

**Older People and Ageing
Research and Development Network**

(OPAN Cymru)

Scoping Study

Final Report

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Contents Page

Page no.

PART A

1. Introduction	5
2. Scoping Study Methods	6
3. Justification for the OPAN theme	7
4. Older People and Ageing: A review of existing research and development in Wales	11
5. Strengths and weaknesses of current research and development activity	16

PART B

6. Plans for developing the OPAN network	19
7. How the proposed network fits with the WAG priorities for health and social care	24
8. How the proposed network fits with the work of UKCRC	25
9. Conclusion and Summary	26

Bibliography	27
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Appendix 1 List of organisations that participated in the study	28
---	----

Appendix 2 Scoping Study Methodology	29
--------------------------------------	----

(In separate volume)

Appendix 3 Health and Clinical Research Studies	30
---	----

Appendix 4 Nursing Research	48
-----------------------------	----

Appendix 5 Research on the Social Care of Older People	50
--	----

Appendix 6 Overview of research conducted in Centre for Social Policy Research and Development, University of Wales Bangor	62
--	----

Appendix 7 WORD-funded studies	72
--------------------------------	----

Appendix 8 PHD / Mphil theses.	76
--------------------------------	----

Appendix 9 Gaps identified in the research on older people.	83
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PART A

Section 1. Introduction and Background

‘The scoping exercise is both timely and necessary.’ (Older Person’s Strategy Co-ordinator).

The aim of the Older People and Ageing Research and Development Network (OPAN Cymru) Scoping Study is to outline the creation and development of a network to advance research and development in the field of ageing and older people in Wales. One of its main aims is to identify priorities for the network, particularly in relation to capacity building. The network highlights ‘ageing’ alongside ‘older people’ to reflect a broader perspective as well as reflecting tomorrow’s older people and the need for flexible definitions of age.

In less than thirty year’s time older people will comprise almost a quarter of the total population of Wales. Older people living in Wales are more likely to experience ill-health than their contemporaries living in other parts of the UK. People aged over 65 years are known to make greater use of health, medical and social care services and to consume more public resources than other age groups. An ageing population thus poses challenges to service provision, but also provides opportunities for society and individuals as increasing proportions of older people have raised the social and political profile of older people in Wales.

This Scoping Study, undertaken by an inter-disciplinary team from 3 Welsh Universities found widespread interest in, and enthusiasm for, a research-based network focussed upon Older People and Ageing in Wales. To demonstrate progress toward achieving this aim, the Report covers two main areas.

- Part A. An overview of Research and Development Activity in Wales.
- Part B. Plans to develop an Older People and Ageing R&D Network in Wales.

The Report is based on a review of relevant research and consultation with a wide range of stakeholders in health, social care and housing organisations, local authorities, the voluntary and independent sectors and service users and carers as academics. Further details of the literature searches can be found in a separate appendix.

The Report that follows sets out:

- Scoping Study Methods
- Justification for the OPAN Cymru theme
- Older People and Ageing: A review of existing research and development in Wales
- Strengths and weaknesses of current research and development activity
- Plans for developing the OPAN Cymru network
- How the proposal fits with the Welsh Assembly Government priorities for health and social care
- How the proposal fits with the work of UKCRC
- Conclusion

Section 2. Scoping Study Methods

2.2. Scoping study objectives and methods

Scoping Study Objective	Scoping Study Data Collection Methods
Review of research and development activity	Literature search and review Trawl of Welsh HE websites Questionnaires
Identify strengths, weaknesses and gaps in the research	Interviews (telephone and face to face) Workshop discussions
Assess research capacity	
Network development	Questionnaires Interviews(telephone and face to face) Workshop discussions Review of network models

2.2 Secondary data

The literature search included published clinical, health and social care research undertaken in Wales (or elsewhere but with a specific reference to Wales) over the last 15 years since the NHS and Community Care Act 1990. This date was chosen because of its relevance to the development of current service structures and shifts towards performance management, evidence-based and person-centred care. Welsh University websites were trawled to identify relevant research centres. The experiences and expertise of the advisory group were also drawn on.

2.3 Stakeholder consultation

The research team consulted widely with stakeholders representing older people's interests in the voluntary sector as well as older people and carers. Other participants included managers, policy-makers and practitioners in health, housing and social services organisations; the independent care sector; commissioners and users of research and academics in higher education. Consultation included:

- Two workshops held in north and south Wales to explore
 - Research, older people and ageing
 - Developing an R&D network
- Telephone and face-to-face interviews
- Questionnaires distributed by email.

See Appendix 1 for organisations that participated in this study and Appendix 2 for details of Scoping Study methodology.

Section 3. Why an Older People and Ageing Network? Justification for OPAN Cymru theme

'I feel outside the research loop' (Older People's Nurse).

3.1 Demographic factors

People aged over 65 years are a significant and growing proportion of the population of Wales. In the last fifty years the very oldest age group - those over eighty years - has increased five fold. By 2031 the proportion of older people is predicted to increase to 23 per cent overall (ONS 2005). Within some localities in Wales the population of older people has already reached these levels for example in Conwy. Life expectancy continues to rise because of developments in health, housing and social care services, improvements in living conditions and life-styles. However, across each county of Wales there are wide variations in life expectancy and levels of economic and social disadvantage. For example, people living in Merthyr Tydfil are likely to live shorter lives and to experience more ill health than people living in Ceredigion or Monmouthshire (ONS 2005). People from minority ethnic groups comprise a small proportion of the older person population but are more likely than other groups to experience ill-health and to have difficulty in accessing health and social care services (Merrell and Kinsella 2003). Given the above, meeting the needs of a diverse population of older people and understanding how ageing is experienced in different parts of Wales is important.

3.2 Policy developments

Older People are one of five Welsh Assembly Government priority areas. The Older People's Strategy for Wales (WAG 2003) recognises the need to tackle age discrimination and to develop person-centred public services. The Strategy heralded a broad concept of health and well-being that requires research across a range of settings. As one workshop participant stated

'In the Strategy the emphasis is as much on well-being as it is on health and social care so a research programme would need to explore the relationship between housing, income levels, transport, leisure, the environment, gender discrimination etc and the ageing process and how to bring organisations / professionals involved with these areas into the research process.' (Workshop participant).

The Wanless Review of Health and Social Care (2003) called for interventions earlier in the care pathways of older people and more investment in community-based services. Such developments would enable older people to maximise opportunities for independence and prevent unnecessary hospital admissions and institutional care. People aged over 65 years account for 40 per cent of emergency admissions to hospital. Government inquiries over recent years have highlighted problems that continue to be created by the division of funding and service provision for health and social care (House of Commons Health Committee 2005). These problems have resulted in 'sub-optimal care and financial hardship' (p. 52). Issues include continuing care, elder abuse, care for people who are terminally ill and inappropriate use of NHS acute beds.

3.3. Policy, research and practice

The Older People's Strategy and the establishment of a Commissioner for Older People are examples of policy and practice where evaluative research would be useful to assess whether and how the strategy enhances the well-being and lives of older people. The House of Lords Select Committee on Ageing Research has yet to report, but evidence submitted to date indicates relatively low research activity in the ageing field across disciplines.

Many Scoping Study workshop participants were concerned that practice may not be researched or evidence-based. Developmental work carried out by public bodies may not be shared leading to duplication of effort. Others were unaware of research developments in Wales that were relevant to their practice or organisational development. Clarity was needed to enable practitioners to identify 'best' practice. Few in practice knew of the major players in research or knew how to access research and to assess its quality. Few people working in older people's organisations knew the major UK centres of excellence such as Keele University, King's College, London or The Centre for Policy on Ageing.

3.4 Research capacity and the Research Councils

Research on older people has not kept pace with developments in policy around older people's services. There is a need to build on the existing knowledge or evidence based for further developments in policy and practice. A more comprehensive **evidence base** is vital in this area to inform policy and practice so that research can contribute to the well-being of people of all ages in Wales. Different types of evidence require evaluation and consideration.

Researchers have traditionally worked in relative isolation- themes are not linked and an ad hoc approach has developed in relation to research on ageing and with older people in Wales. Drawing together the existing strengths will be of benefit both to the researchers involved and to the population of Wales. Research needs to cover the whole of the country and to reflect local as well as national need; this being important in terms of the dissemination of research and the implementation of research findings.

There needs to be encouragement of innovative interdisciplinary research groups to form from new issue based areas. Wales needs to create a new generation of researchers interested in older people and ageing issues.

The number of applications to Research Councils (e.g. Economic and Social Research Council (ESRC), Engineering and Physical Sciences Research Council (EPSRC) and Medical Research Council (MRC) from Wales is low. However the success rate is equivalent to that of other countries in the UK. Research has not been undertaken to discover the reasons for the low application rate, but there is a need for more quality applications to Research Councils.

There is also a need for a network on ageing to take advantage of existing programmes of research such as the ESRC 'Growing Older' and the cross council 'New Dynamics of Ageing' programmes; The Community Fund; Nuffield and Joseph Rowntree Foundation, as well as new networks e.g. Strategic Promotion of Ageing Research Capacity or the EU Sixth and Seventh Frameworks.

3.5 Theoretical developments

Traditionally research has focused on health and social aspects of ageing; there is a need to broaden our vision of ageing. There are new areas and opportunities for increasing capacity - for example through medical engineering. There is a need to look at the impact of developments in ageing in one area on another e.g. technology on well-being.

A new holistic paradigm of ageing has emerged across scientific disciplines and there is greater acceptance of interdisciplinary collaboration. There is also a trend towards more 'joined up' and systematic thinking in policy and practice. This goes beyond just health and social care agendas. The technological, social, economic, physical and environmental aspects impacting on well-being in later life are an example where inter-disciplinarity is vital.

3.6 Research methods

In terms of methods the development of innovative qualitative and quantitative approaches are necessary. Methods need to be explored that can integrate data from diverse measures ranging from qualitative assessments to clinical measurements. In the social sciences there has been a focus on small scale studies reflecting small grants for research in this area. There exists scope for the development of large scale studies and longitudinal data bases and panel studies, case studies, critical incident analyses and narrative interviews with both service users and providers. There is also a need for more innovative and appropriate evaluative studies and methodologies. A network would assist in capacity-building in these areas.

3.7 Stakeholders in research

Service Users and carers. The research process needs to involve users and carers at all stages. Developments are necessary to establish networks of older people who will identify the issues important to them, designing, participating in the research process and analysing and interpreting research findings. There are developments already occurring in Wales to achieve this and the network will build on these. Centre for Social Policy Research and Development (CSPRD) has been committed to having a user voice in research and the project RuralWIDE has recruited older volunteers and trained them to undertake research.

Users of research on ageing including local authorities, the private and independent sectors need to be brought into establishing and consulting on research agendas. Developing a network that reflects and collaborates at regional and local levels will also enable dissemination and be sensitive to research needs of research users. The network will also work with other emerging networks (e.g. dementia care and mental health and social care) to achieve this aim.

3.8 Visibility of research excellence outside of Wales

The aim should be to make Wales a leading international centre of excellence in research on ageing and later life. Outside of Wales there are dedicated research centres on ageing (at Keele, Oxford, Cambridge, Salford Universities, Kings College, London) which have attracted funding from a range of sponsors in the public and voluntary sectors. In the social sciences no centres exist in Wales (CSPRD at Bangor until recently had a broader remit) and the lack of a critical

mass of researchers dedicated to ageing research has been a disadvantage in bidding for large Research Council grants. There is an urgent imperative to reverse this and to increase our capacity and to take advantage of a variety of research funding streams. Enhanced research activity would also encourage researchers to network beyond Wales and to join societies, networks and committees involved in ageing on the world stage, British Society of Gerontology, British Geriatrics Society, International Association of Gerontology. Further research development in Wales will also provide new opportunities for linkages with the EU and North America.

There is a need to enhance and sustain the research community; not only in terms of introducing new researchers to ageing, but there is a need to provide core funding in order to sustain and build future capacity in this area.

This Section has highlighted key arguments for the theme. The following Section lends weight to our case for an older people's research network.

Section 4. Older People and Ageing: A review of existing research and development in Wales

'There is a need to compile a register of existing research'. (NHS manager).

4.1 Literature search and review

The literature search focused on research on older people and ageing carried out by researchers located in Wales, as well as research carried out by others that included people living in Wales. It did not cover any research conducted outside of Wales which had a general impact on Wales nor any research in the Welsh language. It included cross national, EU funded and international research. University websites and major search engines were used in the search (see Appendix 2 for methods of the search). The review is not designed to be systematic but gives a brief overview of literature on ageing that is easily accessible. The review also does not concentrate on theoretical and conceptual issues around ageing and older people. Broad social models of health and well being, quality of life and citizenship which impact on the lifecourse and have an effect on older people are important theoretical approaches in conceptualising some of the issues regarding ageing and older people but are not addressed in the study.

Some participants involved in the study defined research as a broad concept, and included position papers and conference presentations. Some saw themselves as carrying out applied research- working with organisations in their change process and helping them to understand what was going on in a Welsh context or disseminating 'good practice' based on evidence. All these activities could be badged under 'research' but have not been included in this study.

4.2 Research areas

Three areas were searched

- Health and Clinical Research Studies
- Nursing Research
- Social Care Research

The following were extracted from the literature

- Main themes
- Types of research
- Methods
- Author/ groups

4.3 Health and Clinical Research Studies

The main themes in the clinical literature were: Stroke and cardiovascular disease (28 studies); falls and osteoporosis (18); dementia (19), depression (19) and mental illness (8); cancer (7); Parkinson's disease (6); respiratory disease (6); primary care (6); hospital discharge (6). The main centres undertaking this work were Cardiff and Bangor Universities, with Bangor including a social element in some of its health research. From this review psycho-geriatric research is strong in Wales. European research is also evident with a collaborative study among

research centres in Europe (EUROSTROKE) including the Cardiff National Stroke Unit. Appendix 3 provides a detailed overview of this phase of the scoping study.

The type of research and methods used varied from small-scale case studies to randomised control trials; the majority of studies were cross-sectional but some studies drew on longitudinal data (e.g. the Caerphilly longitudinal study). Gaps existed in issues around gender and ethnicity.

The Academic Department of Geriatric Medicine, Cardiff University has a strong clinical base, with a well established and respected multidisciplinary team specialising in older people with physical and mental frailty. The broad range of research expertise within the department includes expertise in conducting epidemiological studies, randomised controlled trials (especially in vulnerable populations), qualitative studies and the development of clinical outcome measures. There are long standing local research collaborations in epidemiology (with the former MRC Epidemiology Unit and Caerphilly Cohort Study), genetics (with the Neuropsychiatric Genetics team) and in psychology and applied ethics. There are also close links with the MRC Health Services Research Collaboration. The department is also responsible for the coordination of a European research network of academics, clinicians and user organizations, enabling large trans-national investigations of quality and ethical issues in the delivery of health care to older people and those with dementia. Current international collaborative projects include research into the information needs of older people with chronic disabling illness and their carers, and into the significance of dignity in care. The reputation of the department as a leading centre for conducting clinical trials in Alzheimer's disease and related conditions is recognised internationally.

4.4 Research into Nursing Practice

In searching the literature from 1990-2005, 25 studies were identified which directly relate to nursing practice and older people in Wales (see Appendix 4). Three broad themes emerged from the review: health promotion and screening; the delivery and quality of nursing care for older people and informal care. There is a chronological element to the nature of this research and it is significant that the research is influenced by specific policies. For example the NHS and Community Care Act (1990) required annual GP assessments of the over 75s and there are a number of studies related to evaluation of screening. The Carer's (Recognition and Services) Act 1995 implemented in 1996 which resulted in carers being offered a health assessment was followed by several studies which explored the impact of this policy in practice.

In view of the demographic trends there has been limited research into nursing practice and older people to date. Research in this area has mainly adopted quantitative approaches with the use of randomised controlled trials and surveys dominating. There is a need for more qualitative studies to enable older people to express their needs and experiences of health and social care to inform future planning of services. In particular, there is a paucity of research which explores the health and social care needs of the very old i.e. centenarians and of minority ethnic elders. Although minority ethnic populations tend to be younger than the indigenous population the proportion of minority ethnic elders within the elderly population as a whole will increase dramatically over the next 10-20 years (Patel, 2004). The need to consult with Black and Minority Ethnic organisations to

determine research priorities forms part of the action plan in the strategy for older people in Wales (WAG 2003). A strategic aim of the older people's strategy in Wales (WAG 2003) is to promote the health and well-being of older people and further work is needed to explore nurses' contribution and effectiveness in health promotion and screening with older people.

Additionally in response to government policy there has been a proliferation in the development of different models of intermediate care services and there is a need to evaluate the effectiveness of these various models of service delivery. Although there have been studies which have explored the impact of nursing interventions with individuals with dementia and their families there is less evidence of research exploring the impact of social isolation on the mental health status of older people. Finally, nurses' contribution towards improving the management of medication in older people would seem to be under explored.

4.5 Research on the Social Care of Older People

The social care literature search was conducted by researchers at Bangor University (see Appendix 5). The main themes identified were around residential and nursing care (service provision and residents issues); carers; technology; social relationships; policy issues (mainly around the Strategy for Older People at national level and many at local level); housing; social inclusion; energy efficiency; assessment and care management; alcohol use and rural issues. The majority of work had been conducted by members of CSPRD at Bangor University. Evaluative research was a key type of research running through many studies. Literature reviews and use of the Bangor Longitudinal Study of Ageing also featured. (A summary of the Bangor Longitudinal study of Ageing and gaps highlighted by previous work conducted by CSPRD can be found in Appendix 6). Bangor and Cardiff Universities have also conducted EU funded research.

In addition to the main university centres (Department of Geriatric Medicine in Cardiff and CSPRD at Bangor), the School of Health Science at Swansea University has undertaken research around carers including carers in the Bangladeshi community, older people with mental health problems, hospital discharge policies, local authority domiciliary care charging policies and winter emergency pressures. The School collaborated with Swansea Clinical School in a study of assessment tools for older people and with researchers at the former University of Wales College of Medicine and School of Health Science to produce a qualitative study of stroke patients and a systematic review of health and social care collaborative working. The Department of Applied Social Sciences at Swansea University has also a track record of research on ageing, particularly in relation to ethnic minorities in Britain, ageism, retirement, family and community relationships and social policy. For a number of years one of the premier international journals on ageing, '*Ageing and Society*,' was edited by members of the department. The Department has recently appointed a Chair in Gerontology to develop an Interdisciplinary Research Centre on Ageing. This appointment brings expertise in research around issues of work-life balance, intergenerational relationships, social work and social care, crime and older people and environmental aspects of ageing.

The Welsh Centre for Disability Studies at Cardiff University has, and is, undertaking studies of carers including two studies of the Welsh Carers' Strategy, quality of life, parenting and adults with learning disabilities and death and dying.

There are certain research groups that are internationally recognised and whose visibility in peer reviewed literature is evident. For example in relation to psycho-geriatric research and the work of the Bangor group focusing on social issues of ageing. The visibility of these groups in peer reviewed literature is evident.

There are numerous individuals researching in relative isolation on older people. In addition several organisations have commissioned research, which has not been reported here, for example, the Welsh Consumer Council commissioned studies of domiciliary care charging policies and looked at transport issues in relation to older people; the NHS is looking at rights and equality and *Insight* does work on technology and care.

4.6 Appendix 7 lists key studies related to older people funded by WORD.

4.7 Postgraduate Students

Bangor and Cardiff Universities also have courses on ageing, gerontology/ geriatric medicine, which provides research infrastructure. Both have a small number of PhD students working on ageing issues (and See Appendix 8 for a list of completed PhD / MPhil studies). Since 1990 the number of PhD studies focusing on issues relevant to ageing and older people has been limited. Areas of study have focused on dementia including Alzheimer's disease and medication. Other areas of investigation include rehabilitation, anthropology, residential and nursing care and transport.

4.8 Large-scale datasets

A number of data sources were identified in the research search. The Office of National Statistics in its *Profile of Older People in Wales (2005)* utilised data from a number of different datasets including the General Practice Morbidity Database (GPMD); the Welsh Cancer Intelligence and Surveillance Unit (CWISU) and the Patient Episode Database for Wales (PEDW). PEDW has information on hospital admissions. The All Wales Injuries Surveillance System (AWISS) collects data on A & E attendances and STATS19 is a police database that records road traffic injuries.

The Caerphilly Cohort longitudinal study of heart disease and stroke is now run by Bristol University. It is the source of a number of papers published by clinicians based in Cardiff. AWARE - All Wales Research into Elderly dataset used for example in study of patients with diabetes at Cardiff University Department of Geriatric Medicine. AGILE is a physiotherapist research study and dataset. There is also a dataset identified from a community-based register of 74 GP practices in north Wales used by researchers at Department of Geriatric Medicine at a North Wales hospital (Glan Clywd) to study Parkinson's disease.

4.9 Research gaps

A number of gaps in the research agenda were identified by workshop participants, interviewees and through a scrutiny of the literature by the research team. Appendix 9 lists these thematically. It was considered that there was an imbalance between health and social care research. Participants felt that health and illness dominated research and more work was needed on the social and physical environment of ageing. There is little cross over of disciplines between health and social care, apart from the work on dementia and mental health. There is a need for working together within and across disciplines. There are also a number of structural weaknesses in health and clinical research. Until 15 years ago geriatric medicine research was age related in Wales, now is integrated in to medicine and this has undermined its focus on older people.

Section 5. Strengths and weaknesses of current research and development activity

5.1 Strengths

- There was enthusiasm and commitment to develop an evidence base for improving services including a thirst for learning about the research process and an eagerness to discover the research that existed in Wales.
- The general consensus that older people should be a focus for research and were at the centre of much research was seen as a strength. Older people are getting involved in all stages of the research process e.g. through Gwynedd Rural Ageing Network (GRAN).
- Voluntary organisations also consult older people widely in their research and development activities and the fact that fifty per cent of the National Partnership Forum are older people was seen as a catalyst for change. Voluntary bodies found collaborative work with universities valuable for obtaining funding.
- The importance of research among all organisations working with older people in Wales was acknowledged. There was general agreement that 'research should not be for the sake of research' but should benefit older people. There was also recognition that health and social care needed to develop ways of working together that were informed by research and robust evaluation of services.
- The size of Wales was seen as one of its strengths. Researchers, practitioners and policy makers in the field were known, committed and could develop dialogue with each other. Devolution of powers for health and social care has the potential to bring research closer to policy-making. This was particularly evident in North Wales through collaboration between organisations and Bangor University in their research on carers, the RuralWIDe project, HAPPI and BLSA projects. Bangor University's research on ageing had contributed significantly to the policy field and development over a number of years in Wales and was seen as a strength. Additionally the two recent EU studies on Dignity and Older People (Cardiff) and European Study of Adult Well-being (Bangor), were mentioned as useful.
- Welsh research funding through WORD had acted as pump priming and led to larger Research Council grant applications being successful.

5.2 Weaknesses

- Lack of a strategic approach and overview of ageing research

Many participants were concerned about the lack of a strategic approach to research on a range of issues concerning ageing and older people. A research strategy was considered necessary to provide Wales with an evidence base that encompassed all disciplines. Health was considered to dominate current research and smaller organisations, for example in the voluntary sector, were considered to be in a weaker position to influence research agendas.

A single All Wales forum for discussion between and within professions, or between and within care sectors, does not exist. Although within professions there are fora for discussion, for example, the British Geriatrics Society.

There was a general lack of awareness amongst participants from all sectors about research outside their immediate area. Senior managers in service organisations and voluntary groups voiced frustration at a perceived lack of dissemination and knowing who to approach to commission research. One senior manager felt he only knew who was involved in research because of contact via a group developing the Strategy for Older People. There was recognition that there will be duplication and replication of research studies, especially in practice. There was general recognition in the workshops that there was a need to develop a database of research undertaken in Wales and that this database should sit independently and be regularly updated.

- Research and Development Structures: Funding

Opportunities for funding specific Welsh research in health and social care have reduced over the last few years. Contract research in Wales does not facilitate building a strong base of researchers or allow for capacity building. Money is required for infrastructure support within research centres, so that researchers are also able to devote time to developing new research proposals. It was considered that the Welsh Assembly Government needs to re-evaluate the benefits of continuity in research funding for practice. Funding for research within service provider organisations was also considered to be lacking. Some voluntary organisations were too small to conduct research themselves.

- Accessing and Implementing Research

A shortcoming highlighted by interviewees and in the workshops was the difficulty in finding out about research that currently existed on a particular topic and if so, how to access it. Participants expressed a need for quick access. In the main, they preferred an overview of key findings and implementation issues. The format of Joseph Rowntree Foundation *Findings* and the Better Government for Older People *Stratagem* were highlighted as excellent examples of how to make research accessible. Amongst some managers and practitioners there was a lack of confidence about how to identify high quality research and appropriate research methods for service evaluations. There were also concerns that research may not ask the *why* questions that could lead to real improvements in developing appropriate services. For example, research in the 1980s and 1990s highlighted that there was little drug compliance amongst older people after discharge from hospital but did not go on to explore the factors that led to non-compliance. There was also an acknowledgement of a time lag between the research being conducted and implementation in policy and practice.

- Future Research Capacity in Higher Education

The future of ageing research is also jeopardised by the lack of ageing as a subject area on undergraduate and postgraduate professional courses, which could train future researchers. Postgraduate opportunities to grow the future researchers in ageing are few. Student numbers on gerontology courses are low. The same picture exists for England and Scotland. In telephone contact with admissions

tutors, 2 people were currently doing PhDs on subjects connected to ageing. Traditionally PhD students and researchers have found themselves working in isolation. Researchers, both those with experience and those new to an academic career, may be on short-term contracts.

The age of medical and social science academics is a further issue, with many coming up to retirement.

The Research Assessment Exercise (RAE) has resulted in tensions for researchers as the drive in universities is to bid for large scale Research Council funding, seek international collaborations and publish in peer reviewed journals rather than address the research agenda of local organisations. Visibility in peer reviewed journals was also an issue; with many of the social care studies recorded as local reports and conference proceedings there was a paucity of research reaching an international audience.

There is also a lack of a critical mass of researchers, particularly in social aspects of ageing. This is beginning to be addressed with the development of an Interdisciplinary Research Centre on Ageing and the appointment of a Chair in Social Work and Gerontology at Swansea University. There is also a lack of a critical mass in expertise in research methods.

- Lack of a research culture in organisations

Research was not considered to be a high priority for some practitioners and some worked in service provider organisations where there was a perceived lack of awareness about the importance of research. Several practitioners who had undertaken research as part of degree schemes and training felt there was no sustained way of doing research and hence their skills had not been acknowledged or developed. However, some local authorities in Wales are appointing research-trained staff in policy units or as older people's strategy implementation officers.

Greater priority should be given to how researchers could work with policy-makers and practitioners. Practitioners called for multi-disciplinary research skills training and for opportunities for researchers to come together to share best practice and research. There was scope for the language of research to be demystified to make research more accessible to practitioners and to older people themselves.

- Secondary analysis and limitations of large scale datasets

The Office of National Statistics reports that some large-scale datasets do not contain reliable information about older people (ONS 2005). For example, the Welsh Health Survey includes small samples of people aged over 65 years making it difficult to extrapolate meaningful results at a local level and Census 2001 did not record a person's last main occupation, preferring a socio-economic group classification which for retired people can be unreliable (ONS 2005). The Acheson Report (1998) commented upon shortcomings in the health data about older people linked to social class.

PART B

Section 6. Plans for developing the OPAN Cymru network

‘It has the potential to provide data on activity, to improve implementation and increase awareness of funding opportunities.’ (Social Services Manager).

6.1 The scoping study interviews and workshop discussions contributed to the construction to date of the OPAN Cymru network. At the South Wales workshop the afternoon session was devoted to discussing the network. A presentation of different models and examples of the SPARC (www.sparc.ac.uk) and Making Research Count (www.uea.ac.uk/swk/research/mrc/welcome.htm) was given. At the North Wales workshop models of networks including the existing Gwynedd Rural Ageing Network (GRAN) and CSPRD RuralWIDe project were also explored. As a result of these discussions the following aims, objectives, plans and organisational structure of the network have been developed.

6.2 Aims and objectives of the network

The aim of the network is to improve and enhance the well-being of older people through increasing research capacity in the field of ageing. The vision is to make Wales the best place in the UK to do ageing research. In the *long term* the network will develop the infrastructure to achieve this. The network will enhance research capacity and development by:

- Enhancing the quality and volume of research
- Improving the integration of policy, practice and research
- Improving the coordination of research
- Strengthening research collaborations

6.3 Enhancing the quality and volume of research will be achieved through

- Identification of multi-disciplinary research priorities and capacity across Wales through consultation.
- Identification of sources of funding and support to facilitate collaboration across disciplines, sectors and institutions to bid for Research Council funding and other R&D funding.
- Making small grants available to encourage new researchers and for pump priming along the lines of that developed by the SPARC network.
- Developing expertise of researchers, practitioners and older people themselves through training, and collaborative work, in relation to quantitative, qualitative and mixed method studies.
- Building links with the proposed Swansea University Centre for Qualitative Research.
- Complementing rather than duplicating research studies.
- Monitoring and reporting on research activity.

These points will address weaknesses in the lack of a strategic approach and funding identified in Section 5.

6. 4 Improving the integration of policy, practice and research will be achieved through

- Assisting in raising the profile of research within organisations at all levels.
- Forging closer working relationships between universities and care providers.
- Enabling researchers to spend time in practice and with policy makers and *vice versa* to enable a better understanding of each other's needs.
- Supporting policy and practice development and implementation through evidence based approaches.

Accessing and implementing research in organisations will be enhanced through this network function.

6.5. Improving the coordination of research will be achieved through

- Acting as a forum for consultation and dissemination at regional and local levels to user/patient groups, researchers and service providers.
- Promoting an active exchange of development needs across county barriers to ensure that research moves away from dependence on locally-based researchers.
- Linking with AWARD and the Wales Co-ordinating Centre for Networks.

6.6. Strengthening research collaborations will be achieved through

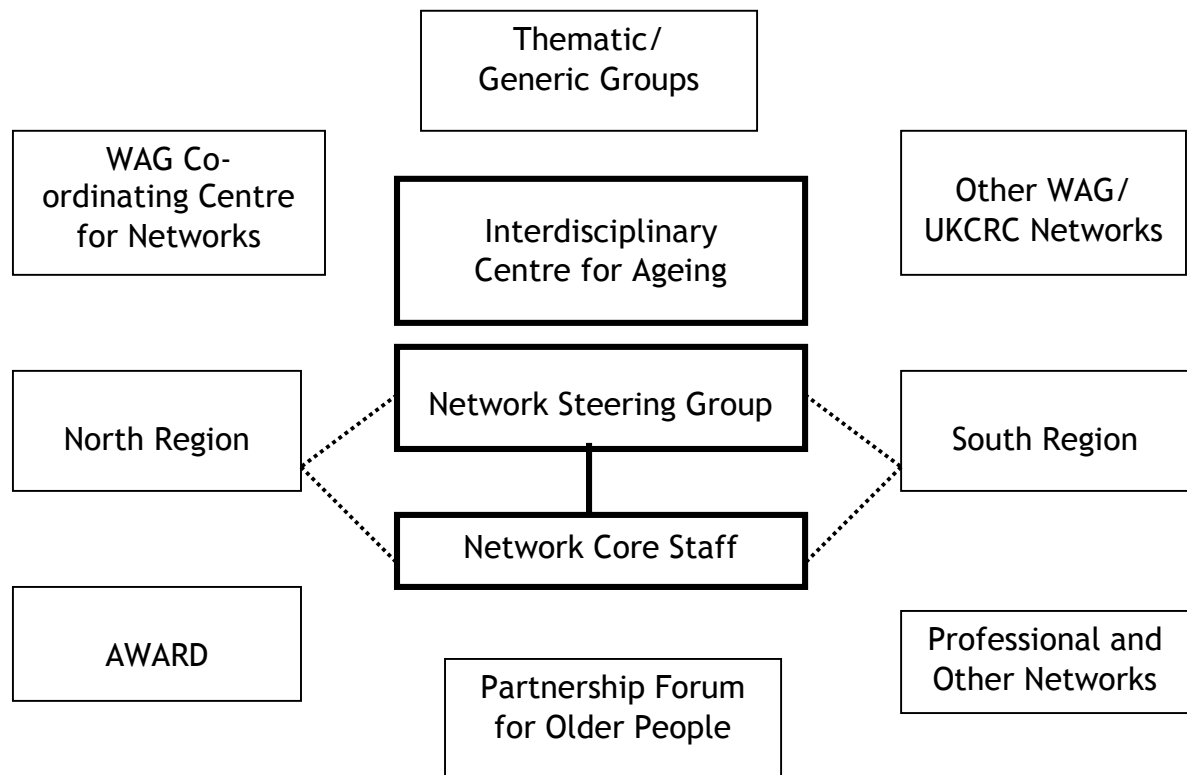
- Building on existing Wales-based service provider and practitioner networks.
- Facilitating collaborative research between diverse groups, for example, engineers, clinicians, policy makers, practitioners and older people.
- Building strong links with networks focusing on older people, for example, the National Partnership Forum for Older People and Age Alliance.
- Building on OPAN Cymru advisory group membership of other networks, for example, clinical networks (see Section 8); UK and international academic networks; other scoping study networks including social care, patient and public participation, black and minority ethnic groups, health economics (WHEN), self-care, public health, nursing research, rural health and emergency care.
- Sustaining links with professional and service networks, for example, All Wales Unit for Social Services Departments, RCN, Gerontology Practitioners Network and Chartered Society of Physiotherapy.

Through this strategy the future research capacity in Higher Education will be enhanced.

6.7 Organisation and structure

In order to achieve these aims and objectives the following organisation and structure is proposed

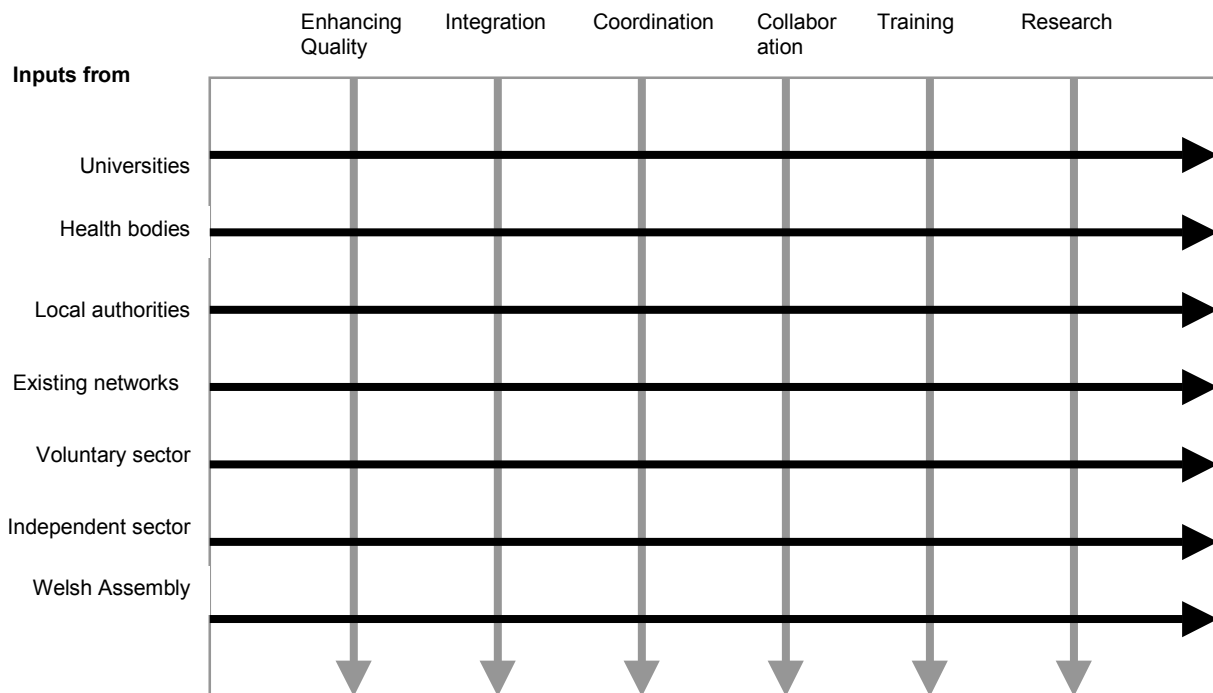
Diagram 1. Proposed OPAN Cymru Structure



The administration of the network would be based at the Interdisciplinary Research Centre on Ageing at the University of Wales, Swansea. This development is being led by Swansea University but would also involve other Welsh university departments. A central organisation and location to host the network was seen as crucial by scoping study participants. Core staff at the research centre will be responsible for the secretariat of the network, will work on co-ordination, monitoring and servicing the network as well as carrying out the activities of the network (web development, organise seminars, virtual conferences and an annual conference etc). An advisory group to include a maximum of 8 academics, policy makers and older people would meet bi-annually to work on the development of the network.

It would also function regionally around clusters of researchers and stakeholders in order to enhance 'ownership' of the network, minimise travel, and reflect local culture, values, expectations and attitudes. Bangor University (CSPRD) will facilitate the North Wales group and will build on the successful GRAN network; Swansea University the South Wales group. Such regional groups could meet twice a year to plan their activities over the year and to set research agendas. The network will also establish thematic groups working around particular issues, for example, on Alzheimer's disease, where the group would link with other members of other appropriate networks (see Diagram 2 OPAN Cymru Functions).

Diagram 2. OPAN CYMRU Functions



6.8 Membership and involvement in the network

Membership of the network should bring together expertise in a broad range of areas. It will be committed to the involvement of older people at all levels. People's needs for, and participation in, the network will inevitably change, but in principle it should engage all members in active research and dialogue and not be a passive network for dissemination of research only. Membership can be both individual and through organisations.

The issue of fees, charges and income generation for services provided will need to be agreed at full network implementation stage. It was felt by workshop participants that some member organisations such as small voluntary organisations of older people's groups may not be able to afford full fees.

6.9 Three-year action plan to develop the network.

Year 1

- With advisory group members, establish leadership and staffing of network.
- Disseminate Scoping Study Report.
- Develop terms of reference including membership, roles and responsibilities, finance, bilingual and other policies and procedures.
- Build up membership of network with emphasis on contact with networks and organisations to ensure older people participate from the outset.
- Establish web and email based contact to link organisational and individual members, other networks and funding sources.
- Create a virtual conference on the web to enhance interaction through the logging of research papers and discussion.
- Prepare initial plans for training, dissemination, research and communication strategies.

- Organise an All Wales network conference and business planning meeting to consult on draft plans and agree key targets for year two.
- Draw up a range of seminars, workshops and/or action learning sets on a regional basis discussing the frameworks of research.

Year 2

- Undertake the agreed programme of seminars and workshops to take forward researcher training, dissemination of research and policy / practice interface.
- Create a members' directory of expertise and interests and develop thematic groupings.
- Build a register of 'experts' to link with policy makers.
- Establish a database of funded research in Wales
- Start pump priming scheme and links with other funding sources (e.g. commercial private sector).
- Advocacy work to raise profile of research activity.
- Monitor, review and evaluate capacity building activities and draw up plans for year 3 in the light of the review.
- Consult on draft plans through regional, national and virtual conferences.
- Organise an international conference to showcase work in Wales.

Year 3

- Continue training, research, dissemination and collaborative enterprises.
- Maintain and update the website and directories of interest and expertise.
- Establish sustainability for the network. The network would also seek funding to make it self sustaining after the initial phase of funding.
- Evaluation of the network

Section 7. How the proposed network fits with Welsh Assembly Government priorities for health and social care

7.1 The Assembly Government's main priorities for health and social care in Wales are to achieve integrated health and social care services and partnership working between statutory agencies, communities and individuals (National Assembly for Wales 2001; Welsh Assembly Government 2002; Audit Commission 2004;). These strategic intentions are especially relevant to Wales' ageing population. Older People are a priority group for the Welsh Assembly and this commitment has been strengthened through the creation of the role of Older People's Commissioner and the Older People's Strategy. Specific priorities for Older People's services are that they should be person-centred, of high quality and promote health and well-being so that people may live as independently as possible.

7.2 Health and social care services in Wales face many challenges if Welsh Assembly Government priority for 'whole systems' working is to be achieved. The Wanless Review (2003) reported that the current configuration of services in Wales was 'unsustainable' and that there should be more emphasis on social care. Local authorities are seen as 'a key change agent' (WAG 2003, p. 8). The causes of the current 'unbalanced health and social care system' need to be understood (Audit Commission 2004).

7.3 The Older People and Ageing Research and Development network is based on complementary principles of equity, sustainability and partnership. The network would underpin and provide direction for the fulfilment of the Strategy for Older People. It has the potential to achieve:

- Greater integration of research and practice.
- A voice for older people in the design, conduct and dissemination of research studies.
- The delivery of appropriate, person-centred and timely interventions.
- A clearer focus on outcomes of care.
- A strengthening of research infrastructure and capacity.

Section 8. How the proposed network fits with the work of UKCRC

8.1 The main aim of the UK Clinical Research Collaboration is to benefit patients and the public through the creation of clinical research environment by improving the health status of the nation, wealth creation and 'enriching world knowledge'. UKCRC (Cymru) is a planned development.

8.2 The UKCRC includes the following thematic networks that have either been created, are in the process of being established: cancer, mental health, Alzheimer's, stroke, diabetes and medicines for children.

8.3 At present UKCRC partners - including the Welsh Assembly Government - aim to

- Build the NHS infrastructure
- Build and develop the research workforce
- Develop incentives for research in the NHS
- Stream-line regulatory and governance processes
- Co-ordinate clinical research funding

8.4 If successful in achieving full network status in Wales, the OPAN Cymru network would address these five headings through the objectives set out in the three-year plan. It would also continue to forge links that have already established with WORD-funded Scoping Study networks in mental health, diabetes and Alzheimer's in order to achieve tailor-made UKCRC (Cymru) objectives.

8.5 If Assembly Government priorities for integration of health and social care services for older people are to become a reality then acknowledging a social care component in NHS research is necessary. The network would enhance this development.

Section 9. Conclusion

‘This is a hugely exciting time for older people’s services in Wales and we need to make sure we win resources for service developments and the research agenda to go hand in hand.’ (Consultant nurse).

9.1 The process of consulting with stakeholders, planning and sharing in the workshop discussions, engaging in data collection and production of the Final Report means that, in effect, the infrastructure of the OPAN Cymru network has been created. A contact list of a wide range of committed participants has been extended. A significant amount of groundwork has been achieved in a relatively short time period to demonstrate the value of an Older People and Ageing Research Network in Wales.

9.2 The OPAN Cymru Scoping Study team will seek to build on the achievements to date and plans to bid for full network status in Phase Two so that the aims and priorities set out in this document may be realised.

9.3 The Report sets out a 3-year action plan to build research capacity and to enhance communication between the research, policy and practitioner communities so that the health and well-being of older people may be enhanced.

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Welsh Assembly Government (2002) *Health Social Care and Wellbeing Strategies*, Cardiff: Welsh Assembly Government.

Welsh Assembly Government (2003) *The Strategy for Older People in Wales*. Cardiff: Welsh Assembly Government.

Appendix 1. Individuals from the following organisations participated in the consultation exercise.

Voluntary Sector

Abbeyfield
Age Concern (Cymru)
Age Concern (Gwynedd a Mon)
Age Concern (Swansea)
Beth Johnson Foundation
Cardiff Carers Centre
Carers Outreach Service (Gwynedd)
Carers (Wales)
Crossroads (Wales)
Help the Aged.
Mantell Caernarfon
Salvation Army (Swansea)
Stroke Association

Care Standards Inspectorate Wales.

Health Organisations

Cardiff and Vale NHS Trust.
Caerphilly Local Health Board
Carmarthenshire NHS Trust
Ceredigion and West Wales NHS Trust
Gwent Community Health Council
Gwent NHS Trust

Neath Port Talbot Local Health Board
Newport Local Health Board

Pembrokeshire and Derwen NHS Trust
Swansea NHS Trust

National Public Health Service in Wales

Housing Organisations

Care and Repair (Cymru)
Grwp Gwalia

Independent Sector.

Care Forum Wales
UK Home Care Association Wales
Insight

Local Government

Bridgend County Borough Council
Caerphilly County Borough Council
Carmarthenshire County Council
Flintshire County Council
Gwynedd County Council
Neath Port Talbot County Council
Pembrokeshire County Council
Powys County Council

Rhondda Cynon Taf County Borough Council
City and County of Swansea
Vale of Glamorgan Council
Welsh Local Government Association

Universities

Cardiff University, Academic Department of Geriatric Medicine.
University of Wales Swansea, Applied Social Studies, Clinical School, Health Science.
CSPRD and IMSCAR Bangor University.
Welsh Assembly Government Social Care Division

Professional Associations

Royal College of Nursing
All Wales Gerontology Practitioners' Network
Chartered Society of Physiotherapists

Appendix 2. Scoping Study Methodology

Literature Review

The following databases were included in the health / clinical search: MEDLINE (1966-2005); Cumulative Index to Nursing and Allied Health Literature (CINAHL) (1982-2005); HMIC (1979-2005); PsycINFO(1967-2005); ASSIA (1987-2005); Ageline (1978-2005); AgeInfo (1971-2005); System for Information on Grey Literature (SIGLE) (1980-2005); PUBMED and Medline. Postgraduate theses were also searched. WORD supplied a list of completed studies related to health and social care. Relevant university websites were also searched. The literature was screened to exclude discussion or comment pieces, books and book chapters.

Questionnaires and Interviews

The advisory group identified key individuals working in local government, health bodies, higher education, the voluntary and private sectors and Welsh Assembly Government with a specific interest in older people and ageing. Questionnaires and invitations to workshops were distributed by email to 110 individuals. Thirty two questionnaires were completed. Attendance at short day workshops included 36 people (Cardiff) and 16 (Caernarfon). Semi-structured telephone or face to face interviews were conducted with people who were unable to attend the workshops. Data collection instruments and workshop discussion covered the following two themes:

- *'Research, Older People and Ageing'*
- Using research for policy and practice.
- How would a network enhance R&D in your field?
- Research needs and gaps.
- Strengths and weaknesses of existing research and research structures.
- Building research capacity in Wales.

- *'Building the Older People and Ageing R&D Network'*.
- Aims, structure and organisation of the network
- Developing and building on existing networks.
- Facilitating collaborative research.
- Consultation and dissemination strategies.

Data were analysed to identify patterns and themes in the responses.

Appendix 3. HEALTH AND CLINICAL RESEARCH.

Theme Ageism and dignity

First Author(s) dates of papers/series of papers institution or organisation	Study theme(s)	Study methods
Abou-Hatab et al (2001) UWCM Geriatric Dept	Ageing and biotransformation of drugs	Case control
Breeze Jones et al (2004)	Quality of life	MRC database 23 GP practices in UK subjects assessed
Bayer & Tadd (2000)	Exclusion form studies to ethics committees	Review of all studies submitted to Bro Taff research ethics committee Descriptive study
Coupland & Coupland (1993)	ageism	Qualitative data geriatric outpatients interviews
Hubbard & Lyons et al (2003) Hubbard & O'Mahony et al (2004) UWCM Cardiff Geriatric dept and Epidemiology UWCM Clinical School Swansea	Absence of ageism in critical care Implications for multi-disciplinary care	South Wales study 5 hospitals 1 yr study demographic clinical and physiological data collated by managers In patient survey using Bathel Index score and questionnaire survey
Tadd et al (2002)	Dignity rhetoric or reality	Reviews
Victor et al (1991)	How to care	Qualitative study comparison of views of pts and staff
Wenger (2001)	Ageing	Longitudinal study of ageing rural Wales qualitative and quantitative data interviews
Windle & Woods (2004)	wellbeing	Random sample structured interviews quantitative and qualitative data
Woolhead & Calnan et al (2004) Some authors from UWCM Geriatric dept	dignity	Wales and South West England Focus group study

Theme. Arthritis

First Author(s) dates of papers/series of papers institution or organisation	Study theme(s)	Study methods
Khan & Williams (1992)	Medication pain management	Multi-centre double blind parallel group study case reviews re drug management
Plant & Borg (1997)	Pain management and radiographic patterns	Prospective open study case reviews
Swift & Rhodes (1992)	Medication pain management	General practice based Randomly selected clinical trial
Vetter & Charny et al (1990)	Prevalence and symptoms	Self completion patient questionnaire community profile

Theme. Cancer

First Author(s) dates of papers/series of papers institution or organisation	Study theme(s)	Study methods
Bandyopadhyay O'Mahony et al (2002) UWCM Geriatric Dept	Smoking habits	Wales wide Questionnaire survey to Age Concern volunteers
Colbert (1994)	Delays in presentation of breast cancer	N Wales and Wirral study retrospective survey case notes
Edwards & Jones (2000) UWCM Geriatric Dept	Determine breast screening uptake	3 family health service authorities supplied random sample of women interviews in the home questionnaire and assessment tools anxiety and depression scales
Harper & Goddard et al (1992)	prostate	Immunological study dataset examined
McLaren & Morrey et al (1997)	Radiological study bladder	Retrospective study of cohort group
Townsend (1998)	HRT prescribing and costs	Study of data UK wide and analysed re therapy and cost
West (1992)	Smoking habits	Interrogating British Doctor smoking data

Theme. Cardiovascular diseases including Stroke

First Author(s) dates of papers/series of papers institution or organisation	Study theme(s)	Study methods
Absi & Satterthwaite et al (1997)	Dental patients with medically compromised conditions	Prospective study of dental patients referred to hospital
Adamson & Lawlor et al (2004)	Looking at association of Chronic diseases, locomotor activity, social participation limitation in women	British Heart and Health Study cross sectional survey participants - questionnaire and interviews , physical exam and blood sampling
Allen & Gritffiths(2002) & (2004) UW Nursing Health and Social Care, School of Midwifery and Nursing Studies, Cardiff and Swansea	Pt need and equality of service re stroke rehabilitation	Ethnographic case studies
Asghar Adhiyaman et al (2002) UWCM Geriatric dept	Chronic subdural haematoma	Retrospective study 1996-99 3 district hospitals N Wales cases reviewed
Bandyopadhyay & Byer (2001) UWCM Geriatric dept	Age and gender bias in drug trials	Review literature and randomised drug control trial
Botts & Elwood & Moons (2002) UWCM Geriatric dept	Associated risk factors	EUROSTROKE cohorts Cardiff National Stroke unit involved in case control study
Corr & Bayer (1995) UWCM Geriatric dept	Occupational therapy after discharge	Randomized control trial using assessment tools including Quality of Life indicators
Dewar & Sykes (1992)	Blood pressure measurement & hemiplegia	Unselected patients study
Elwood, Beswick, Pickering Fallon et al (2001/02) May&McCarron (2002) Greenwood & McCarron (2001) UWCM Geriatric Dept	manifestations of vascular disease and cognitive function psychology Incidence and aetiology	Caerphilly Cohort study of Heart disease Stroke and Cognitive Design population based longitudinal studies questionnaires, physical and clinical measurements General Health Questionnaires Caerphilly and Speedwell Collaborative studies Population based longitudinal study

Theme. Cardiovascular diseases including Stroke (cont)

First Author(s) dates of papers/series of papers institution or organisation	Study theme(s)	Study methods
Gupta & Thomas (2002) UWCM Geriatric Dept Cardiff	Assessing pt knowledge & risk factors	Llandough Hospital questionnaire based interviews
Hasan & Jackson (1995) Hasan & Meara (1995) UWCM Geriatric Dept	Drug therapy (aspirin) Diagnostic coding & service planning	Case control biological study Glan Clwyd Hosp Rhyl interrogating computerised clinical information system re quality of diagnostic coding
Ho & O'Mahony (2004) UWCM Geriatric Dept	Preventative study	2 stage community based random sampling Cardiff study
Hobson & Leeds et al (2000) Hobson & Leeds et al (2003)	Quality of life Neuro-physiological testing	Case studies Case control study
Janssen & Mackenbach et al (2004)	Mortality trends	Mortality database interrogated by cause specific
Johnston & Pollard (2004)	Post stroke assessment of functional limitations & survival	3 yr Longitudinal study case studies interviews clinical examination
Jones & McEwan et al (2005) UWCM Cardiff	Anticoagulation levels	Retrospective study electronic database patient record review data part of British population based study
Lawlor & Bedford et al (2003)	Geographical, socio-economic variation and women	British women's heart and health study baseline survey through GPs. Pt self completed questionnaire nurse interview and physical exam
Leeds & Meara et al (2001) Leeds & Meara et al (2004) Leeds & Meara et al (2004) UW Bangor and Dementia Services Development Centre	Cognitive and neuropsychological assessments depression discharge planning to care homes	Assessed a sample group of pts using CAMCOG R Sample group pts assessed using Stroke Aphasia Depression questionnaire Uncontrolled naturalistic study of stroke survivors 6mth study

Theme. Cardiovascular diseases including Stroke (cont)

First Author(s) dates of papers/series of papers institution or organisation	Study theme(s)	Study methods
Maddison & Farewell et al (2002)	Organ damage	Longitudinal 5yr study case control
Osman & Gibbons (2001)	Angioscopy	Non-randomised retrospective study to assess value of angioscopy
Obuobie K & Smith et al (2002)	Hypothyroidism Endocrine study	Case control
O'Mahony & Sim et al (2003) UWCM	Prevalence of diastolic heart failure	Cross-sectional population based study 2 stage random sampling interviews using assessment tools QOL Anxiety and depression scores
Rinaldi & Linka et al (1998) UWCM Cardiology dept and UK	Ischemia and drug effects on exercise	Randomized double blind cross over study
Sim & Ho et al UWCM Geriatric Dept	Dopplers and heart checks	Random sample community clinical assessment and echocardiogram
Smith & Page et al (2000)	Hyperparathyroidism endocrinology	Case control study
Trust Study Group (1990)	Drug trial	Randomised double blind placebo trial in acute stroke
Weedle & Poston et al (1990)	Drug prescribing	UK study. Epidemiological study prescribing patterns in residential homes

Theme Dementia including Alzheimer's Disease

First Author(s) dates of papers/series of papers institution or organisation	Study theme(s)	Study methods
Burholt & Wenger et al (1997) UW Bangor Centre for Social Policy and Research and Development	Levels of competence activities of daily living	Review of data from studies conducted in N Wales and Liverpool
Clare (2004) UW Bangor School of Psychology	Awareness in early stage Alzheimer's disease	Literature review of methods and evidence
Giblin & Clare et al (2004) UW Bangor School of Psychology	Life experiences and attitudes to ageing late onset psychosis	UK case-control study cross-sectional design
Deb & Braganza (1999) UWCM Cardiff Psychological Medicine	Diagnosing dementia with pts with Down's syndrome	South Wales 5 health districts case-control study semi-structured interviews using questionnaire and physical and biological investigations
Hancock & Reynolds et al (2003)	Needs assessment	World-wide study interviews using Camberwell Assessment of Need for the Elderly (CANE)
Harland & Warner (1997)	Delusions of pregnancy	Case study reports
Harper & Dickson (1995) Morrison Hospital Swansea	Burns	South Wales 45 month retrospective analysis admissions to Welsh Regional Burns and Plastic Unit
Keady & Woods (2004) Bangor DSDC UWBangor	Early intervention	Case study from Dementia Action Research & Education Project 15 month primary care intervention study
Phillips & Williams (1997)	Impact of cognitive and affective disturbances	Subjects underwent series of memory tests and assessments
Powell & Hale et al (1995)	Communication breakdown	Case control study interviews
Rees & Bayer (1995)	Early stages dementia and driving	Survey in Memory Clinics - interviews
Scholey & Woods Liverpool University & UW Bangor School of Psychology	Cognitive interventions	Case studies

Theme Dementia including Alzheimers Disease (cont)

First Author(s) dates of papers/series of papers institution or organisation	Study theme(s)	Study methods
Singhrao (1996)	Immunological study	Post mortem study
Spector & Thorgrimsen (2003)	Cognitive stimulation therapy	Single -blind multi-centre randomised controlled trial UK wide using Dementia Services Development Centre Bangor as one centre
Spector & Orrell (2000)	Reality orientation and reminiscence therapy	2 Cochrane Database Systematic reviews
Tales & Muir (2002) UWCM Geriatric Dept	Phasic visual alertness	Age-matched case-control study
Wenger (1994) Wenger & Scott (2002)	Review of needs in the community Experience of caring	Interviews sufferers and carers Gwynedd Dementia Study interviews qualitative and quantitative study
White & Scott (2002)	Mental state assessment	Mini mental state examination assessments in all annual checks for patients in general practice review of results
Williams & Rees (1997)	Quality of life	Mapping of dementia care in Wales baseline evaluations of units from staff
Windle & Woods (2004)	well-being assessment	Random sampling and home interviews using Life Satisfaction Index and psychological mediator assessment tools

Theme. Depression

First Author(s) dates of papers/series of papers institution or organisation	Study theme(s)	Study methods
Atiea & Moses et al (1995)	Neuropsychological function & diabetes	3 groups (one group control) IQ assessment tools
Cattell & Jolley (1995)	suicide	Review case notes
Cole & Vaughan (2005) Trinity College study Carmarthen	Parkinson's disease	5 PD pts attended movement disorder clinic and assessed using quality of life indicators and measures outcomes evaluated
Corr & Bayer (1995) UWCM Geriatric dept	Occupational therapy after discharge	Randomized control trial using assessment tools including Quality of Life indicators
Donnelly (1992)	Drug therapy	Audit case notes to id good practice in prescribing
Gammon (1998) Swansea Institute higher Ed Humanities and Ed & Health Care	Hospitalisation	Quantitative study using assessment tools on subjects Hospital Anxiety and Depression scales, the health illness questionnaire
Giblin & Clare et al (2004)	Late onset psychosis and attitudes to ageing	Case control study
Ho & Jones (1999) UWCM Geriatric dept	Mobidity and asthma and changes in health services	South Wales cross sectional study population based randomized sample data analysed
Ho & O'Mahony (2001) UWCM Geriatric Dept	dyspnoea	South Wales Cross sectional population based study randomly selected subjects from GP lists interviewed using MRC dyspnoea questionnaire
Hobson et al (1999-2003) UWCM Geriatric Medicine dept Glan Clwyd Hosp Rhyl N Wales	Parkinsons's disease and stroke	ID pts from GP practices databases in N Wales analysed data from questionnaire survey using self-reporting and activities of daily living assessment tools (PDQL)
Johnson et al (1992)	Drug treatment and stroke pts	Reviewed case notes re drug regimes
Leeds & Meara (2001) Leeds & Meara (2004) UW Bangor and Dementia Services Development Centre	Cognitive & neuro-psychological assessments Stroke pts to care home	Assessed a sample group of pts using CAMCOG R Uncontrolled naturalistic study stroke survivors 6 month study

Theme. Depression (cont)

First Author(s) dates of papers/series of papers institution or organisation	Study theme(s)	Study methods
Lewis & Stephens (1994)	Tinnitus & suicide	Retrospective case studies on 28 suicides
May&McCarron (2002) UWCM Geriatric Dept	manifestations of vascular disease and cognitive function psychology	Caerphilly Cohort study of Heart disease Stroke and Cognitive Design population based longitudinal studies questionnaires, physical and clinical measurements General Health Questionnaires
Orrell & Scurfield et al 2000)	Management of depression	GP questionnaire survey England and Wales
Osborn et al (2002) &(2003) UK Centres including UWCM Geriatric dept	Management of and factors associated with	MRC UK study pts interviewed using Geriatric Depression Scale and single question in community
Phillips S & Williams (1997) UW Bangor School of Psychology	Cognitive impairment	22 pts assessed using geriatric depressions scales and mini mental state assessment tools
Scholey & Woods (2003) UW Bangor	Cognitive therapy interventions and dementia and depression	Case studies

Theme. Diabetes

First Author(s) dates of papers/series of papers institution or organisation	Study theme(s)	Study methods
Atiea & Moses et al (1995)	Neuropsychological function	3 groups (one group control) IQ assessment tools
Bots and Elwood et al (2002) UWCM Department of Geriatric Medicine Cardiff	Incidents and risk factors of stroke	Epidemiological Nested case-control study EUROSTROKE cohort group Cardiff blood samples
Ho et al (2001) UWCM Department of Geriatric Medicine Cardiff	Dyspnoea and quality of life	South Wales Study Cross sectional population based study postal questionnaire to patients via GP practice lists and semi-structured home interviewing using quality of life assessment tools
Morgan et al (2000) UWCM Heath Hospital Cardiff UWCM Department General Practice Llanederyn UWCM Diabetic Research Unit	Prevalence of multiple diabetic conditions	UK population based study data extracted from GP diabetes audit and patient index database
Mulkerrin et al (1992)	GTT as a form of diagnosis for the elderly	65 patients participated Glucose tolerance testing trial
Murphy et al (2004) UWCM, Optometry Cardiff	Age and corneal sensitivity	Case-control study diabetic and non-diabetic 3 age ranges
Sinclair et al (1991-2001) UWCM Department of Geriatric Medicine Cardiff	Numerous papers on quality and quantity of care in the community including residential and nursing homes including disease variables, cognitive dysfunction tests and vitamin C metabolism	South Wales postal questionnaire survey & semi-structured interviews including medical examinations & activities of daily living and cognitive performance assessment tools Nth Clwyd, Powys and South Glamorgan community based case-control study using quality of life scores and visual acuity measures <ul style="list-style-type: none"> • AWARE All Wales Research into Elderly Diabetes Study case-control study of subjects registered with participating GPs • Case-control vitamin C studies

Theme. Falls, Fractures and Osteoporosis

First Author(s) dates of papers/series of papers institution or organisation	Study theme(s)	Study methods
Baker & Kadambande Dept Trauma and Orthopaedics Royal Gwent Hospital Newport	fractures	Retrospective review case notes and Xrays
Brennan et al (2003) UWCM Welsh combined centres for Public Health & Geriatric Dept Bone Research Unit	Risk factors associated with fractures	Cardiff population based survey subjects id through All Wales Injury surveillance System
Byrne & Evans et al (1997)	Predisposing factors - vasectomy?	Immunological and histological changes in case control study
Clayton Milkulec et al ((2004)	Clinical relationship between otosclerosis and osteoporosis	Retrospective study reviewing medical case notes
Clements& Motley et al (2002) Clements& Compston et al (2003) UWCM Cardiff	HRT & inflammatory bowel disease & osteoporosis	4yr and 2 yr prospective longitudinal study review of case notes and bone mineral density
Compston & Vedi et al (1991) Cardiff Royal Infirmary	Prevalence of Osteomalacia	Biopsy samples taken from pts quantitatively assessed
Govier & Kingdom (2000) Wales NHS Direct& Swansea NHS Trust	Cot sides and accidents	Literature review and Murryston hospital audit
Haboubi & Hudson (1991) UWCM Department of the elderly Wrexham Clwyd	Causes of Colles fracture and associated fractures & hearing and eyesight	Case control study examination of patients
Johanson et al (1997) Johansen & Evans et al (1998)	Fractures and hospital admissions	Cardiff based Review of pt records Review x2 studies in S Wales (Brennan 2003 & Johansen 1997)
Wareham & Johansen et al (2003) Jones & Johansen et al (2004) UWCM Welsh combined centres for Public Health & Geriatric Dept BRU	Seasonal /Lifestyle factors associated with fractures	All Wales Injury Surveillance System Wales wide Population based study using All Wales Injury Surveillance System database

Theme. Falls, Fractures and Osteoporosis

First Author(s) dates of papers/series of papers institution or organisation	Study theme(s)	Study methods
Stone (1993) & Johanson & Stone (1997) Davies & Stone (1996) Sim & Stone et al (2004) UWCM Bone research unit	Merits of treatments Local management guidelines Cost effectiveness of treatment monitoring of referrals	Case studies and monitoring of treatment longitudinal projects Review of service Cases reviewed at GP referral clinic re bone densitometry service
Kenkre et al (2002) School of care studies University Glamorgan Pontypridd	Clinical and economic evaluation re ed training packages to staff re prevention accidents	Longitudinal study West Midlands Prospective randomized practice controlled intervention study Primary Health Care Teams
Khan & Williams (1992)	Drug trial degenerative joint disease	Double blind parallel group drug study
Lewis (1998)	Nutrition and development of pressure sores	Case studies # pts Waterlow assessment tool
Lewis & Smith (2001)	Bone health consequences of long term corticosteroids	Audit of case notes re drug therapy and regimes
Lyons et al (2003)	Reduction of injuries	Systematic review
O'Mahoney & Beynon (1994)	Aspirin use pts undergoing surgery	Review of patient case notes
Pemberton & Evans et al (1994)	Use of carbon fibre plate in #	Review of patient case notes measured outcomes of procedure
Phillips & Moore (1998) UW Swansea School of Health Sciences	Prevention of # and economics	Review of literature including clinical trial in light of costs, effectiveness of interventions
Rogers et al (2003) Newport Hospital	Monitoring Hip prosthesis operations	Newport 10yr longitudinal study review of cases
Rosen & Donahue et al (1992)	Calcium absorption & hyperparathyroidism	Case control endocrine and metabolism study
Vetter & Lewis et al (1992)	health visitors intervention to prevent #	Randomised case control study
Quantock (1997)	Evaluation of service	Focus group of women
Watts (1999) UW Bangor	Reduce fear of falling	(np) cognitive therapy intervention study

Theme. Mental Health

First Author(s) dates of papers/series of papers institution or organisation	Study theme(s)	Study methods
Burholt & Wenger (1997) UW Bangor Centre for Social Policy and Research and Development	Community services	Comparative study case control sufferers and non-sufferers rural urban setting using data from N Wales and Liverpool studies
Byers et al (2004)	Long-term use of hypnotic drugs	Interviews with pts and providers in general practice
Donnelly (1992)	Drug prescribing practice in manic depressive/ neurotic depression	Audit case notes for drug prescribing
Hancock et al (2003) Woods in author list DSDC UWBangor	Measure ratings of need across UK	Interviews patients, mental health services, carers and staff using CANE assessment tool (Camberwell assessment of need)
Jones (1992)	Quality of life assessments	Interviews elderly and carers using quality of life assessment tools
Keady & Woods (2004) DSDC UWBangor	Early intervention	Case study from Dementia Action Research and Education Project 15 month primary care intervention study
Kendrick (1993)	Distribution of mental health professionals	English and Welsh telephone studies of GPs
Pryce (1991)	Review of long stay patients	South Glamorgan review using MRC needs for care assessment

Theme. Parkinson's Disease

First Author(s) dates of papers/series of papers institution or organisation	Study theme(s)	Study methods
Byer (1992) in book Rose (ed)	Problems of clinical trials	Chapter 'PD and the problems of clinical trials'
Cole & Vaughan (2005) Trinity College study Carmarthen	Depression	5 PD pts attended movement disorder clinic and assessed using quality of life indicators and measures outcomes evaluated
Hindle & Meara et al (1998) UWCM Geriatric Medicine dept	Drug trial	Open label study
Hobson & Meara et al 1991-2004 Numerous papers using database UWCM Geriatric Medicine dept Glan Clwyd Hosp Rhyl N Wales	Impact of PD Levels of service provision Drug Trial	ID PD pts from GP practices databases in N Wales analysed data from questionnaire survey using self-reporting and activities of daily living assessment tools (PDQL) Survey of GPs perceptions Also reviews Open uncontrolled study
Jackson et al (1995) UWBangor Psychology dept	Learning deficits	Case control study involved in psychology tests results analysed
Muzaini et al (2004) UWCM Medical Genetics dept Cardiff	Causation of late onset cerebella ataxia	Population based study PD pts ID by using records from Bro Taf Health Authority
Tulloch et al (1992)	Drug trial	Case control study drug and placebo

Theme. Respiratory/pulmonary/asthmatic conditions

First Author(s) dates of papers/series of papers institution or organisation	Study theme(s)	Study methods
Abou-Hatab et al (2001) UWCM Geriatric dept	Outcomes pneumonia	Case control
Alemayehu & Molloy (1991)	Physicians decisions on caring for chronically ill	Self administered questionnaire containing 3 case vignettes
Ho & Jones (1999) UWCM Geriatric dept	Mobidity and asthma and changes in health services	South Wales cross sectional study population based randomized sample data analysed
Ho & O'Mahony (2001) UWCM Geriatric Dept	Prevalence of dyspnoea	South Wales Cross sectional population based study randomly selected subjects from GP lists interviewed using MRC dyspnoea questionnaire
Ho & O'Mahony et al (2004) UWCM Geriatric Dept & Epidemiology Welsh Cancer Surveillance Unit	Inhaler techniques	Cross section population based study subjects interviewed and assessed
James & Williams et al (1998)	Pre-discharge ward for acute pts	Data analysed after one yr of a ward operating
Jones et al (2002) UWCM Cardiff	Steroid effect on bone metabolism	Cochrane database Systematic review
Papagiannis & Richards et al (1995)	Outpatient clinic and patient satisfaction	Survey of unselected pts attending OPD monitored pt satisfaction on range of issues

Theme. Visual and hearing impairment

First Author(s) dates of papers/series of papers institution or organisation	Study theme(s)	Study methods
Davies & John et al (1990 & 1991)	Hearing aid acceptance	Case studies - Questionnaire study intermittent hearing tests
Davis (1992)	Hearing levels measured	2yr study Cardiff GP register pts id screened & hearing tests
Edwards & Jones (1998) UWCM Geriatric Dept Llandough	Ownership of hearing aids spectacles & disability aids	Random sample patients 3 health authorities interviews with patients
Gianopoulos & Stephens (2001 & 2002)	Long term use of hearing aids	10 yr study follow-up of subjects with hearing aids Cardiff life effects questionnaire
Goyal & Shanker (2004)	Cataract referrals and geographical variations	3 Welsh hospitals prospective questionnaire project
Johansen & White (2003) UWCM Geriatric Dept	Screening for visual impairment	Cardiff Acuity test on patients and results analysed
Long & Holden et al (1991)	Opportunistic visual screening	Random screening of patients by ophthalmologist
Lormore & Stephens (1994)	Hearing impairment and associated difficulties	Open-ended questionnaire study
Robinson & Seddon (2003)	Management of care sensory impairment	Qualitative research in depth interviews pts and professionals
Stephens (2002)	Hearing aids & improvement	Questionnaire survey using assessment tools IOI HA and COSI
Stephens & Jones et al (2000) Stephens & Kerr (2003) Stephens & Vetter (2003) Wilson & Stephens (2003)	Audiological rehabilitation And factors associated with Lifestyle issues	Open-ended structured questionnaires
Stephens & Callaghan et al (1990) Stephens & Meredith (1990/1991)	Hearing effectiveness & rehabilitation	GP practice databases Afan Valley and West Glamorgan pts selected and questionnaire survey to pts Open ended questionnaire
Tales & Muir et al (2004)	Visual changes & Alzheimer's /dementia	Case control study clinical assessments
Wynne & Yelland (1993)	Age, frailty , medication	Pharmacological study of case notes

Theme. Hospital Discharge

First Author(s) dates of papers/series of papers institution or organisation	Study theme(s)	Study methods
1995	review	Not known Wales report
Corr & Bayer (1992) & (1995)	Occupational therapy	Randomised control trial
Jones & Cranton (1993)	after care	Not know report to DOH 1993
Leeds & Meara (2004) UW Bangor and Dementia Services Development Centre	Stroke pts to care home	Uncontrolled naturalistic study stroke survivors 6 mth study
Nolan & Grant (1992)	respite	Evaluation of hospital rota bed system
Payne & Kerr (2002)	Communication of information	Systematic review qualitative and quantitative studies
Robinson (1994) Bangor University	planning	Review pts records and staff perceptions
Taraborrelli et al (1997)	review	Literature review with case studies
Underwood & Beck (2002)		South Wales Llandough hospital retrospective audit of case notes and follow up questionnaire
Williams (2001) UW Bangor	Review of services	(np) Constructivist enquiry

Theme. Intermediate care

First Author(s) dates of papers/series of papers institution or organisation	Study theme(s)	Study methods
Ackermann et al (2003)	Review of service	Pembrokeshire hospital 2yr review cost and service value

Theme. Primary Care

First Author(s) dates of papers/series of papers institution or organisation	Study theme(s)	Study methods
Kenkre & Allen et al (2002)	Clinical and economic evaluation of breaking bones	Prospective randomised controlled intervention study of accidents in primary care Longitudinal study 19 West Midlands GP practices
Absi et al (1997)	Primary care referrals to secondary care	Prospective study of dental patients referrals to hospital and outcomes
Crosby et al (2000)	Demands and costs of community and medical/nursing services	Lampeter study data collected from series interviews on N Wales Coast
Jones et al (1997)	practice nurse role	Random sample elderly pts interviewed re use of service in 3 district health authorities
Orrell & Scurfield et al 2000)	Management of depression	GP questionnaire survey England and Wales
White and Scott et al (2002)	Detection of dementia	GP practices N Wales participated in annual health screening exercise using Mini Mental state examination to ID pts for further study by researchers using assessment tools

Appendix 4. NURSING RESEARCH.

Theme: Health Promotion and Screening

Author(s) dates of papers/series of papers institution or organisation	Study aims	Study methods
Vetter, N.J. & Ford, D. (1990) Dept of Epidemiology and Community Medicine UWCM	Smoking prevention among people aged over 60	RCT
Vetter, N.J. Lewis, P.A. & Ford, D. (1992) UWCM	Prevention of fractures	RCT - to assess whether intervention by a HV could effect incidence of fractures
Pathy, M.S.; Bayer, A.; Harding, K.; Dibble, A. (1992) UWCM	Screening of older people	RCT postal survey
Willis, S (1998) Unknown	Falls in elderly people - is the risk suitably assessed?	Survey of primary health care professionals in England and Wales.
Lewis, B.K (1998) Faculty of Community Health Sciences, University of Wales Institute Cardiff	Nutrient intake and the risk of pressure sore development in older people	Comparative study of the nutrient intake of 30 patients aged 75+ admitted with a fractured femur or for hip replacement surgery and the development of pressure sores.

Theme: Delivery and Quality of Nursing Care

Author(s) dates of papers/series of papers institution or organisation	Study aims	Study methods
MacGuire, J.M & Botting, D.A. (1990) RCN School of Nursing Studies UWCM	Primary nursing in care of older people (nursing perceptions)	Interviews
MacGuire, J.M. (1991) Nursing Research Unit UWCM	Quality of care for older people after introduction of primary nursing	Senior Monitor measurement tool
Nolan, M. & Grant, G. (1993) Unknown	Quality of nursing care in continuing care environments	Evaluation of respite care scheme
Jones, D. & Lester, C. (1994) Cardiff Royal Infirmary	Patients' & carers' opinions of hospital care	Postal study
Nolan. M.; Grant, G & Nolan, J. (1995) Unknown	Quality of care in continuing care homes	Not stated
Owens, D.J.& Batchelor, C. (1996) SOCAS University of Wales, Cardiff	Elderly patients' experience of district nursing services	Survey
Jones D., Edwards J. & Lester C. (1997) Unknown	Changing role of practice nursing in the primary care of elderly people	Survey of 1500 people aged 65 years and over, interviewed in 1990 & 1992
Jones D., West R. & Lester C. (1997) Dept of Geriatric Medicine, UWCM	Evaluation of changes in primary health care availability and provision from the patients' perspective	Same study as above
Williams J. & Rees J. (1997) Cefn Coed Hospital, Swansea	The use of dementia care mapping as a method of evaluating care received by patients with dementia	Baseline evaluation on EMI wards containing dementia patients
Gammon J. (1998) Swansea Institute of Higher Education	Analysis of the stressful effects of hospitalisation & source isolation, coping & psychological constructs	Quasi-experimental (post test only control group design). Sample size 40 patients
Keady., J., Woods B. Hahn S. & Hill J. (2004) University of Wales Bangor and Northumbria University	Community mental health nursing and early intervention in dementia	Single case history - from 15 months primary care intervention study N Wales in 2000. CMHN and Psychiatric social workers interviews with 27 older people with dementia and their families

Appendix 5. RESEARCH ON THE SOCIAL CARE OF OLDER PEOPLE.

First Author(s) dates of papers/series of papers institution or organisation	Study theme(s)	Study methods/purpose
Burholt, V., Wenger, G. C. and Scott, A. (1997), Health and Social Care in the Community, 5(6), 384-397. CSPRD Bangor	'Dementia, disability and contact with formal services: a comparison of dementia sufferers and non-sufferers in rural and urban settings.'	This paper is based on data from the Bangor Dementia Studies 1989 -1991 (see below). Comparison of those identified as suffering from cognitive brain disorders with other older people identified as being cognitively unimpaired and looks at levels of competence with activities of daily living and the subsequent levels of contact with a range of health and social services personnel and other community workers.
Burholt, V. (1998) Health Care in Later Life, 3(1), 15-33. CSPRD, Bangor	'Pathways into residential care: Service use, help and health prior to admission.'	This paper is based on data from the Bangor Longitudinal Study of Ageing BLSA (see below) and compares those who between 1979 and 1995 moved into residential care with those who were living in the community in 1995.
Burholt, V. and Wenger, G. C. (1999) Ageing and Society, 18(5), 537-562 CSPRD Bangor	'Differences over time in older people's relationships with children and siblings.'	Based on data from the (BLSA). Cross-sectional study of eight different rural settlement types, the sample including one older person from each household containing at least one person aged 65+ in the communities with a population of less than 1000, and from 50% of such households in the communities with a larger population.
Burholt, V. (1999) Environment and Planning A, 31(11), 2071-2088. CSPRD Bangor	'Testing a behavioural and a developmental model of migration: A re-evaluation of migration patterns among the elderly and why older people move.'	Data from the BLSA (see below) to test the proposition that two of the typologies that have been used to categorise older peoples moves are not supported by empirical evidence from the BLSA. The two aforementioned models are rejected in favour of a five-class model in which moves are classified as: 'long-distance amenity'; 'wide choice local amenity'; 'narrow choice local amenity'; 'low levels of assistance' and 'high levels of assistance'.

First Author(s) dates of papers/series of papers institution or organisation	Study theme(s)	Study methods/purpose
Burholt, V. and Windle, G. (2001) Centre for Social Policy Research and Development, University of Wales, Bangor	'Literature Review for the Strategy for Older People in Wales: Health and Social Care for Older People'	Summaries of issues raised in research and academic reports obtained by contacting key authors in the areas of health & social care in Wales and searching Age Concern Policy documents.
Burholt, V. and Windle, G., 2003, CSPRD, Institute of Medical and Social Care Research , Bangor	'Housing for an Ageing Population: Planning Implications. (HAPPI) Final Report.'	Qualitative and quantitative data collected for 423 people aged 70 and over, and 51 people aged between 50 and 60 living in a diverse range of areas in Gwynedd. The report describes the project methodology including sampling, interviewing and data analyses. The results and discussion are presented in six sections. Only key issues are identified. For a more detailed explanation of statistical tests and results, readers are directed to the appropriate papers for each section.
Burholt, V.,* Wenger. G. C.,* Lamura, G., Paulsson, C., van der Meer, M., Ferring, D., Glück, J. (2003) *Centre for Social Policy Research and Development, University of Wales, Bangor.	'European Study of Adult Well-Being: Comparative Report on Social Support Resources (for the European Commission).'	"Ageing Well: A European Study of Adult Well-Being" (ESAW) 2002-2003 in 6 countries (Austria, Italy, Luxemburg, The Netherlands, Sweden & UK - rural and urban samples from Wales). Individual interviews structured questionnaire to national samples of 1,800-2,500 non institutionalised subjects in each country. Findings from the ESAW on informal sources of social support available to older Europeans. Results shows there are both differences and similarities in social support between the six European countries in the study.
Burholt, V. and Windle, G. (2003) Professional Social Work, Dec 2003, 18-19. CSPRD, Bangor	'A matter of preference.'	Based on data for the HAPPI study (see above) and using both qualitative and quantitative data, this paper aims to identify older peoples preferences for supported living environments. The findings show that more respondents rated privacy and physical space and control of life as important, compared with the other domains.

First Author(s) dates of papers/series of papers institution or organisation	Study theme(s)	Study methods/purpose
Burholt, V. and Windle, G. (2005) Centre for Social Policy Research and Development, University of Wales, Bangor.	'The material resources and well-being of older people. Report to the Joseph Rowntree Foundation'	Using range of British data from the European Study of Adult Well-Being to construct measures of material resources and financial satisfaction. The new measures are used to: Compare the material resources and financial satisfaction of different groups of older people Identify the key determinants of poverty in old age
Burholt, V. and Windle, G. (2005, in press) Energy Policy. CSPRD, Bangor	'Keeping warm? Self-reported housing, and home energy efficiency factors impacting on older people heating homes in North Wales'	Based on data from the HAPPI study (see above), the paper examines the relationships between fuel poverty, feeling cold in one's home and a range of self-reported housing and home energy efficiency items.
Burholt V. (2005, in press) Environment & Planning A. CSPRD, Bangor	'"Adref": Theoretical contexts of attachment to place for mature and older people in rural North Wales.'	This paper examines older people's attachment to place in rural Wales. The sample included 406 people aged 70+ living in diverse rural communities of North Wales. Respondents were asked to divulge the main reason for wanting to stay in their present community. Attachment to place is explored with reference to different theoretical perspectives.
Burholt, V. and Naylor, D. (2005, in press) European Journal of Ageing. CSPRD, Bangor	'The relationship between rural community type and attachment to place for older people living in North Wales, UK.'	This paper explores the relationship between rural community type and attachment to place for 387 older people aged 70 and over in six rural settlements in North Wales.
Caldock, K. & Wenger, G. C. (1992) Reviews in Clinical Gerontology, 3(1), 85-96. Bangor	'Sociological Aspects of Health, Dependency and Disability'	Uses data from the BLSA (see below)
Ferring, D., Balducci, C., Burholt, V., Wenger, C., Thissen, F., Weber, G. and Hallberg, I. (2004) European Journal of Ageing, 1(1), 15-25.	'Life satisfaction of older people in six European countries: finding from the European Study on Adult Well-Being.'	A representative population of aged 50-90 living independently (not hospitalised) was selected in each participating country. 1854 to 2417 (includes rural & urban samples from Wales). The total European sample was comprised of 12,478 respondents.

First Author(s) dates of papers/series of papers institution or organisation	Study theme(s)	Study methods/purpose
Jerome, D. and Wenger, C. (1999) Ageing and Society, 19(1), 661-676. CSPRD, Bangor	'Stability and change in late-life friendships.'	Draws on data from the BLSA and investigates friendship networks and relationships. Identifies four types of response regarding friendship levels: contented, dissatisfied, needy and resigned. Uses qualitative data to give examples of each category.
Parry-Jones, B., Robinson, C. A., Soulsby, J. & Lowies, P. (2000 & 2001) Funded by WORD The Centre for Social Policy Research and Development, Institute of Medical and Social Care Research, UWB	The Monitoring and Evaluation of Domiciliary Social Care in Wales: Parts 1 & 2.	Reviewed the current policies and practices to monitor and evaluate domiciliary social care in Wales in light of policy changes brought about by the July 2000 Care Standards Bill. Using mainly qualitative methods of data collection and analysis, worked collaboratively with two unitary authority social services departments to develop further models and methods of monitoring and evaluation.
Parry-Jones, B. (1998) Centre for Social Policy Research and Development, University of Wales, Bangor	Assessment & Care Management in North Wales: The Experiences of Health & Social Care Practitioners Adapting to the Community Care Reforms.	Interviews of 14 social workers and 15 community nurses and 8 case studies.
Perry, J. and Burholt, V. (2005) Report to the Health Promotion Division at the Welsh Assembly Government Centre for Social Policy Research and Development, University of Wales, Bangor	Promoting the Health of Older People in Respect of Alcohol Use	A review of the literature to assess what evidence is currently available in Wales and alcohol issues, identifying emerging themes and areas of good practice, identifying gaps for further research.
Robinson, C., Seddon, D., Hill, J., Parsonage, R., Soulsby, J., Wenger, G.C., Webb, V. and White, N. (2001) Final Report to the WORD CSPRD, Bangor	Assessment and Care Management: The needs of older people with a sensory impairment.	Qualitative research methods, a review of strategic arrangements within Unitary Authorities social services depts, highlights elements of good practice and provides guidance to planners, commissioners and providers of services regarding older people with a) visual impairment b) hearing impairment and c) dual impairment

First Author(s) dates of papers/series of papers institution or organisation	Study theme(s)	Study methods/purpose
Robinson, C. Seddon, D. and Hill, J. (2002), Signpost, 7, (1): 17-19. CSPRD, Bangor	'Community Reablement: Perspectives of Older People and their Carers'	Covers different methods of delivering social rehabilitation outside the hospital system such as rapid response, domiciliary reablement and intermediate care. Addresses the perspectives of older people and their carers of a Community-based Reablement Scheme in Wales. Small-scale study in depth interviews with older people & their carers.
Robinson C. A., Seddon, D., Webb, V., Hill, J. and Soulsby, J. (2003, Quality in Ageing, 4 (1): 22-31 CSPRD, Bangor	'Older people with a sensory impairment: The assessment and management of care'	Using qualitative research methods, a review of the strategic arrangements within Unitary Authorities social services departments, investigates practice by non-specialist practitioners, highlights elements of good practice and provides guidance to planners, commissioners and providers of services regarding older people with a) visual impairment b) hearing impairment and c) dual impairment
Scharf, T., Wenger, G.C.,* Thissen, F. and Burholt, V.* 2001, Sozialer Fortschritt 50(9-10), 208-213. * CSPRD, Bangor	'Soziale Integration und Partizipation älterer Menschen in ländlichen Räumen Europas'	Based on the Older People in Europe's Rural Areas (OPERA) research. Interviews 1824 people aged 65 + living in 59 communities regarded as 'typical' by research groups in 5 European countries 1989-1992. Examines social integration of rural older people demonstrates, the need to adopt a differentiated view of ageing in Europe's rural areas.
Seddon, D. and Robinson, C.A. (2001) Journal of Health and Social Care in the Community, 9 (3): 151-158 CSPRD, Institute of Medical and Social Care Research, UWB	'Carers of older people with dementia: assessment of the Carers Act'	Evaluates process and outcomes of assessments carried out under the auspices of the Carers Act regarding carers of elderly people with dementia.
Seddon, D., Jones, K. and Boyle, M. (2002) Quality in Ageing, 3 (3): 16-26 CSPRD, Bangor	'Committed to Caring: carer experiences following the admission of a relative into nursing or residential care'	Focuses on the decision to admit an older person into a nursing or residential care home, the processes involved in implementing this decision and the consequences for family carers.

First Author(s) dates of papers/series of papers institution or organisation	Study theme(s)	Study methods/purpose
Silverstein, M., Burholt, V.,* Wenger, G. C.* and Bengtson, V. L. (1998) Journal of Aging Studies, 12(4), 387-409 CSPRD, Bangor	'Parent-child relations among very old parents in Wales and the United States: A test of modernization theory.'	Contrasts the structure of parent-child relationships of older parents living in Wales, U.K. with those of older parents living in the USA. Comparable measures are assessed from the responses of older parents participating in 3 surveys: BLSA (N=139), USC Longitudinal Study of Generations (N=129), AARP Study of Intergenerational Linkages (N=102).
Wenger, C. (2001-2003) CSPRD, Bangor Funded by WORD	The retention and recruitment of home care workers in Wales	Consultation in Wales with home care workers to gain knowledge about factors that influence retention and recruitment. Dissemination of findings through seminars/workshops to planners and policy makers in Wales.
Wenger, G. C., Burholt, V. and Scott, A. (1998), Health and Place, 4(1), 33-44.	'Dementia and help with household tasks: a comparison of cases and non-cases.'	Using data from the Bangor Dementia Studies (see below), this paper compares those suffering from cognitive brain disorders with those identified as being cognitively unimpaired. Levels of need, and sources of help with a range of domestic and home maintenance tasks are identified.
Wenger, G. C., Scott, A. and Burholt, V. (1999) CSPRD, Bangor.	Final Report to the Wales Office of Research and Development for Health and Social Care. The Bangor Dementia Studies 1989-1999	The study drew a sample of people aged 65 and over for screening from the lists of general medical practitioners. 5222 respondents in Liverpool and 2623 in Gwynedd were interviewed in their own homes. The research describes the informal social support available to people with dementia living at home, changes in support networks accompanying onset of dementia, and the social circumstances of family carers of people with dementia.

First Author(s) dates of papers/series of papers institution or organisation	Study theme(s)	Study methods/purpose
Wenger, G. C., Burholt, V. and Scott, A. (2001) Centre for Social Policy Research and Development, Institute of Medical and Social Care Research, University of Wales, Bangor. ISBN 1 84220 018 9	'The Ageing Process: The BLSA 1979-1999'.	Studied the social ageing process over a period of twenty years in order to highlight the implications for policy and practice and to contribute to the theory of 'family sociology'. A survey of 534 older people aged 65+, the original sample was followed up on a four yearly basis (1979,1983, 1987, 1991, 1995 and 1999) questionnaires were administered and face to face interviews were conducted.
Wenger, G. C. and Burholt, V. (2002) Ageing & Society, 21(5), 567-590. CSPRD, Bangor	'Differences over time in older people's relationships with children, grandchildren, nieces and nephews in rural North Wales'	Based on data from the (BLSA) 1979-1999, this paper examines changes over time in the relationships of older people (aged 65+ in 1979) with their children, grandchildren and siblings. The analysis uses quantitative and qualitative data to discuss changes from 1979-1999 for those respondents who survived in the community to1999.
Wenger, G.C., Scott, A. and Seddon, D. (2002) Journal of Ageing and Mental Health, 6(1): 30-38 The Centre for Social Policy Research and Development, Institute of Medical and Social Care Research, UWB	'The experience of caring for older people with dementia in a rural area: Using services'	Considers carer experiences of assessment and services and how these are viewed in a rural context.
Wenger, G. C. and Burholt, V. (2004) Canadian Journal on Aging, 23(2), 477-93. CSPRD, Bangor	'Changes in levels of social isolation and loneliness among older people in rural Wales - A 20-year longitudinal study.'	Using data from the BLSA (see above), 30 people aged 75+ in 1979 were studied intensively Respondents were assessed as demonstrating low, moderate or high levels of loneliness or isolation. Subsequently, statistical models of loneliness and social isolation were developed.
Wenger, G. C. (1990) Mental Health and the Family, Archives of Public Health (Belgium) 245-69. CSPRD, Bangor	'The impact on the family of chronic mental illness in old age'	Uses data from the Bangor Dementia Studies (see above)

First Author(s) dates of papers/series of papers institution or organisation	Study theme(s)	Study methods/purpose
Wenger, G. C. (1990) Journal of Aging Studies, 4(2), 149-167. CSPRD, Bangor	'The special role of friends and neighbours'	Uses data from the BLSA (see above)
Wenger, G. C., 1990, Ageing and Society, 10(2), 1-23. CSPRD, Bangor	'Elderly carers: the need for appropriate intervention'	Uses data from the BLSA (see above)
Wenger, G. C. (1990) Journal of Aging Studies, 4(4), 375-89. CSPRD, Bangor	'Change and adaptation in informal support networks of elderly people in Wales 1979-87'	Uses data from the BLSA (see above)
Wenger, G. C. (1991) Journal of Cross-cultural Gerontology, 6, 1, 1-6 CSPRD, Bangor	'Longitudinal Studies of Ageing: age as process'	Uses data from the BLSA (see above)
Wenger, G. C. and Shahtahmasebi, S. (1991) Journal of Cross-cultural Gerontology, 6(1), 41-82. CSPRD, Bangor	'Survivors: support network variation and sources of help in rural communities'	Uses data from the BLSA (see above)
Wenger, G. C. (1991) Journal of Aging Studies, 5(1), 147-62. CSPRD, Bangor	'A network typology: from theory to practice'	Uses data from the BLSA (see above)
Wenger, G. C. (1992) Inter Journal of Geriatric Psychiatry, 7, 699-708 CSPRD, Bangor	'Morale in old age: a review of the evidence'	Uses data from the BLSA (see above)
Shahtahmasebi, S., Davies, R.,* & Wenger, G. C.# (1992) The Gerontologist, 32(3), 404-13. * UW, Swansea # CSPRD, Bangor	'A longitudinal analysis of factors related to survival in old age'	Uses data from the BLSA (see above)
Wenger, G. C. (1992) Generations Review, 2(2), 6-8. CSPRD, Bangor	'BLSA'	Uses data from the BLSA (see above)
Wenger, G. C.* & St Leger, F. (1992) Ageing & Society, 12(2), 213-36. *CSPRD, Bangor	'Community Structure and Support Network Variation'	Uses data from the BLSA (see above)
Wenger, G. C. (1993) Journal of Aging Studies, 7(1), 25-40. CSPRD, Bangor	'The formation of social networks: self-help, mutual aid & old people in contemporary Britain'	Uses data from the BLSA (see above)
Grant, G. and Wenger, G. C. (1993) The Irish Journal of Psychology, 14(1), 79-98. CSPRD, Bangor	'Dynamics of support networks: differences and similarities between vulnerable groups'	Uses data from the BLSA (see above)

First Author(s) dates of papers/series of papers institution or organisation	Study theme(s)	Study methods/purpose
Wenger, G. C. (1994) Inter Journal of Geriatric Psychiatry, 9, 181-194. CSPRD, Bangor	'Support networks and dementia'	Uses data from the Bangor Dementia Studies (see above)
Wenger, G. C. (1994) Inter Journal of Geriatric Psychiatry, 9, 721-733. CSPRD, Bangor	'Dementia sufferers living at home'	Uses data from the Bangor Dementia Studies (see above)
Wenger, G. C. (1994), Contemporary Wales, 7, 153-71. CSPRD, Bangor	'Ageing & use of services in rural North Wales: 12yrs of domiciliary visiting of the old-elderly'	Uses data from the BLSA (see above)
Wenger, G. C. (1995) Ageing and Society, 15. CSPRD, Bangor	'A Comparison of urban with rural support networks: Liverpool and North Wales'	Uses data from the Bangor Dementia Studies (see above)
Wenger, G. C.,* Davies, R.# and Shahtahmasebi, S.* (1995) International Journal of Geriatric Psychiatry, 10, 933-43. *CSPRD, Bangor # UW, Swansea	'Morale in old age: refining the model'	Uses data from the BLSA (see above)
Wenger, G. C.,* Davies, R.# Shahtahmasebi, S.* & Scott, A.* (1996) Ageing & Society, 16, 333-358. *CSPRD, Bangor # UW, Swansea	'Social isolation and loneliness in old age: review and model refinement'	Uses data from the BLSA (see above)
Wenger, G. C. (1997) Baseline: Journal of the British Association for Service to the Elderly, 64, 16-20. CSPRD, Bangor.	'Successful ageing from the point of view of old people: findings from the BLSA'	Uses data from the BLSA (see above)
Wenger, G. C. (1997) Demos Collection, 12, 28-29. CSPRD, Bangor	'Support networks, social poverty and risk in old age'	Uses data from the BLSA (see above)
Wenger, G. C. (1997) Aging and Mental Health, 1(4) 311-20. CSPRD, Bangor	'Social networks and prediction of elderly people at risk'	Uses data from the BLSA (see above)
Wenger, G. C (1998) Health Care in Later Life, 2(4), 213-26. CSPRD, Bangor	'Reflections: success and disappointment - Octogenarians current and retrospective perspectives'	Uses data from the BLSA (see above)

First Author(s) dates of papers/series of papers institution or organisation	Study theme(s)	Study methods/purpose
Wenger, G. C. (1999) Journal of Health and Social Care in the Community, 7, 3, 187-97. CSPRD, Bangor	'Choosing and Paying for Care'	Uses data from the BLSA (see above)
Wenger, G. C., Burholt, V. and Scott, A. (1999) Health and Place, 4,1, 33-44. CSPRD, Bangor	'Dementia and help with household tasks: a comparison of cases and non-cases'	Uses data from the Bangor Dementia Studies (see above)
Wenger, G. C. and Jerrome, D. (1999) Journal of Aging Studies, 13, 2, 269-94. CSPRD, Bangor	'Change and stability in confidant relationships: findings BLSA	Uses data from the BLSA (see above)
Wenger, G. C. (2001) Journal of Aging Studies, 13, 4, 369-376. CSPRD, Bangor	'Advantages gained by combining qualitative and quantitative data in a longitudinal study'	Uses data from the BLSA (see above)
Wenger, G. C. (2001) Ageing & Society, 21, 117-130 CSPRD, Bangor	'Myths and realities of ageing in rural Britain'	Uses data from the BLSA (see above)
Wenger, G. C. (2001) Journal of Cross-Cultural Gerontology, 16, 79-109. CSPRD, Bangor	'Ageing without children: rural Wales'	Uses data from the BLSA (see above)
Wenger, G. C. (2001) Health & Social Care in the Community CSPRD, Bangor	'Using network variation in practice: Identification of support network type'	Uses data from the BLSA (see above)
Wenger, G. C. (2001) Ageing & Society, special edition on Rural Intergenerational Relationships, 21,5, 537-545 CSPRD, Bangor	'Introduction: Intergenerational relationships in rural areas'	Uses data from the BLSA (see above)
Wenger, G. C., Scott, A. and Seddon, D. (2002) Aging and Mental Health, 6, 1, 30-38. CSPRD, Bangor	'The experience of caring for older people with dementia in a rural area: using services'	Uses data from the Bangor Dementia Studies (see above)
White, N., # Scott, A., * Woods, R. T., # Wenger, G. C.* and Keady, J. D. (2002) British Journal of General Practice *CSPRD, Bangor #Dementia Services Development Centre, UW, Bangor	'The mini mental state examination: community population screening'	

First Author(s) dates of papers/series of papers institution or organisation	Study theme(s)	Study methods/purpose
Windle, G. and Burholt, V. (2003) Quality in Ageing, 4(2), 28-35.	'Older people in Wales, their transport and mobility: A literature review.'	This paper reviews the literature relating to the mobility of older people in the context of transport opportunities and provision.
Windle, G., Edwards, R. and Burholt, V. (2004) Quality in Ageing, 5(3), 13-24.	'A concise alternative for researching health-related quality of life in older people.'	This analysis examines the use of the EuroQol-5D (EQ-5D) instrument with a general population sample of older people from the HAPPI study (see above), thereby determining its methodological appropriateness with this age group.
Windle, G.,* Burholt, V.* and Edwards, R. T.# (2005, in press), Health & Place. CSPRD, Bangor Centre for Economics of Health, University of Wales, Bangor	Housing related difficulties, housing tenure and variations in health status: Evidence from older people in Wales.	This paper examines variations in self-reported health status and housing circumstances within a population sample of older people from the HAPPI study (see above), and determines whether respondents with inappropriate housing are higher users of health and social services than the rest of the sample group.
Woods, R. (2001-2004) School of Psychology/ Institute of Medical and Social Care Research, University of Wales, Bangor	A single-blind randomised controlled study to identify and address the needs of older people with dementia in residential care.	Compares the met and unmet needs of people with dementia in residential care in London and North Wales.

Other Journal Articles and Research Reports.

First Author(s) dates of papers/series of papers institution or organisation	Study theme(s)	Study methods/purpose
Abbott, S*. , Fisk, M#. and Forward, L.* (2000) Ageing and Society, 20, 327-340 *Health and Community Care Research Unit, University of Liverpool #Insight Social Research Ltd., Newport, South Wales	'Social and demographic participation in residential settings for older people: realities and aspirations.'	Explores experiences of older people living in sheltered, very sheltered housing and residential care in England and Wales in the context of theories of participation, consumerism and citizenship. Personal interviews undertaken with 100 older people (two thirds of whom were aged 85+) and discussions with staff.
Doughty, K*. , Cameron, K#. and Garner, P†. (1996) Review Article, Journal of Telemedicine and Telecare 1996; 2:71-80 *Telemedicine Research Group Medical Physics & Electronics Unit UWB #Integrated Care Systems, Felixstowe, UK. †Advanced Media Unit, BT Laboratories, Ipswich, UK.	'Three Generations of Telecare of the elderly'	A review of personal emergency response systems based on public telephone and cable networks. Predictions are made about the innovative services and facilities that may be available in third generation systems when broadband communication is available to all.
Rowland & Maitra et al (1990)	Hospital re admission	Follow-up of hospital A&E pts
Taraborrelli et al (1997 & 1998)	Hospital discharge	Literature review
Vetter (1997-2002)	Service reviews including hospitals needs assessments	Reviews

Appendix 6. OVERVIEW OF RESEARCH CONDUCTED IN 'CENTRE FOR SOCIAL POLICY RESEARCH AND DEVELOPMENT' UNIVERSITY OF WALES, BANGOR.

THE SOCIAL CARE LITERATURE REVIEW:

An Example from the Bangor Longitudinal Study of Ageing

Since much of the literature included in the table of social care research undertaken in Wales is based on data from the BLSA a summary of the study is included in this section. In addition, this section also highlights the current gaps in research across Wales. Many of these gaps have been extracted from previous literature reviews conducted by the Centre for Social Policy Research and Development for the Welsh Assembly Government, to inform the Strategy for Older People.

The 20- year Bangor Longitudinal Study of Ageing (BLSA) (1979-1999)

The BLSA was funded from 1978-1999 by the Department of Health/Welsh Office, by the Economic and Social Research Council (ESRC) from 1986-1989 and by the Joseph Rowntree Foundation from 1991-1993 and is unique as the longest study conducted on the social ageing process in the UK.

The BLSA began in 1979 with a survey of 534 older people aged 65+ living in rural mid and north Wales. The original sample was followed up on a four yearly basis (1979, 1983, 1987, 1991, 1995 and 1999) when questionnaires were administered by face-to-face interviews. Data were collected on community residence and housing; household composition and demography; contacts with formal services; family, friends and relatives; communication facilities; health and activity levels; mobility dependency and personal care; sources of help with common problems or crises; income; morale and support networks.

By the end of the study, in 1999 sixty nine survivors were traced, forty eight interviews were conducted and another fifteen interviews were conducted by proxy with residential care staff.

The main conclusions drawn from the BLSA for policy and practice implications were:

- Community care was not targeted at older people prior to entry into residential care
- There were changing migration patterns of older people
- Disparate incomes affect housing choices
- There were advantages to using the Wenger network typology in social work practice
- Types of networks consist of different types and quality of relationships
- Gender differences exist in relationships
- Close family relationships were not necessarily stable and may change over time
- Pre-requisites for successful ageing were prioritized as maintenance of health, mobility and independence

Research gaps identified in CSPRD literature reviews for the Welsh Assembly Government

Older people, ageing and sexuality

Windle and Burholt (2005) found that sexuality is rarely mentioned in the literature regarding life in residential facilities which they argue may be because sexuality is not given any importance in long term care institutions. There are however, particular groups of older people for whom relationships may need specific attention (Windle & Burholt 2005) such as older Lesbian, Gay, Bisexual and Transgender (LGBT) people already in residential care or facing the need for care.

Taking into account both the bisexual and transgender population aged 50 years and over, we can estimate that there are approximately 100,000 older LGBTs in Wales (Hinchliff 2005). This population is understandably reluctant to self-identify and as a result is largely invisible and ignored (Hinchliff 2005).

Since the decriminalization of male homosexuality in 1968 many older LGBTs have 'come out of the closet' and are no longer prepared to be discriminated against particularly when needing care and have a right to be assessed without prejudice. Older LGBTs have a fear of discriminatory and prejudicial practices that they may encounter from other older people which are not addressed by service providers who give no reassurance on this aspect of equality or by practitioners who have no experience or training in dealing with these issues. Heterosexuality is often assumed by care providers and health professionals and the sexual interests of older people in general are deemed inappropriate. The diversity of LGBT relationships may mean the failure of professionals to identify LGBTs as a couple which may affect the security of benefits and provision of care (Hinchliff 2005).

LGBT men and women fear that residential care would ignore specific needs. In particular, there is a concern that staff would be heterosexists and/or homophobic and not respect relationships. This fear is perhaps not surprising, given that there is evidence to suggest that lesbian and gay partners have encountered institutional exclusion policies in other care settings, including being prevented from visiting partners in hospital, or using the hospital overnight accommodation. In addition, sexual minorities may experience hostile, phobic and negative attitudes of health care workers regarding their identity (Kass et al., 1992).

- Research into the relationships of LGBTs in residential care is required in Wales

Older people, ageing and alcohol issues

Perry and Burholt (2005) found that although alcohol use/abuse among the older population has been extensively researched on an international level there appears to be a paucity of literature on alcohol issues relating to older people living in Wales and further that there is no literature available specifically focussing on the alcohol issues and the social care of older people in Wales. A majority of the studies on alcohol use and older people have been carried out in primary health care settings in which the sample under study is 'captive'. Studies that have been conducted among problem-drinkers recruited from non-treatment settings have not included older adults and have not included the older population with alcohol issues in residential care (Perry and Burholt 2005).

Alcohol problems among the older population are more likely to be presented as a combination of physical, mental and social problems such as self-neglect, falls, depression and confusion (Perry and Burholt 2005). There is a paucity of evidence regarding the level of need for and the suitability of alcohol services among the older population in Wales. Perry and Burholt (2005) have suggested that it is necessary to develop better information about the level and distribution of services to older people and have recommended commissioning research into the needs of family members or carers of older people with alcohol related problems. At present the alcohol issues of older people in Wales are under researched and under reported, possibly because the identification of older problem drinkers may be coloured by ageist attitudes that assume that the symptoms presented are just an expected part of the ageing process.

Transport

A literature review by Windle and Burholt (2001) identified several gaps in Welsh research on transport. There are a number of door-to-door transport schemes that operate in local areas, which are similar to a taxi service. Although these may only be available at certain times the charges are usually much lower than an ordinary taxi (Age Concern 2000a). Social car schemes, often run by the local council or voluntary services enable older people access to services and leisure activities (Age Concern 2000a). Dial-a-ride schemes are similar to social cars and provide door-to-door transport for people who cannot use public transport. The schemes generally use converted cars or minibuses with tail-lifts or ramps (Age Concern 2000a). Deaville (2001) states that there is currently little research

regarding the role of community transport in facilitating travel for rural dwellers or the purpose of rural journeys compared to urban ones.

Summary:

- A number of door-to-door transport schemes operate in local areas but there is very little information regarding levels of provision within Wales.
- Research is required to identify the role of community transport in facilitating travel for rural dwellers and the purpose of rural journeys.

Housing

Although a two year research project on housing (Housing for an Ageing population: Planning Implications HAPPI) has been conducted by the Centre for Social Policy Research and Development, Burholt and Windle (2001a) have identified that there are still substantial gaps in the information on older people's housing needs in Wales.

A disparity between the need for, and provision of, housing adaptation and renovation can have a direct impact on health care resources e.g. an increase in length of time until discharge from hospital; aggravation of medical conditions (e.g. arthritis, asthma, depression); admission to hospital due to hypothermia, psychological problems or accidents around the home such as falls or burns.

In the United Kingdom, since the 1980s two schemes, *Staying Put* and *Care and Repair* have endeavoured to help older people who require home maintenance or repair. These projects help to arrange finance, organise and supervise building work, and give technical and legal advice (Oldman 1990). Although there are sources of funding available for home improvements and adaptations, Burholt and Windle (2001a) note that many of these have drawbacks.

Quality and Choice (DETR 2000) states that grants should be prioritised for households at most risk who cannot afford to repair their homes. They also recognise that there is a need to free-up equity in order for poorer home owners to be able to repair their homes. However, older people are often reluctant to enter into equity release schemes if their income is inadequate to cover repayments. If repayments are delayed until after their death many older people are concerned about the loss of an asset or a part of the inheritance that they had anticipated leaving (Age Concern 2000b).

Smart and Means (1997) have tried to develop a methodology to compare the cost of home adaptations to that of other support services. Further work on cost-effectiveness may encourage the redirection of funds between different areas of Welsh Assembly Government spending.

An examination of applications for social housing over a decade ago by age-group showed that the predominant age group of people applying for social housing in rural Wales was those over 60 or 65 years old (Tai Cymru 1990). In 1990 a substantial number of older people were on local authority waiting lists for 4 years or more. Nearly 30% of applicants aged 65 and over had waited for over 4 years for social housing in rural areas of North Wales (Tai Cymru 1990). These data indicate that there may be a considerable number of older people in accommodation that is unsuitable for their needs, with no options open to them other than to remain on the local authority waiting list until offered another dwelling. It is suggested that a new examination of data received from Unitary Authorities is warranted which would be able to identify the proportions of older people on social housing waiting lists and the number of years that they have been waiting for relocation. This would enable the National Assembly for Wales to identify if older people are still over-represented on long waiting lists for social housing. These data do not currently exist in a manner which is easily broken down by age-group.

Applicants for social housing have to state their first and sometimes second choice of location for accommodation. The demand for social housing in particular areas is often assessed by looking at the areas which appear most frequently as the preferred location for applicants. This method is flawed and may not accurately depict where applicants wish to live. People requiring social housing in rural areas are usually aware of how many

facilities there are in their village and neighbouring villages, and know the likelihood of dwellings becoming available. In order to increase their chances of being re-housed an application will be made stating the first choice in an area in which there is more available social housing, for example the nearest large town or village (Shucksmith 1990). These preferences do not necessarily reflect the choices of the applicants but rather the perceived availability of accommodation, and therefore it is unlikely that lists such as these reflect the true housing 'needs' of rural communities.

Another area where further research is required concerns older people's relocation for high levels of assistance. These types of residential moves may be prone to pressures overriding a personal evaluation of relocation. Pressure may be applied to the older person to relocate under the assumption (of the person applying the pressure) that the move is in the 'best interests' of the older person (Burholt 1998b). The trauma of moving is increased when the move is outside the control of the person moving (Age Concern 1999b) and it has been found that older people who were involuntarily being relocated felt that they would die in the new environment, having been stripped of the independence afforded by their own home (Collier & Oliver 1979, O'Bryant 1983). Thus, the Welsh Assembly Government requires more research to identify the incidence of forced residential moves. Future research may explore whether relocation for high levels of assistance is in the 'best interest' of the older person, and what alternatives to relocation exist.

The association between types of residential relocation and age needs to be understood in the light of future rises in the number of older people in society. Unless reasons for relocation, current housing needs, or inadequacies in housing situations for the older members of society are addressed then it will not be possible to plan community care for the appropriate areas of society. Current policies regarding housing of older people have been based on relocation to environments that have been perceived as being more suitable for older people (for example sheltered housing and residential care), even though it appears that a majority wish to remain in their own homes.

Summary

- There are gaps in the research regarding the potential for equity release for lower income home owners in Wales.
- There are gaps in the research on the cost-effectiveness of adaptations and how budgets across agencies may be innovatively pooled.
- In many areas there are long waiting lists for social housing. However, there is a lack of current research identifying the proportions of older people on social housing waiting lists and the number of years that they have been waiting for relocation. It is likely that the current methods of assessing the demand for social housing does not accurately depict where older people wish to live.
- Research is required on the relocation of older people towards family members to identify causes of relocation and methods of sustaining older people in their own homes.
- Research is required to identify the incidence of forced residential moves and whether this is in the 'best interest' of the older person.

Social inclusion

Abuse:

Abuse of older people was first documented in 1975 by Baker with more literature appearing during the 1980s (Eastman 1984). Formal recognition of the phenomenon was not given until the 1990s (Social Services Inspectorate 1992, 1993). The extent of abuse of vulnerable adults is difficult to establish especially in light of the difficulties associated with the definition of abuse. However the literature suggests that abuse varies from around 5% for all types to 40% for specific samples (Burholt and Windle 2001b).

The ADSS (1996) suggested that there are several types of abuse which should be addressed by local authority policies. Burholt and Windle's (2001b) review indicate that abuse encompasses:

- physical abuse including the misuse of medication
- sexual abuse
- psychological abuse including verbal abuse and racial abuse
- financial, material or commercial abuse. In Canada, it is estimated that from one-third to just over a half of elder abuse victims experience financial abuse (Podniecks 1990, NARCEA 1990). In the UK there has been little research on financial abuse (for an exception see Rowe et al. 1993), in particularly within minority communities and in different cultural contexts. Common forms of financial abuse of older people include: larceny; theft by trick and device; embezzlement; burglary; forgery; and impersonation
- neglect

It has also been suggested that community abuse exists in the form of harassment, humiliation and theft, however most reports are anecdotal (Burholt and Windle 2001b).

Summary

- Research is required on the extent and type of abuse experienced by older people in Wales so that the Welsh Assembly Government can draw up strategies for prevention and intervention

Crime:

The incidence of fear of crime in older people has often been based on the response to a single question in a large-scale survey (Hale 1996) e.g. feeling safe walking in the neighbourhood after dark. The fear of crime and a sense of safety are related to the physical and social characteristics of the neighbourhood in which a person lives (Tulloch 2000). For example Burholt and Windle (2001b), indicate in a review of the literature that physical signs of community degeneration such as rubbish, graffiti or vandalism are taken to indicate that social controls are not enforced in the area and that the risk of crime is higher.

It has been suggested that the perception of fear extends further that the neighbourhood, and the perception of a 'dangerous' world has been fostered by the media (Burholt and Windle 2001b). The level of deprivation has also been related to a fear of crime with older people living in situations of multiple deprivation seven times more likely to feel unsafe compared with less deprived older people (Pantazis & Gordon 1997). This could be particularly important in Wales given the levels of unfit housing, GDP, lack of amenities in pockets of deprivation found across Wales

Summary

- More research is required to identify the interrelationships between age, neighbourhood, poverty and fear of crime and its contribution to social exclusion of older people.

Ethnicity:

In a review of the literature, Burholt and Windle (2001b) noted that older people in ethnic minority groups in the UK have received relatively low levels of research attention, partly because their numbers have been small. The 1991 census showed that older people constitute 6% of black and ethnic minority groups compared with 22% of the white population. This situation will change as the proportion of ethnic minority elders in the population is predicted to increase as older immigrants move into the retirement age group. There are approximately 13% of black and ethnic people approaching retirement age (45-59) compared with 17% of the white population. Research will be required to address issues specific to ethnic minority groups (Burholt et al. 2000, Burholt & Windle 2001b)

It is likely that the diversity of ethnic minority groups will have different implications for the provision of health and social services in old age. Different patterns and reasons for emigration by different subgroups are likely to result in differing needs for formal services (Burholt 2004a, Burholt 2004b).

The BE4 research project was carried out by the Care Sciences Research Unit and the Welsh Institute for Health and Social Care (WIHSC) at the University of Glamorgan in Cardiff. This project targeted the BME groups of African, Caribbean, Chinese, Bangladeshi, Indian, Pakistani and Vietnamese descent living in Butetown, Grangetown and Riverside with the view of improving the access of information and appropriate treatment in mental health and social care to these specific groups living in three of Wales' most ethnically diverse wards, in line with the Welsh Assembly Government's commitment to:

- develop the region's health and social care services
- ensure that the voluntary sector is at the heart of National Assembly policy
- ensure that proposed policy and action is informed by clear research directives

The programme of research began June 2002 and was funded for 18 months. Although it targeted adults aged 18 – 65 years it did not specifically address the needs of the older BME population especially the oldest old and frail old.

Research in England (e.g. Burholt & Shah 2001, Burholt et al. 2000, Burholt et al. 2003a, 2003b, 2003c) has focused on the impact of migration of family members on sources of help and support to BME elders. Despite a considerable amount of research and policy reviews, services for ethnic elders in Wales have been slow to develop. Clearly research is required that specifically targets the delivery of services and social support systems of BME elders living in Wales most ethnically diverse communities.

There has been very little research with regard to abuse of older people from ethnic minority groups (Biggs 1996). In the USA, where studies have given a racial angle to abuse it has been concerned with the ethnicity of the abuser rather than the victim (Stets 1990, Pan et al. 1992). This has been a matter of concern to the Social Services Inspectorate who have noted a lack of referrals from ethnic minority groups (Biggs 1996).

There is diversity between and within ethnic minorities and many are ageing 'successfully' (Blakemore & Boneham 1984). The attention that is given to ethnic minority elders is warranted, not because they are a problem group, but because relatively little research has been conducted on the part of the elderly population (Rowland 1991). Consequently, little has been done to address particular needs of ethnic minority elders.

Summary

- Older people in ethnic minority groups in the UK have received relatively low levels of research attention, partly because their numbers have been small.
- This situation will change as the proportion of ethnic minority elders in the population is predicted to increase as older immigrants move into the retirement age group.
- Research will be required to address issues specific to ethnic minority groups
- There has been very little research with regard to abuse of older people from ethnic minority groups.
- The attention that is given to ethnic minority elders is warranted, not because they are a problem group, but because relatively little research has been conducted on the part of the older population and consequently, little has been done to address particular needs.

Volunteering:

Volunteering and community activities are central to the concept of citizenship and are the key to community restoration. They can help with social inclusion, healthy living, life-long learning and active aging (Active Community Unit 1999).

Despite a fairly thorough search by Burholt and Windle (2001b), it was difficult to identify research specifically focussing on the impact of voluntary services on older

people, as most of the literature is based on volunteers and volunteering. The lack of literature was confirmed in personal communication from the National Centre for Volunteering.

Summary

- There is very little research specifically focussing on the impact of voluntary services on older people.

Social care services

The United Nations' *International Plan of Action on Ageing* recommends that: "Efforts should be intensified to develop home care to provide high quality health and social services in the quantity necessary so that older persons are able to remain in their own communities and to live as independently as possible for a long as possible. (UN/Division for Social Policy and Development 2000)

However, in a review of the literature, Burholt and Windle (2001c) note that the meaning of independence require careful interpretation. For a few older people it means not receiving any help from formal services and relying entirely on aid from family member. For the majority of older people it means getting help with personal care and other tasks in order for them to avoid burdening their children or friends with care duties thereby building a relationship which can appear to be unequal. Heywood's research in a Welsh Unitary Authority has reinforced this view as older people stated that they did not want their (adult) children to have to wash them or their spouse to help them onto the toilet. In addition, older people do not like being seen naked by their neighbours, which implies that bathing or washing duties would not be sought from this source (Heywood 2001). Further research is required to unpick what 'independence' means to older people

In the rural context, the centralisation of health and social services makes it increasingly difficult to devise effective methods of delivery of social care services to rural areas. The provision of services to rural areas is more costly than in urban areas. This is due to a combination of factors which include:

- lack of economies of scale
- increased travelling time
- need to provide long-distance transport for clients

(Stone 1998)

Older people in rural areas often have low expectations of services and there is a low take-up. Urban policies are often expected to translate directly onto rural areas. It has been suggested that where there is a lower provision of services in rural areas local authorities expect voluntary services to fill the gaps. However, voluntary services tend to be smaller and less well developed in rural areas compared with their urban counterparts. Burholt and Windle's (2001c) review of the literature suggests that voluntary organisations are unlikely to be able to fill the gaps that exist in social service provision. Thus, research is required to identify models of good practice, and specific strategies within local authorities for meeting the care needs of older people in rural areas.

The same literature review (Burholt & Windle 2001c) suggests that the standardised satisfaction scales that have been used to assess the views of patients towards services received from health care professionals are not suitable for social care services, primarily because social care is usually provided in the home, for a much longer period of time and is not oriented towards cure. Criticism of surveys suggests that they are not the best method of measuring the satisfaction of older people with the receipt of social services e.g. older people who do not express dissatisfaction when asked a closed question in a survey may later report dissatisfaction when asked an open-ended question (Simmons & Schelle 1999). In addition, surveys do not provide a method to consult with

users or involve them in service planning (Barnes 1992, Stevenson & Parsloe 1993). Thus, research is required within Wales to develop reliable and valid quality indicators of social services.

Summary

- The meaning of independence to older people requires careful interpretation.
- Research is required in Wales to inform policy-makers of the extent to which local authorities include specific strategies for meeting the care needs of older people in rural areas.
- Research is required to develop reliable and valid quality indicators of social services.

Informal care

A review of the literature indicates that older people rely far more on informal care than on formal care. The largest group of carers are children providing help to their parent or parents-in-law. The preferred source of help is from a family member and the literature highlights the key role of spouses and daughters in the provision of informal support (Burholt and Windle 2001c).

Burholt and Windle (2001c) note that much literature has focused on the 'empowerment' of carers and suggests that social service practitioners employ 'empowering practices'. A majority of the literature suggests that empowerment will happen if social services work in partnership with clients and carers. However, there is a gap between the aim of user empowerment in community care and the reality. Although empowerment has been cited as beneficial to carers there has been a failure to address how it might be achieved. It has been suggested that training for carers would lead to their empowerment but there is little evidence to support this claim. Some evaluative studies of training programmes have been carried out but these have focused on supporting carers whilst they continue to care in the community (Burholt and Windle 2001c). Clarke (2001) found that although training increased carers' knowledge about services, there were no changes in levels of perceived control, self-efficacy and self esteem (measures of psychological empowerment). Research is required to determine how policy objectives of carers' empowerment can be achieved.

Summary

- More research is required to gain further information about carers, especially to determine how policy objectives of carers' empowerment can be achieved.

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Appendix 7. WORD FUNDED PROJECTS.

WORD funded projects Theme. Falls, Fractures and Asthma

First Author(s) dates of papers/series of papers institution or organisation	Study theme(s)	Study methods/purpose
Jones (2001) UWCM Dept General Practice, Public Health dept	Asthma long term use steroids and fractures and osteoporosis	Wales General Practice Patient Morbidity Database - retrospective case/control study pt notes review
Lyons (2004) UW Swansea	Vitamin D supplements and prevention fractures	All Wales Injury Surveillance System medicated randomised control trial
Snooks (2002) UW Swansea	Falling - reducing risk of falls	Case study interviews with structured questionnaires

WORD funded projects Theme. Parkinson's & Alzheimer's Disease

First Author(s) dates of papers/series of papers institution or organisation	Study theme(s)	Study methods/purpose
Hobson (1999) UWCM	Medical professional knowledge alzheimer's	Quantify level of knowledge primary and secondary care interface
Hobson (2001) UWCM	Prevalence of cognitive impairment and dementia PD	Defined geographical area - N Wales case control study
McCaddon (2001) UWCM Dept General Practice	Vit B 12 deficiency and Alzheimer's	Case studies including assessment tools cognitive scores
Round (1998) Conwy & Denbighshire NHS Trust	Effectiveness of multi-disciplinary group therapy management PD	Randomised controlled study N Wales

WORD funded projects Theme. Sensory Impairment

First Author(s) dates of papers/series of papers institution or organisation	Study theme(s)	Study methods/purpose
Wenger (2001) UW Bangor	Care management	Qualitative study telephone and face to face interviews

WORD funded projects Theme. Heart disease and Stroke

First Author(s) dates of papers/series of papers institution or organisation	Study theme(s)	Study methods/purpose
Elwood (2001) UWCM	Incident strokes and vascular events age related	Expand the time scales of the Caerphilly Cohort study to increase the power of analysis
Hobson (2002) UWCM	Cognitive screening	Case studies & assessment tools cognitive screening
Lammie (2003) UWCM	Pathology research	Laboratory techniques
Meare (2001) UWCM	Assessing reliability in cognitive impairment assessment	Qualitative study cases establishing reliability of CAMCOG test
Roach (2002) Pontardawe Health Care	Management of gastrostomy	Qualitative study cases interviews pts perspectives personal experiences
Williams (2000) Iechyd Morgannwg Health	Rehabilitation	Qualitative study case study including health measures assessment tools
Wray (2000) Conwy & Denbighshire NHS Trust	Pts recovery expectations	Qualitative analysis in terms of lifestyle interviews and observation

WORD funded projects Theme. Cancer

First Author(s) dates of papers/series of papers institution or organisation	Study theme(s)	Study methods/purpose
Brewster (2000) Velindre NHS Trust	Attitudes to treatment	Health care professionals and elderly attitudes to treatment interview survey

WORD funded projects Theme. Elderly care needs general and carer

First Author(s) dates of papers/series of papers institution or organisation	Study theme(s)	Study methods/purpose
Chadderton (1997) Cardiff & Vale NHS Trust	Needs assessment	Wales, Holland and Greece Qualitative analysis of data on needs of elderly and knowledge used by professionals to meet needs nursing homes
Cheung (2002) UW Swansea	Needs assessment for carers	Qualitative study interviews to assess levels of needs and experiences of supportive services
Faulkner (2002) UW Cardiff	Service review Delayed discharge and repeat admission	Case reviews geographical social and medical care profiles
Jones (2002) Monmouthshire County Council	Advocacy	Participatory action research
Lambert et al(2001) UW Swansea	Study of local authority domiciliary care charging policies	Mixed methods.
Lambert et al (2004) UW Swansea	Comparison of 2 instruments assessing complex care needs	Case control using 2 assessment tools assessing validity of tools
Merrell et al (2004) UW Swansea	Identifying social care and health needs of Bangladeshi women in Swansea	Qualitative interview study.
Northway, R. (2001)	Advice, information and support for older people living in residential care: An exploratory survey of advocacy	3 key groups of people' older people living in residential homes, their families & care staff. Quantitative and qualitative methods used.
Palfrey C (2003) UW Swansea	Needs assessment of EMI population in Powys	Needs assessment and advice on best practice.
Perry et al (2001) UW Cardiff	Current activity to support carers	Questionnaire survey
Phillips et al (2000) UW Swansea	Study of hospital discharge policies and procedures	Mixed methods
Phillips et al (2000) UW Swansea	Study of winter pressures	Mixed methods
Pithouse (1999) Pithouse (2001) UW Cardiff	Welfare economic analysis post discharge Primary and social care	Feasibility study Qualitative and Quantitative methods

WORD funded projects Theme. Elderly care needs general and carer (cont)

First Author(s) dates of papers/series of papers institution or organisation	Study theme(s)	Study methods/purpose
Seddon (1999) UW Bangor	Assessment and Carers Act	Evaluation of process and outcome of assessments within the Carer's Act
Skone (1999) Pembrokeshire County Council	Expectations of standard & structure of residential care services	Literature review
Wenger (2000) UW Bangor	Pts with Dementia and their carers	Qualitative study cases re professional intervention (DARE)_
Wenger (2003) UW Bangor	Carers in employment	Qualitative and quantitative methods semi-structured interviews
Williams (2002) UW Swansea	Effects of caring for carers	Qualitative study interviews developing patient generated assessment tool for carers to measure quality of life

WORD funded projects Theme. Diabetes

First Author(s) dates of papers/series of papers institution or organisation	Study theme(s)	Study methods/purpose
Sinclair (1996)	Needs assessment	Powys N Clwyd and S Glamorgan Random sample of pts recruited and interviewed questionnaire and blood sampling

WORD funded projects Theme. Wound care

First Author(s) dates of papers/series of papers institution or organisation	Study theme(s)	Study methods/purpose
Lyne (2000) UWCM	Risk assessments	Case studies
Moseley (2002)	aid in healing process	Biological testing on cases

Appendix 8. PHD / MPHIL THESES.

Phd / M Phils (Wales) Older People and Ageing Theme. Dental needs

First Author(s) dates of papers/series of papers institution or organisation	Study theme(s)	Study methods/purpose
Naish SE (1992) Cardiff	needs, demands and attitudes of two socio-economically different groups of elderly people	Cardiff Socio-dental investigation

Phd / M Phils (Wales) Older People and Ageing Theme. Cardiovascular

First Author(s) dates of papers/series of papers institution or organisation	Study theme(s)	Study methods/purpose
Arino S (1991) Cardiff Medicine	Potential use of thrombolytic therapy with suspected acute myocardial infarction	Retrospective study of factors which determine administration of therapy

Phd / M Phils (Wales) Older People and Ageing Theme. Learning Disabilities

First Author(s) dates of papers/series of papers institution or organisation	Study theme(s)	Study methods/purpose
Bremble A (1999) Cardiff	Factors influencing future care planning decisions of older carers of adults with LD	Survey

Phd / M Phils (Wales) Older People and Ageing Theme. Dwelling/ Housing/ Accommodation

First Author(s) dates of papers/series of papers institution or organisation	Study theme(s)	Study methods/purpose
Chadderton HM (2003) College of Medicine	Study of older people in nursing homes in urban South Wales	Heideggerian- Gadamerian hermeneutic study

Phd / M Phils (Wales) Older People and Ageing Theme. Dementia including Alzheimer's

First Author(s) dates of papers/series of papers institution or organisation	Study theme(s)	Study methods/purpose
Scott AL (1999) Bangor	Investigation of R & V of dementia care mapping method	Non participant observation and interviews
Barker HL (1999)	Differential diagnosis of depression & Alzheimer-type dementia	Pilot study - narratives
Coaley TE (2001)	Personal experiences in the early to moderate stages of AD	Interpretive phenomenology
Henry LM (1994) Bangor	Assessment and modification of verbal behaviour in dementia	
Hobson JP (29003) College of medicine	Prevalence and incidence of cognitive impairment & dementia - linked to Parkinson's disease	Testing R&V of existing neuropsychological test
Hughes EA (1997) Bangor	Negative priming and dementia	Comparative
Jones DA (1995) Bangor	Bilingualism and dementia	Longitudinal study
Keady JD (1998) Bangor	The dynamics of dementia	Grounded theory
Lintern TC (2001) Bangor	Quality in dementia care	Evaluation of staff attitudes
Muniz-Cook E (2000) Bangor	Behavioural disturbance in residential care for the elderly mentally infirm - the challenge for staff	Evaluation
Phillips S (1994) Bangor	Impact of cognitive impairment and affective disturbance on autobiographical memory	Measurement of associated factors using range of validated tools
Pridham JD (1995) Cardiff	Risk assessment in services for people with dementia	Cross sectional study of clients, carers and service providers and comparative analysis with OP without dementia
Rice FJ (2000) College of Medicine	Cognitive measures of genetic liability to late onset Alzheimer's disease	

Phd / M Phils (Wales) Older People and Ageing Theme. Dementia including Alzheimer's (con't)

First Author(s) dates of papers/series of papers institution or organisation	Study theme(s)	Study methods/purpose
Scholey KA (1999) Bangor	Potential benefit of a CBT treatment approach for depression	Case study
Todd S (2001) Bangor	Staff responses to challenging behaviour shown by people with dementia	Validation of model
Unsworth Webb J (2001) Swansea	Ethical decisions in AD	Comparative
Vaughan FL (1999) Bangor	Negative priming and inhibition of return in early AD	Comparative
Walker MD (2002) Cardiff	QOL assessment in dementia	New instrument for patients & carers

Phd / M Phils (Wales) Older People and Ageing Theme. Rehabilitation/Falls

First Author(s) dates of papers/series of papers institution or organisation	Study theme(s)	Study methods/purpose
Watts GD (1999) Bangor	Cognitive therapy intervention to reduce the fear of falling and enhance daily living amongst older adults undergoing rehabilitation after hip fracture	Comparison of control group and group receiving brief course of cognitive therapy

Phd / M Phils (Wales) Older People and Ageing Theme. Respite

First Author(s) dates of papers/series of papers institution or organisation	Study theme(s)	Study methods/purpose
Nolan MR (1991) Bangor	Study of rota bed system for respite beds	Pluralistic evaluation

Phd / M Phils (Wales) Older People and Ageing Theme. Biomedical

First Author(s) dates of papers/series of papers institution or organisation	Study theme(s)	Study methods/purpose
Bishop JA (1991) Cardiff	Nutritional status of geriatric day hospital patients	Investigation of social, dietary and biochemical and anthropometric assessments
Chapman GA (1998) Cardiff	Metollathionein III and its association with Alzheimer's disease	Lab tests
Croucher PI (1991) Cardiff medicine	Trabecular bone remodelling in ageing and disease	Computer modelling
Ferguson CJ (1991) Cardiff Medicine	Influence of parathyroid hormone and calcium channel blockage on cyclosporin nephrotoxicity	Retrospective study renal allograft recipients
Kehoe PG (1999) College of Medicine	Molecular genetic studies of Alzheimer's disease	Genetic replication
Lomas LAB (1995) Cardiff	Orally ingested aluminium with reference to public knowledge of Alzheimer's disease	Survey
Ong BL (1991) Cardiff	Endocrinology study looking at protein secretions and contact lens wearers	Diagnostic laboratory levels
Turnbull NL (1991)	Metabolism and bioavailability of ascorbic acid	Investigations/ laboratory

Phd / M Phils (Wales) Older People and Ageing Theme. Medication

First Author(s) dates of papers/series of papers institution or organisation	Study theme(s)	Study methods/purpose
Batty GM (1999)	Indicators and investigation of intervention methods to promote quality prescribing in elderly hospital patients	Monitoring of prescribing patterns
Gammie SM (1993) Cardiff	Pharmaceutical care	Monitoring of prescribing patterns
Herepath AJ (1995)	Clinical database to assess adverse events in hospitalised population	Standardised observation of data archives
Hussain M (1999) Cardiff	Therapeutic management in nursing and residential homes	Monitoring of prescribing patterns
Pasteur M-A L (1995) Bangor	Effects of paroxetine on cognitive function	Comparative
Poole CD (2000) Cardiff	Iatrogenic disease predictability in community based older people	Delphi exercise

Phd / M Phils (Wales) Older People and Ageing Theme. Screening

First Author(s) dates of papers/series of papers institution or organisation	Study theme(s)	Study methods/purpose
Khalil HJBH (1994) Cardiff Medicine	Reported practice and attitudes to annual screening of elderly in general practice in Wales	

Phd / M Phils (Wales) Older People and Ageing Theme. Discourse Analysis

First Author(s) dates of papers/series of papers institution or organisation	Study theme(s)	Study methods/purpose
Grainger KP (1993) Cardiff	Nature of communication between the institutionalised elderly and their carers	Ethnographic

Phd / M Phils (Wales) Older People and Ageing Theme. Carers

First Author(s) dates of papers/series of papers institution or organisation	Study theme(s)	Study methods/purpose
Cainen LM (1999)	Caring for a parent with dementia. Factors influencing levels of psychological stress	Survey
Chung CCJ (1999) Swansea	Family care giving to people with dementia <i>in Hong Kong</i>	Ethnography
Corney MJR (1995) Bangor	Dementia and the informal carer	Developmental
Cunliffe LR (2001) Bangor	Stress inoculation training for carers of people with dementia	Comparison
Dean DG (1994) Bangor	Mediators of depression in secondary carers of a spouse with dementia	Cross sectional
Elson PA (1995) Bangor	Breaking the news to carers that their relative suffers from dementia	Exploratory
Hall H (1998) Bangor	Adult daughters caring for mothers with dementia	? Phenomenology
Hammond VJ (1995) Cardiff	Spouse careers of people suffering with dementia: relationships between self esteem depression, support mechanisms & dependency of spouse	Survey
Seddon D (1999) Bangor	Caregiving and employment: carers of people with dementia	Qualitative, narrative description
Shlosberg E (1998) Bangor	Dementia -the burden of care on the carers	Survey
Taraborrelli P (1997) Cardiff	Exploring caregiving biographies	Ethnographic
Waring PA (2000)	Caregiving and bereavement adjustment among spousal dementia caregivers	Grounded theory

Phd / M Phils (Wales) Older People and Ageing Theme. Community Care

First Author(s) dates of papers/series of papers institution or organisation	Study theme(s)	Study methods/purpose
Caldock KJ (1993) Bangor	Domiciliary services for elderly people	Analytical critique
Hisada N (1991) Swansea	Older mentally handicapped person in residential care	
Shahtahmasebi S (1995) Bangor	Statistical modelling of dependency in older age	Longitudinal

Phd / M Phils (Wales) Older People and Ageing Theme. Sociological

First Author(s) dates of papers/series of papers institution or organisation	Study theme(s)	Study methods/purpose
Burholt V (1998) Bangor	Testing behavioural and developmental models of migration. A re-evaluation	Bangor Longitudinal Study of Ageing
Pickard S (1994) Bristol	Social anthropological study of ageing in South Wales	Anthropological

Appendix 9. GAPS IDENTIFIED IN THE RESEARCH.

Place

- Need for a 'Welsh slant', recognition of regional difference and needs of Welsh communities.
- Effect of rurality and 'super-rurality'.
- Access to services, particularly in rural areas.

Social exclusion

- Effects of deprivation, poverty and ill-health.
- Inequality and age discrimination.
- Pensions, Income and Benefits.
- Charges for home care services.
- Evaluation of Direct Payments.
- Older people and the local economy.
- Social isolation and 'invisibility'.

Diversity

- Lesbian, gay, bi-sexual, transgender (LGBT) elders: discrimination and access to services.
- Black and minority ethnic older people (BME): discrimination and access to services.

Elder Abuse

- Mistreatment Exploitation Neglect
- Protection of older vulnerable adults
- Abuse of gay elders.

Ageing

- Successful or positive Ageing.
- The 'younger old - over 50s'; the 'older old' and 'frail old'.
- BME and LGBT.

'Person-centredness'

- Understanding changes in dependency and need for input & services.
- 'Proud' people (those who are reluctant to accept services).
- Transition to residential care.
- Incorporating very old age into quality of life indicators.
- Psychological effects of hospitalisation.
- Older people as equal partners in service planning and provision.
- Promoting independence.

Carers

- Support for carers.
- Family stories and narratives.
- BME Carers.

Care Workforce

- Recruitment and retention of care workforce.
- Impact of co-location of social work and community health teams.
- Ageing of care and academic workforce.
- Inter-disciplinary training.
- Research training.
- Skills training domiciliary care assistants.

Quality of care

- Hospital, domiciliary care and care homes.
- 'Care' rather than home.

Service delivery & models of care

- New patterns of service delivery.
- Prevention - need to address low level need and social and economic impacts of preventative work.
- Holistic understanding of care systems from the perspectives of patients or service users and practitioners.
- Intermediate Care - does it work? Effect on outcomes of care.
- Reablement services.
- Domiciliary care survey to evaluate capacity and effectiveness; cost effectiveness of funding
- Respite Care.
- Effective hospital discharge.
- Hospital care - in patient experience.
- Elderly Mentally Ill (EMI) services.
- Dementia - especially in 'younger' people
- Psycho-social interventions - vulnerable adults.
- Mental health management in primary care.
- Tele-care (not only tele-medicine).
- Technology to support older people.
- Older People and Health Promotion.
- Evaluation of outcomes of care.
- Education, leisure and transport.

Housing

- Extra Care: regulation and provision.
- Sheltered housing: regulation; needs analysis; role of the warden.
- Housing needs of older people with learning disabilities living with elderly parents and in group homes.
- Health / housing / social care services interface.
- High dependency and nursing needs in care homes.
- Continuum of care - residential to nursing care.
- Technology at home.

Clinical areas

- Chronic disease management and resultant care pathways.
- Osteoporosis awareness and prevention.
- Falls prevention /reduction.
- Wound healing.
- Cognitive impairment.

Medication

- Administration by unregistered staff in care homes.
- Compliance of older people.
- Poly-pharmacy.
- Home care and medication.
- Parkinsons disease and medication.
- Adverse drug reactions.

Research Methods

- Longitudinal studies.
- Involving Older People in research design, data collection and analysis.
- Life histories and narratives of older people.

Assessment

- Tools and scales.
- Inter-disciplinary assessment.

Policy

- Unified Assessment Process implementation.
- Evidence-based policy
- Evaluation of policy-led initiatives
- Older People's Strategy initiatives
- Implementation of NSFs
- Commissioning frameworks