



BSG 2021

50th Annual Conference
7 - 9 July 2021

Hosted online by
Lancaster University

Ageing Past, Present and Future: Innovation and Change

Conference Programme





To search this document you can click the button above or bring up the Search window by pressing Ctrl-F (Windows) or Command+F (Mac).

Contents

Welcome from the BSG President	4	Flagship Symposium	19
Welcome from the Vice Chancellor, Lancaster University	5	The Averil Osborn Symposium	20
Welcome from the Conference Chair	5	Sponsors and Exhibitors	21
Thanks	7	BSG Emerging Researchers in Ageing	22
Conference Committee	8	Conference Ceremonies	23
About the Conference	10	Social Events	23
Timetable at a Glance	11	Join the BSG	27
Tuesday 6 July 2021	11	Social Media Platforms	28
Wednesday 7 July 2021	11	Scientific Programme	29
Thursday 8 July 2021	12	Wednesday 7 July 2021	30
Friday 9 July 2021	13	Thursday 8 July 2021	32
Award 2021	14	Friday 9 July 2021	36
Stirling Prize 2021	14	Symposia	38
50@50 Bursaries	14	Papers	118
Special Interest Groups	15	Posters	210
Keynote Speakers	17		

Welcome Messages



Welcome from the BSG President

Colleagues,

On behalf of the British Society of Gerontology, I am pleased to extend a very warm welcome to this year's 50th Anniversary Conference. Thank you for joining us and helping us to mark such a special occasion in the Society's history.

Of course, when planning such a landmark conference, we had envisioned a rather different event. The Society's annual conferences are notable not only for the excellent scientific programme, but also for the countless opportunities to engage in friendly and supportive dialogue, cementing existing relationships and making new connections. While the Covid-19 pandemic has meant that we are unable to celebrate the Society's golden anniversary in person, we still have an outstanding programme ahead of us that, as the conference theme indicates, does justice to the past, present and future of British gerontology. We also have a social programme that provides a range of opportunities for delegates to interact informally with one another and to have some fun. I am indebted on behalf of the Society to the local organising team at Lancaster University for all they have done to ensure that our 50th Anniversary Conference will be an event to remember.

Wherever those of us participating in the conference work, whatever we do, and whatever our life or career stage, we have all been deeply affected by the multi-faceted and highly unequal impacts of the Covid-19 pandemic on our personal and professional lives. For delegates based in the UK, there are also continuing uncertainties arising from the UK's withdrawal from the EU to contend with. These challenges will continue to have an impact for years to come. The changing context also emphasises the need for the multiple perspectives and approaches that have become a hallmark of the British Society of Gerontology. Our shared commitment to improving understanding of demographic ageing and the changing nature of later life also directs us towards potential responses to both opportunities and challenges associated with increasing longevity. In this endeavour, we especially value insights from countries and cultures beyond the UK.

As we embark on the next 50 years of our Society's history, I harbour the hope that our annual conferences will continue to be the place where we can share our ideas, engage in debate and learn from one another. Above all, I hope that you will leave the conference suitably motivated and inspired to continue your work in research, policy, practice and advocacy on ageing.

I wish you all an excellent conference,

Professor Thomas Scharf
President, British Society of Gerontology

Welcome Messages



Welcome from the Vice Chancellor, Lancaster University

I am delighted to be welcoming the British Society of Gerontology to Lancaster University for its 50th Anniversary Annual Conference. As with so many other events that have taken place during the pandemic, this landmark conference is happening virtually. Nevertheless, I am confident that in coming together as a community, you will still be able to enjoy a full and engaging event worthy of such a milestone. Lancaster University has made the study of ageing, particularly with regard to health and wellbeing, a real priority, with our Centre for Ageing Research comprising over 100 members and almost 50 associated PhD students, representing all four of our Faculties across the university. At Lancaster, we are ambitious in our learning, expertise and action, with a mission to create positive change in the world. We continue to build capacity in research and education, and we place emphasis on embracing innovative ideas and working with local organisations and people to create positive change for people in our region. This 50th Anniversary programme looks full, broad and exciting and I wish you a fantastic conference that celebrates the journey to the present and our journey from here onwards.

Professor Andy Schofield
Vice Chancellor, Lancaster University



Welcome from the Conference Chair

I am delighted and honoured to be welcoming you to the 50th Anniversary Conference of the British Society of Gerontology in 2021. This is a significant conference for a lot of reasons, most of all, the 50th Anniversary of the society. As a relative newcomer, I have come to appreciate all that has gone before in the evolution of the society as I have talked to members who have observed, and often led, the changes and developments, and particularly as I have seen some of the publications recording this history. Our conference theme examines and values the enduring themes and the achievements but also the enthusiasm to move forward in the study of ageing, hence our title: Ageing Past, Present and Future: Innovation and Change. We are excited that we have been able to offer 50@50 bursaries as part of our 50th Anniversary celebrations, and we will also be welcoming attendees from a wide range of countries, disciplines and sectors, in the Society's first full online conference.

While you will not get to visit Lancaster for the conference this time, we hope to introduce you to a few features of our city and university with a rich history, a vibrant present and an entrepreneurial eye to the future.

Lancaster's distinctive skyline features the Castle, dating back almost 1000 years, and still owned by Her Majesty the Queen, the Duke of Lancaster, which you'll see on all our publicity.

Welcome Messages

As well as being a fortification, its courtrooms have witnessed many famous trials over the centuries, including those of the Lancashire (Pendle) Witches in 1612, and we'll touch on this notoriety in our first plenary with Lancaster University's own Alison Findlay presenting on "The Demonisation of Older Women". Lancaster is situated along the North West Coast of England, neighbouring the outstanding beauty of the Lake District. These areas have distinct challenges for later life, with issues of health inequalities and rural isolation, but also the benefits of our fresh air, open spaces and access to fresh produce. Our second plenary from Michel Poulain will explore these and other issues in his presentation on Blue Zones around the world: areas of exceptional longevity.

As with the BSG, Lancaster's story reflects on, and values, where we have come from, but also where and how we will grow and develop in the future. This conference is happening shortly after the official move of my own faculty, Health and Medicine, and the organisational hub of the cross-university Centre for Ageing Research (C4AR) into our new Health Innovation Campus, a co-location of researchers with non-academic organisations such as business and social enterprises. These developments are important as we seek to ensure impact of our research in a range of arenas, but none so important as working directly with the eventual beneficiaries of our research and learning from them, and so our third plenary will be from Sandra Hirst. Sandra will share her passion for the stories of older adults and the learning acquired from listening to them in her presentation on the importance of narrational relationships. We will also feature interactive sessions from our linked Continuing Learners Group, and a co-researcher group in our lunchtime events programme.

When we decided on the title, we had no idea just quite how much change the year or so between then and the conference date would bring, and our programme reflects this with a large number of presentations specifically examining the impacts and the adaptations related to COVID-19 as it has affected older people, carers and organisations involved with older people. The conference will give us time to reflect on what has changed in gerontological research in relation to the pandemic as well as the last 50 years, on the impacts and achievements and the difference we have made. I hope during the conference we will all learn from each other in the present, but also reflect on how we may make new and innovative strides going forward, and we are grateful to our Flagship symposium speakers who will open this debate on the past, enduring nature and future of two key topics, Inequalities (Alan Walker and James Nazroo) and Environments for Ageing (Sheila Peace and Melissa Fernandez Arriogota).

Of course, the main innovation this year is that we are attempting a full conference programme online. This has meant a huge amount of commitment from the Lancaster team in terms of ensuring Lancaster University Microsoft teams hosts for all the sessions and I am hugely grateful to all the staff and students from C4AR who have stepped forward to help. I hope you'll be able to support us by adding the hashtag #BSG2021 into anything you tweet about the conference and your part in it.

We hope you will be able to enjoy this event in full, as you would an in-person conference and we welcome you to the BSG 50th Anniversary.

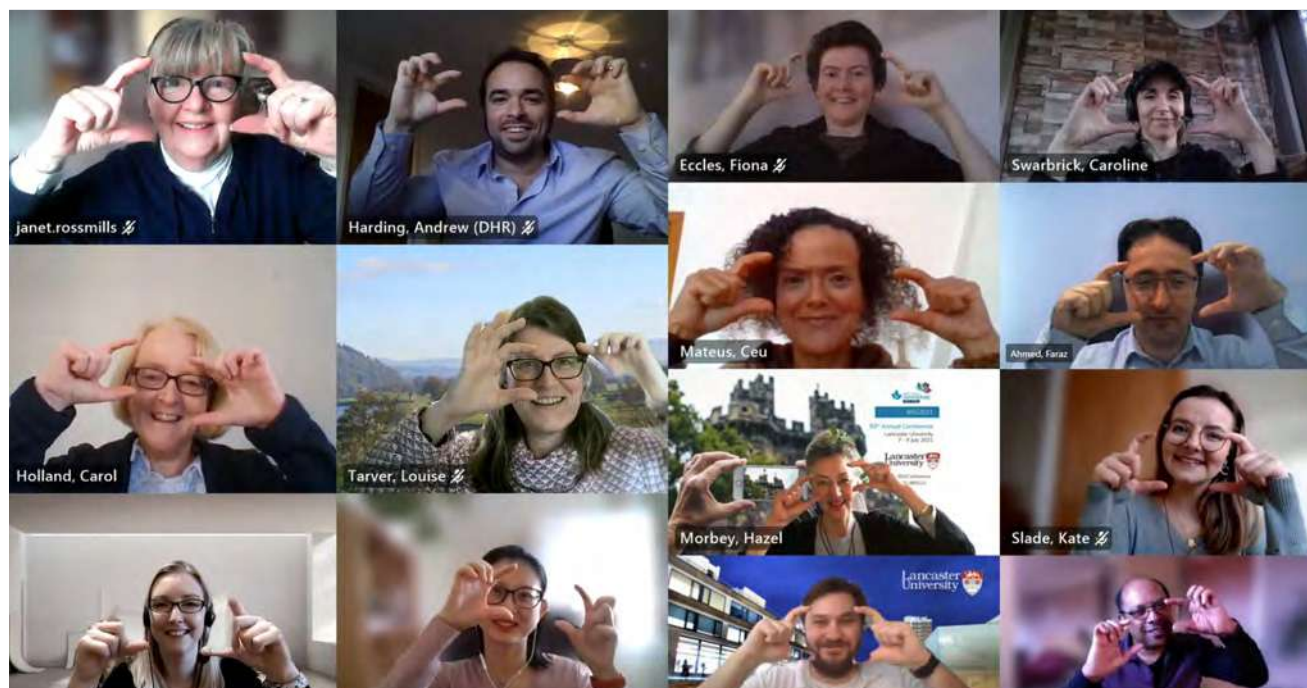
Professor Carol Holland
Conference Chair

Thanks

Thanks to everyone at Lancaster University who has been involved in the organising of the conference for all their ideas, contributions, enthusiasm, support and hard work:

Conference committee	Session chair volunteers	
Faraz Ahmed	Sangeetha Babu	Megan Polden
Theo Bampouras	Beth Cheshire	Fiona Quinn
Trevor Crawford	Lauren Fothergill	Megan Readman
Fiona Eccles	Sandra Flynn	Yakubu Salifu
Anthony Greenwood	Ian Garner	Michelle Tennant
Andy Harding	Winnie Li	Sarah Tronk
Carol Holland	Calum Marr	Emmanuel Tseklevs
Ceu Mateus	Rebecca Killick	Meghànn Ward
Christine Milligan	Steffi Doebler	Lara Warmelink
Hazel Morbey	Lola Olanrewaju	Aaron Warner
Janet Ross-Mills	Elise Oosterhuis	Yong Min Hooi
Jane Simpson	Sheila Payne	
Kate Slade	Joe Pearson	
Caroline Swarbrick	Chris Plack	
Louise Tarver		
Sandra Varey		
Qian Xiong		

Committee



Conference committee

Faraz Ahmed	Lecturer in Health Inequalities; Research interests: Health and ethnic diversity. Role on Committee - sponsorship and exhibition spaces.
Theo Bampouras	Lecturer in Sport and Exercise Science; Research interests: functional ability, postural balance and physical activity in later life. Role on Committee: Communications Team and “Get Active” Event
Trevor Crawford	Reader in Neuropsychology; Research interests: neuropsychological functions in healthy aging and neurodegenerative disorders. Role on Committee: Liaising with keynote and flagship event speakers.
Fiona Eccles	Lecturer in Health Research; Research interests: neurodegenerative conditions, e.g. Parkinson’s disease & Huntington’s disease. Role on Committee: Committee member
Anthony Greenwood	Information Officer, Division of Health Research. Role on Committee: technical support.
Andy Harding	Post Doctoral Research Associate in Health Research; Research interests: dementia, specialist housing, information-giving, core outcome sets and realist methodology. Conference committee: Communications team and ERA liaison.

Committee

Conference committee	
Carol Holland	Chair in Ageing, Division of Health Research; Director of the Centre for Ageing Research (C4AR). Research interests: Psychology of ageing; Frailty and cognition. Role on Committee: Conference Chair.
Ceu Mateus	Professor in Health Economics. Role on Committee: Committee member
Hazel Morbey	Research Fellow, Division of Health Research, Faculty of Health and Medicine. Research interests: Inclusive, participatory co-research in later life and learning to co-produce with underserved and vulnerable groups of people. Qualitative methodologies. Role on Committee: Communications team and Yoga events.
Janet Ross-Mills	Associated with the Centre for Ageing at Lancaster University through the Continuing Learning Group, a forum for senior learners. Role on Committee: Committee member
Kate Slade	Research Associate in the Neuroscience of Speech and Action Laboratory, Psychology Department. Research interests: age-related hearing loss, and its neural and psychological consequences. Role on Committee: ERA Liaison.
Caroline Swarbrick	Senior Lecturer in Ageing in the Centre for Ageing Research. Research interests: Participatory Action Research, particularly involving people living with dementia in a co-research capacity. Creative qualitative research methods. Role on Committee: sponsorship and exhibition spaces.
Louise Tarver	Admin Assistant for the Centre for Ageing Research; Role on Committee: committee member
Sandra Varey	Research Fellow, Division of Health Research, Faculty of Health and Medicine. Research interests: ageing and palliative care, long-term health conditions. Role on Committee: planning of the poster presentation sessions.
Qian Xiong	Lecturer in Ageing in the Centre for Ageing Research. Research interests: demography and social aspects of ageing with specific expertise in statistical modelling. Role on Committee: planning of the poster presentation sessions.

About the Conference

Following the uncertainty of the pandemic development, and our determination to ensure we can still have a great conference, the BSG 50th anniversary annual conference is being held online in 2021. The conference involves many of the elements that are familiar to our returning delegates, including great keynote speakers, innovative symposia and wide-reaching parallel sessions, but now from the comfort of your own home!

There are three main online platforms that delegates will use over the course of the conference. The conference is being supported by Socio, as our conference hub. Socio is an app that can be downloaded or used through a web browser, and puts all information into one place, including the agenda, links to access sessions, information about our speakers, exhibitor profiles and much more. Registered delegates will be invited to join Socio, with information about the features available and guides to support using the platform. Then, Socio will become your one-stop shop for all things related to the conference – and the conference team will be easily accessible through the app, as well as through our usual email address, to support you along the way.

The detailed scientific programme is being published on Oxford Abstracts (OA), a platform that many of you will be familiar with from previous years. The link to the programme will be shared with delegates before the conference, which allows you to review the parallel sessions as well as search by theme, author or other key word. During the conference, the main conference agenda in Socio will link to the detailed symposia, paper and poster information in OA, to make it easier to navigate the conference programme. More information is given in the programme section in this book.

The majority of our sessions (all plenary and parallel sessions) are being held on Teams. Many of you will already be familiar with this platform, and we hope that it is reasonably straightforward to those of you who are not. The links to access the sessions will be located in the Socio agenda – for parallel sessions, all presenters and audience members enter through the same link. We ask presenters to arrive 5-10 minutes early to their session, and those of you who are not presenting to mute until invited to ask questions by the Chair. More information on using Teams and expectations of the sessions will be shared with delegates and available through the conference hub, Socio. Some of our other optional and/or social events will make use of other technologies in order to enable greater networking and engagement. More information on these platforms will also be available to delegates through Socio.

This Programme Book offers information about the various elements of the conference and reflects what will be available to delegates through the conference hub. We suggest using this Book to familiarise yourself with the conference, before moving to or alongside the online platforms, and keeping a copy as a memento of the BSG 50th anniversary conference. We look forward to seeing you there!

Timetable at a glance

Tuesday 6 July 2021

Emerging Researchers in Ageing (ERA) Pre-conference Event For more information please see page 22. Access information will be sent directly to all delegates registered for the ERA event.	09:00	17:30
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Wednesday 7 July 2021 – Day 1

All sessions will be accessed through the Socio app. Instructions for accessing and using the app will be sent to registered delegates ahead of the conference.

More information on all sessions can be found throughout this book.

Special Interest Group Market Place	09:30	10:15
Special Interest Groups Research Symposia and Averil Osborn Symposium	10:30	11:30
Lunchtime events <ul style="list-style-type: none"> Meet our sponsors and exhibitors in Socio's virtual exhibition space Get Moving! Physical activity session with Lancaster's sports and exercise specialists Virtual Reality for Wellbeing: Explore ideas of how Virtual Reality and Immersive Technology can impact wellbeing in later life Ageing in a Global Context Series Book Launch - Policy Press 	11:30	13:30
Welcome Ceremony and Keynote Speaker: Professor Alison Findlay	13:30	15:00
Poster session 1	15:30	16:30
Break: Meet our sponsors and exhibitors	16:30	17:00
Flagship symposium: Celebrating change in British Gerontology	17:00	18:00
Welcome Reception	19:00	20:00

Timetable at a glance

Thursday 8 July 2021 – Day 2

All sessions will be accessed through the Socio app. Instructions for accessing and using the app will be sent to registered delegates ahead of the conference.

More information on all sessions can be found throughout this book.

Parallel Session 1	09:30	10:30
Meet our sponsors and exhibitors	10:30	11:00
Parallel Session 2	11:00	12:00
Lunchtime events		
• Yoga with Grace Benson	12:00	13:00
• “More than just a kickabout!” Walking football and benefits for the over 50s: interactive presentation and discussion with the footballers	12:00	13:00
• Meet our sponsors and exhibitors in Socio’s virtual exhibition space	12:00	14:00
• Learning in Later Life - The adventures of the Continuing Learning Group at Lancaster University	13:00	14:00
Keynote Speaker: Professor Michel Poulain	14:00	15:00
Poster Session 2	15:15	16:15
Break: Meet our sponsors and exhibitors	16:15	16:45
Parallel Session 3	16:45	17:45
BSG 50th Anniversary Party	19:00	21:30

Timetable at a glance

Friday 9 July 2021 – Day 3

All sessions will be accessed through the Socio app. Instructions for accessing and using the app will be sent to registered delegates ahead of the conference.

More information on all sessions can be found throughout this book.

Parallel Session 4	09:30	10:30
Meet our sponsors and exhibitors	10:30	11:00
Parallel Session 5	11:00	12:00
Lunchtime events		
<ul style="list-style-type: none"> • Mentoring with ERA: find out about mentoring: “speed dating” style mentoring link ups 	12:00	13:00
<ul style="list-style-type: none"> • Gerontopets: Introduce your pets for a fun social session 	12:00	13:00
<ul style="list-style-type: none"> • Meet our sponsors and exhibitors in Socio’s virtual exhibition space 	12:00	14:00
<ul style="list-style-type: none"> • Co-research in dementia related studies: join with co-researchers as they discuss the impacts of their roles 	13:00	14:00
Parallel Session 6	14:00	15:00
Break: Meet our sponsors and exhibitors	15:00	15:30
Keynote Speaker: Dr Sandra Hirst	15:30	16:30
Conference Closing Ceremony	16:30	17:30

Award 2021

The BSG Outstanding Achievement Award is made annually to an individual who has made a significant and lasting contribution to our gerontological understanding of ageing, or to improving the lives of older people, in any one or more of the following domains:

- **Academic thinking**
- **Policy**
- **Practice**
- **Education**

The award was founded in 2007 at the British Society of Gerontology Annual Conference in Sheffield, when the Society honoured the lifetime achievements in gerontology of its first recipient, Professor Alan Walker. Previous winners include Baroness Sally Greengross, Tessa Harding, Anthea Tinker, Sara Arber, Chris Phillipson, Tony Warnes, Bill Bytheway, Bleddyn Davies, Malcolm Johnson, Peter Coleman, Julia Twigg, Christina Victor, Clare Wenger, Murna Downs, and Sue Adams.

The Judging Panel in 2021 was chaired by Julia Twigg and includes Elizabeth Webb, Age UK; Brian Beach, ILC-UK; Murna Downs, as previous award recipient and Thomas Scharf, BSG President.

This year's award will be presented during the opening ceremony and announced across our online platforms at the same time.

We look forward to sharing this exciting news with you!

Stirling Prize 2021

The Stirling Prize, first awarded in 2000 at the conference held at the University of Stirling, is made to the best poster presented by a student at the annual conference. Previous winners can be viewed on the BSG website.

The winner of this year's prize will be presented during the closing ceremony of the conference, and announced across our online platforms.

50@50 Bursaries

The British Society of Gerontology is delighted to support 50 bursaries to attend the 2021 Online Conference hosted by Lancaster University, to celebrate our 50th Anniversary.

The aim of the BSG 50@50 bursaries is to enable different groups to participate actively in the BSG conference, including students or early career researchers, unwaged or retired groups, those working for NGOs, not for profits and charities operating in the field of ageing or gerontology or co-researchers in participatory gerontological research projects.

The bursaries were awarded by the Bursaries Panel, comprising two members of the Lancaster Scientific Committee and two members of the National Executive Committee, the Hon. Secretary, and the BSG Chair of the Emerging Researchers in Ageing network.

Congratulations to all our successful bursary awardees in 2021. They will be given the opportunity to write a blog for Ageing Issues after their conference attendance, so do look out for these in future.

Special Interest Groups



The British Society of Gerontology is proud of the Special Interest Groups, or SIGs, supported by Cambridge University Press.

The SIGs are designed to bring together BSG members who share a specific interest and to support activities to further knowledge in these areas. The SIGs also provide forums for BSG members to engage with a broader group of academics and other stakeholders in their particular field of interest.

At the moment, we have eight SIGs, each representing important areas within the field of gerontology:

- The Educational Gerontology SIG aims to promote lifelong and later-life learning and emphasize the need to teach gerontology within the UK.
- Technological advancements feed into all aspects of our lives and offer much for older adults. The Technology and Ageing SIG was set up to bring together people working in this field.
- Mobility is key to maintaining independence. The Transport and Mobility SIG promotes activities that help people stay connected to the communities in which they live.
- With a society that is ever ageing, issues around employment are a hot topic of debate, an area the Work and Retirement SIG has been tasked to represent.
- The Creative Ageing SIG advocates the importance of creativity and the arts in helping to improve the well-being of older adults.

- The Substance Use and Ageing SIG brings together expertise from a range of disciplines to explore the impact of legal and illicit drugs in older adults.
- The topic of care homes has been much in the news over the past twelve months or so. The dedicated SIG for Care Homes Research aims to strengthen research, policy, and practice in the care home sector.
- To bring focus to cross-cultural studies, the Ageing in Africa, Asia and Latin America SIG explores the challenges facing older adults in countries where population ageing is happening fastest and where the majority of the world's older people live.

In this year's conference, the SIG related events are as follows:

Wednesday 7 July 2021

Special Interest Group Marketplace: 09:30 – 10:15

Come meet the SIGs! Each Special Interest Group (SIG) will have a virtual exhibition site in Wonder, where delegates will be able to visit to meet members of the SIG and learn more about the work they do. There will also be the opportunity to find out more about proposed new SIGs on Cognitive Ageing and Environmental Gerontology. These sessions will be accessed through the Socio agenda, and delegates should feel free to drop in

Special Interest Groups

to the session at any point.

Wednesday 7 July 2021

Special Interest Group Symposia: 10:30 – 11:30

Each SIG will hold a research symposium based on their special interest area, to highlight the exciting work they are involved in. Full information can be found in the programme details contained in this book. The sessions are accessed through the Socio agenda. This year the topics are:

- Creative Ageing: Learning from crisis through innovation and adaptation
- Transport and Mobility Special Interest Group: The past, present and future of transport, mobility and ageing
- Understanding and addressing alcohol use amongst older people during and after COVID-19
- The 2021 Symposium of the Care Homes Research Special Interest Group: Responding to the Impact of COVID-19
- Personal digital technology celebrates 50 years, alongside BSG!
- Technology and Ageing SIG

Two SIGs are holding Fringe symposia, taking place outside of the main conference programme. Please see the SIG pages on the BSG website for more information on these events:

Educational Gerontology: Fringe Symposium

7 July 2021, 10.30 to 11.30

Person, peer, public: three interfaces for later life education.

Ageing in Africa, Asia and Latin America: Fringe Symposium

7 July 2021, 10.30 to 11.30

Crisis, Change, Innovation – the Impacts of COVID-19

If you are interested in finding out more about our Special Interest Groups, or if you would like to propose a new BSG Special Interest Group, do please contact Dr Gary Christopher, BSG National Executive Committee, by email (gary.christopher@uwe.ac.uk).

Keynote Speakers



Professor Alison Findlay

With her interest in the lives and portrayal of women in the 1600s, Alison will share her interest in the historical (or maybe not...) demonization of older women and witch persecution, with a focus on the Lancashire trial of the Pendle witches.

Keynote Plenary 1: The Past: Age, Anxiety and Persecution in the 1612 and 1634 Lancashire Witch Trials

In 1612 the Lancashire authorities defined Anne Whittle, 'a very old, withered, spent & decrepit creature' as 'a dangerous witch' and persecuted her and her rival 'old Demdike' as the leaders of demonic conspiracies. This lecture uses the figures of Whittle (Old Chattox) and Elizabeth Southernns (Old Demdike) to examine why old women posed such a threat in early modern Lancashire and in the country more widely. The lecture demonstrates how the legacy of the 1612 Lancashire witches, which led to a second Lancashire witch trial in 1634, opened up opportunities for reinterpreting the stereotypes which allied age, gender and evil.



Professor Michel Poulain

Michel Poulain introduced the concept of Blue Zones when identifying an area with exceptional longevity area the mountains of Sardinia. He will share the lessons of the Blue Zones and his ongoing search for new Blue Zones.

Keynote Plenary 2. The Present: Blue Zones: a model for our ageing society?

Longevity has traditionally been studied at the individual level by identifying specific features, e.g. genetic, nutritional or lifestyle-related, among centenarians. However, during a meeting of researchers contributing to the International Database of Longevity in Montpellier in October 1999, the existence of an area of exceptional longevity was revealed in Sardinia. Although the trustworthiness of the Sardinian data was immediately doubted, the results of the age validation confirmed initial reports. It also became clear that centenarians were not distributed randomly across Sardinia. A specific area of exceptional longevity and higher proportion of centenarians emerged in the most mountainous region of Sardinia.

Keynote Speakers

The first time that it was identified on a map, a blue marker was used and, since that time in March 2000, the term Blue Zone was used to identify the longevity hot spot. With the Blue Zone concept, our ability to discover more about exceptional longevity has significantly improved since inhabitants often, for example, have genetic characteristics in common, have experienced the same living conditions since youth and often eat primarily local products.

This lecture will describe the 7 principles gathered from Blue Zone populations and which might be transferred to our advanced and post-industrial societies in order to contribute to improving health and well-being. A central component of the talk will be: can the characteristics of people living in Blue Zones, their lifestyle and environment, both physical and human, help us understand more how to keep older people involved in society and help them live better and longer?



Dr Sandra Hirst

Sandra Hirst has held several leadership positions in gerontology, including president of the Canadian Association on Gerontology, which will also be celebrating their 50th Anniversary in 2021. She will share her passion for the stories of older adults and the learning acquired from listening to them.

Keynote Plenary 3. The Future: “As a wee lassie...”
The Benefits of Narrational Relationships in the Lives of Older Adults

Let’s explore a journey filled with opportunities to listen to stories. Every older adult holds numerous stories within them based on experience and the passing of years. By encouraging older adults to be story tellers, we learn where they have been, where they have lived, and who they are. We hear their voices and hopefully respond. This type of interaction, perhaps between a clinician providing care or an academic conducting research and an older adult, is the narrative relationship.

However, in narrative research, it is essential to follow identified themes beyond the individual stories, of older adults, through to analysis at a social level. The researcher needs to understand the significance of the narrative for others and for society. Narrative research lends itself well to studies of changes in a society. In this presentation, Sandra will examine three themes: the meaning of stories; the value of story telling in the of lives for older adults; and the role of narrative research in promoting societal change. Intertwined throughout my comments will be three ethical issues: informed consent, story telling and story listening, and the quandary of involvement.

Flagship Symposium

Wednesday 7 July 2021 – 17:00 – 18:00

Celebrating change in British Gerontology

This flagship symposium will explore what has changed in two key topics that have endured as areas of interest in gerontology throughout BSG's history. Our speakers will explore what has changed and how the fields have developed over the last 50 years. We have chosen two topics to consider within the 60 minutes symposium. Two speakers will consider each topic, one to consider the past and enduring nature of the topics, and one to consider the present and future.

Chair of session:
Professor Judith Phillips

Judith is Deputy Principal (Research), and Professor of Gerontology at the University of Stirling, and is the UKRI Research Director for the Healthy Ageing Challenge. Her research interests are in the social, behavioural and environmental aspects of ageing and she has published and researched widely on environmental aspects of ageing, social care and caregiving.



Inequalities in Ageing

Professor Alan Walker

Alan is Professor of Social Policy and Social Gerontology, at the University of Sheffield, and Co-director



of the new Healthy Lifespan Institute. Alan's research interests span a wide range in social analysis, social policy and social planning. He has published more than 30 books, over 200 reports and 300 papers in scholarly journals and edited volumes. He was the first recipient of the BSG's Lifetime Achievement Award. Alan will share his thoughts on past developments in research on poverty and inequality.

Professor James Nazroo

James's research has focused very closely on the consequences of socioeconomic inequalities in later life and the processes that underlie these. Here he will bring that work together with his work on ethnic inequalities and the literature on gender in later life to discuss why, and how, we need to focus on underlying power structures relating to class, patriarchy and racism if we are to address the accumulation of inequalities across the life course and their impact on later life.



Flagship Symposium

The Averil Osborn Symposium

Environments of Ageing: reflecting on person- environment interaction and the meaning of home.

Professor Sheila Peace

Sheila, Emeritus Professor at The Open University and former president of the BSG, draws on almost 50 years of research experience in environmental gerontology to consider how places and spaces contextualise personal experience of the meaning of home in varied environments from ordinary housing to care home living.



Dr Melissa Fernandez Arrigoitia

Over the past 10 years, Melissa has explored the social, material, professional and historical life of cohousing projects in the UK and elsewhere. She will share ideas about the (hopeful) possibilities these collaborative initiatives hold for a future of greater social connectivity and wellbeing.



Wednesday 7 July 2021 –
10:30 – 11:30

Chair of session: **Dr Tine Buffel**

This symposium, chaired by Dr Tine Buffel, brings together academics and older people who have been involved in participatory research, and develops a critical perspective on the benefits and challenges of this type of work. Commemorating the work of Averil Osborn, it aims to promote and support innovative work which enhances the participation and leadership of older people in research.

In a first presentation, developed with co-researchers, Rebecca Turner will reflect on a participatory action research project with older men and women who live in, work at and visit care homes in Lincolnshire, the UK. This will include a discussion about the challenges associated with participatory work during the COVID-19 pandemic.

A second paper, developed by Margaret von Faber together with co-researchers Mrs. Harreveldt and Mr. Hogendoorn, focuses on the benefits and challenges of involving older people in developing age-friendly cities through participatory video design in The Hague and Leiden, two cities in the Netherlands. In a final presentation, developed with co-researchers, Mo Ray, Lizzie Ward and Denise Tanner will present their approach to knowledge exchange as an integral element of co-producing knowledge about older people who pay for their own care. The final part of the symposium will allow for an interactive discussion about the implications of the findings of this work for the future of participatory research with older adults.

Sponsors and Exhibitors

Without the support of various partners, sponsors and contributors, we would not be able to run a conference with such relevance.

This year we are harnessing our online platform to give delegates the opportunity to connect to our sponsors and exhibitors through our conference hub, Socio. A great opportunity to expand your networks and build future opportunities.

The exhibition space will be attended at the following times:

Date	Open	Closed
Wednesday 6 July 2021	11:30	13:30
	16:30	17:00
Thursday 7 July 2021	12:00	14:00
	16:15	16:45
Friday 8 July 2021	12:00	14:00
	15:00	15:30

You can also connect to the sponsors and exhibitors through their profiles in the Socio app, which present information and enable you to send a message to their representatives.



Sponsors and Exhibitors

BSG Emerging Researchers in Ageing

Pre-Conference event: Tuesday 6 July 2021

Futures of gerontology, future gerontologists: Building leadership and research capacity for BSG 2046?

The annual ERA pre-conference event provides space and opportunity for emerging researchers in ageing to experience meaningful participation and active engagement with their peers, and capacity-building of future leaders of gerontology. The ERA event is your chance to talk with, and listen to your peers, as you practise presenting your research. It is an opportunity for reflection and skills development all within a safe, supportive environment.

In 2021, the British Society of Gerontology celebrates its 50th anniversary. As we reflect on the past and present of British gerontology throughout the year, we would also like to draw attention to the future of gerontology. We represent a cohort of scholars who have researched the unequal consequences of austerity, ageism, racial and gender inequalities in later life, and innovations in health and care have had on older adults and related communities of practice. We will be the generation who continue to observe

these phenomena and their consequences over the years to come. As British gerontology considers its future, it must ensure that its emerging researchers have opportunities to develop the skills and attributes necessary to become future leaders in the field.

To explore the joined up futures of British gerontology and gerontologists, we will explore how we can ensure representation of a wide variety of backgrounds in British gerontology. What will the British Society of Gerontology look like for its 75th anniversary in 2046? What topics may shape the research agenda in the decades to come?

We are delighted that Professor Shereen Hussein (London School of Hygiene and Tropical Medicine) will provide this year's keynote address. Her keynote and a diverse panel composed of academics and other professionals will seek to answer these questions based on their own lived experiences.

ERA Detailed Programme (access details sent to delegates directly):

9.00 – 9.15	Welcome by BSG president and ERA chair
9.15 – 10.15	ERA member presentations, Session 1
10.15 – 10.30	Break
10.30 – 11.30	Keynote speaker: Prof Shereen Hussein, LSHTM
11.30 – 13.00	Offline Break
13.00 – 14.00	Networking Lunch
14.00 – 15:30	ERA member presentations, Session 2
15.30 – 15.45	Break
14.00 – 15:30	Panel: Developing future leaders of gerontology
15.45 – 17.15	Closing Remarks
17.30 – 19.00	Offline break
19.00 – 21.00	ERA Social / Quiz

Conference Ceremonies

Wednesday: 13:30 – 14:00

Welcome Ceremony

- Welcome from Conference Chair, Professor Carol Holland
- Welcome from Lancaster University's Deputy VC Professor Steve Bradley
- Welcome from Dean of the Faculty of Health and Medicine, Professor Jo Rycroft-Malone
- Outstanding Achievement award, Professor Julia Twigg

Friday: 16:30-17:30

Conference Closing Ceremony

- Conference summary and close, Conference Chair, Professor Carol Holland and Team
- Stirling Prize, Professor Carol Holland
- Handover to the University of the West of England for BSG 2022, Dr Gary Christopher

Social events

All social events will be accessed through the Socio app.

Yoga at BSG 2021 - Relaxation recording available on demand throughout the conference

Yoga Nidra, sometimes called The Art of Yogic Sleep, is a deeply relaxing guided mediation. Delegates have unlimited access to a 20-minute pre-recorded Yoga Nidra to practice at their convenience throughout the duration of the conference. Grace Benson, retired Lancaster yoga teacher, provides a rotation of consciousness around the body paying particular attention to the breath that will release stress in the body and focus the mind.

Wednesday 7th July 2021 Day 1

11:30 - 12:30 Get Moving! Physical activity session with Lancaster's sports and exercise specialists

The lunch time activities will provide a welcome opportunity to 'stretch our legs' from the morning sessions and prepare for the afternoon sessions. Our Sport and Exercise colleagues, with experience in provision of physical activity in various settings (e.g. Nixon et al, 2020; Gates et al., 2019), will deliver simple activities that will refresh us and revitalise us for the rest of the day's presentations. Even better, these activities can be done without the need for any particular equipment, making them easy to do and fun for everyone, whatever the apprehension level may be! Further, they can be done at any time during the conference and beyond - keeping you active for much longer than the conference lunchtime! We will be happy to discuss ideas and ways to keep active individually as well as explore research ideas and network.

Social events

11:30 - 12:30 Virtual Reality for Wellbeing: Explore ideas of how Virtual Reality and Immersive Technology can impact wellbeing in later life

For older adults whose outdoor routines are restricted due to failing health or mobility impairments, this emerging technology, known as immersive virtual reality (or VR), can open up a new virtual world in a completely new way. Once people wear the VR device on their heads, they could be immersed in an alternate virtual 3-Dimensional environment, which could practically be anything, a park, a beach or a historical scenic place, and engage with it by moving their head to look around while using the handheld controllers to move and interact within the virtual world. In this session, we invite you to watch the video and join the discussion on how VR could potentially improve the quality of life for older adults.

12:30 - 13:30 Ageing in a Global Context Series Book Launch - Policy Press

Join Policy Press for the launch of the latest books in the Ageing in a Global Context series. Find out more about the series from the Series Editors and hear from the authors about their new books: 'Ageing and the Crisis in Health and Social Care' by Bethany Simmonds, 'Disability and Ageing' by Ann Leahy and 'The Environments of Ageing' by Sheila Peace. Bring your questions.

19:00 - 20:00 Welcome Reception.

Wonder.me enabled socialising. Wander round and "bump" into people – stop and have a chat – maybe bring a celebratory beverage!

The virtual Welcome Reception will feature a short welcome from Conference Chair, Carol Holland, a message from the BSG President, Tom Scharf, and reflections from members who were at the very first conference in 1971.

The session will also feature the launch of a landmark critical review of British Gerontology: The Evolution of British Gerontology: personal perspectives and historical developments by Miriam Bernard, Mo Ray and Jackie Reynolds. Drawing on interviews with 50 of the most influential figures in the field and analyses of the archives of the BSG, the book provides a comprehensive picture of half a century of gerontology research, theory, policy and practice. It places the country's achievements in an international context and looks to the future to plot new directions in thinking. This is the story of the remarkable progress of gerontology, told through the eyes of those who have led it.

This celebration event will also feature two events to mark this important moment in the society's life:

- Virtual Birthday Cake: On line 50th Anniversary birthday cake. Bake a cake (or other decorative celebratory treat) on the theme of the 50th Anniversary and submit a photo to c4ar@lancaster.ac.uk by 1 July 2021.
 - Memory wall: Delegates are invited to submit a memory or a photo* of their first or favourite BSG conference to c4ar@lancaster.ac.uk by 1 July 2021. We will put them all together in a montage/presentation to visit during the social event. Memories should be a max of 80 words – think tweet or post-it length. We will not be able to edit so longer ones won't be included.
- * Please do not send in pictures with a lot of people in for GDPR reasons. Submitters must include written permission from anyone whose face can be seen, or we won't be able to include. Pictures of places are great!

Social events

Thursday 8th July 2021 Day 2

12:00 - 13:00 Yoga with Grace Benson

This 45-minute live session is a physical yoga practice with the breath to rejuvenate the blood and nerve supply to the head, neck and spine and finishes with a short relaxation. It is offered by Grace Benson, retired Lancaster yoga practitioner. Grace has travelled and trained in India, she has practiced yoga for over forty years, and seen 35 of her clients become yoga practitioners themselves!

12:00 - 13:00 "More than just a kick about!" Walking football and benefits for people over 50: interactive presentation and discussion with the footballers

The health benefits of playing football and the importance of exercise and social contact for healthy ageing are well established, but few older adults in the UK take enough exercise. Football is popular, flexible in format and draws players into engrossing, effortful and social exercise, but the physical demands of play at full speed may make it unsustainable for some older adults. Restricted to walking pace, will play still be engaging? Will health benefits be retained? Will physical demands remain manageable? This group of walking footballers all volunteered to take part in a 12-week study based at Aston University in 2015 to examine these questions (Reddy et al., 2017), but the team is still playing six years later! In this session, the players and their coach will show you a video of playing and will explain something of what the group means to them, why they keep coming and how it has flexed over the years and over the pandemic period.

13:00 - 14:00 Learning in Later Life - The adventures of the Continuous Learning Group at Lancaster University

When the "Senior Learners Programme" at Lancaster University was due to close down, a group of participants organised themselves to run it on a voluntary basis. The Lunchtime Lecture Series has delivered over 300 lectures, over 10 years, on a wide range of subjects, supported several PhDs, and helped many researchers to gather data for their studies. Subjects include the change in religious practices of five generations of a Jewish family, how arctic explorers survived prolonged isolation and hardship and the creation of an Advance Planning Portfolio for end of life treatment and care in partnership with the NHS.

Participants report an increase in their wellbeing and a reduction in isolation, and friendships have been forged along the way. Come along to find out more about this model for learning which could easily be replicated in any similar institution. There will be visual resources and a number of participants who have enjoyed taking part.

19:00 - 21:30 BSG's 50th Anniversary Party

Wonder.me enabled socialising: Wander round, bring a drink and enjoy. 1970s outfits welcome!

The evening will include:

19.30 - 20:30 Decades Quiz - what do you remember/know from the 1970s onwards? Get into huddles in Wonder.me to form teams

20:30 - 21:30 Online Disco - give it a try, dance like nobody's watching!

Social events

Friday 9th July 2020 Day 3

12:00 - 13:00 Mentoring with ERA: find out about mentoring

Building capacity for future mentors: For the last three years, the Emerging Researchers in Ageing group have matched PhD students and early career researchers with more established members of the British Society of Gerontology. The mentoring scheme has provided mentees the opportunity to discuss challenges with the research, publication strategy and career options with people in more established academic roles. However, the value of the mentoring scheme to mentors has been less clearly articulated. Previous mentors have appreciated the opportunity to develop leadership skills and guide junior colleagues into fruitful careers in ageing research within and outside of academia. However, they also felt that they were not always prepared to take on the unique status and responsibilities of 'mentor'. To help alleviate these issues, this session provides an overview of the mentoring scheme and provides mentoring training to Society members interested in supporting future generations of gerontologists and ageing researchers.

12:00- 13:00 Gerontopets: Bring along that pet you've been trying to keep quiet in the background all week and let them have their moment – you don't need a pet to join in!

13:00 - 14:00 Co-research in dementia related studies: join with co-researchers as they discuss the impacts of their roles

In this informal lunchtime session, people living with dementia and carers will share their experiences of taking part in dementia-related research as co-researchers. By co-research, we also include co-production and co-design. We will have the opportunity to hear about participation as co-researchers, views on why it was important to be involved in a co-research capacity, and the impact it makes to both the research and to themselves.

The main aim of this session is to provide an opportunity for informal discussion and knowledge exchange. So please join us at this session for an interesting and lively debate, if you have experience you can share of co-production in dementia research, are planning to use these approaches, or would like to but are unsure where to start.

The session will be facilitated by Dr Caroline Swarbrick and Dr Hazel Morbey. Both were researchers on the NIHR/ESRC Neighbourhoods and Dementia programme 2014 - 2019). Caroline led the programme's co-research elements supporting this across its eight work programmes. Hazel facilitated co-research in two work programmes, evaluating the evidence base for dementia training in hospitals and outcomes of importance to people living with dementia.

This is an exciting and dynamic time for the British Society of Gerontology. Established fifty years ago, the BSG is a learned society affiliated to the Academy of Social Sciences and a registered charity.

The Society was created to increase, disseminate and apply knowledge of the social and behavioural aspects of ageing in human beings by means of research, teaching and education; to support, encourage and raise standards of research, service and teaching in gerontology; and to aid researchers, teachers and practitioners in their professional work.

Join the BSG

Joining the BSG means joining a vibrant community of academics, researchers, practitioners, policymakers, students, service users and older people. As research, policy and practice communities, we exchange intellectual ideas, share our understandings of the world, inform each other of our research, stimulate and test new ideas, and foster collaboration across a wide range of academic disciplines and professional practices.

To this end, the British Society of Gerontology brings together academics, researchers, practitioners, educators, policy-makers, the third sector, students, and all those interested in researching ageing and later life, in a unique multi-disciplinary learned society.

Joining the BSG brings you into our growing and active network, and confers several benefits:

- Networking events, conferences and participation in Special Interest Groups
- Member bulletins including news, jobs, events, courses, research opportunities and other items of interest to the gerontological community
- Free online access to leading academic journal Ageing & Society
- Reduced rate print subscriptions to: Ageing & Society, the Journal of Population Ageing and the Canadian Journal on Aging
- Reduced registration fee for BSG members at the Canadian Association on Gerontology (CAG) Annual Conference.
- Reduced rates at the Annual Conference of the British Society of Gerontology
- Access to the Society's network of social media channels, including our blog Ageing Issues, our YouTube channel Ageing Bites and Twitter @britgerontology.
- Eligibility for prestigious awards including nomination as a Fellow of the Academy of Social Sciences (FACSS), the annual BSG Outstanding Achievement Award, and for students, the Stirling Prize
- 30% discount on the Policy Press website
- If you are a student, postdoctoral or unwaged member, entitlement to apply for a full conference bursary
- Access to all areas of the BSG website, including Members Only pages

Current Membership Fees (if paying by direct debit, all other payment methods incur a £5 administration fee):

Waged member	£55.00
Full time student	£22.00
Retired	£23.00
Unwaged	£21.00
Special membership subscription to Ageing & Society	£33.00
Special membership subscription to Journal of Population Ageing	£40.00
Special membership subscription to the Canadian Journal of Aging	\$25.00

How to Join – [simply visit our website today!](#)

Social Media Platforms

If you have any comments, suggestions or questions about how to access or contribute to any of our social media platforms, please contact the Secretariat at: info@britishgerontology.org

Watch our videos!

BSG Ageing Bites is a series of short bite size films each highlighting a different aspect of ageing or ageing issue available on our YouTube channel – <https://www.youtube.com/user/AgeingBites/videos>

If you already have some film material from a research project or through other work that you think would be suitable, please share it with us.

Become a Blogger!

“Ageing Issues”: <http://ageingissues.wordpress.com/>

The BSG blog is an exciting and rapidly growing public platform for promoting discussion of ageing issues. To date the blog has had over 43,517 views from over 156 different countries. There are 1797 regular followers and this number is growing steadily. The blog is there for all members to use – it is quick and easy way to share your views, research and comment on the articles already posted. Please contact the Secretariat for the instructions on how to become an author – we are here to support anyone who isn't sure about what to do, so please don't let the fact that you've never blogged before put you off.

Follow us on Twitter!

@britgerontology

For those who 'tweet' you can follow us on @britgerontology. We already have a strong following which is increasing on a daily basis. If you are a member and a Tweeter, please let us know so that we can follow you too.

Don't forget to use the conference hashtag and tweet with us:

@BSGConference #BSG2021 #BSG21

Scientific Programme

Programme Scheduling

The scientific programme is laid out over the following pages by day. Parallel sessions are labelled as symposia or paper sessions, and by theme. After the day-by-day layout, you will find the lists of paper and symposia information (titles and authors only). Please note that the timetable may be subject to last minute changes. Please consult the online programme in Oxford Abstracts for the most up to date information.

Using the Online Programme






The Oxford Abstracts programme is available to browse through the following QR code:



The agenda in Socio will host links to join each session, as well as to the relevant programme information in Oxford Abstracts. You can add sessions to your agenda in Socio.

Attending sessions

Parallel sessions are hosted on Teams. In every session, there will be representatives of the host organisation, Lancaster University to support the running of the session. The links to access the sessions will be located in the Socio agenda – for parallel sessions, all presenters and audience members enter through the same link. We ask presenters to arrive 5-10 minutes early to their session, and those of you who are not presenting to mute until invited to ask questions by the Chair. For more guidance on using Teams for presenters and audience members, consult the conference hub.

Key	Track
	Ageing and resilience in adversity
	Maintaining health and well-being in later life
	Impact of and response to Covid-19: lessons for future pandemics
	Health innovation and technology
	Social participation, citizenship and co-production in a changing world
	Health and social care practices, innovations and futures
	Changing connections and relationships
	Changing responses to age related health conditions
	Retirement and changing working lives in later life
	Diversity and culture in later life: where are we now and where are we going?
	Gender diversity and sexuality in later life: where are we now and where are we going?
	Housing for ageing in the 21st century
	Innovation in theories, methods and critical perspectives
	Sustainability and health in the environment
	The arts, leisure and older consumers

Scientific Programme

Scientific Programme

7th July 2021

Time	Session						
09:30 - 10:15	BSG Special Interest Group Market Place						
10:15 - 10:30	Break						
10:30 - 11:30	SIG Session A - Symposium (1) Creative Ageing: Learning from crisis through innovation and adaptation	SIG Session B - Symposium (2) Transport and Mobility: The past, present and future of transport, mobility and ageing	SIG Session C - Symposium (3) Substance Use and Ageing: Understanding and addressing alcohol use amongst older people during and after COVID-19	SIG Session D - Symposium (4) Care Homes Research: Responding to the Impact of Covid-19	SIG Session E - Symposium (5) Technology and Ageing: Personal digital technology celebrates 50years, alongside BSG!	The Averil Osborn Symposium: Participatory Approaches in Ageing Research	
11:30 - 12:30	Meet our Sponsors and Exhibitors	Get Moving!	Virtual Reality for Wellbeing				
12:30 - 13:30				Ageing in a Global Context Series Book Launch – Policy Press			
13:30 - 15:00	Welcome Ceremony and Keynote Speaker: Professor Alison Findlay						
15:00 - 15:30	Break						
15:30 - 16:30	Poster Session 1A - Posters (1) Chen, (2) Egan, (3) Anantapong et al, (4) Warner et al, (5) Brown	Poster Session 1B - Posters (6) Rafnsson et al, (7) Stegen and De Donder, (8) Adewunmi et al, (9) Marr et al, (10) Eliopoulos	Poster Session 1C - Posters (11) Collett and Martin, (12) Ellwood et al, (13) O'Donnell et al, (14) Readman et al	Poster Session 1D - Posters (15) Barr, (16) Wong et al, (17) Mehdipour et al, (18) Mills et al, (19) Tkacz and Lee	Poster Session 1E - Posters (20) Knight et al, (21) Manoharan et al, (22) Sun et al, (23) Balki et al, (24) Abraham et al, (25) Zarotti et al		
16:30 - 17:00	Break with Sponsors and Exhibitors						
17:00 - 18:00	Flagship symposium: Celebrating change in British Gerontology						
19:00 - 20:00	Welcome Reception						



Scientific Programme

7th July 2021						
Time	Session					
09:30 - 10:15	BSG Special Interest Group Market Place					
10:15 - 10:30	Break					
10:30 - 11:30						
11:30 - 12:30						
12:30 - 13:30						
13:30 - 15:00	Welcome Ceremony and Keynote Speaker: Professor Alison Findlay					
15:00 - 15:30	Break					
15:30 - 16:30						
15:00 - 15:15	Break					
17:00 - 16:00	Flagship symposium: Celebrating change in British Gerontology					
19:00 - 20:00	Welcome Reception					

Scientific Programme

8th July 2021

Time	Session						
09:30 - 10:30	Parallel Session 1A - Symposium (7) Ageing and crime victimisation: diverse questions and methodologies	Parallel Session 1B - Symposium (8) Towards a positive paradigm in loneliness: an aspiration or impossible endeavour?	Parallel Session 1C - Papers (1) Ortiz, (2) Wright and Lovatt, (3) Elliott O'Dare and Collins, (4) Markowski et al	Parallel Session 1F - Symposium (10) Measuring and understanding quality of care, safety and quality of life in older adult care homes	Parallel Session 1E - Papers (5) Mohd et al, (6) Moonan-Howard, (7) Villar et al, (8) Milligan et al	Parallel Session 1F - Symposium (10) Measuring and understanding quality of care, safety and quality of life in older adult care homes	Parallel Session 1G - Papers (9) Killick, (10) Wood et al, (11) Bai et al, (12) Camp et al
10:30 - 11:00	Break with Sponsors and Exhibitors						
11:00 - 12:00	Parallel Session 2A - Symposium (14) Fostering social inclusion for older people across physical environments: messages from research in England and Wales	Parallel Session 2B - Symposium (15) Opportunities to Leverage Technology to Mitigate Social Isolation During Times of COVID-19 and beyond	Parallel Session 2C - Papers (25) De Poli et al, (26) Fowler Davis, (27) Ezulike	Parallel Session 2D - Symposium (16) Experiences and Impacts of the COVID-19 Outbreak for Older Adults living in Spain and the United Kingdom	Parallel Session 2E - Papers (28) Horne et al, (29) Ferguson, (30) Sacco et al, (31) Gopinath et al	Parallel Session 2F - Papers (32) Sattar et al, (33) Poland et al, (34) Lowthian et al, (35) Chadborn et al	Parallel Session 2G - Symposium (17) Socio-Gerontechnology – key themes, future agendas
12:00 - 13:00	Meet our Sponsors and Exhibitors	Yoga with Grace Benson	"More than just a kickabout!" Walking football and the benefits for over 50s				
13:00 - 14:00				Learning in Later Life - The adventures of the Continuous Learning Group at Lancaster University			

Ageing and resilience

Maintaining health

Covid-19

Health innovation

Social participation

Health and social care

Changing connections

Changing responses

Retirement

Diversity and culture

Gender diversity

Housing for ageing

Innovation in theories

Sustainability

Arts and leisure

Scientific Programme

8th July 2021

Time	Session					
10:30 - 11:30	Parallel Session 1H - Papers (13) Cullen and Wilson, (14) Kanon et al, (15) Buckner et al, (16) Dickins et al	Parallel Session 1I - Symposium (11) Challenging ageism during COVID-19: lessons from research, policy and practice	Parallel Session 1J - Symposium (12) How useful are theories of inequality in understanding precarious ageing in the Global North? A discussion of contemporary experiences of ageing and future challenges	Parallel Session 1K - Symposium (13) Hearing loss and ageing: implications for the brain as well as the ears	Parallel Session 1L - Papers (17) Mitchell et al, (18) Alter et al, (19) Gibson et al, (20) Maddock et al	Parallel Session 1M - Papers (21) Coleman, (22) Maguire and Carney, (23) Stuart et al, (24) Prescott et al
10:30 - 11:00	Break with Sponsors and Exhibitors					
11:00 - 12:00	Parallel Session 2H - Symposium (18) Understanding and exploring past, present and future housing choices in the 21st century among diverse ageing populations	Parallel Session 2I - Symposium (19) Comparative perspectives on the impact of COVID-19 on older people: Community studies from the UK and Switzerland	Parallel Session 2J - Symposium (20) The rhythm of ageing beyond representation: developments from human geography	Parallel Session 2K - Symposium (21) The Healthy Ageing Challenge: Social, Behavioural and Design research and innovation to stimulate an ageing market.	Parallel Session 2L - Papers (36) Teggi, (37) Lane et al, (38) Gray, (39) Watts	Parallel Session 2M - Papers (40) Bjerkan et al, (41) Cheshire et al, (42) Polden and Crawford
12:00 - 13:00						
13:00 - 14:00						

Scientific Programme

8th July 2021

Time	Session						
14:00 - 15:00	Keynote Speaker: Professor Michel Poulain						
15:00 - 15:15	Break						
15:15 - 16:15	Poster Session 2A - Posters (26) Garcia Diaz et al, (27) Burke and Aubrecht, (28) Gray, (29) Ezulike, (30) Agar et al	Poster Session 2B - Posters (31) Correa, (32) Curtis et al, (33) Mattocks et al, (34) Bettencourt da Câmara and Cabeceiras, (35) Byrnes et al	Poster Session 2C - Posters (36) Cross et al, (37) Morgan and Richardson, (38) Parkington et al, (39) Vafa et al, (40) Fadeeva et al	Poster Session 2D - Posters (41) Majón Valpuesta et al, (42) El-Gabry and Murphy, (43) Dury et al, (44) Fountain	Poster Session 2E - Posters (45) Olsen, (46) Grundy, (47) Eliopoulos, (48) Licchelli et al, (49) Malouka et al, (50) Hynes et al		
16:15 - 16:30	Break						
16:30 - 17:30	Parallel Session 3A - Papers (43) Sabatini et al, (44) Quinney et al, (45) Kismetová and Bermellová, (46) Tinker et al	Parallel Session 3B - Symposium (22) Developing a gendered perspective on exclusion from social relations in later life	Parallel Session 3C - Papers (47) Wheeler et al, (48) Ekwegh et al, (49) Tur-Sinai et al	Parallel Session 3D - Papers (50) Beedell, (51) Claeys and Berdai-Chaoui, (52) Chee et al, (53) Berdai-Chaoui et al	Parallel Session 3E - Papers (54) Hurd, (55) Pijpers, (56) Grindey-Bell, (57) Horne et al	Parallel Session 3F - Symposium (23) Caring and Compassionate Communities in Belgium: a focus on their development and evaluation	Parallel Session 3G - Symposium (24) Digital Transformation: a new era for Technology Enabled Care. But what role for research?
19:00 - 21:30	BSG 50th Anniversary Party						



Scientific Programme

8th July 2021						
Time	Session					
14:00 - 15:00	Keynote Speaker: Professor Michel Poulain					
15:00 - 15:15	Break					
15:15 - 16:15						
16:15 - 16:30	Break					
16:30 - 17:30	Parallel Session 3H - Papers (58) Kelly, (59) Lee, (60) Majón Valpuesta and Levasseur, (61) Reuter and Scharf	Parallel Session 3I - Symposium (25) Caring during the COVID-19 pandemic and unheard voices: Perspectives from Germany	Parallel Session 3J - Symposium (26) Material Gerontology: Objects, Bodies, and Spaces of Ageing	Parallel Session 3K - Papers (62) Zhang et al, (63) James et al, (64) Davison et al	Parallel Session 3L - Papers (65) Vlachantoni et al, (66) Marchese et al, (67) Baumbusch et al, (68) Cheshire-Allen and Calder	Parallel Session 3M - Papers (69) Nedungayil and Wilson, (70) Sullivan et al, (71) Howson-Watt et al,
19:00 - 21:30	BSG 50th Anniversary Party					

Scientific Programme

9th July 2021

Time	Session						
09:30 - 10:30	Parallel Session 4A - Papers (72) Davenport et al, (73) Hepburn, (74) Bifárin et al, (75) Alraddadi	Parallel Session 4B - Symposium (27) Dementia and Place: practices, experiences and connections	Parallel Session 4C - Papers (76) Jandric, (77) King, (78) Maclean and Egdell	Parallel Session 4D - Symposium (28) Achieving inclusive aged care for older migrants in Europe: the potential of participatory methodologies	Parallel Session 4E - Papers (79) Param, (80) Shah et al, (81) Shah et al	Parallel Session 4F - Papers (82) Gridley et al, (83) Lindley et al, (84) Hall et al, (85) Ward et al	Parallel Session 4G - Papers (86) Newman et al, (87) Ritchie et al, (88) Theodosopoulou et al
10:30 - 11:00	Break with Sponsors and Exhibitors						
11:00 - 12:00	Parallel Session 5A - Papers (103) Dunne et al, (104) Toon and Simpson, (105) Cudworth, (106) Gibson et al	Parallel Session 5B - Symposium (31) Relationships, gender and sexuality in later life	Parallel Session 5C - Papers (107) Lain, (108) Naegele et al, (109) Tur-Sinai and Spivak, (110) Price and Buckley	Parallel Session 5D - Symposium (32) Law and Ageing	Parallel Session 5E - Papers (111) Toze et al, (112) Marsillas et al	Parallel Session 5F - Papers (113) Harrison et al, (114) McGee et al, (115) Mulrine et al, (116) Barrado-Martín et al	Parallel Session 5G - Symposium (33) PhD Dementia Research and the Creative Arts
12:00 - 13:00	Meet our Sponsors and Exhibitors	Mentoring with ERA	Gerontopets				
13:00 - 14:00				Co-research in dementia related studies			
14:00 - 15:00	Parallel Session 6A - Papers (137) Christopher et al, (138) Váverková et al, (139) Tur-Sinai and Carmel (140) Gow et al	Parallel Session 6B - Papers (141) Gates et al, (142) Wilson et al, (143) Boulton et al, (144) Maherally	Parallel Session 6C - Papers (145) Zhang et al, (146) Samsi et al, (147) Booi et al, (148) Cooke and Baumbusch	Parallel Session 6D - Symposium (35) Older adults in the media: enduring and changing trends	Parallel Session 6E - Papers (149) Kodate et al, (150) Riddoch and Cross, (151) Dunne et al	Parallel Session 6F - Papers (152) Darvishpoor Kakhki et al, (153) Silarova et al, (154) Lombard, (155) Faraday et al	Parallel Session 6G - Papers (156) Ward et al, (157) Olsen and Scott, (158) Elsdon and Roe, (159) McKittrick and Phillips
15:00 - 15:30	Break with Sponsors and Exhibitors						
15:30 - 16:30	Keynote Speaker: Dr Sandra Hirst						
16:30 - 17:00	Conference Closing Ceremony						

Ageing and resilience	Maintaining health	Covid-19	Health innovation	Social participation	Health and social care
Changing connections	Changing responses	Retirement	Diversity and culture	Gender diversity	Housing for ageing
Innovation in theories	Sustainability	Arts and leisure			

Scientific Programme

9th July 2021

Time	Session					
09:30 - 10:30	Parallel Session 4H - Papers (89) Xiong, (90) Li, (91) Price and Di Gessa	Parallel Session 4I - Symposium (29) Cultural Gerontology – Six Years On	Parallel Session 4J - Symposium (30) Past, Present and Future: reflections from – and on – the Ageing of British Gerontology project	Parallel Session 4K - Papers (92) Mutz et al, (93) Mutz and Lewis, (94) Koukouli et al, (95) Dickens et al	Parallel Session 4L - Papers (96) Douglas et al, (97) Weigt et al, (98) Grotz et al	Parallel Session 4M - Papers (99) Bek et al, (100) Steele and Swaffer, (101) Balki et al, (102) Leahy
10:30 - 11:00	Break with Sponsors and Exhibitors					
	Parallel Session 5H - Papers (117) Nie et al, (118) West and Zeilig, (119) Davis et al, (120) Davis	Parallel Session 5I - Papers (121) Eccles et al, (122) Szekeres et al, (123) Guzman et al, (124) Crotti et al	Parallel Session 5J - Symposium (34) Categorisation, social divisions and the negotiation of later life	Parallel Session 5K - Papers (125) Zhou and Bai, (126) Mathie et al, (127) Wolter et al, (128) Oktaviani et al	Parallel Session 5L - Papers (129) Bezzina et al, (130) Lariviere and Donnellan (131) Aubrecht et al, (132) Derrer-Merk and Bennett	Parallel Session 5M - Papers (133) Doeblner, (134) Ogrin and Lowthian, (135) Palmer et al, (136) Alexander et al
12:00 - 13:00						
13:00 - 14:00						
14:00 - 15:00	Parallel Session 6H - Papers (160) Mikulionienė and Gaižauskaitė, (161) Makore, (162) Lafortune et al, (163) Vlachantoni et al	Parallel Session 6I - Papers (164) Liang and Hurd, (165) Bermellova and Kisvetrová, (166) Youell et al, (167) Searing and Zeilig	Parallel Session 6J - Papers (168) Lovatt and Wright, (169) White et al, (170) Aubrecht, (171) Wang	Parallel Session 6K - Papers (172) Maitland and Baker, (173) Bampouras et al, (174) Debelle et al	Parallel Session 6L - Papers (175) Mesnard et al, (176) Vandrevale et al	Parallel Session 6M - Papers (177) Tanner et al, (178) Fountain, (179) Bai et al, (180) Moonan-Howard and Carey
15:00 - 15:30	Break with Sponsors and Exhibitors					
15:30 - 16:30	Keynote Speaker: Dr Sandra Hirst					
16:30 - 17:00	Conference Closing Ceremony					

Symposia

SIG Session A - Symposium (1) Creative Ageing: Learning from crisis through innovation and adaptation

10:30 - 11:30 Wednesday, 7th July,
2021

Track: Ageing and resilience in adversity

Symposium Abstract: The COVID-19 global pandemic brought new opportunities for arts and creative engagement in a variety of formats while closing the doors on the traditional means by which people access culture and heritage. In response, individual artists and arts organisations provided wellbeing and practical lifelines for many older people, deploying innovative formats demonstrating the adaptability of the sector and its willingness to innovate. These have reached into communities, health and care settings, streets, and people's homes. There are, however, concerns about the future sustainability of creative ageing work (Cutler, 2020) and the pandemic has exposed social, health and digital inequalities and inequities relating to age.

The membership of the Creative Ageing Special Interest Group is international, inter-disciplinary and cross-sectoral. This symposium will draw together presentations from across Europe (including the UK) and in Canada. Speakers will explore issues such as the potential for remote or virtual delivery of creative activities and communication of public health information, the relationship between creative ageing and global and national agendas such as Black Lives Matter and the Climate Crisis, and innovations within the dance sector that are tackling ageism. Their discussions will have implications for the future of creative ageing in research, policy and practice.

References

Cutler, D. (2020). *Key workers: creative ageing in lockdown and after*. Baring Foundation, London. Accessed 11 December 2020 at <https://baringfoundation.org.uk/resource/key-workers-creative-ageing-in-lockdown-and-after/>

Chair

Katherine Algar-Skaife

Bangor University, United Kingdom

S. Paper 1.1

Culture Box - Using multi-sensory Culture Boxes to promote public health guidance and to support the wellbeing of people with dementia in care homes.

Dr Victoria Tischler¹, Dr Hannah Zeilig², Julian West³

¹University of Exeter, Exeter, United Kingdom. ²University of the Arts, London, United Kingdom. ³Royal Academy of Music, London, United Kingdom

Abstract: The Culture Box study is producing and distributing resources at a national level incorporating pandemic guidance with creative activities for care staff and people with dementia in care homes. The boxes seek to address two main aims; communication of public health information that is accessible for those living with dementia, and creative activities to alleviate loneliness and isolation. The study investigates the extent to which resources created by creative practitioners can be effective when delivered remotely, rather than in person. Activities and resources are being co-designed with people living with dementia, family supporters and care staff. The study has a particular focus on including people of African, Caribbean and Asian heritage, who have experienced disproportionately higher levels of illness and morbidity as a result of the pandemic. The project is being evaluated using Participatory Action Research.

Delivering the project remotely has necessitated a number of innovations:

- Creating an ethically rigorous method of obtaining consent from participants that can be done remotely
- Co-design processes with people living with dementia using digital platforms
- The Culture Box resources created combine digital and physical materials
- A focus on developing activities that give care home staff the resources and confidence to interact with residents, using their own imagination and creativity

In this presentation, we will share some of our reflections on the study so far and preliminary findings from the data gathered, focusing on the impact of the Culture Boxes on social interaction, loneliness and wellbeing of those living with dementia in care homes.

Symposia

S. Paper 1.2

New directions? What does the learning from the experiences of the last 15 months mean for creative ageing practice in England now?

Dr Virginia Tandy

Creative Ageing Development Agency, Manchester, United Kingdom

Abstract: CADA is the new national Creative Ageing Development Agency for England, supported by the Baring Foundation and hosted by Manchester Museum. We are leading a fundamental rethink and reflection on ageing and creativity, investigating the profound shifts needed to tackle ageism and support systemic change. This presentation will explore how CADA has developed its agenda in this complex sector in response to the pandemic, Black Lives Matter and Brexit and its progress so far in promoting ‘the right to end one’s days as a creatively engaged citizen’(David Slater, former Director of Entelechy Arts). It will also consider the place of older people in the Arts Council England’s new strategy Let’s Create <https://www.artscouncil.org.uk/letscreate>

Sir Michael Marmot’s article on the report *Build Back Fairer* (2020) <https://www.theguardian.com/commentisfree/2020/dec/15/health-inequalities-covid-ucl-government-policymaking> highlighted that there is a need to create the conditions for older people to lead meaningful lives. What is the role of creative ageing in bringing this about in a range of contexts from getting people over 50 back into work through training and volunteering, through to everyday creativity in care settings? Let’s recognise the campaigns led by older people, such as *Valuable not Vulnerable* <https://www.ageing-better.org.uk/blogs/valuable-not-vulnerable-how-greater-manchester-changing-narrative-ageing> and ensure the voice of a diverse range of older people is being heard and that they are recognised as active producers, not just passive consumers of culture.

S. Paper 1.3

Dance On, Pass On, Dream On!

Ms Madeline Ritter, Ms Lisa Marie Bowler

Diehl+Ritter, Berlin, Germany

Abstract: Dance On, Pass On, Dream On (<https://dopodo.eu/>) is a European cooperation project in which eleven renowned dance institutions from ten countries come together to address the problem of ageism in the dance sector and in society. Ageism is still widespread. A 2018 report from the European Union Agency for Fundamental Rights goes as far as saying that “the enjoyment of all human rights diminishes with age”, due to negative narratives that cast older people as “burdens” on society or the economy (https://fra.europa.eu/sites/default/files/fra_uploads/fra-2018-frr-chapter-1-focus-on-ageing-en.pdf, p.9). Professional dancers suffer from even more extreme forms of ageism and are generally expected to retire from their performing careers around the age of 40, when youth and peak physical performance are supposed to have faded. (Dancer Emma Lewis on “Why I dance on”: <https://vimeo.com/402132419>).

We have been working towards a new understanding of the value of age in dance since 2016, imagining a Europe where older dancers are valued for their experience and charisma, where dance heritage is cherished and serves to inspire younger artists, and where older people are respected and engage in meaningful, creative activities. Our actions are based on the belief that fairness, inclusivity and diversity in the arts can lead to greater creativity and inclusivity in society more generally.

Madeline Ritter, founder of this ground-breaking initiative, and Lisa Marie Bowler, the project’s facilitator, present the project and engage in an intergenerational dialogue about the joys and challenges they have encountered on their journey.

Symposia

S. Paper 1.4

Benefits of virtual intergenerational music therapy in long-term care during the COVID-19 pandemic and beyond

Dr. Kate Dupuis^{1,2}, Kathy Lepp³, Melissa Jessop³, Carrie Perkins³

¹Sheridan Centre for Elder Research, Oakville, Canada.

²Schlegel-UW Research Institute for Aging, Waterloo, Canada.

³Schlegel Villages, Kitchener, Canada

Abstract: Music can be extremely beneficial for older adults living with dementia in long-term care, as they often experience social isolation and loneliness, and music offers opportunities for communication and connection with other residents and staff. The addition of children to these interventions can further combat social isolation, as intergenerational music activities can contribute to the well-being of both younger and older participants by creating new, reciprocal social bonds between participants of all ages. The Intergenerational Music Therapy Jamboree was developed collaboratively by the music therapist and director of recreation at the Village of Riverside Glen, a long-term care home in Guelph, Canada, to integrate the arts (music therapy) into a health care setting. The intervention provides residents with opportunities to make new connections with young children from the surrounding community in a safe and supportive space. During COVID-19, the Jamboree has moved online, through Zoom, with great success.

Through a collaborative partnership between point of care staff and researchers, formal evaluation of the Jamboree intervention was conducted in order to examine whether virtual intergenerational music therapy would engage participants and benefit the residents in terms of communication and feelings of connectedness and social interaction.

In this presentation, we will share findings from our evaluation, describing benefits for residents, staff, children participants, and the adults who accompany them to the sessions. In addition, we will share information about best practices for conducting intergenerational music therapy, including key modifications to allow the intervention to continue online during the pandemic.

SIG Session B - Symposium (2) Transport and Mobility: The past, present and future of transport, mobility and ageing

10:30 - 11:30 Wednesday, 7th July, 2021

Track: Maintaining health and well-being in later life

Symposium Abstract: Transport and mobility are crucial to the lives of older people, connecting them with others, facilitating access to work, leisure and services. However, their mobility is not always well understood or represented in policy and practice, meaning their needs and concerns can be ignored. At the 1976 BSG conference, Alison Norman identified older people as having particular transport issues, and called for changes in law, administrative procedures and attitudes to older people in response.

This symposium will look back at older people's experience of transport and mobility since the 1970's, has it changed, and has transport research helped in this regard? Moving to the present, we will also consider the current pandemic. In many countries measures to combat the disease have seen huge enforced changes to mobility including for older people. Have these changes successfully (or even adequately) supported the mobility needs, or aspirations of older citizens?

Finally, we will look forward, beyond the current global crisis, to address future mobility needs and provision. New technologies and approaches are emerging, such as connected and autonomous transport systems and new data driven personalised on-demand transport. These promise to move people and goods more easily, efficiently and in a more environmentally friendly way. Whilst 'intelligent' transport offers the prospect of technological innovation and seamless travel, it may equally be technologically deterministic and potentially socially exclusive. Will we, as gerontologists, be able to help understand how to embrace such innovation to 'build back better' in terms of long-lasting equity and health?

Chair

Ben Spencer

Oxford Brookes University, United Kingdom

Symposia

Discussant(s)

Charles Musselwhite

Swansea University, United Kingdom

S. Paper 2.1

Mobility, transport and ageing: an historical overview.

Professor Colin Pooley

Lancaster University, Lancaster, United Kingdom

Abstract: Consideration of the ways in which mobility and ageing have changed over time requires the assessment of several interacting processes. Transport technologies and opportunities have changed, mobility expectations have altered, and healthy lifespans have, for the most part, increased. Moreover, as with all mobility, these factors are themselves structured by a range of factors including (but not limited to) gender, wealth, location, age and ethnicity. In this paper I use data drawn from detailed studies of mobility change over time to examine how everyday mobility has altered over the life course at different periods in the past and, in particular, how the mobility and transport opportunities of the elderly have altered over the last 100 years. Data are drawn from two main sources: oral life histories collected from respondents at different ages, and analysis of personal diaries written at different periods in the past and which provide reasonably detailed accounts of everyday mobility. Both sources have problems of use and interpretation: oral history is dependent on the memory of respondents, while diaries survive for only a sub-set of the population and the historian has not control over what was written. However, together they do demonstrate the ways in which the mobility experiences of many people broadened over time, and that from the 1980s in particular later life was for some people the period in which they experienced the most varied and extensive mobility. Individual case studies are used to illustrate these points.

S. Paper 2.2

Older People's Use of Mobility Aids in the Built Environment

Mrs Allyson Rogers

Swansea University, Swansea, United Kingdom

Abstract: Older people are the group most likely to have mobility and accessibility issues, giving rise to the need to examine wider relationships between mobility and ageing in relation to health and well-being. The social model of disability and resulting accessibility legislation heralded a great deal of improvement for the inclusion of those with disabilities, but little attention has been paid to emotional or psychological needs of people with physical impairments who require the use of mobility aids, especially older people. From the perspective of mobility aid provision, outcomes are measured in terms of independence for user, without considering the impact of this functionality on mobility aid user or carer, family or social life. This paper outlines the findings of a study of everyday mobility practices in daily routines of older people who use mobility aids. Investigating mobility practices of 11 mobility aid users, 6 carers, plus the experiences of the researcher and her husband who is an older mobility aid user, the study findings highlight a complex and interlinking array of obstacles to inclusion for older people occurring at individual, relational and infrastructural levels. Although this was a relatively small sample, the implications of this study are that this area requires more attention from both research and policy and planning arenas to ensure older people who use mobility aids are appropriately accommodated in the built environment. Policy and planning do not provide a cohesively supportive environment for older people who use mobility aids to effectively participate socially.

Symposia

S. Paper 2.3

Event-based travel, harnessing new mobility technologies to deliver greater inclusivity, lessons learnt from the WeGo trial

Dr Ian Shergold

University of the West of England, Bristol, Ukraine

Abstract: This presentation reports on a new event-based mobility service, WeGo, successfully trialled in Bristol in 2020. Such a service could offer greater mobility to older people reliant on limited public or community forms of transport.

Transport is key for older people attending 'events' – be that for social activities, health services or a trip to the shops. Yet many are subject to health or financial constraints that preclude the use of personal, private modes of transport, making them reliant on alternatives for out-of-home mobility.

Participation is then determined by the availability of affordable and accessible transport, and is usually an afterthought and almost always arranged separately to the event itself. This disconnect may preclude travel, with negative implications for inclusion, isolation and wellbeing, as it becomes too difficult to arrange and coordinate travel resources.

WeGo proactively addressed these issues, with attendees able to book transport as they booked an event (health-related in the trial), looking to deliver journeys with the fewest number of (appropriate) vehicles, and maximising affordability for passengers.

The trial saw increased uptake for events, and users more able to engage in out-of-home activity. It simplified transport fulfilment for health service partners, and anecdotally improved participants wellbeing. The trials provided insights into factors that could make such a service feasible, and successful.

Follow-on technical studies explored how to scale up event-based travel (to operate UK-wide), illustrating how new technologies that are part of the digital transition of transport for younger generations could also deliver services for older citizens.

SIG Session C - Symposium (3) Substance Use and Ageing: Understanding and addressing alcohol use amongst older people during and after COVID-19

10:30 - 11:30 Wednesday, 7th July,
2021

Track: Impact of and response to Covid-19: lessons for future pandemics

Symposium Abstract: The 21st century has seen an increase in substance use in older populations, with over half of those seeking treatment being aged 40+ years (Public Health England 2019). Alcohol is the drug of choice for many baby boomers, who are drinking at unprecedented levels. Ageing increases the risks of any alcohol use, making older adults a key at-risk population of drinkers. This symposium will explore alcohol use in later life and how it might be addressed, particularly during and after COVID-19. The symposium begins with a presentation on a PhD project to explore how non-conscious processes can explain drinking behaviour in midlife/older adults. This paper considers how people might be supported to make healthier decisions about their alcohol use to promote their health and wellbeing in old age. The latter presentations examine how COVID-19 has impacted older people's drinking habits, and their need for support to make healthier decisions regarding their alcohol use. First, the impact of the pandemic upon older people's alcohol use, given experiences of stress, boredom, and loneliness, is examined in a non-treatment population of older people (aged 50+ years). The final presentation explores how changes in service provision during COVID-19 were experienced by older people receiving treatment for harmful alcohol use; and implications for future demand. This special interest group symposium will discuss the implications for policy and practice relating to older adults substance use during the pandemic.

Chair

Deborah Morgan

Swansea University, United Kingdom

Symposia

S. Paper 3.1

Developing an intervention to reduce in-home alcohol consumption in midlife adults by targeting automatic cognitive processes.

Mrs Fiona Matley, [Professor David Foxcroft](#), [Dr Emma Davies](#)

Oxford Brookes University, Oxford, United Kingdom

Abstract: More than three quarters of alcohol-specific deaths in England occur in people aged between 40 and 69 years, and the proportion of people drinking 14+ units per week is highest in those aged between 55 and 64. Research was conducted to explore the potential to reduce alcohol consumption by targeting automatic cognitive processes, which include habits, impulses and unplanned reactions driving behaviour. Thematic analysis was employed to examine data from 16 semi-structured interviews conducted with adults aged 46 to 60 (8 men; 8 women) drinking at risk (AUDIT-C scores of five or more). Results were combined with findings from a literature review to inform the development of an intervention using the Behaviour Change Wheel process. Analysis identified barriers and facilitators to change and suggested that relationships with alcohol can be marked by tension in midlife. An exploration of capabilities, opportunities and reflective motivations suggested positive alcohol-related perceptions connected with being knowledgeable, responsible and in control. These perceptions are sometimes unaligned with drinking behaviour that appears to be driven by automatic motivations connected with spontaneous cognitions concerning enjoyment, coping and other aspects of identity. Reducing alcohol consumption in home settings may be achievable and acceptable by midlife adults drinking at risk. Utilising automatic cognitive processes related to identity, and enabling comparisons with others who appear to have a different relationship with alcohol, could have potential for helping midlife adults reduce alcohol consumption. Interventions focused on in-home drinking are particularly relevant due to concerning changes in alcohol consumption throughout the current pandemic.

S. Paper 3.2

How has COVID-19 affected older people's views and use of alcohol? A qualitative exploration

[Dr Beth Bareham](#), Professor Eileen Kaner, Professor Barbara Hanratty

Newcastle University Population Health Sciences Institute, Newcastle upon Tyne, United Kingdom

Abstract: Older people are more likely to experience harm from their drinking than any other age group, as conditions and medications that are negatively affected by alcohol are common in old age. One in three older people (aged 50+) has increased their intake during COVID-19. Without intervention, alcohol-related harm amongst older people will continue to increase, putting more pressure on health services. A good understanding is needed of how older people's views and use of alcohol have changed during COVID-19, in order to identify potential support needs to address hazardous use. This study aimed to understand older people's experiences of their alcohol use during COVID-19, and how their drinking has been affected by the pandemic.

Data collection begins February 2021. Semi-structured interviews will be conducted with ~20 older adults, purposively sampled for maximum variation in characteristics that might affect alcohol use/experiences of the pandemic. Relevant excerpts from webchat data with older people seeking online support from Drink Wise Age Well service providers for concerns regarding their alcohol use during COVID-19 will also be examined. Data will be analysed thematically, applying principles of constant comparison. Findings will explore how stresses, boredom and isolation experienced by older people during the pandemic have affected their alcohol use; and motivations to make healthy decisions regarding alcohol.

Implications of findings for how older people could be supported to make healthier decisions regarding their alcohol use during and after the pandemic, by health and social care providers and public health initiatives, will be discussed.

Symposia

S. Paper 3.3

The needs of older adults receiving alcohol treatment during the Covid-19 pandemic: A qualitative study

Dr Jennifer Seddon¹, Dr Paulina Trevena², Dr Sarah Wadd¹, Professor Lawrie Elliott², Ms Maureen Dutton¹, Ms Michelle McCann¹, Ms Sarah Willmott¹

¹University of Bedfordshire, Luton, United Kingdom.

²Glasgow Caledonian University, Glasgow, United Kingdom

Abstract: The Covid-19 global pandemic resulted in major changes to the provision of alcohol treatment in the UK. This study sought to understand the impact of the pandemic on older adults in alcohol treatment, and to explore how changes in the provision of alcohol treatment were experienced. Semi-structured interviews were completed with thirty older adults (aged 55+) in alcohol treatment, as well as fifteen alcohol practitioners providing support to older adults. Many alcohol treatment services moved to a model of remote support during the pandemic. However, face-to-face service provision was considered to be essential by both older service users and alcohol practitioners. Engagement with online support was low, with older adults facing barriers in using online technology. Addiction services may see increased demand for treatment as a result of the pandemic; it is important that services consider the needs of older adults, many of whom may be marginalised by a remote model of service provision.

SIG Session D - Symposium (4) Care Homes Research: Responding to the Impact of Covid-19

10:30 - 11:30 Wednesday, 7th July, 2021

Track: Impact of and response to Covid-19: lessons for future pandemics

Symposium Abstract: The BSG Care Homes Research Special Interest Group (SIG) aims to strengthen research, policy, and practice relating to care homes. Given that care homes are one of the sectors that have been most affected by Covid-19, our 2021 symposium considers the impact that Covid-19 has had on care home communities, and how best we can respond to the challenges exposed.

In our first paper, Dr Kritika Samsi reports on the views and experiences of older people with dementia and their carers who rely on care homes for short-term respite. The paper reveals key factors that influence people's decision-making about respite care both before and during the Covid pandemic. In our second paper, Dr Sue Westwood discusses the English Government's response to the pandemic, and the implications that this has had for the safety, care, and human rights of care home residents. This paper also considers what the Government's response has revealed about the value of older and disabled people in our society. In our final paper, Dr Susan Shenkin describes the innovative work undertaken by their Care Home Innovation Partnership to support care home residents and staff. The results of this work highlight tangible ways to better support and strengthen care home communities both during and beyond the Covid-19 pandemic.

A key aim of the symposium will be to consider how this work informs future policy and practice to ensure that our care home communities are able to emerge from the Covid-19 pandemic in a stronger position.

Chair

Laura Brown

University of Manchester, United Kingdom

Symposia

S. Paper 4.1

Views of residential respite for older people living with dementia and carers pre-Covid-19 and during the pandemic: findings from an interview-based study

Dr Kritika Samsi¹, Dr Laura Cole², Dr Katharine Orellana¹,
Professor Jill Manthorpe¹

¹King's College London, London, United Kingdom.

²University of West London, London, United Kingdom

Abstract: Residential respite care, or a short stay in a care home, can benefit older people living with dementia and their carers. It provides both with a break and is seen as a way of supporting people living with dementia to stay at home for longer, potentially delaying a long-term move to a care home. However, little is known about residential respite services, especially their availability, access, components and cost. As part of a 2-year study funded by Alzheimer's Society, we conducted telephone and video-call interviews with five people living with dementia and 36 family carers in 2020 in different parts of England, about their views, experiences, and expectations of residential respite. These included those who had used residential respite and those who had not or had turned it down. We also asked people how the Covid-19 pandemic had affected present and future choices. Data were analysed thematically and early findings indicated: (1) head vs heart spectrum of emotional and intellectual reactions to accepting residential respite, (2) worries about respite being a break in continuity of care, (3) residential respite offering a breathing space to make a longer-term care decision, (4) respite being declined relating to the availability of other care options (support from family, home care workers). Participants described being stretched as other sources of care and support became limited or unavailable due to the pandemic, and most were anxious about the safety of residential respite in care homes. Findings are presented in the context of practice and policy implications.

S. Paper 4.2

Discounting older disabled people in care homes during the COVID-19 pandemic: The English government's breaches of care, equality and human rights laws.

Dr Sue Westwood

University of York, York, United Kingdom

Abstract: This paper considers the English government's responses to older people living in English long-term care and nursing homes during the COVID-19 lockdown in Spring/Summer of 2020. Care homes are total institutions, closed spaces from which residents rarely leave, and are occupied by some of the least powerful and most vulnerable people in our society. As such they require particular attention at all times, especially during national emergencies. However, during the initial COVID-19 lockdowns in 2020 a number of concerning acts of commission/omission occurred in relation to care homes. Specifically, there were: belated and inadequate social policies; excessive and unreported deaths; insufficient health protections (delayed lockdowns; insufficient protective equipment and testing; untested hospital transfers); family and friend exclusions; inadequate end-of-life planning (poor treatment and care; exclusion of loved ones a faith representatives; unlawful use of 'Do Not Attempt Resuscitation (DNAR)' Orders; potentially unlawful constraints upon freedom of movement; and insufficient regulatory scrutiny. This paper considers each of these concerns in relation to care, equality and human rights legislation, arguing that the English government behaved unlawfully, reflecting wider systemic cultural devaluation of older and disabled lives.

Symposia

S. Paper 4.3

Innovation and change to support care home residents and staff during COVID-19 and beyond

Dr Susan Shenkin¹, Ms Lucy Johnston², Dr Julie Watson¹,
Dr Cari Malcolm², Dr Lekaashree Rambabu¹, Dr Jo Hockley¹

¹University of Edinburgh, Edinburgh, United Kingdom.

²Edinburgh Napier University, Edinburgh, United Kingdom

Abstract: COVID-19 has disproportionately affected care home residents and staff. Our Care Home Innovation Partnership (CHiP) consists of academics and practitioners, including from six care homes, who worked on several projects to support residents and staff:

1. Online Supportive Conversations and Reflections (OSCaRS)
 - We delivered online sessions up to every two weeks for 10 weeks via a secure online platform to all members of care home staff. We evaluated these by recording sessions, questionnaires, and interviewing staff (n=10). OSCaRS improved coping mechanisms and team cohesion, and the staff's ability to manage and discuss death/dying.
2. Avoiding Burnout of Care Home Workforce
 - We reviewed resources available relating to mental well-being and resilience, and interviewed seven care home managers. We performed a scoping review on resilience and retention of frontline care workers (FCWs), and sent an online survey to 55 care home managers. There was a wealth of information available, but it was not tailored to FCWs which reduced access and uptake. We conceptualised the support and services as RAILS: Resources, Activities, Initiatives, and Learning Shared.
3. Development of a care home data platform
 - We examined the data collected in six care homes and interviewed the care home managers to identify how data were collected and used. We found that data collection methods, scope and definition were heterogeneous. We identified 15 core data items that were used most consistently and frequently. This will inform future work on a minimum dataset, and the need for a stable and interoperable data platform.

SIG Session E - Symposium (5) Technology and Ageing: Personal digital technology celebrates 50 years, alongside BSG!

10:30 - 11:30 Wednesday, 7th July, 2021

Track: Health innovation and technology

Symposium Abstract: 1971 - birth year of the digital world – so is personal digital technology reaching 'older age'?

1971 - Prior to joining European Economic Community! Now we have BREXITed, but our presentations include studies across Europe, and reach as far as Australia.

1971 - Prior to eradication of some of the great diseases – 1976 was the last UK death from smallpox. While 'Western' societies have become complacent about infectious diseases, the shock of the COVID19 pandemic led to a response of a plethora of technologies. We can't avoid discussing COVID and, despite much of the work presented here starting before the pandemic, we have witnessed the adaptations and reimagining of the research world. Some aspects may be temporary measures, but other aspects may become more permanent as COVID is unlikely to disappear.

1971 was the year of the first personal computer. The first calculator was marketed as an electronic slide rule. How do we describe some of the technologies presented in our symposium? An electronic companion, an electronic portal to your doctor and electronic brain gym?

Sociological perspectives on technology have emerged to keep pace with technology. Presenters will discuss how access to services is shaped by technology and comment on equity. A study of robots shows they can communicate, but not yet perceive emotions. Our presentations will cover one of the biggest questions – governance; how do we ensure that the voice of the user is involved in design. Imagine how we'll look back in 2071...

Chair

Neil Chadborn

University of Nottingham, United Kingdom

Symposia

S. Paper 5.1

The Impact of the COVID-19 Pandemic on the Use of Tele- and Video-consultations by Older People

Professor Malcolm Fisk

De Montfort University, Leicester, United Kingdom

Abstract: This paper is positioned in the broader context of telehealth / digital health. It will document the impact of the COVID-19 pandemic on the use of tele- and video-consultations by older people to access health and related support. The focus will be on people's access to GP and monitoring services (with the latter often carrying 'telecare' and 'telehealth' labels). Some comparisons will be made with experiences in the UK and Australia, in part taking forward work on the responses of those countries to the pandemic (see Fisk, Livingstone and Pit (2020) 'Telehealth in the Context of COVID-19: Changing Perspectives in Australia, the United Kingdom and the United States' - accessible at <https://pubmed.ncbi.nlm.nih.gov/32463377/>).

Key issues addressed in the paper will include the extent and scale of change in the use of tele- and video-consultations by older people; the implications for service providers (governance frameworks, staff skills and knowledge); the kind of impact made by the 'digital first' approaches adopted (actual or potential impact on the 'digital divide' including the attention given by service providers to the digital skills, empowerment of and self-management of or by older service users); and, more generally, the implications for those older people who are not digitally literate, unable or not predisposed to consult or use services in this manner.

Finally the paper will consider the implications of the wider use of tele- and video-consultations by older people for both GP and monitoring services in the context of what will, without doubt, become a permanent option.

S. Paper 5.2

Using Perspectives from Patient and Public Involvement in the Development, Evaluation and Implementation of Digital Technologies for Cognitive Health.

Dr Michael Craven^{1,2}, Dr Kyle Harrington^{1,2}, Dr Max Wilson¹, Dr Aleksandra Landowska¹

¹University of Nottingham, Nottingham, United Kingdom.

²NIHR MindTech MedTech Co-operative, Nottingham, United Kingdom

Abstract: As part of a European collaboration AD Detect-Prevent (www.addp.eu) that is investigating the design, effectiveness and suitability of cognitive (also termed 'brain') training/coaching and memory assessment games for people at risk of dementia, we conducted patient and public involvement (PPI) activities to guide design and future trials with end-users of an app developed by the Danish company Brain+. The exploration included a group of people with lived experience of dementia (people with a diagnosis and caregivers, recruited via Join Dementia Research) and individuals who were interested in understanding and improving cognitive health.

We report on the findings of interviews conducted remotely via Think-Aloud and Cognitive Walkthrough principles with the app and a series of face-to-face focus groups that explored the wider motivational aspects surrounding technologies for cognitive training/coaching and early assessment of memory problems, including identifying potential barriers to engagement and facilitators of adoption. For the focus groups the Capability, Opportunity, and Motivation Model of Behaviour (COM-B model) alongside a thematic approach was used to analyse the discussions and structure the results. The area of enquiry related to motivation, attitudes to learning and concerns about cognitive health. Participants were able to articulate their motivations, opinions and concerns about cognitive detection and training/coaching technologies, attitudes to the use of serious games for this purpose and provided some feedback on the usability of the app.

Symposia

S. Paper 5.3

The effect of MARIO, a social robot, on the resilience of people with dementia

Professor Dympna Casey, [Dr. Sally Whelan](#)

National University of Ireland, Galway, Galway, Ireland

Abstract: The resilience of people with dementia enhanced by having positive self-concept and being engaged with life. The effect of a social robot, MARIO, on the resilience of nursing home residents with dementia (n=10) was examined using multiple case study methodology. Data collected used dementia care mapping; semi-structured interviews with participants with dementia (n=10), caregivers (n=6), and relatives (n=7); and questionnaires including quality of life and resilience. During 12 facilitated sessions, data was collected using the Observational Measure of Engagement. Data analysis was guided by framework analysis, with qualitative and quantitative data were analysed in NVIVO 12 and SPSS, respectively. Then, all data were triangulated in a matrix, analysed for similarities and differences within and across cases, and themes were developed. The cross-case analysis produced four themes: Resilience changes minute to minute; Initiating and maintaining readiness; Active co-creation of meaningful activity; Impact on resilience. The findings revealed that people with dementia required skilled facilitation to use MARIO. During interactions with MARIO, the resilience of eight out of ten people was supported. Sessions with MARIO increased the well-being of people with dementia by providing meaningful activities that reinforced their positive self-concept. Social robots need to have greater capability to interpret and respond to the emotional needs of users if they are to benefit the resilience of people with dementia without the presence of a supportive facilitator. Future research should explore how strength-based strategies can empower people with dementia to create meaningful activities using social robots.

The Averil Osborn Symposium: Participatory Approaches in Ageing Research

10:30 - 11:30 Wednesday, 7th July, 2021

Track: Social participation, citizenship and co-production in a changing world

Symposium Abstract: This symposium brings together academics and older people who have been involved in participatory research, and develops a critical perspective on the benefits and challenges of this type of work. Commemorating the work of Averil Osborn, it aims to promote and support innovative work which enhances the participation and leadership of older people in research. In a first presentation, developed with co-researchers, Rebecca Turner will reflect on a participatory action research project with older men and women who live in, work at and visit care homes in Lincolnshire, the UK. This will include a discussion about the challenges associated with participatory work during the COVID-19 pandemic. A second paper, developed by Margaret von Faber together with co-researchers Mrs. Harreveltdt and Mr. Hogendoorn, focuses on the benefits and challenges of involving older people in developing age-friendly cities through participatory video design in The Hague and Leiden, two cities in the Netherlands. In a final presentation, developed with co-researchers, Mo Ray, Lizzie Ward and Denise Tanner will present their approach to knowledge exchange as an integral element of co-producing knowledge about older people who pay for their own care. The final part of the symposium will allow for an interactive discussion about the implications of the findings of this work for the future of participatory research with older adults.

Chair

Tine Buffel

The University of Manchester, United Kingdom

Symposia

S. Paper 6.1

Developing participatory research in care homes: reflections on the Lincolnshire Action Research in Care Homes (LARCH) project

Ms Rebecca Turner¹, Prof Mo Ray²

¹University of Keele, Lincoln, United Kingdom. ²University of Lincoln, Lincoln, United Kingdom

Abstract: The Care Collaboration project, funded by the Alzheimer's Society and Dunhill Medical Trust, is a participatory action research project based in a small group of care homes in Lincolnshire and involves men and women who live in, work at and visit the participant care homes. The overarching aim of the project is to explore transitions to, in and around care homes. Although the most obvious transition is the decision to move to a care home, which is often experienced as stressful and disruptive, the project has worked with participants to identify other transitions which are important to them and which affect the care home community. The presentation will summarise our collaborative approach and how the project is developing. Inevitably, the pandemic and its immense impact on care homes significantly affected the LARCH project, and we reflect on the challenges we encountered along the way.

S. Paper 6.2

Engaging Older People in Age-Friendly Cities through Participatory Video Design in the Netherlands

Margaret von Faber¹, C.L. Harreveldt², J. Hogendoorn²

¹University of Applied Sciences Leiden, Leiden, Netherlands. ²Regional Advisory Board of Older Persons, Leiden, Netherlands

Abstract: Introduction: Participatory video design is an approach to collect perceptions of older people about the age-friendliness of their city or neighbourhood. We describe two examples of this approach in the cities of The Hague and Leiden, the Netherlands. Methods: Persons of 60 years and older were invited to participate in a "workshop" on filmmaking focusing on age-friendly cities. A professional filmmaker and a researcher worked in co-creation with older people, to produce short films on topics that were chosen by the participants. The participants worked in couples to produce their films. In Leiden, the Regional Advisory Board of Older Persons, a client panel of older persons (aged 60–90 years), was involved in the project. Results: In total, 30 older people ranging in age from 60 to 90, participated in these workshops in The Hague and Leiden. The workshop in The Hague resulted in 11 mini-documentaries on "My age-friendly city". The workshop in Leiden on "Living longer in the own neighbourhood" resulted in 5 mini-documentaries. Topics included: Outdoor spaces; housing; social participation; communication and information; and community support. In both cities, a film with characteristics of the neighbourhood was made. Conclusion: Participatory video design can provide insight into preferences and needs of older people regarding age-friendly cities. However, it is important to acknowledge the challenges. Participants should be aware that results can be used for improvement. A prerequisite for the follow-up of improvements in age-friendliness is a process of co-creation with relevant stakeholders from the start.

Symposia

S. Paper 6.3

Evaluating knowledge exchange as an integral element of co-producing knowledge about older people who pay for their own care.

Prof Mo Ray¹, Dr Lizzie Ward², Dr Denise Tanner³

¹University of Lincoln, Lincoln, United Kingdom.

²University of Brighton, Brighton, United Kingdom.

³University of Birmingham, Birmingham, United Kingdom

Abstract: Older people are the largest group of people who pay for their own care at home or in a care home setting. Yet, until recently, there been little research on self-funded care despite its significance to policy and practice. The overarching aim of the project* was to shine a light on the ethical dimensions of self-funding by bringing older peoples' experiences to the fore. The project was grounded in an ethics of care perspective and our approach to researching self-funding has been through co-production with older people as co-researchers in each of the three research sites.

An integral element of the project was a series of knowledge exchange (KE) meetings carried out in each research site which aimed to bring emerging findings into dialogue with stakeholders, co-researchers and the academic team. The focus and content of each KE was co-produced with co-researchers who also took an active role in presenting material at the KE, facilitating and recording discussions. The KE process was formally evaluated as part of an evaluation of the participatory approaches underpinning the project. Findings show that participation in the KE led to some immediate changes in policy/practice, enhanced deliberation amongst stakeholders about emerging findings as well as developing relationships between stakeholders and research groups. This presentation will summarise our approach to knowledge exchange meetings as an integral element of the project and reflect on its benefits and challenges.

*Ethical Issues in Self-Funded Social Care: Co-producing Knowledge with Older people supported by the Wellcome Trust [203363/Z/16/Z].

Parallel Session 1A - Symposium (7) Ageing and crime victimisation: diverse questions and methodologies

09:30 - 10:30 Thursday, 8th July, 2021

Track: Ageing and resilience in adversity

Symposium Abstract: The risk of being the victim of a crime is a major concern for many older adults (e.g. Hanslmaier, Peter & Kaiser, 2018). However, victimisation of older adults ('elder abuse') is a relatively understudied aspect of the lives of older adults. Particularly research on sexual violence against older adults is uncommon (Nobels et al. 2018). To illustrate, a 2017 meta-analysis found 52 studies addressing this prevalence of elder abuse of all types (financial, sexual, physical, neglect; Yon et al. 2017). In comparison, in 2011, Stoltenborgh et al. found 217 articles addressing the prevalence of child sex abuse alone.

This symposium presents a variety of research on ageing and victimisation to show the diversity of questions and research methods in this field of research. It will include four talks on ageing and crime victimisation. The talks will present research on 1) the portrayal of older adults in the media as vulnerable to fraud; 2) the effects that lifetime crime victimisation has on fear of crime and social isolation in older; 3) the effects that victimisation has on older adults. The research methods used in these talks vary from corpus linguistics methods, to longitudinal data analysis on large datasets and qualitative methods.

We hope that this symposium will give attendees an overview of the breadth of research on ageing and victimisation and encourage other researchers to engage with the issues raised by the research presented.

Chair

Lara Warmelink

Lancaster University, United Kingdom

Symposia

S. Paper 7.1

Older adults' vulnerability to crime: data and prejudice

[Dr Lara Warmelink](#)

Lancaster University, Lancaster, United Kingdom

Abstract: This is the opening talk of the symposium: ageing and crime victimisation: diverse questions and methodologies. The aim of this talk is to introduce the importance of researching victimisation of older adults and the effects of lifetime victimisation on ageing. It will briefly highlight current research in this field, including the prevalence of elder abuse (Yon et al. 2017), the negative consequences of abuse and steps that can be taken to prevent such negative consequences (Acierno et al. 2017).

This talk will introduce the other speakers in the symposium and discuss the different methods that are being used to address research questions about ageing and crime victimisation. The presenter will also act as a discussant to the other presenters in this symposium.

S. Paper 7.2

The effects of lifetime crime victimisation on fear of crime and social isolation in older adults.

[Joe Pearson](#)

Lancaster University, Lancaster, United Kingdom

Abstract: As part of the symposium on ageing and crime victimisation, this talk will cover the effects that experiences of criminal victimisation has on fear of crime (FoC) and social isolation in older adults. FoC and social isolation have consistently been associated with experiences of criminal victimisation. Victims report heightened subsequent FoC compared to non-victims, whilst findings of increased precautionary constrained behaviours alongside increased FoC support the conclusion that victims will exhibit greater levels of FoC-induced social isolation. Amongst older adults, research has identified a general trend of increased FoC and social isolation, attributed respectively to a perceived reduced ability to ward off crime and lifestyle changes such as retirement that trim one's social network. It appears, then, that increased levels of post-victimisation FoC and social isolation are to be expected amongst older adults compared to younger victims. To examine the extent to which experiences of victimisation are tied to levels of FoC and social isolation, and FoC and social isolation tied to one another, preliminary modelling has been carried out on Wave 3 of the English Longitudinal Study of Ageing – a longitudinal dataset containing extensive data on the health, social, well-being, and economic circumstances of older adults in England. Several regression models revealed a pathway of consequences such that experiences of victimisation, while not directly associated with social isolation, predict greater FoC, which, in turn, predicts greater levels of social isolation amongst older adults.

Symposia

S. Paper 7.3

Violence and/or abuse among older women: their voices.

Ms Emma Finnegan

Northumbria University, Newcastle, United Kingdom

Abstract: There is growing recognition that 'older' women can be victims and the term 'elder abuse' now defines the abuse of 'older' people. However, there is still a poverty of research examining victimisation against older groups. Despite calls that the experiences of women, later in their life course, should be heard, the voices of 'older' women is still somewhat marginalised. The dearth of criminological and victimological interest is surprising given the ageing nature of populations and the dramatic and long-lasting impact of such abuse.

This project addresses the current lacuna by listening to the lived experiences of women, aged 60 and over, who have been abused. An intersectional feminist framework work, that is informed by social constructionism was adopted to examine respondent's experiences. In doing so the connection between age and gender, and other sites of inequality, was explored. Moreover, it provides a means to break down the oppressive domains of knowledge construction and facilitates change.

Reflecting on some findings from this study, this presentation sets out to highlight how older women experience violence and/or abuse. It will focus on three key areas: the types of victimisation participants identified, how they perceived age in connection with their experiences, and how they demonstrated resilience and/or empowerment. The focus in these three areas also seeks to demonstrate how their voices can be used as a tool to challenge some of the dominant notions surrounding age and victimisation.

S. Paper 7.4

Vulnerability to fraud and scams: discursive representations of older adults in the UK press

Mrs Rebecca Jagodzinski

Lancaster University, Lancaster, United Kingdom

Abstract: Fraud is a complex crime which encompasses a wide spectrum of activities. Defined here as the use of intentional deception to secure unlawful access to certain benefits (such as money or documents), it can affect both organisations and individuals.

Older adults are often assumed to be particularly vulnerable to this crime based on a number of well-researched risk factors, such as age-related cognitive, social, and affective changes. However, victimisation surveys have frequently contradicted this assumption: in relation to many subtypes of fraud, for instance, older adults are often the least likely age group to be victimised. A clear disconnect has emerged between how older adults are represented in relation to fraud and their actual levels of victimisation compared to other age groups.

As part of the symposium *Ageing and Crime Victimisation: Diverse Questions and Methodologies*, the aim of the current research is to investigate how older adults are discursively represented in the UK press specifically in relation to scams and fraud. A large purpose-built sample of news articles on the topic of fraud against individuals will be created. Using corpus-assisted discourse analysis, the research will address the following: i) which characteristics and activities are foregrounded in relation to older adults within the scam corpus; ii) whether any consistently recurring roles and identities emerge as a result; and iii) any potential relationship between these media representations and so-called *discourses of ageism* (Coupland & Coupland, 1993).

Coupland, N. and Coupland, J. (1993). Discourses of ageism and anti-ageism. *Journal of Aging Studies*, 7(3), 279-301.

Symposia

Parallel Session 1B - Symposium (8) Towards a positive paradigm in loneliness: an aspiration or impossible endeavour?

09:30 - 10:30 Thursday, 8th July, 2021

Track: Changing connections and relationships

Symposium Abstract: Although loneliness is often perceived as detrimental for well-being, there is a recent trend in the literature that aims to explore positive sides of loneliness. On the one hand, research indicates that older adults can still report high levels of well-being despite their loneliness. Older adults' strengths and resources can balance negative experiences of loneliness and increase positive well-being outcomes. On the other hand, there are recent studies that look at the positive or useful aspects of loneliness (e.g. as driver to find new friends or reconnect with old relationships). This symposium aims to unravel and critically reflect on some of these "positive and strength-based approaches" of loneliness in later life. Three different studies will be presented:

First, Sara Marsillas (Spain) provides profiles of people who might consider aloneness and loneliness in a positive way by using cross-sectional data from a representative sample in the Basque Country.

Lise Switsers (Belgium) examines the understanding of positive loneliness indicated by older people within the BBC loneliness experiment. Hannelore Stegen (Belgium) presents the prevalence of different types of loneliness amongst community-dwelling older people.

Christina Victor will reflect on these presentations and discusses how these could contribute theoretically and empirically to the debate on "positive sides of loneliness".

Chair

Liesbeth De Donder

Vrije Universiteit Brussel, Belgium

Discussant(s)

Christina Victor

Brunel University London, United Kingdom

S. Paper 8.1

Is it possible to experience loneliness as positive? Exploring positive lonely people

Dr Sara Marsillas¹, Elena Del Barrio¹, Dr Daniel Prieto Sancho², Mayte Sancho³

¹Matia Institute of Gerontology, Madrid, Spain.

²Universidad Complutense de Madrid, Madrid, Spain.

³Grandes Amigos, Madrid, Spain

Abstract: The developed societies have been experiencing the re-structure of the households' models in the last decades, which is translated into a growing and important number of citizens living alone. Even though this situation refers to an objective state of aloneness which is not positive or negative by definition, it is usually used interchangeably together with other concepts such as loneliness, which is by definition unpleasant. Research has established a relationship between aloneness and loneliness and negative outcomes, such as mortality or poor health status. In this communication, it is intended to explore if a positive interpretation and perspective can be related to both loneliness and aloneness concepts. Additionally, some coping activities are explored in order to manage or alleviate loneliness, as resources people consider and how are they related to wellbeing. For this, a survey of a representative sample of community-dwelling residents aged 55 and over was conducted in Gipuzkoa (Basque Country, Spain). Structured interviews were conducted through telephone survey based on a questionnaire assisted by computer. Some results indicate that 5.5 per cent of older adults reported frequent loneliness; of those, 17.4 per cent consider it positive. A similar pattern of results was obtained by applying the De Jong Gierveld loneliness scale. Exploring more this group of respondents in terms of different variables including wellbeing would pose insights regarding which ones could be relevant regarding this more positive perspective.

Symposia

S. Paper 8.2

New ways for understanding loneliness – exploration of the positive sides of loneliness

Lise Switsers^{1,2}, Prof. Christina Victor³, Prof. Manuela Barreto⁴, Prof. Pamela Qualter⁵, Prof. Liesbeth De Donder¹, Dr. Pan Honghui¹, Prof. Eva Dierckx¹, Prof. Sarah Dury¹

¹Vrije Universiteit Brussel, Brussel, Belgium. ²FWO, Brussel, Belgium. ³Brunel University London, London, United Kingdom. ⁴University of Exeter, Exeter, United Kingdom. ⁵The University of Manchester, Manchester, United Kingdom

Abstract: Although loneliness is often perceived as detrimental for well-being, there is a recent trend in the literature that aims to explore positive sides of loneliness. Given that earlier perspectives have tended to focus on a negative approach, and less is known about positive aspects of loneliness, this research explores the prevalence and the subjective meaning of positive loneliness. This study uses the data of the BBC Loneliness Experiment in 2018, a large cross-sectional survey. In total, there were 55,000 survey responses, but this study focuses on the sample of 14,000 older people, aged 60+. Besides questions focusing on socio-demographic information, loneliness, financial strain, friendship and well-being, the BBC Loneliness Experiment included free-text questions concerning the meaning of loneliness. Participants were asked to describe if loneliness could be positive and why. 45% reported that loneliness could be positive, with the reasons given for this including opportunities for self-growth, power or inspiration, or the enjoyment of being alone. Of these older adults, 50% indicated to experience sometimes until always loneliness feelings. The discussion revolves around how these results could help nuancing the debate on “positive sides of loneliness”.

S. Paper 8.3

The prevalence of different types of loneliness amongst community-dwelling older people

Hannelore Stegen^{1,2}, Dr. Daan Duppen¹, Lise Switsers^{1,2}, Dr. Honghui Pan¹, Prof. Dr. Eva Dierckx^{3,4}, Prof. Dr. Liesbeth De Donder¹

¹Department of Educational Sciences (EDWE), Vrije Universiteit Brussel (VUB), Brussels, Belgium. ²Research Foundation Flanders (FWO), Brussels, Belgium.

³Department of Psychology (PSYC), Vrije Universiteit Brussel (VUB), Brussels, Belgium. ⁴Alexianen Zorggroep Tienen Psychiatric Clinic, Tienen, Belgium

Abstract: Although loneliness can affect people of all ages, it is especially associated with later life. This article systematically reviews the prevalence of different types of loneliness (e.g. social, emotional, existential, collective, positive) among community-dwelling older adults.

A comprehensive literature search was conducted following a stringent search and analysis strategy in 7 databases, namely ISI Web of Knowledge, Sociological Abstracts, Social Services Abstracts, PubMed, Embase, PsycINFO and Cochrane Systematic Reviews. The articles, with a time range from inception to December 2020, had to be published in English peer-reviewed journals and their main or secondary study objective had to be the prevalence of loneliness in community-dwelling older adults. We also conducted a back and forward search as soon as we had made an initial selection of the articles that resulted from the searches in the 7 databases. Furthermore, experts were asked whether an article was missing in our selection.

Results first describe the variety of prevalence studies in terms of types of loneliness (conceptualization and dimensions such as social, emotional, existential, collective or positive loneliness), measurement instruments of loneliness (e.g. the UCLA Loneliness Scale or the De Jong Gierveld Loneliness Scale), features of the study population (age, gender, presence/absence of pathology) and the types of data collection and study design. Second, a meta-analysis is performed, to obtain the pooled prevalence of loneliness in community-dwelling older adults.

The discussion examines the prevalence rates and their implications for practice and policy, and formulates recommendations for future loneliness research.

Symposia

Parallel Session 1D - Symposium (9) Recognising diversity and reaching marginalised communities to tackle social isolation: learning from the Ambition for Ageing Programme

09:30 - 10:30 Thursday, 8th July,
2021

Track: Diversity and culture in later life: where are we now and where are we going?

Symposium Abstract: Addressing social isolation amongst older people has become a key policy concern within a broader shift towards a social model of ageing. As a result various social policy initiatives and funded programmes have sought to produce and deliver ways of working that engage with older people to promote social connections and civil participation. However what has remained largely absent from much of this work is a detailed understanding and recognition of the diversifying nature of the older population and the ways in which social inequalities and marginalisation can compound social isolation (Matziol & Berry, 2017). Starting with an awareness that social inequalities drive social isolation and that therefore there needs to be an equalities mind-set at the heart of this type of age-friendly work, this session presents a series of case studies from the Ambition for Ageing programme to demonstrate the diversifying needs of older people within marginalised communities and suggests new ways of research and engaging with such groups.

Chair

Sophie Yarker

University of Manchester, United Kingdom

S. Paper 9.1

Engaging marginalised communities in age-friendly work: the changing needs of South Asian elders in the UK

Dr Sophie Yarker

University of Manchester, Manchester, United Kingdom

Abstract: As urban populations in developed economies continue to grow and age they also becoming increasingly culturally and ethnically diverse. This diversity brings with it many different opportunities and resources but also brings the challenge of adapting age-friendly work to new cultural sensitivities. Social isolation is a universal problem but can be experienced differently depending on the cultural background of the individual but very little is known about the experience of social isolation for older people from different minority ethnic groups. This paper presents findings from a multi-site research project into how community and voluntary sector organisations engage with and support older people within the South Asian community. It highlights the changing needs of this section of the community including increasing awareness of complex health and wellbeing needs growing risk of social isolation faced by many. Based on interviews with BAME-led community and voluntary organisations the paper then discusses some of the barriers to engaging with older South Asians and how organisations are working to overcome these barriers in a context of funding cuts and rising pressures on their resources. The paper concludes by stressing the need to understand particular cultural sensitivities around age-friendly work and to continue to develop research agendas that will further this understanding.

Symposia

S. Paper 9.2

Going for GOLD! Growing Older with Learning Disabilities: reducing social isolation amongst older people with learning disabilities

Dr Melanie Chapman¹, Dr Daniel Docherty², The GM GOLD research team³

¹Manchester Metropolitan University, Manchester, United Kingdom. ²GM GOLD, Manchester, United Kingdom. ³GM GOLD, Greater Manchester, United Kingdom

Abstract: People with learning disabilities are living longer and the majority now live in community settings. However, they are a marginalised group who experience a range of social inequalities, stigma and social isolation. Older people with learning disabilities are particularly at risk; they are more likely to have been segregated from local communities from an early age with fewer opportunities to work and live independently than younger people with learning disabilities. As they grow older, family and friends may die or become less able to provide support. Declining health and mobility may make it harder to maintain social connections, access activities and opportunities. However, the voices of older people with learning disabilities are generally absent in research about older people.

The Greater Manchester Growing Older with Learning Disabilities (GM GOLD) inclusive research project aimed to reduce social isolation amongst older adults (aged 50+) with learning disabilities. A team of older people with learning disabilities conducted interviews and focus groups with 59 older people with learning disabilities. Over two-thirds of participants felt lonely now or in the past. Experiences of harassment and hate crime were common so people often felt unsafe going out. Additional causes of social isolation were lack of contact with family and friends, bereavement, cuts to services and community groups, deteriorating health and mobility. Often, social contact was in segregated settings, groups and activities organised for people with learning disabilities rather than local communities or older people. Social rules and skills may be difficult to understand, learn and remember.

S. Paper 9.3

Applying research in the development of a programme to build age friendly neighbourhoods.

Mr John Hannen

GMCVO, Manchester, United Kingdom

Abstract: The last few years have seen an increase in partnerships between voluntary organisations and academic institutions to evaluate work and understand the impact of community activities. However often researchers are engaged whilst implementation is already underway, with little opportunity to influence design. The Ambition For Ageing programme in Greater Manchester was a 5 year, £10.2m programme aimed at building age friendly neighbourhoods that engaged the University of Manchester as a design partner, enabling an evidence based approach to be developed.

We find access to existing research can help inform better design and better targeting of activity. This leads to increased impact, a better understanding of barriers and opportunities but also enables creates an environment more conducive to further research.

However, there are operational and cultural barriers to enable the formation of partnerships between academic and community organisations. We believe the insights we have from the successful delivery of our own work offer practical approaches to develop new ways to apply research and generate impact, particularly the need for organisations in both sectors to commit to relationship building.

Symposia

S. Paper 9.4

One Size Fits Some: Group work engagement with the most marginalised communities

Ms Sarah Wilkinson

Greater Manchester Centre for Voluntary Organisation, Manchester, United Kingdom

Abstract: Engaging older people in groups is seen as an effective means to reduce isolation and improve wellbeing. The Ambition for Ageing programme supported local communities in Greater Manchester to use an asset based community development approach to develop group work and other initiatives, focusing on the participation of older people from marginalised communities. These approaches were reviewed and evaluated by the AfA Equalities Board, comprising professionals from equalities organisations working alongside citizens with lived experience of marginalisation.

We find that there can be often be a tension in community engagement models between whether to develop inclusion approaches or targeted approaches. Inclusion approaches seek to remove barriers to engagement to allow the broadest range of people to engage in a process whilst targeted approaches generate community specific engagement that is less accessible to people from other communities.

We find that inclusion approaches in group work tend to work best with larger, dispersed communities of marginalised people, whereas targeted approaches may work best with more localised and concentrated marginalised communities. We propose a quadrant model that categorises marginalised communities by their local distribution and match this with effective group work approaches. However, our findings also suggest that it can be difficult to engage with small, dispersed communities directly using group work approaches, which has implications for initiatives such as social prescribing.

Reference:

Ambition for Ageing (2020). *A spatial approach to working with marginalised communities*. [online] Available at: <https://www.ambitionforageing.org.uk/sites/default/files/A%20spatial%20approach%20to%20working%20with%20marginalised%20communities%20%284-page%20briefing%29.pdf>

Parallel Session 1F - Symposium (10) Measuring and understanding quality of care, safety and quality of life in older adult care homes

09:30 - 10:30 Thursday, 8th July, 2021

Track: Health and social care practices, innovations and futures

Symposium Abstract: With approximately 425,000 older people living in care and nursing homes in England, ensuring those who reside in homes experience care that is safe and promotes good outcomes is clearly important. During the past decade or so, there has been an increasing emphasis on the measurement of outcomes such as quality of life and safety as indicators of quality of care in care and nursing homes. In this session, we present four papers that explore different aspects of measuring quality of care, safety, and quality of life in older adult care homes. Drawing on a series of projects, these papers present work that both considers how we measure quality of care in care homes and work that uses the measurement of quality of care and outcomes to understand its relationship to other factors. The first two papers focus on the measurement of safety in older adult care homes; the first presenting the findings of a scoping review which identifies measures that could be used as indicators of safety; the second, presenting the findings from a piece of work looking at social care professionals' experience of using care home safety data and their views of the around the measurement of safety in these settings. The third paper broadens out to look at quality of care in English homes and its relationship with regulator quality ratings. The final paper looks at how care home quality, as measured by regulator ratings, is affected by staff wages and training.

Chair

Nick Smith

PSSRU, The University of Kent, United Kingdom

Symposia

S. Paper 10.1

Understanding and measuring safety in older adult care homes

Dr Stacey Rand¹, Mr Nick Smith¹, Dr Karen Jones¹, Dr Helen Hogan², Mr Alan Dargan¹

¹University of Kent, Canterbury, United Kingdom.

²London School of Hygiene and Tropical Medicine, London, United Kingdom

Abstract: Safety is a less-developed concept in older adult residential care, than in healthcare settings. A scoping review of the international literature was conducted to identify measures that could be used as indicators of safety in quality monitoring and improvement in older adult residential and/or nursing care homes.

The findings were mapped to a theoretical model of safety measurement in health and social care settings, the Safety Measurement and Monitoring Framework (SMMF). The aim was to determine coverage, as well as gaps, in the understanding and measurement of safety in older adult care homes. The scoping review found that there are a range of safety measures that may be used for quality monitoring and improvement in older adult care homes. These cover all five domains of safety in the SMMF. Despite the availability and use of a range of safety indicators in older adult care homes, however, there are potential gaps. These include user experience, psychological harm related to the care home environment, abusive or neglectful care practice, and the processes for integrated learning.

Some of these gaps may relate to the challenges and feasibility of measurement in the care home context. There are also unaddressed questions over the extent to which systems-level or wider factors (e.g. funding) that influence safety ought to also be considered. Further work is needed to determine the validity and reliability of measures, as well as the feasibility of the collection, interpretation and application of safety data in quality improvement within older adult residential care.

S. Paper 10.2

Measuring safety in older adult care homes: the perspective of health and social care professionals.

Mr Nick Smith¹, Dr Stacey Rand¹, Dr Helen Hogan², Professor Karen Jones¹

¹PSSRU, The University of Kent, Canterbury, United Kingdom. ²London School of Hygiene and Tropical Medicine, London, United Kingdom

Abstract: Around 425,000 older people in the UK reside in a care or nursing home (Laing & Buisson 2016). Safety has been identified as a key aspect of quality of care within these settings. Despite this, the conceptualisation and measurement of safety in care and nursing homes is not as well developed as in health care settings.

As part of a larger project, this paper addresses the conceptualisation and measurement of safety in older adult care home settings by drawing on interviews with social care professionals. Telephone interviews were conducted with a range of professionals including representatives from care home providers, NHS England, local authorities, CQC and charities along with people whose work focuses on software and data support in care and nursing homes. The interviews covered a range of topics, such as how interviewees collect and use safety data in their professional roles, how safety is conceptualised and measured across the care home sector, the challenges and benefits of a national indicator set that includes safety indicators and how safety data can inform learning.

This paper will draw out key points from the interviews and reflect on what this says about both the current situation regarding the collection and use of safety data and the future direction of measurement of safety in older adult care and nursing homes.

Symposia

S. Paper 10.3

Regulator quality ratings and residents' social care-related quality of life .

Ms Ann-Marie Towers, Dr Florin Vadean, Dr Stephen Allan, Professor Julien Forder

University of Kent, Canterbury, United Kingdom

Abstract: Ensuring the quality of care homes is a priority for policy makers, commissioners and the public, yet there remain questions about what 'quality' means and how we should measure it. This paper examines care home quality from two perspectives: residents' social care-related quality of life and regulator (CQC) quality ratings. We combined data from two studies: Measuring Outcomes of Care Homes (2015-2018) and Measuring and Improving Care Home Quality (2017-2020). Both studies used a cross-sectional design and include information on: care home characteristics, staffing and services; residents demographic information, health status and ability to complete activities of daily living; as well as the residents' SCRQoL, collected using the ASCOT care home tool. We used multivariate regression analysis to assess the relationship between overall CQC quality ratings and residents' SCRQoL, as well as the relationship between specific CQC Key Lines of Enquiry (KLOEs) and ASCOT domains. Using the combined dataset of 475 residents from 54 homes (30 nursing and 24 residential), we found a significant, positive association between residents' SCRQoL and overall CQC quality ratings for residents with high care needs. Although care homes were generally meeting the needs of residents in basic aspects of care, 'Good' and 'Outstanding' homes made a meaningful difference to those aspects of residents' lives that add quality to their days - feeling in control, being engaged in activities, being socially fulfilled and treated with dignity. Being 'well-led' was particularly important to generating good outcomes for residents with highest needs.

S. Paper 10.4

The impact of wages and training on older adult care home quality

Dr Stephen Allan, Dr Florin Vadean

University of Kent, Canterbury, United Kingdom

Abstract: Social care is a labour-intensive sector with labour accounting for the largest proportion of overall costs. Currently those that work in the social care sector do so for low pay (usually close to minimum wage) and there are very high levels of staff turnover and job vacancies. This could also lead to negative secondary effects on workload, continuity of care and ultimately quality of care. This study looked to assess if two potential ways to improve recruitment and retention, higher wages and training, are associated with better care home quality.

We created a panel of 12,052 older adult care home observations for 2016-2018 from a staffing database for English social care providers. We used quantitative methods to assess how average hourly care worker wage and two measures of training affect care home quality as measured by Care Quality Commission (CQC) quality ratings. We find that average hourly wage of care workers and the prevalence of staff trained in dementia significantly increased the likelihood of a care home being rated as good or outstanding.

The outcomes of older people in care homes are affected by the staff that support them. These findings have important policy implications for social care markets in terms of appropriate funding to support the retention and training of staff.

Symposia

Parallel Session 1I - Symposium (11) Challenging ageism during COVID-19: lessons from research, policy and practice

09:30 - 10:30 Thursday, 8th July,
2021

Track: Impact of and response to Covid-19: lessons for future pandemics

Symposium Abstract: The ongoing pandemic has brought ageism into sharper focus, with negative stereotypes about older people becoming increasingly apparent in societal narratives. This symposium brings together researchers, policy makers and older adults to explore some of the ways in which ageist attitudes and ageist practices are being challenged in the UK today. The first paper, by Hannah Swift, reports on key evidence and conclusions from several research projects focused on understanding what ageism looks like, the impact of the pandemic on expressions and experiences of ageism, and what that means for attempts to challenge it. The second presentation, by Thomas Scharf, connects concepts of social exclusion and ageism to explore ways in which visual representations of ageing reinforce negative stereotypes of later life. The third presentation, by Paul McGarry, reflects on his experience of campaigning against ageism over the past two decades, bringing together insight that can help us work out how we might challenge ageism in the future. In the fourth presentation, Jean Friend from Talking about my Generation will discuss their work as people in mid and later life setting the record straight on ageing and challenging ageist stereotypes in the Greater Manchester city-region through a variety of mediums including audio and film-making.

Chair

Louise Ansari

Centre for Ageing Better, United Kingdom

S. Paper 11.1

Ageism in the time of COVID-19

Dr Hannah Swift¹, Professor Alison Chasteen²

¹University of Kent, Canterbury, United Kingdom.

²University of Toronto, Toronto, Canada

Abstract: Research exploring the nature and consequences of ageism has been growing in traction due to increased recognition of the need to enhance and not hinder older adults' participation in society. However, the global COVID-19 outbreak has the potential to exacerbate expressions and experiences of ageism. This presentation summarises key evidence and research, conducted before and during the pandemic, to highlight how the discourse surrounding the pandemic has strengthened the homogeneous view of older adults as vulnerable, has socially stigmatized being an older adult, and has potential to increase hostile and benevolent forms of ageism. It explores the impact of these changing dynamics on intergenerational cohesion, and highlights new challenges in combating ageism that have emerged due to COVID-19.

Symposia

S. Paper 11.2

Media representations of ageing during COVID-19 as a form of socio-cultural exclusion

Professor Thomas Scharf

Newcastle University, Newcastle upon Tyne, United Kingdom

Abstract: Across Europe, there is growing research and policy interest in the idea of social exclusion as it applies to later life. As a multidimensional idea, social exclusion refers to the ways in which people may be prevented from participating in what most people would regard as a normal way of life. This encompasses a lack of material resources, limited social relations, reduced opportunities for civic engagement, disconnection from neighbourhood or community, lack of access to services and supports, and forms of prejudice and discrimination. Evidence suggests that the COVID-19 pandemic has exposed growing numbers of older people to the differential risks of social exclusion, with some groups experiencing multiple forms of disadvantage connected to their intersecting social locations and place of residence. In this paper, against a background of renewed debates around socio-cultural forms of exclusion, I consider media representations of ageing adults over the course of 2020-21. I draw on images used in digital and print media during the pandemic to argue that the widespread use of stock images, especially those that depict (body parts of) older adults, is prejudicial and acts to reinforce a deep-seated ageism in society. The paper concludes by outlining some of the positive and practical steps that have been taken to challenge this particular form of social exclusion.

S. Paper 11.3

Leading public campaigns to change narratives of ageing: lessons and reflections from Manchester and Greater Manchester

Mr Paul McGarry

Greater Manchester Combined Authority, Manchester, United Kingdom. University of Manchester, Manchester, United Kingdom

Abstract: This paper will describe and analyse the work led by Manchester and Greater Manchester agencies from 2004-2020 aimed at changing the negative accounts of how ageing and older people are commonly portrayed and will consider the implications for policy and action today.

The paper will:

- Describe activities organised by Manchester City Council's Valuing Older People and Age-friendly Manchester, "Positive Images" programmes and the Greater Manchester Combined Authority's 'Changing the Narrative' campaign.
- Set out the changing political, economic and social context of this work and the impact of austerity on these activities.
- Explore the aims and objectives, and organisation, of these activities and their interplay with policy-making and building broader ageing programmes in local government, NHS organisations and civic and community groups.
- Consider the role of older people and their organisations in leading these activities and the challenges faced in maintaining these activities during this period.
- Present a range of materials from publications, events and campaigns, including the following themes:
 - Intergenerational relationships
 - Technology and ageing
 - Relationships and Sex in later life
 - Activism
 - Culture and creativity
- Highlight national and international examples of good practice

The paper will summarise the lessons of this programme of activities using a candid and reflective approach and will argue for renewed and grass-roots practice alongside national and local policy-making.

Symposia

S. Paper 11.4

Talking About My Generation: older people-led media and cultural response to Covid-19

Miss Grace Dyke, Jean Friend

Ageing Better, Manchester, United Kingdom

Abstract: Jean Friend, community reporter for the Talking About My Generation news team, and Grace Dyke, news team facilitator, will provide an insight into Greater Manchester's first media platform created by and for over-50s.

The platform was set up to challenge ageist stereotypes often perpetuated by the media, and it delivers this mission by upskilling older people from across the region to become community reporters. Since the pandemic hit, the team have challenged mainstream media coverage of older people by increasing sharing positive stories of resilience and ageing well through an online news site, a printed magazine, a podcast series, social media channels and video making. They have built a community of 3000+ on social media and enjoy 2000 website visitors per month.

As well as building an age-positive community, the community reporters have been on their own development journeys: from hosting their own reggae radio show to delivering their own photography clubs. The community reporters have built their confidence by sharing their skills, talents, and experiences – as well as learning new ones from podcasting to video production.

The presentation will provide an opportunity to hear from one of the platform's founding reporters, and to learn what motivated the group to set up TAMG to provide alternative media coverage for their age group - and why this is important to them at this time more than ever. The presentation will also provide an insight into the community reporters' development journeys, and some of their key learnings and successes to date.

Parallel Session 1J - Symposium (12) How useful are theories of inequality in understanding precarious ageing in the Global North? A discussion of contemporary experiences of ageing and future challenges

09:30 - 10:30 Thursday, 8th July, 2021

Track: Innovation in theories, methods and critical perspectives

Symposium Abstract: Since the 1980s, some social gerontologists (e.g. Alan Walker, Carroll Estes, Christopher Phillipson and Toni Calasanti) have argued that power relations are central to understanding ageing and precarity. In particular, they have demonstrated that systems of inequalities, such as class, gender, or race and ethnicity, shape the experience of ageing and the political treatment of older people in capitalist societies. Some of this literature has also emphasised that age itself reflects and reproduces power relations and experiences of ageism prevalent in later life; such age relations are reflected in social, health, work, and cultural policies, in rural and urban environments. Furthermore, socioeconomic transformations over the last 40 years, including neoliberalism and austerity policies, new forms of family structures, and increasingly diverse migration trends, have reinforced inequalities in later life. Finally, the emergence of global disasters, such as, pandemics (e.g. Covid-19) and climate change, exacerbate the consequences of these socioeconomic dynamics on older people's lives.

In this symposium, we invite speakers to discuss how useful theories of inequality are in helping to understand and conceptualise later life precarity in the 21st century, using empirical data. Here, we define precarity broadly, as the position that some individuals have in the capitalist economic system, with consequences on their lived reality, but also, as a paradigm shift in ageing studies.

Chair

Marion Repetti

University of Applied Sciences and Arts Western Switzerland, Switzerland

Symposia

Discussant(s)

Bethany Simmonds

University of Portsmouth, United Kingdom

S. Paper 12.1

On the construct of precarity and its relation to health disparities

Associate Professor Elena Portacolone

Institute for Health & Aging, San Francisco, USA

Abstract: Can the construct of precarity be leveraged to identify and address health disparities? Health disparities is “a particular type of health difference that is closely linked with economic, social, or environmental disadvantage” according to the Healthy 2020 report to improve public health in the United States. We will draw from our research on living alone in older age to answer this question. In particular, we will reflect on four markers of precarity identified in the course of this research. The four markers are: 1) Uncertainty; 2) Limited access to appropriate services; 3) Importance of being independent, and 4) Cumulative pressures. We will analyze each marker to understand if these markers can also point to evidence of disparities due to older adults’ living arrangement (i.e., living alone versus living with others), as well as other characteristics based on these four markers and the principles of health disparities.

S. Paper 12.2

The Political Economy of Later Life: A Socio-Historical Analysis and Contemporary Theorisations

Dr Marion Repetti^{1,2}, Dr Bethany Simmonds³

¹School of Social Work, University of Applied Sciences and Arts of Western Switzerland, HES-SO Valais Wallis, Sierre, Switzerland. ²Affiliated to the Education Observatory, University of Lausanne, Lausanne, Switzerland. ³School of Education and Sociology, University of Portsmouth, Portsmouth, United Kingdom

Abstract: Ageing studies in Europe and North America have developed since the first half of the 20th century. Whilst early perspectives reflected functionalist theories, subsequent approaches have acknowledged the diversity of experiences in later life. The early 1980s ushered in a new trend, mostly driven by social gerontologists in the U.S. and the U.K. Using a Marxist political economic framework, these authors developed a theory which argued the capitalist system engineered the discrimination of older people, and made invisible their socioeconomic contributions. In addition, drawing on intersectionality theory, some literature argued that age is an inequality in itself and not a context in which social relations develop. Whilst the political economy perspective has gained ground amongst sociologists studying older age in the twenty-first century, acknowledging structuralist approaches can be challenging in the current context of post-structuralist discourse. In this paper, we draw on the socio-history of political economy studies of older age in Europe and America, and the challenges facing the sociology of ageing. We also discuss how theories, such as intersectionality, can help understand the production and accumulation of inequalities over the lifecourse, yet, also acknowledge the role of agency in older people’s lives. Finally, more generally, the paper discusses what political economy and intersectional theories can bring to the study of older people’s lives in Europe and North America in the twenty-first century.

Symposia

S. Paper 12.3

Older workers and ontological precarity: between precarious employment, precarious welfare and precarious households

Dr David Lain

Newcastle University, Newcastle, United Kingdom

Abstract: There has been a substantial increase in research examining what has been termed 'precarious employment'. In particular, Guy Standing's (2011) book, *The Precariat*, drew attention to what he saw as the precarious employment situation of older people (amongst other population groups), arguing that inadequate pension provision had led many to take new insecure jobs in later life. Standing conceptualised precarity as a labour outcome, related to individuals being in precarious employment. In this presentation we develop an alternative framework which explores 'ontological precarity' among older people, a form of anxiety caused by individuals feeling 'trapped' by the interaction between precariousness in different domains of their lives. It is argued that individuals worry about the long-term sustainability of their 'precarious employment'. This anxiety is enhanced by financial pressures to work longer in the context of diminishing financial support from a 'precarious welfare state' and from 'precarious households'. The theoretical framework is illustrated using case studies of three older female hospitality workers taken from the ESRC 'Uncertain Futures' project, after which we outline discuss its potential use in future research.

S. Paper 12.4

Inequality, Austerity and Precarity: Individual and Collective Agency in Later life

Professor Amanda Grenier¹, Professor Chris Phillipson²

¹University of Toronto, Toronto, Canada. ²The University of Manchester, Manchester, United Kingdom

Abstract: This paper addresses issues surrounding the growth of more precarious lives, placing these in the context of policies which have marginalised the language and narrative of the welfare state together with ideas of social inclusion and social security. In Europe and North America, the past two decades have seen the gradual erosion of welfare support as well as the social solidarity which gave it legitimacy. This has been underpinned by the growth of extreme forms of wealth and income inequality, as illustrated by Thomas Piketty and many others. New economic and social divisions are transforming the experience of later life, these intensified through the fall-out from the financial crisis of 2008, now interacting with an economic recession arising from the impact of COVID-19. The outcome will be a widening of inequalities, especially on the fault lines of gender, ethnicity and class. This paper examines the basis for a political economy of ageing, reconfigured for the new forms of precarity facing older people in the twenty-first century. The paper will examine some of the key areas driving a more precarious late life, these including: the changing role of the state, employment, care-giving, and pensions. The paper will demonstrate the extent to which the changes outlined are linked to neo-liberal policies with their emphasis on personal responsibility for managing transitions through the life course. The paper will conclude with an assessment of the possibility of new forms of solidarity emerging amongst groups facing acute forms of hardship and disadvantage in old age.

Symposia

Parallel Session 1K - Symposium (13) Hearing loss and ageing: implications for the brain as well as the ears

09:30 - 10:30 Thursday, 8th July, 2021

Track: Maintaining health and well-being in later life

Symposium Abstract: Hearing abilities decline with age. About 70% people in the UK over the age of 70 suffer from a diagnosed hearing loss. Hearing loss causes communication difficulties, which have a direct effect on quality of life. Hearing aids restore some hearing, but they are not very helpful for improving communication in noisy environments, which is one of the main problems experienced by people with hearing loss. Furthermore, hearing loss has profound implications for the brain as well as the ears: It can influence how the brain processes information and can also lead to depression, as hearing loss is associated with social withdrawal and loss of autonomy. Recent findings have also identified hearing loss as the main potentially modifiable risk factor for dementia. This symposium covers recent advances in our understanding of the nature of age-related hearing loss, and its impacts on communication, mental health, and cognitive function. In particular, we will consider the increased impact of social isolation during the recent pandemic for older people with hearing loss.

Chair

Christopher Plack

Lancaster University, United Kingdom

S. Paper 13.1

Hearing difficulties and social distancing in the COVID-19 pandemic: the impact on mental health and cognitive function

Dr Jenna Littlejohn¹, Professor Chris Plack^{1,2}

¹University of Manchester, Manchester, United Kingdom.

²University of Lancaster, Lancaster, United Kingdom

Abstract: The COVID-19 outbreak has caused worldwide disruption in community and social interactions. Shielding measures have meant that certain 'greater risk' groups, including people over the age of 70, are vulnerable to social isolation and loneliness. In the UK, 50% of people over the age of 70 live alone, and 70% have a diagnosed hearing loss. This means a large proportion of older people may have little or no social contact, and hearing difficulties may further affect wider communication.

The aim of this study was to determine whether hearing difficulties exacerbate the damaging effects of social distancing on isolation, and lead to accelerated mental health issues and cognitive dysfunction. Participants over the age of 70 were asked to complete a series of online questionnaires regarding hearing ability (SSQ12), socialisation (pre- and during-pandemic), loneliness (DJGLS), anxiety (GAD-7), depression (PHQ-9) and cognitive function (PROMIS v2) at baseline and again after 12 weeks.

Preliminary baseline results from the first 80 participants show a significant reduction in socialisation levels from pre-pandemic in this population. Hearing difficulties were significantly associated with greater levels of loneliness, depression and self-perceived cognitive dysfunction after controlling for age, gender, and level of education. Additionally, compared to pre-pandemic, people with hearing difficulties had increased odds of reporting worsened anxiety, depression, and memory during the COVID-19 pandemic. Follow-up data collection is ongoing to determine whether these effects are sustained in the longer term.

Symposia

S. Paper 13.2

Age-related hearing loss and its effects on communication

Professor Christopher Plack

Lancaster University, Lancaster, United Kingdom

Abstract: The main cause of hearing loss is ageing. Most people over the age of 70 have a clinical hearing loss, as diagnosed by an inability to hear low-intensity tones, particularly at high frequencies. This type of hearing impairment is caused mainly by loss or dysfunction of the hair cells in the inner ear. However, in addition to a loss of sensitivity to low-intensity tones, age-related hearing loss is also characterised by a reduction in the ability to separate or “hear out” the different components of sounds. This makes it harder to understand speech, particularly in background noise. Some of this inability is due to hair cell damage, but some is also due to loss or dysfunction of neurons in the auditory nerve and in the auditory regions of the brain. This neural loss is usually not revealed by standard clinical hearing tests. This presentation will provide examples from recent animal and human studies that reveal the impact of ageing on the neural processing of sounds. The implications of these results for our understanding of the communication difficulties faced by older people will be discussed.

S. Paper 13.3

The relationship between age-related hearing loss and brain function

Dr Kate Slade¹, Prof Chris Plack^{1,2}, Dr Helen Nuttall¹

¹Lancaster University, Lancaster, United Kingdom.

²University of Manchester, Manchester, United Kingdom

Abstract: As the population ages, specific health concerns including hearing loss, depression, social isolation, and dementia increase in prevalence. Many of these conditions may well exacerbate one another (Dawes et al., 2015. DOI: 10.1371/journal.pone.0119616). Importantly, hearing loss is internationally recognised as a potentially modifiable risk factor for dementia (Livingston et al., 2020. DOI: 10.1016/S0140-6736(20)30367-6).

Difficulty hearing, due to auditory system damage or interference by environmental noise, may drain limited brain resources, due to increased effort required for listening. Increased strain on resources may in turn impact brain function more generally, providing some explanation for the changes to brain anatomy and function observed in age-related hearing loss. However, the specific relationship between age-related hearing loss and brain function in ageing is still unclear. This presentation, drawing on themes from our recent review on the latter subject (Slade et al., 2020. DOI: 10.1016/j.tins.2020.07.005); will explore three leading hypotheses which may explain the observed relationship between hearing loss and cognitive decline. Namely: 1) The Common Cause Hypothesis; 2) The Information Degradation Hypothesis; and 3) The Sensory Deprivation Hypothesis (Uchida et al., 2019. DOI: 10.1016/j.neuron.2018.08.010). The presentation will also consider the potential role of mediating factors in the hearing loss-cognitive function relationship including reduced social interaction, isolation, and depression.

Crucially, the presentation will consider how the association between hearing and cognition may affect clinical assessments of cognitive and hearing abilities (for example, reliance on oral communication during cognitive evaluations), and how increased understanding of the hearing loss-cognitive function relationship could inform research and practice.

Symposia

S. Paper 13.4

The impact of the COVID-19 pandemic on socialisation, cognition, and hearing in younger and older adults in the UK

Dr Kate Slade¹, Dr Charlotte Pennington², Dr Robert Davies¹, Professor Christopher Plack¹, [Dr Helen Nuttall](#)¹

¹Lancaster University, Lancaster, United Kingdom. ²Aston University, Birmingham, United Kingdom

Abstract: COVID-19 has changed how we socialise: interactions have reduced and moved from in-person to virtual, and older adults have been disproportionately affected by these changes. Outside of a pandemic, social interaction is a protective factor for cognitive function and hearing acuity in older adults. The COVID-19 social hearing study investigates how socialisation changes linked to COVID-19 impact cognition and hearing in younger and older adults across a 12-month timeframe. The study additionally measures auditory engagement, loneliness, and depression, with the goal to determine which factors contribute to any observed changes in cognition and hearing by the end of study, and how this is affected by age. Here, we present preliminary data from months one to five from a sub-sample of participants (N=85). At baseline, data from older adults indicate poorer cognitive performance and hearing ability relative to younger adults. Older adults were less depressed and also slightly less lonely than younger adults at baseline. Up until five months into the study, most data remain reasonably stable across both age groups. Relative to month one, however, cognitive scores appear to increase significantly by month five in both age groups. This increase may reflect a degree of procedural or cognitive learning, potentially related to improved use of technology, or improved performance through monthly practising of the tasks. These preliminary data present encouraging indications of cognitive and sensory resilience across both age groups.

Parallel Session 2A - Symposium (14) Fostering social inclusion for older people across physical environments: messages from research in England and Wales

11:00 - 12:00 Thursday, 8th July, 2021

Track: Ageing and resilience in adversity

Symposium Abstract: The symposium explores social inclusion for older people. Studies draw on data gathered before and during the COVID-19 pandemic to understand how the physical environment can act to support or undermine social inclusion and can equally bolster and inhibit social connections during periods of isolation. Using data from the 'Promoting social inclusion in housing with care and support for older people (DICE)' study, Paul Willis (University of Bristol) discusses the social significance of communal spaces as sites of social connection. The study offers insights into how residents negotiate social dynamics between resident groups across communal spaces. Simon Evans (University of Worcester) presents findings from studies that explored the impact of outdoor activities for people with dementia. The presentation also reflects on the value of connecting with nature for older people, particularly during the pandemic. Karen West (University of Bristol) presents findings from the '[Bereavement Diaries](#)' project with Cruse Bereavement Care and The ExtraCare Charitable Trust, to explore residents' sense of death-related loss and loss over a physical community and its public and shared spaces. The presentation considers where community and supportive relationships can be found when community-building spaces are unavailable and social distancing precludes direct contact. Julie Round and colleagues (University of Surrey) present findings from The Transitions project which interviewed 25 residents across retirement villages in Southeast England about their transition to and within their village. Findings regarding the experience of adjusting to village life, and the psychosocial triggers and barriers experienced in making this transition will be discussed.

Chair

Ailsa Cameron

School for Policy Studies, University of Bristol, United Kingdom

Symposia

S. Paper 14.1

Connections with nature for people living with dementia

Dr Simon Evans

University of Worcester, Worcester, United Kingdom

Abstract: As humans we have an innate affiliation with nature and other forms of life. The biologist Edward Osborne Wilson proposed the Biophilia hypothesis over 30 years ago, asserting that human beings have an evolutionary drive to interact with nature that makes it essential to our psychological health. This approach has been developed by environmental psychologists such as Kaplan, who suggested that the natural environment addresses an innate need for contemplation, restoration and distraction. In recent years, a growing body of evidence has highlighted the salutogenic effects of nature in terms of improved quality of life and wellbeing. There has also been a growing interest in and evidence for the benefits of connecting with nature for people living with dementia including reduced stress, improved sleeping and eating patterns, better mood, reduced agitation, positive reminiscence and even enhanced cognition. The value of connecting with nature may be in part due to opportunities for relaxation and social interaction, increased independence, and maintaining specific outdoor hobbies and activities.

This presentation highlights evidence from two research projects that explored connections with nature for people living with dementia in residential care, extra care housing and community settings. Findings focus on the perceived impacts of natural connections, along with the facilitators and barriers to getting outdoors that people with dementia experience in care settings. It also reflects on the role of the great outdoors during the Covid pandemic.

S. Paper 14.2

The social inclusion of older residents in housing with care and support in England and Wales: the significance of communal spaces as environments of inclusion and exclusion.

Paul Willis¹, Ailsa Cameron¹, Alex Vickery¹, Jill Powell¹, Brian Beach², Randall Smith¹

¹School for Policy Studies, University of Bristol, Bristol, United Kingdom. ²International Longevity Centre UK, London, United Kingdom

Abstract: As an ageing society increases pressures across a wide portfolio of public policy including housing, there has been growing interest in the UK in different models of housing with care and support (HCS), such as independent living and extra-care schemes. The inclusion of diverse groups of older residents in housing communities is an important area to address given that the number of older people requiring care and support is predicted to rise and demands for housing with care provision are expected to increase. The Diversity in Care Environments (DICE) project is an ESRC-funded mixed-methods study seeking to examine social inclusion practices in HCS for older adults in England and Wales. In this paper, we present emerging qualitative themes on the social significance of communal spaces in schemes (e.g., external spaces such as atriums and gardens, internal spaces such as laundry facilities and activity rooms). Between 2019-20 we completed longitudinal semi-structured interviews with 18 residents (60-90+ years) and single semi-structured interviews with 43 residents (60-90+ years) from across eight schemes. Interviews were completed both pre- and during COVID-19 lockdowns. Interview data has been analysed thematically using the framework approach. Initial findings suggest communal spaces operate as both environments of inclusion and exclusion and are important sites where power dynamics between residents are exercised and contested. We discuss the significance of the findings for informing approaches for enhancing use of these spaces as valuable sites of social connection among residents and the role of housing staff in supporting use of these spaces.

Symposia

S. Paper 14.3

Compassionate Extra Care Communities in the Covid-19 pandemic

Prof Karen West, Dr Hannah Rumble

University of Bristol, Bristol, United Kingdom

Abstract: Covid-19 has without doubt been distressing for those who are currently bereaved and grieving, regardless of whether Covid-19 is the actual cause of death. We know anecdotally and from emerging academic research that people bereaved during Covid have been less likely to have visited loved ones and to have said goodbye prior to death. Here we draw on a small research project (the Bereavement Diaries project, a collaboration between the Universities of Bristol, Aston, Cruse Bereavement Care and the ExtraCare Charitable Trust), based on the diaries of people supporting the bereaved, some of whom peer bereavement supporters in Extra Care retirement villages and some of whom trained Cruse Bereavement volunteers. The project was an adjunct to a larger ongoing project on a programme of volunteer bereavement support in Extra Care retirement villages run by the ExtraCare Charitable Trust. The 43 diary entries we received between May and September 2020 offer some important, real-time insights into how grief and bereavement have been experienced during the pandemic and the everyday ways in which people have given, and continue to give, one another support. Particular focus will be on the extent to which the ongoing project of peer bereavement support in ExtraCare villages - part of an ongoing effort to enhance end of life wellbeing - has provided the infrastructure for resident peer support through the pandemic.

S. Paper 14.4

Exploring the Psychosocial Impact of Retirement Community Transitions: Development of an explanatory framework

Ms Julie Round¹, Dr Kimberley Smith¹, Professor Andrew King¹, Ms Alison Benzimra²

¹University of Surrey, Guildford, United Kingdom. ²The Whiteley Foundation, Walton on Thames, United Kingdom

Abstract: Moving into a retirement village is a key transition for older adults and – often – at a time when they are already dealing with or facing other critical life changes. This qualitative research project aims at bringing deep understanding of the psychosocial experience of moving into a retirement community. The study explores triggers and barriers to adjustment in the inter- and intrapersonal domains as well as considering broader social and community aspects across different retirement communities.

Twenty-five one-to-one semi-structured interviews were conducted remotely with older adults aged 65 or older living in a retirement community setting. Participants were recruited from three retirement communities located in the South-East of England between September and December 2020. Data will be analysed using thematic analysis.

Indicative themes include overcoming existential fears and (internalised & social) ageism; engaging coping strategies such as personal philosophies and strengths e.g. humour and courage; forms of self-transcendence such as awe in nature and spirituality. External adjustment themes include supportive relationships, practical signposting and strategies such as exercise, volunteering and learning – towards belonging and purpose.

These findings have implications for retirement communities looking to better understand how they can help people successfully adjust to living in a retirement community setting – and suggests that factors beyond the physical environment should be considered when helping residents make the transition to living in a retirement community.

Acknowledgements

The project is run by a team at the University of Surrey and The Whiteley Foundation for Ageing Well and is funded by the Pargiter Trust

Symposia

Parallel Session 2B - Symposium (15) Opportunities to Leverage Technology to Mitigate Social Isolation During Times of COVID-19 and beyond

11:00 - 12:00 Thursday, 8th July, 2021

Track: Changing connections and relationships

Symposium Abstract: The Covid-19 pandemic has accelerated recognition, uptake, and sustained use of technology to support older persons across the care continuum facilitate social connection and engagement with others. This symposium will discuss three presentations surrounding the use of technology in the lives of older adults during times of COVID-19 and beyond. Presentation 1 will present preliminary findings from a UK Covid-19 specific project exploring how dating apps are used to enhance and maintain social, emotional, and intimate connections. Presentation 2 will examine opportunities for technologies to be leveraged in the long-term care setting to improve social engagement and mitigate social isolation in rural and northern communities. Finally, Presentation 3 will explore co-design experiences of older people working with a multi-disciplinary team within the context of digitally excluded older people. This presentation will explore and present the benefits and challenges of conducting co-production in a bid to identify appropriate digital solutions for an ageing population.

This symposium emphasizes the value of employing a life course theory to technology and aging research and in critically reflecting on the barriers, challenges and impacts technology has on citizens who are socially isolated especially during times of COVID-19.

We will present a series of recommendations for moving the narrative(s) forward, discussing directions for future inter- and multidisciplinary research.

Presenters:

1. Dr Hannah R. Marston (OU, UK)
2. Dr Shannon Freeman (UNBC, CA)
3. Dr Deborah J. Morgan (Swansea University, UK)

Chair

Hannah Marston

The Open University, United Kingdom

S. Paper 15.1

Dating in the 21st Century and a Pandemic: How do Dating Apps Bridge Social, Emotional, and Sexual Connections?

Dr Hannah R. Marston¹, Dr Sarah Earle¹, Dr Robin Hadley¹, Dr David M. Lee²

¹The Open University, Milton Keynes, United Kingdom.

²Manchester Metropolitan University, Manchester, United Kingdom

Abstract: Dating apps have grown increasingly popular in the last 10 years. Research has focused on the use of Tinder and Grindr dating apps (Marston, et al. 2020), with little attention paid to older adults. A recent scoping review (Marston et al. 2020) examined how dating apps facilitate a range of connections for two specific cohorts in society: older adults and young people with life-limiting/threatening health conditions.

The pandemic has afforded citizens to use dating apps as a way of building social, emotional, sexual and intimate connections (Marston & Morgan, 2020) and this presentation will introduce preliminary data from a mixed methods pilot study focusing on the use of dating apps during the Covid-19 pandemic.

An online survey rolled out in December 2020 explores dating app user's behaviours, technology use, experience of loneliness, health, and wellbeing. Qualitative data will be undertaken in the first quarter of 2021 comprising of 10 interviews, with adults aged 50+ years and 18-49 years.

This inter- and multi- disciplinary research project contributes to the fields of gerontology, gerontechnology, loneliness, (sexual) health and wellbeing, industry and to policy across national and international landscapes.

References:

1. Marston, H.R., Niles-Yokum, K., Earle, S., Gomez, B. & Lee, D.M. (2020). OK Cupid, Stop Bumbling around Match Me Tinder: Using Dating Apps Across the Life Course. *Gerontology and Geriatric Medicine*. <https://doi.org/10.1177/2333721420947498>
2. Marston, H.R., & Morgan, D.J. (2020). Lockdown 2.0: Gunpowder Plot, Digital Christmas, Sex and Relationships. *Ageing Issues*, 2nd November 2020, British Society of Gerontology.

Symposia

S. Paper 15.2

Leveraging Technologies to Promote Social Connections in Long-Term Care Facilities during COVID-19

Dr Shannon Freeman, Mrs. Aderonke Agboji, Ms. Alanna Koopmans

University of Northern British Columbia, Prince George, Canada

Abstract: During the COVID-19 pandemic many Long-Term Care Facilities (LTCF) implemented strict visitor restrictions which in turn resulted in increased reports of loneliness and social isolation by older adult residents. In response, many LTCFs sought to better leverage technology solutions to enhance social connections. However, information regarding safe, effective, and feasible solutions to support social connectedness through digital solutions specific to the LTCF setting was lacking. Therefore, to address this gap in knowledge of our health systems partners, our team undertook a scoping review to examine existing virtual technology solutions, apps, and platforms which promote social connectedness for those living in a LTCF. Five databases including PubMed, CINAHL EBSCO, PsychINFO EBSCO, Embase OVIDSP, and Web of Science ISI were searched. To screen, chart and summarize the data, DistillerSR was used.

In this presentation, we will provide an overview of a range of technologies which promote health and wellbeing for those in LTCFs. We will discuss how the breadth of technologies identified vary in feasibility and sustainability for use in smaller scale facilities common in rural areas. Notably, the majority of the technologies found rely on stable high speed internet connectivity which remains a barrier in many remote and northern communities. Next steps in research should focus upon opportunities to tailor digital solutions specifically for those residing in smaller sized LTCFs to better support rapid deployment to promote meaningful connections and help mitigate social isolation and loneliness.

S. Paper 15.3

Adjusting Technology for an Ageing Population: Co-producing technological solutions with older people.

Dr Deborah Morgan¹, Dr Hannah Marston², Dr Gemma Wilson³, Dr Carol Maddock¹, Dr Elizabeth Jones¹, Ms Jessica Gates³, Mr Aelwyn Williams¹

¹Swansea University, Swansea, United Kingdom. ²Open University, Milton Keynes, United Kingdom. ³Northumbria University, Newcastle, United Kingdom

Abstract: Covid19 has meant that many social groups and activities have gone online. This has had implications for older people who are not digitally confident or who lack basic digital skills. With so many activities and services moving online, in response to the pandemic, inequities in access to technology have amplified the risk of loneliness and social isolation among digitally excluded older people. Key barriers to engagement with digital technologies include cost, lack of support, technology being perceived as complicated or it's not for 'people like me (French, Quinn & Yates, 2019). Therefore, there is an urgent need to develop solutions from the bottom up, designing with and for older people.

The presentation will draw on data and experiences of older people and the multidisciplinary team involved in a seedcorn project funded by Cherish DE which aims to co-design with digitally excluded older people an affordable digital solution to develop and build digital skills and confidence. The presentation will focus on the benefits and challenges of co-producing solutions for an ageing population and the lessons learnt from doing this remotely.

Symposia

Parallel Session 2D - Symposium (16) Experiences and Impacts of the COVID-19 Outbreak for Older Adults living in Spain and the United Kingdom

11:00 - 12:00 Thursday, 8th July, 2021

Track: Impact of and response to Covid-19: lessons for future pandemics

Symposium Abstract: The COVID-19 pandemic is an unprecedented event that has resulted in significant changes to all aspects of social life. This symposium presents findings from a longitudinal, mixed methods study exploring the impact of the COVID-19 outbreak for adults aged 70 years and over living in Spain and the United Kingdom. Project participants include those living with and without health conditions considered high risk in relation to COVID-19. At five time points over a twelve month period, this study has captured data about the impact of the experience on older people's daily lives and wellbeing.

The symposium will provide an introduction to the project, including methods and participant cohorts. The project team will present key findings from the study, addressing the impact of COVID-19 measures on older adults' frailty, quality of life, social connectedness, and perception of environmental age-friendliness over the course of the pandemic explored in this research.

Findings from this project provide an in-depth understanding of how participants have experienced this period of time, including the impact on their health, wellbeing, social networks and social isolation – along with individual coping strategies and resources. This study contributes to knowledge about the impacts of national lockdowns, social isolation and distancing measures on the longer term resilience and wellbeing of older people, which can contribute to future planning for similar crises.

Chair

Sandra Varey

Lancaster University, United Kingdom

S. Paper 16.1

Experiences and Impacts of the COVID-19 Outbreak for Older Adults living in the United Kingdom

Dr Sandra Varey, Professor Carol Holland, Dr Ian Garner
Lancaster University, Lancaster, United Kingdom

Abstract: Since March 2020, a combination of national and regional restrictions aimed at controlling the spread of COVID-19 have resulted in significant changes to the way in which people live their lives. Concerned about the impact of these measures on older people, in April 2020 a team of researchers from Lancaster University and the University of Valencia embarked on a longitudinal mixed methods study to explore and understand this.

This paper presents key qualitative findings from the project, exploring the impact of the COVID-19 outbreak for adults aged 70 years and over living in the UK. The study captured data about the impact of the COVID-19 outbreak and restrictions on older people's daily lives and wellbeing over a twelve month period. Qualitative telephone interviews were carried out with participants at five time points. Interviews were audio recorded and transcribed in full, with detailed thematic analyses undertaken with the interview transcripts and researcher notes. Forty participants took part in the qualitative phase of the study, including those living with and without health conditions considered high risk in relation to COVID-19. Within the high risk cohort, participant health conditions include cancer, COPD and heart failure.

This paper presents key findings from the qualitative data, providing an in-depth understanding of how participants experienced the first twelve months of COVID-19 restrictions. Along with the impact on people's health, wellbeing, and social networks, the data illuminate the individual coping strategies and resources drawn on over the course of the pandemic explored in this research.

Symposia

S. Paper 16.2

Changes in health and wellbeing among older adults over the duration of the COVID-19 pandemic: a longitudinal study

Mr Calum Marr¹, Professor Carol Holland¹, Dr Ian Garner¹, Dr Esperanza Navarro-Pardo², Dr Sandra Varey¹

¹Lancaster University, Lancaster, United Kingdom.

²University of Valencia, Valencia, Spain

Abstract: Few studies have examined the long-term effects of the COVID-19 lockdown on the health and wellbeing of older adults. Understanding the impact of lockdown on older adults is especially important given that older adults are at greater risk from the disease, and therefore have been subject to greater restrictions. We recruited a sample of 70 older adults aged 70 and over (50 from the UK and 20 from Spain). Telephone assessments were conducted at five time points between Spring 2020 and Spring 2021, and participants completed measures of frailty, quality of life, perceptions of environmental age-friendliness, loneliness and social isolation. Participants also reported current levels of physical and social activity. Analyses explored how outcomes changed over these five time points, and whether these changes differed according to country or whether participants were deemed to be 'high risk' (i.e. at greater risk from COVID due to pre-existing conditions). We also examined whether higher levels of physical or social activity might be associated with more positive health/wellbeing outcomes over time. Preliminary findings from the first four assessments indicated that frailty gradually decreased in severity as restrictions were eased following the strict lockdown at the start of the pandemic. There was also some evidence to suggest that changes in frailty were associated with physical activity level during lockdown. These findings provide a greater insight into the long-term impacts of lockdown, and how any negative effects might be mitigated in future.

S. Paper 16.3

Effects of the Covid-19 Lockdown on Health and Well-Being over a 12 month period in adults aged 70 and over in two countries, Spain and England: an introduction

Professor Carol Holland¹, Dr Ian Garner¹, Dr Esperanza Navarro-Pardo², Mr Calum Marr¹, Dr Sandra Varey¹

¹Lancaster University, Lancaster, United Kingdom.

²University of Valencia, Valencia, Spain

Abstract: In March 2020, the UK Government announced that people in vulnerable groups, including adults aged 70 and over, should begin 'shielding' themselves from any social contact for a minimum twelve weeks. Objections were expressed by a number of parties, including the BSG, concerned that although risk of hospitalisation and mortality increases with age and co-morbidities, age specific measures could lead to deterioration in health for older people. Government policy then focused on implementation of strict social distancing for all ages. This paper introduces the methods and background to a mixed-methods longitudinal study beginning during the first lockdown in April 2020, which aimed to understand health and wellbeing impacts of the lockdown and following changing restrictions on people aged over 70 in order to inform future strategies. Specific analyses on different aspects of the study will be presented in the linked papers in this symposium. We followed 70 volunteers aged 70-85 years over five time points. We compared impacts for people shielding with high-risk health conditions, with impacts for those not in this group, and compared the 50 people in the English sample with 20 from Spain, using the same set of telephone-based measures of frailty and health, quality of life, social isolation and loneliness, coping strategies and support, and health and social care use. 20 participants from the English sample were also interviewed at each phase to develop understanding of the experiences and concerns of the older people at each stage of the different lockdowns and restrictions during this period.

Symposia

S. Paper 16.4

Evaluating the effects of Lockdown on Physical and Mental Health in Older Adults living in England during the COVID-19 Pandemic.

Dr Ian Garner, Professor Carol Holland, Mr Calum Marr, Dr Sandra Varey

Lancaster University, Lancaster, United Kingdom

Abstract: Since the emergence of COVID-19, over two million people have died from the virus. In an attempt to reduce the spread of the virus, governments instructed people to stay at home. Initially, this produced desirable results, with new cases and deaths caused by COVID-19 falling substantially. However, as lockdown restrictions eased, the number of new cases and deaths increased, causing countries to once again go into lockdown. Yet the effects of lockdown on mental and physical health are not fully understood, especially so in older adults, many of whom may be vulnerable to rapid health deterioration and also consequent longer recovery time. This study quantitatively analyses the effects of lockdown on the physical and mental health of older adults living in England.

Of the 50 participants who took part in the study, 45 participants (33 female, 12 male, and aged 70-85) completed assessments at Times 3 and 4. This analysis examines two time points: when lockdown restrictions had eased (August/September), and again when the second UK lockdown was implemented.

Analyses show a significant increase in feelings of loneliness and social isolation, and a significant decrease in availability of coping resources, perceptions of environmental age-friendliness. There was, however, no significant change in frailty severity, or exercise frequency.

Despite possessing the experience of managing through the first lockdown. Participants displayed a significant decrease in factors associated with mental health, suggesting that current measures implemented (such as the one exercise activity per day) are insufficient to maintain mental health of older adults.

S. Paper 16.5

Not all anti-COVID measures are healthy: Effects on the health and frailty of Spanish older people in lockdown

PhD Esperanza Navarro-Pardo¹, Professor Carol Holland², PhD Sandra Varey², PhD Ian Garner²

¹Universitat de Valencia, Valencia, Spain. ²Lancaster University, Lancaster, United Kingdom

Abstract: A longitudinal study on health, well-being and cognitive status in a sample of British and Spanish older adults was carried out to assess the impact of government anti-Covid-19 measures on frailty and health during lockdown (2020); four evaluations were carried out during this period (April - December 2020). This paper presents the results of the Spanish sample, which included 20 older adults between 70 and 85 years of age (14 women and 6 men) from various socio-economic levels. The impact on frailty was assessed using items from the Tilburg Frailty Indicator (TFI) and from the COM-FI (Garner, Holland & Burgess, 2020) to create a multidimensional accumulation of deficits frailty profile that could be used on the phone; other variables (quality of life, self-perception of health, loneliness, social isolation, coping) were also assessed.

Descriptive and comparative analyses were developed to detect changes between the beginning and the end of the study. There was evidence of a worsening state of frailty of the sample and significant differences were also found in variables related to social relationships but no significant differences were found in self-perceived health status, quality of life, or cognitive status, maybe due to sample size. These results will allow us to better evaluate the actions to be implemented in situations of lockdown and/or social isolation in relation to older adults, including the objective of maintaining their physical, cognitive and psychological health. Further studies with larger samples would be necessary.

Symposia

Parallel Session 2G - Symposium (17) Socio-Gerontechnology – key themes, future agendas

11:00 - 12:00 Thursday, 8th July, 2021

Track: Health innovation and technology

Symposium Abstract: Digital devices, information technologies and mediated systems of communication increasingly shape the social worlds of people in later life. At the same time designers and engineers are increasingly developing technologies specifically targeted at older people. However, these two areas of academic study – Science and Technology Studies (STS) and Age Studies – still predominately remain separate.

This symposium aims to bring together academics and researchers from the fields of Science and Technology Studies (STS) and Age Studies to explore and advance a cross-pollination of ideas, theorizing, research, methodologies and highlight areas for future theoretical and empirical development. In particular, the symposium highlights the notion of Socio-Gerontechnology, as a means to explore the co-constitution of ageing and digital technologies from a social science perspective, in the context of the use of technology and of design.

The symposium takes the form of a series of presentations by authors, based around chapters in the Routledge book, *Socio-Gerontechnology – Interdisciplinary critical studies of ageing and technology*, edited by Alexander Peine, Barb Marshall, Wendy Martin and Louis Neven. Each presenter will highlight key themes within Socio-Gerontechnology, explore the possibilities and limitations of interconnecting Science and Technology Studies (STS) and Age Studies, and consider future agendas.

Chair

Alexander Peine

Utrecht University, Netherlands

S. Paper 17.1 Socio-Gerontechnology – Interdisciplinary critical studies of ageing and technology

Dr. Alexander Peine¹, Prof. Barbara L. Marshall², Dr. Wendy Martin³, Dr. Louis Neven⁴

¹Utrecht University, Utrecht, Netherlands. ²Trent University, Peterborough, Canada. ³Brunel University, London, United Kingdom. ⁴Avans University of Applied Sciences, Breda, Netherlands

Abstract: Demographic ageing and the rapid advancement of technology – especially digital technologies – are two trends that are drivers of profound societal change. It is becoming increasingly clear that these developments are also interrelated. Digital devices, information technologies and mediated systems of communication increasingly shape the social worlds of people in later life. Digital technologies are also increasingly designed specifically with older people in mind. However, so far there has been a divide between social analyses of ageing on the one hand, and engineering and design-based approaches on the other. In this presentation, we argue that overcoming this divide is crucial to grapple with the fact that ageing is increasingly constituted together with digital and non-digital technologies. We start with an analysis of the divide itself and demonstrate how it has limited the activist potential of the social sciences in relation to well-funded innovation and technology programs targeted at older people. We then draw on recent scholarship at the intersection of Age Studies and Science and Technology Studies (STS) and identify common theoretical lines suggested by this emerging interdisciplinary literature. More specifically, we develop the notion of the co-constitution of ageing and technology to highlight how ageing and technology come into being together, and how they thus need to be understood as relational. We then explore the value of this perspective for future studies on ageing and technology (a field that we propose to term Socio-gerontechnology) together with a number of propositions how to engage productively with practitioners of innovation and technology.

Symposia

S. Paper 17.2 Co-designing technologies for care: building spaces of co-habitation

Dr Helen Manchester

University of Bristol, Bristol, United Kingdom

Abstract: The provision of care for older people is of increasing global concern to governments, practitioners and publics but there is very little agreement on appropriate responses, arguably essential given the complex nature of the problem. This paper utilises theory in Science and technology studies to suggest that work on the issue is one that requires cross sectoral and interdisciplinary gatherings (co-habitation) around care as a key 'matter of concern' in our society (Latour, 2005).

Through interrogation of a co-design process enacted during a 22 month interdisciplinary project funded by the Arts and Humanities Research Council this paper explores how interdisciplinary, cross sectoral design gatherings might build spaces for co-habitation (Latour, 2005) between social and cultural gerontologists, designers of technologies, and lay publics concerned about care. Designing these spaces of co-habitation required us to not only consider who is to be concerned, but also what is to be considered and how we might represent these issues and support new spaces of participation (Latour, 2005).

The research/design approach put forward in this paper is focussed less on 'doing' design but more on co-habitation or co-fabrication (Whatmore and Hinchcliffe, 2006). This asks gerontologists, social scientists and designers to shift how we engage with the world of care, to worry less about 'matters of fact' and producing a singular account, or simply a critique of care, but rather to engage in collective, relational work, with people, things and space, in order to re-think and re-configure futures of adult social care together.

S. Paper 17.3 Age Matters: senior exclusions, designing consultations and a municipal action plan for age-(un)friendly cities

Dr. Kim Sawchuk, Constance Lafontaine

Concordia University, Montreal, Canada

Abstract: This presentation examines the communication and digital media strategies implemented in the public consultation for Montreal's 2018 Age Friendly City (AFC) policy. We analyze the age scripts (Neven 2010) that became embedded in the design of the city's consultation, which influenced the scope for action by citizens. To solicit the participation of older adults the city prioritized digital communications. Drawing from cultural studies (Slack, 2006) and science and technologies studies (Akrich, 1997) we analyze these scripts and the intersecting contingencies at play in this consultation. How were the goals of the WHO's AFC policy on communications incorporated (or not) into the design of Montreal's consultation process? What lessons can be gleaned from this specific case? What has changed in light of COVID-19?

Deploying participatory action research in collaboration with community organizations, we challenge the gap between the goals of the AFC agenda and the processes implemented in Montreal. In particular, we focus on the urgent need for social gerontology to consider how the digitization of information and services impacts and risks further marginalizing and excluding the experiences and political interests of older adults who face multiple barriers to participation, a situation put into relief during the pandemic. It highlights how the specificities of age and aging provided a critical perspective on the city's unquestioned techno-optimism, faith in digital access and belief that on-line communications easily and immediately replace face-to-face citizen engagements to respond to the challenges facing older adults in a digitizing world.

Symposia

Parallel Session 2H - Symposium (18) Understanding and exploring past, present and future housing choices in the 21st century among diverse ageing populations

11:00 - 12:00 Thursday, 8th July, 2021

Track: Housing for ageing in the 21st century

Symposium Abstract: The ageing population is recognized to be a very diverse group, ranging from economically powerful babyboomers, to over-75 people with a migration background and centenarians with possible high care and support needs. Planning for the housing situation of this diverse ageing population is a key challenge in many European countries. The home environment can be considered as the most significant place when ageing, as it offers a place of support but also the link between one's dwelling, wellbeing and identity. Although many people express the wish to age in place, others decide to relocate. Moving towards more traditional housing options such as an apartment (with or without care services) or residential care facilities happens most often, but in past decennia interest has raised for more innovative housing formulas (e.g. cohousing). To increase our understanding of housing choices made in later life and to contribute to knowledge on housing-expectations, experiences and preferences of older people, three linked studies explore older people's past, present and future housing choices. First, Schaff and colleagues present research on how older people who have already anticipated their housing situation for later life, reflect on their decision-making process and current home experience. Second, Phlix and colleagues explore ageing migrants' sense of home. A third paper by Smetcoren and colleagues discusses expectations and experiences of older adults, involved in developing a cohousing project. Finally, Ann Petermans will summarize and link the main messages of these papers, followed by critical questions to discuss interactively with the audience.

Chair

An-Sofie Smetcoren

Vrije Universiteit Brussel, Belgium

Discussant(s)

Ann Petermans

Hasselt University, Belgium

S. Paper 18.1

Anticipating ageing: interviews on home experiences in Belgium

Gwendoline Schaff^{1,2}, Catherine Elsen¹, Ann Petermans², Fabienne Courtejoie¹, Jan Vanrie²

¹University of Liège, Liège, Belgium. ²Hasselt University, Hasselt, Belgium

Abstract: Although a majority of older people favour "ageing in place", few of them effectively anticipate the ageing process and the associated changes this can bring about in their daily lives and experiences of home. In parallel, research now also shows a strong need to diversify housing possibilities for ageing. In that regard, one might ask what alternatives are being developed today to allow older people to age well in their homes and how these are experienced.

To gain insights on this issue, we conducted interviews with (future) older people who have already undertaken housing initiatives by moving/transforming their dwelling with the aim of "ageing well at home", in Wallonia (Belgium). In particular, we sought to understand how the inhabitant-habitat relationship evolved over time and which elements of the environment had an impact on people's well-being. Three temporalities were explored:

- *The past:* how were the inhabitants experiencing the home before the move/transformation and what key factors were involved in their decision-making process towards investing in a renewed home?
- *The present:* which aspects of the house and the direct environment contribute to their well-being and which do not? Has the Covid-19 situation changed their perception and experience of their home?
- *The future:* where do they see themselves living in the last years of their lives and what components do they consider essential for this period?

Several factors associated to the well-being of the inhabitants in their environment are highlighted and allow further reflections on alternative housing for older people.

Symposia

S. Paper 18.2

The (im)material home: Exploring ageing migrants' sense of home.

Micheline Phlix, Ann Petermans, Jan Vanrie

Hasselt University, Hasselt, Belgium

Abstract: Given the preference of most older people to age in place, the home and its immediate environment are considered important places in later life. In addition to this, the ageing population is becoming more diverse. In Belgium, the share of older people of foreign origin has increased considerably in recent years however, not much is known about their sense of home. Research has shown that sense of home is not necessarily limited to one place. As many older people of foreign origin sustain connections with their country of origin, research on their relations-to-home could cast a unique light on the concept of 'home'. 21 older adults of foreign origin aged 60 and above were interviewed to explore their sense of home. Participants live in Limburg, a province known for its rich labour migration history. Photo-elicitation was used as it has proven to be valuable in people's narratives concerning their built environment, but also to grasp more intangible aspects of home. Most participants expressed they wanted to remain at home as long as possible in which the material environment can be supportive (e.g. bungalow) or disruptive (e.g. bathtub). However, the immaterial dimension of home (e.g. social relations, memories) was considered of great importance to be able to achieve a sense of home within the given material environment. The study uncovers the importance of both the material and immaterial dimension of home, which should be considered coherent rather than opposed to each other.

S. Paper 18.3

Care and living in community: expectations and experiences of involvement in an intergenerational co-housing project

An-Sofie Smetcoren, Thomas Dawance, Michael Ryckwaert, Nele Aernouts, Liesbeth De Donder

Vrije Universiteit Brussel, Brussels, Belgium

Abstract: 'Care and living in community'(CALICO) is an Urban Innovative Action project funded by the European Union's European Regional Development Fund. The CALICO-project aims to develop a caring environment within an innovative affordable housing scheme for households with a vulnerable position on the housing market (older adults, single women, people with migration background) in Brussels. This cohousing project will accommodate 34 families and will be community-led, intergenerational, multicultural and gender-sensitive. The study provides insights in motivations of future residents for moving and how they experience the co-creative approach used to realise the project. Data was collected amongst future residents using survey (N=24) and individual qualitative interviews (N=10). Results indicate various main reasons for moving. Most residents highly value the opportunity it gives them to access housing of good quality. However, participant also show great interest in the proposed cohousing formula and in developing new caring relationships with other residents. At the level of co-creation several inhabitants' assemblies have been set up, which today allow above all the future inhabitants to get to know each other. These assemblies make it possible to create a common reference base and are considered necessary to establish the conviviality between inhabitants as well as their capacity to manage the common dimensions of the project once on site. However, the capacity of these assemblies to gradually become a decision-making body also poses challenges. The study discusses the role of citizen participation in leading change and how meaningful co-creation can lead to innovative housing for later life.

Symposia

Parallel Session 2I - Symposium (19) Comparative perspectives on the impact of COVID-19 on older people: Community studies from the UK and Switzerland

11:00 - 12:00 Thursday, 8th July, 2021

Track: Impact of and response to Covid-19: lessons for future pandemics

Symposium Abstract: The papers in this symposium provide insights into the impact of COVID-19 on older people, drawing on qualitative studies conducted in the UK and Switzerland. In the first paper, Chris Phillipson provides an overview of research conducted by the Manchester Urban Ageing Research Group, studying the impact of social distancing and its impact on the everyday lives of older people. The paper reviews the background to the study, the longitudinal methodology adopted, and the challenges posed by the investigation. Luciana Lang then presents findings from the research, examining the strategies adopted in response to social distancing measures. Drawing on interviews with 102 older people, she examines the practices adopted, these including: re-inventing social relationships; experiences of community; adapting routines; and engaging with green spaces. Sophie Yarker then examines the impact of inequalities on older people identifying as South Asian, African and Caribbean. The findings demonstrate the challenges older people from minority ethnic groups have faced, along with the varied sources of support draw upon within the community. Finally, Elisa Fella-Favre, Marion Repetti and Alexandre Santos Mella present research from a study of older people living in a rural-alpine area in Switzerland, examining experiences in the April-May 2020 semi-lock down amongst those who already faced precarity prior to the pandemic. The study analyses the extent technology can be used as a means of maintaining social inclusion within the challenging context posed by COVID-19.

Chair

Chris Phillipson

The University of Manchester, United Kingdom

S. Paper 19.1

Older people and COVID-19: A qualitative longitudinal study in Greater Manchester, UK

Professor Chris Phillipson, Dr Luciana Lang, Dr Sophie Yarker, Dr. Patty Doran, Dr Tine Buffel

The University of Manchester, Manchester, United Kingdom

Abstract: This paper reports on a study to examine the impact of social distancing measures on older people living in low income communities in Greater Manchester. The study adopted a longitudinal methodology, with three interviews amongst different groups of older people (n=102) over 2020/21. The first stage of the research involved telephone interviews with community stakeholders/gatekeepers, who were asked about the type of support provided to older people, how this had changed with COVID-19, the impact of social distancing both upon their work, and that of older people they support, and any resourcing issues experienced by their organisation. The second stage of the research involved telephone interviews with older people identified through the community stakeholders/ gatekeepers. The interviews explored questions relating to: how older people living in, or belonging to, marginalised communities experienced 'social distancing'? How this varied within and between different groups (age, gender, social class, health, ethnicity, sexuality) and neighbourhoods? What capacities and resources (individual or community level) people drew upon when negotiating the experience of social distancing? How did social distancing affect older people's everyday lives, relationships and support networks? The paper reviews some of the challenges in undertaking COVID-19 research, the advantages and disadvantages of the methodology adopted, and plans for dissemination.

Symposia

S. Paper 19.2

Navigating the new normal: Technology, faith, green spaces and support networks as adaptive practices in times of social distancing

Dr Luciana Lang

University of Manchester, Manchester, United Kingdom

Abstract: The restrictions on social contact, imposed during the first Covid-related lockdown in the UK in March 2020, made a significant impact on the lives of older people, especially those living on their own. Evidence from research amongst older people living in low-income communities in Greater Manchester suggested a drop in motivation amongst particular groups, pointing to the need to look at the 'tool kits' that people developed when placed in extraordinary circumstances. Being able to maintain social connectivity through the period of social distancing was vital for people's wellbeing, but was dependent on factors such as mobility, technology and group membership. Drawing on interviews with 102 older people from four ethnic/identity groups, this paper focuses on the practices that helped offset intersecting disadvantages and enhance individual capacity to cope with social distancing. Participants were interviewed three times over a ten-month period, revealing a decline in motivation and an acute change in mood for a majority. By June 2020, isolation had started to take its toll along with decreasing levels of confidence. In this scenario, the role of technology, faith, green spaces and support networks became essential for maintaining social connections and navigating the 'new normal'. This paper will show how participants responded to social distancing by re-inventing social relationships, adapting faith-related practices, providing support, and engaging with green spaces.

S. Paper 19.3

Experiences of lockdown for older minority ethnic adults living in Greater Manchester.

Dr Sophie Yarker

University of Manchester, Manchester, United Kingdom

Abstract: The Covid-19 pandemic has highlighted deep and longstanding health inequalities in the UK especially between different ethnic groups. Research from the ONS (2020) shows that, when taking age into account, Black males were 4.2 times more likely to die from a COVID-19-related death than White males. Bangladeshi and Pakistani males were 1.8 times more likely to die from COVID-19 than white males, after other pre-existing factors had been accounted for, and females from those ethnic groups were 1.6 times more likely to die from the virus than their White counterparts. Despite these inequalities being stark within existing data little is currently known however about the social and wellbeing impacts on older people from minority ethnic groups. This paper seeks to address this gap by presenting findings from qualitative research conducted between May 2020 and March 2021 on the impacts of lockdown on older people living in Greater Manchester. The sample included older people identifying as South Asian, African and Caribbean and these participants were asked to reflect on how the pandemic, and resulting social distancing measures, had impacted on their daily lives in a series of telephone interviews conducted at various stages of the pandemic. The result, presented in this paper, is a unique insight into the particular experiences of the pandemic of older people from minority ethnic groups. It demonstrates both the challenges older people from different minority ethnic groups have faced along with the difference sources of support some have been able to draw upon and access.

Symposia

S. Paper 19.4

Experiences of the COVID-19 pandemic among older people facing precarity in rural-alpine Switzerland

Elisa Fellay-Favre^{1,2}, Dr Marion Repetti^{1,3}, Alexandre Santos Mella¹

¹School of Social Work, University of Applied Sciences and Arts of Western Switzerland, HES-SO Valais-Wallis, Sierre, Switzerland. ²Chair of Social Work and Social Policies, University of Fribourg, Fribourg, Switzerland. ³Affiliated to the Education Observatory, University of Lausanne, Lausanne, Switzerland

Abstract: In Switzerland, facing the COVID-19 pandemic, the federal authorities have developed policies such as social distancing and semi-lockdowns aimed at controlling the development of the disease. These policies have particularly targeted people aged 65 and over, based on the argument that the risk of developing severe COVID-19 increases with age. This paper draws on a qualitative research project aimed at understanding how older people facing precarity and living in a rural-alpine region of Switzerland have experienced the first semi-lockdown, which took place between the end of March and early June 2020. We address the following questions: How did these older persons experience the semi-lockdown? What were the specific issues that they faced? To what extent and how were technologies of communication a means for them to maintain social inclusion in this context? We collected our data through 19 interviews. Fourteen respondents were older people aged 66 to 90 years old (ten women and four men) who already faced precarity before the pandemic. Our respondents all lived in a rural and alpine area of Switzerland at the time of the study. In addition, we interviewed five social and health workers who work with this kind of population. Our major results show that, first, anti-pandemic policies have increased social isolation among our interviewees. Second, for this specific group, these policies have reinforced digital poverty and the digital divide between older people facing precarity and those who are socially included.

Parallel Session 2J - Symposium (20) The rhythm of ageing beyond representation: developments from human geography

11:00 - 12:00 Thursday, 8th July, 2021

Track: Innovation in theories, methods and critical perspectives

Symposium Abstract: Critical gerontology is truly interdisciplinary taking on board the complexity of everyday life, the diversity of ageing selves, and the enveloping life course perspective (Bernard & Scharf, 2007; Wellin, 2018). While on-going theoretical developments may extend sociological and psychological concepts on ageing, this symposium focuses on significant progress from human geography where methodologies often explore multiple dimensions of the research context, taking heed of sensorial and emergent aspects of ageing.

Through adopting a dynamic understanding of ageing, more-than-representational theory potentially helps us to better articulate the rhythm, momentum and vitality of human existence; placing the movement towards later life within its own everyday context (Andrews & Grenier 2019).

This symposium brings together papers that illuminate this approach. First, we engage with more-than-representational theoretical perspectives to research practice. Specifically affective atmospheres, practice, performance and encounter - the importance of the 'event' - when thinking about how we age. This approach is then used to consider how we live alongside conditions such as dementia; how connected community collectivities can be viewed, and finally how capturing life course events can begin to expand our understanding of person in place.

What are the methodological innovations that this approach can bring to gerontology? How do they complement more established modes of research and analysis? If, as Félix Guattari asserts in his theory of transversality, emotion and meaning can be held within the institution and space, how does this translate into our interpretive strategies and practice as researchers?

Chair

Sheila Peace

Symposia

Open University, United Kingdom

Discussant(s)

Aelwyn Williams

Swansea University, United Kingdom

Amy Barron

University of Manchester, United Kingdom

S. Paper 20.1 More-than-representational approaches to the life-course

Dr Amy Barron

The University of Manchester, Manchester, United Kingdom

Abstract: This paper proposes bringing together work on the life-course and more-than-representational theories as one way to extend and complement current approaches to ageing research. Drawing on ethnographic research with older people in Manchester, UK, I argue that research on ageing should better foreground those less-tangible, temporal dynamics of experience which are often overlooked. Understanding the life-course through more-than-representational theories complicates any clear sense of chronological time, illuminating the ways in which the life-course mediates the present in unexpected and expected ways. Specifically, I foreground differentiated capacities to affect and be affected across places, times and individual life-courses. This framing not only disrupts reductive narratives of older age, but also shows how more-than-representational theories are important to thinking about temporality. Through accounts developed with older people, rather than on them, I demonstrate the ways in which the identities and stories encountered are mediated by the research context. Future research on ageing must foreground the multiplicities and practices of older peoples' embodied experience whilst keeping sight of the performative effects of representations. There is a need to more-thoroughly explore the overlaps between more-than-representational theories and the life-course to further develop relational geographies of ageing.

S. Paper 20.2 Enhancing agency amongst older research participants: walking interviews, performance and lifecourse narratives

Dr Aled Singleton

Swansea University, Swansea, United Kingdom

Abstract: This paper contributes to age-friendly cities and communities; specifically the challenge of enhancing the agency of older people as participants in neighbourhood-level research articulated by Buffel, Philipson & Thomese (2019). My PhD project used walking interviews to explore the relationship between space, memories and emotional attachment as we get older. The case study focuses on one settlement with an ageing population - where a quarter of residents are aged 65+. The work involved an artist helping to curate performance from narratives (May, 2007) and life stories.

The first stage of interviews researched the lifecourse (Wellin, 2018) by eliciting accounts about the house, street and wider neighbourhood. Following thematic analysis, artist Marega Palser helped to produce a short outdoor performance and public walk. We used public space as Jonathan Darling (2016, p. 241) advocates, namely: "...for the cultivation of ethical sensibilities which value moments of generosity and open engagements with difference." The event was playful and more people volunteered to support the project.

From the second round of interviews we created a performance centred around narratives from the late 1950s to the early 1970s - a time when the research participants [mean age 70] became young adults. The performance provided what Flybjerg (2001) terms a "proper context" with three elements, namely: (1) immediate meaning from *small* such as new technologies; (2) the *local* from experiences of home ownership; and (3) *significance* from the larger background of industrial development.

This presentation includes a three minute video from the second public event and performance <https://vimeo.com/373090583/059213acbe>.

Symposia

S. Paper 20.3

Experience of space and place: life course transitions

Emeritus Professor Sheila Peace

The Open University, Milton Keynes, United Kingdom

Abstract: As an environmental gerontologist who values multi-disciplinarity and aims to bring a critical approach to their work focusing on space and place within setting, I am also someone whose first discipline lies in social/human geography. My aim is to Chair a session that enables geographical gerontologists to introduce different theoretical perspectives to social gerontologists.

Many theoretical areas overlap in our understanding of space, place and ageing. First, I discuss: positivist approaches to spatial science; political economy; humanistic methods; social constructionism; and the two areas of relational theory and non-representational theory which may be new to social gerontologists. To this I add issues of 'successful ageing - disengagement and activity theories, alongside person-environment docility; institutionalisation; and the concept of 'habitus'.

From these varied approaches, I consider a question that formed part of my own inaugural work 'How can a life course perspective contribute to gerontological theory concerning person-environment interaction? Here I recognise the relationship to relational and non-representational theory as I look backwards and forwards in time to capture aspects of self, space and place through an auto-ethnographic approach as well as through longitudinal retrospective accounts from two participants taken from the earlier 'Environment and Identity' (2006). To conclude the symposium we will debate how we learn from different approaches.

S. Paper 20.4

'Do fast feet apples have community shaking?': getting caught up in the liveliness of a dementia friendly community.

Mr Aelwyn Williams

Swansea University, Swansea, United Kingdom

Abstract: Dementia is an umbrella term for an ever-increasing number of different conditions, one which has become in many ways become resistant to conceptualization, if not 'rhizomic' in scope, connecting a multiplicity of places, spaces, disciplines, practices, and professional and personal identities. It has also become an object of governmental interest and policy in a time of austerity, through the rise of 'dementia friendly communities', for example. The realities and idiosyncrasies of cognitive changes for those affected, including carers, often means coming to terms with a range of emotions, states and atmospheres containing grief, exhaustion, confusion, even anger and indignation - but also solidarity, acceptance and joy.

This paper is primarily based on several years' research with a community-based project - a Meeting Centre - involving people affected by dementia in a town in South East Wales. Taking heed of some non-representational practices and theories, and taking a line of flight which connects ways of being alongside dementia with the resources offered through the work of avant-garde writers from the 50s and 60s, it will explore how 'dementia', 'friendliness' and 'community' have come into being in the lives of people there. It will give an account of the joy of disco tea-dances, the peace of sound-baths, the pleasure of cricket teas, paying attention to these events and 'the new potentialities for being, doing and thinking that [such] events may bring forth' (Anderson and Harrison 2010).

Symposia

Parallel Session 2K - Symposium (21) The Healthy Ageing Challenge: Social, Behavioural and Design research and innovation to stimulate an ageing market.

11:00 - 12:00 Thursday, 8th July,
2021

Track: Maintaining health and well- being in later life

Symposium Abstract: The Healthy Ageing Social, Behavioural and Design Research Programme (SBDRP) is part of the [ISCF Healthy Ageing Challenge](#) portfolio of activities. This Programme contributes to the Challenge mission to 'enable people to remain active, productive, independent and socially connected across generations for as long as possible while narrowing the gap between the richest and poorest' by enhancing our understanding of the aspirations, preferences and needs of the ageing population.

The symposium introduces the 7 research projects in the research programme which will help inform innovators and critically engage with business to support innovation for healthy ageing markets. This includes social enterprises, to design, and develop products, services, systems and business models that will be adopted at scale in order to support people as they age.

The symposium will consist of 4 papers which will:

- Describe the portfolio of activities delivered under the Healthy Ageing Challenge, with academic research playing a crucial role in understanding the key issues facing, and opportunities offered by, an ageing population, and the ways in which innovative ideas, products, services and systems can support healthy ageing (Paper 1).
- Highlight two distinctive elements of the Healthy Ageing Challenge (business engagement and co designing with people with lived experience) through the presentation of the funded projects in the programme (Papers 2 & 3).

- Provide a brief overview of the landscape of ageing research including various programmes of research funded through ESRC/UKRI since 1980 and the future direction of travel drawing on the R&D Roadmap (Paper 4)

Chair

Judith Phillips

University of Stirling, United Kingdom

S. Paper 21.1

The Healthy Ageing Challenge

Prof Judith Phillips¹, Mr George MacGinnis²

¹University of Stirling, Stirling, United Kingdom. ²UKRI, Swindon, United Kingdom

Abstract: Introducing the Healthy Ageing Challenge paper 1 (presented by the Challenge Director George MacGinnis) will describe the portfolio of activities delivered under the Challenge. These include the Social, Behavioural and Design Research Programme (SBDRP) alongside Trailblazers (projects that can demonstrate readiness to implement innovations at scale and include for example, projects concentrating on the home environment); Catalysts (potential innovations and innovators working with Zinc); and Investment Partnerships (providing private and public funding for business research and development of product and service innovations in healthy ageing). These initiatives link together through the Community of Practice, a learning community which brings together the organizations and researchers funded by the Healthy Ageing Challenge and others interested in this market to collaborate and share expertise, learning and insights from both UKRI-funded projects and wider work.

This paper will include a brief guide to the crucial role academic research plays in understanding the key issues facing, and opportunities offered by, an ageing population, and the ways in which innovative ideas, products, services, and systems can support healthy ageing.

Symposia

S. Paper 21.2

Working with Business: co-producing research and innovation

Dr Huw Vasey¹, Prof Judith Phillips², Dr Joanne Connell³

¹UKRI, Swindon, United Kingdom. ²University of Stirling, Stirling, United Kingdom. ³University of Exeter, Exeter, United Kingdom

Abstract: A distinctive element of all projects in the Social Behavioural and Design Research programme under the Healthy Ageing Challenge is their constructive engagement with business and social enterprise. Working with business is increasingly seen as vital if we are to provide an evidence base for initiatives to support healthy ageing. We will provide an overview of the types of business engagement across the SBD RP. One of the project teams (working with nature based outdoor enterprises) will share their experiences of how they co designed and initiated their research with various business partners and how they plan to work with them through the three years of funding. The paper will also highlight various ESRC initiatives to stimulate academic – business relationship building.

S. Paper 21.3

Co-designing and producing research with people with lived experience

Dr Elaine Douglas, Prof. Judith Phillips, Professor Alison Bowes, Professor Alison Bowes

University of Stirling, Stirling, United Kingdom

Abstract: Meaningful, creative, and innovative forms of engagement with older people and people as they age is fundamental in designing research on later life and healthy ageing. One project in the Social Behavioural and Design Research programme (researching scalable and sustainable design improvements to homes that provide support for healthy cognitive ageing), will discuss how they meaningfully engage with older people throughout the life of the project, including the co-design of research, future collaborations, and general engagement, as well as governance. Projects will highlight the challenges facing them in developing this approach during the Covid 19 pandemic (and mitigations put in place), including how they will engage with people from disadvantaged, disabled and diverse backgrounds, and those who were digitally excluded.

S. Paper 21.4

Future directions for research in healthy ageing

Prof Judith Phillips

University of Stirling, Stirling, United Kingdom

Abstract: The final paper in the Healthy Ageing Challenge symposium will bring together the themes of the 4 papers and provide a brief overview of the landscape of ageing research including various programmes of research funded through ESRC/UKRI since 1980 and the future direction of travel drawing on the UK R&D Roadmap, with its emphasis on place and innovation. The paper will discuss wider developments in the arena of Healthy Ageing (for example, APPG for Longevity & Business For Health; R&D Roadmap and the 'Build Back Better - Plan for Growth') that will potentially shape future research and programmes of work.

Symposia

Parallel Session 3B - Symposium (22) Developing a gendered perspective on exclusion from social relations in later life

16:30 - 17:30 Thursday, 8th July,
2021

Track: Changing connections and relationships

Symposium Abstract: As populations age, the social connectedness and social exclusion of older adults are being increasingly recognised as key determinants of health and wellbeing in later life. This symposium explores the possibilities of applying a gender perspective in unpacking lived experiences of changing connections and relationships in the life course of socially excluded older adults. The first paper from Feliciano Villar and colleagues presents cross-country analysis to identify the barriers to social connectivity across the lives of older men and women. The second paper from Celia Sheridan and Kieran Walsh shifts the focus to spatial and life-course considerations. It explores the differential impact of relocation and migration on social connectivity across older men and women's lives. In doing so, they illustrate the intersection between residential life histories and gendered pathways to exclusion from social relations, with a particular focus on the influence of marriage and work-related relocation. The third paper from Marcela Petrová Kafková and Lucie Vidovičová focuses on older men living alone in the Czech Republic. It discusses exclusion from social relations as a highly contextualised issue highlighting the role of gender in experiencing various dimensions of exclusion from social relations. Finally, Lucie Galčanová Batista and colleagues focus on doing empirical ageing research in pandemic times in their paper. They provide insights into the ethically important moments and practical dilemmas occurring when researching with and about older women and men who are at risk of social exclusion.

Chair

Anna Urbaniak

University of Vienna, Austria

S. Paper 22.1

Lonely older men – gendered construction and experience of loneliness

Marcela Petrová Kafková, Lucie Vidovičová

Faculty of Social Studies Masaryk University, Brno, Czech Republic

Abstract: The social networks are essentially gender-based. The idea of loneliness appeared to be incompatible with “traditional” masculinity, the typical picture of loneliness in old age evokes the idea of a widow - frail older women. Old age and loneliness thus together disrupt the hegemonic ideal of masculinity. Loneliness is a subjective feeling and part of a broader concept of social exclusion from social relations, which involves a lack of access to high-quality interpersonal relationships, adequate social networks and sufficient social opportunities.

Embedded in the constructionist grounded theory approach, we analyze data from 15 qualitative interviews with older men (age 65+ years) living in the Czech Republic, focusing on the exclusion from social relations as a highly contextualized issue. Our participants are living alone, they are widowers, divorced or never-married men. We closely explore the relationship between biographical events, the intensity of social relations in later life within and beyond the nuclear family and the subjective feelings of loneliness and solitude. We argue that various dimensions of exclusion from social relations must be taken into account as people deal with its impacts both on situational (feeling of loneliness of one person vary in different spatial, temporal and social contexts) as well as a long-term basis (when loneliness is linked e.g. to social marginalization) and gender represents an essential source of perspective. Our paper is part of the GENPATH project (TJ03000002) “A life course perspective on the GENDERed PATHways of Social exclusion in later life, and its consequences for health and wellbeing”.

Symposia

S. Paper 22.2

Doing ageing research in COVID-19 pandemic times and insights from reflexive ethics

PhD [Lucie Galčanová Batista](#)¹, PhD Anna Urbaniak², PhD Anna Wanka³

¹Masaryk University, Brno, Czech Republic. ²University of Vienna, Vienna, Austria. ³Goethe University Frankfurt am Main, Frankfurt am Main, Germany

Abstract: The measures applied worldwide to tame the COVID-19 pandemic impacted empirical social scientific ageing research. Social distancing rules, aims to protect the vulnerable via isolation, but also the resistance of many older people to be vulnerabilised played a role in how social science research based on unmediated contact between people was organized in 2020 and beyond. In our view, the pandemic situation brought a fragmentation, fluidity, ambiguity and high level of uncertainty to the research planning and process. This paper introduces our experience with doing qualitative research with older adults. It reflects how the research was discussed, re-designed, and practised within two international research teams working in the European context. We use the perspective of reflexive ethics to identify and interpret 'ethically important moments' in the research process and to consider/ponder over the question on how and under what conditions can we carry on with empirical research without putting our participants and ourselves at risk.

S. Paper 22.3

The differential impact of relocation and migration on social connectivity across the lives of older men and women: an Irish experience

Ms [Celia Sheridan](#), Professor Kieran Walsh

National University of Ireland, Galway, Galway, Ireland

Abstract: While there is an established literature recognising the need to investigate the life-course factors in the construction of exclusion from social relations and gender pathways, how those pathways intersect with residential and relocation histories has not been sufficiently explored. Illuminating this intersection is important in understanding major turning points in people's social connection, and in Ireland this has particular significance given that within-country relocation and migration is a significant feature of older people's residential life trajectories. This paper aims to explore the impact of relocation and migration on the social connectivity across the lives of older men and women. The analysis draws on 30 interviews with older men and women (aged 65 and over), as a part of a wider GENPATH study into exclusion from social relations. In-depth semi-structured qualitative interviews included mapping out changes to the participants' social relations over their life-course using the *Convoy Model of Social Relations*. There is preliminary evidence to suggest that relocation and migration has differential effects on the social relations of men and women over their life-course. It was usual for women to move into new communities upon marriage, and they also experienced relocation that was often linked to their husband's working-life trajectories, with initial findings pointing to the intersection between residential life histories and gendered pathways to exclusion from social relations. These findings are discussed with reference to the international literature, and the development of local policy and practice interventions.

Symposia

S. Paper 22.4 Gendered barriers to social connectivity in later life: a qualitative approach.

Feliciano Villar¹, Rodrigo Serrat², Montserrat Celdrán²

¹Univesity of Barcelona, Barcelona, Spain. ²University of Barcelona, Barcelona, Spain

Abstract: Exclusion from social relationships in later life is a complex and dynamic process, in part because of the history of interactions of the person with the environment throughout the life course. In this study we aimed at exploring the factors that older people at risk of exclusion from social relations perceive as contributing to their present situation and as preventing them from having a richer or more satisfactory social network.

Thirty older men and women aged 65 year and older living in Spain, participated in the study. An open-ended interview was applied, exploring, among others, barriers to social connectivity. Answers were content-analyzed, combining an inductive approach and concepts coming from socio-ecological models.

Results showed a great variety of gendered barriers to social connectivity. Health-related resources (including mobility difficulties) were central for many participants, but a history of poor close social relationships (including childlessness, or social transitions such as widowhood) and some environmental-difficulties (including accessibility aspects, or lack of social services) were also mentioned as important barriers. Our results underlined the key role of a life-span approach and subjective assessments to provide and implement person-centered interventions to effectively address exclusion from social relations in later life.

Parallel Session 3F - Symposium (23) Caring and Compassionate Communities in Belgium: a focus on their development and evaluation

16:30 - 17:30 Thursday, 8th July,
2021

Track: Health and social care
practices, innovations and futures

Symposium Abstract: Caring and Compassionate Communities aim to support older adults to age (well) in place and to help ensure quality of life of their citizens by encouraging people to provide help and support within their community. A caring community is one that is resilient to change throughout the life cycle, where residents know and help each other, where there are opportunities to meet, and where care is guaranteed and continuity of care is provided. Whereas a compassionate community focuses specifically on supporting and improving the circumstances and experiences of people facing serious illness, caregiving, dying and loss.

This symposium brings together empirical research and future research avenues on the various stages of the development and evaluation of caring and compassionate communities. The guiding question of this symposium is how to mobilise these communities, drive social change and describe and understand the experienced outcomes and mechanisms of these communities.

Liesbeth De Donder starts with a study using a multi-method design to examine the outcomes, mechanisms and context on 34 Caring Communities. Octavia Kint follows with how to find common grounds and on the role of co-creative research in caring communities for all generations.

Sarah Dury continues with how to develop an interdisciplinary conceptualization and an interdisciplinary framework to research compassionate communities. Hanne Bakelants closes the symposium with her research on the process development of a particular Compassionate Community: Compassionate University. Goal is to understand how different stakeholders build a shared understanding of the aims and objectives of the Compassionate University.

Symposia

Chair

Sarah Dury

Vrije Universiteit Brussel, Belgium

Discussant(s)

Tine Buffel

The University of Manchester, United Kingdom

S. Paper 23.1

Developing Caring Communities: Lessons learned from 34 projects in Dutch-speaking Belgium

Prof. Liesbeth De Donder¹, Dra. Sylvia Hoens¹, Dra. Octavia Kint¹, Dra. Hannelore Stegen^{1,2}, Prof. An-Sofie Smetcoren¹

¹Vrije Universiteit Brussel (VUB), Brussels, Belgium.

²FWO, Brussels, Belgium

Abstract: Fund Dr. Daniël De Coninck supported 34 local projects working on Caring Communities in 2018 and 2019. A multi-method design was used in order to examine their outcomes, mechanisms and context. First, all projects answered an online survey measuring specific project characteristics, perceived outcomes and elements crucial for realizing the project. In addition, projects participated with the project coordinator and a volunteer/community member in 1 of the 10 focus groups, using participant-generated photo-elicitation to describe and understand the experienced outcomes and mechanisms of the project.

First, results indicate a rich diversity of projects grouped under the umbrella of "caring communities" in terms of drivers (context-based vs. population-based), methods (connecting-spaces, connecting-persons, connecting-activities) and target groups (delineation in terms of age, socio-economic status, disabilities, migration-background). Second, analyses revealed 6 types of perceived outcomes: changed perceptions, increased encounters, connections, collaborations, innovation and well-being. Third, findings give support to three key-challenges in the process: the challenge of 'meeting halfway' between top-down and bottom-up, the need for a different type of health and social care worker, and the balance between focus and overview. The discussion will critically reflect on the findings from the perspective of sustainability and systemic change.

S. Paper 23.2

Developing Caring Communities: Lessons learned from co-creative research projects in Brussels

Octavia Kint, Sylvia Hoens, An-Sofie Smetcoren, Liesbeth De Donder

Vrije Universiteit Brussel, Brussels, Belgium

Abstract: This contribution is part of the MaN'Aige project (2019-2022), a co-creative research on caring communities in two 'hybrid' neighbourhoods located in the center of Brussels. The large presence of non-residential buildings and users (e.g. commuters, passersby,...) shape the central research question on how to develop a caring community together with such neighbourhood users. The MaN'Aige project is part of Innoviris' Co-Create program (Brussels Regional funding institution for Research and Innovation), which provides financial support for co-creative research projects focusing on urban resilience in Brussels.

This paper aims to explore how different Co-Create projects understand and implement co-creative research. Based on individual interviews (n=9) and 1 focusgroup (n=8) with project coordinators and researchers, results reveal how respondents (1) give meaning to, (2) perceive the process and (3) shape "co-creative research". First, co-creative research is seen as a means to transform "reality", bringing voice and power back to citizens and research back into the public space. Second, results reveal respondents' perception on the co-creative research process, distinct from other types of research and characterized by changing levels of participation at different stages. Third, results focus on underlying tensions regarding ownership and participation and possible ingredients (defined as the 5 Ts: Trust, Treasure, Trace, Translate and Tools) of co-creative research when put into practice in communities. To conclude, the discussion highlights implications for future research, policy and practice, reflecting on the ways in which they can find common grounds and on the role of co-creative research in caring communities for all generations.

Symposia

S. Paper 23.3

Towards an interdisciplinary research framework on Compassionate Communities: the case of Compassionate Communities Centre of Expertise (COCO) in Belgium

dr sarah dury¹, dr. steven Vanderstichelen¹, prof. Luc Deliens^{1,2}, prof. Kenneth Chambaere², prof. Joachim Cohen¹, prof. Liesbeth De Donder¹, On behalf of COCO consortium¹

¹Vrije Universiteit Brussel, Brussels, Belgium. ²Ghent University, Ghent, Belgium

Abstract: Compassionate Communities and Compassionate Cities are emerging as a promising type of caring community, that treats experiences of serious illness, caregiving, death, dying and loss as explicit social challenges. In this model, community members and stakeholders from all sectors of government, the private sector and civil society actively work together to improve the circumstances and experiences of people facing serious illness, caregiving, death, dying and loss. Using such a complex and multidimensional model as the Compassionate Community model requires an interdisciplinary approach that has hitherto been lacking in the academic literature. In Belgium, the Compassionate Communities Centre of Expertise (COCO) was launched in 2020. 8 research groups, from 4 faculties and academic disciplines united in an interdisciplinary research program to investigate compassionate communities. The aim of this paper is threefold: 1) to develop an interdisciplinary conceptualization of compassionate communities, 2) to develop an interdisciplinary framework to research compassionate communities, 3) to outline key interdisciplinary research avenues and establish a research agenda on Compassionate Communities for the next years.

S. Paper 23.4

Compassionate Community Development: A Fundamental Process Evaluation

Hanne Bakelants, Sarah Dury, Liesbeth De Donder, Joachim Cohen, Filip Vandroogenbroeck, Kenneth Chambaere, Luc Deliens, Steven Vanderstichelen

Vrije Universiteit Brussel, Brussels, Belgium

Abstract: The 'Compassionate Communities' model has been put forward as a new paradigm for community-based palliative care for older people and people with serious illness. Compassionate Communities recognize that care for one another during difficult moments is not a task solely for health and social services but concerns the whole community. Educational institutions, such as universities, nowadays also recognize their role as communities in providing integrated responses to experiences with death, loss and end-of-life care. In Belgium, the Vrije Universiteit Brussel (VUB) declared itself Europe's first Compassionate University. The VUB wants to become a university community where everyone encourages, facilitates and supports each other during life's most testing moments and experiences, especially those pertaining serious illness, death, dying and loss.

Despite an increasing number of initiatives to develop Compassionate Communities, a thorough, scientific description and evaluation of the transition process towards a compassionate community has yet to be done. Therefore, the purpose of the study is to develop a fundamental understanding of how different stakeholders build a shared understanding of the aims and objectives of the Compassionate University project. Approximately 10 to 15 semi-structured interviews will be conducted between February and March 2021 to collect data regarding participants experiences with integrating the compassionate community model into practice. The analysis of the interview transcripts will follow a deductive, concept driven coding, and inductive, data-driven coding approach, using a coding scheme based on the Normalization Process Theory framework's core constructs and their corresponding components. Preliminary results will be presented.

Symposia

Parallel Session 3G - Symposium (24) Digital Transformation: a new era for Technology Enabled Care. But what role for research?

16:30 - 17:30 Thursday, 8th July,
2021

Track: Health innovation and technology

Symposium Abstract: A new generation of Technology Enabled Care Services (TECS) encompassing 'smart' technologies such as artificial intelligence, machine learning and social robotics, lie at the heart of the UK policy vision for TECS for older adults with assisted living needs. The policy momentum behind TECS focuses on their rapid integration into services, based on assumptions that they can enable higher quality care for an ageing population at significantly lower cost. Yet despite continued investment in policy, research and deployment, uptake of TEC has largely stagnated, while large scale trials of TECs have indicated that they frequently do not meet their therapeutic goals. A growing body of research suggests that these failures are not so much associated with the technologies per se, but instead result from how they are being delivered. Specifically, this work argues that TECS needs to move beyond a policy focus on 'personalisation' and instead return to their original, person-centred goals.

Bringing together recent research within and outside gerontology, this symposium poses questions about the current development of TECS and makes the case for system change, based on the promotion of person-centred and co-produced approaches to TECS. This symposium explores and critiques policy and practice efforts that have led to sub-optimal outcomes for TECS, and suggests what research priorities may remedy these problems. Specifically we will discuss how, by placing the co-production of solutions with individual users at their heart, research can reset the agenda for TECS.

Chair

Grant Gibson
University of Stirling, United Kingdom

Discussant(s)

Paul Freddolino
Michigan State University, USA

S. Paper 24.1

Co-production in the design, introduction and use of assistive technology: A review of the evidence

Dr Steve Rolfe, Dr Jane Robertson, Angela Pusram, Dr Vikki McCall, Dr Grant Gibson

University of Stirling, Stirling, United Kingdom

Abstract: Despite the obvious potential of assistive technology to improve quality of life for older people, major randomised controlled studies such as the Whole Systems Demonstrator have provided limited evidence of positive impact. One argument to explain such findings is that implementation involves complex interactions between technology, services and people. Hence, it will only be effective where older people, caregivers and other stakeholders are involved in the processes of identifying needs, selecting technology and adapting it in use. However, there is limited guidance on how to take a co-production approach in this area. In order to provide a starting point for research and practice around the implementation of assistive technology, we undertook a scoping review of the evidence published within the last decade. We summarise the key themes emerging from this literature to identify what works in the co-production of assistive technology with older people, and present some recommendations for further research and improvements to practice.

Symposia

S. Paper 24.2

Setting the scene: why telecare needs new research questions

Dr John Woolham

King's College London, London, United Kingdom

Abstract: This presentation will describe the way evidence and policy have diverged in relation to Technology Enabled Care, and consider some of the implications this may have for local authority telecare services in the UK.

It will begin by describing the emergence of telecare and early projects that used it to support mostly older people with social care needs, referring to early attempts to shape policy, which eventually led to the Department of Health 'Building Telecare' guidance in 2006. Following this guidance the Department of Health commissioned research to improve evidential support for the wider roll-out of technology. The presentation will then briefly describe key findings from what became known as the 'Whole System Demonstrator', and the impact this study had. In particular, it will draw on research carried out several years later to determine what knowledge local authority telecare lead managers had about this study. This research also looked at how local authorities are using telecare at the present time, and key findings from this part of the study will also be described. The presentation will argue that, the divergence of policy and evidence has hindered any reappraisal of telecare's impact and effectiveness, and that new research is needed to try to align policy and practice more closely, optimise the use of technology and improve outcomes for people who use it.

S. Paper 24.3

Telecare at a Crossroads: Which way forward for research?

Professor Paul Freddolino

Michigan State University, East Lansing Michigan, USA.
London School of Economics, London, United Kingdom

Abstract: The earlier presentations have identified several research areas that can inform future efforts to unravel the contradiction between policy and practice commitments to ALTs in the face of limited supportive evidence of efficacy. In this final presentation we present the findings of two recent online surveys of UK based academic experts, comprising people drawn from a range of professional disciplines including medicine, social care, occupational therapy and social policy. Respondents were asked in the first survey to identify potential researchable questions that might inform the debate about the potential role of telecare in services for older adults. These responses were organized thematically, and in the second survey respondents were asked to prioritize three of these themes. Respondents suggested that research into assessment and matching technology to need, ethical issues, and co-production of technology with end users should be priority areas for future research. Together with the information presented earlier in this symposium the findings of this study can contribute to development of new directions for telecare research, and future strategic funding decisions in this field.

Symposia

S. Paper 24.4

Symposium Title: Digital Transformation: A new era for technology enabled care, but what role for research?

Ms Sarah Daniels¹, Ms Pippa Kirby²

¹Imperial College London, UKDRI Care Research & Technology and Centre, London, United Kingdom.

²Imperial College Healthcare NHS Trust, London, United Kingdom

Abstract: There are around 850,000 people living with dementia (PLwD) in the UK, with this figure projected to rise significantly over the coming decades. An important goal for many of this population is to remain living independently as long as possible. Smart technology in the form of in-home sensors has been used to detect and monitor people's activities of daily living, and through constant monitoring, artificial intelligence can detect patterns and predict behaviour. There is evidence that this can help identify disease progression, new risks or care needs, and prevent hospital admissions.

With rapid advances in in-home technology and digitisation of the health service, a central theme of the NHS Long Term Plan (2019), the technology on offer to patients is going to increase in prevalence and complexity. The newly established UK Dementia Research Institute (UKDRI) Care Research and Technology Centre, Imperial College London, is working collaboratively with PLWD, and family carers, local authorities, and NHS providers to develop just such technology for the creation of so-called 'Healthy Homes'.

Whilst this technology brings exciting advances to dementia care, there are ethical and practical issues associated with this type of intervention relating to privacy, autonomy, dignity, safety, and trust.

This presentation will consider how emerging smart home technologies will impact the way care is delivered in the future with a reference to research design and research translation.

Parallel Session 3I - Symposium (25) Caring during the COVID-19 pandemic and unheard voices: Perspectives from Germany

16:30 - 17:30 Thursday, 8th July, 2021

Track: Impact of and response to Covid-19: lessons for future pandemics

Symposium Abstract: Since the start of the COVID-19 pandemic, ageing researchers around the world have criticised ageism and age discrimination in government measures to control the spread of the virus. These have become prevalent in different ways: Firstly, medical experts internationally describe older adults as a high-risk group due to higher mortality rates among COVID-19 patients aged 70 years and older. Secondly, governments around the world have taken efforts to protect older adults in general, and those living in nursing homes in particular, by restricting physical contact. These measures, however, have differed significantly between countries with various results: In the UK, for example, the risk of death in nursing/care homes was 13 times higher than in German care homes during the first wave of the pandemic. Thirdly, the public focus on older people has had consequences for images of ageing that severely affect intergenerational relations in both positive and negative ways. Despite the plethora of research that has emerged since the onset of the pandemic, the voices of those most affected - people needing and providing care - have largely been neglected. This lacuna is partly due to difficulties in collecting data on these groups due to contact restrictions. The symposium provides insights into rare data collected during the first wave of the pandemic in Germany. Papers discuss experiences of living and working in care settings, maintenance of contact between persons living in and outside of care settings, as well as media representations of persons living in care settings during the pandemic.

Chair

Frank Oswald

Goethe University Frankfurt am Main, Germany

Discussant(s)

Thomas Scharf

Newcastle University, United Kingdom

Symposia

S. Paper 25.1

On the outside looking in? How older adults maintain relationships beyond institutional boundaries during the Covid-19 pandemic in Germany

Dr.in Anna Wanka

Goethe University, Frankfurt am Main, Germany

Abstract: Contact restrictions imposed throughout the covid-19 pandemic have particularly affected older adults living in institutional care settings. By aiming to limit personal contacts between people living in- and outside of nursing homes, (intergenerational) relations have been severely limited.

This paper takes on the perspective of older adults living outside of care settings and reconstructs the manifold and often creative practices in which they maintain relationships to their older friends, relatives and partners living inside of care settings. It draws on findings from the VERSUS Corona project and presents findings from 15 qualitative problem-centred interviews conducted between March and August 2020 with persons aged 60 years and older living outside of care settings in Germany.

Results show that, with the progression of the pandemic, both older adults and care workers have become more and more creative in facilitating safe contact between the in- and the outside of care settings, for example with the invention of 'cuddle curtains' and 'cuddle rooms', visitor containers, the provisioning of digital devices to care home residents, communicating over balconies, or simply sending letters by post. But they also show how ageist stereotypes are inscribed into these auxiliary structures, as contacts might be permitted between close relatives, but not friends, or hugs might be enabled, but sexual intercourse is not.

From these findings we can conclude that the in- and outside of institutional care settings are not two separate entities, but refer to strongly entangled life worlds that are connected through a diversity of practices.

S. Paper 25.2

IM/AGE-19: Participation und voices of older people in political talk shows in Germany

Dr. Janina Myrczik¹, Prof. Dr. Annette Franke², Prof. Dr. Clemens Schwender³, Prof. Dr. Eva-Marie Kessler¹

¹Medical School Berlin, Berlin, Germany. ²Evangelische Hochschule Ludwigsburg, Ludwigsburg, Germany.

³Filmuniversität Babelsberg Konrad Wolf, Potsdam, Germany

Abstract: Background: The older population is currently experiencing disproportionately greater adverse effects from the pandemic in some domains of life, including more severe health complications, higher mortality, concerns about disruptions to their daily routines and access to care, and difficulty in adapting to technologies like telemedicine. Against this background, IM/AGE-19 analyzes political talk shows in Germany to investigate whether older people are invited to participate in public debates about COVID-19, and which roles they take on.

Methods: A total of 84 episodes of political talk shows in German television with high audience ratings on issues of COVID-19 screened during 2020 were quantitatively analyzed. We investigated how many guests aged 65+ were invited and what fields, i.e. politics, medicine, they were invited for. A qualitative frame analysis further analyzed the arguments guests adopted.

Results: Our preliminary findings show that guests 65+ were rarely invited (10.6%) in political talk shows about Covid-19, with only three guests (0.7%) aged 80+. Guests 65+ hardly used their voice to speak for their age group, irrespective of the role they were invited for., people in retirement were rarely included. Within the age group 65+ women were underrepresented (9.4%) reflecting a double jeopardy in age and gender.

Discussion: Older people's voices, particularly those of vulnerable older people outside of active professional life, are rarely heard in German political talk shows. More participation and inclusion of older people in debates on COVID-19 would contribute to dealing with the pandemic more efficiently.

Symposia

S. Paper 25.3

Doing time in care homes: Insights into the experiences of care home residents in Germany during the early phase of the COVID-19 pandemic

Dr Miranda Leontowitsch, Prof. Dr. Frank Oswald, Arthur Schall, Prof. Dr. Johannes Pantel

Goethe-University Frankfurt, Frankfurt/Main, Germany

Abstract: Residents of care homes across the globe are affected by the spread of COVID-19 as they have been identified as a high-risk group and because they were the first to experience strict social isolation regulations, both during the first and second wave of the pandemic. Social isolation of older people with poor physical and mental health is strongly associated with mental health problems and decreased life expectancy. Other research suggests that older people manage to adapt to the changes brought about by the pandemic and have linked this to the concept of resilience. The aim of this research project was to investigate how this applied to residents in care home settings during the first phases of contact ban in Germany from sociology, developmental psychology and environmental gerontology perspectives and to gain in-depth understanding of residents' experiences. This paper draws on structured interview data collected from residents in two care homes during early June 2020 in Frankfurt/Main. The findings show that their experiences were shaped by three factors: care home settings and staffs' approach to handling and the contact ban; biographical sense of resilience; and a hierarchy of life issues. The findings highlight the importance of locally specific response mechanisms in care homes, agency and belonging of residents despite health-related limitations and the importance of a critical (gendered) lens on understanding their experiences.

S. Paper 25.4

“Let the grandma go in dignity...”: Voices of health care professionals in the first wave of the COVID-19 pandemic in Germany

Julia Piel¹, Dr. Madlen Hörold¹, Karl-Philipp Drewitz¹, Vreni Brunthaler², Prof. Dr. Christian Apfelbacher¹

¹Institute of Social Medicine and Health Systems Research, Otto-von-Guericke University, Magdeburg, Germany. ²Universität Regensburg, Regensburg, Germany

Abstract: Background: In the wake of the COVID-19 pandemic health care professionals (HCPs), particularly in hospitals, were faced with tremendous challenges in organizing care but little attention was paid to exploring their own perspective on preparation and coping strategies.

Study design: A qualitative interview study with 39 HCPs working in critical care of COVID-19 patients examined preparation and coping strategies during the first pandemic wave from April until July 2020.

HCPs from ten German federal states reported in a thematic telephone-interview on their experiences in daily clinical routine. Audio material was transcribed verbatim and subjected to analysis based on grounded theory.

Results: The participants' experiences with infection control measures, the re-organization of care processes and patient fates are characterized by tensions. They reported personal fears on the necessity of triage. A minority raised medical ethics on age-based rationing.

HCPs with long-term experience in intensive care showed a high level of frustration about working conditions. The participants reviewed life-prolonging interventions in very old patients critically, and further expressed irritation about media attention. The perceived paradoxes between professional action and civil life were difficult for them to endure.

A majority expressed fears on an increased number of patients that could no longer be managed. They described the absence of older colleagues who were part of the risk group.

Discussion: Our interview enabled HCPs to recapitulate and voice ambivalent experiences related to preparation and coping strategies. Participants raised ethical aspects of “living and letting die”, which were relevant in society even before the pandemic.

Symposia

Parallel Session 3J - Symposium (26) Material Gerontology: Objects, Bodies, and Spaces of Ageing

16:30 - 17:30 Thursday, 8th July,
2021

Track: Innovation in theories, methods and critical perspectives

Symposium Abstract: How does the material, tangible world around us shape the lived realities, experiences, and perceptions of ageing? The *material turn* in the social sciences and humanities has directed attention to the material dimension as well as 'non-human actors' that co-constitute the social world; however, such new materialist perspectives are only slowly starting to spread across gerontology. To explore what gerontology can learn from taking materiality seriously, this panel assembles papers that draw on materiality-related theories and concepts, and present empirical findings around topics like ageing and place/architecture, ageing and technologies, ageing bodies, and objects of ageing. Contributions pose the questions: How do things, spaces, and bodies shape the everyday experiences of ageing and co-constitute identities in later life? And in how far can the material, non-human exert agency in the everyday lives of older adults? As empirical examples, contributions will address (1) the role of dress in performing, but also materially resisting, older age; (2) the work needed to make older bodies 'fit' with the socio-material arrangements of cultural institutions, like theatres (3) how representations of older adults are incorporated into design processes for care of architecture; and (4) the more-than-human in co-design processes in technology development. Finally, the panel aims to discuss what a 'material gerontology' could look like, what questions it might ask, what methodologies it requires, as well as where and how it could connect to existing gerontological research fields, like critical, cultural, or environmental gerontology.

Chair

Anna Wanka

Goethe University Frankfurt, Germany

S. Paper 26.1 Materiality and Age: the Case of Dress

Professor Julia Twigg

University of Kent, Canterbury, United Kingdom

Abstract: The paper uses the field of clothing and dress as a means to explore the contribution of a material analysis to the understanding of later years. Dress lies between the physical body and its social presentation, both obscuring and expressing the experiences of age. As a result, clothing plays a significant part in the ways in which age is culturally constituted and performed - though also resisted. This paper will focus on the object nature of dress - its materiality - and its role in the everyday lives of older people. It will draw on three empirical studies: of older women (55+); older men (55+); and older people with dementia, living either domestically or in a care home.

Symposia

S. Paper 26.3

Constructing age: materialities and imaginaries of later life in the design of buildings for care

Dr Christina Buse, Prof Sarah Nettleton, Dr Daryl Martin

University of York, York, United Kingdom

Abstract: This presentation examines how contrasting representations of older people are negotiated in discussions and decisions about materials, during the design and construction of buildings for later life care. These issues are examined drawing on data from the *Buildings in the Making* project, an ESRC funded study following building projects including care homes and extra care housing. Data were gathered using ethnographic and qualitative methods. During building projects, architects, contractors, developers and clients draw on and negotiate competing discourses and images of ageing, with conceptions of older bodies as active and consuming emerging alongside discourses of decline and risk. Decisions about materials – building materials, fixtures, fittings, interiors – are entangled with constructions of older people that are gendered and classed. These decisions are also constrained by various factors, including cost constraints, regulatory requirements, and the competing demands of different stakeholders. This paper suggests the importance of widening the lens to examining processes of design and construction when considering the significance of materialities for understanding experiences of later life. Examining the design and construction process on buildings for later life care reveals how different representations of older people become embedded in material environments. Discourses of risk and decline, and stereotypical images of ageing, can constrain possibilities for reimagining these environments in more positive ways.

S. Paper 26.4

Considering sociomateriality in co-design with older adults: Implications for a material gerontology

Dr Helen Manchester¹, Dr Juliane Jarke²

¹University of Bristol, Bristol, United Kingdom. ²University of Bremen, Bremen, Germany

Abstract: There is a growing focus on the social and everyday lives of older people in the design of technologies for ageing and the emergence of new methods of co-designing technologies alongside older adults. Literature exploring these methods have foregrounded power relations between humans and problems related to ageing are here worked out within human collectives. This approach has often had the effect of sidelining the material actors participating in these processes.

In this paper we draw on examples of co-design work with older adults to suggest the various effects of taking materialities seriously in the ‘messiness’ of co-design processes. We critically engage with two co-design processes – one involved designing technologies for storytelling in care settings and another co-creating digital public services. We highlight the networks of actors that are often taken for granted in these processes, including bodies, spaces, aesthetics and intangible concerns.

We argue that co-designing with older adults may be re-considered as a material, vital doing involving constant repair and maintenance and attention to humans, ‘things’ and the material world. This involves looking relationally and symmetrically at what entities become, do and produce when they are associated together in co-design processes. This focus allows problems to emerge as designers work iteratively alongside human and non-human actors. Taking this approach requires a move to co-designing ‘sociomaterial arrangements’ rather than simply technologies. We believe that this approach can result in the co-design, alongside older adults and other human and non-human actors, of more sustainable products, services and innovations.

Symposia

Parallel Session 4B - Symposium (27) Dementia and Place: practices, experiences and connections

09:30 - 10:30 Friday, 9th July, 2021

Track: Changing connections and relationships

Symposium Abstract: As dementia policy ushers people from institutionalised care toward aging in place in their neighbourhoods, so the framing and approach to dementia care has to evolve. In short, we need to move beyond ideas, language and relationships that originated within the walls of institutions and re-compose how we understand dementia. In this symposium we foreground the significance of situations in which people live and manage life with dementia beyond formal care settings. We focus on the 'lived neighbourhood' and the complexities of managing the condition in outdoor, public, and shared spaces. Collectively, we argue for closer attention to neighbourhoods and their implications for our understanding of dementia and how it is lived and experienced. The cornerstone of our argument is that dementia and place are co-constitutive, both discursively and experientially. Yet, what unites a great deal of existing research and commentary in dementia studies is an on-going failure to question or problematise place or space in the context of this relationship. Collectively the papers presented here make a contribution to an emerging call to progress from an 'impairment-led' to a 'capacities-oriented' approach to dementia. We demonstrate how people living with dementia actively engage with the people and places where they live and in so doing have a significant influencing role upon the open-ended and unfolding nature of their neighbourhood. We thereby offer an opening to a still embryonic debate on the rich and diverse nature of the social contribution of people living with dementia.

Chair

Richard Ward

University of Stirling, United Kingdom

S. Paper 14.1 Dementia, localisation and neighbourhood

Dr Richard Ward¹, Dr Andrew Clark²

¹University of Stirling, Stirling, United Kingdom.

²University of Salford, Salford, United Kingdom

Abstract: The Dementia-Friendly Communities (DFC) agenda heralds a shift toward the neighbourhood as a locus for the care and support of people with dementia. Yet limited research exists of the everyday experience of neighbourhood life for people with cognitive impairment. This paper reports findings from the Neighbourhoods: our people, our places study (2014-2019) a five-year, international qualitative study of neighbourhood life for people with dementia and their care partners. Our argument here is that despite efforts to place people with dementia at the heart of the DFC movement, limited attention has been given to their actions and agency in a neighbourhood context. Outlining examples of the day-to-day social, spatial and affective practices of people living with dementia our findings demonstrate that on-going engagement with diverse places and social opportunities in the neighbourhood is integral to managing life with dementia, maintaining wellbeing and supporting social health. The findings highlight the value of attending to the 'doing' of neighbourhood and the transformative impact it can have on social relations over time. The research has implications for dementia-friendly community development, by opening up questions concerning the nature of people's relationship to local places and arguing for bolstering the agency of people living with dementia as a route to fostering more accessible and inclusive neighbourhoods.

Symposia

S. Paper 14.2

Citizen audits: Developing a participatory, place-based approach to dementia-enabling neighbourhoods

Dr Martin Quirke¹, Mr Kevin Harrison², Dr Richard Ward¹

¹University of Stirling, Stirling, United Kingdom. ²Artlink Central, Stirling, United Kingdom

Abstract: In the wake of COVID-19, cities, towns and villages around the world are engaged in dialogue over the need to re-think the allocation and use of public space. Pavements are being widened, cycle lanes introduced and greater use made of green and open spaces. Yet the rapid pace of change runs a risk of reinforcing, even amplifying place-related inequalities. We need to ensure that age and dementia-friendly design considerations are integral to the programme of changes being made. One way to achieve this is through directly engaging people living with dementia and their care partners in helping to enhance the inclusivity of public space, and here we share one approach to doing so. In this paper we reflect on the experience of a (pre-COVID) participatory project aimed at helping to create dementia-enabling public spaces. Commissioned by Stirling Council (Scotland), the project was undertaken by 'Our Connected Neighbourhoods' (OCN), a community-development partnership involving people living with dementia, unpaid carers, a team of volunteers, a network of third sector provider organisations, and the University of Stirling. The commission offered a unique opportunity to facilitate a dialogue between people living with dementia and the local council, with the intention of investing in changes to council venues and facilities and the wider city centre. The project has allowed us to reflect on the meaning of 'enabling neighbourhoods' and consider the implications for a broader global agenda for dementia-friendly communities.

S. Paper 14.3

Place through the lens of dementia

A/Prof Lyn Phillipson¹, Dr Richard Ward², Prof Andrew Clark³

¹University of Wollongong, Wollongong, Australia.

²University of Stirling, Stirling, United Kingdom.

³University of Salford, Manchester, United Kingdom

Abstract: In this paper, we reflect on the varied traditions and perspectives that has been used to place dementia in the published literature. Our scoping review of the last 10 years of published research concerning people with dementia in outdoor, public, and shared spaces identified varied and multi-disciplinary lenses. It comprises a spectrum of perspectives including: bio-medically informed research on place which focuses on disabling symptoms, deficit and risk; research concerning the potentials and benefits of therapeutic design; place and enablement of human rights; and finally, a limited, but emerging literature on place as embodied and relational. Overall, we conclude that a greater consideration is needed in dementia research to enhance our knowledge and understanding of the relationship between people living with dementia and the places where they live. This research is critical to provide insights into the nature of belonging and the process of ageing in place from the perspective of those with dementia.

Symposia

S. Paper 14.4

The good, the challenging and the supporting: mapping life with dementia in the community using qualitative GIS

Dr Chris Brennan-Horely, A/Prof Lyn Phillipson, Dr Louisa Smith

University of Wollongong, Wollongong, Australia

Abstract: There is a critical need for new ways to illuminate the geospatial context of the lived experience of people with dementia in their local neighbourhoods. This paper will draw on research that used qualitative geographic information systems (GIS) to understand experiences of place for people with dementia when they are 'out and about' in their local community. Conducted in Kiama, an Australian seaside town popular with retirees, we aimed to understand the geospatial elements of these movements using two qualitative mapping methods: semi-structured, sketch mapping interviews and a crowdsourced online map for wider publics. Results provided grounded understandings of the everyday usage of a range of important places, including physical and social settings that variously supported or hindered civic participation and social engagement. Crowdsourced online maps whilst less rich in detail, supported access to map-making. The resulting data was useful to inform advocacy and local targets for environmental action. Research using qualitative GIS provided a much-needed geospatial element and was a valuable complementary method to interviewing and walk-arounds, foregrounding how the everyday lives of people living with dementia are constituted relationally through social and material interactions in place.

Parallel Session 4D - Symposium (28) Achieving inclusive aged care for older migrants in Europe: the potential of participatory methodologies

09:30 - 10:30 Friday, 9th July, 2021

Track: Diversity and culture in later life: where are we now and where are we going?

Symposium Abstract: Older migrants constitute a growing population in many European countries. In general, these older persons use less aged care services than native-born populations. Despite calls to invest in culturally sensitive ways of working to lower barriers to access care for older migrants, many care providers have yet to systematically take up this challenge. This symposium responds to this issue by discussing how participatory methodologies can increase inclusion in aged care. Participatory methodologies involve care providers directly in the process of generating and reflecting on research findings. We therefore suggest that such approaches have the potential to achieve structural changes in service delivery. Four papers are discussed on the topics of:

1. PAR research with residential care organisations
2. Practice-oriented action research with older migrants, policy advisors and social workers at the municipal level,
3. Intervention research on regional collaborative responses to inequalities including primary and social care, housing associations and migrant civil society organisations,
4. Use of design thinking to develop guidelines for accessible dementia care involving nurses, older migrants and their family careers.

Based on these papers, we will discuss the opportunities and limitations that arise with the use of participatory methods in different settings and at different scales. Overall, the symposium furthers methodological debates on inclusion in aged care by discussing how participatory and co-creative methods can be an effective way to integrate research findings into the ongoing work of care providers.

Symposia

Chair

Eva Soom Ammann

Bern University of Applied Sciences, Switzerland

S. Paper 28.1

Moving towards suitable residential care for older migrants: a participative action research approach.

Saloua Berdai Chaouni

Vrije Universiteit Brussel, Brussels, Belgium. Karel de Grote University College, Antwerp, Belgium

Abstract: Belgium is facing an increasing ethnic diversity within its older population. A first wave of older migrants resulting from the labor migration in the 50-ies and 60-ies is aging and in need of suitable care. However, current aged care services do not meet their needs contributing to their under-use of these services, especially residential care services. Therefore, a search process to provide suitable care by residential care homes has been initiated by policy makers and care organizations. Using participative action research (PAR), three residential care homes in super-divers Belgian cities, were stimulated and guided during 2 years to take actions to work towards a culturally sensitive care organization. Focusing on the change process of the organization three tensions emerged: 1) process-based versus project-based framework, 2) opportunity-based anchoring actions versus sustainable inclusive organizational policy, and 3) culturally sensitive care versus other concerns. Although every organizations' change process is unique, the three care homes shared the following action targets: developing a vision about culturally sensitive care, organizing trainings for staff and setting up actions to reach older migrants. Using PAR was a useful approach to stimulate residential care homes to initiate deep structure culturally sensitive actions that are anchored in the organizational policy structures. However, a more favorable policy context with clear ambitions about culturally sensitive care and with sustainable expert support is needed to create a stimulating environment for individual care home organizations to set up actions towards suitable and inclusive care for older migrants.

S. Paper 28.2

Working towards inclusive care provision for older migrants: the potential of a practice-theory-oriented participatory methodology

Ms Hanna Carlsson

Institute for Management Research, Radboud University, Nijmegen, Netherlands

Abstract: Although much is known about the barriers that older migrants face to access aged care, research shows that older migrants still under-use aged care services. Two reasons why existing knowledge is not sufficiently used is that time and financial constraints limit the possibilities to sustain new interventions in care, and that research outputs lag behind organizational developments in the field. In this paper we present practice-theory-oriented participatory methodology as a way to address these issues.

Our theoretical starting point was that it is more feasible to influence existing practices than to initiate new ones. We therefore followed ongoing activities focused on inclusive aged care in Nijmegen, the Netherlands during three years. During this time, we co-created awareness-raising meetings and an educational webinar serie. Such actions are common outcomes of participatory research. What is different about our approach, is that the actions aimed at articulating and strengthening existing best practices. Examples include the work of professionals aimed at closing social and cultural distances to social care which we term relational work. Articulating the nature and value of these efforts was helpful to professionals, who used this knowledge to further professionalise previously underrecognised work. Our long-term engagement also allowed us to respond to ongoing development in the field. For example, we co-organised an educational webinar following the closure of a culturally sensitive care home toward the end of our study. Overall, we believe that a practice-theory-oriented research design offers a sustainable way to integrate findings into the ongoing work of care providers.

Symposia

S. Paper 28.3

A collaborative response of PH, PC, SC and housing to meet the diverse needs of the growing group of migrants aged 65 years and older in the Netherlands

dr Jennifer van den Broeke, dr Carolien Smits

Pharos, Dutch Centre of Expertise on Health Disparities, Utrecht, Netherlands

Abstract: In the Netherlands the older population is becoming increasingly diverse both in ethnic backgrounds and in variations of multiple problems and chronic diseases. While highly educated people increasingly live longer, people with lower education have not gained extra years. The Dutch Dementia register shows there is overrepresentation of people with low incomes amongst people with dementia. In a more practical sense we see older migrants making far less use of facilities such as stairlifts.

In deprived neighbourhoods the group of migrants aged 65 years and older is growing fast. They are in need of suitable care, support and housing, but local providers do not know how to reach them or how to provide services that suit their needs.

Previous findings (van den Broeke-George thesis 2017) revealed a collaborative response of PH, PC and SC to be promising as compensating for the lower chance of good health in deprived neighbourhoods. In new regional pilots housing and NGO's of migrants are also involved in the method.

The collaborative response is a promising element as it might 1) help to embed services promoting healthy behaviour, 2) help overcome difficulties to provide a 'whole-person approach', and 3) help support patient self-management. In the collaborative response professionals apply a holistic approach, activating and coaching patients, within population health orientation. The response showed consistency as the professionals all aimed at treating the root causes through coaching and activating, were sensitive to the realities of the patient's everyday life, and communicated with each other.

S. Paper 28.4

Towards nursing competencies which improve access to health care for ethnic minority groups with dementia: the participatory approach of Design Thinking.

Drs. Gözde Duran

Windesheim University of Applied Sciences, Zwolle, Netherlands. Vrije Universiteit Amsterdam, Amsterdam, Netherlands

Abstract: Although there are various forms of care and support available for people with dementia, it is hardly used by people with dementia and their informal caregivers from ethnic minority groups. The cause of the underuse of health care services by minorities can be framed as a mismatch in the supply and demand side of health care. Preliminary findings from interviews with nurses and persons with dementia from ethnic minority groups and their informal caregivers supports this framing. These findings also suggest that nurses need to strengthen their competencies (knowledge, skills, attitudes) to improve access to health care for people with dementia from ethnic minority groups and their informal caregivers. This raises the question how the competencies of nurses can be strengthened so that the current mismatch can be overcome.

This paper discusses how design thinking can be used to improve the competences of nurses working with migrants with dementia. Design Thinking is an iterative approach through which actors, in this case nurses, older people from ethnic minorities and their informal care givers are brought together and guided through a process of: 1) empathize with the user 2) define their problem 3) create a solution 4) develop a prototype and 5) test it in practice. It will be argued that using the participatory approach of design thinking is a promising approach to create effective interventions for improving access to health care because they include the experiences of both nurses and people from ethnic minority groups with dementia and their informal caregivers.

Symposia

Parallel Session 4I - Symposium (29) Cultural Gerontology – Six Years On

09:30 - 10:30 Friday, 9th July, 2021

Track: Diversity and culture in later life: where are we now and where are we going?

Symposium Abstract: In 2015 we published the edited *Routledge Handbook of Cultural Gerontology* containing fifty-nine brief chapters presenting and reviewing the emergent field of cultural gerontology. The book argued for the relevance of cultural approaches to later years, and called for further work in this vein. Six years on, we will review the developing state of the field, drawing together papers that explore distinctive aspects of the approach. After an introductory paper on the emergence of cultural gerontology, David Amigoni will focus on the new interest in age within literary studies; while Maria Zubair will explore the ways in which age is presented and analysed in film studies, using the concrete example of Hindi film. Though cultural approaches are often associated with an emphasis on discourse and meaning, they also reflect the wider Material Turn, and Anna Wanka will address the role of materiality in ageing studies.

Chair

Julia Twigg

University of Kent, United Kingdom

Discussant(s)

Wendy Martin

Brunel University London, United Kingdom

S. Paper 29.1

Cultural Gerontology: Where Are We Now and Where Might We Go?

Professor Julia Twigg¹, Dr Wendy Martin²

¹University of Kent, Canterbury, United Kingdom. ²Brunel University London, London, United Kingdom

Abstract: In this introductory overview we reflect on where cultural gerontology came from: the social and political forces that underlay its emergence, and the intellectual movements that shaped its character. We then review the changes that have occurred over the six years since the edited *The Routledge Handbook of Cultural Gerontology* was published, and reflect on possible future developments.

Symposia

S. Paper 29.2

Literature as a pathway to innovation and interdisciplinarity in cultural gerontology

Prof David Amigoni

Keele University, Newcastle-under-Lyme, United Kingdom

Abstract: My contribution to the symposium will survey some of the ways in which literary studies has come to contribute to cultural gerontology. This will include representational approaches: for example, the ways in which the major genres of literature from different periods of history and the present represent older people, the experience of being old, and attitudes to ageing. Such approaches have produced some highly sophisticated historical and theoretical work: for example, Andrea Charise's *The Aesthetics of Senescence* (2020). Recent UK funding opportunities such as the New Dynamics of Ageing have encouraged projects that have further 'thickened' the contexts in which such representations are understood: a good example here is the Brunel University (Tew, Hubble, et al) which focused on reading groups made up of older people. My paper will argue that both literature and gerontology are inherently interdisciplinary knowledge formations: that literature has always been able to create some interesting and insightful 'pathways' through gerontology; and that cultural gerontology will, through further dialogue, enable both to create further innovative pathways that can begin in but move beyond the representational paradigm. My research on late life creativity was shaped by the NDA-funded ('Ages and Stages' project (PI Bernard) that focused on drama as a form of representation, but which also stressed its relationship to memory, place, and new practices of creativity. My paper will conclude by focusing on the ways in which this 'not really ... literature' (Peter Cheeseman) approach makes an innovative contribution to the material turn.

S. Paper 29.3

Hindi cinema's new transcultural engagements with notions of ageing and later-life sexuality – Reinforcing the significance of film-studies for Gerontology

Dr Maria Zubair

Manchester Metropolitan University, Manchester, United Kingdom

Abstract: Swinnen had, in the *Routledge Handbook of Cultural Gerontology* (2015), presented an overview of the different approaches to the study of ageing within films. While full of useful insights, this earlier review reveals a significant gap in terms of a lack of study of comparative world cinema, beyond Hollywood and European films. In the meantime, within the last six years, Hindi cinema has witnessed the production and success of two key films focussed predominantly around issues of later-life sexuality. *Lipstick Under My Burkha* [veil] (2017) and *Badhaai Ho* [Congratulations] (2018) represent a fundamental shift in the type of visibility accorded to later-life identities and older bodies within this cinema. This paper will begin with a description of some of the representational shifts witnessed within these two films, followed by a discussion of the wider context within which these films have been successfully produced and consumed within Indian urban-centres. This wider context includes: 1) recent shifts within the genres of popular Hindi cinema, and its internationalisation; 2) facilitation of emancipatory messages around old-age sexuality through existing feminist frameworks more familiar and/or acceptable to the local audiences; and 3) new transcultural understandings of later-life sexuality developed through engagement of an elite, Westernised, Hindi-film fraternity depicting and performing the realities of the everyday lives of people from culturally traditional lower-middle social classes. The paper will conclude by reiterating the significance of popular cinema as a site for the successful development and social promotion of emancipatory, transcultural, understandings of ageing and older people.

Symposia

S. Paper 29.4

The 'Material Turn' in Gerontology – Understanding the Role of Objects, Bodies, and Spaces for the Everyday Experiences of Ageing

Dr. Anna Wanka

Goethe University, Frankfurt am Main, Germany

Abstract: In parallel to the social sciences in general, gerontology has experienced a turn towards the material since the early 2000s. The material turn in gerontology can be understood as a response to the previous focus on textual discourses of ageing, and the respective neglect of the material dimensions of ageing. Especially the body and embodiment has since become a major research field in cultural gerontology, arguing that while “we are ‘aged by culture’, we are also aged by our bodies” (Martin and Twigg 2018). More recently, however, material gerontology has emerged as a distinct field that focuses on materialities in general, exploring the role of objects, spaces, and architectures of ageing, and has in parts turned away from cultural gerontology. This paper will reconstruct the development of the material turn in gerontology, outline its essential assumptions, and give an overview of empirical research in this field, focusing on objects, technologies, bodies, and the built environment. Finally, it will discuss the similarities and frictions between material gerontology and cultural gerontology, providing the ground for a fruitful exchange between the cultural and the material.

Parallel Session 4J - Symposium (30) Past, Present and Future: reflections from – and on – the Ageing of British Gerontology project

09:30 - 10:30 Friday, 9th July, 2021

Track: Innovation in theories, methods and critical perspectives

Symposium Abstract: Published in April 2020, just after the UK went into its first lockdown, *The Evolution of British Gerontology* (Policy Press) tells the story of the remarkable progress of gerontology. Mirroring the BSG's 50-year history, the book – and the empirical project on which it is based – shed light on half a century of UK gerontology research, theory, policy and practice. Drawing on interviews with 50 influential figures in the field, and on the archives of the Society, it also looks to the future and considers new directions for gerontology and the gerontology community.

In this symposium-cum-conversation chaired by Professor Tom Scharf, members of the research team reflect on three aspects of the project. First, Mim Bernard focusses on the 'past', considering how the project came about and the motivations for writing the book. Second, Sukey Parnell Johnson looks at the 'present' and, in particular, at the innovative role digital images play in both the project and in ongoing [cultural] gerontological research. Third, arising from our appraisal of the wealth of material generated by the project, Mo Ray offers suggestions for the 'future' of gerontological research and practice. These short presentations on the 'past', 'present' and 'future', including examples of the portraits and clips from the project films, will be pre-recorded, leaving the second half of the symposium for a live conversation with, and questions from, the audience.

NOTE: The 'Ageing of British Gerontology' project was funded by the Leverhulme Trust (2015-17).

Chair

Tom Scharf

Newcastle University, United Kingdom

Symposia

S. Paper 30.1

The Past: How the Ageing of British Gerontology project came about

Professor Miriam Bernard

Keele University, Keele, United Kingdom

Abstract: As project leader, Mim Bernard had spent a lengthy career as a critical gerontologist and a long-established member of the gerontological community before embarking on this 'flexible retirement' project between 2015 and 2017. In this presentation, Mim considers her motivations for instigating the project, and articulates the ways in which it brought together her arts and social science interests. She also reflects on the importance of working collaboratively and creatively with colleagues, and on her desire to leave something tangible for future generations of gerontologists.

S. Paper 30.2

The Present: The role of photographic images in the Ageing of British Gerontology project

Dr Sukey Parnell Johnson

King's College, London, United Kingdom

Abstract: To complement the empirical research, professional photographer, artist and gerontologist Sukey Parnell Johnson worked closely with the research team to produce a series of high quality photographic portraits of project participants. These images form the heart of the Ageing of British Gerontology Exhibition (launched in July 2017 at the BSG Conference in Swansea), a newspaper-style publication and a series of postcards. They also feature as the cover design for the book (*The Evolution of British Gerontology*, Policy Press, 2020) and in the book's centre pages. Using examples, Sukey discusses the background to, and evolution of, the multi-faceted approach to the still images used for the project. She then reflects more broadly on the role photographic images might play in ongoing [cultural] gerontological research.

S. Paper 30.3

The Future: New directions for British gerontology

Prof Mo Ray

University of Lincoln, Lincoln, United Kingdom

Abstract: The many hours of interviews with participants in the Ageing of British Gerontology project were filmed as well as audio-recorded, enabling us to develop a series of eight short films with Matt Watson (of WatsOn Media Productions). In this presentation, Mo Ray presents excerpts from the film 'Gerontology Futures' and reflects further on what the wealth of material generated by the project suggests for the 'future' of gerontological research and practice. She highlights the continuing concerns and challenges faced by gerontology and the gerontology community, and offers suggestions for how we might continue these important conversations.

Symposia

Parallel Session 5B - Symposium (31) Relationships, gender and sexuality in later life

11:00 - 12:00 Friday, 9th July, 2021

Track: Changing connections and relationships

Symposium Abstract: This symposium brings together emerging research on the role of relationships, gender and sexuality in later life. The research papers presented in the symposia demonstrate how relationships, gender and sexuality are navigated in ways that are socially, culturally, and personally meaningful and how this is shaped by experiences as we grow older.

First, Paul Simpson discusses how ageist erotophobia is implicated in various relational constraints on the expression of sexuality and intimacy in later life, discussing barriers that contribute to the desexualisation of older people and the ways in which older people avoid and challenge ageist erotophobia.

Then, Georgia Chatzi uses quantitative data from Waves 6 and 8 of (ELSA) to examine differences and similarities across women and men in sexual activity and experiences, and how these differences and similarities relate to age and other sociodemographic and health characteristics.

Finally, Hayley James discusses a qualitative analysis of an open comment box included in ELSA at Wave 6 and Wave 8, which highlights that sex was seen as an important part of relationships by men and women, yet there were some differences in how they navigate sex and sexuality in the context of later life.

Chair

James Nazroo

University of Manchester, United Kingdom

S. Paper 31.1

'At YOUR Age???!' The Constraints of Ageist Erotophobia on Older People's Sexual and Intimate Relationships

Dr Paul Simpson

Independent academic, Manchester, United Kingdom

Abstract: Older people's attempts to express sexuality or intimacy are commonly met with ridicule, condescension and infantilization (Simpson et al, 2017). Older people are stereotypically cast as prudish and beyond interest in sexual activity (Mahieu et al, 2014). Such thinking, informs pressures towards 'compulsory non-sexuality' among older people (Simpson, 2020).

Indeed, sex and intimacy are often 'designed out' of care environments and services for older people (Hafford-Letchfield, 2008). Yet, this exclusion appears more revealing of wider social anxieties than of older individuals' wishes, feelings, desires and practices (Simpson et al, 2018). Such anxieties have been described as reflecting 'ageist erotophobia' - ageism that involves failure or refusal to imagine older people as sexual beings, and which older people themselves come to internalize (Simpson et al, 2018). This think-piece paper, based on literature and partly my own empirical research, demonstrates how ageist erotophobia is implicated in various relational constraints on the expression of sexuality and intimacy in later life. It focuses on constraints operating at three 'levels' that contribute to the desexualisation of older people. These inter-related constraints concern: the wider social relations of ageism evident at the macro-discursive level; the former also influences thought and practice within healthcare provision concerning the sexuality of older people at the institutional/structural and meso-level of care homes; interpersonal relations at the micro-level. By way of conclusion, this paper draws attention to the ways in which older people avoid and challenge ageist erotophobia.

Symposia

S. Paper 31.2

Gender differences in sexual activities and experiences among older adults in England: the impact of social and health-related circumstances.

Dr Georgia Chatzi, Dr Hayley James, Professor James Nazroo

University of Manchester, Manchester, United Kingdom

Abstract: Sex and sexual identity are intrinsic components of human life and relationships, indeed the association between human sexuality and well-being is well-documented. Previous research has highlighted strong gender disparities in sexual health and satisfaction. However, little is known about gender differences in sexual activities and experiences among older adults and the factors that might pattern these. In fact, changes that occur in later-life, such as in relationship status, retirement or social position, and health have been reported to have an impact on sexual health and sexuality in older adults, and these may well be experienced differently by women and men and, thus, contribute to the patterning of gender differences.

In this paper we explore differences and similarities between older men and women in sexual activity and experiences such as sexual functioning and relationships, sexual concerns and worries alongside satisfaction with sex life. We, also, aim to explore how these differences can be impacted by later-life circumstances. We use data from Waves 6 and 8 of the English Longitudinal Study of Ageing, a population-based longitudinal study of men and women aged over 50 living in England. Data from 7,000 participants were collected via a self-completion questionnaire, which includes questions on attitudes to sex and on sexual activities and experiences. We use factor analysis to identify underlying dimensions of experience and gender differences in this.

Findings from this study enhance previous knowledge of older adults' sexual experiences and promote awareness of gender differences in experiences and the factors that might underlie these.

S. Paper 31.3

How do women and men navigate relationships, sex and sexuality in later life?

Dr Hayley James, Prof James Nazroo, Dr Georgia Chatzi

University of Manchester, Manchester, United Kingdom

Abstract: Research has demonstrated the importance of intimate relationships for wellbeing. However, much work in this field has neglected to examine later life relationships and the role of sex in relationships. Addressing this gap is crucial in order to understand the impact of ageing on relationships and inform approaches to maximising wellbeing in later life.

This paper offers a unique analysis into how women and men experience relationships, sex and sexuality in later life. Since 2012, the English Longitudinal Study of Ageing (ELSA) has included questions on sexual relationships and activities, including an open comment box. We analysed the comments from Wave 6 and Wave 8 of ELSA (2,006 records in total) using a coding template developed from key themes identified by existing literature and adjusted to accommodate emerging themes. In this paper, we explore a subset of these themes to better understand how women and men navigate relationships, sex and sexuality in later life.

The findings confirm that sex is important for many older men and women, in contrast to assumptions of decline. However, the findings demonstrate how constructed norms of age and gender interact and shape sex and relationships practices in later life. These norms appeared to limit older people's experiences, for example, by preventing them from seeking relationships and creating challenges for intimacy in partnerships. These findings extend the theoretical understanding of relationships and sex in later life as well as highlighting implications for how older men and women are supported in later life.

Symposia

Parallel Session 5D - Symposium (32) Law and Ageing

11:00 - 12:00 Friday, 9th July, 2021

Track: Diversity and culture in later life: where are we now and where are we going?

Symposium Abstract: This symposium explores the place of law in gerontology, particularly in relation to ageing and inequality. Law and gerontology are often seen as two very distinct areas of study, however they often intersect. Three papers will be presented by lawyers with expertise in ageing and issues relevant to older people, followed by a short Q&A, as follows

1. Professor Israel Doron, University of Haifa, Israel: *Using international laws to advocate for older people's rights*
2. Professor Nina Kohn, Syracuse University College of Law, USA: *Law and older people's civil rights in the US*
3. Professor Jonathan Herring, University of Law: *Using law to tackle inequalities in older age health and social care provision in the UK*

Chair

Sue Westwood

University of York, United Kingdom

S. Paper 32.1

Using International Legal Mechanisms to Advocate and Promote Human Rights of Older Persons

Prof. Israel Issi Doron

University of Haifa, Haifa, Israel

Abstract: Until the late 1980s, human rights of older persons were almost invisible on the international human rights arena. The leading international human rights conventions (e.g. ICCPR – the International Covenant on Civil and Political Rights; or the ICESCR – the International Covenant on Economic, Social and Cultural Rights), made no or little specific reference to the rights of older persons. This was also true to regional human rights instruments as well (e.g. the European Convention on Human Rights, or the OAS American Convention on Human Rights).

This reality however has changed dramatically in the last three decades. Starting from a new and more rights based “soft-law” instrument such as MIPAA (Madrid International Plan of Action on Aging), through various international developments (e.g. the UN Open Ended Working Group on Ageing; or the UN OHCHR Independent Expert on the Enjoyment of All Human Rights by Older Persons), to new regional elder-specific instruments (e.g. the African Union’s additional Protocol on the Rights of Older Persons; or the Inter-American Convention on Protecting the Human Rights of Older Persons) – these new and exciting international developments, have changed the human rights landscape for older persons.

In this presentation, I will describe these new developments across the international human rights law arena, as well as argue that there is a new opportunity to utilize these new development in order to advocate, promote and advance the rights of older persons across the globe.

Symposia

S. Paper 32.2 Aging as a Civil Rights Issue

Professor Nina Kohn

Syracuse University College of Law, Syracuse, USA. Yale Law School, New Haven, USA

Abstract: Civil rights concerns are at the heart of the aging experience. However, they have yet to become central to the study of gerontology or to the development of aging-related public policy. The speaker will discuss the consequences of this missed opportunity, including those laid bare by the Covid-19 epidemic. The speaker will then suggest how framing issues affecting older adults in terms of civil rights could affect public policy choices and political processes going forward.

S. Paper 32.3 Using law to tackle inequalities in older age health and social care provision in England

Prof Jonathan Herring

Exeter College, Oxford, Oxford, United Kingdom

Abstract: This paper will explore old age inequalities in health and social care provision in England and the ways the law can be used to tackle them. The first half of the paper will provide examples of these inequalities and discuss the power, and limitations, of the legal remedies available to address them. The paper will highlight how old age intersects with other sources of disadvantage to create inequalities in health and social care. In the second half of the paper two particular issues will be addressed. The first is the use of personal budgets as a means of providing social care and the challenges that can provide for older people. Second, the use of age as a factor in COVID responses.

Parallel Session 5G - Symposium (33) PhD Dementia Research and the Creative Arts

11:00 - 12:00 Friday, 9th July, 2021

Track: The arts, leisure and older consumers

Symposium Abstract: Bringing together three PhD students from the University of the West of Scotland (UWS) and Guildhall School of Music and Drama, we explore and share creative approaches to research. At different points in their PhD journey, all students aim to show the positive influence of the arts in research with people affected by dementia. Diverse creative arts are aligned to each study's philosophy and methods, embedded in the plans and design (Camic et al, 2018). Participants' feedback from previous successful seminars will help shape the session. Innovative methods will engage the audience in understanding and analysing the impact of the creative arts on dementia research.

Sessions:

1. Angela Gregory, PhD Student, UWS: The Thing: understanding meaning in activities and interactions with people with advanced dementia through Stake's (2010) lens.
2. Olivia McLennan, PhD student, Guildhall School: The Circle of Life: initial findings of research on intergenerational music-making in care homes through community music practice.
3. Carol Beckwith, PhD Student, UWS: 'Do You See What I See?': exploring collaborative songwriting to transform Young Onset Dementia carers' narratives (Carless & Douglas, 2011).

References:

Camic, P.M., Zeilig, H. and Crutch, S.J. (2018). The arts and dementia: Emerging directions for theory, research and practice. *Dementia*, 17(6), pp.641-644.

Carless, D. and K. Douglas (2011). "What's in a song? How songs contribute to the communication of social science research." *British Journal of Guidance & Counselling* 39(5): 439-454.

Stake, R.E. (2010) *Qualitative Research Studying how things work*. The Guilford Press: New York/London

Chair

Margaret Brown

Symposia

University of the West of Scotland, United Kingdom

Discussant(s)

Stuart Wood

Guildhall School of Music and Drama, United Kingdom

S. Paper 33.1

The Thing: understanding meaning in activities and interactions with people with advanced dementia through Stake's (2010) lens

Mrs Angela Gregory

University of the West of Scotland, Lanarkshire, United Kingdom

Abstract: Stake (2010) describes what is being studied in qualitative research as 'The Thing' - an array of perspectives and multifaceted possibilities. As part of this symposium, I will use Stake's metaphor to explain how I am using creativity to plan and carry out my study. My research aims to explore a shared understanding of meaning in activity using creative and participatory methods, and to apply this understanding in a care home setting. With a background as a freelance artist, singer and an occupational therapist, I will share my experiences of using creative ways of working to form a bridge between the arts and the sciences.

During the presentation, I will invite you into my unique world, sharing how I have used paint to understand the cycles of Participatory Action Research and why I created paper chains to identify themes in my literature review. I will also describe how wire, thread and objects are helping me 'think' and plan my study and build my own 'thing', documenting my PhD journey. There will be opportunities for the audience to contribute and shape the talk throughout.

Angela is supervised by Dr Margaret Brown, Dr Rhoda Macrae and Dr Angela Beggan from the Alzheimer Scotland Centre for Policy and Practice, University of the West of Scotland. She is jointly funded by Erskine and Alzheimer Scotland.

References:

Stake, R. E. (2010) *Qualitative research : studying how things work* / Robert E. Stake. New York ; London: New York ; London : Guilford Press, c2010.

S. Paper 33.2

The Circle of Life: initial findings of research on intergenerational music-making in care homes through community music practice

Olivia McLennan

Guildhall School of Music and Drama, London, United Kingdom

Abstract: Intergenerational music practice is an emerging field, enjoying increasing popularity in the UK, both within established organisations and individual practitioners. However, the research literature is sparse (Chou, 2017), particularly regarding practice research in the field. Existing literature focusses on the benefits for participants or perceptions of 'the other' as opposed to the actual music-making process.

To understand what happens during intergenerational music-making in care homes, we must first critically appraise the practice. Pedagogically, community music has historically embraced "the existence of multiple perspectives" (Higgins & Willingham, 2017, p.27) and it is an obvious development that research methods should resonate with the practice. As an experienced practitioner and now doctoral student, I am best placed to offer a unique perspective from, and on, the field.

During my presentation, I will discuss the findings of a pilot intergenerational ukulele project through the lens of my own community music practice. I will consider how my practice intersects, disrupts and upholds power relations in a care setting and suggest directions for intergenerational community music research.

References

Chou, R. 2017, *A Review of Intergenerational Music Program Research & Descriptive Articles from 1980 to 2016*, 2017 National Conference on Keyboard Pedagogy, Lombard Illinois, July 26-29 2017, Center for Music Learning, Butler School of Music, University of Texas at Austin

Higgins, L. and Willingham, L. (2017) *Engaging in Community Music: An Introduction*, Routledge, Abingdon

Symposia

S. Paper 33.3

Do You See What I See?' Exploring collaborative songwriting to transform Young Onset Dementia carers' narratives.

Carol Beckwith

University of the West of Scotland, Hamilton, United Kingdom

Abstract: People who care for a person with dementia typically experience an enduring sense of instability, uncertainty and loss, often describing frustration at not being listened to. Research shows that dementia carer narratives are often 'lost' in the fog of diagnoses, appointments and caring responsibilities, being seen as of secondary importance to the needs of the person with dementia.

The concept of the carer as a liminal figure who inhabits liminal spaces will be key throughout the research as will themes of 'crossing thresholds, negotiating change and re-storying. Song-writing facilitates this re-storying process, guiding carers through transformative liminal spaces in their lives (Beech, 2015).

This presentation will explore the application of arts-based research, specifically collaborative songwriting practice, looking at how it supports better understanding of the complex narratives of Young Onset Dementia carers.

Arts-Based Research (ABR) is usually a non-linear process and relies on a more aesthetic focus. Dementia care is neither linear nor fixed and so ABR, because of its fluidity and reflexivity, is well adapted to this research. Combining ABR with Narrative Inquiry, this presentation will focus on how collaborative song-writing can support the exploration of carer experience with both storytelling and song form acting as conduits for knowledge creation.

References

Beech, H., 2015. Songwriting and Transformation: The Subjective Experience of Sharing Self Through Song. *International Journal of Transpersonal Studies*, 34(1-2), pp. 187-201.

Parallel Session 5J - Symposium (34) Categorisation, social divisions and the negotiation of later life

11:00 - 12:00 Friday, 9th July, 2021

Track: Innovation in theories, methods and critical perspectives

Symposium Abstract: This symposium addresses the ways the statuses and positions of older people are organised, negotiated and understood in contemporary later life. It comprises a combination of empirical research and theoretical consideration regarding how the simple categories of old age used in health and social science are considerably more complicated than they appear at first sight. It also addresses how older individuals navigate or are ascribed positions by institutions. This is most noticeable in relation to health but it also relates to the social position of old age in society as a whole.

Sebastien Libert will present the results of his ethnographic study of two memory clinics implementing cognitive rehabilitation therapy for dementia in Southern Europe. He argues that the practices implicit in such clinics play an important classificatory role in later life, ones which have important exclusionary consequences. Christine Carter will also present her research on mild cognitive impairment (MCI) which is recognised as a prodromal phase to Alzheimer's disease. She argues that the experience of living with such 'pre' conditions needs development and draws attention to the importance of liminality as a concept in understanding this new terrain of later life. Lastly, Chris Gilleard will challenge the idea that generational divisions in society are such that old age now represents a new class. Utilising Pierre Bourdieu's ideas of classification, he argues that this argument is not sustainable and that later life might better be seen as a contested symbolic space framed by both generation, chronology and corporeality.

Chair

Paul Higgs

UCL, United Kingdom

Symposia

S. Paper 34.1

Technologies of ascription: how novel cognitive therapies and assessments divide later life

Mr Sebastien Libert

University College London, London, United Kingdom

Abstract: Clinical technologies and psychosocial interventions for dementia have multiplied in recent years. They include the expansion of diagnostic categories, risk assessments and prevention regimes, pharmaceuticals and rehabilitation therapies. While some of these domains have been explored in terms of their micro-social and psychological impact, little has been said about the role that medicalization plays in managing ageing populations and its impact on social configurations in later life amidst a dominant culture of active cognitive ageing. To palliate these limitations, this presentation will explore the social role of medicalization and its capacity to create social division in later life. It will rely upon an ethnography of two memory clinics implementing cognitive rehabilitation therapy for dementia in Southern Europe. It will argue that medicalization plays a classificatory role in later life with exclusionary consequences. By looking at the main steps of cognitive rehabilitation, from referral to diagnosis, and the rehabilitation itself, it will provide an extensive insight into the processes involved in this exclusion. It will present how this process generates exclusion by creating implicit social categories of 1) people ageing 'normally', 2) people with dementia who can be rehabilitated, and 3) those who cannot, the latter being ascribed a most excluded identity according to the standards of active ageing. This ethnography will enable to theorize technologies of ascription as an analytical concept to categorize the social role of other medical technologies and dementia strategies in this dividing process. Finally, the presentation will propose to reflect upon ways to mitigate this process.

S. Paper 34.2

Categorisation, social divisions and the negotiation of later life.

Mrs Christine Carter

UCL, London, United Kingdom

Abstract: 'Memory difficulties' incorporate a range of cognitive impairments which have become synonymous with a 'pre' state to Alzheimer's dementia. Mild cognitive impairment (MCI) is recognised as a prodromal phase to Alzheimer's disease, however the nature of this connection is unclear with a variable conversion rate from MCI to dementia diagnosis, (Meilak et al 2016). Whilst the MCI 'label' differentiates people from Alzheimer's disease, simultaneously it also distinguishes those at higher risk of developing Alzheimer's and hence, health care professionals paradoxically choose to use this diagnosis as having a role in both resolving uncertainty whilst also actively avoiding certainty (Swallow 2019). This raises questions regarding the utility of a diagnosis, this complexity reflects a broader neglect of subjective experiences being taken into account diagnostically.

Poppe (2020) highlights the concept of liminality as a way of describing the intermediate space people with memory problems, which are not dementia, find themselves within. I will explore the experience of living with these 'pre' conditions and their uncertain liminal state, drawing upon findings from secondary data analysis of interviews with older people with memory problems. Interviews were part of co-production research looking at content for a healthy lifestyle intervention. Findings suggest liminality is a feature of individual experiences of memory impairment and MCI, but there are additional factors around negotiation and movement to consider. Individuals negotiate expectations related to age, relationship changes and complex discourse surrounding memory impairment as part of moving from a known to an unknown state.

Symposia

S. Paper 34.3

Framing later life: Class, status, or location? On objective and subjective representation

Dr Chris Gilleard

UCL, London, United Kingdom

Abstract: The identity of agedness is increasingly contested. While some point to age as the new class, others refer to the pervasive negative status attached to age through ageism. Drawing upon Bourdieu's writings on social categorization this paper suggests that on objective grounds, later life has become a widening social space reflecting features of the third age while its symbolic representation is mapped by the opposing poles of third versus fourth age imaginaries. While the third age can be mapped in objective social space, through various vectors reflecting the distribution of assets, capital, and resources, the fourth age exists as a symbolic space drawing upon old (pre-modern) and new (post-modern) forms of distaste for and dread of agedness. It is not as an objective class or status age's identity is most actively contested but in this polarized arena of symbolic space.

Parallel Session 6D - Symposium (35) Older adults in the media: enduring and changing trends

14:00 - 15:00 Friday, 9th July, 2021

Track: Diversity and culture in later life: where are we now and where are we going?

Symposium Abstract: This symposium of four presentations brings together studies from geographically diverse contexts: Sweden & Denmark; The UK; Ghana; and Canada. Each presentation focuses on a specific aspect of media representation regarding ageing, older age, and older adults. They examine coverage of age-salient issues, such as loneliness and vulnerability, but also aspects that intersect with age, such as mental health and sexuality. In highlighting how older adults are represented, primarily in print media, the four studies investigate themes that are found to predominate in news and media discourse on older adults, such as loneliness and vulnerability on the one hand, and themes that are under-represented, such as mental health and sexuality. Whilst the studies critically explore the media coverage in their specific cultural context, they also enable us to reflect cross-culturally on trends that not only reflect but also contribute to orientations to ageing and its representation. Some of this orientation continues past enduring practices, whereas there is also some evidence of new, more inclusive orientations to older adults in media texts and imagery, although this change is slow.

After a short general introduction by the Chair, each presenter will talk for 8-10 minutes, followed by audience questions after each paper.

Chair

Virpi Ylanne

Cardiff University, United Kingdom

Symposia

S. Paper 35.1

Older adults and the pandemic in UK news media

Dr Virpi Ylanne

Cardiff University, Cardiff, United Kingdom

Abstract: This presentation examines the representation of older adults in UK news media during the first four months of the Covid-19 pandemic (2020). The data come from the news sections of a range of UK newspapers, sourced from the Nexis UK database.

The articles are examined thematically to gain an overview of the types of portrayal of older adults in the news. This is complemented by Critical Discourse Analysis to focus on how the portrayals are linguistically and discursively composed. The focus here is on referential strategies, evaluative language, and other discursive strategies that are used to position older demographics in particular ways. A predominant topic in the news stories is the effect of the pandemic on nursing homes and their residents, especially in the first few weeks of the sample, and the care of the elderly in the UK more generally. These promote a largely one-dimensional view of the residents as vulnerable, powerless victims. On the other hand, certain old individuals are depicted as heroes in their charitable ventures (for example to raise funds for the National Health Service), or as active community members. The news value stems from such protagonists defying expectations, yet as also targets of 'benevolent ageism'. We will reflect on how the news coverage recycles enduring themes about ageing and the role of the media in constructing and contributing to specific social 'imaginary' or 'imagination' of later life.

S. Paper 35.2

The present-time witches: media and the intersecting discourses of age, gender, and mental health in Ghana

Dr Monika Wilinska¹, Dr Doris Boateng²

¹Jönköping University, Jönköping, Sweden. ²University of Ghana, Accra, Ghana

Abstract: This paper offers a critical discussion on the knowledge and production of images of older women with mental health problems through societal and cultural practices involving media. In Ghana, the last two decades have witnessed significant improvements in media access and usage. Newspapers, radio, television, the internet-enabled social media handles have opened access to a population that was hitherto obscured. This increased access to media presents concerns for accurate and realistic representation of all sections of the population. At the same time, the Ghanaian population at large has been very active in creating and using media as yet another means of communication. While younger women may proliferate the media, the same cannot be said for older or ageing women. Further, the issues regarding mental health are in general largely silenced in the society and this concerns people of all gender and ages. There is however one exception when mental health, old age and women are openly talked about in social spaces: in most instances, due to their mental health problems older women are approached as witches. The image of a witch is a joint creation of various socio-cultural practices, religious beliefs, media and social norms. In this, we discuss media as an integral part of a societal life that is neither constant nor obsolete but rapidly changing. By the same token, we problematize the ageing, gender and media intersections in the context of Global South and the insights such discussions provide worldwide.

Symposia

S. Paper 35.3 Representations of Older Gay Men, Lesbian Women, and Transgender Persons in Canadian News Media

Dr. [Laura Hurd](#), Raveena Mahal

The University of British Columbia, Vancouver, Canada

Abstract: This paper considers how older gay men, lesbian women, and transgender persons were depicted in Canadian news media. We build on a study that analyzed data from newspaper and magazine stories that were published between July 1, 2016 and June 30, 2017, and that either focused on or included lesbian, gay, bisexual, transgender, queer, or other gender and sexually diverse (LGBTQ+) individuals aged 50+. The study focused on national and provincial newspapers, a national online news website, and the five most widely-read popular magazines whose readerships included or catered to the mature market. Our thematic and content analysis revealed three overarching themes. In particular, we found that older LGBTQ+ persons were largely invisible in Canadian news media and popular magazines and that, when they were depicted, they were either portrayed either as victims of past and ongoing discrimination or as extraordinary individuals who were social pioneers and media icons (Hurd et al., 2020). In this paper, we use critical discourse analysis to examine four representative stories from the original study. We focus on how the use of language and source material (i.e. if, how, and when LGBTQ+ individuals were interviewed and quoted in the story) discursively constructed older adults' identities and experiences. We investigate how underlying cultural assumptions about age, gender identity, and sexual orientation were reinforced or challenged by the content of the stories and their associated images. Finally, we discuss our findings in relation to the extant literature and theorizing concerning older LGBTQ+ persons and media representation.

S. Paper 35.4 Representations of Loneliness among older people in the Swedish and Danish news media

[Axel Agren](#)¹, Elisabet Cedersund¹, Christine Swane²

¹Linköping University, Norrköping, Sweden. ²EGV Foundation, Copenhagen, Denmark

Abstract: In recent years, loneliness among older people has gained international attention in the media under the term “the loneliness epidemic”, where loneliness often is addressed both as a global public health problem and as a universal part of human existence. Hence, with risk of not acknowledging the cultural and individual differences of loneliness. Media representations are not objective “mirrors” of reality since representations in the media follow certain logics which influence what is addressed and how an event or phenomenon is portrayed. Previous cross-cultural studies have found that overall cultural values have an impact on feelings of loneliness. There is however need for studies focusing on variations between the logics of the media in different societies and how this influences how loneliness among older people is represented. News media articles from Sweden and Denmark addressing loneliness, from the years 2016 and 2017, will be analysed in this study. Focus is on how loneliness among older people is represented, in what ways loneliness is related to old age, how older people are positioned and what types of societal contexts and issues that are associated with loneliness. Initial findings indicate that Danish news media articles focus on social activities carried out by organisations, whereas Swedish articles are characterised by emphasis on politics and local eldercare. Articles from Denmark depart to a higher degree from the perspectives of older persons. Preliminary results suggest that variations in representations of loneliness occur even when comparing countries commonly labelled as belonging to the same welfare-state regime.

Symposia

Papers

Parallel Session 1C - Papers (1) Ortiz, (2) Wright and Lovatt, (3) Elliott O'Dare and Collins, (4) Markowski et al

09:30 - 10:30 Thursday, 8th July,
2021

**Track: Retirement and changing
working lives in later life**

Paper 1

How life history shaped retirement: Differences by socioeconomical status in the social support networks

Francisca Ortiz

University of Manchester, Manchester, United Kingdom

Abstract: The socioeconomical status of a person has been a variable largely added to the studies about the social support networks. This has a special relevance in the people facing retirement, as they are living the accumulation of all those inequalities through their lives. Then, this article aims to understand under which conditions do personal relationships and networks contribute (or not) to get a better inclusion of people into society during their retirement. From a theoretical point of view, this research used the frame of social support networks and personal networks. The research was done from a mixed method perspective. Fieldwork was done between October of 2019 and January of 2020 in Santiago of Chile. There were collected 30 life history of people retired and their social support networks. In this specific article, it is presented only four cases to illustrate the answer of the objective. The results show that the socioeconomical status through the life history of a person shaped their retirement. That is observed in the quality of life at retirement and the configurations of their social support networks. It is concluded that the life history of the older people explained a lot of the personal relationships and the composition of their current social support networks, as the socioeconomical differences. Not all older people during retirement is the same, and then, not all their social support networks are identical.

Paper 2

Reimagining retirement? Changing perspectives and experiences of retirement 1988 vs 2020 and beyond

Dr Valerie Wright, Dr Melanie Lovatt

University of Stirling, Stirling, United Kingdom

Abstract: Drawing upon archival evidence from the Mass Observation Archive from 1988 and empirical evidence from intergenerational online reading groups conducted in the summer of 2020 this paper will consider thoughts and feelings related to the transition to retirement and how this may change in the future. Analysis of responses to a directive entitled 'Time' from 1988 highlights the diverse ways in which older people's lives were affected by leaving full time employment, their experiences of managing their time and advice they would give others. In particular respondents' narratives were shaped by socio-cultural expectations of how time 'should be' spent post-retirement. When compared with analysis of discussions about similar themes arising in online reading groups conducted in the summer of 2020 there were similarities in how participants of all ages thought about retirement in the present. The effect of societal discourses concerning 'active' and 'productive' ageing were particularly evident. Yet when asked to 'reimagine the future' there was quite different views on what retirement might mean, especially for the younger participants, in light of changing retirement ages and the effect on quality of life. This paper will reflect on both of these methodologies, the use of archival historical source material in conjunction with qualitative methods, in thinking about continuities and changes in the experiences of retirement to the present day and how this may change in the future. Central throughout is placing the narratives of individuals, their thoughts, feelings, hopes and desires at the heart of the analysis.

Papers

Paper 3

Older workers in low pay: exploring the who and why questions in COVID times

Dr Catherine Elliott O'Dare, Dr Micheál Collins

University College Dublin, Dublin, Ireland

Abstract: Extant research revealed that the risk of low pay increases for workers in later life (Collins, 2017). This increase, previously not well understood, served as the impetus for our research. This research focused on older workers aged 55 and over in low pay in Ireland, with data collection occurring during the COVID-19 health pandemic. The pandemic has, as Fitzgerald (2020) elucidated, resulted in many bad (precarious, low-paid) jobs being deemed as essential for society. This unique context added additional insights from the participants to our research findings in relation to older workers in low waged employment.

The research adopted a mixed-method approach to explore the characteristics and experiences of older workers. Initially, quantitative analysis of Survey on Income and Living Conditions (SILC) data profiled the individual and sectoral characteristics of the older worker. This data informed the qualitative sampling strategy. Phone and online semi-structured interviews were then used to capture the participants' narratives and insights into working in low paid employment, before and during, the COVID-19 health pandemic in the retail, accommodation, and food sectors in Ireland.

The recent global health pandemic presented an unprecedented opportunity in highlighting the value and status of low-paid jobs and those older workers who do them. This research provides important and novel insights into the drivers and experiences of older men and women in low paid employment during, and before, the COVID-19 health pandemic.

Paper 4

Factors for decision making around the timing of retirement - Findings based on data by older nurses in South East London

Dr Marianne Markowski, Prof Karen Cleaver, Dr Sharon Weldon

University of Greenwich, London, United Kingdom

Abstract: There is currently an estimated shortfall of 40,000 nurses & midwives in the England, which is likely to have a direct effect on patients' safety (RCN 2019). It has become an economical imperative to extend older nurses working lives alongside other measures to address the nursing shortfall to cope with the increasing number of patients (Connolly et al. 2006). During the COVID-19 pandemic 'returning to work restrictions' for retired nurses have been lifted to facilitate this even further (NHS employers 2020). This mixed method project investigated factors related to older nurses' decision-making process to the timing of their retirement. The South of London has a higher number of nurses in the age bracket of 40-50 years employed than other parts of the UK (Nuffield 2019). Therefore, this project specifically focussed on this geographical area. Methods included: a literature review, online survey of nurses across seven different health organisations, interviews and a focus group. The findings resonated with results from other studies carried out in other parts of the world. In particular, that preparation towards retirement should be a pertinent topic for all employers of nurses and nurses themselves. Besides from the more generalisable findings, this talk will pre-dominantly address the qualitative findings elicited from nurses around their decision-making process, which demonstrate the interplay of factors playing an important role.

Papers

Parallel Session 1E - Papers (5) Mohd et al, (6) Moonan-Howard, (7) Villar et al, (8) Milligan et al

09:30 - 10:30 Thursday, 8th July,
2021

**Track: Gender diversity and
sexuality in later life: where are we
now and where are we going?**

Paper 5

Gender Differences In The Associations Between Structural Social Support, Functional Social Support And Quality Of Life Among Community-Dwelling Older Adults

Dr Tengku Amatullah Madeehah T Mohd¹, Assoc Prof
Farizah Hairi², Prof Noran Naqiah Hairi², Prof Wan Yuen
Choo²

¹Universiti Sains Islam Malaysia, Bandar Baru Nilai,
Malaysia. ²University of Malaya, Kuala Lumpur, Malaysia

Abstract: Social support among older adults has been associated with reduced mortality and better health. Differences in the relationships has been found between gender. This study aimed to investigate gender differences in linking social support with quality of life among rural community-dwelling older adults. A cross-sectional study design was used. Older adults aged 60 years and above from a rural district in Negeri Sembilan, Malaysia were included. The Lubben Social Network Scale and the Duke Social Support Index were used to measure social support. Quality of life (QOL) was measured using the SF-12 Medical Outcome Survey questionnaire. Structural equation modelling was used to analyse 2176 older adults. Our results show that only functional social support was associated directly with mental (Men, $\beta = 0.25$, Women $\beta = 0.35$) and physical components (Men $\beta = 0.08$, Women $\beta = 0.07$) of QOL in both genders. Among older women higher functional social support was associated with higher structural

support ($\beta = 0.10$), but this was not significant among men. Higher functional support among older men was associated with bigger effect size on the physical component of QOL mediated by activities of daily living compared to older women. In conclusion, gender moderates the relationships between functional social support and QOL. Social support has a bigger effect on the mental aspect among older women, while in men an indirect relationship with the physical aspect is more prominent. Therefore, social support interventions among older adults should consider gender differences.

Paper 6

A Qualitative Exploration of the Social Network Maintenance and Management Processes of Older Adults During the COVID-19 National Lockdown

Ms Eleanor Moonan-Howard

University of Southampton, Southampton, United
Kingdom

Abstract: There is a wealth of research on the damaging impact that social isolation has on an individual's health and wellbeing, and a parallel body of research on the various ways that one's family, friends, and community contacts enable them to live fulfilled and happy lives. Yet, there is less research about the processes and mechanisms that individual's may or may not employ to manage their social networks in light of external shocks or life events. This includes, creating new positive ties, maintaining existing positive ties and cutting existing negative ties. These issues have never been more relevant in a social climate in which routine socialisation practices have been challenged by national COVID-19 restrictions. This research project draws on qualitative data from remote interviews with older adults (60-80yrs) collected during the second national lockdown in England (Nov 2020) in one community in the South of England. It does so, to address two key questions. Firstly, have individuals in this community experienced a change in their friendship, family and community social networks since the start of the COVID-19 pandemic? Secondly, what processes, behaviours and resources have these individuals drawn upon to either contribute to or minimise these changes? This analysis touches on themes of adaptability, resilience and agency and the findings hold relevance for understanding the ways that older people negotiate and manage their social networks beyond the context of the current pandemic.

Papers

Paper 7

Gendered barriers to social connectivity in later life: a qualitative approach

Feliciano Villar¹, Anna Urbaniak², Lucie Vidovidoca³

¹University of Barcelona, Barcelona, Spain. ²Universität Wien, Wien, Austria. ³Masaryk University, Brno, Czech Republic

Abstract: Exclusion from social relationships in later life is a complex and dynamic process, in part because of the history of interactions of the person with the environment throughout the life course. In this study we aimed at exploring the factors that older people at risk of exclusion from social relations perceive as contributing to their present situation and as preventing them from having a richer or more satisfactory social network.

Forty-five older men and women aged 65 year and older coming from three different countries (15 from Austria, 15 from the Czech Republic, and 15 from Spain), participated in the study. An open-ended interview was applied, exploring, among others, barriers to social connectivity. Answers were content-analyzed, combining an inductive approach and concepts coming from socio-ecological models.

Results showed a great variety of gendered barriers to social connectivity. Health-related resources (including mobility difficulties) were central for many participants, but a history of poor close social relationships (including childlessness, or social transitions such as widowhood) and some environmental-difficulties (including accessibility aspects, or lack of social services) were also mentioned as important barriers. Our results underlined the key role of a life-span approach and subjective assessments to provide and implement person-centered interventions to effectively address exclusion from social relations in later life.

Paper 8

Wilderness as therapeutic landscapes for older people: towards an understanding of place-based mechanisms for wellbeing through nature-adventure activity.

Professor Christine Milligan, Dr Garuth Chalfont, Dr Alex Kaley, Professor Fiona Lobban

Lancaster University, Lancaster, United Kingdom

Abstract: Globally, there has been increased recognition within public health discourses of the importance of outdoor environments for improving and maintaining health and wellbeing in later life. This has led to increased interest in wilderness-based therapies and mental health policies that seek to endorse the inclusion of outdoor activities in mental health services and the social prescribing of nature. In particular, we focus on the more extreme end of the outdoor activity spectrum, where there has been a growth in older people's uptake of 'nature-adventure activities' ranging from rock climbing and skiing to ultra-running, mountain and long-distance cycling and more. Research has begun to credit the physical and emotional components of such nature-adventure activities with making a positive contribution to the wellbeing of older athletes, with a therapeutic relationship with the natural environment being seen as integral and defining of this engagement experience. Yet despite this growth, most studies measure a limited set of parameters and through relatively brief low-level involvement. Further, little work has focused on understanding the actual mechanisms through which these impacts are effected. In this paper, then, we draw on in-depth qualitative interviews with older people in the UK who are engaged in nature-adventure activities to begin to address some of these gaps by focusing on how active engagement with wilderness through these activities impacts on their health and wellbeing. In doing so we move toward the development of a working model that outlines the mechanisms that effect those impacts.

Papers

Parallel Session 1G - Papers (9) Killick, (10) Wood et al, (11) Bai et al, (12) Camp et al

09:30 - 10:30 Thursday, 8th July,
2021

**Track: Health innovation and
technology**

Paper 9 Identifying changes in daily routine via passive sensing

Dr Rebecca Killick

Lancaster University, Lancaster, United Kingdom

Abstract: We live in a world where older generations are often living further away from their children and where over 4m people over 65 in the UK are living alone (ONS, 2019). In light of this reality, families are seeking peace of mind that their elderly relatives are living well and maintaining an active lifestyle. We have been working with Howz, a provider of smart passive home monitoring, to provide insights into the daily routines of elderly people and identify when routines have changed.

Changes in routine, such as getting up more in the night or switching from using the hob to the microwave, have been linked to changes in wellbeing. If left unchecked, these seemingly insignificant changes can compound into serious illnesses requiring hospitalization. The aim of the Howz system is to identify these subtle changes early, alert users and/or carers so that conversations can take place earlier to ultimately avoid hospitalization.

This talk will describe, at a high level, several recent advances in statistical techniques that have allowed us to identify these subtle changes. The aim is to demonstrate how advances in statistics can be coupled with technology to aid research in the area of ageing.

Paper 10 Safer walking technology can promote wellbeing and identity for people with early-stage dementia

Dr. Esme Wood¹, Dr John Woolham², Dr. Gillian Ward³,
Dr. Carol Percy⁴

¹Coventry University, Coventry, United Kingdom. ²Kings College London, London, United Kingdom. ³Royal College of Occupational Therapists, London, United Kingdom. ⁴Coventry University, Coventry, United Kingdom

Abstract: Introduction: Safer walking technology (SWT) is used by people with dementia to access the outdoor environment. This research sought to identify the type of SWT currently being used and understand the potential of SWT to support people with early-stage dementia to maintain engagement in meaningful activities outdoors.

Methods: This qualitative study was co- designed with a stakeholder advisory group that included occupational therapists, people with dementia, family carers and older people with an interest in technology. Data was collected from 18 in-depth interviews with two groups of people - people living with early-stage dementia and family carers of people with dementia.

Results: Participants within the study used SWT to undertake a wide range of outdoor activities including dog walking, fishing, and cycling. These activities formed part of their identity and enabled them to actively maintain their own physical and mental health, with several participants also reporting a spiritual connection with being outdoors in nature. Family carers were more likely to adopt a purpose-built device to track their relative, whereas people living with dementia were more likely to way-find and seek to use existing technology they were familiar with, such as their smartphone.

Conclusions: SWT has the potential to prolong maintenance of a healthy lifestyle for people with early-stage dementia, supporting their identity and enabling people to continue doing meaningful outdoor activities. Both people living with dementia and family carers are using this technology in innovative ways to compensate for the lack of suitable technologies to meet all their needs.

Papers

Paper 11

Enhancing Digital Utilisation and Satisfaction: Effectiveness of Mobile Technology Training Interventions for Ageing Adults

Associate Professor *Xue Bai*^{1,2}, PhD Student *Shuai Zhou*¹, Project Assistant *Jinjin Zhang*³

¹Department of Applied Social Sciences, The Hong Kong Polytechnic University, Kowloon, Hong Kong. ²The Institute of Active Ageing, Kowloon, Hong Kong. ³The Institute of Active Ageing, The Hong Kong Polytechnic University, Kowloon, Hong Kong

Abstract: With the intensified daily use of mobile technology owing to quarantine and social distance restrictions under the COVID-19 pandemic, older people who have limited access to and low digital literacy for mobile technology become even more vulnerable and disadvantaged. Guided by theories on technology acceptance, a mobile technology training programme was developed for promoting digital utilisation and satisfaction among ageing adults (age 50+). From 2019 to 2021, this programme delivered a range of training workshops on social networking, leisure, routine instrumental tasks, online services, privacy and security, either face-to-face or online. Following a single-group pre-post design, the t-test results showed that after the training, participants (N=194) reported significantly increased digital satisfaction (Mean-pre=3.49; Mean-post = 3.77; $t=3.45$, $p<0.001$) and reduced concerns about security (Mean-pre=2.62; Mean-post=2.95; $t=3.73$, $p<0.001$). No significant change was observed in the sense of anxiety related to the utilisation of mobile technology ($p>0.05$). Moreover, the ordered logistic regression analysis further indicated that men (OR=2.22, CI=1.36-3.60), higher expectations for learning (OR=1.15, CI=1.02-1.29), willingness to serve as a teaching assistant in training (OR=1.84, CI=1.16-2.93), less technology anxiety (OR=0.53, CI=0.38-0.73), and higher sense of digital security (OR=2.30, CI=1.67-3.18) were significantly associated with higher digital satisfaction. Notably, there were observable differences in training outcomes by gender, indicating more concerns about security and technology anxiety among women than men. The programme is effective and promising in enhancing digital utilisation and satisfaction among ageing adults who are potentially isolated. Future research and interventions should mindfully respond to gender differences and address technology anxiety.

Paper 12

Understanding older adults' perceptions of ADLs and in-home monitoring technology

Miss *Nicola Camp*¹, Dr *Martin Lewis*², Dr *Kirsty Hunter*¹, Dr *Julie Johnston*¹, Dr *Daniele Magistro*¹

¹Nottingham Trent University, Nottingham, United Kingdom. ²University of Derby, Derby, United Kingdom

Abstract: Many older adults prefer to remain in their own home for as long as possible, however there are still questions surrounding how best to ensure that an individual can cope with autonomous living. Technological monitoring systems are an attractive solution, but there is disagreement relating to Activities of Daily Living (ADLs) and the optimal technologies which should be used to monitor them. Given the importance of user input when designing such systems, we interviewed older adults (aged 55+) to understand their perceptions of important ADLs and the types of technologies they would be willing to use. Semi-structured interviews were conducted online with 32 UK adults, divided equally into a 'younger' group (55-69 years) and an 'older' group (70+ years). Both groups agreed that ADLs related to personal hygiene and feeding were the most important and highlighted the value of socialising. The 'older' group considered several activities to be more important than their younger counterparts, including stair use and foot care. The older group had less existing knowledge of monitoring technology but were more willing to accept wearable sensors than the younger group. The younger group preferred sensors placed within the home but highlighted that they would not have them until they felt that daily life was becoming a struggle. Overall, technological monitoring systems are perceived to be an acceptable method of monitoring ADLs. However, developers and carers need to be aware that individuals may express differences in willingness to engage with certain types of technology depending on their age and circumstances.

Papers

Parallel Session 1H - Papers (13) Cullen and Wilson, (14) Kanon et al, (15) Buckner et al, (16) Dickins et al

09:30 - 10:30 Thursday, 8th July,
2021

Track: Housing for ageing in the
21st century

Paper 13

A global review of residential care models for the ageing military veteran population: What is available and what evidence exists to demonstrate their impact on health and social care outcomes?

Ms Helen Cullen, Dr Gemma Wilson

Northumbria University, Newcastle Upon Tyne, United Kingdom

Abstract: With ageing population numbers continuing to rise globally, a systematic narrative review of residential care provision in a non-hospitalised setting specifically for military veterans over 65 years of age was conducted. This unique employment group has access to residential care that is tailored to meet their needs, however little is known about the impact these settings have on resident outcomes, and whether there is a need for this exclusive provision.

After completing a systematic search strategy, and removing all papers that did not meet inclusion criteria, a total of 14 peer-reviewed articles were included in the study. A grey-literature search also identified veteran specific residential options in 10 countries.

The review found the majority of establishments accepted residents from military and non-military backgrounds, and established there is little empirical evidence that identifies the health and social care outcomes of military veterans in non-hospital setting

residential care. The majority of provision for veterans in the UK is facilitated by third sector military charities. Two residential care options identified in the USA warrant further investigation to assess the potential of implementation in other countries.

The considerable amount of provision available to UK veterans and lack of research invites further investigation to evidence health and social care outcomes, inform service development and identify whether this cohort of the ageing population benefits from tailored provision. These findings would benefit comparable global provision.

Paper 14

Attitudes of older people towards integration of new digital technologies in retirement housing

Dr Husam Abo Kanon¹, Prof Rose Gilroy², Prof Thomas Scharf², Dr Jennifer Liddle²

¹Peterborough, United Kingdom. ²Newcastle University, Newcastle upon Tyne, United Kingdom

Abstract: The convergence of new technologies around the Internet of Things provides opportunities to revise the technology service offered to older people in retirement housing. To keep pace with rapid digital technology development and residents' changing demographic characteristics, retirement housing providers are keen to develop new digital technology services that can better support residents to achieve a higher quality and more independent life (HACT, 2016). Against this background, this paper draws on the findings of focus groups conducted with older people living in Anchor Hanover housing aimed at exploring their views towards integrating new home-based digital technology services. Participants discussed and tested voice-activated technology and digital technology scenarios that aim to improve three key themes in the retirement housing setting: communication, care and wellbeing. In the communication scenario, voice-activated technology options were presented to enable older people residents accessing information and communicating with others smartly from home. The care scenario focused on presenting innovation options that maintain safety in the home using automatic fall detection and voice-activation technologies that detect and prevent falls respectively. The wellbeing scenario engaged participants in a discussion of voice-activation and wearable smart technologies that empower older people to self-tracking and monitoring activities and health signs that maintain

Papers

wellbeing. Findings suggest voice-activated interface technology to develop new home-based digital services for older people and to facilitate a digital engagement approach in the use of technology in the home. The paper also identified opportunities and challenges concerning developing new digital services for older people around voice activated technology.

Paper 15

Rehousing older social housing tenants: survey findings on health-related processes and outcomes

Dr Stefanie Buckner¹, Dr Lindsay Blank², Dr Calum Mattocks¹

¹University of Cambridge, Cambridge, United Kingdom.

²University of Sheffield, Sheffield, United Kingdom

Abstract: In the context of a social housing crisis, the UK must meet the housing needs of an ageing population. Rehousing schemes run by social housing providers are important means to support older (aged 55+) social housing tenants to move to appropriate homes. How these schemes are experienced by older adults, and what effects they have, needs to be better understood.

This paper is based on an ongoing study of the health-related processes and outcomes linked to the rehousing of older social housing tenants in Hackney (London). The study examines older social housing tenants' experiences of four local authority-supported rehousing schemes (Downsizing; Regeneration; Housing Moves; Seaside & Country Homes) through a mixed methods design. Here, the findings from a survey with participants in the four schemes are presented. The 766 questionnaires sent resulted in 62 valid responses (8.1%). As well as helpful aspects (e.g. local authority support) and challenges (e.g. stressful process) of being rehoused, the survey identified welcome (e.g. a home that is easier to keep warm) and unwelcome outcomes (e.g. higher rent) of having moved. Welcome effects on health and wellbeing became apparent (e.g. a better quality of life), yet unwelcome effects (e.g. loneliness) were also visible. A more detailed picture will be presented where findings are broken down by rehousing scheme.

The survey is complemented by in-depth qualitative exploration (e.g. Photovoice). The study findings can guide efforts by Hackney Council and other social housing providers to improve rehousing schemes for older tenants and optimise their effects.

Paper 16

Using Data to Inform Service Development for People Living in Retirement Villages

Dr Angela Joe¹, Dr Marissa Dickins^{1,2}, Professor Judy Lowthian^{1,3,4}, Associate Professor Liz Cyarto^{1,4,5}

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²Southern Synergy, Department of Psychiatry at Monash Health, Southern Clinical School, Monash University, Melbourne, Australia. ³School of Public Health and Preventive Medicine, Monash University, Melbourne, Australia. ⁴Faculty of Health and Behavioural Sciences, University of Queensland, Brisbane, Australia.

⁵Department of Psychiatry, University of Melbourne, Melbourne, Australia

Abstract: Over 184,000 Australians live in retirement villages, representing 6% of the population aged ≥ 65 years. There is a dearth of research that has explored the health and wellbeing of retirement village residents. As a basis for developing supportive services, it is important to understand the characteristics of this older cohort. A survey focusing on the physical, cognitive, mental and social wellbeing of residents was distributed in 14 retirement villages throughout Queensland. Descriptive analyses were conducted to ascertain patterns within the data. Latent class analysis was performed to separate individuals within the community into discrete groups, with a focus on identifying the groups of residents for whom different services would be of benefit. Surveys were returned by 883 individuals, resulting in a response rate of 59%. Two-thirds (67%) of respondents indicated that their health was excellent, very good or good, however polypharmacy (36%), falls (33%), unplanned hospitalisations (31%) and poor memory (21%) were common. Although three-quarters (75%) of residents were satisfied with their relationships with family and friends, one in ten residents (11%) rarely or never spent time with someone they did not live with. Latent class analysis revealed distinct groups of residents, for whom different interventions could be tailored, ranging from preventive programs through to further clinical and personal care. Residents of retirement villages are a distinct sub-population of the older community. Findings are currently being used to guide co-design initiatives that improve or maintain the health and wellbeing of this cohort into the future.

Papers

Parallel Session 1L - Papers (17) Mitchell et al, (18) Alter et al, (19) Gibson et al, (20) Maddock et al

09:30 - 10:30 Thursday, 8th July,
2021

Track: Sustainability and health in
the environment

Paper 17

Planting for positivity in a pandemic: a reflection on gardening for health and wellbeing of older adults.

Miss Louise Mitchell, Dr Michael Hardman, Dr Michelle Howarth, Professor Penny Cook

The University of Salford, Manchester, United Kingdom

Abstract: Global populations and urbanisation continue to increase, putting pressure on resources, including healthcare and environmental services. Health services are being stretched beyond working limits, particularly in the Global North, with longer life expectancies and comorbidity issues. Additionally, coronavirus swept the globe in the growing season of 2020, changing life as we knew it. Overnight, people were being asked to stay at home, isolated away from others and sacrifice their everyday outdoor life. Over the course of lockdown, older populations were shown to be more vulnerable to the effects of the virus, causing the government to categorise them in the shielding group. Consequently, the lockdown saw an increased desire to get outdoors, and for some, take part in gardening activities. Currently, reports of accessibility to green environments improves mental and physical health, providing a way to cope with changes to lifestyles impacted by Coronavirus. Yet, as lockdown began to be lifted, and people were able to access green environments once more, the older populations were left shielding, preventing them from accessing community gardens, and consequently reaping the mental, physical and social benefits from doing so.

This paper reflects on a PhD project, with the pandemic

affecting face-to-face data collection. It reviews literature based on community growing projects and their impacts on health and wellbeing pre-covid. Through in-depth interviews, this paper will explore the impacts with those directly affected by the closure of spaces, including older group participants alongside the spaces themselves, and consequently the expected longer-term impact on these grassroots initiatives.

Paper 18

Making better fish to fry: Emerging insights on methods for exchanging older peoples' fish consumption practices to inform sustainable, ready-to-cook fish product development

Ms Hayley Alter, Dr Emmanuel Tseklevs, Dr Serena Pollastri, Dr David Hands

ImaginationLancaster, Lancaster University, Lancaster, United Kingdom

Abstract: Ageing populations across the European Atlantic Area (EAA) are at elevated risk of nutritional insecurity. The socio-economic and environmental barriers to nutrition experienced across demographics are compounded with advancing age. Including fish in our diets—and particularly, fish protein hydrolysates—can have beneficial effects in preventing several health conditions associated with older age. The aim of SEAFOOD-AGE is to innovate a Ready-to-Cook (RTC) fish product that improves access to these nutrients affordably and sustainably for ageing populations by developing circular economy methods that exploit the maritime dimension in EAA regions.

These new technical methods for industry are not currently used in the RTC fish product value chain. This surfaces a significant challenge of adoption in practices. In particular, we ask, what it will take for older populations across EAA regions to buy and eat a RTC product of this kind given their existing practices around eating fish. This paper describes and evaluates methods in a workshop held at Blackpool Carers in March 2020, and later, online methods developed and tested to explore and exchange experiences with older people on how fish and seafood is being purchased, prepared and eaten, including associated values, barriers and affordances. In particular, the paper reports on the insights from engagement that shaped how the methods could best enable participants to reflect on their relationships with the fish products they consume. The

Papers

data participants generate contributes to a 'design brief' for manufacturers and retailers to refine the product in accordance with their own customers and needs.

Paper 19

Environmental Design for Intergenerational Care of People with Dementia - What Lessons can we learn from the Japanese Experience?

Dr Grant Gibson¹, Dr Martin Quirke², Dr Melanie Lovatt¹

¹University of Stirling, Stirling, United Kingdom.

²Dementia Services Development Centre, University of Stirling, Stirling, United Kingdom

Abstract: Intergenerational initiatives, which bring older and younger generations into contact with each other are receiving an increasing amount of attention in public policy and health and social care delivery as a means to support the care, health and wellbeing of older people with dementia. Japan, the world's 'oldest' society has been integrating intergenerational care programmes into its dementia care system, where it is seen as one avenue through which care can be supported for its rapidly growing population of older people with dementia. Many countries are drawing inspiration from these intergenerational programmes, but research exploring how these programmes can be translated in other countries, or what features would be required to mainstream such care programmes is more limited.

This presentation explores the role environmental design plays in supporting intergenerational initiatives in Japan. Adopting a qualitative methodology using observations, workshops and photographic elicitations within two residential care facilities, a community centre and supported housing scheme and a restaurant staffed by people with dementia, the research illustrates the role of environmental design in supporting intergenerational care. Two key themes are discussed: encouraging community engagement through intergenerational shared spaces, and the role of intergenerationality in supporting social and economic participation. We conclude with a discussion of some of the key principles through which other countries can translate lessons gained from the Japanese experience of intergenerational programmes into their own health and social care systems.

Paper 20

Discovering the benefits of low carbon homes for older people: based on a co-produced "values" framework

Dr Carol Maddock, Dr Deborah Morgan, Dr Charles Musselwhite

Swansea University, Swansea, United Kingdom

Abstract: The transition to and engagement in low carbon homes is unlikely to be achieved without meaningful engagement with wider society. A lack of understanding of social values in people's home energy decision making can lead to resistance in the uptake of technologies. Our focus within the Active Building Centre Research Programme is on the impact of active/low carbon homes on older people. We have developed a model for public involvement and engagement which includes an advisory board (multi-disciplinary stakeholders) and expert panel comprised of 'lay' older adults with diverse domestic energy consumption experiences. A series of workshops have explored older people's relationship to personal energy consumption. These discussions have provided a broad concept of the 'value of energy' and positioning of active homes; capturing the wider effects on health and wellbeing including impacts on every-day lives and social practices. This presentation will share perspectives of home and lived energy experiences and how they have informed the development of a social returns on investment framework (SROI). The framework aims to measure outcomes that are relevant to older people and will account for a broad concept of "value". This presentation includes the strategies employed to create the space where stakeholders can reflect on how energy practices (and COVID) affect their lives. Findings reveal the meaning and value of low carbon homes were expressed in terms of: emotional (warm and welcoming); metaphorical (sustaining -the foundation for living life); and physical (beyond shelter); indicating the necessity of inclusion in outcome measures.

Papers

Parallel Session 1M - Papers (21) Coleman, (22) Maguire and Carney, (23) Stuart et al, (24) Prescott et al

09:30 - 10:30 Thursday, 8th July,
2021

Track: Diversity and culture in later
life: where are we now and where
are we going?

Paper 21

Studying older lives through their correspondence and other written records

Emeritus Professor Peter Coleman

University of Southampton, Southampton, United
Kingdom

Abstract: Many persons leave written records of their experience of growing old. Some complete regular diary entries or occasional essays, but most write letters to friends and families in which they include reflections on their lives. A person's own writings, in particular to confidants, provide more considered opinions than interview responses do. In this presentation the author reflects on his own experience of studying the letters written by the 19th century musician Franz Liszt from his fiftieth year to his death in his seventy fifth year (1860-86). Liszt wrote regularly to family and friends as well as to colleagues in the world of music, and fortunately the vast majority of these letters survive in a variety of published form. Undertaking an analysis of them all is a huge undertaking but very rewarding because comparisons can be made between what Liszt discloses of his thoughts and feelings to a variety of different correspondents. Liszt's later life was difficult. Although universally celebrated as a brilliant pianist when young, his later attempts to be acknowledged as a composer were only moderately successful. Moreover his personal life in his later years was beset by major bereavements, family conflicts and disappointment. As a consequence

he regularly suffered bouts of serious depression which brought him close to suicide at times. An analysis of his correspondence reveals his dominant modes of coping with the various stresses he encountered in his later life and the different types of support provided by each of his important confidants.

Paper 22

"Oldies come bottom of Grim Reaper hierarchy": a qualitative media analysis of UK newspaper coverage of who is 'at risk' during the first wave of the COVID-19 pandemic

Dr Stephanie Maguire, Dr Gemma Carney

Queen's University, Belfast, United Kingdom

Abstract: This article examines how a hierarchy of those 'at risk' from coronavirus is established in UK media coverage of the first wave of the COVID-19 pandemic. A qualitative media analysis of public messaging, hero searching and letters to the editor in five high circulation newspapers provides a detailed account of media representations of at risk groups during the pandemic. Older people are presented as the most at risk, with disability as a secondary risk factor. Opinion pieces by older celebrities and letters to the editor reveal resistance from older people who wish to be counted as human beings with rights to assess their own risk rather than an undifferentiated mass of the 'vulnerable.' We conclude that media representations across progressive and conservative papers reflect established age stereotypes and paternalistic views towards older people. The master narrative that only older people or those with 'underlying conditions' could die from the virus had the effect of distancing the general population from those 'at risk,' thereby making the majority feel safer. We conclude that in order to break away from this narrative establishing a hierarchy of the vulnerable social policy scholars and policy-makers need to be more proactive in establishing a legally enforceable international rights framework for the protection of older people.

Papers

Paper 23

Perspectives on Healthy Ageing from the North of England.

Professor Kaz Stuart¹, Dr Tracy Hayes¹, Dr Joanne Hudson²

¹University of Cumbria, Carlisle, United Kingdom.

²Swansea University, Swansea, United Kingdom

Abstract: Ageing can be an area fraught with assumptions about when old age starts, what it is like, and what individuals might be able to do when they are older. Newspaper headlines and even street signage may encourage us to think of older adults as frail and helpless. But not all people age equally and experiences of older age are disparate. An additional difficulty in the field is that perceptions of ageing are highly contingent on individuals' context and age again suggesting that assumptions and stereotypes are misplaced. The outbreak of Covid-19 has brought increased attention to older adults, in the context of care homes, and this may well have altered thinking about older age too. This leads to the following research questions:

- When is old age?
- What do people expect from older age in relation to autonomy and activity?
- Have perceptions of older age changed as a result of Covid-19?
- How do all of these vary by demographics?

The Healthy Ageing Group from the Centre for Research in Health and Society at the University of Cumbria conducted research in this contested space to find out what people in the North of England think about ageing. Two phases of research were conducted, one survey based and one autoethnographic. The findings of this research will be presented along with their relevance for planning, practice and further research.

Paper 24

Resisting the negative stereotypes of ageing: How Britain's nuclear test veterans try to maintain health and wellbeing in older age

Miss Amy Prescott, Professor Louise Mansfield, Dr Alistair John

Brunel University London, London, United Kingdom

Abstract: Between 1952-1958, ~22,000 members of the British Armed Forces took part in 21 top-secret atmospheric nuclear tests in Australia and the South Pacific. Sixty-three years since the last British nuclear test, these individuals are now in the 'oldest old' age group (80yrs+) and there are no published studies examining the impact of the tests on their identity, health and wellbeing. Consequently, the nuances of ageing and engagement levels with leisure, community, culture and physical activity have not been fully investigated.

This biographical narrative study employed two rounds of life-history interviews (n=41) with 29 members of the British Nuclear Test Veteran (BNTV) community, employing both telephone and face-to-face interviews. Narrative analysis was employed to scrutinise these life histories. Three creative nonfiction stories were then created to represent the BNTVs, featuring 'big', 'small', shared and exceptional experiences.

This presentation will focus on the BNTVs inherent need to keep busy in an attempt to resist the perceived negative stereotypes of ageing. Such stereotypes (e.g., losing independence and function, moving into care homes, or 'stagnating') were the main motivators for staying active. This presentation will also explore how volunteering, gardening, physical activity, reading, religion and community groups help to maintain health and wellbeing within this population group.

It is intended that these findings will contribute to both policy and practice regarding engagement of older military veterans in social, leisure, community and physical activities to improve feelings of loneliness and further maintain their health and wellbeing in later life.

Papers

Parallel Session 2C - Papers (25) De Poli et al, (26) Fowler Davis, (27) Ezulike

11:00 - 12:00 Thursday, 8th July,
2021

**Track: Innovation in theories,
methods and critical perspectives**

Paper 25

Co-Creating Dementia Care in County Durham: Learning from a 6-year action research study

Ms Chiara De Poli¹, Prof Jan Oyebo², Dr Mara Airoidi³,
Mr Richard Glover⁴, Ms Gill Findley⁵

¹LSE, London, United Kingdom. ²Centre for Applied
Dementia Studies, University of Bradford, Bradford,
United Kingdom. ³Blavatnik School of Government,
University of Oxford, Oxford, United Kingdom. ⁴NHS
North of England Commissioning Support, Durham,
United Kingdom. ⁵NHS County Durham CCG, Durham,
United Kingdom

Abstract: Despite evidence and widespread belief that
appropriate support for people with dementia and their
families improves quality of life and could reduce health
and social care costs, in practice, delivery of timely,
person-centred dementia care is difficult to achieve.

Within this 6-year, Health Foundation-funded, action-
research study, we (3 researchers, a research facilitator,
local stakeholders) embarked on a journey to try and
improve dementia care, using co-creation, in one English
county.

In this presentation, we will draw on a range of data,
including process notes, questionnaires and minutes/
transcripts of workshops, meetings and focus groups
to present our learning about the process of achieving
change using co-creation. Challenges have included:
gaining broad enough local project championship
to mitigate against reorganisation/turbulence;
communicating across different 'communities' (e.g.
people living with dementia, family carers, professionals,

commissioners, researchers); negotiating across different
organisational cultures (e.g. health services, social care
services, third sector, academia); balancing the time
and effort needed to involve stakeholders against the
pressure to take decisions; and ensuring ownership of
improvements to ensure sustainability. Facilitators have
included the make-up of the team; taking a bottom-
up approach; presenting evidence to show change is
needed and may be beneficial; keeping change as simple
as possible; aligning with existing meetings/initiatives
and seizing windows of opportunity.

Our experience suggests that while co-creation may
be desirable, as it promotes inclusive, collaborative
processes and fosters organic, context-specific change, it
is also complex and resource-intensive. It remains to be
seen whether co-created service improvements are more
successful than others.

Paper 26

The Impact of Organisational Support to Care Homes during COVID-19 – using appreciative enquiry

Dr Sally Fowler Davis

Sheffield Hallam University, Sheffield, United Kingdom

Abstract: There are over 2300 care homes in the North
East and Yorkshire Region (NE&Y), caring for some of
the most vulnerable people in their communities. In
April 2020 North East and Yorkshire Region (NE&Y)
sought to proactive and co-ordinated support, in
response to the challenges of the pandemic. The
Enhanced Universal Support Offer (EUSO) was a
pandemic incident command response to support care
homes. An appreciative enquiry was undertaken
with representative stakeholders and a steering group
of expert representatives from organisations in the
region co-produced the evaluation with academic
support. Data (thematic) analysis resulted in five high
level themes: Communication, Working Relationships,
Systemic Perceptions, COVID Implementation, and
Organisational Support which were further synthesized
to demonstrate best practices at three system levels
(Micro/Meso/ and Macro). Integrated leadership
practices were associated with joint working (health,
local authority, and care homes) were important assets,
enabling care home receptivity and a more co-ordinated
response. Appreciative enquiry demonstrates an
increased appreciation of the policy and principles within
the enhanced offer and value of the investment and
focus on care home residents and workforce. Enablers to

Papers

implementation support ongoing learning and reflected a need to appreciate the care homes' knowledge and experience of resident wellbeing, and more fully involve them in the design of the support. Further support and evaluation is needed to demonstrate how support for People with dementia was effectively managed, which went beyond the initial EUSO.

Paper 27

Co-research with older adults: Benefits, challenges, and future of participatory approaches in social gerontological research in developing countries.

Ms. Chigozie Ezulike

City University of Hong Kong, Hong Kong, Hong Kong

Abstract: The discourse on the participation of study participants in the research process, is characterised by different terms. This includes action research, where study partnership with participants is intended to promote social change; user co-researchers, in which service users serve as co-researchers; as well as empowerment and emancipatory research, which involves personal development and collaborations between researchers and participants while acknowledging differences. Some gerontological studies on health and social care have taken a participatory approach to the study of older adults. However, most of such studies tend to be mainly in developed countries as traditional methods of social research are still very dominant in developing countries such as are seen in Africa. Co-research with older adults as a form of participatory approach is of great benefit. To the co-researchers, it facilitates the learning of new skills for some and the re-use of latent skills for others. To academic researchers, it promotes their personal development. And to the research, it facilitates the elicitation of rich research data. However, some challenges are associated with its use, one of which is some co-researchers often lack skills to prompt discussions on significant issues. Nonetheless, the challenges could be mitigated to maximise the benefits of the approach. Gerontological researchers in developing countries are thus, strongly encouraged to adopt the participatory research approach in studying older adults and old-age related issues. This would enable them to harness the diverse benefits of the research approach, and most importantly serve as a means for community development.

Parallel Session 2E - Papers (28) Horne et al, (29) Ferguson, (30) Sacco et al, (31) Gopinath et al

11:00 - 12:00 Thursday, 8th July,
2021

Track: Changing connections and
relationships

Paper 28

Co-design of a training resource to support care home staff to meet care home resident's sexuality, intimacy and relationship needs

Dr Maria Horne¹, Dr Jane Youell¹, Dr Laura Brown², Dr Paul Simpson³, Dr Tommy Dickinson⁴, Professor Christine Brown Wilson⁵

¹University of Leeds, Leeds, United Kingdom. ²University of Manchester, Manchester, United Kingdom. ³None, Manchester, United Kingdom. ⁴Kings College, London, United Kingdom. ⁵Queens University, Belfast, United Kingdom

Abstract: Having positive intimate, sexual and relational experiences is an important issue for older adults in care settings. Research evidence highlights that care home staff find supporting residents' sexuality, intimacy and relationship needs challenging and that training and guidance on this sensitive issue is needed for them to enhance person-centred care in this area of need (Simpson et al., 2018). A recent scoping review found few education interventions and training resources existed to support care home staff to meet care home resident's sexuality, intimacy and relationship needs (Horne et al., 2021). In addition, the evidence suggests that the care home workforce are diverse, with differing educational levels, unclear career paths, and varied experience in clinical settings, making the development of effective education and training programmes challenging (Surr et al, 2017). This paper presents the findings from phase 1 of a mixed methods study that aimed to co-create an interactive, reality-based training programme to support care home staff to enhance

Papers

person-centred care around the sexuality, intimacy and relationship needs of their residents, using the principles of community-based participatory research (CBPR) (Minkler et al., 2008). CBPR informed a series of four participatory workshops, using story boards, between care home staff, managers residents, their significant others and academic researchers to collaboratively develop the training programme. Utilisation of the CBPR process and conducting/facilitating the workshops in order to co-design and develop the training resource shall be presented.

Paper 29

How older people living in care homes are supported: a typology of resident support networks

[Dr Jennifer Ferguson](#)

University of Stirling, Stirling, United Kingdom

Abstract: The support provided to older people living in care homes is pivotal to their wellbeing and, as such, understanding systematic patterns in support provision is important for maintaining wellbeing. Despite care frameworks acknowledging the importance of the supportive and meaningful relationships surrounding residents, there is very little research on what these support networks look like for individual residents, or whether there are systematic patterns between the support networks of residents that we can learn from. This paper not only describes the support networks of individual care home residents, but also creates a typology of support networks for older people living in care homes. Relational network data and qualitative interview data were collected with 36 older people living in care homes in Scotland. This paper will argue that the two main dimensions driving differences in support networks which are (1) the compartmentalisation of social ties into purposeful cliques versus a single, bonded group of social connections, and (2) the presence (or absence) of a formal care home tie. This analysis advances our knowledge of social support within care homes, allows the exploration of compositional and structural patterns of support between types of support networks and develops our understanding of how residents feel supported while living in a care home.

Paper 30

Later life partnerships and quality of life: the role of non-marital and nonresident relationships in Sweden

[Dr Lawrence B. Sacco](#)¹, Dr Stefanie König², Dr Robin Högnäs¹, Dr Martin Hyde³, Professor Hugo Westerlund¹, Dr Loretta G. Platts¹

¹Stress Research Institute, Department of Psychology, Stockholm University, Stockholm, Sweden. ²Department of Psychology and Centre of Ageing and Health (AgeCap), University of Gothenburg, Gothenburg, Sweden. ³Centre for Innovative Ageing, Swansea University, Swansea, United Kingdom

Abstract: Older adults are shaping new forms of intimacy in which the primacy of marriage is giving way to other relationship forms such as nonresident partnerships. We examined how partnership status relates to quality of life with the twin objectives of assessing: 1) whether relationship forms other than marriage mitigate the risk of lower quality of life among older adults who are neither married nor cohabiting (i.e., never married, divorced and widowed) and 2) how quality of life gains from living-apart-together (LAT) compare to gains from cohabiting relationships. Gender stratified analyses were performed using the annual HEalth, Ageing and Retirement Transitions in Sweden (HEARTS, 2015–2019) study, a prospective web/postal survey drawn from national registers of Swedish residents aged 60–66 years in 2015. Each year participants provided information about partnership, cohabitation and relationship status as well as CASP-12 quality of life. Unmarried versus married/cohabiting participants reported lower quality of life, an association that was mitigated for unmarried participants who were in romantic relationships or had nonresident arrangements. Quality of life for unmarried men in a romantic relationship resembled that of married/cohabiting men; while quality of life for unmarried women in a relationship was midway between being married/cohabiting and being single. To conclude, having any relationship mattered for men's quality of life; while relationships formalized by marriage or cohabitation with a partner, mattered more than weaker intimate attachments for women's quality of life.

Papers

Paper 31

Older couples living apart in care and community: stories of commitment

Dr Manik Gopinath, Dr Caroline Holland, Professor Sheila Peace

The Open University, Milton Keynes, United Kingdom

Abstract: Longer lives can lead to changing life events. More older adults will experience prolonged couplehood in later life with postponement of widowhood to later ages alongside living with chronic illness with both physical and cognitive change. The increased possibility of moving into a care home while being partnered therefore is becoming more common. In this paper we draw on detailed empirical work undertaken in one location in South-east England. This pilot qualitative research explored the experience of older couples who come to live apart by a move to a care home when one partner's need for care can no longer be provided in their own home. Couples were involved in three interviews including: an in-depth interview undertaken with the partner living in the community; and interviews and observations with the couple together in the care home, and resident partner alone (some of whom had cognitive impairments). Reporting findings from seven couples in long-standing partnerships, this paper drawing on sociological understandings of 'commitment' (Johnson, 1991) as personal, moral and structural explores how past, present and future lives will endure in different ways shaped by continuities and changes in intimate relationships with implications for wellbeing. Consideration is given to this form of living apart at end of life.

Johnson, M. (1991) Commitment to personal relationships. In: W. Jones and Periman, D. (eds.). *Advances in Personal Relationships* (3.) London: Jessica Kingsley, 117–143

Parallel Session 2F - Papers (32) Sattar et al, (33) Poland et al, (34) Lowthian et al, (35) Chadborn et al

11:00 - 12:00 Thursday, 8th July, 2021

Track: Health and social care practices, innovations and futures

Paper 32

Enhanced Health in Care Homes in the UK: The role of the Frailty Nurse

Dr Zeibeda (Zeb) Sattar¹, Dr Gemma Wilson², Professor Alison Steven²

¹northumbria university, newcsatle upon tyne, United Kingdom. ²northumbria university, newcastle upon tyne, United Kingdom

Abstract: Frailty Nurse roles were developed to support care homes to co-ordinate and enhance the quality of care of residents. This study aimed to explore the implementation process of the Enhanced Health for Care Homes (EHCH) framework, a proactive model of care (NHS, 2020), in one locality in the North of England, specifically focusing on the Frailty Nurse role.

A qualitative method was employed, 28 semi-structured interviews were carried out at three care homes. Key stakeholders, frailty nurses, care staff and residents participated in this study.

Study findings suggest that role expectations, trust and relationship building were all critical to Frailty Nurse role implementation. Despite a whole systems approach being undertaken, there were mixed interpretations of the remit of Frailty Nurses and stakeholders felt some confusion regarding the role. Within the context of this Enhanced Health in Care Homes framework, workforce availability issues necessitated a strategic decision to change the role to one of 'trainee' which further compounded confusion regarding role expectations, however this abated over time. Relationship building increased social capital and staff empowerment were the most distinct benefits of implementing the EHCH

Papers

framework. These arose primarily through care home alignment; a key feature of the EHCH framework. Regular daily resident visits by Frailty Nurses also facilitated relationship building with care staff and families. This study illustrates that the introduction of roles which works in a dedicated way across care homes crosses, such as the 'Frailty Nurse' can facilitate enhancement of relationships by developing social capital, including trust and empowerment.

Paper 33

The process and outcomes of integrating pharmacist independent prescribers in care homes across the UK

Dr Linda Birt¹, Lindsay Dalgarno², Prof Fiona Poland¹, Prof David Wright¹, Prof Christine Bond²

¹University of East Anglia, Norwich, United Kingdom.

²University of Aberdeen, Aberdeen, United Kingdom

Abstract: Older people in care homes have complex medication needs, with poly-pharmacy being common. As residents age their symptoms change and previously prescribed medicines may no longer be necessary. Current practices and systems mean management of medication in care homes may be suboptimal. The Care Homes Independent Pharmacist Prescribing Study (CHIPPS), proposed a suitable model for appropriate medicines management in care homes would be using a Pharmacist Independent Prescriber. In the intervention the Pharmacist Independent Prescribers, located in GP practices, assumed responsibility for reviewing and de-prescribing medication where appropriate, alongside supporting care home staff in medication management. Interview and questionnaire data were collected from 17 Pharmacists, 13 GPs and 15 Care Home staff in England, Scotland and Northern Ireland. Analysis focused on the stages of a process evaluation. We found changing professional roles needed to be acknowledged and actively managed by all parties and effective communication systems implemented. When effective relationships were in place there were distinct benefits in the CHIPPS intervention including significant reduction in prescribed medication, often leading to observations of improved quality of life for residents and improved safety of medication management. Care home staff appreciated having a dedicated person to contact, indicating this increased efficacy of medication management. Importantly the relationship between Pharmacist Independent Prescriber and the GP practice was a factor in ensuring the intervention was delivered in a holistic way. This study provides evidence of the professional skills pharmacists can bring to care homes and is important with the increase in multidisciplinary working in primary care.

Paper 34

Being Your Best –an innovative, co-designed and holistic approach to frailty

Professor Judy Lowthian^{1,2}, Dr Maja Green¹, Dr Claudia Meyer^{1,3}, Professor Alison Hutchinson⁴, Mrs Fran Sutherland⁵

¹Bolton Clarke Research Institute, Melbourne, Australia.

²Monash University, Melbourne, Australia. ³Monash University, Clayton, Australia. ⁴Deakin University, Burwood, Australia. ⁵Cabrini Health, Melbourne, Australia

Abstract: Frailty is a condition characterised by increased vulnerability and decline of physical and cognitive reserves, most often affecting older people. This can lead to a cascade of repeated hospitalisations, further decline and ultimately loss of independence. Frailty and pre-frailty are modifiable; and interventions such as physical exercise, cognitive training, social connection and improved nutrition, especially in a group setting, can mitigate frailty. Existing healthcare guidelines for managing frailty focus predominantly on falls, delirium, acute confusion and immobility. Uptake of referrals to services following hospital discharge is sub-optimal, indicating that a more proactive, person-centred and integrated approach to frailty is required.

The aim was to codesign a program to help pre-frail and frail older people return to their homes following hospital discharge by increasing resilience and promoting independence.

We engaged healthcare consumers, and healthcare professionals from three tertiary hospitals and from a home-based nursing service in metropolitan Melbourne, Australia.

From co-design sessions with 23 healthcare consumers and 17 healthcare professionals, it was apparent that frailty was perceived to affect physical and mental wellbeing. The co-design process resulted in the *Being Your Best* program that incorporates a holistic approach, addressing four domains supported by research evidence: Moving Well, Eating Well, Thinking Well, and Connecting Well. *Being Your Best* aims to improve health and wellbeing and mitigate the effects of frailty through community- or home- based physical activities, nutritional support, cognitive training and social support.

Being Your Best is now being tested for feasibility and acceptability with recently hospitalised individuals.

Papers

Paper 35

Realist review of General Practitioners involvement in quality improvement in care homes

Dr Neil Chadborn¹, Dr Reena Devi², Dr Chris Williams³, Professor Claire Goodman⁴, Mrs Kathleen Sartain⁵, Professor Adam Gordon¹

¹University of Nottingham, Nottingham, United Kingdom. ²University of Leeds, Leeds, United Kingdom. ³University of Leicester, Leicester, United Kingdom. ⁴University of Hertfordshire, Hertford, United Kingdom. ⁵PPI group, University of Nottingham, Nottingham, United Kingdom

Abstract: Recent policies aim to integrate healthcare with care homes, but which professional groups should lead is not specified. We aimed to describe the ways in which GPs could be involved in improvement, where findings could facilitate scaling up of pilot interventions.

Method

Our realist review followed RAMESES guidelines consisting of four steps. The first included interviews with GPs which helped us to develop initial theories. The second step was literature searches in six databases. In step three, evidence judged as rigorous and relevant was used to test the initial theories, and through the process, refine the theory statements. The final step was synthesis of findings. We held meetings of a Context Expert Group to reflect on findings. This group had expertise in primary care and care homes.

Findings

30 articles informed development of two programme theories. The context of the first programme theory is the variability in GP working routines. Where the improvement initiative was flexible to negotiate with GP, a trusting relationship could lead to multidisciplinary care. Examples included pharmacist-led medication review and care home-led intervention for dementia including deprescribing antipsychotics. In the second programme theory, care homes matched their processes to those of GPs, through implementing a national end-of-life care protocol. The protocol was developed by a GP, indicative of the mechanism being GP buy-in, but this was poorly evidenced.

Conflicting commitments of GPs may mean they are not best placed to lead initiatives. Evidence indicates that when GPs work with other practitioners, care can be more person-centred.

Parallel Session 2L - Papers (36) Teggi, (37) Lane et al, (38) Gray, (39) Watts

11:00 - 12:00 Thursday, 8th July,
2021

Track: Impact of and response to Covid-19: lessons for future pandemics

Paper 36

End of Life Care in Care Homes: Practices and Issues

Ms Diana Teggi

University of Bath, Bath, United Kingdom

Abstract: In Western industrialised countries, most people now die aged 80 or above from disabling, chronic and degenerative diseases, having spent an average of nine years in poor health. There is thus continuity between long-term care (LTC) and end of life care (EOLC) in old age, but this continuity is poorly understood in policy and service delivery. Further, EOLC research has mostly focused on dying in hospital, hospice and domestic settings as opposed to care homes; and dying from cancer as opposed to from/with frailty, dementia or chronic diseases. Nonetheless, the latter are prevalent at age 80+, while dementia and ischemic heart disease are the new leading causes of death in all ages (ONS, 2019). Evidence shows that adults living and dying in care homes are more likely than adults in other LTC settings to be aged 80+, severely disabled and affected by dementia (Teggi, 2020). Care homes, rather than hospices, are thus specializing in the care of the most common forms of dying in old age (and at the population level). Based on the qualitative findings from my PhD in five care homes in the South-West of England, this paper focuses on the characteristics and challenges of dying in care homes and how EOLC in care homes is organized, managed and governed. It argues that care homes developed forms of EOLC which, despite being marginal with respect to specialist palliative care services, are attuned to the characteristics of dying in very old age, with frailty, dementia and severe longstanding disability.

Papers

Paper 37

Barriers and facilitators to reducing COVID-19 transmission in care homes: a qualitative exploration and survey

Kathleen Lane, Iain Lake, Julii Brainard, Charlotte Salter, Diane Bunn

University of East Anglia, Norwich, United Kingdom

Abstract: Following epidemiological work on the transmission of COVID-19 in Norfolk care homes¹, we are conducting an exploratory study to extend our awareness of how care-home staff cope with infection-control mitigation measures. The aim is to identify any additional issues facing care-home (CH) workers and managers in delivering the safest possible care to their residents during the COVID-19 crisis and the challenges these may pose. Methods are an online survey to provide broad insights, followed by key informant interviews to explore lived experiences in depth. The study is ongoing until the end of January 2021. To date, we have 232 survey participants, representing a range of ages, gender, geographical location and occupational roles within care homes. Twelve interviews are completed/in process. Preliminary analysis (using the Framework method) suggests considerable variance in how CH staff are supported by training and/or information and the communication within the setting. Particular challenges emerged around personal protective equipment (PPE). Enablers included: effective communication strategy; a good team spirit; openness to learning within the CH. Barriers included: lack of awareness and preparation for COVID-19 compared with previous infectious outbreaks; lack of social and personal support in facing highly distressing situations; caring for residents living with dementia. These have provided valuable insights into our understandings of the practicalities and challenges around CH transmission mitigation measures for limiting the spread of COVID-19.

¹Brainard J, et al. (2020). Introduction to and spread of COVID-like illness in care homes in Norfolk, UK. *J Public Health*. doi:10.1093/pubmed/fdaa218

Paper 38

Care homes and covid-19: learnings from the first wave of the pandemic across the health and social care system in North Central London

Dr Shani Gray

North Central London STP, London, United Kingdom.
North Central London CCG, London, United Kingdom

Abstract: The first wave of the covid-19 pandemic saw a large number of outbreaks and subsequent deaths of care home residents. During this period the North Central London clinical reference group was created to facilitate cross professional and organisational working amongst five boroughs. It included care home managers, community matrons, GPs, pharmacists, consultants in care of the elderly, palliative care and public health, along with CCG/STP leads in infection control, frailty, quality and adult social care. After the first wave the group carried out an after action review to reflect on learnings from their response to the pandemic.

34 colleagues contributed via a mixture of structured reflective group meetings, individual feedback sessions and written responses from both a team and individual perspective. Thematic analysis of the data identified 24 codes which were grouped into seven themes. The group then reviewed these and developed a series of recommendations.

The seven themes identified were: confusion, responsibilities and communication; prioritisation of care homes; perceptions and power; planning, support and collaboration; testing; PPE; medicines and death verification. A wealth of learning emerged as to what went well and what could have gone better. 29 recommendations were developed and adopted as part of the wider North Central London review on the response to the covid-19 pandemic. These recommendations include how to best support a cross system response to future incidents in care homes such as the pandemic, but also how to strengthen the ways in which health and social care organisations work with care homes.

Papers

Paper 39

Discourses of care: relational work with risks in two dementia care settings

Dr Helen Watts

UWE, Bristol, United Kingdom

Abstract: At least 850,000 people have a dementia diagnosis in the UK. There is currently no cure. Care homes provide much of the long-term care to residents living with dementia. Meanwhile care and relational work as a care practice are marginalised, unrecognised and unrewarded. This article analyses social interactions during routine tasks between care workers and residents living with dementia, and suggests that interactional risks taken by both parties can assist to build relationships.

The data includes 20 audio-recordings with care workers, Orla and Tessa, and residents Harold, Queenie, Nora and Yvonne and discourse-based interviews with the care workers. The data aligns to widely accepted dementia care models, and principles of care. Methodologically I take a discourse analytic and appreciative inquiry approach.

I discuss relational work highlighting face work, mock impoliteness and the consequent interactional risks, paying attention to linguistic manifestations of familiarity. Relational work with risks is practised by care workers and residents. I note that such interactional risks enhance rather than threaten the on-going relationship, whilst acknowledging the complexity of and skilfulness required by care workers in these interactions. I argue that these findings highlight relational work as a legitimate care practice to be recognised and rewarded.

Parallel Session 2M - Papers (40) Bjerkan et al, (41) Cheshire et al, (42) Polden and Crawford

11:00 - 12:00 Thursday, 8th July,
2021

Track: Maintaining health and well-being in later life

Paper 40

Ageing alters the relationship between blood oxygenation and neuronal dynamics in the brain

Juliane Bjerkan¹, Gemma Lancaster¹, Bernard Meglič², Jan Kobal², Trevor Crawford¹, Peter V. E. McClintock¹, Aneta Stefanovska¹

¹Lancaster University, Lancaster, United Kingdom.

²University of Ljubljana, Ljubljana, Slovenia

Abstract: Knowledge of healthy ageing can aid better understanding of pathological ageing, as age is the biggest risk factor for developing neurodegenerative diseases such as Alzheimer's disease. The brain undergoes structural and functional changes as people age, and so does the cardiovascular system. We know that a healthy brain needs an efficient supply of glucose and oxygen to function properly and that impairment to the vasculature would affect their transport. The brain and cardiovascular system work together to maintain a healthy brain. Our understanding of the interactions between these two systems, and how they change during ageing, is currently limited. In our research we have combined two non-invasive techniques to compare brain electrical activity (using EEG) and blood oxygenation (using fNIRS) in a cohort of healthy young (N = 21, age range = 20-39 yrs) and older participants (N = 24, age range 56-77 yrs). By studying the dynamics of the oscillations within these signals, we can gauge different physiological processes and compare the results across two age groups. The results obtained clearly show alterations in blood oxygenation dynamics and neurovascular dynamics. These differences are most pronounced at very low frequencies (around 0.1Hz), and we will discuss possible generators of this rhythm in both NIRS and EEG.

Papers

Paper 41

Neuropsychological effects of chronic low-level carbon monoxide exposure in older adults

Ms Beth Cheshire, Dr Trevor Crawford, Prof Carol Holland

Lancaster University, Lancaster, United Kingdom

Abstract: Evidence on effects of chronic low-level carbon monoxide (CO) exposure is limited. However, case reports indicate neuropsychological deficits such as memory and attention impairments following less severe exposures. Older adults may be specifically vulnerable due to reduced physiological reserve and pre-existing disease increasing susceptibility. We examined prevalence and impacts of low-level CO within 97 homes of older adults (aged ≥ 60 years), investigating hypotheses that low-level CO exposure would be associated with impaired cognitive function, increased anxiety and depression and decreased quality of life (QoL). Continuous ambient CO levels were recorded over 1-month. Participants completed a cognitive battery alongside health and mental health screening. CO readings were divided into specific ranges: 0.5-3, 3.5-6, 6.5-9, 9.5-30 parts per million (ppm) with percentage in each category analysed separately. Auditory working memory and recognition significantly increased with higher CO percentage between 0.5-3ppm as did visual working memory between 6.5-9ppm. Memory recognition also significantly increased with higher CO percentage between 3.5-6ppm. Visuospatial ability, planning and problem solving significantly increased with greater CO percentage between 3.5-6, 6.5-9 and 9.5-30ppm as did selective attention between 9.5-30ppm. However, QoL significantly decreased with greater CO percentage between 6.5-9 and 9.5-30ppm. Finally, physical diagnoses and headaches significantly increased with higher percentage of CO between 0.5-3 and 3.5-6ppm. Chronic exposures to higher levels of CO (within low limits) appear to have beneficial effects on a range of cognitive functions but a deleterious impact on both QoL and physical health but ongoing studies will determine any longitudinal impacts of these low-level exposures.

Paper 42

Active Visual Inhibition is Preserved in the Presence of a Distracter: A Cross-cultural, Ageing and Dementia Study

Miss Megan Polden, Dr Trevor Crawford

Lancaster University, Lancaster, United Kingdom

Abstract: The current study investigated a novel visual distracter task as a potential diagnostic marker for the detection of cognitive impairment and the extent to which this compares in healthy ageing across two cultures. The Inhibition of a Recent Distracter Effect (IRD) refers to the inhibition of a saccadic eye movement towards a target that is presented at the location of a previous distracter. The current study compared the IRD across a large cross-cultural sample comprising of young (N=75), old European participants (N=119), old south Asian participants (N=83), participants with Dementia due to Alzheimer's disease (N=65) and Mild cognitive impairment (N=91). Significantly longer saccadic reaction times on the target to distracter trials, in comparison to the target to target trials were evident in all groups and age cohorts. Importantly, the IRD was also preserved in participants with Alzheimer's Disease and mild cognitive impairment demonstrating that the IRD is robust across cultures, age groups and clinical populations. Eye-tracking is increasingly used as a dual diagnostic and experimental probe for the investigation of cognitive control in Alzheimer's disease. As a promising methodology for the early diagnosis of dementia, it is important to understand the cognitive operations in relation to eye-tracking that are well preserved as well as those that are abnormal. Paradigms should also be validated across ethnicity/culture, clinical groups and age cohorts.

Papers

Parallel Session 3A - Papers (43) Sabatini et al, (44) Quinney et al, (45) Kisvetrová and Bermellová, (46) Tinker et al

16:30 - 17:30 Thursday, 8th July,
2021

**Track: Ageing and resilience in
adversity**

Paper 43

Relationship Between Attitudes Toward Own Aging and Capability to Live Well Among People with Dementia: Findings from the IDEAL Programme

Miss Serena Sabatini¹, Prof Obioha Ukoumunne¹, Prof Clive Ballard¹, Dr Ruth Lamont¹, Dr Rachel Collins¹, Dr Anthony Martyr¹, Dr Claire Pentecost¹, Miss Anna Hunt¹, Dr Catherine Quinn², Prof Jeanette Thom³, Prof Linda Clare¹

¹University of Exeter, Exeter, United Kingdom. ²University of Bradford, Bradford, United Kingdom. ³University of New South Wales, Sydney, Australia

Abstract: A primary goal for dementia research is to understand how to best support people to live well with dementia. Among cognitively healthy older individuals, more positive attitudes toward their own ageing (ATOA) and/or feeling younger than their chronological age (i.e. having a younger subjective age: SA) are associated with better quality of life (QoL), satisfaction with life (SwL), and well-being (which are indicators of capability

to live well), and fewer depressive symptoms. We tested whether people with dementia with more positive ATOA and/or with a younger SA report better QoL, SwL, and well-being, and are less likely to experience depression. We used cross-sectional data from the IDEAL cohort baseline assessment (conducted between 2014 and 2016), comprising 1541 people with mild-to-moderate dementia and residing in Great Britain [mean (range)

age= 76.3 (43 to 98); 43.6% women]. More positive ATOA was associated with better QoL, SwL, and less likelihood of depression (p -value < .001). Younger SA was associated with better QoL, SwL, well-being, and less likelihood of depression (p -value < .001). More positive ATOA and younger SA may be beneficial psychological resources that enhance capability to live well with dementia. Promoting more positive perceptions of ageing at the societal level may help to equip people with the resilience needed to cope well after a diagnosis of dementia, and enhance the support available to people with dementia. Focusing on retained abilities and achievable goals may help to counteract the impact of negative age-related stereotypes on people with dementia, and enhance person-centred care.

Paper 44

Adapting to life in an Extra Care Living Scheme in Wales during Lockdown, Summer 2020

Mrs Miranda Quinney¹, Dr Anne Fothergill¹, Dr Juping Yu¹, Dr Rachel Taylor¹, Dr Antonis Kousoulis²

¹University of South Wales, Pontypridd, United Kingdom. ²Mental Health Foundation, London, United Kingdom

Abstract: A longitudinal study was conducted in 2019/2020 to explore the experiences of older adults taking part in a peer support group established by the Mental Health Foundation to improve wellbeing and social connections. Participants in the study included older adults living in extra care accommodation (ECA). Data was collected using unstructured interviews in three phases between May 2019 and August 2020. This period coincided with the outbreak of the Covid-19 pandemic. Lockdown regulations prevented the research student from proceeding with scheduled visits to the ECA. Permission to continue data collection by telephone or via a digital platform was granted by the USW Ethics Board and included approval to explore participants' experiences of living under the lockdown rules.

Four telephone interviews were conducted between May and August 2020. Of these, three were with ECA tenants and one with the daughter of an ECA tenant. They shared stories of support for one another, agency in overcoming the practical challenges encountered in day to day living and humour. This presentation explores the resilience of older adults as a dynamic process (Kinsel, 2005) and its relationship with successful aging (Wagnild, 2003).

Papers

Part of a KESS2 funded PhD project led by the University of South Wales (USW) in collaboration with the Mental Health Foundation (MHF).

Research team: Mrs Miranda Quinney (PhD student, USW), Dr Anne Fothergill (Director of Studies, USW), Dr Juping Yu and, Dr Rachel Taylor (Supervisors, USW), Dr Antonis Kousoulis, (Industry Partner Advisor, MHF).

Paper 45

Dignity and predictors of its change in older adults during long-term hospitalization

PhD Helena Kisvetrová¹, Mgr. Jana Bermellová²

¹Palacky University, Olomouc, Czech Republic.

²University Hospital, Olomouc, Czech Republic

Abstract: Dignity is a multidimensional construct comprising perception, knowledge, and emotions related to competence or respect. Hospitalization in a long-term care facility (LTCF) often raises fear among older adults of a threat to their personal dignity. The aim of the study was to identify differences in dignity evaluation of geriatric inpatients after one month of hospitalization in an LTCF, as well as predictors of this change. The questionnaire battery included: PDI (Patient Dignity Inventory), GDS (depression), MMSE (cognition), Barthel Index (self-sufficiency in activities of daily living), and VAS (pain). Pearson correlation analysis and multivariable linear regression were used for statistical processing. 125 geriatric inpatients without cognitive impairment (average 80.2±6.1 years; MMSE 28.1±1.4; 73.3% female) were studied. The average interval between two measurements was 31.1±1.3 days. In the initial measurement, the patients rated the value of PDI item *Not able to perform tasks of daily living* the worst. One month after hospitalization, the items *Not able to perform tasks of daily living*; *Not able to attend to bodily functions*; *Not feeling worthwhile or valued* were improved. Predictors of changes in dignity assessments in individual PDI domains were education, self-sufficiency and depression. Geriatric inpatients with higher education, for whom self-sufficiency improved and depression decreased, rated their dignity more positively one month after the hospitalization. Our findings thus highlight factors that may reduce threat of the dignity of geriatric inpatients when hospitalized in LTCF.

Supported by the Ministry of Health of the Czech Republic, grant nr. NU20-07-00100.

Paper 46

Grandchildren providing help to their grandparents

Professor Anthea Tinker¹, Dr Giorgio di Gessa², Dr Gry Wester¹, Dr Summer Hawkins³, Ms Patricia Jairos¹

¹King's College London, London, United Kingdom.

²University College London, London, United Kingdom.

³Boston College, Boston, USA

Abstract: There has been extensive research on the help that grandparents give to grandchildren. However, little is known about the help that grandchildren give to grandparents. This can be physical such as shopping, doing odd jobs around the home, tending including personal care such as help with bathing, toileting, psychological such as giving emotional support, financial such as regular sums of money or one off gifts and technical such as helping with computers.

Little is known about this kind of care such as the type, extent, on both grandparents and grandchildren and the wider implications for services and policy. While there is a great deal of data in large scale data sets about the care given by grandparents to grandchildren, most surveys of the reverse type of care only have minimal information or the sample sizes are too small. Furthermore, there is limited evidence from qualitative studies. To answer some of these questions a scoping study was carried out that examined the literature including evidence from qualitative studies.

The most frequent type of help given by grandchildren was psychological which helped reduce loneliness and isolation of the grandparents. There was also help with activities of daily living including help preparing meals and housework. Some helped financially and also with advice on the use of technology. Most grandchildren were under 20 and the majority were female.

With the contraction of both statutory and voluntary support for older people this under researched area of help from grandchildren has policy and practical implications.

Papers

Parallel Session 3C - Papers (47) Wheeler et al, (48) Ekwegh et al, (49) Tur-Sinai et al

16:30 - 17:30 Thursday, 8th July,
2021

**Track: Changing responses to age
related health conditions**

Paper 47

**Reconnecting with important &
meaningful aspects of identity to
facilitate recovery: Our use of the 'Beads
of Life' approach with older people
admitted to an inpatient unit**

Dr Nicola Wheeler^{1,2}, Dr Ramira Fernandes¹, Miss
Hannah Allan¹

¹Black Country Partnership NHS Foundation Trust,
Birmingham, United Kingdom. ²Circle Rehabilitation,
Birmingham, United Kingdom

Abstract: Older people are more likely to experience multiple losses within a short time period, so may present with depression, anxiety, suicidal behaviours and other psychological and psychosocial symptoms. Therapy offers an opportunity to reflect on losses and validate emotions, hence, life review has become a favoured therapeutic approach with older people, affording space to recall past events/experiences. However, life review is optimally complimented by narrative therapy's empowering re-authoring conversations to enable meaning and resolution to be found for difficulties/feelings. We adapted the 'Beads of life' approach for use with older people on an inpatient mental health ward. The approach, which is informed by narrative therapy, was developed for use in paediatric cancer services to help young people make sense of their cancer journeys. Similarly, we recognised a need for an approach which sparked interest from service users and enabled them to talk about themselves in a way they perceived as less threatening, so insights into their psychological presentation and distress could be gleaned. Using the Beads of Life worksheets and

questions, we facilitated 1:1 conversations with service users, and they selected a bead to represent key/important information. As stereotypical dialogues and labelling of service users can occur in inpatient settings, we facilitated outsider witness groups with staff, where the service user would talk about their beads and staff were asked to connect on a personal level and give a bead to represent this shared connection. Thus, we have used this approach for both assessment and intervention.

Paper 48

**Should the focus of a CGA in a dedicated
Unit for Frail older people be delivering
the outcome of "alive and at home" or
should it be a different focus**

Dr Uruakanwa Ekwegh¹, Dr Maevis Tan², Dr Sameira
Sohail²

¹East Lancashire NHS Trust, Blackburn, United Kingdom.
²Manchester, United Kingdom

Abstract: INTRODUCTION: Older people who receive comprehensive geriatric assessment (CGA) in a dedicated unit were more likely to be alive and in their own home at 6 months than if they received usual care¹. The Older Person's Unit (OPU) in Royal Blackburn Teaching Hospital (RBTH) aimed to improve early access to a CGA in order to deliver this outcome (among others). An audit was completed to see if this was achieved.

METHODS: The admission records were used to retrospectively identify all patients over the age of 75 years admitted to the OPU and the AMU to determine if the patients were "alive and at home" at 6 months.

RESULTS: The odds ratio of patients being alive and at home at 6 months from OPU compared with AMU was 0.2, CI = 0.07-0.57 (p = 0.0023). The odds ratio of a patient admitted with a fall being on the OPU compared with AMU was 3.73, CI = 2.40-5.79 (p < 0.0001). When comparing patients admitted with falls, the OPU patients were older with more previous emergency admissions.

DISCUSSION: Real world selection bias makes it impossible to replicate the results of RCTs. "Alive and at home" is a quality of life measure used to assess CGA. For people living with frailty, we must develop patient centered outcomes that can be measured in the real world so that dedicated units can deliver outcomes that matter to older people.

Papers

Paper 49

Does money matter? Characteristics associated with joint pain medication access among adults over 50

Prof. Aviad Tur-Sinai¹, Prof. Netta Bentur², Ms. Jennifer Shuldiner³

¹The Max Stern Yezreel Valley College, Yezreel Valley, Israel. ²Tel-Aviv University, Tel-Aviv, Israel. ³University of Toronto, Toronto, Canada

Abstract: The experience of pain is a widespread phenomenon among adults, especially older adults, and entails high costs to both individuals and society. The objective of the current research is to determine if the ability to pay and supplementary insurance are factors associated with pain medication among individuals over 50.

Data came from Survey of Health, Aging and Retirement in Europe (SHARE). The sample included 64,281 individuals 50+ from nineteen European countries and Israel.

Joint pain was common with one out of three reporting joint pain. Prevalence of pain was similar among different age groups, and more women reported joint pain. Among those in pain, about 21.5% of the individuals reported mild pain, 52.9% moderate and 26% severe pain.

In the multivariate logistic regression, we found that men and those older than 60 suffered more from joint pain, while controlling for education and subjective assessment of the ability to cope economically (Able to make ends meet).

A large percentage of those with pain were not taking medication to manage their pain, and there were significant demographic differences between those that did and did not take medication. Those that took medication were younger, male, had more education, were able to cope economically and had supplementary insurance.

Our study showed that about half of the individuals with pain were not taking medication to manage their pain. Our results demonstrate that among individuals over 50 in Europe income is strongly associated with taking pain medication and that there is economic inequity in medication access.

Parallel Session 3D - Papers (50) Beedell, (51) Claeys and Berdai- Chaouni, (52) Chee et al, (53) Berdai-Chaouni et al

16:30 - 17:30 Thursday, 8th July,
2021

Track: Diversity and culture in later life: where are we now and where are we going?

Paper 50

Preference or Prejudice? Implications for policy and practice: how older people, who pay for their own care, talk about the ethnicity of their carers

Dr Phoebe Beedell

University of Lincoln, Lincoln, United Kingdom

Abstract: Until recently, little was known about the largest group of people who pay for all or part of their social care: older people. New and extensive qualitative research, funded by the Wellcome Trust, has examined older peoples' experiences of self-funded care in England, focussing on ethical and moral dimensions; how relationships of care were negotiated; associated risks and responsibilities; and the extent to which older people were able to exercise choice in the current social care market.

Up to three interviews were conducted with more than sixty people between the ages of 60 and 95, all but one of whom identified as White. This material included more than a dozen separate cases where the older person, and in some cases their supporter in the interview, talked about their carer worker's race, nationality or ethnicity. Almost 50 additional interviews were conducted with care providers, commissioners and other professionals from the public, private and voluntary sectors.

When the (sometimes unsavoury) accounts of older people talking about race and ethnicity are seen in

Papers

combination with the accounts of care professionals, critical questions arise concerning the extent to which older peoples self-funded 'consumer choices' are driven by racism and prejudice, and the extent to which these choices contribute to the unequal treatment of Black and minority ethnic care workers.

The intention of this presentation is to examine the reality of how older self-funders think, feel and talk about ethnic difference and to stimulate discussion about what this implies for future policy and practice.

Paper 51

The diagnosis of dementia among older adults with a migration background

Ann Claey^{1,2}, *Saloua Berdai-Chaouni*^{1,2}

¹Erasmushogeschool, Brussels, Belgium. ²Vrije Universiteit Brussel, Brussels, Belgium

Abstract: International studies have shown that older adults with migration background see a physician at a later point in the disease process when experiencing symptoms of dementia, and therefore are diagnosed in a later stage of the disease (Nielsen et al., 2011). The aim of this study is to explore which bottlenecks occur throughout the diagnosis process of dementia among older adults with migration background.

For this study, older adults with a labour migration background, their informal carers and professional caregivers were interviewed in in-depth interviews and focus groups. In addition participative observation was done with older adults throughout their dementia trajectory.

Results show that all stakeholders experience the diagnosis process as difficult. Bottlenecks are perceived in 1) the difficult recognition of symptoms and condition by the family carers and healthcare providers; 2) the in-adaptation of diagnostic tools to the language, cultural background, education level and literacy of the older adult and 3) the poor context in which the diagnosis is conducted. Moreover, the healthcare provider's communication and social skills, flexibility, and the time spent in the diagnosis process plays a major role in overcoming the different barriers.

Commitment to communication support, more time in the diagnosis process and adapted diagnostic tools can help to move towards a faster and more accurate diagnosis of dementia.

References

Nielsen, T. R., Vogel, A., Phung, T. K. T., Gade, A., & Waldemar, G. (2011). Over- and under-diagnosis of dementia in ethnic minorities: A nationwide register-based study. *International Journal of Geriatric Psychiatry*, 26(11), 1128–1135.

Paper 52

Physical and social environments of residential care settings for older people in Malaysia

Ms Kwan Foong Chee^{1,2}, *Professor Christine Milligan*¹, *Dr Siobhan Reilly*¹

¹Division of Health Research, Faculty of Health and Medicine, Lancaster University, Lancaster, United Kingdom. ²Department of Psychology, School of Medicine and Life Sciences, Sunway University, Bandar Sunway, Selangor, Malaysia

Abstract: The rapid growth in the ageing population is reflected in a marked increase in the numbers of older people moving to institutional care homes. This is occurring in South-East Asia at a time when the factors contributing to the quality of the care environment are little understood, in part because most research is conceived from a western paradigm. This paper presents data from a study investigating residential care across representative settings in Malaysia, including the public, private and non-government organisation sectors. The objectives were to: (1) gain in-depth knowledge and understanding of the care environment in Malaysian care homes from the perspectives of older people and staff/care workers; and (2) Identify physical and social factors contributing positively to a good care environment. Drawing on ethnographic data from three case study care homes, the paper provides an in-depth understanding of older residents' experiences of their social and physical environments and reveals how cultural norms and expectations of older residents can play a significant role in shaping their experiences of care home settings in Malaysia. It is suggested that government guidelines for RCHs in Malaysia should acknowledge the significance of such norms and expectations.

Papers

Paper 53

Doing research on the intersection of ethnicity and old age: Key insights from decolonial frameworks.

Msc. Saloua Berdai Chaouni^{1,2}, Msc. Ann Claeys^{1,2}, Dr. Jennifer van den Broeke³, Prof. Liesbeth De Donder¹

¹Vrije Universiteit Brussel, Brussels, Belgium. ²Erasmus University College Brussels, Brussels, Belgium. ³Pharos Knowledge Center, Utrecht, Netherlands

Abstract: Population aging and migration are two of the most critical social trends shaping the world today. Scholars have therefore investigated how to better incorporate ethnicity into gerontological research. Integration of insights from life-course theory, post-colonial, and feminist theories have resulted in valuable attempts to tackle issues related to ethnicity and old age. Inspired by these bodies of research, we explore how decolonial perspectives can strengthen social gerontological research at the intersection of ethnicity and old age.

This endeavor advances four key insights drawn from decolonial perspectives that expose some current blind spots in gerontological research at the intersection of aging and ethnicity. Through a process of awareness and resistance decolonial perspectives reveal that: 1) colonial thinking is deeply embedded in research; 2) critical reflection about who is considered the “knower” in research is warranted; 3) alternative ways to generate, analyze, and publish knowledge exist; and 4) the places and systems of knowledge production are not neutral. To address these issues empirically, decolonial frameworks call us to actions that include decolonizing the conceptual underpinnings of the research enterprise, scholars themselves, research-in-action, and current knowledge systems and structures that reflect and reinforce colonialism. Potential applications of these insights are explored, but acknowledged as an essential first step on a nascent path.

To conclude, decolonial perspectives offer a valuable additional gaze by demanding nuanced reflections of the contemporary realities of aging persons embodying the intersection of aging and ethnicity, while simultaneously drawing attention to how invisible historically-rooted power hierarchies constrain their aging experiences.

Parallel Session 3E - Papers (54) Hurd, (55) Pijpers, (56) Grindey-Bell, (57) Horne et al

16:30 - 17:30 Thursday, 8th July,
2021

Track: Changing connections and
relationships

Paper 54

LGBTQ Aging: Navigating Discrimination and Exclusion

Dr. Laura Hurd, Raveena Mahal, Zoe Tomaskova-
Redfield

The University of British Columbia, Vancouver, Canada

Abstract: The purpose of this study was to investigate older Canadian LGBTQ persons' everyday experiences of aging. Drawing on age-relations and queer theory, we conducted in-depth interviews with 30 LGBTQ persons aged 65-84 (average age of 71). Study participants were recruited from across Canada and were interviewed twice either in person, by telephone, or by Facetime or Skype for between 2.5 and six hours (total of 113 interview hours). Fifteen participants identified as female and 15 identified as male, including five transgender women and one transgender man. There was diversity in the participants' sexual orientation, ethnicity, race, education, income, partner status, and health and functional abilities. The data were analyzed thematically.

Our analysis revealed that most participants described unsettling or traumatic incidents in which they had experienced discrimination or social stigmatization because of their gender identities and/or sexual orientation, both historically and/or more recently. They frequently reported that their sense of social exclusion as LGBTQ individuals was underscored by other forms of oppression, including ableism, ageism, heterosexism, racism, sexism, and social classism. Although many participants felt that Canada was becoming more inclusive, they also feared heightened vulnerability and a resultant need to go back into the closet as they got older (for example, if they moved into

Papers

a long-term care facility). Many participants felt that they were simultaneously invisible and hyper-visible in Canadian society as they navigated intersecting forms of discrimination and social exclusion. We discuss the implications of these findings in light of the extant research and theorizing.

Paper 55

Working towards inclusive aged care services: qualitative studies of the Rainbow Cooking Workshop and the Queer Elders Working Group in two Dutch cities

Dr Roos Pijpers

Radboud University, Nijmegen, Netherlands

Abstract: In recent years, the literature on LGBT ageing has called attention to the expectations of middle-aged LGBT adults about aged care, and, increasingly, to the experiences of older LGBT adults with care and services. This literature also suggests that while aged care providers are still relatively unaware of the issues faced by older LGBT clients, training effectuates positive change in this respect. This paper addresses the question how aged care providers work towards more inclusive care and services, with an emphasis on community services and home care. It features qualitative studies of initiatives that have been developed and are currently practiced in two Dutch cities. The first is the Rainbow Cooking Workshop: a community meeting activity for older LGBT adults and other interested neighbourhood dwellers organised by service provider, a social theatre company and a social cooking company. The second is the Queer Elderly Working Group, an inter-organisational initiative of five local providers of aged care services aiming to increase awareness of and responsiveness to the needs of older LGBT adults. The paper takes a case-study approach and a participatory action approach to study these respective initiatives. The cooking workshop enables expression of LGB-identities within embodied encounters across difference. The working group has organised awareness-raising events for social work, nursing and day care professionals which have had immediate impact on participants. Both initiatives have achieved some change in the wider local governance structure of aged care. Both are not very successful in reaching out to more closeted older LGBT adults.

Paper 56

The impact of life experiences on loneliness amongst gay and bisexual men.

Mrs Amelia Grindey-Bell

Edge Hill University, Lancashire, United Kingdom

Abstract: This paper presents findings from a narrative inquiry which aimed to explore the extent to which the life experiences of older gay and bisexual men, who grew up in an era of heightened stigma and discrimination, impacted on their risk of loneliness in later life. Data was collected through written and oral narratives and semi-structured interviews. Findings from a thematic narrative analysis indicate that loneliness was a common experience, however rather than arising as a result of events occurring solely in later life, the data reveal that for the older gay and bisexual men in this study, loneliness occurred on a continuum that fluctuated and peaked at different points in their lives. This fluctuation occurred due to a range of internal and external factors related to their sexual orientation. Importantly, what these data reveal is that in order to gain an understanding of key factors that influence loneliness amongst older gay and bisexual men, there is a need to focus on the life experience. The narrative life history approach adopted in this study offers insights into how influences across the life course have shaped the ability of gay and bisexual men to access, develop and maintain support systems that can protect them against loneliness throughout their life.

Papers

Paper 57

Evaluation of an online education and training resource to engage and meet the sexuality and intimacy needs of care home residents¹.

Dr Maria Horne¹, Dr Jane Youell¹, Dr Laura Brown², Dr Paul Simpson³, Dr Tommy Dickinson⁴, Professor Christine Brown Wilson⁵

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Abstract: Sexuality, intimacy and relational needs are important for maintaining health, wellbeing and personal identity, but still remains a neglected area of need in care settings, especially in residential care homes for older people (Simpson et al., 2015). Research highlights concerns about the ability of nursing staff in residential care settings to provide appropriate provision in this area of need (Simpson et al., 2015). Additionally, there is limited research reporting on the extent to which nursing staff have received education or training in this area (Lichtenberg 2014), although a review of knowledge and attitudes of healthcare professionals towards the sexuality of older people highlighted a general lack of knowledge and confidence in the area (Haesler 2016). In phase 1 of this research study, we co-designed and developed an interactive training resource in collaboration with care home staff, residents and their significant others to produce an online, interactive training package to address the issue of sexuality, intimacy and relationship needs in residential care homes. This paper presents the findings from phase 2 of a mixed methods study. Phase 2 was a feasibility study that aimed to: (i) test the acceptability and feasibility of implementing the developed online, interactive training resource and (ii) explore the care home staff and managers experiences of using the interactive resource. The evaluation of the education and training resource will be presented as well as suggestions for how this research might inform future studies to support residents' sexuality, intimacy and relationship needs in care settings.

Parallel Session 3H - Papers (58) Kelly, (59) Lee, (60) Majón Valpuesta and Levasseur, (61) Reuter and Scharf

16:30 - 17:30 Thursday, 8th July,
2021

Track: Social participation,
citizenship and co-production in a
changing world

Paper 58

From the Community to the Commercial: The Lived Experiences of Older Charity Shop Volunteers

Miss Siobhán Kelly

The University of Salford, Salford, United Kingdom

Abstract: Charity shops have long been found to promote sociability, nurture experiences of belonging and act as spaces for community, caring and well-being. Older people remain those most likely to participate in this setting, and charity shop volunteering is associated with experiences of positive ageing. However, alongside the expansion of the sector, charities have undergone a series of changes in a quest for professionalism and profit. While research suggests that these operational shifts have significant implications for the practice of charity shop volunteering in later life, there is a limited evidence base regarding older volunteers' experiences within the organisational context of the modern UK charity shop. To address this knowledge gap, this on-going project seeks to answer the question: what is the lived experience of volunteers aged 65+ working within the charity retail sector in the North West of England? By qualitatively investigating participants' reflections on their involvement, it aims to provide fresh insight into people's experiences of ageing in this setting and inform how the contemporary charity shop can continue to exist as a complex space of volunteering, ageing and care. In this paper I will discuss preliminary findings about the nature of charity shop work for older volunteers, raise

Papers

questions about their future place in the sector and consider the impact of 'professionalisation' on the older person engaging in charity shop work.

Paper 59

Role of voluntary and charity activities in retirement: comparing the retirees and employees

Dr. Sunwoo Lee

Palacký University Olomouc, Olomouc, Czech Republic.
Charles University, Prague, Czech Republic

Abstract: The current study examines if subjective well-being changes after retirement and if engaging in voluntary/charity activities positively contributes to subjective well-being of retirees. A secondary data analysis was employed using longitudinal sample data drawn from the Survey of Health, Ageing, and Retirement in Europe (SHARE). A total number of 13,813 aged 50+ and employed in 2011 (Wave 4) were followed-up in 2015 (Wave 6). After a mean of 4 years of follow-up, 5,233 remained employed (mean age, 60.12 years; range 54 – 92 years) and 2,666 reported they retired (mean age, 65.27; range 55 – 95 years). Results showed that there was no significant difference between employees and retirees at follow-up point in subjective well-being measures, including life satisfaction, CAPS-12 (Control, Autonomy, Pleasure, Self-realization), loneliness, and depression; nonetheless, those who remained employed reported better perceived health ($p < .001$). Although the retirees engaged in more voluntary or charity activities (22%) compared to when they were employed (16%), current job situation (retired or employed) did not predict respondents' voluntary/charity activities when controlled for demographic variables. Both in the employed and retired, those who participated in voluntary/charity activities in the previous year reported significantly higher scores on subjective well-being compared to non-participants: life satisfaction ($p < .001$), CAPS index ($p < .001$), perceived health ($p < .001$), and less loneliness ($p < .01$). Findings suggest that in the early years after retirement, the effect of voluntary/charity activities is meager, but voluntary/charity activities more in general positively contribute to perceived well-being in older adults.

Paper 60

Meaning of social participation for the new generations of older adults: results from a scoping review on Baby Boomers' expectations

PhD Dolores Majón Valpuesta, PhD Mélanie Levasseur

Centre de recherche sur le vieillissement. Université de Sherbrooke, Sherbrooke, Canada

Abstract: Because of Baby Boomers' role in the advancement of social and civil rights, this generation reaches older age with better health conditions, while calling for recognition of their contributions to society. Moreover, they report a lack of representation and recognition in some spaces and activities of social participation, but knowledge about this generations are still diffuse. This study aimed to investigate (i) what is known about social participation in old age for Baby Boomer generation and (ii) what the expectations of new generation of older adults are in terms of social participation and their involvement in communities. A scoping review of empirical, review, conceptual and grey literature was carried out in 17 electronic databases (2006-2020) with 22 keywords. From 8335 hits, titles and abstracts narrow the selection to 205 papers fully read to finally select 65 papers from 11 countries. According to preliminary analysis two key themes were identified: 1) volunteering and working were the main social activities, highlighting the contribution of this generation to the community, but suggesting that models need to be updated; and 2) new retirement perspectives that force current policies and structures to incorporate this generation as agents of change and move away from productivity. Social participation of these new generations, as found throughout several international contexts, reflects a focus on volunteer activities and workforce. As this generation is heterogeneous and request new ways of being heard and acting, future studies should question the participation models historically associated with old age.

Papers

Paper 61

Adding a digital dimension to civic participation in later life

Arlind Reuter, Professor Thomas Scharf

Newcastle University, Newcastle upon Tyne, United Kingdom

Abstract: The growing digitalisation of public services and ubiquity of digital technologies in daily life shifts civic participation, broadly framed as active citizen participation with the ability to shape one's community (Adler and Goggin, 2005), to digital formats. Previously, especially political dimensions of civic participation relied on activists having sufficient digital skills as governments prioritised "online participation" (Moss and Coleman, 2014). However, the COVID-19 pandemic has accelerated a shift towards digital technologies in all aspects of civic participation, highlighting the need to be digitally literate in order to be civically included. Addressing the collective and social dimension of later life civic participation (Serrat et al., 2019), this paper reports on a collaboration with an age-friendly city stakeholder group in North East England. We used a participatory action research design to investigate how older adults engage with digital content creation activities as part of their collective civic participatory practices. Connecting the discourses on civic participation, digitalisation and age-friendliness, we show how older volunteers can actively engage with the production of civically relevant digital content in order to achieve age-friendly objectives. We analyse the organisation's digital engagement journey over a three-year period that includes the COVID-19 pandemic, showing how the creation of digital content can provide a means to achieve civic expression in later life. We conclude by considering the value of adding a digital dimension to the concept of civic participation in age-friendly cities and communities.

Parallel Session 3K - Papers (62) Zhang et al, (63) James et al, (64) Davison et al

16:30 - 17:30 Thursday, 8th July, 2021

Track: Maintaining health and well-being in later life

Paper 62

The impact of social care on quality of life of older carers and the people they care for: a scoping review

Dr Wenjing Zhang, Dr Stacey Rand, Professor Alisoun Milne, Dr Barbora Silarova, Grace Collins

University of Kent, Canterbury, United Kingdom

Abstract: Especially since the *Care Act* (2014) placed a duty on local authorities to assess and meet the eligible needs of carers, care practice in England has tended to identify, assess and address carers' needs separately to those of the care-recipients. However, this approach may not fully consider the complexity of caregiving relationships or the overlaps in the impact of support on well-being and quality of life (QoL). In particular, older carers, who support a family member or friend, typically in close spousal/partner or adult child/parent relationships, are often overlooked in policy and practice. A scoping review was undertaken to identify and synthesise what is already known about the QoL of older carers and care-recipients – both, in general, and with regard to the impact of community-based social care. We searched on 16 electronic databases and grey literature. Inclusion criteria were: published in English, 2000 and onwards, focusing on older co-resident carers and care-recipients from a dyadic perspective and their QoL or well-being. Two researchers screened studies by title and abstract before review of the full-text. Included papers will be thematically analysed and the findings presented with regard to how older carers and care-recipients experience QoL from a dyadic perspective and how community-based social care supports QoL. The findings will inform qualitative interviews with older carers/care-recipients and social care professionals in

Papers

the later stages of the wider [DYAD project](#), which seeks to identify the potential benefits and challenges of adopting a combined dyadic and QoL outcomes-based approach.

Paper 63

The experiences of informal caregivers for people with a moderate to advanced dementia within a domestic home setting towards the end of life: A narrative exploration

[Mr Charles James](#), Professor Catherine Walshe, Dr Caroline Swarbrick

Lancaster University, Lancaster, United Kingdom

Abstract: In the UK, people who provide home-based care for someone with moderate to advanced dementia have reported a feeling of internal conflict due to not knowing what to do and a feeling of powerlessness in effecting changes especially towards the end of life. Studies show that this experience is called 'moral distress', which has been reported by carers within other settings. The experiences of informal caregivers providing home-based care are however yet to be investigated.

An account of experiences was elicited from informal/family caregivers who currently provide home-based care to people within the moderate to advanced stages of dementia (GDS Score ≥ 5), or who had done so within the previous 6 months. Fifteen ($n=15$) voluntary participants within this group were recruited and interviewed within a domestic home-setting. Following the guidance by Riessman (2008), a narrative analysis was then conducted on the data collected.

Findings show that the participants experienced uncertainty in terms of their role transformation following the care-recipient's diagnosis. Moral distress was also experienced due to their fear of the loss of care-recipient's autonomy. This distress was also associated with a feeling of inadequacy in performing their caregiving duty.

As the findings also show that the participants' role transformation was a complete experience early on in the diagnosis, early interventions are therefore necessary to support their understanding of this new role. Periodic interventions are also needed to ensure understanding and coping within the role develop with the progressive decline of the person receiving care.

Paper 64

How are the lonely caregivers? The combined effect of caregiving and loneliness on wellbeing.

[Miss Lisa Davison](#), Dr Rosalind Willis, Dr Gloria Chepngeno Langat

University of Southampton, Southampton, United Kingdom

Abstract: Informal caregivers represent around 26 per cent of the UK population. By age 50, in the UK, individuals have a 50 per cent chance of providing care. While loneliness is prevalent in the general population, particularly among younger and older adults, caregivers are 37 per cent more likely to report loneliness than non-caregivers. Separately, both caregiving and loneliness have been shown to have detrimental effects on wellbeing, but there is a dearth of research investigating the wellbeing of lonely caregivers. It was hypothesised that the cumulative effects of caregiving and loneliness could have worse wellbeing outcomes than either characteristic alone.

Using wave eight of the English Longitudinal Study of Ageing (ELSA), linear regression analyses were conducted with a sample of 962 caregivers and 4975 non-caregivers. ELSA data are nationally-representative of people aged 50 years and older living in England. Using measures of quality of life (CASP19), and life satisfaction (Satisfaction with Life Scale) to represent wellbeing, both caregiving and loneliness were significant in predicting lower wellbeing scores. Additionally, the inclusion of a caregiving-loneliness interaction term demonstrated that lonely caregivers experienced lower quality of life and life satisfaction than lonely non-caregivers. These findings build upon current knowledge that separately, caregiving and loneliness are associated with negative wellbeing outcomes, by highlighting a greater negative impact on wellbeing when caregiving and loneliness are combined. Therefore emphasising greater need to strengthen caregiving policies and improve provision and access to caregivers' support services.

Papers

Parallel Session 3L - Papers (65) Vlachantoni et al, (66) Marchese et al, (67) Baumbusch et al, (68) Cheshire-Allen and Calder

16:30 - 17:30 Thursday, 8th July,
2021

Track: Impact of and response
to Covid-19: lessons for future
pandemics

Paper 65

Older and 'staying at home' during lockdown: informal care receipt during the COVID-19 pandemic amongst people aged 70 and over in the UK

Professor Maria Evandrou¹, Professor Jane Falkingham²,
Dr Min Qin², [Professor Athina Vlachantoni](#)¹

¹Centre for Research on Ageing, University of
Southampton, Southampton, United Kingdom. ²Centre
for Population Change, University of Southampton,
Southampton, United Kingdom

Abstract: On 23 March 2020 the UK went into lockdown in an unprecedented step to attempt to limit the spread of coronavirus. Government advice at that time was that all older people aged 70 and over should stay at home and avoid any contact with non-household members. This study uses new data from the Understanding Society COVID 19 survey collected in April 2020, linked to Understanding Society Wave 9 data collected in 2018/19, in order to examine the extent of support received by individuals aged 70 and over in the first four weeks of lockdown from family, neighbours or friends not living in the same household, and how that support had changed prior to the outbreak of the coronavirus pandemic. The results highlight both positive news alongside causes for concern. The receipt of assistance with Instrumental Activities of Daily Living (IADLs), especially shopping, has increased particularly among

those living alone or with an older partner, reflecting the rise of volunteering and community action during this period. However, not all older people reported a rise, and the majority reported 'no change', in the support received. Moreover, amongst those older people reporting that they required support with at least one Activity of Daily Living (ADL) task prior to the pandemic, around one-quarter reported receiving no care from outside the household and one-in-ten of those with two or more ADL care needs reported receiving less help than previously.

Paper 66

"They need us": COVID-19 highlights the crucial role of family carers of LTC home residents living with dementia

[Ms. Carlina Marchese](#)^{1,2}, Dr. Nisha Sutherland^{3,1}, Ms.
Katelyn Wheeldon^{4,1}, Dr. Oona St. Amant⁵, Dr. Sherry
Dupuis⁶, Dr. Pia Kontos^{7,8}, Dr. Elaine Wiersma^{1,9}, Dr.
Marianne Brennan¹⁰

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Abstract: Although long-term care (LTC) homes provide extensive care services for people living with dementia, residents' family members remain crucial care partners. Alzheimer's disease and other related dementias are progressive life-limiting conditions characterised by challenges with memory and ability to function, rendering the family carer's role especially significant. While the COVID-19 pandemic has had a global impact, Canadian LTC homes have been particularly hard hit, with the highest proportion of COVID-19 deaths (80%) compared to other OECD countries (38%). The purpose of this qualitative study was to explore the perceptions of family carers with relatives living with dementia in Canadian LTC homes during the COVID-19 pandemic.

Papers

This interpretive descriptive study explored the experiences and impact of COVID-19 from the perspectives of family carers of LTC home residents with dementia. Beginning in May 2020, we conducted a series of semi-structured interviews (n = 53) via video or telephone with 14 family carers of residents living with dementia from three LTC homes. Located in a northern urban centre in Ontario, Canada, this study was conducted in both not-for-profit and for-profit LTC homes. We used a voice-centred relational approach to analyse how participants' experiences connected to broader social structures and LTC home organisational processes.

Family carers felt shut out and experienced considerable turmoil due to government-imposed COVID-19 public health directives (e.g. physical distancing), which led most LTC homes to adopt strict "no visitor" policies. Yet the COVID-19 pandemic has importantly highlighted the resiliency, dedication, and critical value of family carers.

Paper 67

Compounding losses: The experiences of people living with dementia and their family carers during a global pandemic

Dr. Jennifer Baumbusch¹, Dr. Heather Cooke¹, Kishore Seetharaman², Dr. Koushambhi Khan¹

¹University of British Columbia, Vancouver, Canada.

²Simon Fraser University, Vancouver, Canada

Abstract: The COVID-19 pandemic has transformed the experiences of people living with dementia and their family carers. Whilst loss is a hallmark of progressive dementias, the pandemic and associated restrictions may compound losses associated with this disease. As part of a larger qualitative longitudinal study, we explored these experiences with five family carers in British Columbia, Canada. The carers included four spouses (three women, one man) and one daughter-in-law, between 61 and 82 years old (average: 69 years). All of the carers resided in the same household as their relative with dementia. Their relatives with dementia (three men, two women) ranged in age from 62 to 92 years old and had received a diagnosis of dementia within the last 10 years. Hence, these were all well-established caregiving relationships. Data were collected through semi-structured interviews, with two interviews per carer conducted between August 2020 and January 2021. Carers struggled with the hallmark challenges of dementia (e.g., declining memory loss, changing roles), which were then further layered with the loss of familiar routines, social interactions with friends

and family, recreational/volunteer activities, informal respite opportunities and formal care supports. Faced with greater in-home responsibilities and continued social isolation, carers observed greater decline in their relative's cognition and functional abilities. Recommendations for supporting carers both short-term during the pandemic restrictions and long-term will be discussed.

Paper 68

'Using care ethics to 'research with care' during the pandemic - Reflections on research with family carers during the first coronavirus lockdown in Wales.

Ms Maria Cheshire-Allen, Dr Gideon Calder

Swansea University, Swansea, United Kingdom

Abstract: This paper reflects on conducting qualitative research with family (unpaid) carers during the initial Covid-19 national lockdown in Wales, UK. The authors discuss the development of a 'research with care' approach (Barnes and Brannelly, 2020 forthcoming) that provides methodological insights regarding researching with carers many of whom are situated within a specific context characterised by deep personal struggle and hardship due to the virus and its associated policy measures.

Primary data was gathered through a series of qualitative standardised open-ended questioning with carers where the features of carer wellbeing during Covid-19 were explored. A total of 38 semi-structured interviews were carried out using telephone and online platforms such as Zoom and Teams. Joan Tronto's (2013) five principles of care; attentiveness, responsibility, competence, responsiveness, and solidarity were applied as an analytical focus to explore the moral contours and practical experience of researching with a population group particularly susceptible to the harms of the pandemic. The key themes of 'relationships with' and 'responsibilities towards' emerge from the analysis and are discussed within the context of the coronavirus pandemic.

The authors argue that an ethics of care approach offers a principled framework within which to practice research with family carers (Ward and Gahagan, 2010), and furthermore within the context of a global health pandemic, key methodological insights are examined that highlight the potential of care ethics to critically examine and attend to the social injustices experienced by some family carers during the pandemic.

Papers

Parallel Session 3M - Papers (69) Nedungayil and Wilson, (70) Sullivan et al, (71) Howson-Watt et al,

16:30 - 17:30 Thursday, 8th July,
2021

Track: Maintaining health and well-
being in later life

Paper 69

Northern Health Science Alliance (NHSA) Bone Health Project – Falls Related Fracture Prevention, a Population Approach to primary and secondary prevention of fragility fractures

Dr Sunil Nedungayil, Professor Nicola Wilson

The Northern Science Alliance, Manchester, United
Kingdom

Abstract:

Osteoporosis and fragility fractures are underdiagnosed and undertreated in primary care. Systematic identification of patients with fragility fractures and managing their risk factors are paramount. A previous smaller project has shown demonstrable improvement in patient identification and management; this project is to demonstrate that the results could be replicated on a larger, supra-regional footprint.

The Joint working project aims to provide a blueprint for a sustainable model for prevention of falls related fragility fractures in primary care. It focusses on case finding, fracture risk assessment, primary and secondary fracture prevention, medication optimisation and patient education.

- Build a sustainable model to identify and manage patients with or at risk of fragility fracture in primary care to reduce risk of falls related fragility fractures.

- Encourage local participation to develop whole system approach to falls and fracture prevention.
- Develop resources to support adoption.

Electronic patient records are analysed using computerised algorithms to identify patients with fragility fractures and those at risk of fracture. Primary prevention measures, medication optimisation, patient education and evidence-based non-pharmacological interventions are initiated. Primary care multidisciplinary bone-health teams are assisted in this work.

The programme is currently being delivered in 52 practices across the North of England either on-site or remotely by a clinical pharmacist.

Quantitative and qualitative data is being gathered and analysed.

Early indications are that a population based comprehensive bone health programme will benefit patient identification and management.

This is a Joint working project between NHSA and Amgen UK

Paper 70

Situating Rare Dementia Support - A Multisite Analysis

Prof Mary Pat Sullivan¹, Prof Paul M Camici², Dr Adetola Grillo¹, Dr Emma Harding²

¹Nipissing University, North Bay, Canada. ²Dementia Research Centre, University College London, London, United Kingdom

Abstract: The journey to diagnosis and to tailored support for people living with a rare, inherited or young onset dementia is often very challenging. People who are living with symptoms that are uncommon and less understood by the professional community, normally confront a dementia care system that is largely shaped by economic and political alarm about increasing numbers of older people living with Alzheimer disease. This paper presents a situational analysis (SA) of rare dementia support in England, Wales and Canada. This work is part of a five-year ESRC-NIHR funded project on rare dementia, and to our knowledge, the first time SA has been used to understand care and support for younger people with a rare form of dementia. SA is a qualitative research method that enables textured

Papers

analyses of social life through cartographic mapping strategies. It positions 'the situation' at the centre of research, and pays attention to the connectedness and interrelatedness of non-human objects and actants as well as human action on an individual and collective scale. In the present study, multiple perspectives on rare dementia support were mapped and analyzed using rare dementia discourse (and its absence) in information and policy documents published by public organizations in each country and internationally, self-reported practices of dementia care professionals, and individual experiences obtaining support following a rare dementia diagnosis. Our paper will present the process of conducting a situational analysis and report on early findings to capture the situated knowledges of everyday support for people with a rare dementia.

Paper 71

Improving the Direct Long-Term Care Workforce in the State of Washington, USA: Searching for Solutions through Policy Learning

Dr. Baozhen Luo, [Jodie Howson-Watt](#), [Sawyer Jarvis](#), [Jane Polinder](#)

Western Washington University, Bellingham, USA

Abstract: Since the 1960s, policy learning, or policy transfer, have played a prominent role in policymaking regarding public benefits provision (Dobbin et al, 2007; Marsh & Sharman, 2009). However, little knowledge exists regarding how such policy learning has occurred with long-term care policies. Washington State has consistently ranked among top-performing states Long-Term Services and Supports (LTSS) in the United States in the past decade (AARP, 2017). This project examines how policymakers in the State of Washington have engaged in policy learning from other states (and other nations) in one crucial but often ignored aspect of long-term care policies—the improvement of the direct long-term care workforce. Using a qualitative approach, We collect data through semi-structured interviews with both state and nonstate actors involved in processes of devising policies to improve the long-term care labor force. The study yields in-depth understanding and practical insights on how policy learning is used to foster policy innovations in addressing a growing public policy challenge.

Parallel Session 4A - Papers (72) Davenport et al, (73) Hepburn, (74) Bífárin et al, (75) Alraddadi

09:30 - 10:30 Friday, 9th July, 2021

Track: Ageing and resilience in
adversity

Paper 72

Living in the shadow of difficult histories and profound urban and social change: Resilience amongst older residents of Yedikule & Sulukule, Istanbul

[Dr Bruce Davenport](#), Dr Gönül Bozoğlu, Prof. Chris Whitehead

Newcastle University, Newcastle-upon-Tyne, United Kingdom

Abstract: Resilience is a useful construct for exploring how older people respond to adverse changes in their lives. It can be a multidimensional construct which encompasses (amongst other things) psychological, communal and societal resources. This paper explores older people's lives in a particular place and how potential resources could, variously, contribute to or undermine their resilience.

The Plural Heritages of Istanbul project developed new understandings of the heterogeneous heritage values of the Istanbul Land Walls and their environs. The Walls are a 5th-Century CE World Heritage site stretching through the city. The project involved walking interviews with participants in the Yedikule and Sulukule neighbourhoods adjacent to the Walls.

The project was not intended as a gerontological project, nor did it seek to explore resilience. However, many of the participants were older people and interviews were relatively unstructured. Inductive analysis of the interview transcripts highlighted how contemporary large-scale restructuring of the city – notably in Sulukule, from which many residents were forcibly relocated – was an on-going source of anxiety. Resilience offered a useful

Papers

construct for reflecting on this aspect of participants' lives and their responses to it. Some resources that have been linked to resilience (e.g. a supportive public sector) were sometimes absent or, as in the case of community-based resources, were linked to difficult histories of inter-community tension. The results support an argument that ideas of resilience need to be attentive to the specificities and histories of place and that senses of heritage may be implicated in people's resilience.

Paper 73

Protracted resettlement and adaptive responses: Exploring Cambodian Canadians' utilization of community-based adult day programme support in Toronto.

Dr. Shamette Hepburn

York University, Toronto, Canada

Abstract: Cambodian refugees, who first arrived in Canada almost four decades ago have now joined the ranks of the country's ageing refugee cohorts, yet very little is known about their everyday life experience and adaptive strategies. This paper presents findings of a grounded theory study which utilized in-depth interviews to explore the narratives of 15 Cambodian Canadians (aged 55 and older) who are among a group of participants in a mobile adult day programme in Toronto. *Unity in Diversity: Aging At Home* provides twice-weekly mobile adult day programming to low income immigrant older adults from a range of ethnocultural communities. The programme supports resilience, social participation, independent living and later-life well-being. The study's central questions were: What are the experiences and living conditions of ageing community-dwelling Cambodian Canadians in Toronto, Canada? How do they perceive and utilize community-based adult day supports? The study utilized a community resilience lens to frame Cambodian Canadians' everyday life experience, perceptions and their utilization of community-based supports, specifically adult day programming. Findings suggest that ageing Cambodian Canadians struggle with protracted resettlement issues such as persistent low income, low literacy levels and precarity. In responding to changing life circumstances and needs, they deploy a range of adaptive strategies which include, taking a self-directed approach to health management, information-seeking, engaging in lifelong learning and utilizing community supports. The study fosters an understanding of the challenges and adaptive strategies of ageing Cambodian Canadians and contributes to growing scholarship on the later-life trajectories of this and other refugee populations.

Paper 74

Stressors and coping strategies of community family carers of older relatives living with long-term health conditions in mainland China.

Mr Oládáyò Bífárin¹, Dr Catherine Quinn¹, Dr Liz Breen¹, Miss Chuntao Wu², Miss Ma Ke², Professor Liu Yu², Professor Jan Oyebo¹

¹Centre for Applied Dementia Studies, Faculty of Health Studies, University of Bradford, Bradford, United Kingdom. ²School of Nursing, China Medical University, Shenyang, China

Abstract: Longevity of life for older people, diminution of family networks, rapid urbanisation and cultural expectations to care for older relatives are creating a substantial amount of burden on family carers in mainland China. To inform the development of competent care, it is important to gain a better understanding of the interaction of these influences. In this presentation, using scoping review methodology, we will summarise our findings on what is known about stress and coping with caring in the current Chinese context. We searched 9 databases (5 English and 4 Chinese) between October and November 2019. Forty-seven papers were included in the review: Thirty-eight were quantitative studies and 9 took a qualitative approach. We derived six themes capturing stressors: Caregiving time (N=22); Financial resources (N=17); Role and Personal strains (N=42); Preparedness (N=4); Social roles (N=10); Lack of adequate formal support (N=22); and one theme capturing coping (N=14). Our narrative synthesis of findings showed that needs of family carers were left unmet. Only a few studies explored the association between stressors, coping and the influence of culture. Our findings demonstrate the significance of capturing nuances regarding carers' unmet needs as opposed to culture-based generalisations. Most research on caring in China has adopted a quantitative, survey-based approach but one conclusion from our review is that it would be helpful, going forward, to take a qualitative approach that will allow better understanding of the inter-relationships between stressors, coping and cultural resources in the current Chinese context.

Papers

Paper 75

Perceived health status and health care utilization among abused older adults living in sheltered homes

Dr Khulood Alraddadi

Department of sociology and social work, College of Arts and Humanities, King Abdulaziz University, Jeddah, Saudi Arabia

Abstract: Background: physical health effects of elder abuse in sheltered homes are unknown.

Objectives: The objective of the present study was to determine if several types of elder abuse were related to an increased likelihood of negative physical health outcomes measured by perceived physical health status and health care resource utilization.

Methods: Data were derived from the elder mistreatment in sheltered homes project, a cross-sectional study conducted in 2018 that included 446 older adults living in 43 sheltered homes in two cities in Saudi Arabia. A face-to-face interview was carried out to complete structured questionnaires for participants to assess the physical health effects of different subtypes of elder abuse.

Results: Perceived poor physical health is common among older abused adults; it was self-reported by three quarters (74%) who experienced physical abuse and half of participants (49%) who experienced other types of abuse compared to 36% of those who did not. In multivariate regression analysis, All abuse subtypes were significantly associated with self-reporting of poor physical health (all $p \leq 0.05$). Increase healthcare utilization health was reported by 71% who experienced physical abuse and approximately 50% for the other subtypes compared to 43% who did not experience abuse (all $p \leq 0.05$ except for psychological abuse, $p = 0.16$). In multivariate regression analysis, All subtypes were significantly associated with increase healthcare utilization (all $p \leq 0.05$) except psychological abuse ($p = 0.17$).

Conclusion: Abuse of older adults living in sheltered homes is associated with Perceived poor physical health and increased healthcare utilization compared to those who are not abused.

Parallel Session 4C - Papers (76) Jandric, (77) King, (78) Maclean and Egdell

09:30 - 10:30 Friday, 9th July, 2021

**Track: Innovation in theories,
methods and critical perspectives**

Paper 76

The Past, Present, and Future in the Context of LGBTI Ageing

Dr Dora Jandric

University of Edinburgh, Edinburgh, United Kingdom

Abstract: This paper offers a reconceptualization of the notion that the future belongs to younger generations, by presenting narratives of older same-sex couples, illustrating how the couples not only imagine the future, but actively participate in its construction. Challenging the idea that older and LGBTI people have no future (Edelman 2004), the paper presents a theoretical perspective which argues that studying the future should involve an exploration of the past and the present, considering the entirety of the lived experience. The narratives presented in the paper were collected for a doctoral project which explored how older same-sex couples in Scotland imagined their future. These narratives demonstrate how past and present lived experiences construct hopes and fears for the future and illustrate the fluidity and subjective perception of the flow of time by the couples' reconceptualization of the past to fit into the present. One of the key theoretical contributions of this paper is the way in which the couples imagined the future, reflected in the form of a Scottish utopia. Their imagination presented a hope that the younger generations would not have to go through the same hardships as the couples did in their youth, directly linking the past to the future. Finally, the paper emphasises the need for studying present social changes to better explore the future, and the new and emerging ways in which it can be imagined.

Edelman, L. (2004). No Future: Queer Theory and the Death Drive. Durham: Duke University Press

Papers

Paper 77

Older LGBT+ People – who cares?

Professor Andrew King

University of Surrey, Guildford, United Kingdom

Abstract: There are competing representations of older lesbian, gay, bisexual, trans and gender and sexual diverse people (LGBT+) as either isolated and alone or having accumulated a life time of supportive networks through 'families of choice'. This presentation draws on a number of studies I have conducted with older LGBT+ people over the past decade in which the issue of who cares and who can expect care and how is addressed. Drawing on ideas about social capital and intersectionality, the presentation addresses the extent to which there might be a 'crisis of care' amongst LGBT+ people as they get older, but also whether this suggestion is warranted. The presentation outlines how a more diverse and complex sets of experiences exist. The presentation also reflects on the role of older LGBT+ support organisations and schemes that seek to address problems with care in later life and ways that more sustainable modes of caring may be established in the future.

Paper 78

Labour power across the lifecourse: The relevance of cultural capital to the study of age and work

Dr Gavin Maclean¹, Dr Valerie Egdell²

¹Edinburgh Napier University, Edinburgh, United Kingdom. ²Northumbria University, Newcastle upon Tyne, United Kingdom

Abstract: The UK Government highlights the 'business case' of retaining, retraining and recruiting older workers, with entreaties that locate employability in human capital. This represents an economic view that obscures how the attribution of a worker's employability as they age is shaped by social institutions and masks the commoditisation of the body. Sociological approaches have conceptualised the 'labour power' of employees to understand the various ways in which worker's skills are harnessed by employers. While commonly framed in terms of manual, mental, emotional or aesthetic forms of labour power, the relationship between this capacity to labour and age has had little conceptual development in the (social gerontology) literature.

In this paper we report on ongoing conceptual work that adopts a labour process perspective and Bourdieusian sociology to examine how the capacity to labour is valued at different lifecourse stages. Understanding institutionalised cultural capital as a mediator in the value of labour power, we explore how experience and qualifications are balanced differently based on age. We reflect on situations across the lifecourse when individuals can possess mismatching levels of institutionalised and embodied cultural capital. Framing economic sectors 'fields', we reflect on how an individual's capital may have different value in each field as they age. Here we consider the gendered and classed aspects of ageing, particularly the distinction between 'jobs of the body' versus 'jobs of the mind'. In doing so we raise questions as to who can age at work and the value placed on age by employers.

Papers

Parallel Session 4E - Papers (79) Param, (80) Shah et al, (81) Shah et al

09:30 - 10:30 Friday, 9th July, 2021

Track: Changing connections and relationships

Paper 79

Still @ (Invisible) Work: Exploring the productive ageing experience of an ethnic minority group through conversations with urban Indian women in Malaysia.

Dr Sally Param

Sunway Education Group, Selangor, Malaysia

Abstract: Growing old in an Asian context carries two monolith ideas, albeit contradictory in nature. On one hand, the elderly are perceived as having a relatively functionless existence, contributed by their lack of involvement in official work. On the other hand, respect and honour are seen as their unquestionable rights, which the younger generations should provide for. My research challenges both these ubiquitous aspects of elderly identity in Asia. In this paper, the growing old experience is explored among the urban Indian community in Malaysia; a minority group living in multi-cultured Malaysia. The topic of invisible work is discussed against the backdrop of national policy on productive ageing. The findings come from qualitative accounts of lived reality which fifteen professional Indian women comment on, as they opine on the lives of their ageing parents. From conversations with these women, it is found that the role of the elderly in their community presents a different trajectory to what is perceived as normative for the Malaysian elderly. It is found that these older adults are able to uphold inter-generational well-being in ways their adult children are not able to. In fact, the support from the older adults is evidenced as pivotal in the quotidian functioning of the nuclear families their daughters belong to. By contextualising productive ageing among the urban Indian elderly in Malaysia, what emerges is an identity that talks back to generalised Asian narratives; and one that postulates innovation and change in defining active ageing.

Paper 80

Understanding frailty among older people living in old age homes and the community in Nepal: a cross-sectional study

Dr. Richa Shah^{1,2}, Dr. Rogie Royce Carandang¹, Dr. Akira Shibamura¹, Dr. Ken Ing Cherng Ong¹, Dr. Junko Kiriya¹, Prof. Masamine Jimba¹

¹The University of Tokyo, Tokyo, Japan. ²Health Action and Research, Kathmandu, Nepal

Abstract:

Introduction

Identifying frailty, a state of being vulnerable to adverse health outcomes, is important in a low-income setting to prevent it from progressing, reducing healthcare costs, increasing the chances of reversibility, and implementing effective interventions. This study was conducted to identify the factors associated with frailty in older people residing in old age homes and communities in Kathmandu Valley, Nepal as the factors affecting frailty in both groups could be different.

Methods

This is a cross-sectional study conducted from April to June 2019 in Kathmandu Valley, Nepal. Data were collected via face-to-face interviews from 193 older people residing in old age homes and 501 residing in communities aged 60 and above using convenience sampling. Frailty was measured using the Groningen Frailty Indicator. Multiple linear regression analyses were used to examine the association between independent variables and frailty.

Results

Older people who were satisfied with their living environment had lower frailty scores in both old age homes ($\beta=-0.20$, $p<0.01$) and the community ($\beta=-0.15$, $p<0.001$). Those who had self-rated unhealthy lifestyle had higher frailty scores in both old age homes ($\beta=0.45$, $p<0.001$) and the community ($\beta=0.25$, $p<0.001$). In the community, those over 80 years of age had higher frailty scores ($\beta=0.15$, $p<0.01$) and those with higher education had lower scores ($\beta=-0.13$, $p<0.05$).

Conclusion

The living environment and lifestyle are key modifiable risk factors of frailty, both in old age homes and the community. The findings suggest a need for lifestyle modification and reforms in building standards, especially in old age homes, to promote age-friendly communities.

Papers

Paper 81

Assessing the impact of multidimensional frailty on healthcare utilization in community-dwelling older people in Kathmandu Valley, Nepal

Dr. Richa Shah^{1,2}, Dr. Rogie Royce Carandang¹, Dr. Akira Shibamura¹, Prof. Masamine Jimba¹

¹The University of Tokyo, Tokyo, Japan. ²Health Action and Research, Kathmandu, Nepal

Abstract:

Background

Older people use healthcare services extensively because of their complex needs, especially those with frailty. Frailty is a multidimensional concept encompassing physical, social, cognitive, and psychological aspects. Preventing frailty reduces healthcare costs and improves the quality of life of older people. Thus, it is crucial to identify the association of frailty status with components of healthcare utilization.

Methods

This cross-sectional study was conducted from April to June 2019 in Kathmandu Valley, Nepal. Data were collected via face-to-face interviews from 501 older people aged 60 and older using convenience sampling from different wards. Multiple linear regression and logistic regression analyses were used to examine the association between different components of frailty (assessed using Groningen Frailty Indicator) and outcome variables (hospitalization, visit to the doctor, receiving informal care, and receiving nursing care in the past year).

Results

Older people who had physical frailty (Standardized beta coefficient [β]=0.13, $p<0.01$) were more likely to visit a doctor. Women (AOR [Adjusted odds ratio]=0.36, $p<0.01$) were less likely to be hospitalized than men. Older people with physical frailty were more likely to be hospitalized (AOR=1.35, $p<0.01$), and those with cognitive frailty were less likely to receive nursing support (AOR=0.24, $p<0.001$) and informal care (AOR=0.33, $p<0.01$).

Conclusion

All dimensions of frailty should be taken into account for future interventions as they affect various healthcare utilization facets. Health reforms should be implemented to reduce factors causing frailty, decrease healthcare costs, and steps should be taken to identify cognitive frailty.

Parallel Session 4F - Papers (82) Gridley et al, (83) Lindley et al, (84) Hall et al, (85) Ward et al

09:30 - 10:30 Friday, 9th July, 2021

Track: Health and social care practices, innovations and futures

Paper 82

Dementia care for social care self-funders now and in the future: insights from year 1 of the DETERMIND study

Ms Kate Gridley, Dr Kate Baxter, Ms Jane Maddison

University of York, York, United Kingdom

Abstract: With the UK population of people with dementia predicted to increase to almost 2 million by 2030 the question of how we meet the needs of people with dementia and their carers, now and in the future, has never been more pertinent. A significant (and growing) proportion of homecare hours and care home places are paid for by self-funders. The evidence base about the experiences of self-funders is increasing but little is known about the outcomes for this group, and even less about self-funders with dementia. In England, care policy has been driven by a desire to increase choice and control for people in receipt of council-funded support, underpinned by an assumption that self-funders have more options available to them. But self-funders can feel disadvantaged within the social care system, often reporting care arrangements arrived at by chance rather than through active choice.

DETERMIND (<https://determind.org.uk/>) is a longitudinal study exploring inequalities in dementia care, costs and outcomes. Data are being collected from 900 people with dementia and their carers from shortly after diagnosis for up to 3 years. In this presentation we report early insights from Workstream 4 focussing on experiences of, and outcomes for, self-funders. This is a mixed methods workstream combining analysis from in-depth interviews of a sub-sample of people with dementia and their carers, with quantitative data from the full cohort. Early themes include choice and control, access to care coordination and the role of social capital.

Papers

Paper 83

Finding and funding social care: a qualitative study of the experiences of older self-funders and development of an online peer experience resource

Dr Lyndsay Lindley¹, Dr Kate Baxter¹, Sharon Calline², Dr Emily Heavey³, Professor Andy Lymer⁴, Dr Sara Ryan⁵, Dr Louise Overston⁴

¹University of York, York, United Kingdom. ²City of York Council, York, United Kingdom. ³University of Huddersfield, Huddersfield, United Kingdom. ⁴University of Birmingham, Birmingham, United Kingdom. ⁵University of Oxford, Oxford, United Kingdom

Abstract: Self-funders are people who pay the costs of their social care from their own resources. At the start of their self-funding journey they, along with the public as a whole, tend to have a limited understanding of social care. There is a growing evidence-base about the experiences of older self-funders and their families. The evidence suggests that, in terms of seeking, paying for and managing care, people find the process challenging, often relying on friends and family for relevant information and advice, including financial advice. However, people's networks of friends and family with relevant experience can be limited, which in turn limits people's opportunities for gathering information from others' first hand experiences.

This qualitative project aims to increase knowledge of self-funders' experiences of finding and paying for care and to expand self-funders' opportunities to hear about other people's experiences by creating an online peer experience resource. The online resource will be part of a new website called Socialcaretalk.org. It will contain written, spoken and filmed extracts from interviews with 29 older self-funders and their family carers talking about their experiences of paying for social care.

This presentation will be based on analysis of these 29 interviews. Interviews took place in 2020. All interviewees lived in England. The presentation will provide insights into the experiences of older self-funders and their family carers under the following themes: getting the right care; understanding money matters; getting information and support; impacts on family and friends; legal matters; and thinking ahead.

Paper 84

Mental capacity and personal finances in later life: key issues for future research

Dr Alex Hall, Professor Debora Price, Professor Nicola Glover-Thomas

University of Manchester, Manchester, United Kingdom

Abstract: 'Financial capacity' is the ability to manage personal finances, and is one of the most important skills a person needs to be an independent member of society. It is particularly important for older adults, who in addition to managing day-to-day finances, are required to make major financial decisions associated with later life. However, financial capacity is highly sensitive to changes in cognitive abilities, which are stigmatised and often hidden by families. People with diminished financial capacity are especially vulnerable to financial abuse.

In England and Wales, the dominant legal framework to guide financial capacity assessment is the Mental Capacity Act (MCA) 2005. The MCA has been a welcome development, but its principles are poorly understood, and its implementation has been inconsistent. It is not clear how appropriate the MCA is for assessments of financial capacity, what methods of assessment are used, or how professionals support someone with diminished financial capacity. Very little is known about how older adults and their families discuss personal finances and attempt to mitigate the challenges of declining financial capacity.

In this presentation, we will:

1. explore why the MCA may be inadequate in the context of financial capacity;
2. report findings from consultation work with 52 older adults and social care practitioners exploring methodological and ethical challenges associated with research into financial capacity;
3. introduce our NIHR Research for Social Care project (April 2021 – September 2022) that aims to critically examine current practice and develop resources for practitioners and the public.

Papers

Paper 85

Inequalities and social care: the experiences of older people paying for their own care in England

Dr Lizzie Ward¹, Dr Phil Locke¹, Prof Mo Ray², Dr Denise Tanner³

¹University of Brighton, Brighton, United Kingdom.

²University of Lincoln, Lincoln, United Kingdom.

³University of Birmingham, Birmingham, United Kingdom

Abstract: The organisation, delivery and funding of social care in England has been transformed over the last two decades. Marketisation of care, the impacts of austerity and years of political neglect by central government have resulted in a social care system widely acknowledged as dysfunctional and in crisis. In this context, an increasing number of older people are expected to find, manage and fund their own care through a complex market of care providers. This paper discusses different dimensions of inequality emerging in the transformed social care landscape which are experienced unevenly by older people living in different locations and contexts. It draws on empirical research that was co-produced with older people, and followed the journeys of older self-funders over an eighteen-month period in three research sites (see <http://www.olderpeopleselffundingcare.com/> for details). The current social care system based on market principles and individualised notions of autonomy inevitably generates inequity. Drawing on findings we argue that the capacity to be an 'active consumer' in the care market is mediated through social, physical and psychological factors as well as financial resources. The experiences of our participants challenge assumptions that sufficient income enables choice over care services, 'better' care, or the capacity to negotiate the care market to find and manage care services. Market factors, such as sufficient care providers and services being available, also generate geographical inequities which further challenge notions of 'choice'. Complex inequalities are emerging that need to be recognised and addressed in the expected reforms of the social care system.

Parallel Session 4G - Papers (86) Newman et al, (87) Ritchie et al, (88) Theodosopoulou et al

09:30 - 10:30 Friday, 9th July, 2021

Track: The arts, leisure and older consumers

Paper 86

Participant film making in care homes – narratives of the COVID-19 pandemic

Professor Andrew Newman, Professor Karen Ross, Dr Alastair Cole, Dr Lucy Jolly, Dr Bruce Davenport

University of Newcastle Upon Tyne, Newcastle Upon Tyne, United Kingdom

Abstract: This paper presents the results of a Newcastle University funded project that aimed to challenge negative media stereotypes of life in care homes during the COVID-19 pandemic. This issue was highlighted by Bravo-Segal and Villar (2020) who noted from their study that older people became 'associated with deaths, deficiencies in residential care, or extreme vulnerability' (p. 267). The impacts of these negative meta-narratives upon residents, carers and family members were explored through participatory film making.

Two care homes in North East England (Sunderland and Gateshead) were provided with video cameras to enable residents, carers and family members to document their lives over the months of December 2020 to May 2021. The aim was to capture activities and events as they happen but also using the cameras to tell the everyday stories of life in a care home including visits with relatives, discussions with staff and conversations that residents have with each other. The approach adopted was one of co-creativity (Zeilig, West and Williams 2018), an aspect of participatory arts where Newcastle University's documentary film makers 'do not instruct but rather disperse the knowledge associated with their skills' (p. 138).

Bravo-Segal S, Villar F. [Older people representation on the media during COVID-19 pandemic: A reinforcement of ageism?] *Revista Espanola de Geriatria y Gerontologia*. 2020 Sep - Oct;55(5):266-271

Papers

Zeilig, H., West, J. and Williams, B. (2018). Co-creativity: possibilities for using the arts with people with a dementia. *Quality in Ageing and Older Adults*, 19(2): 135-145

Paper 87

Singing in the moment: Exploring the experience of dementia inclusive singing activities for people living with dementia and family carers.

Dr Louise Ritchie¹, Dr Margaret Brown², Mrs Carol Beckwith¹, Dr Stuart Wood³

¹University of the West of Scotland, Lanarkshire, United Kingdom. ²University of the west of Scotland, Lanarkshire, United Kingdom. ³Independent, Scotland, United Kingdom

Abstract: There is growing recognition of the importance of engagement in participatory arts to the wellbeing of people with dementia and their family carers (Ward et al, 2020). In 2019, the Dementia Inclusive Singing Network (DISN) was launched in Scotland to improve access to community singing groups for people affected by dementia. Since the beginning of the Covid-19 pandemic, community groups have been unable to meet in person and many use technology to continue to engage members online. The aim of this research is to explore the experience of participating in singing groups from the perspective of the person with dementia and how this has changed with the move from in-person to online sessions. Using video footage recorded both pre and peri-Covid we explore the responses and engagement with the sessions 'in the moment' using the Music Matrix tool (Wood & Crow, 2018). Qualitative observations and interviews provide context for understanding the experiences during the session. The findings highlight the value of singing sessions (in-person and online) for people affected by dementia both 'in the moment' and for fostering feelings of inclusion and community beyond the sessions.

Ward, M. C., Milligan, C., Rose, E., Elliott, M., & Wainwright, B. R. (2020). The benefits of community-based participatory arts activities for people living with dementia: a thematic scoping review. *Arts & health*, 1-27.

Wood, S., & Crow, F. (2018). The music matrix: A qualitative participatory action research project to develop documentation for care home music therapy services. *British Journal of Music Therapy*, 32(2), 74-85.

Paper 88

Memories are made of this: use of personalised music to help preserve sense of self and social connectedness.

Mrs Danai Theodosopoulou, Dr Simon Horton, Dr Anne Killett

University of East Anglia, Norwich, United Kingdom

Abstract: Dementia syndrome disrupts the autobiographical memory system, including memories of specific episodes, personal experiences and facts about one's life, all of which contribute to a sense of self. Disruption can affect psychological well-being, potentially contributing to psychological and behavioural symptoms, while social communication can be compromised.

This presentation will draw on the findings of two studies to contribute to theoretical conceptualization for personalised music intervention. It will synthesise the outcomes of a systematic review investigating the effect of personalised music on behavioural and psychological symptoms in people living with dementia, with a qualitative analysis of Desert Island Discs broadcasts in which interviewees are invited to associate personalised music choices with their life narratives.

In the systematic review of 29 studies, we explored the effect of personalised music on behavioural and psychological symptoms in patients with dementia and found evidence for a positive, but not lasting effect on behavioural and psychological symptoms. The effect was greater in active personalised interventions compared to passive listening to personalised music. The sharing of personal autobiographical events was found to help maintain a coherent continuity of self. The use of personalised music was found to be effective in evoking autobiographical memories and emotions, which mediate access to identity and sense of self.

The qualitative thematic analysis of 18 Desert Island Discs broadcasts identified the emotional dimensions of autobiographical music memories, with 'nostalgia' being of particular salience. The findings will present the implications for the design of personalised music interventions in dementia care and future research.

Papers

Parallel Session 4H - Papers (89) Xiong, (90) Li, (91) Price and Di Gessa

09:30 - 10:30 Friday, 9th July, 2021

Track: Maintaining health and well-being in later life

Paper 89

Older adults' internet use and its association with depressive symptoms: Findings from the China Health and Retirement Survey

Dr Qian Xiong

Lancaster University, Lancaster, United Kingdom

Abstract: Internet use has become popular among older adults and evidence has shown it is beneficial for enhancing their ability to communicate with family and friends, maintain a wide social network, access information and participate in leisure activities online. Fewer studies have examined the impact of internet use on mental health among older adults. The study aims to assess the impact of internet use on the depressive symptoms of older adults using a large sample of older Chinese adults aged 60 and over. The cross-sectional analysis of Wave 4 data in 2018 shows that the prevalence rate of internet use (10%) has increased by five times since 2011. There has been significant increase in the use of mobile phone which is the most popular tool for older adults to use internet. The majority of users are daily users (86%). The level of depression is significantly higher among non-internet users than among internet users, controlling for previous depressive symptoms, age, sex, marital status, general health status and life satisfaction. There is no difference within the internet users. The results indicate there might be positive contribution of internet use to the mental health for older adults. Longitudinal data analysis will be conducted to examine the dynamic relationship between the use of internet and depression using four waves of data.

Paper 90

Association of living alone with mental well-being in later life: a realist review

Winnie Li

Lancaster University, Lancaster, United Kingdom

Abstract: Today's societies have seen a trend of increasing number of people living alone. But studies on the association between living alone and mental well-being of older adults often produced conflicting results. This study aimed to investigate this association via a realist review to identify and explain what works, for whom and in what circumstances living alone can have an impact on mental well-being of the elderly. PubMed, PsycInfo, and Web of Science were searched from 2000 to 2019 to identify potential studies that reported the relationship between living alone (defined as a one-person household) and outcome of mental well-being. Participants and settings were community-dwelling older adults aged 60 or over. All study designs and outcomes were considered. 24 studies were included for review. The association between living alone and mental well-being of elders is more likely to be context dependent. In cultures where family interdependence is honoured, such as Southern Europe and Southeast Asia, living alone does constitute a risk factor for the elderly's mental well-being. It is the state of solo-living that predicts negative psychological outcomes. Whereas for cultures where family independence and individual autonomy are valued, such as Northern and Western Europe, US, Canada, living alone does not in itself associate with adverse mental well-being in later life. It is the process, rather than the state, of solo living that negatively impacts psychological outcomes. More than a kind of living arrangement, living alone in old age is a complex issue and further research is needed.

Papers

Paper 91

Older people living at home with clinical vulnerabilities during the pandemic: an examination of changes in health and social well-being using the English Longitudinal Study of Ageing Covid-19 sub-study

Professor Debora Price¹, Dr Giorgio Di Gessa²

¹University of Manchester, Manchester, United Kingdom.

²University College London, London, United Kingdom

Abstract: People with specific health profiles and diseases (such as diabetes, lung and heart conditions) have been classified as 'clinically vulnerable' (CV) to Covid-19, i.e. at higher risk of severe illness and mortality from Covid-19, and were targeted for shielding. However, there is as yet little evidence on how the pandemic and shielding impacted the health and social well-being of CV older people.

We used data from Wave 9 (2018/19) and the first Covid-19 sub-study (June/July 2020) of the English Longitudinal Study of Ageing. Using logistic and linear regression models, we investigated associations between being CV and health and social well-being during the pandemic, while controlling for pre-pandemic levels of the outcome variables. We also explored the interactions between CV and age-group (50s, 60s, 70s, 80+), and between CV and shielding.

CV people were more likely to report worse health and social well-being outcomes during the pandemic, even taking into account pre-pandemic differences. However, changes in health were not uniform across different age groups, and CV respondents were generally at greater risks of deterioration in health and social well-being compared to those not CV in the same age-group. CV respondents who were shielding reported worse outcomes compared to those not CV and not shielding.

While policies focussing on shielding CV older people reduce rates of hospitalisation and death from Covid-19, policymakers should also pay attention to understanding and addressing the wider needs of this group if their long-term health and social well-being are not to be compromised.

Parallel Session 4K - Papers (92) Mutz et al, (93) Mutz and Lewis, (94) Koukouli et al, (95) Dickens et al

09:30 - 10:30 Friday, 9th July, 2021

Track: Maintaining health and well-being in later life

Paper 92

Exploring health in the UK Biobank: associations with sociodemographic characteristics, psychosocial factors, lifestyle and environmental exposures

Mr Julian Mutz¹, Dr Charlotte Roscoe², Professor Cathryn Lewis¹

¹King's College London, London, United Kingdom.

²Harvard University, Boston, USA

Abstract: A greater understanding of factors associated with good health may help increase longevity and healthy life expectancy. We examined associations between multiple health indicators (health status, long-standing illness and self-rated health) and sociodemographic (age, sex, ethnicity, education, income and deprivation), psychosocial (loneliness and social isolation), lifestyle (smoking, alcohol intake, sleep, BMI, physical activity and stair climbing) and environmental (air pollution, noise and greenspace) factors, using data from 307,378 UK Biobank participants (mean age=56.1 years [SD=8.07], 51.9% female). Low income, being male, neighbourhood deprivation, loneliness, social isolation, short or long sleep duration, low or high BMI and smoking was associated with poor health. Walking, vigorous-intensity physical activity and more frequent alcohol intake was associated with good health. There was some evidence that airborne pollutants (PM_{2.5}, PM₁₀ and NO₂) and noise (L_{den}) were associated with poor health, though findings were inconsistent in adjusted models. Our findings highlight the multifactorial nature of health, the importance of non-medical factors, such as loneliness, healthy lifestyle behaviours and weight management, and the need to examine efforts to improve health outcomes of individuals with low income.

Papers

Paper 93

Lifetime depression and age-related changes in body composition, cardiovascular measures, grip strength and lung function

Mr Julian Mutz, Professor Cathryn Lewis

King's College London, London, United Kingdom

Abstract: Individuals with mental disorders, on average, die prematurely and may experience accelerated biological ageing. In individuals with lifetime depression and healthy controls, we examined the functional relationships between age and physiological measures. UK Biobank recruited >500,000 participants, aged 37-73, between 2006-2010. Generalised additive models (GAMs) were used to examine associations between age and multiple cardiovascular, body composition, grip strength and lung function measures. Analyses were conducted separately in males and females with lifetime depression compared to healthy controls. Analytical samples included up to 342,393 adults (mean age = 55.87 years, SD = 8.09; 52.61% females). We found statistically significant differences between individuals with lifetime depression and healthy controls for most physiological measures, with standardised mean differences between -0.145 and 0.156. There was some evidence that age-related changes in body composition, cardiovascular measures, lung function and heel bone mineral density followed different trajectories in individuals with lifetime depression. These differences did not uniformly narrow or widen with age. For example, BMI in females with lifetime depression was approximately 1.1 kg/m² higher at age 40 and this difference narrowed to about 0.4 kg/m² at age 70. In males, systolic blood pressure was approximately 1 mmHg lower in individuals with lifetime depression at age 45 and this difference widened to about 2.5 mmHg at age 65. Evidence of differences in ageing trajectories between individuals with lifetime depression and healthy controls was not uniform across physiological measures and differed by sex.

Paper 94

A latent Gaussian process model for healthy ageing phenotype markers using the English Longitudinal Study of Ageing

Ms Evanthia Koukoulis¹, Dr Juhyun Park², Dr Stefanie Doebler¹

¹Lancaster University, Lancaster, United Kingdom.

²ENSIIE & LaMME, Evry, France

Abstract: The ageing process is a multi-dimensional and dynamic process. An ageing phenotype is often built using information on one or more of five different health domains; physical, metabolic, cognitive, social and emotional. However, employing proxies, i.e. sum scores, to directly assess individual functioning on those areas using questionnaire and test data (which is often ordinal in nature) is challenging and the resulting measures are often invalid and unreliable since they strongly depend in the selection of variables used for their construction. Therefore, they often fail to accurately illustrate how life domains mutually change and interrelate as people are getting older.

Aiming to understand the relationships between ageing, health, social connectedness and well-being and study the mechanisms that benefit healthy and active ageing, we propose a latent Gaussian process (LGP) methodology which models ageing as a multidimensional process utilising information on all ageing domains. We use data from the English Longitudinal Study of Ageing (ELSA). Through this work, we, first, directly build physical, metabolic, cognitive, social and emotional health indexes by taking aggregated scores using the ELSA data to show the ambiguity that this approach encompasses. We, then, indirectly model the ageing domains using the proposed LGP method aiming to get a more comprehensive picture of healthy ageing and its dynamics. This method overcomes the limitations of previous approaches by modelling hidden dimensions of ageing and age-dependent relationships between them, thus facilitating inference about health changes at older age.

Papers

Paper 95

Predictors of Hospitalisation in a cohort of Community Home Nursing Clients

Dr Marissa Dickins^{1,2}, Dr Angela Joe¹, Professor Judy Lowthian^{1,3,4}

¹Bolton Clarke Research Institute, Melbourne, Australia. ²Southern Synergy, Department of Psychiatry at Monash Health, Southern Clinical School, Monash University, Melbourne, Australia. ³School of Public Health and Preventive Medicine, Monash University, Melbourne, Australia. ⁴Faculty of Health and Behavioural Sciences, University of Queensland, Brisbane, Australia

Abstract: In 2016, 15% of the Australian population (3.7 million individuals) were aged 65 and over, with hospitalisations in this group increasing faster than overall population growth for this age group. Hospitalisations of people aged 65 and over account for two-fifths of hospitalisations and a half of all patient days, and account for one-fifth of all emergency department presentations. With this age group set to increase, it is imperative that reductions in avoidable health service usage are optimised to reduce burden on the health care system. High unplanned readmission rates contribute to a significant proportion of avoidable hospitalisations each year – a largely preventable cost to the healthcare system. For the older person, hospitalisation is associated with adverse events including functional decline, return to hospital, admission to residential care, and death. This presentation outlines the findings of a study to identify factors associated with hospitalisation of older people receiving community home nursing between 2006 and 2015. One-quarter were transferred from home to hospital (24%). The overall rate of transfer to hospital between 2006 and 2015 was 216 per 1,000 episodes of care, with this rate falling slightly across the 10-year period. The majority of transfers to hospital were unplanned (84%). The rate of planned transfers to hospital decreased by 38% between 2006 and 2015, while the rates of unplanned transfers to hospital remained relatively stable across the same period. Further analyses will also be presented, including the factors that predict hospitalisation in this vulnerable group.

Parallel Session 4L - Papers (96) Douglas et al, (97) Weigt et al, (98) Grotz et al

09:30 - 10:30 Friday, 9th July, 2021

Track: Impact of and response to Covid-19: lessons for future pandemics

Paper 96

The Impact of COVID-19 Fear: Evidence To Inform Social, Health And Economic Recovery - A Healthy Ageing In Scotland (HAGIS) Study

Dr Elaine Douglas, Professor David Bell, Dr David Comerford, Olivia Olivarius, Dr Louise McCabe, Dr Cate Pemble, Dr Lesley McGregor, Dr Tamara Brown

University of Stirling, Stirling, United Kingdom

Abstract: COVID-19 fear influences decisions such as visiting family and friends, attending GP/hospital appointments, returning to the workplace and employment/consumption patterns. Yet there is no generally accepted instrument to define or measure COVID-19 Fear. This study addresses the problem by:

- (1) constructing a robust and evidence-based survey instrument for COVID-19 Fear;
- (2) using the instrument to measure prevalence among older people in Scotland, and
- (3) relating this to willingness to re-engage across social, health, and economic domains as society adjusts to what may be termed the 'new normal'.

This mixed methods study includes a largescale mixed-mode survey and interviews with both older people and professionals working in the social care, healthcare and third sector. This approach enables decomposition of responses to COVID-19 fear by socio-economic disadvantage and by place.

The study is funded by the [Economic and Social](#)

Papers

[Research Council](#) (ESRC), as part of [UK Research and Innovation](#)'s rapid response to Covid-19, and commenced in December 2020. At conference, we will report on the development of the COVID-19 fear instrument – which will then be available for use by other researchers. We will also report on the co-production of the instrument with our Older People Advisory Group.

Paper 97 CoronaCare - What the pandemic teaches us: challenges in long-term care settings in Germany

[Julia Weigt](#), Prof. Dr. Christian Apfelbacher, Dr. Astrid Eich-Kroh

Institute of Social Medicine and Health Economics, Magdeburg, Germany

Abstract: Nursing home residents are considered a vulnerable group as they are at risk of a particularly severe course of COVID-19 due to chronic and multimorbid diseases, which can ultimately end in death. The CoronaCare study sets out to investigate the situation of residents and nursing staff in long-term care settings in Germany and how they are affected by the pandemic.

Following a grounded theory methodology, data were collected through qualitative telephone interviews with managers and nursing staff of care facilities. The interviews are still in progress and will end by March 2021. Six interviews were conducted and transcribed during the months of July and eight between November and December 2020.

The analyses of data from July and November/December with nursing home staff show both negative and positive consequences of the pandemic. Initially, little changed for the nursing home residents in the course of the day as only the group activities were limited or temporarily suspended (lockdown spring 2020). However, the complete ban on visits in the spring led to feelings of isolation among residents according to nursing staff.

In contrast to the first lockdown, day-to-day challenges are emerging during the second one. The implementation of a testing strategy for residents, visitors and staff has put a heavy burden on nursing staff while experiencing a higher number of infections among the staff. Overall, the infection and death rates in nursing homes is much higher compared to spring when the cooperation among colleagues improved and the nursing facility employees grew closer together.

Paper 98 Pandemic policy making affecting older adults during the COVID-19 pandemic in the four nations of the UK.

[Dr Jurgen Grotz](#)¹, Dr Linda Birt¹, Heather Edwards², Professor Ewen Speed³

¹University of East Anglia, Norwich, United Kingdom.

²Come Singing, Norwich, United Kingdom. ³University of Essex, Colchester, United Kingdom

Abstract: Conference subtheme: Impact of and response to COVID-19: lessons for future pandemics.

This paper aims to provide a critical perspective on the effects of policy changes designed to reduce the risk of infection as a result of COVID-19, specifically on voluntary action of and for older adults, comparing the devolved responses in England, Scotland, Wales and Northern Ireland. The paper will be building on work by Grotz, Dyson and Birt (2020) about the effects of pandemic policy on older adults and ongoing work by Grotz and Speed on the divergence of policies across the four nations of the UK (ESRC ES/V015281/1). It will critically analyse discourses and interpret emerging evidence with a view to informing national recovery and post-pandemic transformation of support for older adults. The paper is co-produced with a patient and public involvement co-author with direct experience of voluntary action responses for people with dementia (Edwards), drawing on theories from medical sociology (Speed), voluntary action (Grotz) and gerontology (Birt). The involvement of Grotz, Birt and Speed is also supported by the National Institute for Health Research (NIHR) Applied Research Collaboration East of England (ARC EoE) programme, as the work seeks to actively explore inequalities and meaningfully involve those impacted by the research.

References

Grotz, J., Dyson, S. and Birt, L. (2020), "Pandemic policy making: the health and wellbeing effects of the cessation of volunteering on older adults during the COVID-19 pandemic", *Quality in Ageing and Older Adults*, Vol. 21 No. 4, pp. 261-269. <https://doi.org/10.1108/QAOA-07-2020-0032>

Papers

Parallel Session 4M - Papers (99) Bek et al, (100) Steele and Swaffer, (101) Balki et al, (102) Leahy

09:30 - 10:30 Friday, 9th July, 2021

Track: Maintaining health and well-being in later life

Paper 99

Maintaining activity at home through the COVID-19 pandemic: Older people's experiences of using online dance resources

Dr Judith Bek^{1,2}, Dr Michelle Groves³, Mr David Leventhal⁴, Dr Ellen Poliakoff¹

¹University of Manchester, Manchester, United Kingdom.

²University College Dublin, Dublin, Ireland. ³Royal Academy of Dance, London, United Kingdom. ⁴Mark Morris Dance Group, New York, USA

Abstract: A growing evidence base indicates that dance can provide physical and non-physical benefits for healthy older adults and those with age-related neurological conditions. The suspension of in-person dance classes during COVID-19 prompted a rapid transition to remote participation, through digital resources including live and recorded classes.

In a collaborative project between researchers and dance organisations, an international survey was conducted to explore older people's experiences of accessing and using online dance resources between June and November 2020.

Responses were collected from 461 individuals, including 292 with neurological conditions. The majority had previously attended in-person classes, and were practicing dance at home at least once per week. Among respondents not currently using remote resources, the primary barriers were lack of knowledge and motivation.

Most participants (94.2%) reported some benefits of home-based practice, which included both physical (e.g., balance, posture) and non-physical (e.g., mood, confidence) improvements. Participants valued the

convenience and flexibility of remote participation, but noted the loss of social interaction, support and routine. The majority (69.1%) expressed a preference for continuing with both remote and in-person participation in the future.

The results indicate that online dance resources are acceptable and usable among older adults, and suggest that some of the benefits of dance participation may be replicated in this context. Although COVID-19 expedited the development of digital resources, they will likely remain an important element of community dance provision. These findings will inform the further development of online resources and research into outcomes of dance participation in different contexts.

Paper 100

People Living with Dementia and Redress of Structural Harms in Residential Aged Care

Dr Linda Steele¹, Ms Kate Swaffer²

¹University of Technology Sydney, Sydney, Australia.

²Dementia Alliance International, Ankeny, USA

Abstract: In this paper we explore why structural harm experienced by people living with dementia in residential aged care systems – including discrimination, segregation, confinement, neglect and violence – are rarely considered worthy of redress. We take as our case study, the current Australian Royal Commission into Aged Care Quality and Safety. In its interim report simply titled 'Neglect' (2019), the Royal Commission noted that residents have their 'basic human rights denied. Their dignity is not respected and their identity is ignored. It most certainly is not a full life. It is a shocking tale of neglect' (p. 12). Yet, the Royal Commission has neither considered nor recommended redress. As a verb, redress means 'remedy or set right (an undesirable or unfair situation)' – this invites a response to crisis that focuses on the relationship between past harms and how we fix and re-shape our collective future. Our paper begins by introducing the importance of redress as one of a range of responses to structural harms in aged care that can facilitate transformative change. We then discuss the absence of redress from the Royal Commission's work. Next, we explore and draw on critical dementia studies, critical disability studies and critical ageing studies to explore how the Royal Commission legitimates an absence of accountability, redress and, ultimately, justice for people living with dementia and the continuation of everyday structural harms and human rights violations in residential aged care.

Papers

Paper 101

Social Isolation and loneliness among older adults during the COVID-19 pandemic: the role of personal resilience and technology use.

Mr Eric Balki, Professor Carol Holland, Professor Niall Hayes

Lancaster University, Lancaster, United Kingdom

Abstract: The mandatory lockdown imposed by the government to curb the transmission of COVID-19 has significantly disrupted face-to-face social activities, as well as interactions with friends, family and others outside home, among older adults, making them vulnerable to loneliness and social isolation. The objective of our study was to determine the influence of personal resilience, and technology on loneliness and social isolation during the pandemic. Digital-communication technologies, due to their social affordances, offer diverse opportunities to maintain social connectedness, potentially alleviating both isolation and loneliness. The research was designed as a correlational survey model. Data were gathered from 85 older adults aged 55 and over in the United Kingdom during March 2020- March 2021 using surveys based on the UCLA Loneliness Scale, the Connor-Davidson Personal Resilience Scale, Life-Space Questionnaire, Lubben's Social Network Scale and Technology Experience. Pearson correlation and hierarchical regression analysis were conducted in SPSS to investigate the relationship between, isolation, loneliness, technology use and personal resilience. The majority of older adults experienced moderate to severe levels of loneliness during the lockdown. Low levels of personal resilience predicted social isolation and loneliness and technology experience moderated loneliness, but not social isolation. Loneliness among older adults was high during the height of the COVID-19 pandemic. Personal resilience and technology experience were identified as protective factors against loneliness. Findings suggested that strategies directed towards increasing personal resilience and technology use, including empirical interventions, may help decrease loneliness and social isolation caused by the mandatory lockdown during the COVID-19 pandemic.

Paper 102

Disability with Ageing and Ageing with Disability, Comparable or Contrasting Experiences? – Investigating Diverse Experiences of Disability in Older Age.

Dr Ann Leahy

Maynooth University, Kildare, Ireland

Abstract: Despite the fact that disabled people age, and that most people who are ageing will experience disability (barring premature death), it remains unclear whether the social processes of ageing with disability are different from those involved in first experiencing disability in older age. This presentation reports on a qualitative study investigating experiences of physical and sensory disability amongst 42 community-dwelling older people in Ireland. Participants included people who experienced disability for the first time in later life and people who were ageing with long-standing disability. It evidences how disability in older age is shaped by barriers and discourses. Ageing disabled people often lived with exclusion throughout their lives which influenced interpretations of life in older age. Participants experiencing disability for the first time with ageing could experience disability for the first time, and they could also resist this, echoing resistance by disabled people generally. Participants' relationships to a disability identity suggests a more nuanced picture than is usually assumed on the part of both groups. It also points to the role of separate policy and activist approaches to disability in constructing (or not) a 'disability' identity in older age. One conclusion is the need for critical studies to engage more with intersections of ageing and disability.

Papers

Parallel Session 5A - Papers (103) Dunne et al, (104) Toon and Simpson, (105) Cudworth, (106) Gibson et al

11:00 - 12:00 Friday, 9th July, 2021

**Track: Ageing and resilience in
adversity**

Paper 103

The meaning of loneliness to stroke survivors: a qualitative study in Northeast England

Dr Stephen Dunne¹, Dr Amanda Ellison², Dr. Alison Lane², Dr. Keming Yang²

¹University of Sunderland, Sunderland, United Kingdom.

²University of Durham, Durham, United Kingdom

Abstract: Loneliness has been increasingly identified as a serious public health issue, negatively affecting morbidity and mortality (Luo et al., 2012). Connections have been identified between loneliness and conditions such as cardiovascular diseases (Hawkley and Cacioppo, 2010), dementia (Prieto-Flores et al., 2011), and depression (Cacioppo et al., 2010), but the relationship between stroke and loneliness remains unspecified.

We were interested in how loneliness mediates recovery from stroke and in particular, if there are any aspects of loneliness that are peculiar to stroke survivors. This is particularly important as the average age for stroke is 71 years with many mitigatory factors of loneliness already diminishing.

This qualitative study therefore explored stroke survivors' experiences of loneliness. Drawing on interviews with 29 stroke survivors living in the North-East of England several themes in which loneliness was most prevalent were identified: being alone, the season or time, lack of understanding from those without any experience of stroke, reduced autonomy, and deterioration of social relations. As these factors are not quantified in general loneliness scales, it is important that healthcare professionals pay attention to these elements. Not only

do they represent facets of the survivor experience that may increase post-discharge loneliness, but they are also avoidable through existing interventions.

Paper 104

Loneliness, Health, and the Meirkirch Model

Ms Clare Toon^{1,2}, Dr Chaz Simpson¹

¹University of Hertfordshire, Hatfield, United Kingdom.

²West Sussex County Council, Chichester, United Kingdom

Abstract: Loneliness, defined as the perceived discrepancy between desired and actual social contact, is frequently blamed for poor emotional, mental and physical health. However, the causal pathways remain unclear. A mixed-methods study was conducted to identify what it is that causes loneliness to detrimentally impact the health of some, but not all, retired older adults. Initial analyses, combined with ongoing stakeholder and participant involvement, have highlighted a number of key themes, including attachment, resilience, and victim mentality. Building on previous work, this paper seeks to draw together several proposed explanations for the apparent relationship between loneliness and health. Focus will also be given to theories arising from this research, with particular reference made to the synergies between these theories and the Meirkirch Model of Health. The Meirkirch model is based on systems thinking and defines health as a dynamic state for which each individual and the society share responsibility.

Papers

Paper 105

Exploring Relationship Changes During the Course of a Dementia-Illness; Perspectives of Widowed Partners.

Mr Joshua Cudworth

Kingston University London, Kingston upon Thames, United Kingdom

Abstract: Research exploring relationship changes during the course of a dementing illness. Perspectives of widowed partners has shown that they are affected by several factors (diagnosis, identity, the meaning of marriage and the use coping mechanisms). Limited research has been conducted with widowed partners of people with dementia and has mainly focussed on those with, Early Onset Dementia. To address this, the present study focused on; How do widowed partners describe changes in their relationship over time?, How did dementia impact partner/carers?, and what else helped to maintain their relationship as the illness progressed? Semi-structured interviews were conducted over the phone or via video link with five participants (3 female and 2 male). The interviews were audio recorded, transcribed verbatim and analysed using thematic analysis. Generally, attitudes towards a negative diagnosis were a major source of how dementia affected their marriage and identity. When given a negative diagnosis and a lack of support and information, participants used a variety of coping strategies; from the Alzheimer Café, to the wisdom of taking a break, to utilising friends and family. Findings are critically analysed considering existing literature on dementia and relationships. The study proposes greater awareness surrounding dementia in the community, the affect a diagnosis can have and a need for greater training and guidance for diagnosticians. It is proposed that information and guidance is needed for people with dementia and their partners to access community support such as the Alzheimer Café and how and when to utilise statutory support.

Paper 106

Numbering the Innumerable: Demonstrating the Importance of Peer Support for People with Dementia and Unpaid Carers using a Mixed Methods Approach

Dr Grant Gibson¹, Dr Cate Pemble¹, Ms Lesley Aitkenhead², Mr Rog Harrison², Ms Sheila Thorburn², Dr Jane Robertson¹

¹University of Stirling, Stirling, United Kingdom.

²Community Researcher, University of Stirling, Stirling, United Kingdom

Abstract: The experiences of people with dementia and their unpaid carers are by their very nature varied and multifaceted. While advances in contemporary policy and practice have significantly improved the provision of support for people living with dementia and unpaid carers in the year following diagnosis, much of this support focuses on the physical and psychological challenges associated with the disease. What these efforts often fail to account for, however, is the social cost associated with a dementia diagnosis as both people living with dementia and unpaid carers routinely report a weakening of their social networks and a reduction in social support following a diagnosis.

Reporting on an evaluation of peer support in Scotland, this paper highlights the different ways in which strategic project design, goal setting, recording, and reporting practices can significantly impact the extent to which Peer Support Projects are able to support the lives of people with dementia and their carers. Examples are drawn from a mixed methods evaluation of 6 Peer Support Groups that supported older people with dementia and unpaid carers in Scotland between 2015 and 2020.

Results demonstrate that provision of peer support, wherein attendees can both give and receive support as experts in their own lived experience are invaluable. In addition, such projects are demonstrated to inject significant social value into their local dementia care economies. These initiatives may be at risk, however, as an increasingly severe financial climate puts increasing pressure on third sector and voluntary organisations to demonstrate 'value for money'.

Papers

Parallel Session 5C - Papers (107) Lain, (108) Naegele et al, (109) Tur- Sinai and Spivak, (110) Price and Buckley

11:00 - 12:00 Friday, 9th July, 2021

**Track: Retirement and changing
working lives in later life**

Paper 107

The marginalisation of older workers in a UK local authority facing budget cuts

Dr David Lain

Newcastle University, Newcastle, United Kingdom

Abstract: In recent years we have seen an intensifying 'neo-liberalisation of old age', with increased individual responsibility for securing financial welfare badged in terms of 'opportunities' to work longer given new protections from age-discrimination (Macnicol, 2015). In this context, this paper examines the marginalisation of older workers in UK local government, a sector of employment selected because it is on the receiving end of neoliberal pressures. Qualitative case study research on the employment of older people was conducted in a local authority (LA); four senior HR managers and 37 older workers (aged 50+) were interviewed. The LA had managed to avoid compulsory redundancies by using voluntary redundancy schemes and a redeployment scheme for people to move to radically restructured jobs. The HR managers were adamant that they had been age-neutral in their response to austerity pressures and argued that job redeployment was open to everybody, irrespective of age, and could be viewed in terms of offering the opportunity to exert control and develop their careers. The responses of older workers (n=37) were mixed, but virtually none saw these changes as offering an opportunity for control and development. Some felt passed over for promotion, movement into jobs they wanted, or training compared with younger colleagues. Some had reluctantly moved into lower level jobs, and others experienced stress as a result of work intensification/restructuring and had decided to leave early as a result.

Paper 108

Planned retirement timing in Europe: Are Europeans adapting to the policy of extending working lives?

Dr. Laura Naegele¹, Lena Becker², Prof. Moritz Hess³, Dr. Wouter DeTavernier⁴, Dr. Jana Mäcken⁵

¹University of Vechta, Vechta, Germany. ²University of Bremen, Bremen, Germany. ³Hochschule Niederrhein, Mönchengladbach, Germany. ⁴OECD, Paris, France. ⁵University of Cologne, Cologne, Germany

Abstract: Population ageing with its increasing number of older people has resulted in concerns that the financial future of many European welfare states and especially pension systems is in jeopardy since the late 1980s. In particular, public pay-as-you-go pensions are seen as vulnerable to population ageing. In reaction, policy makers in many European countries have implemented reforms aimed at delaying retirement and extending working lives. They have increased state pension ages, closed early retirement options and invested in the employability of older workers and as a result older workers' employment rates are increasing.

Yet, many of these reforms have a time-lagged effect, thus, today's pensioners have often not felt the full impact of the reforms. Nevertheless, previous studies have shown that older workers not only adapt to the new credo of extended working lives, but are also quite precise when estimating their retirement timing. Older workers' planned retirement age might therefore help evaluate the reforms impact and could be used as a proxy for older worker's future actual retirement behaviour.

So far however, no studies exist that investigate the planned retirement age and its potential changes in a European perspective. Based on data from Survey of Health, Ageing and Retirement in Europe (SHARE) the paper aims to fill this gap in the literature and explore the planned retirement age in a cohort and a country comparison. Preliminary results show an increase of the planned retirement age. Further analyses consider country, socio-economic status, and gender differences.

Papers

Paper 109

How Generous Are Societies toward their Elderly? An International Comparative Study of Replacement Rates, Well-Being and Economic Adequacy

Prof. Aviad Tur-Sinai¹, Prof. Avia Spivak²

¹The Max Stern Yezreel Valley College, Yezreel Valley, Israel. ²Ben-Gurion University of the Negev, Beer-Sheva, Israel

Abstract: Replacement rates have become accepted as a useful metric for assessing the conditions of retirees and households at point of retirement. We use data from the SHARE longitudinal database to investigate income dynamics within a comparative European context. Our analysis, centering on households as opposed to the individuals on whom international data commonly focus, reduces replacement rates to their components — pension, labor income, etc — looks at the dynamics among household members in relation to work and pension income.

Total replacement rates vary widely among the fourteen countries sampled: overall replacement rates of around the Bismarckian 70% across the entire sample, 80% in countries that have Social Democratic and Continental social-policy regimes, and 60% in countries that have East European and Middle Eastern regimes. Looking the pension and wage components, however, the latter accounts for about 30% of household income—an important fact for decision-makers to consider. Couples tend to retire together, especially if close in age, and labor income compensates amply for lower pension income. The Gini coefficients of our sample are compared before/after retirement to determine whether the social programs that underlie pensions mitigate income inequality after retirement. Post-retirement ability to move on the income ladder is another measure of equality.

Finally, we examine the well-being and quality of life of retirees and their households. We find a positive correlation between replacement rate and indicators of retirees' and their households' quality of life, e.g., satisfaction with life, ability to consume healthcare services, and ability to cover unforeseen expenses.

Paper 110

Pensions on divorce: where now, what next?

Professor Debora Price, Dr Jennifer Buckley

University of Manchester, Manchester, United Kingdom

Abstract: It is 20 years since the 1999 Welfare Reform and Pensions Act introduced pension sharing on divorce in England and Wales. In this paper, we consider three questions. First, we review what has happened in pension outcomes for divorced men and women since the Act came into force. We next turn to statistical analysis of the Wealth and Assets Survey to consider current pension accumulation among couples, what scope there might be for pension sharing in the event of divorce, and what the current situation looks like for divorced men and women. Third, we ask what the future might hold.

Our analysis reveals that very widespread disparities persist between men's and women's accumulated pension wealth throughout the life course, and these disparities exist within couples, at all ages, and at all points on the income and pension wealth distributions. For many couples, there is a high probability that their pension wealth exceeds their property wealth.

While we show that there is considerable potential for pension sharing among currently married people, there remains much we do not know about these issues. We close with a discussion of the substantial research agenda needed to provide a clear evidence base for ongoing reform.

Papers

Parallel Session 5E - Papers (111) Toze et al, (112) Marsillas et al

11:00 - 12:00 Friday, 9th July, 2021

Track: Changing connections and relationships

Paper 111

Pets in care homes: emotional connections and practical considerations

Dr Michael Toze¹, Professor Mo Ray¹, Professor Marie Fox²

¹University of Lincoln, Lincoln, United Kingdom.

²University of Liverpool, Liverpool, United Kingdom

Abstract: For many older people, a companion animal is a member of their family, and an important part of their lives. However, entry into a care home can threaten the continuity of this relationship. In 2016, the Court of Protection concluded in a best interests assessment that 'Mrs P' should have contact with her pet dog from whom she had been separated when she moved into a care home. However, current policy and practice for the inclusion of pets as part of a move to a care home remains very variable. Older people and their relatives may face challenges in identifying care homes that will support them living with companion animals, or even maintaining an active relationship with their animals via visiting the care home. For care home managers and staff, companion animals may raise dilemmas around balancing the needs of the individual, the needs of others living and working in the care home, and considering the welfare of the animal.

This paper reports on a study funded by the Dunhill Medical Trust, drawing upon qualitative interviews with older people, care home staff, relatives and relevant charity and professional organisations, discussing experiences and implications of care home pet policies. It will consider the experiences and views of older people, good practice examples from care homes that have accepted resident animals, dilemmas and challenges for care homes that are uncertain about accepting animals, and the wider implications for charity and public sector services.

Paper 112

Exploring social exclusion in older adults living in Gipuzkoa

Dr Sara Marsillas¹, Elena Del Barrio¹, Penélope Castejón¹, Dr Daniel Prieto Sancho², Pura Díaz-Veiga¹

¹Matia Institute of Gerontology, Madrid, Spain.

²Universidad Complutense de Madrid, Madrid, Spain

Abstract: Social exclusion in later life is receiving increasing attention in the last decades. In its conceptualisation, it is frequently presented as a multidimensional concept in which the dimensions vary across studies. Recent systematic and scoping reviews provided an overview of the studied dimensions and subdimensions contributing to join the evidence base (Van Regenmortel et al., 2016; Walsh et al., 2017). Based on them, a quantitative study was developed with the aim of providing prevalence of different realities concerning social exclusion in Gipuzkoa in older people as well as identifying the dimensions in which more disadvantages are observed. A survey of a representative sample of home-dwelling residents aged 60 and over was conducted in Gipuzkoa (Basque Country, Spain) through structured telephone interviews based on a questionnaire assisted by computer. The final sample consists of 1653 people (43.9% males and 56.1% females; 43.5% aged 60-69, 31.4% aged 70-79 and 25.1% aged 80 and over). Findings observed point to results in terms of vulnerability regarding ageism and digital exclusion, followed by social relations. Additional questions about if the COVID-19 crisis have affected the situation in each dimension were included and analysed. The discussion highlights the relationships found among dimensions and intervention recommendations are proposed to improve the vulnerabilities of older adults.

Papers

Parallel Session 5F - Papers (113) Harrison et al, (114) McGee et al, (115) Mulrine et al, (116) Barrado-Martín et al

11:00 - 12:00 Friday, 9th July, 2021

**Track: Health and social care
practices, innovations and futures**

Paper 113

Moving to care homes in Wales with recent history of stroke: prevalence, trends, recurrent stroke and mortality

Dr Stephanie L Harrison^{1,2}, Dr Deirdre A Lane^{1,2,3}, Mr
Ashley Akbari^{4,5}, Dr Fatemeh Torabi⁴, Ms Leona Ritchie^{1,2},
Dr Asangaedem Akpan^{6,7}, Professor Julian Halcox⁴,
Professor Gregory Lip^{1,2,3}

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Abstract: The objectives were to determine the proportion of older people moving to a care home with recent history of stroke, trends over time, and associations with recurrent stroke and mortality. The Secure Anonymised Information Linkage (SAIL) Databank links population-scale health and social care data in Wales. Older people (≥ 65 years) newly resident in a care home and captured within the SAIL databank between 2003-2018 were included. Age and sex-

standardized proportions were calculated for recent history of stroke (ischaemic, haemorrhagic or unspecified stroke within 12-month period before moving to a care home). Cox proportional hazard models were used to determine associations between recent history of stroke and recurrent stroke and mortality, adjusted for age, sex, co-morbidities and frailty. During the study period, 91,004 older people became new residents in care homes in Wales and were captured in the SAIL Databank; 8.3% ($n=7,517$) had recent history of stroke. The age and sex-standardized proportions for recent history of stroke decreased from 9.2% (95% confidence interval (CI): 8.4%, 10.1%) in 2003 to 6.1% (95%CI: 5.5%, 6.8%) in 2018; absolute change -3.1% (95%CI: -4.2%, -2.1%). Recent history of stroke was associated with a higher risk of one-year stroke after moving to a care home (adjusted Hazard Ratio 4.38 (95%CI: 4.16, 4.61) and all-cause mortality (adjusted Hazard Ratio 1.13 (95%CI: 1.09, 1.18)). Our findings suggest that a more rigorous approach to assessment, treatment and monitoring of modifiable risk factors for stroke may be warranted in older people moving to care homes with recent history of stroke.

Papers

Paper 114

Understanding the older persons' experience of urgent and emergency care through the lens of health care professionals

Ms Marie McGee, Mrs Bridget Penhale, Mr Neil James
University of EastAnglia, Norwich, United Kingdom

Abstract: Background:

Older people are the largest patient user-group of NHS care, in particular Emergency Department (ED) provision. However, we know little of the health care professionals' (HCPs) perspectives about the care of older people within these settings.

Objectives of Study:

- To explore HCPs perceptions of how the context of care influences older people's experiences of care.

Data Collection Methods:

Qualitative, focus groups with HCPs from an NHS hospital in the East of England.

Analysis:

Data collected was analysed using thematic analysis.

Results:

Three overall themes were identified: **Challenging Care Environment, Understanding Older People Needs** and **Improving the Care Journey**. The findings illustrate that HCPs do their best, within the constraints of the urgent and emergency care environments. This resulted in HCPs feeling frustrated and disappointed when the care they aspired to did not match their expectations. Furthermore, the organisational processes of care had a poor fit with meeting the needs of older people. Thus, different pathways of care are required to fully address these needs. Additionally, HCPs require a specific skill set, to maximise older people's involvement in their care.

Conclusion:

The lack of fit of the ED environment failed to recognise older people as a distinct group with unique needs. Central to addressing these needs was comprehensive assessment, but this requires more time to care. Tensions arise when HCPs feel they cannot meet older people's needs which often leaves them struggling emotionally.

Paper 115

Understanding safety incident reporting for residents transitioning between hospital and care home: A qualitative study with care home staff

Dr Stephanie Mulrine¹, Dr Jason Scott¹, Kate Byrnes¹, Professor Katie Brittain¹, Professor Pamela Dawson², Michele Spencer³, Professor Justin Waring⁴, Dr Lesley Young-Murphy⁵

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Abstract: Transitions between hospital and care home are high in risk, with a large proportion of preventable safety incidents arising. Identifying incidents that occur during transitions is difficult; reports do not accurately reflect level of harm, care home and hospital organisations have different priorities, and health and social care sectors have different understandings of safety. Consequently, integrated care is lacking and opportunities for organisational, cross-sector learning can be missed. There is currently a knowledge gap around how care home staff report incidents, including what incidents are currently reported, who reports the incidents, to whom they are reported, the systems (technological or otherwise) they use to report the incidents, and the social conditions that influence reporting, including the 'work-as-done' actions related to formal and informal incident reporting.

As part of a wider research project this paper will examine the results of approximately 40 semi-structured interviews with care home staff, including managers, nursing staff, and healthcare assistants. The presentation will cover how staff from care home organisations in North East England and South West England use internal systems for reporting incidents and how differing regional as well as local practices may influence these systems, including the socio-cultural environments. Finally, this paper will explore the implications for policy and practice and where improvements may be made to health and care systems, and a description of how the findings will inform latter stages of the study will be discussed.

Papers

Paper 116

Family carers and professionals' experiences of supporting people living with dementia's nutrition and hydration needs towards the end-of-life

Dr Yolanda Barrado-Martín¹, Dr Pushpa Nair¹, Dr Kanthee Anantapong^{2,3}, Ms Narin Aker¹, Dr Kirsten J. Moore^{2,4}, Dr Christina H. Smith⁵, Prof Greta Rait¹, Prof Elizabeth L. Sampson^{2,6}, Prof Jill Manthorpe⁷, Dr Nathan Davies^{1,2}

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Abstract: The aim of this study was to understand the needs and challenges of family carers and professionals supporting people living with dementia with nutrition and hydration towards the end-of-life, and strategies used to manage these challenges. Forty-one semi-structured interviews with family carers (n = 21) and professionals (n = 20) were conducted in London and surrounding areas in 2019-20. Interviews were audio-recorded, transcribed verbatim and analysed using thematic analysis methods. Five themes were identified: family carers struggling before seeking help, perceived priorities of care, professionals' support and educational roles, nutrition and hydration challenges, and strategies. Family carers often find it hard to adapt to the changing needs of the person living with dementia towards the end-of-life. Ensuring comfort becomes central at that stage. Flexibility and creativity seem to help carers and professionals find ways to promote nutrition and hydration towards the end-of-life in a way that is acceptable for the person living with dementia. Professionals and family carers benefit from working together and sharing their experiences and knowledge to better meet the person living with dementia's needs. There is a need to establish when is best to hold discussions with family carers about changes in nutrition and hydration arising from dementia. Professional support to understand the transition towards care which focusses on ensuring comfort and enjoyment towards the end-of-life may be helpful to family carers. The components of this support and its acceptability need to be explored as well as professional capability and capacity to provide this.

Parallel Session 5H - Papers (117) Nie et al, (118) West and Zeilig, (119) Davis et al, (120) Davis

11:00 - 12:00 Friday, 9th July, 2021

Track: Social participation,
citizenship and co-production in a
changing world

Paper 117

Social networks and cognitive function in older adults: Cross-sectional and prospective findings from the HAPIEE study

Mr Yifan Nie¹, Professor Marcus Richards¹, Professor Ruzena Kubinova², Ms Anastasiya Titarenko³, Professor Sofia Malyutina⁴, Dr Magdalena Kozela⁵, Professor Andrzej Pajak⁵, Ms Orjola Shahaj⁶, Professor Martin Bobak¹, Dr Milagros Ruiz^{1,7}

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Abstract: While social networks predict better cognitive ageing, this association is unclear in Central and Eastern Europe (CEE). This study examined associations between social network characteristics (network size of friends and relatives, contact frequency with friends and relatives, and participation in social activities) with global cognition plus four specific cognitive functions (immediate recall, delayed recall, verbal fluency, and processing speed) in older Czech, Polish, and Russian adults. Linear regression estimated associations at baseline and follow-up (3-4 years) in 6,691 participants from the Health, Alcohol and Psychosocial factors In Eastern Europe study. Country, age, and sex-adjusted

Papers

cross-sectional associations showed higher global cognition with more frequent participation in social activities and larger social networks of friends and relatives, but not with more frequent contact of either network. Adjustment for sociodemographic, health behavioural, and health characteristics attenuated dose-response associations with network size of relatives, but not with network size of friends or social activities. Social network size and social activities were also linked with better cognition in minimally-adjusted prospective models, although stepwise associations were much stronger for social activities than for network size of friends and relatives. While baseline cognition fully explained prospective associations with network size of friends and relatives, the attenuation was partial for social activities given the additional importance of sociodemographic, health behavioural, and health characteristics. Analyses of specific cognitive domains replicated the main findings. Older CEE adults with larger social networks and greater social activities participation had better cognitive function, but these associations waned from baseline to follow-up.

Paper 118

Co-creativity, personhood, wellbeing and dementia - some reflections.

Julian West¹, Dr Hannah Zeilig²

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Abstract: Wellbeing and personhood are concepts that are frequently mentioned in relation to people living with dementia. The term ‘co-creativity’ is also used with increasing frequency in contemporary language. However, all three terms are rarely questioned or examined, despite agreed definitions remaining elusive.

Most discussions of wellbeing in relation to dementia start from a perspective that assumes absence or loss; this is something which we query. As *Unmapped*, our co-creative arts projects have prompted us to develop a more nuanced approach to understanding wellbeing. Our recent work has advanced a theory that an understanding of wellbeing must also take into account the ‘illbeing’ which is a necessary part of living with dementia. Our research shows that working co-creatively with the arts could provide a context for this illbeing to be safely acknowledged and expressed, and for artists and others to express solidarity.

As an approach, co-creativity aligns with social citizenship, which extends the concept of personhood, with its focus upon the relational practices in which a

person has opportunities to participate to the fullest extent possible. Attending to relational practices of social citizenship can address the limitations of personhood in the context of dementia and can be applied to people with more advanced dementia.

In the time of Covid, when those with dementia have been disproportionately affected, we are considering ways in which the co-creative arts can promote agency and citizenship - issues which are of crucial importance as we attempt to move forwards.

Paper 119

Use of co-design research methods to inform the development of STARs, a novel personal storytelling intervention for older adults in residential settings.

Ms Lydia Davis, Professor Nicola Botting, Dr Madeline Cruice, Dr Lucy Dipper

City, University of London, London, United Kingdom

Abstract: The communication skills of older people living in residential care is an underexplored topic. Ageing can lead to reduced communication ability and activity; and in the residential care setting, there may also be fewer communication opportunities. Personal stories are core to daily communication, and are important for social roles, identity, and wellbeing. Although established intervention programmes in care homes often use personal storytelling (e.g., reminiscence) they do not focus on the linguistic and cognitive skills required to tell stories, and do not support any of the skills that have been shown to deteriorate with age.

STARs (STorytelling for older Adults in Residential settings) is a novel personal storytelling group intervention for older people which works simultaneously on the quality of personal stories and the communication skills needed to tell them effectively.

Co-design research methods (including consultation with key stakeholders such as care home residents and staff) have played a key role in the development of the STARs programme and subsequently helped inform our decisions about how to successfully adapt the project in light of COVID-19.

Here we summarise our co-design process, methods and research findings, and discuss how this approach has helped us to respond flexibly to the significant changes in access to care home settings over the past year.

Papers

Paper 120 Reflections on co-researching with people living with dementia: Findings from a co-operative inquiry

Dr Katie Davis

The University of Salford, Salford, United Kingdom

Abstract: People living with dementia make a valuable contribution to research, not simply as participants but as active collaborators involved in the selection, design and recruitment of studies (Alzheimer Europe, 2012). Dementia research needs to embrace and recognise that people living with dementia should be at the centre of the research process in order to ensure that their voices are recognised and heard.

Co-operative inquiry is an emerging approach within dementia research that involves cycles of action and reflection and aims to address the concerns of the population being researched 'with' them, as opposed to 'on' them (Heron & Reason, 2006). Building on the concepts of participatory and action research, co-operative inquiry involves the traditional research roles of 'researcher' and 'participant' being replaced by a partnership that fosters a creative, real-world collaboration.

This research draws on the findings from a doctoral study that involved the formation of a co-operative inquiry with people living with dementia and care-partners in Greater Manchester. Ethical and methodological challenges will be explored such as the concept of power and discussions around capacity. Facilitators of the research such as flexibility, creativity and activism will also be discussed. Finally, recommendations for the facilitation of co-research with people living with dementia will be presented.

Alzheimer Europe (2012). *Involving people with dementia: Ethics of dementia research*. Luxembourg: Alzheimer Europe.

Heron, J. and Reason, P. (2006). 'The practice of co-operative inquiry: Research 'with' rather than 'on' people'. *Handbook of action research*, 2, pp. 144-154.

Parallel Session 5I - Papers (121) Eccles et al, (122) Szekeres et al, (123) Guzman et al, (124) Crotti et al

11:00 - 12:00 Friday, 9th July, 2021

**Track: Impact of and response
to Covid-19: lessons for future
pandemics**

Paper 121 The impact of Covid-19 and associated restrictions on people with Parkinson's.

Dr Fiona Eccles¹, Mr Cathal Doyle², Dr Sandra Varey¹,
Professor Carol Holland¹, Professor Jane Simpson¹

¹Lancaster University, Lancaster, United Kingdom.

²Parkinson's UK, London, United Kingdom

Abstract: During the pandemic those living with a health condition have faced particular difficulties both due to the added risks of Covid-19 itself but also due to the impact of measures taken to reduce the spread, such as lockdown. Here we present our findings from a study of individuals with Parkinson's disease in the UK. Parkinson's disease is a neurodegenerative condition which causes problems with movement, but also a wide range of other difficulties including with sleep, swallowing, temperature control, pain and fatigue. Anxiety, depression and apathy are also commonly experienced as well as cognitive problems which can progress to dementia. Parkinson's UK surveyed their members (including family carers) in the first UK lockdown in April-May 2020 about the impact on their health and wellbeing. They are intending to repeat the survey in Spring 2021. In addition we are interviewing 10 people with Parkinson's at several timepoints during the pandemic about their experiences. The initial survey highlighted worsening Parkinson's symptoms in up to a third of respondents and limited access to healthcare and exercise. Initial interviews showed many fears related to Parkinson's were exacerbated. We will present both survey findings and the qualitative data to highlight the impact of the pandemic period on people with

Papers

Parkinson's. Findings may be relevant not only for people with Parkinson's, but also for those with other similar neurodegenerative conditions.

Paper 122

"Inactive by choice or inactive by force" - The barriers and the motivation to exercise in inactive older adults during a pandemic: a mixed-method study

Zsófia Szekeres, Noelia Agustín-Sierra, Lisa Zaidell, Katya Mileva, Rita de Oliveira

London South Bank University, London, United Kingdom

Abstract: Physical inactivity impacts the emotional well-being and physical health of older people. This study aimed to investigate the perceived barriers, facilitators and physical activity patterns during Covid-19.

Participants were 24 older adults (M = 74 years, SD = 5.0, 17 female) who were either physically active or inactive before lockdown. Semi-structured interviews and questionnaires were taken during lockdown and followed up after 2 and 8 weeks.

Template analysis of interviews revealed three main themes related to barriers and facilitators: sense of purpose (which distinguished active from inactive), routes to motivation, and responses to forced inactivity. Both active and inactive participants reduced the amount of time walking at the beginning of lockdown but significantly increased it at 8 weeks ($p=.04$), at which time it related significantly with quality of life, both for mental ($p<.05$) and physical health ($p<.05$).

The sense of purpose was found to be a key source of motivation to exercise influenced by both the belief in the importance of exercise and the affective valence participants assigned to it. Active participants valued exercise due to its health benefits and the enjoyment they gained from it. However, by missing the social context of exercise during lockdown the sense of purpose was lost. Inactive participants did not find enjoyment in exercise due to pain or loss of confidence often caused by health or mobility problems. However, during the pandemic all participants found purpose in walking and outdoor activities as response to the forced inactivity.

Paper 123

'Catch the sun coming up, wave it off as it goes down': A qualitative exploration of later life therapeutic landscapes during the first wave of the COVID-19 pandemic

Dr Viveka Guzman¹, Dr Gabriela Bustamante², Dr Lindsay Kobayashi³, Dr Jessica Finlay³

¹Royal College of Surgeons in Ireland, Dublin, Ireland.

²University of Minnesota, Minnesota, USA. ³University of Michigan, Michigan, USA

Abstract:

Background

Therapeutic engagement with nature can support health and well-being among older adults. However, there is limited evidence of its role in coping with adversities from the COVID-19 pandemic when public health measures have been particularly stringent for the older population. The aim of this study was to advance the concept of therapeutic landscapes by exploring how contact with nature and outdoor spaces influenced older adults' health and well-being during the first months of the COVID-19 pandemic in the US.

Methods

A secondary thematic analysis was carried out with data from the COVID-19 Coping Study baseline online survey collected between April and May 2020. A qualitative database was created by screening open-ended questions for a list of keywords related to participants' experiences, attitudes, and behaviors about engaging with outdoor spaces and nature during the pandemic ($n=769$).

Findings

Preliminary results suggest that older adults purposefully engaged with nature in diverse ways, ranging from the household (through garden views and tending potted flowers) to the broader community (talking long walks or photographing wildlife in the local park). Participants appreciated that outdoor spaces provided opportunities for exercising, community engagement, and maintaining a routine at a safe physical distance from others, which boosted their social, mental, and physical well-being.

Conclusions

Understanding the role of nature and outdoor spaces provides opportunities to identify and magnify community and environmental interventions that promote the health and well-being of older adults during pandemics and their aftermath.

Papers

Paper 124

Re-thinking elderly mobility after COVID-19 pandemic: The case study of Varese

Dr Daniele Crotti, Associate Professor Elena Maggi, Ms Evangelia Pantelaki

Department of Economics, University of Insubria, Varese, Italy

Abstract: As the Italian population is ageing disproportionately with respect to the remaining European countries, healthy ageing becomes a priority to preserve accessibility to fundamental services and social inclusion for the adults over 65 years old. This study will present the first results of the project "HAPPY" (Health Accessibility transport Public Policies for elderly), coordinated by the authors and performed under the grant of the Fondazione Cariplo, in collaboration with the Polytechnic of Milan and the University of Padua. About 400 computer assisted telephone interviews (CATI) were conducted from a representative sample of over 65 years' old residents of Varese (Italy). The objective is to evaluate how several sociodemographic conditions affected the decisions of the older people in selecting specific transport modes before and during the pandemic, as regards the accessibility to frequently visited urban places and services of the welfare space. Furthermore, particular attention is given on how Covid-19 had effected the use of the local public transport (LPT) controlling for the perceived quality of the services and the riskiness of their use compared to the probability of contracting the virus. We identified the attributes of the LPT that are perceived by the elderly as the most important and that now create difficulties in their daily movements. Consequently, we underline the major weaknesses of the LPT on which policy-makers can intervene when formulating the policies addressed to the elderly population. As such, we hope the public transport will continue to play a substantial facilitator of movements in later age.

Parallel Session 5K - Papers (125) Zhou and Bai, (126) Mathie et al, (127) Wolter et al, (128) Oktaviani et al

11:00 - 12:00 Friday, 9th July, 2021

Track: Maintaining health and well-being in later life

Paper 125

Impacts of Age-Friendly Environments on Health and Well-being of Older people: A Systematic Review and Meta-Analysis

Ms Jiajia ZHOU, Dr. Xue BAI

The Hong Kong Polytechnic University, Hong Kong, China

Abstract: Accumulated studies have shown that living in age-friendly environments is regarded as an effective way to maintain autonomy and improve well-being in later life. Yet an conclusive summary has not been constituted in respect of pathways that age-friendly environments operate, and the overall magnitude of the effect from age-friendly domains. Therefore, this paper aims to detect the influential mechanism and quantify effect size in the association between age-friendly environments and older adults' health and well-being. Setting a series of inclusion criteria, a systematic search was conducted in electronic database, including Scopus, Web of Science, EBSCO, PubMed and EMBASE. 31 empirical studies are eligibly selected in for systematic review, among which 16 data sets are available in existing quantitative studies for meta-analysis. Three pathways are summarized in the mechanism that how age-friendly environments generate impacts on health and well-being: direct relationship, mediating effect via psychological process, and moderating effect under lower SES. Overall, there is a positively significant but relatively small effect of age-friendly environments on health and well-being ($r=0.13$, 95% CI [0.09, 0.17]; $p=0.000$), with the biggest effect from the domain of transportation ($r=0.19$, 95% CI [0.08, 0.29]; $p=0.001$). The results specified the positive impacts of supportive and inclusive environments on health and well-being of community dwellers in ageing process, and further explained how the mechanism is operated, providing further implications concerning future research and professional practices.

Papers

Paper 126

Physical Activity and Dementia Friendly Communities

Dr Elspeth Mathie^{1,2}, Professor Elizabeth Pike³, Rebecca Hadley⁴, Sue Marks⁵, Rosemary Phillips⁵, Marion Cowe⁵, Professor Claire Goodman^{1,2}

¹CRIPACC, University of Hertfordshire, Hatfield, United Kingdom. ²NIHR Applied Research Collaboration (ARC), East of England, United Kingdom. ³Sport, Health and Exercise, University of Hertfordshire, Hatfield, United Kingdom. ⁴Research Unit in Sport, Physical Activity and Ageing, University of Hertfordshire, Hatfield, United Kingdom. ⁵Public Involvement in Research Group, University of Hertfordshire, Hatfield, United Kingdom

Abstract: Dementia Friendly Communities (DFCs) are a policy driven initiative to support community engagement with people living with dementia and their supporters, so that they can live well and as independently as possible. Dementia Friendly Communities are collaborations of local people and organisations, often geographically defined, formally recognised as working to a common aim of promoting dementia awareness and inclusion. There is evidence that the provision of physical activity is one way to enable people living with dementia to stay connected with their local communities and achieve improved physical and mental health.

Our research builds on findings from a National Evaluation of DFCs (DEMCOM) [1]. Findings revealed that most DFCs included physical activity programmes, but they were constrained by transport, location and people knowing what is available. The current research aims are to explore the experiences, benefits, and constraints on provision, of physical activity for adults living with dementia in DFCs in England. The pandemic has had a major effect on people living with dementia and this research aims to highlight good practice and inform DFCs of best ways to incorporate physical activity into their provision.

We will present early findings from a survey of DFCs and interviews in three case studies. The research will be informed by those living with dementia and their supporters. We will share what physical activity means to people affected by dementia during COVID-19 and how we are adapting our research to connect virtually.

Reference:

1 Goodman, et al (2020) DEMCOM Final Report <https://doi.org/10.18745/pb.23477>

Paper 127

Social participation through cooperation? Physical activities for older people in stationary and ambulant care settings implemented by sports clubs (first results)

Dr. Veronique Wolter, Miriam Dohle, Lisa Sobo, Cara Stemski

TU Dortmund University, Dortmund, Germany

Abstract: Physical activity in a group brings high and long-term added value for the participants. Especially for older people in need of care this development is dependent on interdisciplinary thinking and the networking of local structures. Studies underline the consideration of the communication and access options that are needed to be able to promote the target group's health through exercise offers. Interestingly, local sports clubs are repeatedly mentioned in national and international publications as competent district partners, but in municipal practice - possibly due to very different basic structures - less thought is given than would be sensible. Particularly in the field of care, outpatient and inpatient, there have so far been more private initiatives or short-term sponsored collaborations with sports clubs.

The project "Moving Nursing Homes and Care Providers" is coordinated by the State Sports Federation of North Rhine-Westphalia, Germany. Local sports clubs cooperate with outpatient and inpatient care providers and start new sports programs for older people in need of care. As part of the scientific evaluation (2020-2022), the perspectives involved - care providers, local sports clubs and (non-)participants - are equally considered and their motives and needs are analysed.

This contribution presents the first results from the interviews with the organisational level about promoting the opportunities of social participation of older people in their different living environments through sports groups. Chances and barriers to the organisation and sustainable design of a cooperation between the big players "care" and "organised sport" on the local level will be discussed.

Papers

Paper 128 Gender Differences in Health-Related Behaviors Among Older Indonesian Adults

Ms. Lisa Wahidatul Oktaviani^{1,2}, Prof. Hui-Chuan Hsu¹, Prof. Yi-Chun Chen¹

¹Taipei Medical University, Taipei, Taiwan. ²Universitas Muhammadiyah Kalimantan Timur, Samarinda, Indonesia

Abstract: There are often gender differences in co-occurring health-related behaviors. Despite HRBs and related factors being explored in previous research, HRBs for older Indonesian adults have not been examined. The purpose of this study was to identify gender differences in health behaviors among older adults in Indonesia and to examine factors related to these differences. The data were obtained from the fifth wave of the Indonesia Family Life Survey collected in 2015. Adults who were age 60 or older were included in the analysis (n=2930). Health-related behaviors included smoking, physical activity, and dietary patterns. The data were analyzed using cluster analysis and logistic regression analysis. Older males have larger risks in smoking (OR=48.50) and more likely to perform high level of physical activity (OR=1.70) than older females. Dietary patterns were identified as a healthy diet, a low vegetable/fruit diet, or a high-calorie diet; there was no gender differences in dietary patterns. Age, ethnicity, ethnicity groups, place of residence, marital status, health status, and social participation were related to health-related behaviors. Health-related behaviors may be explained by lifestyle and culture and especially by gender differences. Gender-sensitive strategies for health promotion policies are suggested

Parallel Session 5L - Papers (129) Bezzina et al, (130) Lariviere and Donnellan (131) Aubrecht et al, (132) Derrer-Merk and Bennett

11:00 - 12:00 Friday, 9th July, 2021

Track: Impact of and response to Covid-19: lessons for future pandemics

Paper 129 Online advice to carers in England during the Covid-19 pandemic: implications for older carers seeking information and support.

Dr Agnes Bezzina, Professor Liz Lloyd, Dr Paul Willis

School for Policy Studies, University of Bristol, Bristol, United Kingdom

Abstract: Older adults constitute the largest user group of adult social care services in England. They also continue to make up the largest group of non-internet users in the UK (ONS, 2019). Despite this, an increasing amount of information for carers is provided online by local authorities and Third Sector Organisations (TSOs), requiring Internet access and a degree of IT literacy. In this presentation, we report findings from a 2020 rapid study of online support and information provision for carers (usually defined as people who provide unpaid care to a family member or friend on a regular, ongoing basis) during the Covid-19 pandemic. The objective was to identify how local authorities (LAs) and TSOs are using their websites to inform and advise carers about support and services available to them and how support and services for carers were affected by the pandemic. Publicly available information on the websites of 150 English LAs were searched to identify support available to carers at the time of the study (August – December 2020). Key data on areas such as type of support provided, layout, and accessibility were captured using a data-capture form developed by the team and based on an earlier 2016 study on support for older carers. The complexity of contemporary service provision was

Papers

reflected in LA websites. These showed wide differences in recognition of the additional pressures on carers, such as financial difficulties, isolation, and safeguarding. To conclude we discuss the implications for older carers and identify examples of good communication and information provision online.

Paper 130

The challenges and resilience resources of informal carers during the first COVID-19 lockdown: A qualitative study

Dr Matthew Lariviere^{1,2}, Dr Warren Donnellan³

¹University of Bristol, Bristol, United Kingdom. ²University of Sheffield, Sheffield, United Kingdom. ³University of Liverpool, Liverpool, United Kingdom

Abstract: On 23 March 2020, Boris Johnson, the Prime Minister of the United Kingdom, issued a statement to all of England that people ‘must’ stay at home starting a nationwide lockdown.

Not all individuals felt the consequences of the national lockdown in the same way. In April 2020, about one-third of adults reported supporting someone they did not previously support before the pandemic (ONS, 2020). Carers UK (2020) estimated 9.1m total carers in the UK increasing to approximately 13.6m during the first lockdown. Strict guidelines for social distancing and shielding people with specific characteristics, including older adults, meant that carers potentially became more isolated.

To support carers during this first lockdown, Mobilise, a tech startup supporting carers, established a series of daily thirty minute ‘Virtual Cuppas’. The study team analysed 49 hours of Cuppas involving 118 participating carers that took place between 20th March 2020 and 28th July 2020. The team explored the challenges and resources carers experienced during the first national lockdown in England.

This paper reports on the study’s findings highlighting how carers experienced more intense and frequent care, the challenges of this work, resources used to reduce these challenges, and how Mobilise’s Virtual Cuppas de-territorialised care communities and instilled new forms of resilience.

References:
Carers UK. (2020). Carers Week 2020 Research Report: The Rise in the Number of Unpaid Carers During the Coronavirus (COVID-19) Pandemic. London: Carers UK.

Office for National Statistics. (2020). “Coronavirus and the impact on caring”. <https://www.ons.gov.uk/>

[peoplepopulationandcommunity/healthandsocialcare/conditionsanddiseases/articles/morepeoplehavebeen-helpingothersoutsettheirhouseholdthroughthecoronaviruscovid19lockdown/2020-07-09](https://www.britishsocietyofgerontology.org/peoplepopulationandcommunity/healthandsocialcare/conditionsanddiseases/articles/morepeoplehavebeen-helpingothersoutsettheirhouseholdthroughthecoronaviruscovid19lockdown/2020-07-09).

Paper 131

Impact of COVID-19 Responses on Dementia Care in Community From the Perspectives of People Living with Dementia and their Carers: An Intersectional Health Equity Analysis

Dr. Katie Aubrecht¹, Dr. Barbara Hamilton-Hinch², Dr. Kristin Hadfield³, Trudy Flynn⁴

¹St. Francis Xavier University, Antigonish, Canada. ²Dalhousie University, Halifax, Canada. ³Trinity College, Dublin, Ireland. ⁴Maritime Strategy for Patient Oriented Research, Halifax, Canada

Abstract: With the announcement of the pandemic in 2020 public health bodies across the world implemented emergency measures in an attempt to manage the spread of COVID-19; recommendations for risk mitigation and prevention of disease transmission to older adults and other socially and/or medically vulnerable groups emphasized temporary social and physical distancing and isolation. While potentially effective, distancing and isolation may be unrealistic and even potentially harmful for people living with dementia, and the family/friend carers who support their care who may experience unmet care needs informed by the stigmatization of dementia, social marginalization related to gender identity, disability and ethno-racial cultural community, and rural and remote geographic residence. In the absence of alternative supports, the emphasis on distancing and isolation as protective measures in COVID-19 risks exacerbating existing challenges and health inequities. This presentation reports results from an intersectional health equity analysis of 30 interviews with people living with dementia and their family/friend carers in the largely rural province of Nova Scotia in Eastern Canada. Interviews were conducted as part of an integrated Knowledge Translation (iKT) COVID-19 rapid research project that aimed to contribute to, clarify and enhance the best evidence-in-the-moment about dementia-relevant supports and program service delivery under COVID-19 from the perspectives of the people most impacted by service changes. Results provide a snapshot of dementia-related service realities for these socially and medically vulnerable populations during public health emergencies, and highlight the possibilities and limitations of online ‘solutions’ and inequities shaping dementia care in the community.

Papers

Paper 132

Older people's family relationships in disequilibrium during the COVID-19 pandemic. What really matters?

Mrs Elfriede Derrler-Merk, Prof. Kate M Bennett

University of Liverpool, Liverpool, United Kingdom

Abstract: COVID-19 shook the world in 2020. Older people were especially impacted with higher morbidity, mortality and advice to stay at home. The present qualitative study explores how people in the UK aged 65 and over experienced the COVID-19 pandemic. Participants (n=33) were recruited via a large scale nationally representative survey (<https://www.sheffield.ac.uk/psychology-consortium-covid19>). We asked how the life had been pre-pandemic, how they experienced the first lockdown and what the future might hold in store. The data were analysed using constructivist grounded theory. This paper focuses on the importance of family relationships and how they changed as a consequence of the pandemic. We found that the family support system had been interrupted, that there were changes in the methods of support and that feelings of belonging were challenged. We argue that families were brought into disequilibrium through changes in the exchange of inter- and intragenerational support. The important role of grandchildren for older adults was striking and challenged by the pandemic. The importance of social connectedness and support within the family had not changed during the pandemic, but it could no longer be lived in the same way. The desire to be close to family members and support them conflicted with the risk of infection. Our study found support for the COVID-19 Social Connectivity Paradox (Smith et al., 2020): the need for social connectedness whilst maintaining social distance. This challenged family equilibrium, well-being and quality of life in older people. We are currently returning to our participants to collect Wave 2 data.

Parallel Session 5M - Papers (133) Doeblner, (134) Ogrin and Lowthian, (135) Palmer et al, (136) Alexander et al

11:00 - 12:00 Friday, 9th July, 2021

Track: Maintaining health and well-being in later life

Paper 133

Later-Life poverty, digital exclusion and experiences of social isolation and reduced mental wellbeing under Covid-19

Dr Stefanie Doeblner

Lancaster, United Kingdom

Abstract: Later-life poverty has been on the decrease in the UK between 1995 and 2011, but has since, in the wake of austerity, increased among non-homeowners and non-married people (JRF 2019). Recent research based on longitudinal (ELSA) data found that later-life poverty and material deprivation have further increased during the covid-19 pandemic (Crawford and Karjalainen, 2020). Existing poverty and deprivation make digital exclusion more likely, which in turn can lead to increased isolation and loneliness and decreased mental wellbeing. Digital inclusion, access to wifi and hardware and access to skills development to allow for online communication are especially important in the current covid-19 crisis, where social distancing rules and the need for risk groups to self-isolate hinder physical contact with family and friends, thus leaving many people socially isolated.

This paper explores the effects of poverty and digital exclusion on experiences of social isolation, loneliness and mental wellbeing among older people in the UK under covid-19. The analysis makes use of wave 9 and of the latest covid-19 study of the English Longitudinal Study of Ageing (ELSA). Preliminary results point to the importance of measures to combat later life poverty and of measures ensuring the digital and cultural inclusion and autonomy of older people.

Papers

Paper 134

Developing Connecting Communities to Care to support wellbeing

Dr [Rajna Ogrin](#), Professor Judy Lowthian

Bolton Clarke, Bentleigh, Australia

Abstract: Loneliness and social isolation have emerged as the new health issues, contributing to poor quality of life, with health outcomes worse than smoking. Loneliness and social are experienced by a third or more older adults, which has been exacerbated by COVID-19. They lead to poorer physical, mental and social wellbeing and higher health service usage. Sustaining positive personal and social relationships and having meaningful social networks are protective factors against loneliness. To effectively support healthy ageing and reduce loneliness, integrating social and clinical approaches is required, linking individual, group and societal-level interventions.

This presentation will outline how three discrete codesigned projects targeting one intervention to improve the wellbeing of older people, culminated in the development of a whole of community approach to address loneliness, social isolation and wellbeing; *Connecting Communities to Care*.

We will discuss the collaborative systematic approach, using codesign, that brought together existing community supports and services, including the use of a link worker and social prescribing by local GPs, to enable the connections for supporting older people with chronic conditions. By building a sustainable, connected community that cares, this approach aims to lead to improved wellbeing, prevent or reduce feelings of loneliness, social isolation and/or depressive symptoms - the future of preventive care.

Paper 135

Co-Designing Age-Inclusive Housing with Virtual Reality: Methodological lessons from a pilot study in remote, technology-enabled, immersive design.

Dr Martin Quirke¹, [Ms Lesley Palmer](#)¹, Professor Judith Phillips²

¹Dementia Services Development Centre, University of Stirling, Stirling, United Kingdom. ²University of Stirling, Stirling, United Kingdom

Abstract: The use of virtual reality (VR) is dominated by younger people and recreational applications. However, the capability of VR, to enable full-scale immersive experiences of architectural design proposals, provides the potential to use VR as a co-design tool amongst underrepresented groups, including older people (50+).

Good quality housing, and age-friendly design are important determinants of health and well-being of older people. Yet the UK is notably lacking in housing that is designed to support disability, age-related impairments, or dementia. National house builders maintain an emphasis on housing provision aimed at families and younger professionals, whilst the needs and preferences of older people have been broadly ignored.

This presentation will discuss findings from a pilot research project, undertaken during lockdown restrictions in the UK, to explore the potential role of VR in the co-design of age-friendly UK housing prototypes. The presentation will focus on methodological considerations in the novel use of VR and other technologies, with a geographically dispersed cohort of older people (50+). It discusses the potential international value of this methodology as a means of including under-represented groups, including older people and those who are remotely located, in research and co-design. We conclude the session with some examples of the housing design lessons that, if applied to current volume housing models, could address several of the identified needs and preferences of older people.

Papers

Paper 136 Embedding and sustaining arts provision in social care settings – the cARTrefu approach

Penny Alexander, Dr Katherine Algar-Skaife, Dr Diane Seddon

Bangor University, Bangor, United Kingdom

Abstract: [cARTrefu past](#)

cARTrefu is an arts in care settings programme led by Age Cymru, funded by the Arts Council of Wales and Baring Foundation. cARTrefu aims to improve the quality of care home residents' experience of participatory arts activities and their wellbeing in general; to develop artists' professional practice through the opportunity to work with groups of people with whom they may have little past experience; and to facilitate the acquisition of new skills, and confidence in sharing these, by care home staff. cARTrefu began in 2015, spanning three phases.

[cARTrefu present](#)

Using a mixed-methods approach our research explores the barriers and facilitators to embedding and sustaining arts provision in social care settings.

Engaging with a broad range of stakeholders, our research involves a rapid evidence review and the collection of primary data via Social Care Innovations Labs (#SCIL) and qualitative interviews to ascertain:

- Aspects of the cARTrefu programme that are most appreciated
- Aspects of the cARTrefu programme that present challenges and how these might be addressed
- The ways in which the cARTrefu programme supports older people living with dementia in care home settings to achieve personal wellbeing outcomes
- Ways of securing buy-in to ensure sustainability, including transferrable lessons from other service settings

[cARTrefu future](#)

Core funding has allowed Age Cymru to develop and refine the project up until 2021. With the support of KESS2 East European Social Funding and Bangor University, our research explores ways to ensure the long-term sustainability of the programme.

Parallel Session 6A - Papers (137) Christopher et al, (138) Váverková et al, (139) Tur-Sinai and Carmel (140) Gow et al

14:00 - 15:00 Friday, 9th July, 2021

**Track: Ageing and resilience in
adversity**

Paper 137 Dementia threat: development and validation of the Threat of Dementia Scale (ToDS)

Dr Gary Christopher¹, Prof Richard Cheston¹, Dr Emily Dodd¹, Dr Paul White¹, Prof Tim Wildschut², Prof Constantine Sedikides²

¹University of the West of England, Bristol, United Kingdom. ²University of Southampton, Southampton, United Kingdom

Abstract: A diagnosis of dementia places in peril a person's sense of self and, indeed, their very life. To better understand the psychological processes underlying peoples' responses, we need to appreciate dementia as an existential threat. Terror Management Theory (TMT) shows us that we respond to threats by erecting defence mechanisms that assuage such situations' emotional impact (Cheston & Christopher, 2019). There has been no reliable way to measure the existence of dementia threat. We aimed to develop and validate the Threat of Dementia Scale (ToDS) to provide a useful clinical tool. Participants in Study 1 (N=248) rated the threat-value of statements about dementia. Results revealed a single-factor solution of 13 items. In Study 2 (N=99), ToDS was validated against existing ageism measures, dementia worry, and anxiety. Threat was associated with the distancing component of ageism. Although fear of developing dementia is related to anxiety levels, the threat component was only predicted by the extent to which the person catastrophizes the risk of having dementia themselves. Scores on the ToDS were not associated with anxiety. The ToDS scale is a valid measure of the extent to which an individual feels threatened

Papers

by dementia. It has good psychometric properties, including good test-retest reliability after one month. The development of a psychometrically sound measure of dementia threat will enable further exploration of how personal experience of dementia, age, gender, or ethnicity contribute to broader social attitudes toward people living with dementia (Cheston et al., 2018).

Paper 138

The effect of gender on the distribution of the theoretical structure of the Czech version of the Patient Dignity Inventory (PDI-CZ)

Mgr. Renáta Váverková^{1,2}, Doc. PhDr. Helena Kisvetrová, Ph.D.¹, PhDr. Mgr. Jitka Tomanová, Ph.D.¹

¹Palacký University, Olomouc, Czech Republic.

²University Hospital, Olomouc, Czech Republic

Abstract: The perception of personal dignity is highly individual and reflects the hierarchy of values and preferences. Due to the ageing of the population with a growing proportion of women, it is important to examine gender differences in the perception of the risk of losing dignity. The objective of the research was to examine whether gender had an effect on the theoretical structure of the Czech version of the Patient Dignity Inventory (PDI-CZ). The sample comprised 263 seniors without cognitive deficiency living in their own social environment (average 74±6.7 years; 70% of women). A factor analysis confirmed a four-factor model of PDI-CZ (Cronbach's alpha 0.859–0.938) and gender differences were confirmed in the structure of the model. The

Purpose of life factor influenced the assessment of "Feeling life no longer has meaning or purpose" more in men ($p=0.047$), while "Concerns regarding spiritual life" was more influenced in women ($p=0.034$). The

Autonomy factor influenced the assessment of "Not feeling supported by my health care providers" only in women ($p=0.030$). The **Confidence** factor influenced the items "Not feeling in control", "Not feeling supported by my friends" and "Not being treated with respect"

more in men ($p<0.001$). The **Social support** factor influenced the items "Not feeling worthwhile or valued" more in men ($p<0.001$) and "Not being treated with respect" only in men ($p<0.001$). The results suggest that although men and women do not differ in the level of assessment of the items, the theoretical structure of PDI-CZ differs between genders.

Paper 139

The Impact of early retirement, nation-related and personal characteristics on cognitive decline

Prof. Aviad Tur-Sinai¹, Prof. Sara Carmel²

¹The Max Stern Yezreel Valley College, Yezreel Valley, Israel. ²Ben-Gurion University of the Negev, Beer-Sheva, Israel

Abstract: The increasing prevalence of cognitive decline (CD) in old age has become a global challenge. Our study aims to enhance understanding of this phenomenon by evaluating longitudinal effects of personal and national determinants on memory decline (MD) among European retirees.

We used data from two interviews collected in 12 European (EU) countries and in Israel by SHARE - a multidisciplinary, cross-national bank of survey data. Our sample included 11,930 retirees aged 50+ who were interviewed at baseline (T1) and again four years later (T2). MD was evaluated by the change in the recalled number of words at T2 compared to those remembered at T1. Ten words were presented at each interview and participants were asked to repeat them, first immediately and again after a few minutes. The scale for evaluation of change over time ranged from -20 to +20.

Except for gender, all of our explanatory variables had a significant effect on MD including age, education, health/function status, depressive symptoms, early retirement, active lifestyle and EU-countries divided into four geographical regions. Decline over time in physical and mental health variables had an additional significant negative effect on memory.

These findings lead us to suggest focusing on what we are able to change in order to postpone MD. In addition to promotion of national policies to prolong years of education and participation in the workforce, we recommend introducing programs that encourage people to postpone retirement, and adjusting workplace conditions in order to enable older persons to continue contributing to the workforce.

Papers

Paper 140

The Intervention Factory: Exploring community-based activities as interventions for cognitive ageing

Professor Alan Gow¹, Calum Marr¹, Malwina Niechcial¹,
Dr Eleftheria Vaportzis²

¹Heriot-Watt University, Edinburgh, United Kingdom.

²University of Bradford, Bradford, United Kingdom

Abstract: Keeping mentally, socially and physically engaged have all been proposed as potentially protective against age-associated cognitive decline. These factors have been incorporated in interventions for cognitive ageing, though are often developed and tested in lab-based settings that may not translate to 'real world' environments. Studies examining activity-based interventions have suggested novelty of the experience for the individual and active engagement might be required for specific cognitive benefits. The Intervention Factory was designed to explore existing community-based activities and learning programmes as potential interventions to reduce cognitive ageing. Participants aged 65 and older completed baseline cognitive, physical and psychological assessments. A pseudo-randomisation procedure allocated them to one of five novel community-based activities, varying in levels of mental, social and physical engagement, for example: computer classes (predominately mental), language classes (mixed mental-social), exercise (predominantly physical/mixed physical/social), creative (mixed mental/physical), social groups (predominantly social), plus a no contact control group. Participants completed their allocated activity for about 10 weeks, approximately 2 hours per week, before returning for follow-up assessments. In total, 336 participants completed baseline assessments across 8 cohorts, with 302 returning for follow-up assessments. The presentation will therefore explore associations between activity allocation and changes in cognitive domain scores (including verbal comprehension, perceptual reasoning, working memory and processing speed) for about 300 individuals. Analyses will consider the mental, social and physical engagement contributors to any intervention-associated benefits. In addition, key challenges and advantages of using real-world activities as potential interventions will be discussed.

Parallel Session 6B - Papers (141) Gates et al, (142) Wilson et al, (143) Boulton et al, (144) Maherally

14:00 - 15:00 Friday, 9th July, 2021

Track: Changing connections and relationships

Paper 141

Understanding biopsychosocial barriers to older adults' use of technology as a "tool" for social participation

Mrs Jessica Gates¹, Dr Gemma Wilson¹, Dr Santosh Vijaykumar¹, Dr Deborah Morgan²

¹Northumbria University, Newcastle upon Tyne, United Kingdom. ²Swansea University, Swansea, United Kingdom

Abstract: Loneliness and social isolation are now recognised as being linked to poor physical health and well-being. Life transitions associated with ageing increase vulnerability to experiencing loneliness and social isolation. Digital devices and social media can facilitate communication and considered vital tools for social connection however, there is limited evidence on its use in the older population. This study aimed to examine the impact of self-reported loneliness or social isolation on; motivations for, and preferences towards using digital devices and social media and on enabling/preventing older adults accessing or using digital devices and social media. A mixed methods two-phase, exploratory sequential design was utilised. Qualitative data was collected during phase one using semi-structured interviews with 20 older adults (+65 years) across the UK. Resultant themes informed the development of phase two, an online survey which explored the research issues further. This online survey was disseminated across the UK and completed by 410 older adults. Findings from both phases identified multiple biopsychosocial facilitators and barriers to digital exclusion, even for regular technology users. These include physical functioning (physical/biological), perceived self-efficacy (psychological), fear (psychological), loneliness and social isolation (psychological and social), the culture of online communication (social), and finally absence of social

Papers

capital (social). Taken together, these biopsychosocial barriers can affect frequency of technology use, experiences of technology use, and the social outcomes resulting from technology use. These outcomes should be considered for interventions around digital use, social isolation, and loneliness. Finally, there are several implications for the current COVID-19 pandemic.

Paper 142

War widows in Touch (Ww.iT) – Exploring and evaluating an intervention to connect War Widows via smart technology

Dr Gemma Wilson¹, Mrs Jessica Gates¹, Mrs Mary Moreland^{1,2}

¹Northumbria University, Newcastle-upon-Tyne, United Kingdom. ²War Widows' Association, Dunfermline, United Kingdom

Abstract: Widowhood can be detrimental to health and well-being, and compounded by the loss of relationships, financial hardship, and a lack of access to social support¹. These issues are especially relevant to the War Widows population as they experience the loss of the Forces community in addition to the loss of their spouse.

The War Widows' Association (WWA) is a registered charity with around 2,500 members (~18% of the total War Widows population). WWA have recently implemented "War widows in Touch (Ww.iT)"; a novel programme which provides members with an iPad and/or iPad training. Ww.iT aims to improve social connection through the use of technology, as members are dispersed throughout the UK.

This study explored the implementation and perceived impact of the Ww.iT programme. Programme participants were recruited throughout the UK and each completed a paper-based survey exploring experiences of loneliness and social isolation, technology use, and their perceptions of the programme. Surveys were completed before participants began the programme and after six months. Some participants also took part in semi-structured interviews at both time points.

Findings provide a detailed understanding of the reasons for participation, facilitators and barriers to implementation, and impact of the interventions from the perspective of both participants and facilitators. Participants reflected on their changing social participation, social isolation, and loneliness because of programme participation. The Ww.iT programme also led to improved digital skills.

1. Collins, T. (2014). Managing widowhood in later life: the challenges encountered. *International Journal of Therapy and Rehabilitation*, 21, 2, 69–76.

Paper 143

Which remotely delivered interventions can reduce social isolation and loneliness among older adults? A rapid systematic review of systematic reviews.

Dr Elisabeth Boulton¹, Dr Dylan Kneale², Dr Claire Stansfield², Mr Paul Heron³, Dr Katy Sutcliffe², Dr Brenda Hayanga², Dr Alex Hall¹, Professor Peter Bower¹, Professor Dymphna Casey⁴, Professor Dawn Craig⁵, Professor Simon Gilbody³, Professor Barbara Hanratty⁵, Professor Dean McMillan³, Professor James Thomas², Professor Chris Todd¹

¹University of Manchester, Manchester, United Kingdom.

²University College London, London, United Kingdom.

³University of York, York, United Kingdom. ⁴National

University of Ireland, Galway, Ireland. ⁵Newcastle University, Newcastle, United Kingdom

Abstract: 'Social distancing' during the 2020 COVID-19 pandemic has highlighted the need to minimise loneliness and isolation through the provision of remotely delivered befriending, social support and low intensity psychosocial interventions. We wanted to know which interventions are effective and how they work, to help inform decisions about different approaches.

We followed a systematic 'review of reviews' approach and included systematic reviews focussed on the effectiveness or implementation of remote interventions to reduce levels of social isolation or loneliness in adults aged 50+. Narrative synthesis was used to develop a typology of intervention types and their effectiveness. Intervention Component Analysis (ICA) and Qualitative Comparative Analysis (QCA) were used at a study level to explore the characteristics of successful interventions.

We synthesised evidence from five systematic reviews and 18 primary studies. Interventions included: (i) supported video-communication; (ii) online discussion groups and forums; (iii) telephone befriending; (iv) social networking sites; and (v) multi-tool interventions. The majority of studies utilised the first two approaches, and were generally regarded positively by older adults, although with mixed quantitative evidence around effectiveness. Focussing on processes and mechanisms, using ICA and QCA, we found that the interventions that were most effective in improving social support: (i) enabled participants to speak freely and to form close relationships; (ii) ensured participants have shared experiences/characteristics; (iii) included some form of pastoral guidance.

The findings highlight a set of intervention processes that should be incorporated into interventions, although they do not lead us to recommend particular modes of remote support.

Papers

Paper 144

Social media use among active online older people in Mauritius: motivations and outcomes

Miss Naila Maherally

Chemin Grenier, Mauritius

Abstract:

Background: Zickuhr et al (2012) conducted a study and found out that almost half of American older people are online and using the internet or email. It is important to highlight that females use more social media than men (McAndrew et al, 2012, Thompson et al, 2012).

Purpose: The main aim of this study was to understand older adults' motivations to social media use, regarding why they use online social media, identifying their online social media activities and describe its outcomes on their lives.

Method: Both primary and secondary data have been used in this study. Secondary data were used mainly in the literature review. Primary data, on the other hand, have been obtained using a semi-structured interview with 12 older adults, 8 males and 4 females, aged between 60 to 69 years. A topic guide was also used, and the interview findings were analysed thematically. The theoretical perspective of "activity theory" was used to interpret the findings.

Findings: Most of the participants were encouraged to use social media by their family and friends. The main motivations for using social media were financial gain, rebuilding family relationships and maintaining social interaction. Facebook was the most common social media site visited. The positive outcome of social media activities were happiness, social connectedness, and life satisfaction.

Research Limitations: Even though this was a small sample consisting of older people from Mauritius only, the findings suggest that further research in other countries would be beneficial.

Parallel Session 6C - Papers (145) Zhang et al, (146) Samsi et al, (147) Booi et al, (148) Cooke and Baumbusch

14:00 - 15:00 Friday, 9th July, 2021

Track: Health and social care
practices, innovations and futures

Paper 145

At Tipping Point: The Intensity of Unpaid Care and Employment Status Transitions across Cohorts of Men and Women in the UK

Dr Yanan Zhang¹, Dr Matthew Bennett², Professor Sue Yeandle³

¹The University of Oxford, Oxford, United Kingdom. ²The University of Birmingham, Birmingham, United Kingdom.

³The University of Sheffield, Sheffield, United Kingdom

Abstract: Objectives: It is well documented that a large proportion of workers juggle paid employment and caring responsibilities. We examine the employment status transitions of unpaid carers and how the intensity of their caring responsibilities affected these, by age and gender.

Methods: This study uses waves 1-8 (2009-2018) of the UK Household Longitudinal Study (UKHLS) and waves 1-18 (1991-2009) of the harmonised British Household Panel Survey (BHPS). Random-effect logit and multinomial logit estimators are used to predict the likelihood of ceasing employment and the relative risk of lowering labour market participation or never having a job to 'no change' or 'increased labour market activity'.

Results: Providing care for more than 10 hours per week increases the likelihood of exiting the labour market. However, the threshold for this varies by age, ranging from 10-35 hours per week. The threshold is typically higher for men than for women: the threshold for male carers is 20-35 hours higher than female carers among those aged 46-65. Carers are more likely than other

Papers

workers to exit the labour market entirely rather than to move from full-time to part-time employment.

Discussion: The results raise questions about policies regarding caring and employment and the support that male and female carers may require at different life stages. We also highlight the need for high quality longitudinal data to explore the longer-term and lifetime effects of caring for working-age adults. Policies which produce flexible environments for working carers are necessary in order to ensure equality.

Paper 146

Contributions of ancillary care home staff during the Covid-19 pandemic: lessons for the future

Dr Kritika Samsi, Caroline Norrie, Professor Ian Kessler, Professor Jill Manthorpe

King's College London, London, United Kingdom

Abstract: Ancillary or housekeeping staff in care homes – cleaners, those working in kitchens, laundries and maintenance – have played a largely invisible role during the coronavirus pandemic despite engagement in infection prevention, food preparation, and social distancing. While not in direct care roles, some died from the virus which may have been contracted at work (BBC, 2020). Such invisibility is long-standing in health and care services research (EHRC 2014; de la Silva et al 2019). As with other domestic and cleaning workers, the majority of care home ancillary staff are women with families, work part-time, and on shifts, often from migrant or minority ethnic backgrounds, and work for minimum wages (McBride & Lucio, 2020). The aim of this study is to explore ancillary workers' work and impact in care homes during the coronavirus pandemic. We are collecting empirical evidence from 70 ancillary workers, and contextual information from 10 HR managers and 10 care home managers. We will also be interviewing 10-15 care home residents and relatives over the telephone and video-calls about their experiences and encounters with cleaning and ancillary staff in the care home, and perceptions of their activities during the national lockdown period starting March 2020 and thereafter. We will analyse findings using thematic analysis, drawing out salient trends in the data, with the ultimate aim of developing a good practice workforce model to support ancillary workers in care homes. Emerging findings will be presented and set in context of other workforce studies that have taken place in the UK.

Paper 147

'I wouldn't choose this work again': Perspectives and Experiences of Care Aides in Long-term Residential Care

Dr Laura Booi¹, Professor Judith Sixsmith², Professor Habib Chaudhury³, Professor Deborah O'Connor⁴, Melanie Young⁵, Professor Andrew Sixsmith³

¹Newcastle University, Newcastle Upon Tyne, United Kingdom. ²University of Dundee, Dundee, United Kingdom. ³Simon Fraser University, Vancouver, Canada. ⁴University of British Columbia, Vancouver, Canada. ⁵Vancouver Island Health Authority, Nanaimo, Canada

Abstract:

Aims: To provide insight into the everyday realities facing care aides working in long-term residential care (LTRC), and the implications for the delivery of care to residents, particularly older adults with dementia.

Design: A qualitative ethnographic case study.

Methods: Data were collected over ten months of fieldwork at one long-term residential care home [September 2015- June 2016] in western Canada; semi-structured interviews (70 hours) with 31 care aides; and naturalistic observation (170 hours). Data were analysed using Reflexive Thematic Analysis.

Results: The findings in this work highlight the underpinned agism of society, the gendered work of body care, and the tension between the need for relational connections- which requires time- and economic profit. Four themes were identified, each relating to the lack of training, support and appreciation care aides felt regarding their role in LTRC.

Conclusion: Care aides remain an untapped resource that is essential to the provision of high-quality care in LTRC. To support the essential care aide role suggestions include: (i) regulate and improve care aide training; (ii) strengthen care aides autonomy of their care delivery; (iii) reduce stigma by increasing awareness of the role.

Papers

Paper 148

The Impact of Workplace Incivility and Bullying on the Mental and Physical Well-Being of Care Home Workers

Dr. Heather Cooke, Dr. Jennifer Baumbusch

University of British Columbia, Vancouver, Canada

Abstract: In British Columbia, Canada, care home workers have the highest rates of on-the-job injury – four times higher than the provincial average and twice as high as acute-care workers – due primarily to overexertion and violent acts by residents. While many carers report being exposed to resident aggression, we know very little about their exposure to peer incivility and bullying and its influence on their mental and physical health, including workplace injury. Utilizing critical ethnography, we examined the nature of workplace incivility and bullying and its consequences for carer well-being in two not-for-profit care homes in British Columbia, Canada. We conducted 100 hours of participant observation and 33 in-depth interviews with carers, Licensed Practical Nurses, administrative and support staff. Findings revealed that peer incivility had become an entrenched part of carers' workplaces and significantly impacted their mental and physical well-being. Encounters with incivility created a reluctance to come to work, at times leading carers to call in sick, as trepidation around what might happen on shift created feelings of apprehension, anxiety and stress. This led some carers to refuse shifts on certain units, thus also impacting their income. Carers' reluctance to provide or request assistance with transferring/lifting non-ambulating residents, due to strained co-worker relationships, placed them at increased risk for musculoskeletal injury. Given industry-wide challenges around carer recruitment and retention, overlaid with the ongoing toll of the COVID-19 pandemic, it is essential that we begin to effectively address workplace incivility, thus minimizing its emotional, physical and financial toll.

Parallel Session 6E - Papers (149) Kodate et al, (150) Riddoch and Cross, (151) Dunne et al

14:00 - 15:00 Friday, 9th July, 2021

Track: Health innovation and technology

Paper 149

A vision for the future? Shifting portrayals of care robots in newspaper articles in Asia and Europe

Dr Naonori Kodate^{1,2,3,4,5}, Ms Yurie Maeda⁶, Dr Boris Hauray⁴, Dr Mayuko Tsujimura⁷, Dr Wallace Chan Chi-ho⁸, Dr Hasheem Mannan^{1,9}, Dr Sébastien Dalgalarondo⁴, Dr Mei-chun Cheung⁸, Dr Akiyo Yumoto⁷, Professor Sayuri Suwa⁷, Professor Wenwei Yu⁷, Dr Sarah Donnelly¹, Professor Nobuhiro Sakata¹⁰, Dr Diarmuid O'Shea¹¹, Professor Kazuko Obayashi^{12,5,13}, Professor Shigeru Masuyama^{14,5}

¹University College Dublin, Dublin, Ireland. ²Hokkaido University, Sapporo, Japan. ³University of Tokyo, Tokyo, Japan. ⁴L'École des hautes études en sciences sociales, Paris, France. ⁵Universal Accessibility & Ageing Research Centre, Nishitokyo, Japan. ⁶Technological University Dublin, Dublin, Ireland. ⁷Chiba University, Chiba, Japan. ⁸Chinese University of Hong Kong, Hong Kong, Hong Kong. ⁹Flame University, Pune, India. ¹⁰Dokkyo Medical University, Mibu, Japan. ¹¹St Vincent's University Hospital, Dublin, Ireland. ¹²Nihon Fukushi University, Mihama, Japan. ¹³Social Welfare Corporation Tokyo Seishin-kai, Nishitokyo, Japan. ¹⁴Tokyo Medical University, Tokyo, Japan

Abstract: Care systems are under strain, and all countries are faced with demographic challenges as the number of older people, including those living with dementia, is expected to grow. To support ageing in place and tackle the workforce shortage, assistive technologies, e.g. robots, are adopted as an innovative policy instrument in regions such as Scandinavia and East Asia.

Papers

Recently, evidence has begun to emerge regarding some of the tangible and intangible benefits of using robots for both caregivers and care recipients (e.g. increased safety and QoL). During and after the COVID-19 pandemic, care robots are expected to play a greater role in care provision.

While there is a strong expectation for such robotics-based solutions, ethical concerns remain, particularly in relation to decision-making, dignity, and the rights of older people and their carers. These critical issues are there, and different views exist.

Against such a background, this paper examines how care robots have been discussed and portrayed globally in newspaper articles. A research team, based in France, Hong Kong, Ireland and Japan, selected one major newspaper from each jurisdiction, plus the UK, and conducted a keyword search (robot & ageing/older people/care/dementia/Alzheimer's) in their four respective languages. We collated 463 articles in total, covering the period between 2001 and mid-2020, and analysed them thematically. The preliminary results show that in some countries, a greater emphasis is placed on the potential impact of human-robot interactions, while in others, technological development (including technological nationalism) and adoption of robots feature more prominently.

Paper 150

"Hit the Robot... with this Mallet" - Investigating Attachment to a Social Robot.

Miss Katie Riddoch¹, Professor Emily Cross²

¹University of Glasgow, Glasgow, United Kingdom.

²Macquarie University, Sydney, Australia

Abstract: In an attempt to reduce loneliness and its myriad associated health problems, a number of robotics companies are in the process of developing 'companion robots' - machines designed to engage, comfort, and respond to users in an intuitive manner. One way researchers try to quantify the extent to which we perceive robots as social agents, opposed to objects, is to ask participants to inflict 'harm' to a robot. The length of time between being given the instruction and complying (termed "hesitation") is measured. In this laboratory-based experiment, 84 adults (18-83 years) interacted with a social robot for approximately 10 minutes. We then used an adapted version of the 'hesitance to hit' paradigm wherein we asked participants to hit the robot on the head with a mallet. After agreeing to do so, the experiment was ended, and a semi-structured interview was conducted to probe participants' thoughts and feelings during the period of hesitation. Thematic analysis of the responses indicate that that 'hesitation' not only reflects perceived socialness of the robot but also other factors including concerns about cost. Participants' responses also offer insights into individual differences regarding anthropomorphism, and feelings of connection towards the robot. Participants' responses further revealed how some people formed attachment to the robot after only ten minutes. These findings suggest a potential place for social robots in the lives of 'healthy' individuals of all ages, but also raise ethical questions about our future with robotic technologies.

Papers

Paper 151 Maximizing Telerehabilitation for Patients With Visual Loss After Stroke

Dr. Stephen Dunne¹, Dr. Amanda Ellison², Dr. Alison Lane²

¹University of Sunderland, Sunderland, United Kingdom.

²University of Durham, Durham, United Kingdom

Abstract: Partial visual loss that results from damage to brain areas responsible for visual processing are a common consequence of stroke. This visual loss impacts on numerous everyday activities like safe navigation and reading, and the reduced independence of such patients has a subsequent negative effect on emotional and social functioning (Zihl & Kennard, 1996). With improving stroke survival rates (Feigin et al., 2009), an increasing number of stroke survivors are living with the long-term consequences of partial visual loss. Therefore, providing effective and accessible treatment for such individuals is important.

With the uptake of technology among older people increasing annually, providing rehabilitation at a distance via electronic and communication technologies (telerehabilitation) has been identified as a credible, potentially cost-effective future direction (White et al., 2015; Edgar et al., 2017).

This study details an iterative process of liaising with stroke survivors, carers, and occupational therapists to identify barriers and facilitators to using telerehabilitation tools, as well as elements of good practice in telerehabilitation, with a focus on how an existing rehabilitation package for partial visual loss created by the authors can be maximized.

Themes were identified from qualitative interviews and focus groups with patients, carers, and occupational therapists. Four key features of telerehabilitation were identified: additional materials, the importance of goal setting, repetition, and feedback. The findings are discussed as considerations for how to maximise the uptake of telerehabilitation in general moving forward.

Parallel Session 6F - Papers (152) Darvishpoor Kakhki et al, (153) Silarova et al, (154) Lombard, (155) Faraday et al

14:00 - 15:00 Friday, 9th July, 2021

**Track: Health and social care
practices, innovations and futures**

Paper 152 Factors Related to the Dignity of Older People in Tehran

Dr Ali Darvishpoor Kakhki, Fereshteh Moradoghli, Dr Rogaye Esmaili

Shahid Beheshti University of Medical Sciences, Tehran, Iran, Islamic Republic of

Abstract: Older people are the fastest growing segment of the population globally. The fear of aging and the refusal to accept older adults into the mainstream of society can affect the dignity of older people. This study was conducted to describe factors and dignity of older people in Tehran, Iran.

This descriptive, correlational study was conducted on a sample of 215 older people above age 60 in 10 public parks in five regions of Tehran in 2020. A socio-demographic questionnaire and patient dignity inventory including domains of symptom distress, existential distress, dependency, peace of mind, and social support were used for data collection. Content validity and Cronbach's alpha were used for evaluating the validity and reliability of questionnaires.

60% of older people were male and 40% female with a mean age of 68(± 5.05) year. The mean scores for dignity domains ranged from 67.30 (±17.56) for symptom distress, to 93.01(± 10.90) for dependency on a 100-point scale. The scores of dignity domains were influenced significantly by characteristics of job status, housing status, income source, health insurance, chronic diseases, annual physician referral rates, and

Papers

hospitalization in last year. The best predictors of dignity were health insurance and annual physician referral rates.

The findings showed that the dignity of older people is related to a number of factors. Monitoring modifiable factors such as health insurance and annual physician referral rates and non-modifiable factors such as chronic diseases will help us to preserve or improve the dignity of older people.

Paper 153

Enhancing our understanding of measuring quality of life of people with dementia who are unable to self-report

Dr [Barbora Silarova](#)¹, Dr Stacey Rand¹, Ann-Marie Towers², Professor Karen Jones¹

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Abstract: People with dementia living at home represent a growing group of social care services users. Therefore, it is important to understand their outcome needs, the impact of care on their quality of life (QoL) and how community based social care services may best support them. However, it may be difficult to collect such information from people who have memory or communication difficulties, including people with moderate to severe dementia. To work around this, an adapted version of the ASCOT questionnaire, ASCOT-Proxy, has been developed. This is completed on behalf of a person by someone who knows them well – such as, a close friend or relative (unpaid carers). The aim of the present study was to understand whether ASCOT-Proxy is easy to complete and measure what it is intended to measure – that is, social care-related QoL (SCRQoL), which is defined as aspects of people's lives that might be affected by the use of social care services. The data collection is still ongoing and will be finalised by April 2021. Unpaid carers have been invited through NHS settings, the Join Dementia Research, carers' and other organisations and through social media. Preliminary analysis (n=141, 81.56% (115) females; mean age: 59.3years) indicates that ASCOT-Proxy is a feasible, valid and reliable measure of SCRQoL. There is also a difference between proxy report perspectives. Without the right tool we would be unable to tell what the needs of people with dementia, unable to self-report are or how effectively community-based social care services support them.

Paper 154

Exploring interpretations of person-centredness, and the relationship between policy and practice in long-term care for older people

Mr [Daniel Lombard](#)

University of Bristol, Bristol, United Kingdom

Abstract: The aim of this PhD study is to explore interpretations of person-centredness, and the relationship between policy and practice in long-term care for older people. It takes account of the highly contextualised and pluralist nature of person-centredness and its application to practice, the complexity of organisational factors which support its delivery, the plethora of models surrounding the concept and the challenges of supporting potentially vulnerable adults in an often high-pressured environment.

At the heart of person-centred care lies a truism steeped in common sense: that most people requiring assistance with activities of daily living would wish to be supported in a way that is tailored to individual needs and preferences. This reductive description belies multiple layers of complexity and contention surrounding theories of person-centredness. Complex because it requires a number of prerequisites, including interpersonal skills and self-knowledge among care professionals, and a supportive work environment (McCormack and McCance 2006). Contentious because of a lack of consensus about the meaning and parameters of the concept itself (Edvardsson et al 2008).

Given the central role played by front-line care workers and managers in delivering person-centred care, the study offers findings of qualitative interviews with these actors working in residential and domiciliary care in England, about their experiences of delivering person-centred care with older people in the context of COVID-19. This adds to a growing body of research adopted using governance analysis and the way person-centred values are interpreted and put into practice with people requiring support under challenging circumstances.

Papers

Paper 155

Better mealtime care for people with dementia: On-line workshops to co-develop a training intervention for care home staff

Mr James Faraday^{1,2}, Dr Clare Abley^{1,2}, Professor Catherine Exley², Professor Joanne Patterson³

¹The Newcastle upon Tyne Hospitals NHS Foundation Trust, Newcastle upon Tyne, United Kingdom. ²Newcastle University, Newcastle upon Tyne, United Kingdom. ³The University of Liverpool, Liverpool, United Kingdom

Abstract: More and more people with dementia are living in care homes. Often they depend on care home staff for help with eating and drinking. It is essential that care home staff are able to provide good care at mealtimes. This study used a series of on-line workshops to co-develop a training intervention with key stakeholders.

A broad range of participants were recruited, including care home staff, family carers, healthcare professionals, and an educationalist. The workshops were structured to build rapport and promote accessible involvement. Participants reviewed relevant evidence on mealtime care, and worked together to make decisions about the content and delivery methods for the training intervention.

The workshops generated a set of prototype training resources. The content was organised around agreed principles of mealtime care, including empowerment, independence, social interaction, and safety. A flexible model of delivery was designed, with an emphasis on collaborative learning, interactive activities, and taking account of local context. Issues of implementation and evaluation were considered, which will inform the design of a feasibility study to test the intervention's acceptability and potential to impact practice. This study points to the usefulness of online platforms for co-development work, particularly when social distancing makes in-person meetings difficult.

Parallel Session 6G - Papers (156) Ward et al, (157) Olsen and Scott, (158) Elsdén and Roe, (159) McKittrick and Phillips

14:00 - 15:00 Friday, 9th July, 2021

Track: The arts, leisure and older consumers

Paper 156

The Benefits of Engaging in Participatory Arts for the Wellbeing of People Living with Dementia

Miss Meghann Ward, Professor Christine Milligan, Professor Emma Rose

Lancaster University, Lancaster, United Kingdom

Abstract: Participatory arts activities can offer opportunities for people living with dementia and their carers to find alternative forms of self-expression, communication and community, amid a time that may feel isolating and uncertain. There is, however, variability in the types of arts programmes offered nationwide, as well as discrepancies in the inclusivity of voices of people with dementia in the research. This ESRC-funded CASE research project has been conducted in partnership with Theatre by the Lake in Keswick, Cumbria, who have developed their own multi-arts participatory dementia programme entitled 'Setting the Scene'. Underpinned by therapeutic landscapes and more-than-representational theories, this participatory action research (PAR) project used multi-methods to explore the wellbeing benefits and overall effectiveness of engaging in 'Setting the Scene' sessions, with particular consideration to the following: a) the roles of different art forms and facilitation approaches; b) how to best sustain the attention and engagement of people with dementia in arts settings; and c) additional spatial and relational factors, including the setting, props and objects, and group relations. Participants contributed to the gradual development and refinement of the 'Setting the Scene'

Papers

programme model through action learning discussion groups, interviews and participant observations. The findings demonstrate the importance of going beyond the verbal in dementia research and redefining 'voice' to include non-verbal means of communication and engagement. Findings also highlight the importance of person-centred, 'in-the-moment' approaches; the role of laughter and humour during arts engagement; and the agency of props, objects and costumes in participants' 'Setting the Scene' interactions.

Paper 157

Snapshot 2020: The portrayal of ageing and older adults in British TV advertising

Dr Dennis Olsen, Charlotte Scott

University of West London, London, United Kingdom

Abstract: Age stereotypes conveyed by the media influence both the self-perception and behaviour of older people. The media have been shown to reflect the zeitgeist of the culture they arise from and possess the power to shape perceptions and persuade societies to change attitudes towards social groups, including older people (Fernández-Ballesteros et al., 2020).

This conference paper presents findings from an ongoing interdisciplinary research initiative, based at the University of West London, investigating the public perception of ageing and old age in the UK. To identify currently prevailing stereotypes about people aged 65 years and over, a total of 6,228 contemporary adverts, aired during primetime on three major commercial TV channels in the UK, were analysed, using media content analysis.

The findings indicate that ideas of growing and being old(er) in the UK in 2020 were largely positively connoted and aligned with the concept of 'successful ageing'. However, aspects of persistent ageism were also identified, which affected particularly the oldest members of society. Armed with this knowledge, the final part of the conference paper explores potential strategies to pro-actively influence and regulate the stereotyping of older people in UK advertising, in order to positively affect older adults themselves and the wider society at large.

Paper 158

Does arts engagement and cultural participation impact depression outcomes in older adults: A narrative descriptive systematic review of observational studies

Ms Esme Elsdén¹, Professor Brenda Roe²

¹Institute of Epidemiology and Public Health, University College London, London, United Kingdom. ²Faculty of Health, Medicine and Social Care, Edge Hill University, Ormskirk, United Kingdom

Abstract: This review explored whether engaging with arts and culture affect depression in older adults. Depression is the most common mental health disorder. Initiatives in arts for health, diversification in mental health services and social prescribing are providing emerging evidence of benefits relating to depression outcomes.

A systematic review adhering to the PRISMA reporting guidelines was conducted. MEDLINE®, Embase and APA PsycINFO were searched, and 6 studies deemed eligible were included. Data extraction and quality appraisal enabled a narrative descriptive summary comparing study design, populations, characteristics and key results relating arts and cultural engagement to depression outcomes.

A total of 49,197 participants were included in the studies. Three studies reported mean age, 58.78 years (15-99 years). Gender was reported by five studies; 52.4% (n=24,689) female and 47.6% (n=22,439) male. Five studies found that engaging with arts decreased the odds of having depression.

This systematic review found that arts and cultural engagement benefits a wider population by reducing depression incidence and may have a protective effect for ageing and mental health and wellbeing. Establishing and understanding the association between arts engagement and decreasing depression incidence in a population is relevant to healthcare providers, the general population and policymakers alike.

Papers

Paper 159

PhD thesis exploring the shopping experiences of older people and the role of convenience stores

Mr Frankie McKittrick, Professor Judith Phillips

University of Stirling, Stirling, United Kingdom

Abstract: This research project aims to explore the shopping experiences of older people and the role of convenience stores in supporting them to participate and keep mobile in their everyday lives and to age 'healthily' within their local neighbourhoods. Shopping activity has the potential to directly improve wellbeing in later life. However, little research has explored either how older people view shopping or how the range of activities that shopping encompasses may contribute to healthy ageing. As the topic appears to have fallen between the research interests of gerontology and retail discussions, it has resulted in a gap in our knowledge about the shopping experiences of older people and what components of that experience lead to 'healthy' ageing. There is also a need for greater understanding about the opportunities that shopping offers in tackling problems of loneliness and social isolation among older cohorts. This research will contribute towards addressing these knowledge gaps as it focuses on older people's shopping experiences. Given the importance of local neighbourhoods to older people and the importance of convenience stores at the heart of local communities, this research will focus on convenience stores. This will further our understanding of the role that convenience stores play in supporting older people to age 'healthily' within their local neighbourhoods. The research will take an ethnographic approach to data collection, encompassing a range of different methods; semi structured interviews with older people and retail staff, diary entries, photo voice, and participant observations.

Parallel Session 6H - Papers (160) Mikulionienė and Gaižauskaitė, (161) Makore, (162) Lafortune et al, (163) Vlachantoni et al

14:00 - 15:00 Friday, 9th July, 2021

**Track: Social participation,
citizenship and co-production in a
changing world**

Paper 160

The Scale of Older Adults's Social Embeddedness: The Case of Baltic States

Dr. Sarmitė Mikulionienė, Inga Gaižauskaitė

Lithuanian Centre for Social Sciences, Vilnius, Lithuania

Abstract: Though the concept of social exclusion has predominated academic and social policy discourses in the European countries in recent decades, the domain of exclusion from social relationships remained underdeveloped. In attempts to contribute to both conceptual and empirical development of the dimension, we developed a multidimensional scale for measuring an older adult's level of embeddedness in social relationships. We applied it in the Lithuania-Latvia-Estonia-based survey "Building the welfare of older people: empowerment policies, monitoring indicators, and older voice" (funded by LMTLT, agreement No 09.3.3-LMT-K-712-01-0063) (fieldwork in 2019; N= 2015 respondents aged 50+). We applied latent class analysis to identify subgroups, understand their heterogeneity, and examine varied socio-demographic patterns of embeddedness in social relationships. The results lead to a 7-class model along the continuum of social embeddedness and exclusion from social relationships. Two classes displayed a high level of social embeddedness and, contrary, two other - low level. The classes in between were partially socially embedded in different ways. We further applied multinomial regression analysis, which revealed statistically significant predictors of belonging to a particular class.

Papers

When presenting the key findings, the paper advocates the applicability of multidimensional scale for a more insightful understanding of how exclusion from social relations manifests in later adulthood.

Paper 161

Older people in informality: Entanglements of gender, co-production and urban citizenship

Dr Busisiwe Chikomborero Ncube Makore

University of Salford, Salford, United Kingdom

Abstract: Global South countries like Zimbabwe will experience an increase in the number of older people over the next few decades, particularly in urban informal areas. Indeed, this shift brings to question the readiness of the urban environment to accommodate the needs of older people. The paper presented aims to explore the reality of the living conditions of older people in urban informal Harare, Zimbabwe. It draws on findings from fieldwork conducted in two informal settlements in Harare. A triangulation of data is used by conducting semi-structured interviews, informal conversational interviews, document analysis, spatial mapping and participant observation. The findings reveal that older people are embedded in varying levels of processes of co-production and citizenship. Based on the views and experiences of older people, there is significant interplay between gender, co-production and urban citizenship. The findings question how we can imagine the spatiality of these entanglements in the context of informality? What are the implications for the design and provision of housing, transport, community support and health services and areas of social participation? The arguments made in this paper, strengthen the case on why global South policymakers, local authorities, civil society organisations and urban practitioners should address older people and their needs as a priority in the development of urban environments.

Paper 162

Evidencing the Social Return on Investment of Age-Friendly Community initiatives: why, how, and insights so far

Dr Louise Lafortune¹, Dr Calum Mattocks¹, Prof Jennifer Whitty², Dr Catherine Henderson³, Gemma Black⁴, Dr Stefanie Buckner¹

¹University of Cambridge, Cambridge, United Kingdom.

²University of East Anglia, Norwich, United Kingdom.

³London School of Economics and Political Science, London, United Kingdom. ⁴Liverpool City Council, Liverpool, United Kingdom

Abstract: While the global trend to create Age-Friendly Communities (AFCs) continues, relatively little remains known about the resources mobilised by AFCs, or their health-related outcomes for individuals and communities. Substantial investment in age-friendly initiatives makes it imperative to understand whether they are effective, and what value they generate.

This paper reports on an ongoing (10/2020–03/2023) multi-method study that trials the Social Return on Investment (SROI) methodology in four case study sites in England. Employing the concept of 'social value', the study measures the investment age-friendly initiatives require, and the social, environmental and economic benefits they generate.

We will present the findings from a systematic review on the social value of age-friendly work, highlighting gaps in knowledge. Priority outcomes from age-friendly initiatives, identified through case studies and a national Delphi consultation, will be reported. They inform subsequent steps, of which an account will be provided: evidencing the social value (expressed in £) of priority outcomes based on a Discrete Choice Experiment with older adults, and comparing the investment in selected age-friendly initiatives (their costs in £) to the £ value of their outcomes. We will also discuss the development of an accessible online resource where the social values of the outcomes of age-friendly work will be shared.

The paper gives a timely update on a research programme that will provide a sound evidence base and a robust methodology for assessing the value of age-friendly work. The study has been designed to inform policy and practice in a context of population ageing.

Papers

Paper 163 Social Participation and Health Outcomes Among Caregivers and Non caregivers in Great Britain

Professor Athina Vlachantoni, Dr Zhixin Feng, Dr Ning Wang, Professor Maria Evandrou

Centre for Research on Ageing, University of Southampton, Southampton, United Kingdom

Abstract: This study investigates the relationship between social participation and health outcomes between caregivers and noncaregivers in Great Britain. Previous studies indicate that the impact of informal caregiving on the carer's health is complex, and the intensity of care provision has an adverse impact on the caregivers' health, while social participation could have a protective role in this respect. Using qualitative and quantitative data from Wave 8 of the 1958 National Child Development Study, the analysis shows that social participation has a positive effect on the carers' mental health and subjective well-being. Individuals who did not engage in social participation reported lower levels of mental health and control, autonomy, self-realization and pleasure (CASP) scores than those engaged in social participation. The qualitative results showed the barriers to social participation of caregivers to be time, energy, and finance. We discuss ways in which the government could address such barriers to improve the level of social participation among caregivers

Parallel Session 6I - Papers (164) Liang and Hurd, (165) Bermellova and Kisvetrová, (166) Youell et al, (167) Searing and Zeilig

14:00 - 15:00 Friday, 9th July, 2021

Track: Impact of and response to Covid-19: lessons for future pandemics

Paper 164 "Do this to live longer": A study of health and fitness magazine representations of older women

Jessica Liang, Dr. Laura Hurd

University of British Columbia, Vancouver, Canada

Abstract: The purpose of this study was to investigate how older women were represented in health and fitness magazines, paying particular attention to the ways that the depictions of older women reinforced or challenged cultural assumptions about gender, health, and aging.

Over a six-month period, we collected monthly issues for three widely read, health and fitness magazines distributed in North America, namely *Health*, *Prevention*, and *Yoga Journal*. We examined the texts and images associated with the magazines' advertisements and interest stories.

Our thematic analysis revealed that older women were represented in three ways. To begin, 'Fitness enthusiasts' entailed stories about older women who had used physical activity to remain healthy and happy. 'Active consumers', referred to advertisements that featured older women as consumers of supplements and cosmetic interventions to treat the physical signs of aging. Finally, 'Menopause warriors' included interest stories and advertisements of older women discussing and dealing with the changes linked to menopause. Within each category, we report on the use of imagery and language to construct a deeper understanding of

Papers

how older women are pressured to engage in consumer culture to stave off the signs of aging.

The findings demonstrated that older women were depicted in favourable light. This study contributes to aging scholarship and highlights the ways that the dominant discourses about aging, gender, and health are either reinforced or challenged by health and fitness magazine texts and images.

Paper 165

Differences in Evaluation of Dignity between Women and Men at Geriatric Department

Jana Bermellova, Helena Kisvetrová

Palacký University, Olomouc, Czech Republic

Abstract: In connection with male identity, it may be difficult for older men to talk about their concern related to dignity. Our aim was to ascertain whether there are differences in evaluation of dignity and related factors between women and men hospitalized in geriatric wards. We used a cross-sectional study with a battery of questionnaires assessing dignity (Patient Dignity Inventory – PDI, Attitude to Ageing Questionnaire), depression (Geriatric Depression Scale) and level of independence (Barthel Index). Statistical processing included Shapiro-Wilk and Mann-Whitney U-tests, Spearman correlation and multivariable linear regression.

The sample comprised of 294 geriatric patients in University Hospital Olomouc. Men (92 [31.3%], age 76.6±7.7) were younger ($p=0.005$), with higher education ($p=0.001$) and less frequently lived alone ($p<0.0001$). In terms of independence, depression and overall dignity assessment (PDI scores), men and women did not differ ($p=0.399$; 0.884; 0.358). Among men, the factors considered more threatening to dignity were “Feeling that I don’t have control over my life” ($p=0.019$) and “Not being treated with respect” ($p=0.048$). Worse assessment of dignity was linked with a higher degree of depression ($\beta=2.337$, $p<0.0001$), more negative attitude to ageing ($\beta=-0.481$, $p=0.002$) and life with a partner/ other persons ($\beta=8.379$, $p=0.008$).

The results showed that men require more interventions than women in order to preserve their dignity – namely interventions supporting positive attitude to ageing, enhancing respect and feelings of control over one’s life.

Supported by the grant IGA_FZV_2020_005.

Paper 166

Negotiating ethical challenges when undertaking ‘sensitive’ research: Researching sexuality, intimacy and relational needs with older people and people with complex care needs.

Dr Jane Youell¹, Dr Laura Brown², Dr Paul Simpson³, Dr Tommy Dickinson⁴, Prof Christine Brown Wilson⁵, Dr Maria Horne¹

¹University of Leeds, Leeds, United Kingdom. ²University of Manchester, Manchester, United Kingdom.

³Independent researcher, Manchester, United Kingdom.

⁴Kings College London, London, United Kingdom.

⁵Queens College Belfast, Belfast, United Kingdom

Abstract: Conducting research with those deemed as ‘adults at risk’ around sensitive topics such as sexuality, intimacy and relational needs presents many ethical challenges. Research investigating the sexual, intimacy and relational needs of patients, service users and residents is limited. Sex, intimacy and relational needs are often framed as problematic in practice settings, but researching in this area provides specific challenges such as accessing participants, adapting research methodology to enable participation, working in complex settings and negotiating with gatekeepers (Thoft et al., 2020). Undertaking research into sensitive topic areas also raises particular ethical considerations; challenging ableist perceptions (Addakalkha et al., 2017), being mindful of cultural sensitivity (Adikaram, 2018), supporting autonomy in marginalised groups (McDonald & Raymaker, 2013) all present challenges.

This paper aims to present the ethical challenges of undertaking such research with ‘adults at risk’ based on two research projects which sought to better understand the relational needs of those living in complex care settings and, in a separate study, older adults living in residential homes. Beauchamp and Childress (2009) advocate four key principles: (i) respect of autonomy, (ii) nonmaleficence, (iii) beneficence and (iv) justice. Using this ethical framework, this paper presents the ethical considerations and challenges identified, negotiated and managed in situ. The importance of developing positive relationships with gatekeepers, cultural considerations, influencing change and equality will be presented and recommendations offered for conducting research in this area in the future.

Papers

Paper 167

All made up: The role of make-up for women in later life

Mrs Caroline Searing, Dr Hannah Zeilig

London College of Fashion, London, United Kingdom

Abstract: This small-scale study examines the role played by facial cosmetics or make-up in the (re) creation and expression of self-image and identity for older women. Although there has been increasing interest in notions of appearance management and body image creation as these relate to older women, there have been few studies that specifically investigate the role and function of make-up for this cohort. The study is contextualized by a detailed literature review which provides important historical and contemporary background to the in- depth interviews, that were conducted with six older women. The themes of ritual, self-presentation and change that emerge from our results characterise the relationship of these older women with their make-up. Make-up for our interviewees was used as a source of comfort and for personal enjoyment, as well as to look good, rather than to attract the male gaze or as a means to resist ageing. The older women at the centre of this study use make-up in ways that may be considered ritualized, and it was associated with the expression and performance of their identity. Make-up was thus found to be central to the creation of the women's self-image; all interviewees felt more confident about facing the world when made-up. Rather than being a mask behind which the women hide, for these women make-up is an essential part of who they are and a means of expressing their identities.

Parallel Session 6J - Papers (168) Lovatt and Wright, (169) White et al, (170) Aubrecht, (171) Wang

14:00 - 15:00 Friday, 9th July, 2021

**Track: Innovation in theories,
methods and critical perspectives**

Paper 168

Using fictional narratives to reimagine the future as we age

Dr Melanie Lovatt, Dr Valerie Wright

University of Stirling, Stirling, United Kingdom

Abstract: In this paper we reflect on the value of using fiction as a way to explore ageing, intergenerational relationships, and what we desire in the future. In researching and writing about age and ageing, we are often trapped by 'the basic poverty of our vocabulary' (Small 2007: 3) whereby the discipline and language of gerontology can problematise people based on their age and fail to account for diversity in ageing (Fletcher 2020; Katz 1996). Inspired by Levitas' 'utopia as method' (2013) we conducted a series of reading groups with adults of different ages, where we asked participants to read and reflect on novels depicting themes of age, intergenerational relationships, and the future. Fictional narratives depicting characters and societies can humanise people and issues that are often depicted as 'societal problems' and raise questions of how we think about the world and our place in it, without being too reductive. Based on our initial analysis of the findings and our reflections on the reading groups, we argue that fiction can be a useful way of eliciting ideas about how we think about the future and how our relationship to the future changes as we age.

Papers

Paper 169

Interdisciplinary Gerontological Research by Design

Dr. P.J. White^{1,2}, Audrey Patocs², Prof. Parminder Raina²,
Dr. Ine Wauben², Dr. Laura Harrington²

¹Institute of Technology Carlow, Carlow, Ireland.

²McMaster University, Hamilton, Canada

Abstract: Increasingly, gerontological research requires interdisciplinary approaches to address complex research questions. Design methods have been proven to facilitate the growth of interdisciplinary research as they are agile, adaptive, and iterative (White and Deevy, 2020). Involving 140 researchers across 6 faculties, this study used design methods to create interdisciplinary research on ageing. This paper discusses how Design methods were used to successfully grow this research culture for over 5 years.

Low and high touch approaches to Design were used. A cross-campus environmental scan was designed to understand cultural commonalities and differences between disciplines and Design workshops were created to harness interdisciplinary understanding, encouraging groups to create interdisciplinary proposals. Ethnographic research and surveys were conducted to assess how Design methods had influenced research culture. Outputs and partnerships were also assessed, and an international scientific committee reviewed interdisciplinary research proposals.

Results showed that interdisciplinary partnerships and collaborations increased across faculties. Positive changes in culture were observed, with increased interactions among researchers. Scientific reviewers commented that proposals addressed needs, insured stakeholders inclusion, and were likely to have a positive impact on older people. It demonstrated that Design methods can assist in the creation of interdisciplinary gerontological research. Design assisted researchers to find 'common languages' and was beneficial in both group communication and proposal creation. Collaborating with other disciplines offered researchers perspectives that were otherwise inaccessible and lead to more inclusive research.

White, P. J. and Deevy, C. (2020) 'Designing an Interdisciplinary Research Culture in Higher Education: A Case Study', *Interchange*, 51(4), pp. 499-515.

Paper 170

Reconceptualizing the Citizen in Long-Term Care Research: Using Assemblage Methodology

Dr. Katie Aubrecht

St. Francis Xavier University, Antigonish, Canada

Abstract: This presentation maps jurisdictional grey zones related aging and disability programs and services in one Canadian province, with a focus on residential long-term care (LTC). It outlines the policy contradictions and service gaps that shape the realities of older (and) disabled adults by defining their status and entitlements as citizens. Deleuze and Guattari's notion of "assemblage" is taken up as a methodological approach that can support intersectional analyses of jurisdictional grey zones. Following Baker and McGurik's (2017) recommendation to operationalize assemblage in critical policy research by "adopting an ethnographic sensibility, tracing sites and situations, and revealing labours of assembling," I collected and considered three interrelated research projects that examine and engage the aging-disability nexus within the context of LTC homes: the first project is theoretical and conceptualized the nexus as it is variously understood in aging studies and disability studies; the second involved ethnographic field research in LTC homes to map promising relational approaches to quality late life long-term care, and the third used a participatory co-researcher model with disabled activists living in LTC to develop cases of promising approaches in community care and social determinants of health. Thinking with and from the intersections of these distinct but interrelated projects, I consider how current policy directions related to LTC point to the empowerment of institutions rather than of the people who live and work there.

Baker, T. & McGurik, P. (2017). Assemblage thinking as methodology: Commitments and practices for critical policy research. *Territory Politics Governance*, 5(4), 1-18.

Papers

Paper 171

Exploring the possibility of relieving loneliness in later life through design by investigating and co-designing with older people who are living independently in Scotland

PhD candidate Yixuan Wang

The University of Edinburgh, Edinburgh, United Kingdom

Abstract: Loneliness has been recognised as a significant risk element to the physical and mental health of older people, and various interventions have been developed and delivered for tackling it. This ongoing doctoral research aims to explore the possibility of further alleviating loneliness in later life by investigating and identifying gaps in the field and seeking co-design opportunities with service providers and older people. Semi-structured interviews and focus groups were conducted with both 18 service providers and 10 older people who are living independently in Scotland. They were invited to discuss the main challenges and difficulties regarding loneliness, gaps in provision, perspective towards existing services and technologies, and expectations for future intervention provision. Using discourse analysis and grounded theory, findings from the interviews demonstrate how loneliness in later life is contributed by multiple factors including: family relationship; diffidence in both physical and psychological capabilities; feeling abandoned by modern trends; lack of respect from younger generations; lack of access to information about available resources; limited technological capability; and insufficiency in funding for maintaining and developing interventions. The findings will further provide implications for co-designing interventions with service providers and older people through remote co-design approaches including cultural probes and generative toolkits to further tackle loneliness in later life, which will happen in the next stage of this doctoral research.

Parallel Session 6K - Papers (172) Maitland and Baker, (173) Bampouras et al, (174) Debelle et al

14:00 - 15:00 Friday, 9th July, 2021

Track: Maintaining health and well-being in later life

Paper 172

Is weakness getting on your nerves? The impact of the reticulospinal tract on age-related muscle weakness

Dr Stuart Maitland, Prof Stuart Baker

Newcastle University, Newcastle Upon Tyne, United Kingdom

Abstract:

Background: The reticulospinal tract (RST) is important for balance, posture and proximal muscle strength, all functions which falter with age. We hypothesised that age-related strength reductions might relate to differential changes in corticospinal and reticulospinal connectivity. We aimed to measure the RST using novel non-invasive methods compared with clinical measures of sarcopenia.

Methods: 84 participants (age 20-84) were divided into age groups <50 and ≥50 years. Transcranial Magnetic Stimulation (TMS) induced motor evoked potentials (MEPs) bilaterally. Contralateral and ipsilateral MEPs are carried by mainly corticospinal and reticulospinal pathways respectively; the iMEP/cMEP amplitude ratio (ICAR) therefore measured the relative importance of the two tracts.

Findings: Valid iMEPs were found in 74 individuals (n=44 aged ≥50, n=29 <50). Younger adults had a significant negative correlation between normalised grip strength and ICAR ($r=-0.37$, $p=0.045$); surprisingly, in older adults the correlation was also significant, but positive ($r=0.43$, $p=0.0035$).

Discussion: While sarcopenia has traditionally been thought of as a "muscle-first" condition, this work demonstrates that spinal pathways are just as implicated in age-related muscle weakness.

Papers

Older individuals who maintain or strengthen their RST lose less strength than their peers. We speculate that reduced RST connectivity could predict those at risk of age-related muscle weakness; interventions which strengthen the RST could be a candidate for treatment or prevention of sarcopenia.

Paper 173

Handgrip strength-based frailty and sarcopenia classification is not affected by post-activation potentiation or calculation method in community-dwelling, older females

Dr Theodoros Bampouras¹, Mr Pádraig Spillane², Dr Amy Maslivec³, Dr Joseph Esformes⁴

¹Lancaster University, Lancaster, United Kingdom.

²University of Cumbria, Lancaster, United Kingdom.

³Imperial College London, London, United Kingdom.

⁴Cardiff Metropolitan University, Cardiff, United Kingdom

Abstract: Isometric hand grip strength (HGS) testing, commonly used for frailty and sarcopenia classification, typically includes three trials for each arm and the maximum or average value used for classification. The methods vary and are likely to affect the classification because of post-activation potentiation induced from the initial contractions and difference between maximum and average scores. The aim was to examine this hypothesis.

With Institutional Ethics approval, thirty-five community-dwelling females (age 69.6±6.3 years, BMI 27.4±4.0 kg/m²) participated in the study. HGS was tested on a single occasion, with the participant sat comfortably, their forearm and handgrip dynamometer supported. Participants performed three trials per arm in alternating order, with 1-minute rest between the same arm's efforts. Participants were classified for frailty and sarcopenia based on right arm maximum and average values. Comparisons were made between the three trials' right arm scores, maximum and average, and maximum- and average-based classification for frailty (≤17, ≤17.3, ≤18, and ≤21 kg for BMI ≤23, 23.1–26, 26.1–29, >29 kg/m², respectively) and sarcopenia (<16 kg).

Results showed no differences (p=0.923) between trials. There was a difference (p=0.001, g=0.1) between maximum (19.7±6.5 kg) and average (19.1±6.5 kg) scores, which did not affect the frailty (p=0.739) or sarcopenia (p=0.182) classification.

Our findings suggest that typical HGS-based frailty and sarcopenia classification is not affected by post-activation potentiation or the small difference between maximum and average values. The present study confirms the robustness of HGS as a classification tool for frailty and sarcopenia.

Paper 174

Older adults improve their balance recovery from forward falling slips with repeated practice by controlling their step length

Miss Heloise Debelle, Prof Constantinos Maganaris, Dr Thomas O'Brien

Research Institute for Sport and Exercise Sciences, Liverpool John Moores University, Liverpool, United Kingdom

Abstract: Falls can cause life-threatening injuries to older adults (OA). Exposure to repeated perturbations improves balance recovery but the mechanisms by which this happens remain unclear.

Seventeen OA (62.4±6.6years) walked on a split-belt treadmill that triggered ten unexpected forward falling slips (FFS). We measured balance as the margin of stability (MoS) for the first two recovery steps (RecStep1 and RecStep2) of Slip01 and Slip10, and balance recovery as the number of steps (n_{steps}) necessary to restore MoS back to Normal (unperturbed treadmill walk) for at least three consecutive steps. To understand how participants recovered, balance measures were correlated with step length (normalised to body-height, StepLength), which was chosen as a potentially easily coachable technique for fall prevention interventions.

On Slip01, MoSRecStep1 and MoSRecStep2 were lower than Normal (MoSRecStep1=2.2±3.0, MoSRecStep2=-0.1±6.0, MoSNormal=4.2±3.2cm, p≤0.006), and n_{steps} was greater than on Slip10 ($n_{\text{steps}}_{\text{Slip01}}=10.3±5.6$, $n_{\text{steps}}_{\text{Slip10}}=4.9±5.0$ steps, p=0.002). Participants increased their StepLength in Slip01RecStep1 and Slip10RecStep1 compared to Normal (p≤0.003), without correlation with balance recovery (p>0.05). StepLength of Slip01RecStep2 was shorter than Normal (StepLength Slip01RecStep2=23.2±6.1, StepLength Normal=35.0±1.5 %body-height, p<0.001), and participants with shorter StepLength than Normal had lower MoS, greater $n_{\text{steps}}_{\text{Slip01}}$ and $n_{\text{steps}}_{\text{Slip10}}$ (p≤0.015). In Slip10, StepLength of RecStep2 was not significantly different from Normal but the participants who exceeded Normal StepLength were those with the greatest $n_{\text{steps}}_{\text{Slip10}}$ (r=0.593, p=0.012).

Older adults successfully learned to recover their balance with repeated gait perturbations. Maintaining the length of their second recovery step close to Normal appears to improve balance recovery.

Papers

Parallel Session 6L - Papers (175) Mesnard et al, (176) Vandrevalla et al

14:00 - 15:00 Friday, 9th July, 2021

Track: Impact of and response to Covid-19: lessons for future pandemics

Paper 175

The impact of and response to COVID-19 among retired volunteers in Switzerland

Pauline Mesnard¹, Kelly Harrison¹, Farinaz Fassa¹, Marion Repetti², Gabriel Noble¹, Vittoria Cesari Lusso¹, Nathalie Muller Mirza³, Antonio Iannaccone⁴

¹Lausanne, Switzerland. ²Sierre, Switzerland. ³Geneva, Switzerland. ⁴Neuchâtel, Switzerland

Abstract: In Switzerland as in many other countries, 2020 was marked by the development of political strategies aimed at controlling the COVID-19 pandemic. Some of those, such as social distancing and sheltering, particularly targeted elderly people.

In this presentation, we analyse the consequences such policies have had on the ability of retirees to contribute to society through volunteering. We draw on the preliminary results of an ongoing study on volunteering among retired people in two French-speaking regions of Switzerland. Our research examines the contribution of retirees, the skills they acquire through volunteering, and the impact that their activities have on their quality of life. The study is based on focus groups - which we have had to partly organise online instead of face-to-face - and individual interviews.

Preliminary results show that protective measures have had a significant impact on the work our interviewees usually carry out as well as on the functioning of the organizations they volunteer with. As they are considered "at risk" and compelled to stay at home, their activities have often been halted and organizations have suffered from their absence, thereby revealing the importance of their work.

In our talk, we examine how retired volunteers have experienced the unexpected interruption of their activities and how this interruption has contributed to reshaping their volunteering practices as well as the functioning of the organizations that play a key role in gerontological policies in Switzerland.

Paper 176

"At Risk, Vulnerable and a Burden": Challenges faced by older adults from ethnic minority groups during the COVID-19 pandemic

Dr Tushna Vandrevalla¹, Dr Lailah Alidu¹, Prof Jane Hendy², Dr Shuja Shafi³, Professor Aftab Ala⁴

¹Kingston University, London, United Kingdom. ²Brunel University, London, United Kingdom. ³Mass Gatherings and Global Health Network, London, United Kingdom. ⁴Royal Surrey County Hospital NHS Foundation, Guildford, United Kingdom

Abstract: The paper aims to explore the understandings of older people from ethnic minority communities towards COVID-19, their lived experiences and the challenges faced during the pandemic; with the aim of developing communications that address these challenges. Black (African and Caribbean) and South Asian (Indian, Pakistani and Bangladeshi) community members were purposefully recruited nationally across the UK. Sixty semi-structured interviews were conducted, and findings illustrate three salient narratives. Firstly, the "at greater risk" narrative tells of how older people from ethnic communities were seen by others outside their community, as having a more severe risk and suffering worst consequences - due to their race/ethnic origin leaving them stigmatised and fearful. Secondly, the "old and vulnerable" narrative tells of how older adults from ethnic communities were portrayed by their own community and wider society as a highly homogenous and vulnerable group, just because of their age. These ageist views further accentuated anxiety and isolation. Thirdly the "burden" narrative tell of how older participants were positioned as a burden, an extra nuisance to an overwhelmed healthcare system. Other narratives were linked to mistrust, not being valued or wanted within the healthcare system and being treated unfairly. In addressing how to tackle these challenges, participants suggested ways of building trust within their communities by ensuring that health communications relating to COVID were from locally trusted sources. We conclude that communications need to focus on how new narrative can be developed that counterbalance the ones above to create a sense of inclusion, strength and entitlement.

Papers

Parallel Session 6M - Papers (177) Tanner et al, (178) Fountain, (179) Bai et al, (180) Moonan- Howard and Carey

14:00 - 15:00 Friday, 9th July, 2021

**Track: Health and social care
practices, innovations and futures**

Paper 177

Narratives of self-funding: how older people construct their experiences of finding, negotiating managing and paying for social care

Dr Denise Tanner¹, Professor Mo Ray², Dr. Lizzie Ward³

¹University of Birmingham, Birmingham, United Kingdom. ²University of Lincoln, Lincoln, United Kingdom. ³University of Brighton, Brighton, United Kingdom

Abstract: Little is known about people who pay for their own social care who largely fall beneath the radar of statutory social services. A growing number of older people are having to self-fund their care, wholly or in part, either because they do not meet increasingly tight eligibility criteria for services or because, despite high levels of need, they fall above the financial threshold for local authority funded care. The starting point for our research was to make visible the experiences of older self-funders and explore the ways in which they find, negotiate, manage and pay for care. We interviewed older people, carers and stakeholders in three sites in England over an 18 month period and analysed this data thematically. We also analysed the older people interviews using a narrative approach.

This presentation discusses our analysis of the different stories that older people tell about their experiences of paying for care. We identify and illustrate the main 'types' of narrative that feature within and across older people's accounts. This provides insights into how they experience their relationship with the social care system, including care agencies and front-line carers, and their own role and identity in relation to this system. We argue that older people's narratives of self-funding

tell a different story to dominant policy discourses of independence, choice and control and that these stories should inform the delivery of more ethical, responsive and caring social 'care'.

This work was supported by the Wellcome Trust [203363/Z/16/Z].

Paper 178

What's charity got to do with it? A 20 year strategy to reset and reignite the role of age-related charity in response to changing demographics, evidence and financial considerations.

Mr Rob Fountain

Age UK Gloucestershire, Gloucester, United Kingdom

Abstract: Gloucestershire is a county comprising urban and rural districts. Alongside pockets of wealth are 12 neighbourhood areas ranked among the most 10% deprived nationally (DCLG). With a projected 59.4% rise in the 65+ population by 2041 (ONS), Gloucestershire is also an ageing county.

Age UK Gloucestershire (AUKG) is an independent charity (and partner of the national Age UK network) established to support people in Gloucestershire aged 50+ to enjoy later life.

Recognising the limits of traditional charity approaches and asking what needs to change for the county to be ready for, and enthusiastic about, the increase in older people, in February 2020 AUKG set a new ambitious strategic plan in response to the statistical evidence.

Ours is a 20 year strategy, recognising the scale of societal shift required. Likewise, in a break from the narrow service delivery model adopted by many other age-charities, the focus is on prioritising preventative approaches that enable older people to maintain wellbeing and a social contribution.

This presentation contributes to debates on the role of charity in responding to ageing. We question how financial pressure and over-reach can see age-charities not only stray from core purpose, but also pursue approaches that undermine wellbeing through dependence and compassionate ageism.

Our argument is for charity to seek an influencing role that is evidence-based, dynamic, enabling, and respectful.

We invite gerontologists to consider how they can work with charitable organisations to understand how best to impact on the wellbeing of people as they age.

Papers

Paper 179

The role of social and economic capital in shaping intergenerational preferences for future elder care arrangement in Hong Kong

Associate Professor Xue Bai, PhD Candidate Chang Liu, PhD Student Shuai Zhou

Department of Applied Social Sciences, The Hong Kong Polytechnic University, Kowloon, Hong Kong

Abstract: Being aware of future care preferences as a form of proactive coping enables ageing and older people to adjust to later life changes and family members to take on caregiving roles. However, little investigation examined future care preferences among Hong Kong ageing families. Based on proactive coping perspective and theory of economic and social capital, this study sought to examine the role of economic capital and family social capital in shaping intergenerational preferences for future care arrangements of older parents. This study collected unique vignette data from 130 participants, encompassing 39 parent-child pairs, using factorial survey experiments embedded in questionnaire surveys, generating a total of 520 vignettes. Amid various types of care options, living in their own home rather than coresiding with children or being institutionalised was more preferred by both older adults and adult children. It was further found that economic capital significantly predicted preferences for ageing in place, such as self-care, spousal care, coresiding with adult children, and relocation in later life, while family social capital only affected preferences for spousal care. Furthermore, results also showed that (1) being older, female, and with fewer children increased the willingness of self-care; (2) being more educated, unemployed, and healthy contributed to preference for home-based professional care; (3) spousal care was more preferred by those who were healthy and still working. Findings underscore differential effects of social and economic capital and thus could inform interventions targeting ageing families of different levels of economic and family social capital in Hong Kong.

Paper 180

Generating startups that improve the health and wellbeing of older adults: discussing the role for the academic community.

Ms Ella Moonan-Howard, Dr Rachel Carey

Zinc.vc, London, United Kingdom

Abstract: The products, services and environments that an older adult engages with have an immeasurable impact on their ability to manage, delay or avoid altogether the negative effects of ageing. Mission-driven startups generate new products and services that fill gaps in existing provision or improve the design, usability or effectiveness of current solutions, and have the potential to improve the health and wellbeing of their consumers. By placing the needs and views of their 'users' (older adults) at the heart of product development, startups can reach a wide and diverse range of groups, achieve rapid scale of impact, and generate new knowledge and evidence through their agile testing and iterative product development. In 2019, Zinc launched and delivered a flagship 9-month programme to create new healthy ageing startups. In doing so, Zinc also generated a unique body of knowledge about how the research community and the startup ecosystem can work together to generate research-rich and scalable products and services that improve the quality of life of older adults. This culminated in a report for aspiring entrepreneurs, published open-access at zinc.vc/resourcesandpublications. Building on this report, this presentation will discuss what the research community can do to accelerate product innovation with the aim of improving the quality of later life.

Papers

Posters

Poster Session 1A - Posters (1) Chen, (2) Egan, (3) Anantapong et al, (4) Warner et al, (5) Brown

15:30 - 16:30 Wednesday, 7th July,
2021

**Track: Health and social care
practices, innovations and futures**

Poster 1

Dementia care communication: An initial exploration of Taiwanese long-term home care workers' perspectives

Associate Professor Chin-Hui Chen

National Pingtung University of Science and Technology,
Pingtung, Taiwan

Abstract: This study aims to explore how Taiwanese long-term home care workers communicate with older people living with dementia for the purpose of providing insights to improve the training programs for the workers in Taiwan. Existing literature tends to focus on dementia care communication in institutional contexts and hardly in dementia patients' own home, which is their own territory and they feel more empowered as hosts in such a communicative context. Long-term home care givers' communication accommodations to dementia patients are hence expected to be different from those in institutions. Based on interviews with 50 Taiwanese professional care workers with at least 1 year of long-term home care experiences with dementia patients, choices of communication strategies are identified to cope with several communication scenarios, such as cognitive disorder, painful self-disclosure, denial of instructions/service, rapport-building difficulties, emotional and impulsive actions, strong defense of home territory, different levels of severity and memory loss. The corresponding strategies for each scenario were reported to provide bottom-up accounts as to how communications with older people living with dementia in long-term home care service processes are truly like. The applications of the results can be used in training programs to equip new care workers with communicative skills or practices appropriate for

various situations in dementia long-term home care communication processes. The results also extend the gerontological sociolinguistic discipline by offering culturally- as well as contextually-specific accounts to understand how people communicate with older people.

Poster 2

Cardiac monitoring for detection of atrial fibrillation in post-stroke patients: A clinical audit

Dr Aisling Egan

UHL, Limerick, Ireland

Abstract:

Introduction: Approximately 10,000 people have a stroke related event every year in Ireland (1). Atrial fibrillation (AF) is one of the most common sustained arrhythmias and is a major risk factor for stroke (2). Thus, NICE guidelines recommend that a 24-hour Holter monitor be used to detect AF (1).

Aims: To audit if a Holter monitor was performed on all stroke patients without a background of AF.

Methods: A search for all patients who had a stroke between January 2018 and December 2018 in Portiuncula hospital was conducted, aided by the RCP NICE accredited guidelines 2016.

Results: 41% of the patients were above the ages of 71 years. 24% of all stroke patients had a background history of AF prior to their stroke. All patients with no background history of AF had Holter monitors performed.

Discussion: It was construed that 24% of the patients had a previous background history of AF prior to their stroke illustrating AF as a risk for stroke. The remaining 76% of patients, all had 24-hour ECG Holter monitors, abiding by the NICE standard practice guidelines.

Conclusion: Stroke patients who have no background of AF and no known cause for their stroke, should have cardiac monitoring such as a holter monitor performed (1).

References

1. 'RCP National clinical guidelines for stroke 2016 (NICE accredited)' [https://www.strokeaudit.org/SupportFiles/Documents/Guidelines/2016-National-Clinical-Guideline-for-Stroke-5t-\(1\).aspx](https://www.strokeaudit.org/SupportFiles/Documents/Guidelines/2016-National-Clinical-Guideline-for-Stroke-5t-(1).aspx)
2. Son MK, Lim N-K, Kim HW, Park H-Y. Risk of ischemic stroke after atrial fibrillation diagnosis: A national sample cohort. *PLoS one*. 2017;12(6):e0179687-e.

Posters

Poster 3

Experiences and perspectives of older people living with dementia about eating and drinking problems: A qualitative study

Dr Kanthee Anantapong^{1,2}, Dr Yolanda Barrado-Martín³, Dr Pushpa Nair³, Dr Greta Rait³, Dr Christina H Smith⁴, Dr Kirsten J Moore^{1,5}, Professor Jill Manthorpe⁶, Professor Elizabeth L Sampson^{1,7}, Dr Nathan Davies^{1,3}

¹Marie Curie Palliative Care Research Department, Division of Psychiatry, University College London, London, United Kingdom. ²Department of Psychiatry, Faculty of Medicine, Prince of Songkla University, Hat Yai, Thailand. ³Centre for Ageing Population Studies, Research Department of Primary Care and Population Health, University College London, London, United Kingdom. ⁴Language and Cognition, Division of Psychology and Language Sciences, University College London, London, United Kingdom. ⁵National Ageing Research Institute, Melbourne, Australia. ⁶NIHR Policy Research Unit in Health & Social Care Workforce and NIHR Applied Research Collaborative (ARC) South London, King's College London, London, United Kingdom. ⁷Barnet Enfield and Haringey Mental Health Trust Liaison Team, North Middlesex University Hospital, London, United Kingdom

Abstract: People living with dementia can develop eating and drinking problems; however, their perspectives on such problems have not been widely canvassed. This study explored the perspectives of older people living with mild dementia about possible eating and drinking problems in the future. Semi-structured interviews were conducted with 19 people with mild dementia, average age 76.7 (range 57-88) in September 2019-March 2020. Interviews were transcribed verbatim and analysed thematically. We identified five themes: 1) awareness of eating and drinking problems; 2) food and drink representing an individual's identity and agency; 3) delegating later decisions about eating and drinking to family carers; 4) acceptability of eating and drinking options; and 5) eating and drinking towards the end of life. Many older people living with mild dementia were not aware that eating and drinking problems frequently arise as part of dementia. Although people living with mild dementia wished to preserve their sense of agency for as long as possible, they preferred to leave such discussions and decisions to family carers and professionals when problems occurred. Fears of being a burden to family and of being treated like a child may also influence their willingness to discuss future problems. Overall, people living with mild dementia

thought they would be wanting to maintain a good quality of life, rather than be kept alive unnecessarily by artificial nutrition and hydration. Timely, sensitive and repeated discussion may help the person living with dementia develop an individualised, advance care plan including possible eating and drinking problems.

Poster 4

What does it mean to age well with bipolar disorder?

Mr. Aaron Warner, Dr. Jasper Palmier-Claus, Prof. Carol Holland, Prof. Fiona Lobban, Dr. Elizabeth Tyler

Lancaster University, Lancaster, United Kingdom

Abstract: Bipolar disorder (BD) is a chronic mood disorder that is characterised by severe affective states that cause significant impairment to people's quality of life. Whilst there is a growing literature exploring experiences of BD in adult populations, there is insufficient evidence surrounding the needs and preferences of older adults with bipolar disorder, leading to inappropriate care often being provided. Older adults with BD are a particularly vulnerable group, as in addition to chronic mental health difficulties, evidence suggests that they experience isolation, frailty, loss of independence, and cognitive decline more often than people ageing without BD. Furthermore, long-term use of mood stabilising medication can cause renal failure, hypothyroidism and weight gain, creating further health disparities and leaving individuals extremely marginalised. Consequently, further research is needed to help inform person-centred care and reduce the health inequalities faced by this group.

This PhD project aims to better understand the priorities and presenting needs of older adults with BD to reduce the inadequate and unsuitable care that this group often receives. To do this, two empirical studies will be conducted. Study 1 will use focus groups, photo elicitation and individual interviews to explore what it means to age well to older adults with BD. Study 2 will collect data using biographical narrative interviewing before using narrative analysis to understand the changing needs of older adults with bipolar disorder as they enter later life. Overall, the findings of these studies could help to encourage person-centred care and enhance services available for this group.

Posters

Poster 5

A home for life? Understanding the significance of liminal spaces of the home as a place to 'just be' in later life.

Ms Helen Brown

University of Sheffield, Sheffield, United Kingdom

Abstract: A home for life? Understanding liminal space as a place to 'just be' in later life.

Appropriate housing is fundamental in supporting our health and wellbeing across the life course. However, the extent to which existing housing options meet people's aspirations in later life is less certain. This paper will share preliminary findings from a collaborative PhD research project which aims to better understand housing aspirations of older homeowners who live in lower and mid-market areas of a city. Despite homeowners being the largest group of older householders they are under-researched in the literature, with some appearing to have constrained housing options. Utilising qualitative methods, including in-depth interviews and photo elicitation, the project aims to understand what people really aspire to from housing in later life.

This poster will present one key theme emerging from the study. The research findings offer insights into the significance of liminal space, which appears to be important to health and wellbeing in later life. The extent to which liminal spaces of the home create a place to 'just be' as we age are illustrated through three evolving themes. Firstly, a vista through which the wider neighbourhood can be framed and viewed. Secondly, a connection to the natural world, presenting both order and chaos. Thirdly, a protective barrier between inside (private) and outside (public) space. This study provides a deeper understanding into one aspect of the complex mechanisms shaping housing aspirations which may be useful to researchers, policymakers, and providers.

Poster Session 1B - Posters (6) Rafnsson et al, (7) Stegen and De Donder, (8) Adewunmi et al, (9) Marr et al, (10) Eliopoulos

15:30 - 16:30 Wednesday, 7th July, 2021

Track: Changing connections and relationships

Poster 6

Social networks and subjective well-being following retirement in England, the Czech Republic, Poland and Russia: findings from a cross-national comparison of two European population-based cohort studies of ageing

Dr Snorri Bjorn Rafnsson¹, Dr Milagros A. Ruiz^{2,3}, Dr Dénes Stefler², Dr Andrzej Pajak⁴, Dr Ruzena Kubinova⁵, Dr Sofia Malyutina^{6,7}, Professor Martin Bobak^{2,8}

¹Geller Institute of Ageing and Memory, School of Biomedical Sciences, University of West London, London, United Kingdom. ²Research Department of Epidemiology and Public Health, University College London, London, United Kingdom. ³Faculty of Physical Education and Sport, Charles University, Prague, Czech Republic.

⁴Institute of Public Health, Faculty of Health Sciences, Jagielloonian University Medical College, Krakow, Poland.

⁵Centre for Environmental Health Monitoring, National Institute of Public Health, Prague, Czech Republic.

⁶Research Institute of Internal and Preventive Medicine, Branch of the Institute of Cytology and Genetics, SB RAS, Novosibirsk, Russian Federation. ⁷Novosibirsk State Medical University, Novosibirsk, Russian Federation.

⁸RECETOX Centre, Faculty of Science, Masaryk University, Brno, Czech Republic

Posters

Abstract: Significant health disparities exist between Western and Eastern European (EE) countries; it is unclear whether similar differences are found in the levels and determinants of subjective well-being (SWB), a marker of successful ageing, of older adults. We explored the association between specific social network and SWB dimensions among retired adults in selected Western and EE countries by using harmonised data from the English Longitudinal Study of Ageing [ELSA] (England, n=3,089) and the Health, Alcohol and Psychosocial factors In Eastern Europe study [HAPIEE] (Czech Republic, n=2,033; Poland, n=3,318; and Russia, n=2,503). Our baseline (ELSA: 2002/3; HAPIEE: 2002/5) data included contact frequency with friends and family, health and sociodemographic covariables, and two well-being measures (CASP19 and CES-D) for which follow-up (ELSA: 2004/5; HAPIEE: 2006/8) data were also available. We used generalised linear models to calculate country-specific prevalence ratios for cross-sectional and prospective associations between contact frequency and well-being levels. We observed that contact with friends was positively and independently associated with quality of life (QoL) at baseline across countries, yet the prospective associations were comparatively weaker in England. Contact with family positively influenced baseline QoL in EE countries only; at follow-up, the benefits of frequent family interactions became apparent among English adults. Engagement with friends also safeguarded against depressive symptoms across countries, although prospectively, associations appeared modest. Contact frequency with family showed similar results. This study adds cross-national evidence on the influence of social contact on well-being in later-life. Our findings further support efforts that promote successful ageing through enhanced social connections.

Poster 7

Childlessness and loneliness in later life: a research protocol

Hannelore Stegen^{1,2}, Prof. Dr. Liesbeth De Donder¹

¹Department of Educational Sciences (EDWE), Vrije Universiteit Brussel (VUB), Brussels, Belgium. ²Research Foundation Flanders (FWO), Brussels, Belgium

Abstract: Having children is often seen as a benefit in later life: children are an important component in the social network of older people and are often the main informal caregivers. Despite the fact that levels of childlessness have been increasing rapidly in most European countries, the way how childless older people experience their social network and loneliness remains underresearched. The state of the art reveals three scientific gaps: the need to 1) study different reasons for childlessness, 2) study different types of loneliness and 3) employ a life course perspective. In response, this study investigates the relation between childlessness and different types and patterns of loneliness, and how reasons for childlessness moderate this relation. A mixed-method approach will be used: 1) a systematic literature review, 2) qualitative life story interviews with (childless) older people using the approach of McAdams (2008) and 3) a standardized survey among a representative sample of older adults. The research aims to contribute to loneliness theories by introducing a life course approach (i.e. gaining insights on the dynamics and patterns of loneliness during the life course and on how childlessness has effects in old age). The results can be used to inform prevention programs aiming to decrease loneliness, and in particular among childless older people.

McAdams, D. P. (2008). *Personal narratives and the life story*. In John, Robins, & Pervin (Eds.), *Handbook of Personality: Theory and research* (3rd Ed.) NY: Vilfort Press.

Posters

Poster 8

Older workers' experiences of depression in the contemporary workplace

Mrs Toyin Adewunmi, Prof Carol Holland, Prof. Jane Simpson

Lancaster University, Lancaster, United Kingdom

Abstract: The increasing prevalence of depression across the entire working population and its impact on older workers ([OW], ≥50 years) are causes for concern for individuals, organisations and society. While these concerns might be the case for workers who experienced depression regardless of age, this study mainly focuses on OWs because of their vulnerability to involuntary job exclusion. Underpinned by the Healthy Workplaces Model and Framework, this qualitative study aimed to explore OWs' experiences of depression. An interpretive approach was useful in understanding participants' meanings of depression in the contemporary workplace. Following a pilot study, 21 participants who experienced depression at age ≥50 were recruited through snowballing, and purposive sampling from across the UK. A semi-structured in-depth interview was conducted. Thematic analysis was chosen to analyse and interpret the patterns of meaning within the dataset. Data analysis led to the development of three superordinate themes and seven subthemes. The overarching themes are Theme 1 – *Disclosure and nondisclosure of depression among OWs*; Theme 2 – *OWs' struggles during their depression and organisational support interventions*; Theme 3 – *Future outlook: The importance of work participation during and after depression*. This empirical study's significant contribution revealed OWs' decision about disclosure and nondisclosure was influenced by their perception, heightened level of shame, stigma and vulnerability as people age. Organisational culture is a crucial factor for disclosure or nondisclosure among OWs. A salient theme throughout the study was the participants' desire for work participation and functioning. Further research on organisational and OWs' experiences of depression is recommended.

Poster 9

Exploring the Relationship Between Personality and Cognitive Ability in Old Age: The Mediating Role of Activity Engagement

Mr Calum Marr, Dr Eleftheria Vaportzis, Miss Malwina A. Niechcial, Dr Michaela Dewar, Professor Alan J. Gow

Heriot-Watt University, Edinburgh, United Kingdom

Abstract: As people get older, they might experience changes in their cognitive abilities. There is, however, large variation between individuals in the degree of change experienced. One factor that might explain differences in cognitive ability among older adults is personality. In particular the trait of Openness to Experience (i.e., curiosity, adventurousness and an affinity for novel ideas and experiences) has been positively associated with cognitive ability. Potential mechanisms accounting for this association have included the 'investment theory', proposing that individuals who are more open to experience engage in more mentally stimulating leisure activities (e.g., reading, writing) in their everyday life, which in turn maintains or enhances their cognitive ability. The present study tested this hypothesis using baseline data from a large-scale intervention study. A total of 336 participants aged 65 and over completed questionnaires regarding their personality and activity engagement and a battery of cognitive tests. We predicted that Openness would be positively associated with cognition, and that this relationship would be mediated by higher engagement in mentally stimulating activities. As hypothesised, higher Openness to Experience predicted higher performance across several cognitive domains. However, there was no evidence that mental engagement mediated the observed associations between Openness and cognitive ability.

Posters

Poster 10 Social Inclusion in the Ninth Decade and Beyond

PhD student Elaine Eliopoulos

University College London, London, United Kingdom

Abstract: Supervisory Team: Prof Paul Higgs, Dr. Chris Gilleard, Dr. Wendy Martin

Social Inclusion in the Ninth Decade and Beyond

Social inclusion of those over 80 has received little attention in gerontological research, despite the development of multifaceted models of inclusion/exclusion. What does inclusion mean to individuals in this cohort? What forms does it take? Is perceived membership in community contingent upon specific factors or is it more nuanced reflecting individual choice, desires, and interests?

Based upon my PhD research, this presentation will focus on the ways some of the oldest residents in the San Juan Islands (Washington, USA) described their engagement with the island community, how they envisioned social possibilities for their lives, and what structures supported them. Challenges to engagement and their responses to the various obstacles will be discussed in light of the choices that mattered to them.

New narratives emerge from this empirical research distinct from the dominant decline ideology often used to describe this age group, reflecting both the strengths of the community and the choices and interests of the respondents. Innovative methodologies designed to enhance theoretical understanding of inclusion and exclusion will be explored amongst members of this emerging age cohort.

Poster Session 1C - Posters (11) Collett and Martin, (12) Ellwood et al, (13) O'Donnell et al, (14) Readman et al

15:30 - 16:30 Wednesday, 7th July,
2021

Track: Changing responses to age
related health conditions

Poster 11 Health Perceptions in British Nuclear Test Veterans

Mr George Collett, Dr Wendy Martin

Brunel University London, London, United Kingdom

Abstract: Over 20,000 servicemen took part in the British nuclear testing programme in Australia and the Pacific islands from 1952 to 1963. Since the testing programme, many perceive that their health experiences and the health of their descendants was negatively affected by their exposure to ionizing radiation. Whilst perceptions and causal attributions of health and illness have been well examined, there is little research examining this in an aged cohort which shares the experience of a singular profound event, namely nuclear weapons testing. This doctoral study therefore explores British nuclear test veterans' perceptions of their own health and their family's health, and the processes by which they attribute causality to different health conditions. Semi-structured interviews of a biographical nature (16 face-to-face and three telephone) were conducted with 19 British test-veterans aged 75 to 89 years. Data was analysed using thematic analysis which generated two broad interconnecting themes: (1) beliefs about health and illness and (2) change over the life course. The findings give insights into how older male veterans perceive their own and their family's health conditions across the life course in the light of their perceived ionizing radiation exposure. The importance of health narratives and a sense of responsibility for family health are also highlighted.

Posters

Poster 12

The influence of psychological and social factors on people with physical frailty and cognitive impairment: A systematic review

Mrs Alison Ellwood, Dr Catherine Quinn, Professor Gail Mountain

University of Bradford, Bradford, United Kingdom

Abstract: Older people living with co-existent physical frailty and cognitive impairment are at an increased risk of adverse outcomes. Therefore, it is important to understand the factors that are linked to having physical frailty and cognitive impairment. Whilst the majority of research has focused on biological factors, little attention has been paid to psychological and social factors. This systematic review explored the influence of psychological and social factors on those living with co-existent physical frailty and cognitive impairment. Studies were included if they involved individuals aged 60 years or older, identified as being both physically frail and cognitively impaired. A narrative synthesis explored patterns in the data. Nine studies were included in the review, with eight of those employing a cross-sectional design. Depression was investigated in all nine included studies, those with both physical and cognitive decline had higher depressive symptomology than peers. A more diverse range of social factors were explored including education level, co-habitation, finances and social support. Findings broadly indicate those with physical frailty and cognitive impairment more frequently had less time in education, were living alone, and had lower material wealth. This review highlights that a limited number of psychological and social factors have been investigated in relation to co-existent physical frailty and cognitive impairment. Further research should focus exploration on the influence of modifiable psychological and social factors related to coexistent decline in later life to improve support and contribute to the development of interventions to promote resilience in older adults.

Poster 13

Care home staff experiences of managing responsive behaviour, associated with dementia during the COVID-19 pandemic

Ms Elizabeth O'Donnell, Professor Carol Holland, Dr Caroline Swarbrick

Lancaster University, Lancaster, United Kingdom

Abstract: Agitation, aggression and wandering are behaviours often associated with dementia. These behaviours are referred to as responsive behaviours as they may arise in response to an unmet physical, psychological or emotional need. Psychotropic drugs, such as antipsychotic drugs are often prescribed to manage responsive behaviours but contravene guidance as they increase the risk of serious adverse events and death in people with dementia. This study aims to understand how care home staff in Ireland manage responsive behaviours during the COVID-19 pandemic and to identify the barriers and facilitators to implementing a non-pharmacological approach.

To date, 18 semi-structured interviews have been conducted with 16 managers, a nurse and healthcare assistant at 21 care homes in Ireland. Thematic analysis of qualitative data is informed by Braun and Clarke (2006). The findings indicate that barriers to taking a non-pharmacological approach to manage responsive behaviours include inadequate staff levels, staff training and multidisciplinary collaboration. Facilitators include a care home culture focused on person-centred care. During COVID-19 care home staff report organising novel activities with residents in smaller groups and providing safe family visits. If non-pharmacological approaches fail to be effective, staff report using psychotropic medications, including antipsychotic drugs, anxiolytic drugs, antidepressant drugs and hypnotic drugs, to manage responsive behaviours.

The study has identified barriers and facilitators to implementing a non-pharmacological approach to manage responsive behaviours, associated with dementia. These findings will help to inform policy and practice to support care home staff and improve care for residents with dementia.

Posters

Poster 14

How far can I reach? The perception of upper body action capabilities in Parkinson's Disease.

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Abstract: Successful interaction within the environment is contingent upon one's ability to accurately perceive the extent over which they can successfully perform actions, known as action boundaries. Healthy young adults are accurate in estimating their action boundaries and can flexibly update them to accommodate stable changes in their action capabilities. However, there are conditions in which motor abilities are subject to variability over time such as in Parkinson's disease (PD). PD impairs the ability to perform actions and can lead to variability in perceptual-motor experience, but the effect on the perceptions of their action boundaries remains unknown. This study investigated the influence of altered perceptual-motor experience during PD, on the perceptions of action boundaries for reaching, grasping and aperture passing. Thirty participants with mild-to-moderate idiopathic PD and twenty-six healthy older adults provided estimates of their reaching, grasping and aperture passing ability. Participants' estimates were compared to their actual capabilities. Both healthy older adult controls and individuals with PD's perceptions were more conservative than previously observed in young healthy individuals. However, there was no evidence that individuals with PD's perceptions were less accurate than healthy controls. This suggests that the ability to anticipate action capabilities is preserved in mild to moderate PD.

Poster Session 1D - Posters (15) Barr, (16) Wong et al, (17) Mehdipour et al, (18) Mills et al, (19) Tkacz and Lee

15:30 - 16:30 Wednesday, 7th July, 2021

Track: Maintaining health and well-being in later life

Poster 15

Ageing successfully, go go go!": Trans elders' experiences of ageing in Scotland

Ms Katie Barr

Strathclyde University (Master's dissertation 2019), Glasgow, United Kingdom

Abstract: Research into LGBT ageing often suffers from a low number of transgender participants, creating a gap in both ageing and queer studies literature. While trans ageing is slowly emerging as a field of research, there are currently no published studies on trans ageing in Scotland. Existing research into health and wellbeing indicators for older trans people (as well as younger trans adults thinking about older age) invites questions regarding what constitutes successful ageing, and whose experiences are included in successful ageing frameworks. Life story interviews were carried out with three trans adults (two over 60, and one in their 40s) in Scotland, and then thematically analysed to look for similarities and differences to themes in existing trans ageing literature. In addition, queer theory and critical gerontology are used to interrogate each other and explore the ways in which gender norms, life course expectations, ideas of success and failure, and the ageing body can upset dominant understandings of successful ageing in order to include and make sense of Scottish trans elders' experiences.

Posters

Poster 16

'My Miraculous Journey' - Use of scrapbook to promote quality of life (QoL) of residents living in private residential care home for elderly

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Hong Kong, Hong Kong

Abstract: In Hong Kong, around 70% (>53,000 places) residential care service for the elderly are provided by private sector. Life in private residential care home for elderly (PRCHE) always associated with poor physical and mental health, limited social lives and restricted living environment. Previous studies suggested that photo could enhance psychological wellbeing of people with dementia. In Hong Kong, use of photo was found common in PRCHE as reality orientation purpose only. In order to have effective use of photo, a Chinese styled scrapbook and a 6-sessions program integrated with five concepts of positive psychology: Positive emotion, Engagement, Relationships, Meaning and Achievement (P.E.R.M.A) was designed by occupational therapist for residents in PRCHE for promoting their QoL. The aim of this study was to evaluate the use of scrapbook on enhancing the QoL of residents in PRCHE.

In total, 36 communicable residents in PRCHE were randomly recruited between September and October in 2020. QoL as the primary outcome was measured by Chinese Who-5 Well-being index prior to treatment and immediately after 6 sessions. Happiness level was used as the secondary measurement and evaluated based on visual analogue scale of happiness. A feedback questionnaire was carried out after completion of intervention.

Only 17 participants completed the intervention as service suspended due to COVID-19 outbreak. There was significant different within the group ($p < 0.001$) at baseline and immediately after the intervention on subjective wellbeing and happiness level. Feedback questionnaire also suggested participants were satisfied with the intervention length and content.

Poster 17

Community-dwelling older adults' perceptions of mobility: A qualitative study

Ava Mehdipour, Dr. Melody Maximos, Nicole Peters, Dr. Ayse Kuspinar

McMaster University, Hamilton, Canada

Abstract: Mobility is one of the most important contributors to well-being and quality of life. It is broadly defined as the ability to safely move within environments that expand from one's home to the greater community. Mobility is critical to remain socially engaged and reduce the risk of mental and physical deficits. The trajectory of mobility impairment is complex and influenced by multiple factors, however, few studies have explored older adults' perceptions related to mobility. The objectives of this study were to explore (1) the meaning of mobility and (2) the factors that affect mobility from the perspective of community-dwelling older adults. A qualitative description study using semi-structured interviews was conducted and data was thematically analyzed. Seventeen individuals were interviewed (mean age=70.53 years (SD 6.52); 71% were females). Mobility was defined as being free, functionally healthy, able to walk, independent, and able to socialize. Participants' mobility was reliant on their physical health and their outlook on mobility. Being socially engaged in the community was an enabler to older adults' mobility. Environmental factors, such as infrastructure and proximity to resources, influenced older adults' ability to be mobile. Security of finances led to increased mobility while financial restrictions led to decreased opportunities to be mobile. Participants highlighted the importance of driving and having access to public transit services as an integral part of their mobility. This study explored older adults' perceptions of mobility and identified important barriers and facilitators of mobility that should be considered in future community design and social policy.

Posters

Poster 18

Baseline nutritional risk in members of Oasis, a novel aging-in-place program in Ontario, Canada

Mrs Christine Mills¹, Dr Heather Keller^{2,3}, Dr Vincent dePaul¹, Dr Catherine Donnelly¹, Oasis Study Collaborative⁴

¹Queen's University, Kingston, Canada. ²University of Waterloo, Waterloo, Canada. ³Schlegel-UW Research Institute for Aging, Waterloo, Canada. ⁴Oasis Study Collaborative, Kingston, Canada

Abstract:

Introduction: Older adults are the fastest-growing demographic group in Canada. Most older adults want to age-in-place within their communities. One-third of these community-dwelling older adults in Canada are at nutritional risk. Oasis Senior Supportive Living (Oasis) is an innovative model for aging-in-place that integrates health and supportive community services for older adults within naturally occurring retirement communities. **Objective:** To determine baseline levels of nutritional risk in Oasis participants.

Methods: Participants were recruited from seven Oasis buildings. Age and gender were collected, and individuals were screened using Seniors in the Community: Risk Evaluation for Eating & Nutrition (SCREEN) II, a valid and reliable tool for screening for nutritional risk in community-dwelling older adults. Scores can range from 0 to 64. Scores less than 54 indicate nutritional risk whereas scores under 50 indicate high nutritional risk. Descriptive statistics were calculated for age, gender, and nutritional risk score.

Results: A total of 127 individuals were screened; they ranged in age from 51 to 97 (mean=77). 80.3% were female and 19.7% were male. SCREEN II scores ranged from 19 to 62, with a mean score of 45. 87.4% were at nutritional risk and 70.9% were at high nutritional risk.

Conclusions: Data gathered at baseline showed that many older adults living in Oasis communities are at nutritional risk, at rates greater than found in the general Canadian older adult population. As the project continues, participants will be re-screened for nutritional risk to determine if participation in Oasis improves nutritional risk.

Poster 19

Holistic, multi-disciplinary oral care for the older patient.

Miss Karolina Tkacz, Miss Yee Lee

Community Dental Services, Bedford, United Kingdom

Abstract: Currently, we are living longer and retaining our teeth for longer. Retained teeth in older age are at risk of disease when individuals experience physical and cognitive decline. Approximately half of people aged 75-84 have been found to have active dental disease, including dental decay and gum disease. Good oral health is linked to better quality of life for older people, and it has been hypothesised that it is related to improved outcomes in COVID-19. In later life, individuals are more likely to experience multi-morbidity and suffer from arthritis, hypertension, respiratory disease, cancer or diabetes. Multi-morbidity means that oral health may not be a priority, but in addition may predispose to dental disease and affect the safety of delivering dental treatment. Medications for these conditions can cause dry mouth and affect both oral health and dental treatment. Antiresorptive medications to treat osteoporosis or cancer predispose patients to developing medication-related osteonecrosis of the jaw. Older people may in addition be unable to tolerate dental interventions and require treatment in a specialist setting or require domiciliary care. Cognitive decline may affect the ability to communicate pain or consent. Reduced manual dexterity, reduced oral clearance and reduced oral musculature tone all further predispose to dental disease. These factors highlight the vital role of prevention in this group. This poster explains the barriers commonly encountered by this cohort and describes future suggestions to ensure the best quality of oral healthcare for the ageing population.

Posters

Poster Session 1E - Posters (20) Knight et al, (21) Manoharan et al, (22) Sun et al, (23) Balki et al, (24) Abraham et al, (25) Zarotti et al

15:30 - 16:30 Wednesday, 7th July,
2021

**Track: Health innovation and
technology**

Poster 20

Moving Together: Increasing Physical Activity in Older Adults and Children with a Technology-Based Intervention. A Feasibility Study

Mrs Rachel Knight^{1,2}, Dr Joanne Hudson¹, Dr
Kelly Mackintosh¹, Dr Melitta McNarry¹, Dr Parisa
Eslambolchilar³, Dr Aina Chalabaev²

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University, Cardiff, United Kingdom

Abstract: Intergenerational contact is an underexplored concept that might effectively target health behaviour change and influence the outlook and opinions of older adults and children towards the ageing process. This study explored how intergenerational dyads consisting of one older adult (≥ 65 years old), and one child (7-11 years old) engaged with and viewed a multi-faceted, technology-driven intervention designed to target physical activity and stereotypes of ageing. Four familial dyads ($n = 8$) engaged with the intervention for a four-week trial period. Working collaboratively, they combined their daily step counts (recorded via a Mi Band 2 activity tracker) to complete a virtual walk route using the online platform *World Walking*. Acceptability, usability, functionality, recruitment and retention were established through a series of focus groups. From the deductive application of these four pre-defined over-arching themes, eight core subthemes emerged: Engagement; Provision of a Positive Experience; Participant Stimuli; Generated Outcomes; Operationality; Limitations; Mediators; Facilitators, and Perceptions. All participants enjoyed and successfully engaged with the intervention. The study findings suggest that when designing

behaviour change interventions for older adults, it may be pertinent to consider whether they allow flexibility within pre-established routines, individual choice, and potential lack of interest in, and engagement with, rigidly imposed structures, where being 'active' is permitted to be a by-product of participation in other activities (McGowan, Devereux-Fitzgerald, Powell, & French, 2018). Additional strategies to challenge negative perceptions of older adults' ability to engage with technology and physical activity may also need to be an integral part of recruitment processes.

Poster 21

Exploring older adults' attitudes towards immersive virtual reality (VR) technology – An empirical study.

Ms Sangeetha Neeraja Babu Manoharan, Professor
Carol Holland, Dr Emmanuel Tseklevs

Lancaster University, Lancaster, United Kingdom

Abstract: In the last decade, immersive virtual reality (VR) has gained more interest and acceptance as an innovative technology intervention in a wide range of health settings for older adults. Understanding older adults' attitudes towards accepting VR is fundamental for maximising the potential that this emerging technology could offer, in delivering improved health and wellbeing outcomes for older adults. Therefore, this study aims to examine the attitudes of older adults towards immersive VR experiences in order to determine facilitators and barriers and anticipated benefits of their use? A mixed methods design will be used, addressing limitations of earlier studies. In this two-phased study, in Phase I, a Technology Acceptance Model (TAM) questionnaire, reliably used in previous studies will be used to quantitatively assess different factors (Perceived usefulness, Social norms, Perceived ease of use, user experience) affecting acceptance of technology among older adults to establish as baseline. A sample of 70 older adults in the age group of 60 years and above, will be recruited from various online senior forums. Following the questionnaire administration, in Phase II, 15-20 older adults from the same sample, purposively chosen to achieve a diverse sample (age, gender, mobility), will be invited to view a demo video on immersive VR. Following that, they will be interviewed via telephone, informed by the person-environment lens of environmental gerontology. Heeding the health risk of older adults due to the Covid-19 situation, the demo-video was custom made instead of a VR exposure. The data collected will be analysed using mixed methods.

Posters

Poster 22

Promoting the Social Connectedness of Persons with Dementia using Virtual Reality Reminiscence Therapy

Dr. Winnie Sun¹, Ms Sheri Hornsburch², Dr. Alvaro Quevedo¹, Dr. Ramiro Liscano³

¹Ontario Tech University, Oshawa, Canada. ²Ontario Shores Centre for Mental Health Sciences, Oshawa, Canada. ³Ontario Tech University, Oshawa, Canada

Abstract: This project aims at developing an innovative, non-traditional framework prototype to improve the implementation of reminiscence therapy for persons with dementia through customizable, immersive and interactive virtual reality experiences. Reminiscence therapy is a multi-sensory treatment that uses a combination of sight, touch, taste, smell and sound to help persons with dementia (PWD) remember events, people and places from their past lives..

We propose a framework for creating immersive and interactive virtual reminiscence experiences to facilitate the dementia care and management of behaviours and psychological symptoms of dementia BPSD. The framework will be modular and will support immersive virtual reality (VR) using standalone VR head-mounted displays to provide users freedom of movement. At the same time, non-immersive VR will be developed using monitors, television, or projectors to visualize and engage with the content without wearing any device. The evaluation of virtual reminiscence therapy will be conducted using data analytics and physiological measures including facial and eye tracking technology using video-recording to provide quantifiable metrics for evaluation of intervention.

This project will aim at adopting a proactive approach to optimizing the increased usage of reminiscence intervention as an evidence-based, nonpharmacological measure to promote PWD's social connectedness. At the present, mostly conventional, analog media is being used for reminiscence intervention. Enriching the traditional form of reminiscence therapy with VR can empower the caregivers to customize individualized virtual reminiscence experiences, which is expected to help PWD with maintaining and preserving their personal identity during disease progression and challenging circumstances associated with BPSD.

Poster 23

The COVID-19 Pandemic: A Pandemic of Lockdown Loneliness and the Role of Digital Technology and Perception of Age Friendly Environment

Eric Balki, Professor Carol Holland, Professor Niall Hayes

Lancaster University, Lancaster, United Kingdom

Abstract: The focus of this research is on lockdown loneliness amongst older adults, which we define as loneliness resulting from being physically isolated due to enforced social distancing and lockdown during the COVID-19 pandemic. Loneliness amongst older adults has been a growing problem, linked to poor health outcomes and aggravated mental health issues. It is hypothesised that enforced physical isolation exacerbates this problem. Being in an environment that is accessible, inclusive, safe and secure, and the use of digital technology could mitigate the impact of isolation. We gather data from 85 participants who completed four surveys, including the UCLA Loneliness Scale measuring loneliness, Life-Space Questionnaire measuring levels of physical Isolation, Technology-Experience Questionnaire measuring levels of technology use, and the Age-Friendly Environment Assessment Tool (AFEAT) measuring perception of age-friendliness of older adult environment. We examine several key relevant issues: description of lockdown loneliness in older adults during the pandemic, characteristics of older adults who are more likely to be affected, digital technology tools for social connection, and perceptions of environmental age-friendliness. The data is analysed using multiple regression and moderation analysis to examine whether physical isolation is a predictor of loneliness and whether technology and perception of age friendly environment can moderate physical isolation in individuals aged 55 and over. Overall findings suggest that the impact of being physically isolated during lockdown on loneliness is diminished in those older adults who use technology more and have positive perception of their environment, compared with those who do not.

Posters

Poster 24

Reversal of Senescence Associated B-Galactosidase (SA-βGal) expression of human chondrocytes, in-vitro cultured in a novel 3D scaffold platform.

Dr Samuel JK Abraham^{1,2}, Dr Senthilkumar Rajappa³, Dr Senthilkumar Preethy⁴, Dr Hiroshi Yoshioka⁵, Prof Masaru Iwasaki¹, Dr Atsuki Fujimaru⁶, Dr Shojiro Katoh⁷

¹Yamanashi University, Chuo, Japan. ²GN Corporation, Kofu, Japan. ³JBM Inc., Tokyo, Japan. ⁴FEAT, Nichi-in Centre for Regenerative Medicine (NCRM), Chennai, India. ⁵Mebiol Inc., Hiratsuka, Japan. ⁶Dept of Orthopaedics, Edogawa Hospital, Tokyo, Japan. ⁷EELS, Edogawa Hospital, Tokyo, Japan

Abstract:

Background: Cell therapies like ACI and MACI are administered only to people below 55 years as engraftment and restoration of cartilage in older people is considered difficult. Having cultured a tissue like growth with pluripotency (1) and chondroprogenitors (2) from osteo-arthritis (OA) affected human cartilage derived chondrocytes in a 3D platform, we evaluated senescence associated B-galactosidase (SA-βGal), to check the suitability of the cells for cartilage repair, to senior citizens.

Materials & Methods: Enzyme digested OA cartilage derived chondrocytes were cultured in 2D followed by transfer of one portion to 3D platform with a Thermo-reversible gelation polymer (3D-TGP) scaffold, loaded on an orbital shaker. No genomic modifications or reprogramming with transcription factors were used. The SA-βGal expression was evaluated in both the groups.

Results: Average delta G of mean fluorescence intensity (ΔG MFI) of the SA-βgal in the cells from 2D was 42016.6 while after transfer to 3D-TGP, in which they grew as a tissue, the value greatly decreased to an average of -144.66 and it only slightly increased after 42-45 days of culture in 3D-TGP. This difference was statistically significant.

Conclusion: 3D-TGP platform yields in vitro growth of human chondrocytes form a tissue with an average SA-βGal significantly lower than that of 2D, making these cells suitable for transplant. This first-of-its-kind report to our knowledge in the literature of youthful chondrocyte tissue grown in the lab, opens ways in applying cell therapies for cartilage damage to people above 55 in the future after appropriate validations.

Poster 25

Minds & Movement: Evidence-based guidance for psychological interventions for people with Huntington's disease, Parkinson's disease, motor neurone disease, and multiple sclerosis

Prof Jane Simpson, Dr Fiona Eccles, [Dr Nicolò Zarotti](#)

Lancaster University, Lancaster, United Kingdom

Abstract: Minds & Movement is a project led by Lancaster University and the Faculty of the Psychology of Older People (part of the Division of Clinical Psychology of the British Psychological Society) to produce the first UK national guidance on psychological approaches for people with motor neurodegenerative disorders.

More specifically, its aim was to offer evidence-based recommendations for providing psychological support to individuals living with the following four motor neurodegenerative conditions: Huntington's disease, Parkinson's disease, motor neurone disease, multiple sclerosis. The focus of the guidance was particularly on psychological interventions for specific psychological outcomes in people experiencing each of these four neurological conditions. For Huntington's disease this also included interventions for individuals who have received a positive genetic test result meaning they will go on to develop the disease, but have not yet developed symptoms, as they can still experience psychological difficulties in this period.

The guidance was published in January 2021 and is available for free for all psychologists and any other health professionals who may work with individuals with these conditions and who wish to have easy access to up-to-date evidence-based recommendations.

Posters

Poster Session 2A - Posters (26) Garcia Diaz et al, (27) Burke and Aubrecht, (28) Gray, (29) Ezulike, (30) Agar et al

15:15 - 16:15 Thursday, 8th July,
2021

Track: Impact of and response to Covid-19: lessons for future pandemics

Poster 26

The impact of a Canadian model of aging-in place on community dwelling older adults' experience of physical distancing during COVID-19

Miss Laura Garcia Diaz¹, Dr. Evelyne Durocher¹, Dr. Carrie
McAiney², Dr. Julie Richardson¹, Dr. Lori Letts¹

¹McMaster University, Hamilton, Canada. ²University of
Waterloo, Waterloo, Canada

Abstract:

Background: Naturally occurring retirement communities (NORCs) are unplanned communities with a high proportion of residents aged 65 and above. Oasis is an innovative Canadian aging-in place model that combines health and supportive community services for adults 65 and older within NORCs. The COVID-19 pandemic has highlighted the need for communities to strengthen contingency plans for emergency situations. Despite the unpredictability of emergencies, older adults living in NORCs and community leaders have reported never considering the need for emergency planning.

Aim: We conducted this study to understand how physical distancing restrictions during the COVID-19 pandemic impacted older adults living in a NORC (Oasis members) and the perceived impacts of Oasis services on that experience.

Methods: An interpretive description methodology guided this study. Semi-structured interviews were conducted with nine Oasis members (aged 66-77 years) and two Oasis site coordinators. The Oasis members

also completed a social network mapping activity guided by the hierarchical mapping technique.

Results: Three overarching themes were identified: (1) unintended consequences of physical distancing restrictions on participants' wellbeing; (2) face-to-face interactions are important for social connection; and (3) family, friend, healthcare, and community support mitigated the impact of physical distancing restrictions during the COVID-19 pandemic. In addition, two of Oasis' core pillars were found to be of support to participants during COVID-19: strengthening social connectivity and connection to pre-existing community services.

Implications: Findings advance our understanding of the impact of aging-in place community models on community dwelling older adults' experience of a crisis, such as the COVID-19 pandemic.

Poster 27

Older Adults in the Community: An Environmental Scan of News Releases from the Nova Scotia Government During the Pandemic

Rosanne Burke¹, Dr. Katie Aubrecht²

¹Mount Saint Vincent University, Halifax, Canada. ²Saint
Francis Xavier University, Antigonish, Canada

Abstract: Older adults in the community and their family/friend caregivers have been significantly impacted by the COVID-19 pandemic. This presentation shares the methodology and early findings from an environmental scan of news releases from the government of Nova Scotia, Canada, conducted to contextualize and assess the impact of COVID-19 policies on older adults in the community, living with chronic conditions, including dementia as part of a provincially funded COVID-19 rapid health research project. The scan was conducted using the Nova Scotia government website. 350 COVID-19 related government news releases published between March to November 2020 were reviewed for key search terms including older adults, caregivers, and vulnerable populations (Black Nova Scotians, LGBTQ2S+, immigrants, persons with disabilities and linguistic minorities). Results were organized using an intersectional health equity framework. Early findings of the scan indicate that fewer than ten government news releases were found to include any of the search terms. The scan provided insight related to acknowledgement of older adults in formal provincial government

Posters

communications and generated knowledge of new COVID-19 related programs and supports, including financial aid and social support for older adults in Nova Scotia during the pandemic. Findings suggest a lack of attention to the distinct needs of socially vulnerable older adults living in community and the need for targeted interventions during future public health crises.

Poster 28

How is my relative being cared for during the covid-19 pandemic? Developing a resource to support relatives of those in care homes during the pandemic.

Dr Shani Gray

North Central London STP, London, United Kingdom

Abstract: During the first wave of the covid-19 pandemic relatives of care home residents were unable to visit their loved ones and faced a frightening time of uncertainty as increasing numbers of care home residents died. Whilst over time work was done to support care home staff and residents with outbreaks, there remained limited information and support for relatives. Care home staff also reported high volumes of requests for information from family members which they were struggling to cope with alongside their high workload and exhaustion.

To respond to this need a frequently asked questions leaflet was created in North Central London STP for relatives of those in care homes. Stakeholders across the local system including the Relatives and Residents Association, care home staff, GPs and CCG quality teams input as to the most common questions raised by family members. A smaller mixed stakeholder group then developed written responses to each of the areas, and the leaflet was developed in conjunction with UCL Partners.

'How is my relative being cared for during the covid-19 pandemic?' answers frequently asked questions in both printable and online formats. It covers eight key domains including how care home residents are kept safe, how their quality of life is maintained, going to hospital, death of a relative and further support resources for relatives. Evaluation showed 90% of relatives and care home staff rated it as a helpful or very helpful resource. It has since been adopted and adapted in eight regions across the UK.

Poster 29

Ageing during a pandemic: Insights from the experiences of Nigerian seniors

Ms. Chigozie Ezulike

City University of Hong Kong, Hong Kong, Hong Kong

Abstract: In various societies, older persons often change from being contributors to being recipients and main users of support services. This could affect their behaviours and attitudes towards psychosocial integrity and a meaningful life. Adjusting to these live changes could also influence their help-seeking behaviour from caregivers, their perceived quality of life and their perceptions on the ageing phenomenon. Given the emergence of the coronavirus pandemic, various changes have been noted in the lives of older adults in various countries, including Nigeria. These changes include such areas as social support availability, caregiving arrangement, healthcare, and other daily physical activities. In past years, transition to old age in many traditional African societies like Nigeria, was regarded as a desirable phenomenon. However, over time, the social values attached the ageing are observed to be on a steady decline, mainly due to the effects of neoliberal changes. Moreover, the effect of the pandemic on the lives of individuals and the society also negatively impacts the social milieu of older persons including younger people's dispositions towards them. This among other factors could increase the susceptibility of older people, thus leaving them with a less desirable ageing experiences. Investigating Nigerian older adults' experiences and perceptions of ageing during the COVID-19 pandemic is therefore timely and essential, to enable researchers, health, and social care practitioners to identify creative and innovative ways of working with the adult population during and after the pandemic. Findings from the study will have implications for social policy and practice.

Posters

Poster 30

The COVID-19 Conundrum; A Case Presentation exploring the impact of the COVID-19 Pandemic on Dementia Patients in the Community Dental Services

Dr Stephanie Agar, Dr Elise Morgan, Dr Yee Lee

Community Dental Services, Bedfordshire, United Kingdom

Abstract:

Background: There are currently 850,000 people living with the Dementia in the UK, projected to rise to 1.6 million by 2040⁽¹⁾. As Dementia progresses, it impacts oral hygiene; the ability of patients to voice their oral healthcare needs; and their ability to accept and understand treatment. A General Anaesthesia is sometimes required to carry out Dental Treatment: this has been complicated by the COVID-19 pandemic.

Case Presentation: Patient MK is a non-verbal 70-year-old male with advanced Alzheimer's disease, residing in a care-home. Concerns were raised by his daughter: his behaviour had worsened over a period of 6 months with the patient indicating a problem in his mouth. She reported numerous broken teeth and a reluctance to allow oral hygiene intervention.

Methods: A Domiciliary visit during the COVID-19 pandemic confirmed that extensive dental treatment was required and that a General Anaesthesia was indicated. All elective surgery was cancelled due to COVID-19, however, the Dentists at CDS adapted to continue to support the patient through advice, analgesia and, when indicated, antibiotics. Formulation of a treatment plan involved a Best Interests Meeting, incorporating video technologies to include shielded dentists involved in the patient's care.

Discussion: COVID-19 had a detrimental impact on provision of healthcare across the UK. The cessation of elective General Anaesthesia meant treatment was delayed for people living with dementia, however services adapted to continue to support patients and their families and put plans in place for swift intervention when routine services resume.

References

1. Alzheimers.org [Online]: <https://www.alzheimers.org.uk/about-us/news-and-media/facts-media>

Poster Session 2B - Posters (31) Correa, (32) Curtis et al, (33) Mattocks et al, (34) Bettencourt da Câmara and Cabeceiras, (35) Byrnes et al

15:15 - 16:15 Thursday, 8th July,
2021

Track **Health and social care
practices, innovations and futures**

Poster 31

Do geriatric trauma patients experience better mortality outcomes when treated in a major trauma center as opposed to a regional trauma unit?

Miss Michele Correa

University of Bristol, Bristol, United Kingdom

Abstract: Geriatric patients will soon form the majority of major trauma patients in the UK. Patients are managed in either major trauma centres (MTC), trauma units (TU) or local emergency hospitals (LEH). Effective triage of trauma patients to major trauma centers (MTC) reduces mortality. However despite severe injuries, these patients are often not sent to the most appropriate place of care; this is known as under-triage. This systematic literature review explores whether geriatric trauma patients experience better mortality outcomes when managed in MTCs as opposed to TUs.

A systematic literature search was performed to find studies reporting mortality outcomes for geriatric major trauma patients, defined as anyone aged over 55 years old with an ISS over 15, dependent on the level of trauma care received, using PubMed, Scopus and Cochrane Library.

Posters

106 studies were screened and 11 studies, involving 200,493 patients, were included. 7 studies found improved mortality outcomes for patients when treated in major trauma centers, with 4 studies indicating no difference in mortality outcomes at MTCs or TUs. In the largest study, involving 34,449 patients, there was no difference in mortality when treated at an MTC or TU (OR 1.09 [95% CI 0.96 – 1.24]). Other confounding factors such as anticoagulation use (OR 1.82 [95% CI: 1.40 - 2.36; $P < 0.001$]) was also seen to increase mortality.

Geriatric patients are not merely older adults but a unique sub-set of patients with different physiology and care needs. The literature has proven inconclusive, suggesting that MTC care will not benefit all geriatric patients. Studies point to the need for specific geriatric protocol, for triaging and treatment, to ensure improved mortality outcomes.

Poster 32

Developing a tool to measure compassionate care: the perspectives of older people, carers and service providers

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Abstract: Delivering compassionate care has become a key priority within health and social care services. However, the literature suggests that there is a lack of agreement and consistency regarding the definition of compassion (Burnell & Agan, 2013). Further, there is currently no tool to measure compassionate care that has been developed in the context of UK health and social care (Durkin et al., 2018).

This study has explored how compassionate care is conceptualised in health and social care services from the perspectives of older people, carers and service providers. Group Concept Mapping (GCM) was used as the research method (Kane & Trochim, 2007). Data were collected from older people, carers and service providers taking part in up to three participant-led tasks (“brainstorming”, “sorting” and “rating”) through in-depth interviews, face-to-face workshops and online tasks.

The data were analysed to produce a conceptual framework, suggesting eight “clusters” best represent the concept of compassionate care: “Non-judgemental”, “Excellent skills which set them apart”, “Above and beyond”, “Genuine care giving”, “Show the person is valued”, “Empathetic”, “Thoughtful” and “People-centred care”. Statements generated by participants during the “brainstorming” task illustrate each cluster.

The results have been used to develop a compassionate care measurement tool. Statements within each cluster were selected to form the initial item pool. The tool has been pilot tested in simulation and online with people who have experience of providing care. Following data analysis from the pilot testing sessions, amendments will be made to the tool prior to the final testing phase.

Posters

Poster 33

Rehousing older social housing tenants: a systematic review

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Abstract: Older social housing tenants are often disadvantaged and have less choice than older owner-occupiers when moving home in either elective moves i.e., choosing to downsize to a more manageable home; or non-elective moves i.e., when houses are demolished in regeneration schemes. High volume providers such as local authorities and housing associations have dedicated programmes to help rehouse social housing tenants.

This paper presents the preliminary findings of a systematic review, part of a larger study examining the experiences of older social housing tenants (aged 55+) going through rehousing programmes as the result of downsizing or regeneration schemes in the London Borough of Hackney. Peer-reviewed literature was searched using appropriate search terms in relevant databases e.g., PubMed, while the grey literature was searched using Google, dedicated grey literature databases e.g., Open Grey and the websites of individual organisations e.g., WHO. The ongoing grey literature search found 14 titles for screening but none were included in the review. A total of 3152 peer-reviewed titles (3607 before deduplication) were screened and of these, 46 full-text papers were checked. Two peer-reviewed papers were included in the review. Both of these were qualitative studies from regeneration schemes that highlighted the deep attachment that older people often have to their communities. Location, housing type and access to existing social networks were seen as important characteristics of the new home.

The small number of peer-reviewed articles highlights the need for evidence that practitioners can use to design rehousing schemes that work well for older social housing tenants.

Poster 34

New solutions for Ageing in Place in Portugal

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Abstract: Portugal has an aging population structure shown by the increase in the population aged 65 and over and a decrease in the population under 15 years. In 2019, for every 100 young people, there were 163 people aged 65 or over, and it is expected that this figure will be of 297 in 2050. The population aged 65 and over represents 21% of the total population and of these, 47, 8% are 75 or older. In 2050, the figures will be 35.3% and 60.6%, respectively. Life expectancy at age 65 reached 19.61 years for the total population. At age 65, men can expect to live 17.70 years longer and women 21.00 years older.

Studies show that people aged 65 and over prefer to stay in their homes and institutionalization is the last option. In Portugal, 20% of people aged 65 and over live alone and of these, 59.3% are 75 years of age or older.

This communication will focus on Portugal and aims to: 1) present a characterization of the population aged 65 and over who lives alone, based on the variables: gender, marital status and place of residence. This analysis will be divided into three age subgroups: 65-69 years; 70-74 years and 75 and more years; 2) present the main conclusions of the analysis made to residences for seniors already developed in Portugal and 3) present solutions for the future within the scope of Ageing in Place.

Keywords: Ageing; Ageing in Place; Housing; Older People; Portugal

Posters

Poster 35

Towards a taxonomy of safety incident reporting in nationally representative care homes: Methods and preliminary findings

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Abstract: Staff incident reporting is a frequently used approach to identifying safety incidents. Whilst incident reporting is now a common element of organisational learning within healthcare settings, in care homes its current implementation is inadequately understood. Exploratory work with care home managers identified that incident reporting systems and safety cultures vary between providers, with no central mechanism for cross-sector organisational learning. There is therefore a need to better understand the approaches to, and systems used, when reporting incidents in care homes to reduce variability in reporting practice and improve quality of care. This presentation aims to report on the methods and preliminary findings that will form a taxonomy of incident reporting across care homes. Purposive sampling of ten care home providers will be obtained from the 15 Clinical Research Network in England, equalling 150 care homes which ensures nationwide representation. Care homes will be sampled based on their relative size (small, medium, and large organisations), type (residential or nursing) and their residents (e.g. people living with dementia or people with a learning disability). One representative from each organisation will be asked to participate in a structured interview. This presentation will provide a summary of the care homes' policies and practices for incident reporting generally and in relation to transitions, as well as the practices of capturing information and sharing reports. The taxonomy will provide the foundation for understanding the required policy response to improve incident reporting within the care home sector and influence wider health and care systems.

Poster Session 2C - Posters (36) Cross et al, (37) Morgan and Richardson, (38) Parkington et al, (39) Vafa et al, (40) Fadeeva et al

15:15 - 16:15 Thursday, 8th July,
2021

Track: Maintaining health and well-being in later life

Poster 36

Barriers and Facilitators to The Use of Hearing Rehabilitation for Care Home Residents with Dementia: A Systematic Review

Miss Hannah Cross¹, Dr Piers Dawes^{2,1}, Mrs Emma Hooper¹, Professor Chris Armitage¹, Professor Iracema Leroi^{3,1}, Dr Rebecca Millman¹

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Abstract: Hearing loss is common among those with dementia living in long-term care homes, leading to poorer quality of life, communication difficulties and exacerbated dementia-related symptoms. Hearing rehabilitation may improve outcomes; however, evidence suggests hearing loss is poorly managed in care homes due to a range of barriers. A systematic review reporting on the outcomes of, and barriers and facilitators to, non-pharmacological hearing rehabilitation for residents with dementia was conducted. No restrictions on publication date or language were set and grey literature was considered. Eligible studies were critically appraised and are presented as a narrative review. Sixteen heterogeneous studies, most of moderate quality, were identified. Hearing rehabilitation, including hearing aids and amplification devices, communication techniques and visual aids, improved residents' quality of life, communication and behavioural and psychological symptoms of dementia. Hearing device use was low,

Posters

however, and staff relied on self-taught communication techniques. Symptoms of dementia presented barriers to device use, including loss of and intolerance of aids. Evidence of a lack of staff training and low prioritisation of hearing loss due to time-pressures were further barriers, particularly for residents with dementia who required assistance. Adopting a person-centred approach and involving family members facilitated hearing rehabilitation and should be implemented in future. Understanding and addressing the breadth of factors that contribute to the use of hearing rehabilitation is a first step in improving outcomes, care home practices and developing evidence-based guidelines.

This project is funded by the Alzheimer's Society.

Poster 37

Incorporating physical activity or exercise into telerehabilitation interventions for adults with chronic low back pain: A narrative review with applications to an aging population.

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Abstract: Low back pain lasting > 3 months duration is considered chronic low back pain (CLBP). CLBP is common in older adults; resulting in significant functional limitations which decrease one's independence. Telerehabilitation can be a necessary and valuable means of providing rehabilitation services, especially in chronic conditions. As exercise and physical activity are important components of CLBP care, sufficiently detailed evidence is needed regarding how they can be effectively incorporated into interventions delivered via telerehabilitation. This narrative review outlines details on how and to what extent exercise and/or physical activity is incorporated into published telerehabilitation interventions for CLBP considering the Consensus on Exercise Reporting Template (CERT) criteria. A search was conducted in 5 databases and using the reference lists of relevant studies. Randomized controlled trials (RCTs) of telerehabilitation interventions for adults (>18 years) with CLBP (>3 months duration) were included for review. Eight RCTs, utilizing various technologies, were eligible for inclusion (793 screened). Results suggest many studies lack comprehensive descriptions of the exercise or physical activity components of the intervention. All interventions included some form of monitoring and more than half included goal setting, highlighting the importance of these components. CLBP is a prevalent problem as people age and more than half of the interventions had a mean participant age \geq 50. Therefore, these results are important for researchers and clinicians working with an aging population to consider the importance of monitoring, goal setting, and including exercise parameters when incorporating exercise and/or PA into interventions for CLBP delivered via telerehabilitation.

Posters

Poster 38

Comparative affective responses to resistance exercise between restricted blood flow and conventional resistance exercise in older adults

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Abstract: Blood flow restricted (BFR) resistance exercise (RE) at low load (20% of one repetition maximum, 1RM) is efficacious for increasing muscle strength and size in older adults. However, a limitation to the technique is ischemia-induced discomfort which could evoke negative affect, discouraging participation. The aim was to examine affective responses to BFR compared with conventional RE performed at low-load (LL, 20% 1RM) and moderate-load (ML, 60% 1RM) in older adults. Twenty men ($n=10$) and women ($n=10$) (64.3 ± 4.2 yrs) completed three separate randomised RE sessions (BFR, LL and ML) in a crossover design. RE involved four sets of leg press and knee extension, and ratings of perceived exertion (RPE), discomfort, session RPE, Physical Activity Affect Scale and Visual Analogue Scales for enjoyment and fatigue assessed tolerance and affect. BFR required 'hard' muscular exertion, comparable to ML ($p=0.330$) and higher than LL ($p=0.026$, $d=0.5$), was more discomforting than ML ($p=0.001$, $d=0.8$) and LL ($p=0.001$, $d=1.1$) and more difficult than ML ($p<0.001$, $d=0.6$) and LL ($p<0.001$, $d=1.4$). Nevertheless, all conditions increased positive affect ($p=0.009$, $\eta_p^2=0.308$), decreased negative affect ($p=0.022$, $\eta_p^2=0.248$) and were perceived in enjoyment (BFR= 78.1 ± 21.2 mm, LL= 83.2 ± 15.3 mm and ML= 82.0 ± 15.4 mm, $p=0.193$, $\eta_p^2=0.083$) and fatigue (BFR= 30.2 ± 24.9 mm, LL= 24.9 ± 23.3 mm and ML= 27.3 ± 18.3 mm, $p=0.525$, $\eta_p^2=0.033$) similarly. BFR RE promotes a positive affective response and is enjoyed comparably to unrestricted RE despite individuals experiencing elevated discomfort and overall difficulty. These findings support the use of BFR RE as a mode of exercise that is tolerable and acceptable to older adults.

Poster 39

Effectiveness of Online Cognitive Stimulation Intervention (CSI) for Healthy Older Adults

Ms. Samira Vafa¹, Assoc. Prof. Dr. Alexandre Schaefer², Assoc. Prof. Dr. Min Hooi Yong¹

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Abstract: Objectives: Cognitive training has been deemed as a promising intervention to minimize the age-related decline in healthy older adults. A majority of research has utilized computerized cognitive training that has little or poor ecological validity, thus the impact of such training on daily real-life tasks and untrained cognitive domains is still unclear. Therefore, this study aims to develop an online cognitive stimulation intervention (CSI) using shopping applications and to evaluate the degree of training gains (inhibition, working memory) and transfer effects (processing speed and episodic memory) resulting from it.

Method: 55 healthy older adults randomly assigned to one of the study conditions including experimental group (CSI), active control, or passive control. All participants were examined by a series of psychological and executive functions (EF) tasks at three time points including the baseline, post-intervention, and a follow-up assessment (one month post-intervention). CSI training comprised 24 online weekly sessions of adaptive online shopping tasks targeting inhibition and working memory-updating, while, the active control group's tasks encompassed 24 online weekly sessions of non-adaptive tasks without targeting the training components of the CSI.

Results: It is expected that the CSI group has higher post-intervention scores in EF tasks compared to other groups. Moreover, we predict that training gains will transfer to processing speed and episodic memory and remain over time.

Conclusion: This research will enable us to test proof of concept using online technology for older adults and might be a promising intervention for improving the cognitive well-being of the increasing aging population.

Posters

Poster 40

Developing a 'Backcasting' health promotion intervention for retirement transition

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¹Northumbria University, Newcastle upon Tyne, United Kingdom. ²Liverpool John Moores University, Liverpool, United Kingdom

Abstract: Despite the growing number of health promotion interventions in retirement, evidence on the mechanisms behind their effectiveness, acceptability and feasibility is lacking. Systematic approach in intervention development, involvement of stakeholders and target populations in the design has the potential to address a gap between research and practice, ensure that the intervention is implementable, sustainable, and useful for future users and practitioners (Greenhalgh et al., 2016). The present research aimed to develop a retirement planning intervention that would encourage active lifestyles among people going through retirement transition. The intervention development followed steps 1-4 of Intervention Mapping (Bartholomew et al, 2006), involved three co-design workshops and an interview with experts in the fields of healthy ageing, physical activity (PA), behaviour change, and pensions. Prior to the workshops, the research team designed a prototype 'Backcasting' task in line with existing evidence and their previous research. The 'Backcasting' applied theoretically- and evidence-informed methods – future selves and planning (Perras et al., 2016). The workshops (n=10) and interview (n=1) participants discussed issues associated with promoting PA in retirees and older adults, reviewed examples of existing initiatives and the 'Backcasting' prototype. Thematic analysis was employed to identify approaches for interventions implementation and improvements to the prototype. The 'Backcasting' was then trialled and evaluated in a survey by individuals approaching retirement or recently retired (N=24, Mage = 60.42, SD = 4.78, Male = 11, Retired = 11). Overall, participants positively received the 'Backcasting' intervention, particularly its focus on positive images, goals setting, flexible approach to promoting active lifestyles.

Poster Session 2D - Posters (41) Majón Valpuesta et al, (42) El-Gabry and Murphy, (43) Dury et al, (44) Fountain

15:15 - 16:15 Thursday, 8th July, 2021

Track: Social participation, citizenship and co-production in a changing world

Poster 41

"Yes, you must listen to what we want to see done": Successful mechanisms for the establishment of friendly relationships between elderly people and their communities in the Spanish context

PhD Dolores Majón Valpuesta¹, PhD Pilar Ramos Valverde¹, PhD Mercè Pérez Salanova², PhD Andrés Haye Molina³, PhD Sara Luna Rivas¹

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Abstract: The Age Friendly Cities and Communities initiative, launched in 2005 by the World Health Organization (WHO), aims to implement the Active Ageing paradigm. Although its approach places the promotion of social participation of the elderly at the center, through the exercise of citizenship, friendliness policies present a series of challenges. From a qualitative methodology, this study has analysed the friendliness projects of 7 municipalities of Andalusia –projects in the initial phase– and, the Basque Country and Barcelona – projects in the implementation phase (Spain). The results present the characteristics associated with the success of the promotion of social participation in old age. Some of these characteristics identified in the Andalusian experience are: accessibility and tight information channels, listening and agency spaces, the incorporation into actions that contribute to the community and the gender perspective in the interventions. In the other two territories, some of the characteristics identified are,

Posters

among others: an optimum level of commitment, spaces for co-production and attention to situations of fragility. In conclusion, in order to promote the social participation of the elderly in friendliness projects, it is necessary to prioritize the exercise of agency of the elderly themselves, putting them at the center of the actions and facilitating their participation in all processes.

Poster 42

Food Security: Understanding Food Security Amongst Older Vegetarians and Vegans who Live in a Community Setting

Ms Yasmine El-Gabry¹, Jane Murphy²

¹Vegetarian for Life, Manchester, United Kingdom.

²University of Bournemouth, Bournemouth, United Kingdom

Abstract: This research offers insight into food security among community-dwelling vegetarians and vegans (veg*ns) aged 60 and above, living in the UK. 'Food security is when all people, at all times, have physical and economic access to sufficient, safe, and nutritious food to meet their dietary needs and food preferences to ensure an active and healthy life' (Food and Agriculture Organisation of The UN, 2009).

Understanding food security among older adults is vital to having a healthy ageing population. However, little research focuses on the food security of individuals with specific dietary requirements because of their beliefs. An abundant supply of non-veg*n food may be available to an individual in a certain setting, but the question arises as to whether the veg*n would deem themselves food secure, and how others around them would view their food security? Because food security is not the same as food availability, individuals who are often in and out of hospital or care facilities are generally not included in food security studies because they typically are given at minimum three meals per day.

The research presents the findings of mini-focus groups conducted with approximately 25 older veg*ns. It explores what food security means to them, whether or not they feel food secure, and how their experiences of food security have changed over time – furthering an understanding of how food security might impact upon health and well-being, with applications for developing inclusive programmes and safety nets for older adults in the community.

Poster 43

Informal help during the lockdown due to the COVID-19 pandemic in Belgium: an interdependency story.

Dr. Sarah Dury¹, msc Lise Switsers¹, Dr. Honghui Pan¹, Dr. An-Sofie Smetcoren¹, Dr. Andrea Principi², Dr Jolanta Perek-Bialas³, Prof. Liesbeth De Donder¹

¹Vrije Universiteit Brussel, Brussels, Belgium. ²INRCA Centre for Socio-Economic Research on Ageing, Ancona, Italy. ³Jagiellonian University, Kraków, Poland and Warsaw School of Economics, Warsaw, Poland

Abstract: 2020 is marked by the COVID-19 pandemic. During the pandemic, one of the most striking guidelines, to contain the virus, is to increase physical distance. Despite these restrictions, a wave of solidarity emerged and people launched all kinds of actions to provide the social backbone for this crisis. Within the Belgian context, this study aims to gain insight into the way in which its older population has received or gave help.

The study was conducted when Belgium had been in lockdown for 10 days and aimed to identify the actions taken by citizens during the last seven days in the context of help and support. 2017 adults completed the survey, among them 401 people were aged 60 years and over.

Results which are based on binary analysis show that 1. Actions: People are committed to helping each other, both within family and friends as well as outside these circles; 2. Reciprocity: Whoever receives help also gives help; 3. Motives: Citizens help out of altruistic values but also out of self-esteem.

The pandemic reduced mobility and social interactions, however the reciprocity of older adults' was a key finding. One that receives help also gives help. As regards to help and older adults, there is a misconception that there are people who give and others who receive help. This binary thinking applies especially to older adults but appears to be intergenerational instead, what is called 'interdependency', mutual or reciprocal dependency.

Posters

Poster 44

Age UK Gloucestershire's theory of change underpinning charitable efforts to make a county the best place in which to grow older.

Mr Rob Fountain

Age UK Gloucestershire, Gloucester, United Kingdom

Abstract: Across UK society not everyone is ageing well. We are woefully unprepared for the significant increases in people living longer forecast. With insufficient and ineffective services to meet current demand and pressure on public finances, how can we be hopeful for increasing numbers of older people in the decades ahead?

Age UK Gloucestershire is an independent, local charity established to support people aged 50+ to enjoy later life. Following a strategic review, a 20 year plan has been set by the charity setting out a theory of change the organisation is using to enact that strategy and to have a lasting and positive impact on how Gloucestershire – a diverse, urban and rural county - responds to ageing.

Taking an initial premise that more services are not the solution, the theory identifies key points of influence in the local system that could result in better ageing outcomes for the significant increase in over 65s forecast for Gloucestershire.

The theory of change identifies 5 steps that build on each other to bring about a safer, more connected, and more responsive community. The model links a more positive narrative, spread of age-friendly communities, meaningful connections, innovative statutory responses and having access to a place to turn for guidance.

This presentation invites gerontologists to critique our model, suggest improvements and propose appropriate ways to assess its impact. It encourages gerontologists to reflect on how they can support age-charities to have the biggest impact on people's experience of ageing.

Poster Session 2E - Posters (45) Olsen, (46) Grundy, (47) Eliopoulos, (48) Licchelli et al, (49) Malouka et al, (50) Hynes et al

15:15 - 16:15 Thursday, 8th July,
2021

**Track: Innovation in theories,
methods and critical perspectives**

Poster 45

Different stories: the impact of ethnicity on the narratives of market communications using older characters

Dr Dennis Olsen

University of West London, London, United Kingdom

Abstract: With the UK's aging population becoming increasingly diverse, socio-cultural artefacts that capture the zeitgeist, such as advertising, have started to gradually reflect a more multi-cultural modern Britain (Lloyds Banking Group, 2018). Nevertheless, research by the Advertising Association underscores that advertising seemingly still falls short of portraying realistically Britain's BAME population and their lives.

This conference paper examines the similarities and differences in the stories told with older people of different ethnic backgrounds found in contemporary UK advertising. So far, no study into ethnicity in advertising has focused on the older population in the UK. A narrative analysis was chosen to examine a total of N= 6,228 prime time TV commercials, collected in September 2020.

The analysis shows that older people from ethnicities other than white appear to experience less nuanced and less positive portrayals in the stories told. While ageism overall might have decreased from previous decades, this appears to hold true only for certain sub-sections of the older population.

The presented findings derive from an ongoing interdisciplinary research initiative, based at the University of West London, which investigates the public perception of ageing and old age in the UK.

Posters

Poster 46

Solidifying the liquefied: retired professors of faith narratives of connectedness, identity, and legacy.

Ms Pepa Grundy

Liverpool Hope University, Liverpool, United Kingdom

Abstract: This narrative research explores the stories of a small group of retired professors with religious faith who ponder over their life journeys. This work-in-progress qualitative study traces dynamic motifs of change in personal and professional identity, patterns of connectedness with self, others, and one's God, and the value of virtues, both resume and eulogy (Brooks, 2015), in retirement. Bauman's (2000) 'liquid modernity' metaphor is used as an exploratory framework of the story tellers' lived experiences to illuminate how these retired senior academics of monotheistic faiths position themselves in the 'liquid' reality of our neoliberal world and how they manage change in their professional and social participation in that context. Drawing on data from preliminary conversations, some potential findings are beginning to take shape. Firstly, in retirement, the previously fused personal and professional identities are beginning to separate, thus affecting how connections and relationships are viewed. These identity negotiation processes, in turn, create differences in the way religious belief, worldview, virtue and legacy are defined and how they matter to participants. Secondly, an active attempt to hold open a vision of an alternative horizon from that offered in our present culture, is becoming apparent. In that, the communication of one's religious conviction, rather than its content seems to be more important for the creation of a courteous discourse with emphasis on constructive exchanges and mutual learning (Sullivan, 2020). Finally, curiously, acknowledging one's vulnerability appears to support one's potential to cope with transformation in retirement.

Poster 47

PHOTO-ELICITATION - A valuable resource in ageing research

PhD student Elaine Eliopoulos

University College London, London, United Kingdom

Abstract: Supervisory Team: Prof Paul Higgs, Dr.Chris Gilleard, Dr. Wendy Martin

PHOTO-ELICITATION- A valuable resource in ageing research

Visual methodologies have received increased attention in ageing studies. The use of photographs presents an opportunity to gain insight into the daily lived experience of older people with a depth not otherwise captured through more traditional methodologies. Multidimensional, layered phenomenon demonstrated through participants' self-generated photographs provide a window to the mundane ordinariness of everyday life juxtaposed with discourses operating on those lives.

This poster will discuss the use of photo-elicitation with participants between 80-102 years old. They were asked to provide photographs of their daily lives which highlighted their experience of their bodies. Participants took an average of six photographs and then submitted to an interview to discuss them. The results revealed complex stories about participants corporeal and embodied experiences atypically contrasted with the decline narrative associated with this cohort. Photo-elicitation proved a useful research tool from a few perspectives. First, it served as an effective recruitment tool by encouraging participants voice in the research. The photographs also facilitated dialogue about the ways in which participants considered their ageing bodies, and what meanings they gave to them at this time in their lives. Whilst there were a few incidents of difficulty managing the camera, the methodology was otherwise quite productive.

Posters

Poster 48

How are health and ageing perceived in older gay males living with HIV in England? A qualitative investigation of the intersection between sexual orientation, HIV status, age and geographical location.

Mr Stefano Licchelli, Dr. Kimberley Smith, Professor Andrew King

University of Surrey, Guildford, United Kingdom

Abstract: Due to the therapy now available, people living with HIV (PLWHIV) are living longer lives and their needs are unexplored. Additionally, there is a lack of research that has explicitly examined how the intersectionality of ageing with HIV and sexuality are linked with health and wellbeing in different environments. This study highlights how older gay males living with HIV experience and make sense of living in their local area in relation to their condition, considering the intersection of age, sexual orientation and HIV status. The participants were gay males aged 50 and over who have been living in England for more than 5 years and were diagnosed with HIV for longer than 2 years. Participants must be living in one of the pre-determined areas divided into urban and rural. Participants were recruited through advertisements posted by HIV and LGBT charities and groups on social media or in newsletters. Interviews were conducted as videocalls between March 2020 and March 2021. Interviews were audio recorded and transcribed verbatim. Currently, 19 participants have been interviewed. The analysis will be conducted using thematic analysis through an inductive approach. This presentation will draw out some key themes from my analysis, including definitions of health and perceptions of what barriers there are to ageing well in this population. This study is going to provide more insight into the health needs of this population as well as identify structural difficulties in ageing well with HIV as gay males in local contexts.

Poster 49

Sex and Age Stratified Normative Values for the Life Space Index in Older Canadians

Selina Malouka, Julie Richardson, Marla Beauchamp, Ayse Kuspinar

McMaster University, Hamilton, Canada

Abstract: Addressing the limitations of common physical performance measures of mobility, the Life-Space Index (LSI) was developed to account for the interaction between individuals and their environment. However, normative data for the LSI is not available for Canada, making interpretation of scores difficult. Therefore, this study aimed to establish sex- and age-stratified normative values for the LSI in older Canadians. Baseline data for participants aged ≥ 65 years old (y.o.) from the Canadian Longitudinal Study on Aging (CLSA) were assessed ($n = 12,646$). A t-test assessed gender differences in LSI scores, and ANOVA and Kruskal-Wallis tests assessed whether age groups influenced LSI scores. Quantile regression estimated age-specific percentiles (5th - 95th). On average, the sample was 73 ± 5.7 y.o. (49.8% women) and scored $80.5 (\pm 18.4)$ points. The LSI score was 6.3 points greater in men (83.7 ± 17.6) than women (77.3 ± 18.6) ($p < 0.05$). ANOVA and Kruskal-Wallis results revealed differences in LSI scores across age groups ($p < 0.05$). For men, LSI percentiles (5th-95th) ranged from 56-110 for 65-69 y.o., 54-110 for 70-74 y.o., 50-110 for 75-79 y.o., 48-110 for 80-84 y.o. and 41-102 for >85 y.o. For women: 50-110 for 65-69 y.o., 48-102 for 70-74 y.o., 43.5-100 for 75-79 y.o., 36.5-100 for 80-84 y.o. and 30.5-92 for >85 y.o. To our knowledge, this is the first study to establish sex-and-age stratified normative values for the LSI in community-dwelling older Canadians.

Posters

Poster 50

Improving and supporting older adult self-efficacy through peer led SMART interventions

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Abstract: Strategies that leverage higher levels of self-efficacy (the realistic belief in one's own ability), can lead to improved health management; interventions that facilitate self-efficacy can be enhanced by people working together with shared health beliefs. Peer supported interventions have been used successfully to support persons with health conditions; however, there is limited evidence in the literature for older adult-facilitated group interventions. In 2019 we conducted a proof-of-concept study which demonstrated that older adults meeting in groups could each create and follow through with a single SMART goal for an area of self-management over a one-month period. Building on this finding, we have developed a peer-led community-based intervention that facilitates older adults to set and follow through with SMART goals to maintain or improve their physical and cognitive functioning. Since the public health restrictions due to the COVID-19 pandemic preclude face-to-face meetings, our methods will involve holding virtual groups with older adult from across Ontario. Participants will attend a SMART goal setting session followed by six monthly support group meetings where they will set the continuation of their goal, modify their goal, or set a new goal. By improving their modifiable health risk factors, participants may improve their physical and cognitive functioning and the potential to delay any decline in their health. This peer-led intervention has the potential to ease the burden of chronic diseases on the healthcare system as we will demonstrate the self-management abilities of older adults to maintain or improve their physical, psychological and/or social health.



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