, Scott & Sutton 2010). Recent policy initiatives (such as the 2011 NHS Pharmaceutical Care of Patients in the Community) are concerned with the role community pharmacist's play, especially if seen as part of the team of health professions providing support to older people and unpaid caregivers in the community.

This talk presents an overview of the aims and research design of a CASE studentship project collaboration between the University of Stirling and the Pharmacy Practice Research Trust (PPRT). The aims are to identify what relationship community pharmacists have with people with dementia and their caregivers, drawing on the perspectives and experiences of community pharmacists, GP practices, people with dementia and their unpaid caregivers. The research is designed in two parts:

Part one – Through the use of individual interviews with pharmacists working in advisory positions, the expectations of the interactions of the community pharmacist with people affected by dementia were explored. General practice managers were interviewed to establish the relationship between the GP practice and the community pharmacist.

Part two – The second part of the study is designed as a series of case studies (Bryman 2001), focusing on the services community pharmacists provide for people affected by dementia living in the community. Interviews are currently being conducted with community pharmacists, people with dementia and their carers.

Emerging fieldwork findings are discussed.

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