

Generations Review

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• **Congratulations Dr John Miles**

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• **20 years of the BSG Averil
Osborn Fund**

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BRITISH SOCIETY OF GERONTOLOGY

EDITORIAL

July 2014

I am pleased to be editing my second *Generations Review*. I was delighted that the first edition I edited was received very positively and I was lucky that edition and this to be sent such great articles to

assemble together showing the quality, depth and diversity of topics covered through our members and the wider gerontology community.

This edition has an emphasis on older people doing things not always stereotypically associated with later life, in particular Mark Allen and colleagues from Swansea describe the role of older people as entrepreneurs – a term we hear much about and oft associate with youth. Another similar topic is that of gaming, as if only youngsters might like digital gaming; here Hannah Marston discusses how games are increasingly received positively by older people. We feature Dr John Miles, an active supporter of BSG for years, having served on the executive committee for 6 years, who recently completed his PhD highlighting the idea of a reflexive seniority. Of course, if we are to break taboos and engage at all ages with stereotypically age-defined events, like being an entrepreneur or a gamer, then we need to be more reflexive about who we exclude and include and why, with our language, feeling and thoughts.

In research terms that may mean increasing the involvement of older people themselves in the process, not just as participants but with a greater role in the co-production of knowledge. In this edition, Mike Fisher and colleagues from the University of Bedfordshire discuss how they involved people living with dementia in systematic reviews. Mike and his colleague's work is one of the 30 projects to have been funded by the Averil Osborn Fund since the award started 20 years ago. To mark 20 years of the award, Sue Venn outlines a summary of the award over the past 20 years, highlighting three key projects.

I hope you enjoy the read and do continue to send in your articles, reviews and suggestions for the next edition.

Happy reading!

Charles Musselwhite
Swansea University

June 2014



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43RD ANNUAL CONFERENCE OF THE BRITISH SOCIETY OF GERONTOLOGY

1ST -3RD SEPTEMBER 2014

The Centre for Research on Ageing (CRA) at the University of Southampton will be hosting the 43rd annual conference of the British Society of Gerontology (BSG).

The overall theme of the conference is:
New understandings of old age and the lifecourse

REGISTRATION CLOSES 1ST AUGUST 2014

<http://www.southampton.ac.uk/bsg2014/>

FEATURE: 'Reflexive Seniority' Personified

Congratulations Dr John Miles

Mim Bernard (Past-President), Robin Means (President) and Sheila Peace (President-Elect)

It is wonderful to be able to report that one of the BSG's longest serving and most committed members – John Miles – has successfully defended his PhD thesis and will graduate this summer from Keele University. John's study examined the origin and development of the City of Manchester's intergenerational initiatives focusing, in particular, on the planning, implementation and aftermath of the City's participation in the national *Generations*



Together! programme. Through two linked case studies – one examining central policy-making and the other exploring practice on the ground in a neighbourhood of east Manchester – the study puts forward the concept of 'reflexive seniority' as one way of identifying and understanding the tasks older people face in accommodating new demands associated with later life; and in the City's drive to improve generational relations and address the symbolic and structural frameworks needed to support greater age integration. John also offers a four-fold typology of generational exchange for which different practice responses would be required in the future.

John will be well known to many BSG members: he served on the Executive Committee for two successive terms from 2007-2013; was instrumental in supporting the Society's developments concerning post-graduate students and early career researchers; and championed the 'Small Events' initiative bringing researchers, practitioners and policy-makers together around the country. He was also a member of the organising team for the 2012 annual conference held at Keele. A practitioner at heart, John is a formidable scholar with wide-ranging interests – and expertise – in many things gerontological. On behalf of his numerous friends and colleagues in the Society, we warmly congratulate John on his achievement and on demonstrating genuinely what being a 'reflexive senior' is all about.





Older people as Entrepreneurs

Mark Allen, Sarah Hillcoat-Nallétamby and Judith Phillips

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- ◆ The second of three articles from Swansea University's, Mark Allen, Sarah Hillcoat-Nallétamby and Judith Phillips, looking at the interface between business and ageing, with this article focusing on older people as entrepreneurs. The first article on shopping was published last edition and the next article on working in an ageing world will appear in the next edition.

Although there is no universal understanding of what constitutes an *entrepreneur*, a general definition is someone who 'organises, manages, and assumes the risks of a business or enterprise', very often measured by using numbers of self-employed people (Sobel, 2013). The number of *older* entrepreneurs, or 'olderpreneurs' as they have occasionally been labelled by the media (Ainsworth, 2009; Smurthwaite, 2012), has risen significantly in recent years (Botham and Graves, 2009; Schaper, 2007). Early or enforced redundancy can often be the trigger to becoming an older entrepreneur (Small 2011; Smurthwaite, 2012), with other factors including the abandonment of the statutory retirement age, the demise of the final-salary pension and low interest rates providing incentive (Smurthwaite, 2012). Interestingly, some studies highlight the fact that the probability of *preferring to be self-employed* strongly decreases with age, while the probability of *being self-employed* strongly increases with age (Blanchflower et al., 2001). This suggests people are often forced to make the

decision to start their own business and become an entrepreneur as they get older.

The statistics concerning the increasing number of older entrepreneurs is challenging stereotypes about entrepreneurs predominately being young (Stangler, 2009a; Theil, 2010). The highest rate of entrepreneurship (recorded self-employed) in the U.S has shifted to the 55 to 64 age group, with the lowest rate amongst the 20 to 34 age bracket (Stangler, 2009a). This trend is apparent in other countries as well, including the UK and Australia (Botham and Graves, 2009; Schaper, 2007). The technology sector is probably most commonly associated with young entrepreneurs following the success of entrepreneurs such as Bill Gates (Microsoft), Steve Jobs (Apple), Mark Zuckerberg (Facebook) and Larry Page and Sergey Brin (Google), with an average age of 21 when they founded their respective companies. However, they are by no means representative. The *average* age for founders of technology companies in the



Focus: Older people as Entrepreneurs

U.S is actually 39, with twice as many technology entrepreneurs aged over 50 as under 25 (Wadhwa et al., 2008).

The aforementioned technology entrepreneurs are global celebrities and arguably it is their status as cultural icons (Stangler, 2009a) that has helped to almost inextricably link the word 'young' with the word 'entrepreneur'. However, the sheer *numbers* of older entrepreneurs are challenging this concept, as well as commonly held assumptions about what it takes to start your own business and make it a success. In the U.S, older age has been shown to correlate with more successful entrepreneurs up to the age of 40 (Ressi, 2011), with people older than 55 almost twice as likely to found successful companies than those between 20 and 34 (Stangler, 2009aa). There are many possible reasons for this, for instance, older entrepreneurs have a combination of good project completion skills with real world experience, enabling them to identify and address more realistic business opportunities (Ressi, 2011). Another explanation is that older entrepreneurs are more driven to succeed as they have more to lose, such as family relying on the business to be a success (Small, 2011).

It has been suggested that both the UK and the U.S are on the cusp of an entrepreneurial boom, not in spite of the ageing population, but because of it

(Stangler, 2009a; Botham and Graves, 2009). There are implications for both business and consumers. In some sectors, entrepreneurially orientated firms are more likely to recognise and exploit the opportunities presented by older consumers (Chaston, 2010). As older entrepreneurs enter the market, they have the opportunity to fine-tune their products and services to meet the needs of neglected market segments, such as fellow older consumers (Schaper, 2007), helping to maximise growth and profit potential (Philp et al., 1992). This is beneficial for older consumers whilst presenting a challenge to existing businesses to compete. Furthermore, as the economic trend continues away from lifetime jobs, towards more and more new companies (Stangler, 2009b), businesses will need to compete to recruit and retain the best employees in a depleting labour pool, a pool increasingly occupied by older workers (Lisenkova et al., 2010).

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Focus: Older people as Entrepreneurs

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The Future of Technology Use in the Fields of Gerontology and Gaming

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<http://www.hannahrmarston.co.uk/>

Digital game technologies are increasingly being used in the fields of health and gerontology. The aim of this article is to highlight the need of research utilizing technology with ageing populations is provide a brief overview of technology and gerontology studies primarily utilizing digital game technologies and the effects which game technology has had the current ageing population.

Previous studies utilizing both commercial and purpose built technology have sought to identify the suitability of consoles such as the Nintendo™ Wii, Microsoft Xbox Kinect and the PlayStation® in a bid to facilitate fall prevention/risk of falling, and stroke (Rand et al., 2008; Deutsch, 2011; Kafri et al., 2001). Conversely, additional studies have focused on energy expenditure, (Miyachi, et al., 2009; Graves. 2008) cerebral palsy (Deutsch, et al., 2008), mental health (Procci, et al., 2013) obesity (Smallwood et al., 2013; O'Donovan, et al., 2013; Maloney) and stepping impairments (Schoene, et al., 2013; 2011).

Studies which sought to discover the feasibility of technology for fall prevention, stepping impairments and stroke have primarily recruited older adults and elderly. Moreover, studies which have focused on obesity, mental health, and energy expenditure have recruited children and young adults. Although there is a steady growth in this area there is however a need for further substantial exploration in particular longitudinal studies to gain an in-depth understanding of the utilization of such technologies for rehabilitation (c.f. Marston & Smith, 2012).

Conversely, there is little evidence outlining the needs and requirements of digital game content and functionality by older adults with the exception of Marston (2013a). As the studies have shown, the use of commercial/purpose built games for rehabilitation display positive outcomes. Additionally, previous work has highlighted the occurrence of *flow* – whereby, one may experience immersion via an activity such as digital games or watching a movie. Flow comprises of

nine elements: balance of challenge and skill, (b) action awareness, (c) clear goals, (d) unambiguous feedback, (e) concentration on task at hand, (f) loss of self-consciousness, (g) transformation of times, (h) control in an autotelic activity, and (i) sense of control (Csikszentmihalyi (1990, 1993). To date there has been minimal work exploring flow (Marston, 2013b) and in some instances, studies have explored the correlation of psychophysiology measures and flow (Nacke & Lindley, 2008b; Kivikangas, 2006) whilst utilizing a variety of game genres (1st person shooters, 3rd person shooters, and sports). Marston (2013b) identified five of the nine flow effects (challenge of skill, action awareness, clear goals, sense of control, and autotelic experience) experience by adults playing Wii Sports (Boxing, Tennis and Golf). Marston (2013b) concluded, the participants enjoyed this experience more so, than playing on the Sony PlayStation 2. Reviewing current literature, there seems to be no additional exploration, yet with the ever growing body of work focusing on exergames, health, physical activity, it is suggestive; further investigation of flow is required. Potential areas of future research could consider exploration of different game genres (E.g. puzzle, adventure, and strategy), being played by users of varying abilities ages, possible exploration of intergenerational game play and energy expenditure.

Current literature highlights there is little work which focuses on both older and younger cohorts and from a

gender perspective of the use of technology (Internet, gaming, television usage etc.), ownership, behaviours and perceptions in preparation for a future ageing demography. Further, there is little or non-existent work focusing on adults categorized as oldest-old and centenarians. Recent statistics have shown the predictions for the future populations (ONS, 2011; i2010: Independent Living for the Ageing Society, 2007) detailing the increase of ageing adults. Gaming statistics provided by the Entertainment Software Association (ESA) report the average of a gamer is 30 years (ESA, 2013). Yet there is still a lack of investigation focusing on the current ageing population and even less on the future ageing cohorts associated to preferences, ownership, player styles and co-operative play.

Figure 1 displays ESA statistics of gamers by age since 2004. Up until 2012, the ESA reported the percentage of gamers aged 50+, yet it is unclear why the ESA have stopped reporting this particularly statistic. It is especially alarming, when there is such a growth of scholarly work being conducted, and government initiatives focusing on current ageing populations and technology. Focusing on the figure, one can see the primary growth is within the cohort of 18-50 years, in addition to the average age of a gamer being 30 years old (ESA, 2013).

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Additionally, gender and gaming is also under-represented and previous studies and reports have primarily focused on young girls and women in their 20s-30s. Reviewing the literature of gender and gaming (McDonald, 2013, 2012; Wirman 2011Carr, 2006, 2005; Cassell & Jenkins, 1998; Consalvo, 2008; Graner Ray, 2004; Haines, 2004; Jenkins 1998; Kafai, 1996; Kennedy, 2002; Krotoski, 2004; Mikula, 2003Laurel, 2001; Pratchett et al., 2005; Taylor, 2006, 2003), with the exception of Pratchett et al., (2005) there has been no study or reports detailing older women and gaming.

Digital games have had a relatively short life span, approximately 50 years since making their initial appearance in the early 1960s, and during this time, the industry has experienced many turbulent times. Nevertheless the industry has to be commended on

the developments which have occurred for example, the 1980s and 1990s bore witness to the industry crash, the rivalry between Nintendo and Sony resulting in a variety of game hardware being released and due to the development of this hardware, visual representation of game became more realistic (Kent, 2001).

However, it wasn't until 1999 and into the 21st Century that the industry developed and expanded their gaming abilities not solely to the typical gaming individual as previously observed. The Sony Eyetoy (1999), allowed users to interact with games via gesture movement, it was six years later that game interaction would be transformed by the release of the Nintendo DS Handheld (2005) and the Nintendo Wii (2006) in Europe. The approaches to game interaction facilitated users – not normally

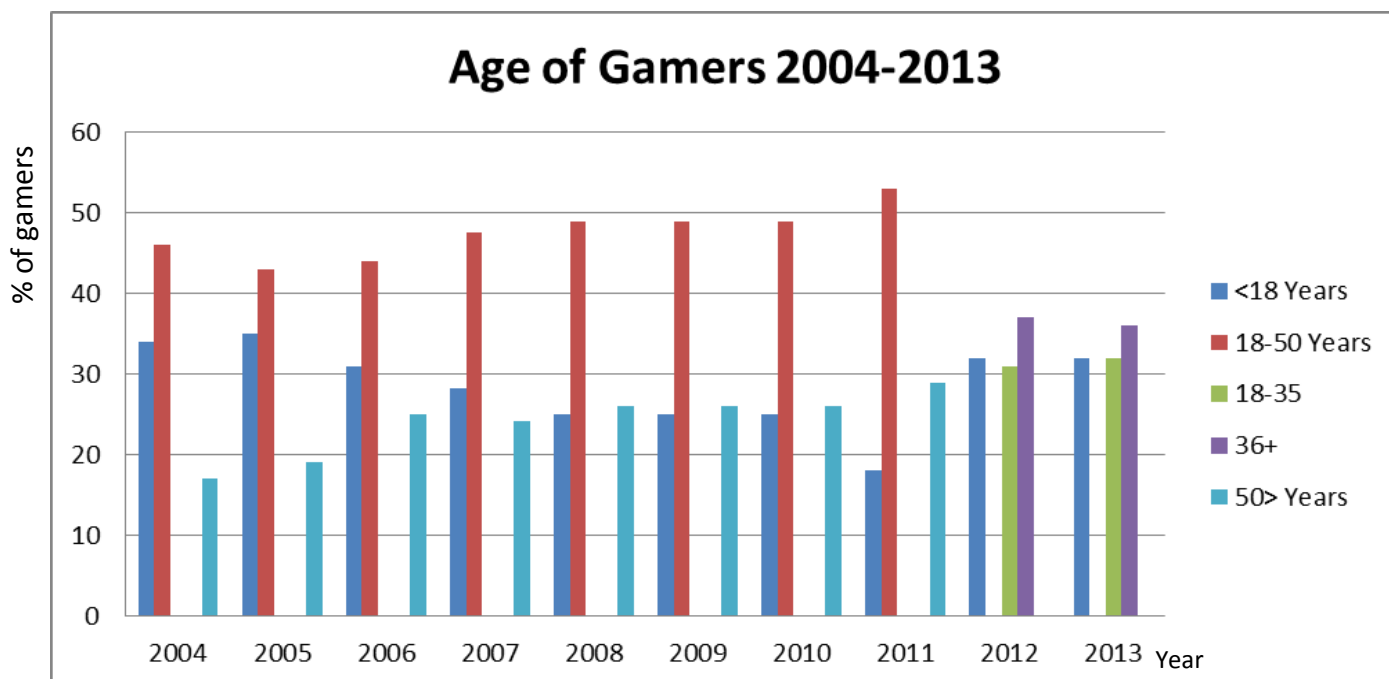


Figure 1. Displays the increase of gamers (by age) since 2004 (Source: ESA)

perceived to be gamers or take an interest in this entertainment medium, to engage with the environment via gesture and touch screen/stylus. The software releases were still following previous industry genres – sports, puzzle, and adventure, but the graphics were not necessarily realistic as previously witnessed in the mid-90s and the gateway was open to a different form of scholarly research. In recent years, the Sony PlayStation Eye toy has not been used in academic research, leading to the preference of the Wii with its additional peripherals (the Wii Balance Board, 2008) and since 2010 the Microsoft Kinect console.

It is well established in the coming decades, populations will continue to age, and reach unprecedented numbers. However, as our present young and middle age populations are steadily creeping into the cohorts of being older adults and elderly, there are no models to facilitate current and future academics and practitioners with the use of game technology and content.

Therefore, it is suggested further work is required from both game scholars and gerontologists to advance the knowledge and understanding of technology use by such all populations. Moreover, by conducting these types of studies, it is anticipated a greater understanding of the overall benefits to using technology, including the problems which may be experienced by users and health practitioners etc.

based upon geographic location, experience, financial implications and support.

Additionally, there is no concurrent data from previous studies which records the type of technology used, purpose for using such technology, and length/frequency of technology use. Focusing on digital games, there is little data referring to game genre preferences, length/frequency of game playing and considerations, intergenerational playing, purchasing habits and methods of learning.

Collecting this type of data, would provide a wider picture of technology use by populations and may aid in understanding what exactly populations require. Qualitative data would enhance future studies in providing in-depth understanding of technology use by populations. In particular in areas where there is little published work for example; gaming by older adults incorporating a gender perspective.

Finally, the use and study of technology effects on populations is not going to disappear if anything, it is going to increase. With this final thought, the highlights and proposals in this article are key considerations for future work within this area to progress and gain strides in the coming years and decades.

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BSG2014 ERA Pre-conference Event: NEW UNDERSTANDINGS

Monday 1st September 2014

9.30-12.30

University of Southampton, Highfield Campus Building 67

The ERA Chairs and Secretariat invite current ERA members and interested students and postdoctoral researchers to a pre-conference event which will provide an opportunity to meet and connect with one other. This interactive forum offers emerging researchers with the chance to explore relevant ideas and information.

Programme

The 2014 British Society of Gerontology Emerging Researchers in Ageing event is an interesting mix of the thought provoking and the practical. The theme this year is, New Understandings.

09:00 – 09:30 Registration

09:30 – 09:40 Welcome, BSG President, Professor Robin Means

09:40 – 10:30 Keynote: Professor Chris Phillipson

10:30 – 10:40 Comfort break

10:40 – 11:25 The Three Minute Thesis

11:30 – 12:25 Brave Choices, Wise Choices and More: Professor Robin Means, Professor Mo Ray, Dr Paul Nash and Professor Julia Twigg.

12:25 – 12:30 Wind-up

12:30 ERA Networking Lunch

To register or for more information, please contact:

naomi.woodspring@uwe.ac.uk or k.wimpenny@coventry.ac.uk

**This event is free to all BSG members.
There is a £50 charge for all non-BSG members**



Internship with UK Government

Updates from Nicola Woodward and Ruth Lamont

Every year the ESRC offers PhD students the opportunity to apply for a variety of internships within various non-academic organisations. The internship can last up to six months within the public, voluntary or private sector and offers students experience outside of an academic institution. The internship scheme allows students to gain additional skills and enhance their professional development and gives them the opportunity to work within a more policy based or practical setting.

Last year there were a variety of internships on offer ranging from placements in the British Library, College of Policing, the British Heart Foundation and the Department of Health. The Government Innovation Group in the Cabinet Office advertised six internship opportunities for which ESRC funded PhD students could apply. The Government Innovation Group promotes new approaches to tackling social problems so that public services are able to deliver better for less. Two of these internships were based within The Centre for Social Action which encourages people to create positive change through social action, such as volunteering or offering peer mentoring and support. The Centre works across key areas related to health, ageing, young potential, prosperity and safer and stronger communities with an aim of addressing key social and public service challenges within these areas.

We will follow Nicola Woodward from Swansea University and Ruth Lamont from Kent University as they embark on their Internship with the Centre for Social Action throughout the year in Generations Review. This is their second update five months into the Internship, following their initial thoughts in the last edition.

Nicola Woodward

Swansea University

Five months into the internship and I can't quite believe where the time has gone! Working in the Social Action Team has been an incredibly rewarding and challenging experience. The Social Action Team support a diverse range of funds and campaigns including the Dementia Friends Campaign, the Vulnerable and Disengaged Young People Fund, Reduce Pressures in Hospitals and Community Energy. All of the programmes encourage people to create positive change through social action, be that through holding technical workshops on wood fuel or helping older people make the transition from hospital to home.



INTERNSHIP UPDATE

In all honesty, although I knew it would be a fantastic experience, I half expected to spend six months photocopying, stapling and making cups of tea for the team – I couldn't have been more wrong! The team have been incredibly supportive and encouraging, and my line manager wanted to be sure that I got the most out of the time that I spend here. My highlights so far have been;

- Going to a House of Lords committee on 'tackling loneliness and isolation at a local level' on my second day and seeing my first celebrity (Ester Rantzen!)
- Engaging with the public through public dialogue sessions on loneliness to help the government understand how we should be developing policy in this area.
- Being thrown in the deep end and co-leading a project in a field that is brand new to me!
- Working on the Dementia Friends Campaign.
- The weather here being somewhat better than in Swansea and being able to spend my lunch breaks in St James Park (although the park doesn't beat the South Welsh coast!)

Although I'm sad that my time in the Cabinet Office is coming to an end there is plenty to do and I'm really excited to be spending three days at Manchester City Council in a few weeks working with the Age-Friendly Manchester team!

Ruth Lamont **University of Kent**

I have spent the past 6 months supporting the management of two of the Social Action Team's, Centre for Social Action grant funds. The grant funds support social action projects (all VCSE organisations), with one supporting 12 projects in the area of offender rehabilitation, and the other 26 projects helping vulnerable young people. The role has been so interesting and diverse, from monitoring grantee evaluations and procuring business support for grantees, to engaging in the development of the Team's forward strategy and briefing the Minister for Civil Society on the work of grantees.

In my first note in the Generations Review I said that "I hope this internship will help me to see how social policy is developed, funded and implemented, and the role of research within this." Has it?

I can confidently say 'yes', although I am aware that this is just one policy area and one team within wider Government. Research has been an integral part of the team's work. From the outset, the Centre's priority areas (including ageing well and dementia) and the focus of the grant funds were informed and justified by national statistics. As the team's work progresses, there is strong recognition that research will ground the



case for social action. However, this will be an ongoing development as wider and more rigorous research needs to be carried out in this area. Importantly, the individual grantees or social action initiatives that the Centre supports could not develop their models and retain financial support if they did not carry out individual impact evaluations. The Centre has allocated specific funds for this purpose, seeing its importance for their sustainability.

The internship also made me think about how policy makers and academic institutions work together. From the experiences that the ESRC have permitted me in both academia and Central Government, it is clear that further progress could be made to strengthen this mutually beneficial collaboration. From a Government perspective, forming and implementing robust social policies should rely on a strong evidence base (see the HM Treasury 'The Magenta Book') which should be done through capitalising on the investment that Research Councils make in academic research. However, when it comes to making social policies the necessary research is not always there.

On the flip side, as stated by Professor Dominic Abrams (President of the Society for the Psychological Study of Social Issues), academic institutions must think more about the applied value of their research otherwise it will erode researchers' "ability to engage with people who have the power to bring about social change."

Being new to the Civil Service I have gained more insight into ways that academics can best engage with policy makers. Embedding researchers in the civil service, even for short internships, is certainly useful as it promotes better mutual understanding of how to link the two worlds. It is encouraging that government departments are actively seeking high quality academic input, and it is important to complement this by supporting academic researchers to convey important and interesting discoveries beyond the walls of academic conferences and journals. Relevant Government departments, local authorities, VCSE organisations as well as the private sector need to receive rigorous evidence and advice in an accessible form. In linking with these relevant parties academics benefit both from the opportunity to say what we think the policy issues should be, and from an enhanced understanding of the practical and policy questions that future research needs to address.

An Audit Report on Food-Related Care and Dementia Written Information

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This report briefly describes an audit that was developed to find available food-related care and dementia written material. It aimed to address what accessible resources focused on food-related information that helps to inform people with dementia and their caregivers.

Introduction

Although nutrition education for dementia caregivers has been recognised as important, there is still little research in this area (Keller, et al., 2008; Papachristou, Giatras, & Ussher, 2013). Dementia caregivers who receive specialised and accurate nutrition information early on find them helpful in maintaining control and enabling them to make appropriate decisions, which in turn can reduce stress and increase satisfaction with life (Chang et al, 2010). The aim of the study was to investigate the content and availability of food and dementia written information for informal caregivers.

Project methodology

Written information was collected through

visiting, calling and emailing target locations over a period of three months. Locations were contacted for food-related material that focused on people with dementia and their caregivers. These locations were mainly hospitals and dementia departments around London and the UK. A selected group of written material was collected, focusing on people with dementia and their caregivers concerning nutritional information, food care management in shopping, preparation and eating. All written material relating to this area was collected based on availability and accessibility to informal caregivers and which could be read and understood by lay people. Once the available material was collected, it was then analysed using a qualitative technique (thematic analysis).

Results and Implications

A total of 13 written materials were found. Out of the 13 material, 11 of these concentrated solely on food care, while others had a small section dedicated to food care. Themes for each material were found through analysing the content. This was



Food-Related Care and Dementia

followed by analysing thematically across all written material. From the analysis five main themes emerged: changes in appetite, changes in food preparation, methods of eating, eating out and dental care and swallowing difficulties. The main source of information available was from the Alzheimer's Society and came in a booklet format. This audit reveals that the majority of information published is in the area of eating, some on food preparation and least on food shopping. This supports previous research that most information that is available is on dementia progression, eating and nutrition. The five themes found from this study imply that this is what is considered by the organisations producing the material as important. However, as few studies have investigated what food and dementia information is considered important (Keller et al., 2008), this concept is limited. In addition, although tailoring information material has shown to be more effective than generic information in helping people make behaviour changes, there are still limited information materials available for informal caregivers. Therefore, further research is required to assess the impact written material in the area of food has on people with dementia and their caregivers. In particular, assessing the five themes, as well as other difficulties such as, shopping activities. This could be conducted through a booklet intervention.

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Twenty years of action research: reflecting back and thinking forward

Sue Venn

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This year marks the twentieth anniversary of the establishment of the BSG Averil Osborn Memorial Fund, so we have the perfect opportunity to reflect on what has been achieved, to thank all of those involved, and to contemplate what lies ahead for the Fund. For the last twenty years the Awards Panel has been working hard to support the sort of research that Averil would have both advocated and been proud of. Since the fund's establishment in 1994, a staggering 30 projects have been funded and in this short article I will share some of these with you. None of this could have been achieved without the hard work of all the Fund's recipients, especially the older people involved, the support of the Awards Panel, those who donated to the Fund, and of course the BSG.

Averil Osborn

Averil Osborn was born in 1944 and trained as a scientist before turning to public policy issues. She had a sharp, analytical mind with a scientist's healthy scepticism for received wisdom, and was

always ready to question existing ideas and ways of doing things to promote improvements in society.

The work that was to develop Averil's reputation as a social gerontologist began in 1975 when she became a research officer in the Lothian Region Social Work Department. She is described by colleagues as 'a superb professional who always set herself exactly high standards'. She is also remembered for her warmth and gentle humour. In 1982, Averil moved to Age Concern Scotland as Assistant Director for Training and Development. Here she was able to address and bridge what she regarded as disturbing gaps between research and policy and practice. In the 1990s she joined the Joseph Rowntree Foundation, which provided a further avenue for her commitment to change. Averil collaborated with many people in the public services, academic world and voluntary sector, many of whom researched especially challenging issues in social policy. She remained throughout deeply committed to *action* research. For her, the energy and money invested in social research were

only well spent if its results were widely disseminated, informed public debate and catalysed policy change.

All Averil's work was founded on a genuine respect and admiration for the older people with whom she came into contact. For Averil, older people were not just passive subjects, whether of care services, planning or research, but active participants eminently able and willing to determine their own destinies. She was one of the first gerontologists to champion an active role for older people in all stages of the research process, from determining the research questions, through research design, data collection, analysis and dissemination. She understood that this is ultimately a question of power: who decides what matters; who sets the agenda; who asks the questions; and who decides what things mean. Averil saw participation as a fundamental right. It is for this reason that the Averil Osborn Fund places such a strong emphasis on the direct involvement of older people in the research it funds.

What have we funded?

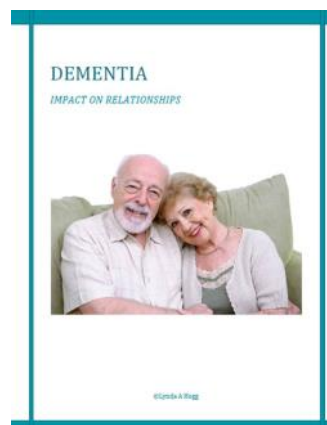
There is probably no better way to demonstrate both the ethos of the fund, and the benefits to older people than through examples of just some of the projects that have been funded.

The Laughing Girls: keeping safe and feeling secure in later life

The Great Walker Community Trust and Dr Helen Charnley of Durham University received funding in 2009 to undertake a project which addressed the tensions between current agendas of 'safeguarding' adults and the personalisation of social care. The project was jointly designed by a small group of older women with Helen, and aimed to explore a gap in current understandings of the part older people themselves can play in maintaining control over their own lives to prevent abuse from occurring.

The Laughing Girls group was involved from the start of the project, including the preparation of the proposal itself, right through to the writing of the final report. These older women led discussions, explored their experiences, used vignettes to open up discussions, and analysis was interwoven with the process of data collection.

Their findings identified several key areas to help older people feel safe and secure, just some of which are given below:



ence of dementia between researcher and subject.

As Lynda so aptly summarises:

When people receive a diagnosis of dementia, life changes. The journey from pre-diagnosis onwards can be a long road. Life must still be led to the best of an individual's ability. For some, this is a bewildering experience, fraught with uncertainty.

Lynda's work was also appreciated by the Alzheimer Society in Scotland, and as well as her other forms of dissemination, she was invited to present her findings at the Alzheimer's Disease International Conference in Greece in 2010. Please also visit the BSG website for a copy of her report.

AFRESH: A study on FosterRing Empathy between Students and older people

The final study I wanted to highlight here was a collaborative project between members of AgeUK West Sussex, and Dr Khim Horton and Dr Anne Arber of the University of Surrey. The project developed from some previous work which involved members of various Senior Forums supported by Age UK West Sussex. These members had discussed what positive action older people could take to help develop a consistent approach to dignity on the ward, where treatment with respect and consideration was expected as a natural outcome of any

hospital stay. They identified a number of issues that in their experience contributed to lack of dignity on the ward, for example:

- over 60% of patients using the NHS are aged 65 or more and some older people, through illness or disposition, could pose challenges to nurses on the wards;
- older people were increasingly feeling isolated;
- there was a growing geographical distance between families that meant less intergenerational contact, and there was a loss of intergenerational meeting places/activities such as working men's clubs.
- furthermore, it was felt that new technologies available on the ward could exclude older people.

The project involved both older people and student nurses in the development of a new radio play, which took place during February to October 2012. The ideas and materials for the play, 'Making Friends' (written by Ann Emery) were generated from this project and it was recorded in the television studios at the University of Surrey and performed by members of Age UK West Sussex and students in the School of Health and Social Care at the University of Surrey. The process of creating the play helped dispel the myths and stereotypical perceptions of ageing among student participants,

- Older people want to retain the right to take risks and to take responsibility for their own safety
- Being a carer can restrict your independence, ask for help and look to your own
- Being bereaved can affect peoples' willingness to socialise
- It is important to keep socially active. Join in what you can. Have a laugh. Visit other people. *But remember, not everyone wants to mix.*

Finally, The Laughing Girls reflected on the value they had gained from undertaking this research, and wished to continue as a research group.

Dementia – Impact on relationships

Whilst some recipients are already experienced researchers, others have benefitted from support throughout the research process, and I wanted to share with you one particular project that I was fortunate enough to have mentored in 2009. Lynda Hogg, who had been diagnosed with dementia, wanted to explore the impact of this diagnosis on couples. Lynda had no research experience but the

panel was impressed with her project and decided to fund it with the proviso she received some mentoring support. It was my first experience of mentoring and it was very rewarding for both Lynda and myself, one I would recommend to anyone. Lynda devised the project, created and tested the data collection instruments and undertook interviews with couples where one partner had received a diagnosis of dementia. She emphasised the importance of achieving the perspective of both partners in order to understand the impact on relationships.

Lynda's work identified a huge shift in partnership dynamics when one partner receives the diagnosis of dementia, whereby the couple relationship still exists, but is secondary to the carer or person with the diagnosis. Couples talked of loss of relationships, of independence and of role reversal and at the core of the study was the emergence of the fundamental difference in outlook of the person with a diagnosis of dementia and their partner. They opened up to Lynda in a way that they might not have done without the shared personal experi-

Centre for Research in Nursing and Midwifery Education



A study on FosteRing Empathy between Students and older people - a practical approach (AFRESH)



BSG AVERIL OSBORN FUND

and the experience of working together in a safe environment was highly valued.

I was invited to hear a performance of the play and was delighted by its innovative and creative approach, and it was particularly pleasing to see how intergenerational, participatory research fosters new relationships and understandings. The play has subsequently been broadcast on AgeUK's radio station 'The Wireless'.

Where next?

So what now for the Fund's future in these difficult financial times? In continuing the ethos of the BSG Averil Osborn Award, the panel will continue to work on finding ways to secure sufficient funds to support as many worthy projects as we can. It is a difficult task to maintain the momentum of the award, and we always appreciate any donations we receive, from individuals and from the BSG. So this is an ongoing item in our strategy - securing the future of the Award is our minimum aim, but extending its capacity is our preferred goal.

Every year we have many more applications than we can possibly fund and we find ourselves having to turn down some very worthwhile projects. But the Award is not only in need of financial support. We would like to have a contact list of those willing to mentor projects whose applicants do not have research experience. Perhaps you know of a group

of older people who have some interesting ideas about an issue they would like to explore, such as one of the projects we funded in 2013: "Identifying ways to improve the social inclusivity of Hartlepool and District University of the Third Age". This group, supported by academics from Newcastle University, observed that very few members from socially disadvantaged socio-economic backgrounds attended their events and wanted to establish the reasons and barriers, perceived or otherwise, as to why these people are not joining the U3A. They identified a complex interplay between presentation and perceptions that they are now in a position to address. I am very much looking forward to the dissemination event from this project in June and to meeting the members of the project.

We are also mindful of the need to secure the legacy of work undertaken by all our applicants and so I am working with Rachel Hazelwood to do just that – watch this space for more information on how outputs from the projects can be accessed.

Annual Conference – Showcasing the BSG Averil Osborn Fund

If you are attending the Annual Conference in Southampton this September, please do take a minute to visit the BSG stand where there will be information on just some of the projects that have been funded.



Finally, I would like to express my personal thanks to all the members of the Awards Panel, past and present, who have supported me during my time as Secretary to the Panel. I am conscious of the amount of time they freely give to review the many applications we receive in the award process, and to read and comment on final reports, as well as all the other demands I place on them! So my special thanks to the current panel, Bob Peacock, Clive Newton (Chair), Susan Tester and Kate Davidson, to the previous panel members and to Rachel Hazelwood and Robin Means of the BSG for their not so behind the scenes support.

For further information, please contact Sue Venn, Centre for Research on Ageing and Gender, University of Surrey, Guildford GU2 7XH, 01483 689292, s.venn@surrey.ac.uk

BRITISH SOCIETY OF GERONTOLOGY ANNUAL GENERAL MEETING

The 43rd Annual General Meeting of the British Society of Gerontology will be held at the University of Southampton on
Tuesday 2nd September, 2014, at 12pm



- **Enhancing** our understanding of later life
- **Connecting** research, policy and practice
- **Promoting** studies in ageing
- **Participating** in debates on ageing
- **Disseminating** research on ageing



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Long serving and highly committed member of the BSG, **Professor Alan Walker received a CBE for services to the social sciences in the Queen's Honours List.** Alan is Professor of Social Policy and Social Gerontology at Sheffield University.

This award is richly deserved for his career-long contribution to the social sciences in general but also more specifically for his huge contribution to ageing research both in the UK and internationally.

Congratulations Alan from all at the BSG!

Involving people living with dementia in systematic reviews

Mike Fisher, Rebecca Kelly, Alison Lawrie-Skea,
James Randall and Nicolette Wade

University of Bedfordshire
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The aims of the study

This pilot study had two aims – to undertake the initial stages of a systematic review of the views of people living with dementia, and to explore ways of involving people living with dementia in the review. The research team received funding from the Averil Osborn Memorial Fund, and fieldwork took place in August and September 2013.

Background to the study

Planning for services to older people is normally informed by the views of older people themselves. However, the views of people with dementia are not yet integrated in policymaking. There are now over 200 studies of the views of people with dementia, but neither the National Dementia Strategy (DH, 2009) nor the underpinning report (Knapp and Prince 2007) refers to users' views.

Systematic reviews provide a comprehensive source of evidence for policymaking. However, there are no examples of involving people with dementia in systematic reviews (Boote et al., 2011). In

developing our approach, we drew on Alzheimer's Society reports on Service User Research Panels (Tooke, 2012, 2013), and on the extensive literature on user involvement in research, including on including older people in systematic reviews (Fisher et al., 2005).

We recruited seven people from a local Memory Assessment Service (MAS) who knew they had a diagnosis of dementia. Although we initially considered including people with a diagnosis of mild cognitive impairment (MCI), we decided against this because we did not want to suggest, through the study's focus on dementia, that such a progression is inevitable.

We planned to undertake the work in a group setting, in order to provide a supportive environment for people to express their views. We were careful to make it clear that this was a time limited group, and not a support group (support was available from the MAS.)

We made sure we could support people if they became distressed. The research team included two



facilitators, a nurse member of the MAS, a senior social work academic, and a social work student. All had experience of working with older people and all except one had experience with people with dementia. In addition, two members of the team had a specific role to monitor the participation of group members using aspects of Dementia Care Mapping (Bradford Dementia Group, 2005). In the event, no group participant appeared to be significantly distressed during group discussion and no-one needed to take time out.

The proposal was approved by the University of Bedfordshire Research Ethics Committee and by a NHS Research Ethics Committee (NHSREC). In seeking ethical approval, we found a stark discrepancy between the experience of staff providing services and the approach of the NHSREC. We intended to work only with people who had capacity to make decisions in their own right, yet the NHSREC sought to stipulate additional protection. We were required not to recruit people by phone (despite this being an accepted mode of communication between MAS staff and patients) and had to resist a suggestion that the research team notify GPs as part of approaching participants.

The Systematic Review

We undertook the initial stages of a systematic review in order to generate questions for the review group. Initial work was based on 214 studies of the

views of people with dementia, identified by means of a pragmatic search strategy. This initial list of 214 studies raised three questions to discuss with the review group: what studies should be included, which studies were high quality, and whether we had correctly interpreted the key themes.

What to include

Half of the studies concerned thirteen countries other than the UK, so we wanted people's views about whether these studies should be included. Several studies collected people's views as part of testing a questionnaire. This restricted the opportunity for respondents to decide what would be discussed, and we wanted people's views on this.

What counts as quality?

Some studies gave no information about the background of participants (e.g. their age, gender, or living arrangements). In some studies, permission was sought from service providers or relatives prior to approaching the person with a diagnosis. We also wanted to know whether people valued the approach taken in some studies to check with participants whether the analysis made sense.

Making sense of key themes

We identified the key themes in ten UK-based studies of people's views. The three themes were that

- having a diagnosis of dementia sometimes makes you angry with yourself;

- because the effects of having dementia are unpredictable, some people decide to ‘live from day to day’; and
- people sometimes cope by avoiding socialising.

Using dementia care mapping to evaluate participation and well being

We wanted to record systematically the participant’s level of engagement and well-being, and turned to Dementia Care Mapping (DCM). Although this is normally used in formal care settings, it provides a structured method for recording the level of engagement and the participants’ mood, based on defined conditions and rules. We incorporated two trained observers into the group, who made observations in five minute time frames.

We recognise that this is different from the original use of DCM. Group members were undertaking very different tasks from those normally observed in care settings, and participants probably had a higher level of capacity. Many of the behaviour or action codes in DCM were not relevant to a review group. Although we made it clear that we were making observations, we did not use the term DCM, because we were only using selected aspects of the tool.

The group process

We drew on Tooke’s studies for Alzheimer’s Society

of involving people with dementia in organisations (2012; 2013). The groups were planned to be informal, to offer a chance for social chit-chat as well as getting the work done, but not to be a social support group. Careful attention was paid to using plain language and to minimising the use of phrases and terms that had multiple meanings.

The groups took place at a small local university campus, which offered a break-out room (in case people were distressed), and space for relatives separate from the meeting room. Bringing people to the local university also conveyed that we valued their contribution as partners in a research process.

We ran the groups from 10.30am – 12 noon on the same day in three successive weeks. Seating was arranged around a small group of tables, with a view of a presentation screen. Participants also had written information and facilities to write notes. The groups were run as a series of tasks where people were asked to comment on the material presented. The conversation was audio-recorded.

Participants commented that they had enjoyed the meetings, confessing sometimes that they had surprised themselves by their ability and willingness to contribute. As the university was approaching a new academic year, some commented wryly that they were now considering enrolling.

The broad message from the use of aspects of DCM was that people appeared to enjoy the group. All

members of the group participated in voicing opinions and experiences in all three groups. There was consistent evidence of high levels of positive mood and engagement recorded by both observers across all three meetings. Participants welcomed being asked their opinions and often had strong views about how they wanted other people to treat them. Group members appeared to be respectful and supportive towards each other even when they did not share the same point of view.

Outcomes

For the process of involving people with dementia:

Using elements of DCM revealed that all members of the group demonstrated an ability to engage with and to remain focussed on the task. Over the course of the three groups, levels of well being and engagement improved slightly. By the third group, participants were either directly responding to the question or listening to what other people were saying, with an associated high level of well being and with a slightly higher degree of apparent focus than in the first group.

For the systematic review:

The group demonstrated that people with dementia could offer clear opinions relevant to a

systematic review.

Participants suggested we should include studies from other countries if they had some kind of national health service, but noting any differences in cultural attitudes towards elders. Where researchers interviewed people about a questionnaire, participants thought this could be included if there was an attempt to explore people's views.

Participants thought that studies should detail the background of people who participated, and should include a wide a range of people. They argued that all people had the right to be asked to participate, and were critical of studies that approached people only after permission from staff or relatives. Participants valued researchers who checked whether their findings made sense to respondents, and who provided a written summary. Participants disagreed with our draft conclusions from ten key studies. Most group members were outgoing and argued that they had to get on with their lives, and not to hold back from socialising in case of embarrassment.

Conclusion

This pilot study showed that it is possible to involve people living with dementia as partners in the review process. By paying careful attention to how material is presented and to group processes,

the group allowed people to participate and express their views, while preserving their well-being.

Participants' criticism of key themes may indicate that research has not caught up with this new generation of people living with dementia.

While the general principles emerging from the review group will still need interpretation in a systematic review, they provide a key starting point that would not have been possible without the contribution of people living with dementia.

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BSG is pleased to announce an opportunity for members to film an Ageing Bite at the annual conference in September

BSG Ageing Bites is a series of short films each highlighting a different aspect of ageing or ageing issue.

The films are available to view here <http://www.youtube.com/user/AgeingBites/videos>

Members can film your own Ageing Bite on **Tuesday 2nd September 2014**, during the annual conference.

If you would like to film an ageing bite at the conference please send an email to Rachel Hazelwood rhazelwood@britishgerontology.org

If you already have some film material from a research project or through work that you think would be suitable, please share it with Rachel Hazelwood rhazelwood@britishgerontology.org



8th International Conference on Cultural Gerontology 10-12 April 2014, Galway

Thomas Scharf, Director, Irish Centre for Social Gerontology

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Many BSG members made the journey to Ireland's west coast to participate in the 8th International Conference on Cultural Gerontology, held on the campus of NUI Galway. Organised jointly by the Irish Centre for Social Gerontology and the School of Political Science and Sociology at NUI Galway, and held in association with the European Network in Ageing Studies (ENAS), the conference welcomed around 250 delegates from over 25 countries and different world regions.

From relatively humble origins in Gentofte, Denmark, in 1997, when participants would have comfortably fitted into a single seminar room to explore themes around *"Everyday Life, Life Story and Ageing"*, this conference has grown to become



(l-r Chris Phillipson [University of Manchester], Aagje Swinnen [University of Maastricht], Thomas Scharf, Ricca Edmondson [both NUI Galway], Rick Moody [formerly of AARP])

Reflections on an international conference



Paul Higgs [University College London] and Suzanne Moffatt [Newcastle University] in conversation

a recognisable and keenly anticipated feature of the gerontological landscape. Meetings take place every two or three years and have rotated around locations in Europe where cultural gerontology has become a recognised field of study. Since Gentofte, the conference has been held in Berlin (Germany, 1999), Visby (Sweden, 2001), Tampere (Finland, 2003), Milton Keynes (England, 2005), Lleida (Spain, 2008) and Maastricht (The Netherlands, 2011).

Over time, the field of cultural gerontology has evolved to reveal and dissect culturally-determined perceptions, attitudes and effects of human ageing that are typically under-recognised within other

disciplinary approaches. While the term ‘culture’ does not entail ignoring economic, social, political and other impacts on ageing, the study of culture – with its multiplicity of forms – enhances our interrogation of both individual and social choices and constraints connected with ageing. It also explores, for example, the cultural means that can help people and groups to respond to the pressures and opportunities they encounter as they age. It analyses expectations and practices that can help ageing adults to exercise power and resist it, to confront obstacles or sometimes to create them, and to make their lives meaningful both to themselves and to others.



Reflections on an international conference

A key distinguishing feature of the cultural gerontology conferences is the way in which meetings draw together scholars from the social sciences, arts and humanities, punctuated by a welcome smattering of researchers from the health and natural sciences. This was especially noticeable in the Galway conference, which ran under the theme “*Meaning and Culture(s): Exploring the Life Course*”. The programme featured 23 symposia and 31 paper sessions, organised into seven concurrent sessions to reflect the breadth of the field of cultural gerontology. The abstract book, now available online (http://www.icsg.ie/sites/www.icsg.ie/files/programme_book_31.03.14_1.pdf), provides an excellent overview of the range of papers presented over the three days of the Galway conference.

Jan Baars [University of Humanistic Studies] at the launch of a new book in the transcript *Aging Studies* series



Keynote addresses were delivered by acknowledge international leaders in the field of cultural gerontology. Harry (Rick) Moody, recently retired as Vice President and Director of Academic Affairs at AARP, USA, built on his longstanding interests in issues around ethics, intergenerational justice, and ‘conscious ageing’ to present the opening lecture on the theme “*Gray is Green: Elders and the Care of the Earth*”. Aagje Swinnen, from Maastricht University in The Netherlands, succeeded in her attempts to encourage the audience to participate in her plenary lecture entitled “*Healing Words: Critical Inquiry of Poetry Interventions in Dementia Care*”. Stephen Katz, from Trent University in Canada, closed the conference with a well-received lecture that drew in part on his autobiographic experience of participating in a boomer rock and roll fantasy club; his topic was “*Music, Performance and Generation: The Making of Boomer Biographies*”.

Cont...



Reflections on an international conference

Alongside the academic programme, conference delegates were able to enjoy a reception, accompanied by traditional Irish music, to mark the launch of the European Network in Ageing Studies (<http://www.agingstudies.eu/>) and of the latest additions to transcript's *Ageing Studies* book series ([http://www.transcript-](http://www.transcript-verlag.de/reihen/kulturwissenschaften/kulturwissenschaft/aging-studies/?f=79385)



Kathleen Loughnane, harp, and Cormac Cannon, uilleann pipes and whistle, performing at the opening reception

[verlag.de/reihen/kulturwissenschaften/kulturwissenschaft/aging-studies/?f=79385](http://www.transcript-verlag.de/reihen/kulturwissenschaften/kulturwissenschaft/aging-studies/?f=79385)).

Musical entertainment was also provided at the conference dinner, with the Irish Gerontological Society sponsoring a pre-dinner reception to mark Ireland's hosting of the forthcoming IAGG-ER conference in Dublin.

Slightly different perspectives on the conference can be accessed at: <http://www.thejournal.ie/readme/we-need-to-change-the-language-we-use-about-older-age-1406993-Apr2014/> and <http://www.irishtimes.com/life-and-style/health-family/second-opinion-with-des-o-neill-how-to-rise-like-a-phoenix-from-the-ashes-of-middle-age-1.1784324>.

The conference organisers have been heartened by the positive feedback that they continue to receive from delegates. This bodes well for the next

meeting in the cultural gerontology series, which will take place in Graz in 2017 and for which abstracts are already being accepted (<http://www.agingstudies.eu/>).

More immediately, the hope is that many delegates will have enjoyed their visit to Galway so much that they will be considering an early return to Ireland. There is no better option for this than to attend the IAGG-ER meeting that is taking place in Dublin, 23-26 April 2015. Abstracts for symposia, papers and posters can now be submitted online at: <http://www.iaggdublin2015.org/>. Alongside other all manner of topics of interest to members of BSG, the conference organising team anticipate a lively engagement around the themes of cultural gerontology and ageing studies at the IAGG-ER conference.

Who's Who

Bob Woods

Professor of Clinical Psychology of Older People at Bangor University

Bob Woods has been Professor of Clinical Psychology of Older People at Bangor University since 1996. He leads the Dementia Services Development Centre Wales and NEURODEM Cymru, the Wales Dementias and Neurodegenerative Diseases Research Network.

Describe yourself in three words:

Persistent Fortunate Over-stretched

How did you get here today (i.e. career/research)?

I am essentially a clinical psychologist, who has by chance rather than design become increasingly engaged in research over the years. I trained and worked initially in Newcastle-upon-Tyne, where there was a strong tradition of research on ageing, and have subsequently held posts combining clinical psychology practice with older people with involvement in training clinical psychologists and in research. Recently, I have had the opportunity to work part-time, and so am able to focus more fully on research and service development. Looking back, two of my main areas of research interest were formed in the 1970s in Newcastle – psychosocial interventions for people with dementia and the effects of the quality of relationships between family carers and care-recipients – I have learned a great

deal along the way regarding research methods to address these areas.

What's the best piece of advice you've received?

Paradoxically, it was the worst piece of advice that had the most impact. During my clinical psychology training I carried out my research study on incontinence in people with dementia, and began to look for jobs in this field. A senior psychology colleague warned me against working exclusively with older people – describing it as 'professional suicide'. This appealed to the perverse side of my personality, and made me more determined than ever to specialise in work with older people, at a time when this was very rare indeed. This is a decision I have never regretted for a single moment.



Who's Who

Who is or has been the most influential person in your career?

I will highlight two people from my early years, amongst the many inspiring colleagues I have had the joy to work with. Klaus Bergmann was the consultant psychiatrist at the 'psychogeriatric unit' where I worked first at Newcastle. He encouraged me to set up research and write it up for publication, and my interest in relationship quality was sparked by discussions we had in his case conferences. I later worked with him at the Maudsley Hospital in London, and always found him incredibly wise and very dedicated to his patients. Una Holden, who sadly died last year, was a clinical psychologist in Leeds when I was in Newcastle. We met at a conference and found we were both working on what was then called 'Reality Orientation'. Her energy and drive and creativity led to us immediately setting out to write a book on this and other positive approaches to dementia care, published in 1982, running to a third edition in 1995, and gave me a platform for much of my later work.

What's the best book you've ever read?

Pat Barker's Regeneration Trilogy has had a lasting impact on me. W.H. Rivers is a hero of mine, as a founding-father of modern psychology, and the account of his work with shell-shock victims in World War I, including Siegfried Sassoon and Wilfred Owen is inspirational.

Best or most influential paper you have read, you'd recommend to others to read?

I immediately think of Tom Kitwood's work, encapsulating and communicating so much of the essence of good dementia care, and contributing so much to the 'discovery of the person with dementia'. However, I can never single out one of his papers for special mention, and so always recommend his book 'Dementia Reconsidered', which draws his body of work together, in a delightfully readable style.

What do you do when you are not doing ageing research?

We are fortunate to live on Anglesey, in a beautiful part of Wales, close to sea and mountains, and spending time in our garden is a favourite pastime these days. Our grand-children live at the other end of Wales, in Swansea, but I love my role as 'Taid' (Welsh granddad!).

Best research project you have been involved with and why?

I guess it's always the next one, as I can always see the drawbacks and things we could have done better. I have the responsibility for leading CFAS Wales, a major epidemiological study of 3500 older people in Wales, linked with the Cognitive Function and Ageing Studies in England, and we are able to contribute a psychosocial perspective to understanding the development of cognitive changes and changes in well-being in the later years. I am looking forward to all the exciting results my colleagues in the project will identify and disseminate for many years to come!

What's the future for ageing research?

For the next few years at least, research on dementia and cognitive impairment is going to continue to be seen as a priority, with the G7 programme internationally, as well as more local initiatives. I think we will be increasingly using the 'big data' sets – often with routinely collected data. We are going to need greater capacity to meet the demands of the research agenda, and I hope there will be greater emphasis on asking the right questions, which will require researchers thoroughly grounded in an understanding of ageing, to avoid research that is purely driven by the methodologies available. It is a matter of regret that gerontology is still not widely viewed as an academic specialism, making it that much more difficult to build capacity for the future.



JOIN THE BSG TODAY!

Ageing research is increasingly high profile, nationally and internationally.

Consequently, those in universities and in organisations working with older people, will benefit from joining the British Society of Gerontology. The Society gives members access to a multidisciplinary forum and network of like minded people dedicated to applying the knowledge gained through research and practice to improving quality of life in old age.



Membership of the BSG brings you into a community of academics and practitioners interested in a wide range of issues related to ageing. In particular, membership:

- Facilitates access to dynamic and up-to date debates about ageing and ageing studies - our members are involved in cutting edge research, policy and practice and are very willing to share their perspectives with you
- Members have access to a number of social media platforms – blog **Ageing Issues**; twitter account; YouTube channel **Ageing Bites**; LinkedIn Group; and soon a photo-sharing page on Flickr
- Entitles you to significantly reduced rates at the Annual Conferences of the British Society of Gerontology
- Gives students access to our vibrant group of Emerging Researchers in Ageing (ERA), which includes students, postdoctoral researchers and people new to careers in ageing, meet regularly to discuss research, policy and practice and support one another in their careers
- Access to our mailing list (BSGmail) to enable you to keep up-to-date about conferences, seminars, teaching courses, and research about ageing and ageing studies
- If you are a student, postdoctoral or unwaged member, you are entitled to apply for a conference bursary, for example, to cover costs to attend our annual conference
- Entitles you to substantially reduced subscription rates to the following peer reviewed journals: *Ageing and Society* and *Journal of Population Ageing*
- Provides you with access to all areas of the BSG website, including the Membership Directory and Members Only pages

How can I join?

Visit the website and fill in the registration form online and we will do the rest!

www.britishgerontology.org/join

