

Queen's University Belfast, Wednesday 14 December 2022

School of Social Sciences, Education and Social Work

Framing Ageing Symposium:

One-day workshop for early career scholars

BOOK OF ABSTRACTS



Science and Culture



Economic
and Social
Research Council



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**QUEEN'S
UNIVERSITY
BELFAST**

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FRAMING AGEING SYMPOSIUM: ONE-DAY WORKSHOP FOR EARLY CAREER SCHOLARS

Queen's University Belfast
Wednesday 14 December, 2022

ORGANISERS

Ark Ageing Programme
Science And Culture Research Group at QUB

Framing Ageing Symposium: One-day workshop for early career scholars

WELCOME ADDRESS

GEMMA CARNEY

School of Social Sciences Education and Social Work, Queen's University Belfast

KEYNOTE ADDRESS. "THE PLEASURE OF FINDING THINGS OUT"

HANNAH ZEILIG



Hannah Zeilig is a leading arts and dementia researcher based at University of Arts, London. Hannah has explored and written about the role and value of the arts for people with dementia. Her work is characterised by a trans-disciplinary approach and she collaborates with a wide range of colleagues from clinicians to scientists and artists. Hannah has collaborated with a range of colleagues through her work at Oxford Institute on Ageing, The King's Fund and the Institute of Gerontology, King's College London. Her work has been published in *The Gerontologist*, *Dementia* and other leading journals.

ROUNDTABLE DISCUSSION. "THE FUTURE OF TRANSDISCIPLINARY RESEARCH ON AGEING" (CHAIRIED BY GEMMA CARNEY)

DES O'NEILL

Trinity College Institute of Neuroscience

LEONIE HANNAN

School of History, Anthropology, Philosophy and Politics, Queen's University Belfast

TESS MAGINNESS

School of Social Sciences Education and Social Work, Queen's University Belfast

MEET THE ORGANISING COMMITTEE

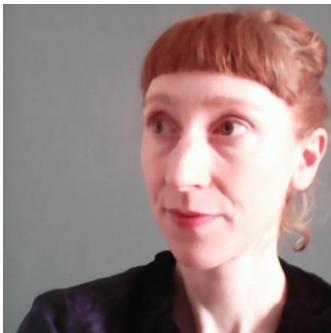
GEMMA CARNEY



Gemma Carney is a member of the [Framing Ageing transdisciplinary research network](#). She is a social and cultural gerontologist on the [ARK Ageing programme](#) based at the School of Social Sciences, Education and Social Work at Queen's University Belfast (QUB). Gemma began her career in gerontology working as policy officer for a group of retired trade unionists who were challenging discrimination in their old age. She has been researching ageism and ageing ever since.

Along with Paul Nash, she is author of [Critical Questions for Ageing Societies](#) (Policy Press, 2020), an introduction to ageing which was nominated for the Richard Kalish prize in 2021.

LEONIE HANNAN



Leonie Hannan is founder of the [Science and Culture Research group at QUB](#). She is a material culture specialist and former museum curator who now leads the [Centre for Eighteenth-Century Studies at Queen's](#). Her interests in ageing have been developed through her work on early modern letter-writing; [material culture](#) history and through her ongoing collaboration with cultural gerontologist, Dr Gemma Carney.

JIATONG LING



Jiatong Ling is a PhD student at School of Social Sciences, Education and Social Work at Queen's University Belfast. Her research focuses on childcare arrangement and intergenerational relationships between grandparents and parents in Chinese families where grandparents are involved in childcare. Qualitative research methods were utilised to collect and analyse data. She is in the writing-up stage currently and expected to graduate in summer 2023.

Framing Ageing Symposium: One-day workshop for early career scholars

ALICE NEESON



innovation (2016–2019).

Alice Neeson is impact acceleration officer at Queen's University Belfast. She coordinates the ESRC impact acceleration account which funded this symposium. She has a PhD in social anthropology and a background in community-led research, social tech and social innovation. She was part of a team that won the Google Impact Challenge Award in 2017 for a support app for refugees, and managed a People's Accelerator and three-nation Youth Accelerator for community-led

DES O'NEILL



and co-chair of Medical and Health Humanities at TCD. He was awarded the All-Ireland Inspirational Life Award in 2010 for advancing the cause of older people in Ireland.

Des O'Neill is founding member of the [Framing Ageing network](https://framingageing.ucd.ie/) (<https://framingageing.ucd.ie/>). He is Professor of Medical Gerontology at Trinity College Dublin. His research centres on gerontology and the neurosciences, with a strong emphasis on the humanities. He is a co-founder and past-president of the European Union Geriatric Medicine Society (www.eugms.org), and currently the Chair of the Humanities and Arts Committee of the Gerontological Society of America

ÁNGEL PERNAS



and routines are shaped by their relationships with their personal possessions.

Ángel Leira Pernas is member of the [Ark Ageing Programme](#) and is currently completing his PhD at the School of Social Sciences, Education and Social Work at Queen's University Belfast. His thesis "Material Memoirs on the Journey of Life" is a multidisciplinary project that aims to find alternative narratives of ageing in older people's life narratives through the use of grounded theory research methods and object-led interviews, and also to describe how older people's identities

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THE PLEASURE OF FINDING THINGS OUT

HANNAH ZEILIG¹

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Abstract:

The title for this presentation is inspired by the Nobel prize winning physicist Richard Feynman. Feynman in his insatiable curiosity and enthusiasm for intellectual exploration also demonstrated what we might refer to as interdisciplinarity. Whether he would have identified with this term is a moot point, however an ability to extrapolate from (and to) a wide range of disciplines is arguably at the root of all innovative enquiry. As a social gerontologist who studied literature and theatre, my research has always taken inspiration from diverse subject areas. After all, those of us who probe, query and seek to 'reframe' ageing, need to learn from the ideas of others, since the study of age and ageing can never be understood in isolation. For instance, when working during the Covid-19 pandemic with people living with dementia, I had recourse to methodological insights drawn from social anthropologists and from bioethicists. This presentation then, will outline some of the powerful insights and the thorny challenges that interdisciplinary ways of working can provoke. I will discuss some of the research studies that I have been involved with. These include projects that have been extremely well funded; and those that effected change, despite not receiving much funding at all! Above all, I will hope to share some of the intense pleasure that I have had working collaboratively and creatively with people with dementia and what I have found out along the way.

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MAPPING THE COMPLEX SYSTEMS THAT CONNECTS THE URBAN ENVIRONMENT TO COGNITIVE DECLINE IN OLDER ADULTS: A GROUP MODEL BUILDING STUDY

IONE AVILA-PALENCIA¹, LEANDRO GARCIA¹, CLAIRE CLELAND¹, BERNADETTE MCGUINNESS¹, CONOR MEEHAN², AND RUTH F. HUNTER¹ ON BEHALF OF THE SPACE TEAM

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Abstract:

BACKGROUND: There is evidence for the existence of mechanistic pathways between the urban environment and cognitive decline, but the interrelations between these pathways are unclear. In this study, we aimed to map the mechanistic pathways by which urban environment factors impact cognitive decline in older adults.

METHODS: This study was part of the Supportive environments for Physical and social Activity, healthy ageing and CognitivE health (SPACE) project. A 2-day workshop with the SPACE investigators was conducted based on the Group Model Building (GMB) methodology. The workshop aimed to create a causal-loop diagram (CLD) that identifies established and potential urban environment, lifestyle, health, and physiological determinants of cognitive decline in older adults, and the dynamic interrelations between these factors. The workshop was held online following appropriately adapted scripts. After the workshop, the modelling team reviewed the CLD to ensure that main potential causal pathways and mechanisms were captured.

RESULTS: During the workshop, 12 experts from 10 different disciplines identified 83 factors and 221 connections between them. After review, the CLD presented 45 factors and 110 connections. All factors were classified in 10 main domains: urban design, social environment, travel behaviours, by-products, lifestyle, mental health, disease/physiology, exogenous factors, and cognitive decline outcomes. The main output was a CLD of the complex system of how the urban environment can influence cognitive decline in older adults, created by, and agreed with, the SPACE investigators.

CONCLUSION: Our findings suggested that GMB can engage experts and help them view problems through the lens of complex systems.

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SPOTLIGHTING THE SUCCESS OF OLDER FEMALE DIRECTORS: A DEMONSTRATION OF THE CREATIVITY AND RESILIENCE OF OLD AGE IN THE FACE OF CULTURAL BARRIERS.

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Abstract:

Ageism is pernicious in the film industry, particularly in large-scale Hollywood productions. Its effect is also underestimated in comparison to other forms of discrimination. Older women are disproportionately discriminated against in the workplace compared with older men, and there is evidence of disproportionate ageism toward women in the film industry specifically. Women comprise a much smaller proportion of film directors overall, with only 13% of the top-grossing films in the US in 2020 directed by women.

Despite all this, a number of high-profile older female directors continue to produce content of the highest quality and originality. In the past year, for example, women aged 65 and above have produced an Academy Award Best Picture (*The Power of the Dog*, Jane Campion) and a Grand Prix-winning feature at Cannes (*Stars at Noon*, Claire Denis).

In this article, we look at three distinct works from older female directors (*The Power of The Dog*, Jane Campion; *Faces Places*, Agnès Varda; *High Life*, Claire Denis). We examine how the directors' age and experience informed their creative process and how they overcame the barriers set against them. In particular, we pay attention to ways in which they incorporate strategies of achievement in later life, such as the selection, optimisation and compensation model. The diversity of these pieces also allows us to highlight not only the heterogeneity of ageing, but the rich artistic rewards of the longevity dividend.

Key Words (MeSH): Humanities; Aging; Motion Pictures; Interdisciplinary Studies

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EXPLORING HOW PROACTIVE TELECARE CAN SUPPORT INDEPENDENT LIVING IN OLDER ADULTS: A QUALITATIVE STUDY

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Abstract:

PURPOSE: Retaining independence in older people has many benefits, including improving physical and mental health, boosting confidence, and improving overall quality of life (Hillcoat-Nallétamby, 2014). Telecare may foster independent living, (Greenhalgh, Procter, Wherton, Sugarhood, & Shaw, 2012), however, current evidence is mixed, and uptake of telecare is low. Telecare is often passive, shifting agency away from the user, which may impede independence. This research aims to understand how proactive telecare (PT) may support independence in later life by focussing on an existing intervention used in the United Kingdom (UK), called OKEachDay. Users proactively press an 'OK' button to confirm daily well-being. Staff provide low-need social support and notify users' next of kin if no contact can be made.

METHODS: Thirty-three qualitative semi-structured interviews were conducted with current OKEachDay service users, family of OKEachDay users, staff at the service provider, and non-users to gain a holistic understanding of attitudes towards and use of PT. Interviews were audio-recorded, transcribed verbatim, and data were analysed using inductive thematic analysis (Braun & Clarke, 2006).

RESULTS AND DISCUSSION: Benefits to independence from PT included: having daily virtual check-ins to provide security; having control over confirming well-being; opportunity for social connectedness and potential to track health deterioration. However, users required existing social networks to call upon and the system did not provide 24-hour assistance. PT may offer a sense of security and social connectedness to support independent living; however, it must be considered in the context of each individual's existing social resources and health-care needs.

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MEMORY BOXES OF PEOPLE IN PALLIATIVE CARE

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Abstract:

In recent years, there has been increasing opportunities for developing new and diverse creative arts-based interventions for use in palliative care to benefit multiple patient outcomes. This presentation highlights the initial feedback from a feasibility study conducted at an outpatient service in Northern Ireland. Using a mixed-method research approach, ten participants recruited from an outpatient service took part in a creative arts intervention known as "From My Perspective" (FMP). This process involved audio-recorded life stories with patients, which were then developed into bespoke and personalised listening experiences (LEs) presented in a physical format known as the "Memory Box" (MB). The use of bespoke questionnaires was used in this study to help understand the acceptability of the intervention and to see whether FMP can be beneficial in allowing participants to create a legacy item that can be shared with friends and family. This study also incorporated the use of validated tools such as the McGill Quality of Life questionnaire (MQoL), the Edmonton Symptom Assessment System (ESAS), and the WHO-5 Well-Being Index (WHO5) to monitor any changes / improvements for patient outcomes relating to their quality of life and well-being. Whilst the number of participants recruited as part of this study make it difficult to demonstrate the effectiveness of the intervention, there is early evidence to suggest its acceptance within multiple health care organisations, in addition to the benefits it can have for patients. Further research and largescale implementation are needed to understand how best to integrate these types of creative arts-based interventions into a health care context.

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IDENTIFICATION OF THE CASUAL PATHWAYS BETWEEN URBAN GREEN SPACE AND COGNITIVE HEALTH: A SYSTEMATIC REVIEW

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Abstract:

INTRODUCTION: Urban green space (UGS) is known to promote physical activity, social interaction, and have a decreased level of pollutants in comparison to the urban environment. Considering these are risk factors of impaired cognitive health (CH), UGS has been proposed to be of benefit to our rapidly ageing population. The aims of this review are to identify if UGS has been evidenced to reduce the risk of impaired CH and to identify possible mechanistic pathways in which UGS elicits effects.

METHODS: Four databases were searched (January 2010 to July 2022) for studies in the English language investigating an aspect of UGS or blue space with a measure of CH in adults (>18years).

Included studies were either classified as exposure where individuals were passively exposed to UGS in proximity to their residence, or intervention where individuals actively spent time within UGS for the purpose of the study. Data was subsequently extracted from all papers before each study was then assessed for risk of bias through the implementation of the Twohig-Bennett Tool (intervention) or the NIH Quality Assessment Tool for Observational Cohort and Cross-Sectional studies (exposure).

RESULTS: 4890 studies were identified and screened with the aid of the Covidence software. 34 studies were included in this review, 27 exposure studies and 7 interventions. 33.3% (n=9) of exposure studies and 42.9% (n=3) of intervention studies found that UGS was associated with a reduced risk of impaired CH. Studies were more likely to find this association if they were a higher quality.

CONCLUSION: This review highlighted that UGS has the potential to reduce the risk of impaired CH through mechanistic pathways such as the reduction of sympathetic activation. Further longitudinal research is required in both high and low-mid income countries.

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THE GLOBAL PARADIGM SHIFT TOWARDS ACTIVE AGEING AND BEYOND: AN ANALYSIS OF POLICY DOCUMENTS BY INTERNATIONAL ORGANISATIONS

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Abstract:

This study investigates the evolution of the active ageing paradigm and the varying support by international organisations in extending it beyond an economic productivist approach. Active ageing, a comprehensive strategy to maximize participation and well-being as people age, began to develop as a policy paradigm and has served as a key reference point in deliberations of international organisations and in academic debates since 1990s. The aim of this research is to comprehend what these organisations proclaim in their missions as a response to population ageing and financial crisis, in particular, to investigate the relationship between these rhetorical aspects and their institutional type. To demonstrate the emphasis on a productivist approach in active ageing discourse of international organisations and to explore any efforts to embrace a more encompassing understanding over time, I carry out the thematic analysis using 21 documents that contain active ageing discussions published in the period from 2002 to 2020 by the World Health Organisation (WHO), the International Labour Organisation (ILO), the European Union (EU), and the Organisation for Economic Cooperation and Development (OECD). My findings suggest that despite the consistent emphasis on a productivist framework, an active process of social construction since the financial crisis led to a more holistic and social investment focussed approach to active ageing discourses of international organisations, especially as advanced by the European Union.

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PHYSICAL ACTIVITY PREFERENCES OF PEOPLE LIVING WITH DEMENTIA AND THEIR CARE PARTNERS

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Abstract:

INTRODUCTION: Dementia is a syndrome characterised by progressive cognitive decline ¹. Dementia can affect social, physical, and mental abilities ². Care partners of people living with dementia (PLWD) are at risk of decline to their physical and mental health due to the potential burden of caring ³. Patient and public involvement (PPI) increases relevance and quality of research while providing a unique insight that a researcher cannot contribute ⁴. Despite benefits, PPI within dementia research has not always been utilized ⁵. The aim is to receive feedback from people with a lived experience of dementia.

METHODS: This is a qualitative study. The methods were informed by the Medical Research Council framework and Behaviour Change Wheel framework ^{6 7}. The questions for the interview guide were structured following the COM-B model ⁷. A patient advisory group was assembled to inform the research team of the suitability of the questions being asked in the focus groups. The focus groups included PLWD and care partners, involving questions based around their thoughts on physical activity, their physical activity levels, motivators, barriers and preferences to physical activity.

EXPECTED OUTCOMES: To understand the physical activity preferences of PLWD and care partners to allow the development of an intervention.

NEXT STEP: The findings from these discussions and previous literature will inform the development of a dance exercise intervention for PLWD and their care partners. This intervention will be presented to healthcare and exercise professionals for their opinions due to experience on the suitability of the intervention.

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EFFECT OF THE RESTORATIVE NATURAL ENVIRONMENT ON HRV, HR, STRESS, AND COGNITIVE FUNCTION IN SLOVAK SENIORS

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Abstract:

Depression, stress, anxiety, and dementia are the most common mental illnesses in older adults, leading to disability, comorbidities, and impaired cognitive function. Digital phenotyping with commercial wearable devices is increasingly popular but little done in older adults in free-living settings. Quantifying the effect of nature on psychological outcomes will capture the health benefits of the restorative natural environment. The objective of the present study was to determine the individual-frequently exposure to the restorative natural environment on HRV, HR, stress level, and cognitive function in the aging population. Fifty-four Slovak seniors participated in one month-randomized parallel intervention study with forest exposure as the primary intervention and urban as the active control. HRV(RMSSD), HR, and stress levels were measured before and after the 8-walks. Meanwhile, the cognitive function was measured at the baseline and the endline of the intervention. Between groups comparison, there was no difference between forest and urban in HRV change, HR, and stress level. Rote memory (TMT-A) and executive functioning (TMT-B) differed at the baseline measurement ($p < 0.05$) but not after the intervention. Within group comparison, the HRV(RMSSD) increased significantly after the intervention in both groups ($p < 0.05$). Cognitive performance was increased after the intervention in both groups. However, cognitive flexibility (TMT B-A) was significantly greater in the forest group with a mean difference of 21.15 score (vs. 6.63 in urban group). The findings indicate that urban exposure is not sub-standard at all, however, engaging with the natural environment (forest) showed more considerable benefits.

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AGEING WITH DEMENTIA: THE ROLE OF MUSIC

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Abstract:

Dementia can negatively impact the well-being of people living with dementia and their family carers. Research suggests that music interventions may be effective, safe alternatives to pharmacological interventions for the promotion of well-being in people living with dementia, with lesser evidence for family carers.

This paper is in two parts. The first is an integrative review of the impact of music interventions on the health and well-being of family carers of people living with dementia, and how they experience and perceive these interventions. It is the first review of this literature to date. Whittemore and Knafel's five-stage integrative review framework was utilized: (i) problem identification; (ii) literature search; (iii) data evaluation; (iv) data analysis and synthesis; and (v) presentation of the findings. A total of 33 studies met the inclusion criteria. Analysis and synthesis resulted in three overarching themes: impact on family carers, carer perceptions of music interventions and null quantitative findings in small studies. The review found that music interventions may improve family carers' social and emotional well-being, enhance their ability to cope and care and ameliorate the caring relationship, contributing to experiences of flourishing. However, it highlighted that this area is under-researched and pointed to the need for larger, more rigorous studies.

The second part explores the ways in which music can be used to ameliorate the caring relationship at different stages of dementia. It draws on my personal experiences observing and facilitating music-making with people living with dementia and their family members in clinical and community settings.

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THE MEANING OF THE PRESENT IN OLD AGE. AN ALTERNATIVE TO THE DISCOURSE DECLINE

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Abstract:

“Material Memoirs on the Journey of Life” is a PhD research project that departs from the assertion that the meanings ascribed to old age in Western societies are the result of knowledge/power structures imposed by dominant ideologies. Often, the meanings ascribed to living a long life in our societies are dominated by ideological stereotypes and preconceptions that do not constitute an account on how old age is experienced by older people themselves, such as the tendency to assume that health decline is a central category in older people’s identities. Older people themselves are normally excluded from the process of definition of the meaning of ageing. This research combines grounded theory research methods with the use of personal belongings in interviews to assist participants generate narratives of ageing that reflect the way older people in Northern Ireland interpret their ageing process.

This paper explores one of the topics that emerged in 30 interviews conducted in Northern Ireland between September 2021 and October 2022, that is, participants’ negotiation of their present and their interpretation of the future. Gerontologists have begun to pay attention to older adults’ subjective perception of the future, and how such perceptions affect their daily actions, goals and desires. The perception, interpretation and planning for the future are essential in people’s negotiation of their identity and actions. Therefore, in this paper, participants’ negotiations of their present will be described, and their interpretation of how their actions and identities are influenced by their ideas of the future will be analysed.

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DEVELOPING THE ROLE OF DEMENTIA CHAMPIONS IN THE HOMECARE SECTOR – THE ‘DEMCHAMP’ STUDY

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Abstract:

In England, 90,000 older people living with dementia in the community are estimated to be in receipt of paid social care support. Homecare, also termed domiciliary care, may be part of a social care support package to help people living with dementia to remain in their own homes. However, there is a workforce crisis in homecare, including challenges with recruiting, training, and retaining staff. Workers report feeling undervalued and excluded from clients’ multidisciplinary care networks. In turn, poor staff retention and lack of job satisfaction directly affect people affected by dementia, who cite the importance of continuity of care and understanding of their needs. The role of Dementia Champions has been utilised across some health and social care services nationally and internationally, to recognise and develop staff members as dementia-specialists, enabling them to take on a greater role in care co-ordination, training and peer support. Developing a model of Dementia Champions in homecare may tackle some of the sector’s challenges.

This talk will provide an overview of the ‘DemChamp’ study, outlining its use of a Theory of Change approach to learn from Dementia Champions working across health and social care sectors about what works for who, in what settings, and how. Preliminary findings from a narrative review and qualitative interviews with varied stakeholders will be discussed, alongside the project’s broader scope in co-producing a model of the Dementia Champions role in homecare. It will also consider the potential for improving care coordination across multidisciplinary services for people living with dementia.

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GRANDPARENT INVOLVEMENT IN CHILDCARE: A QUALITATIVE STUDY IN CHINESE FAMILIES

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Abstract:

It is significantly evident that childcare provided by grandparents is prevalent worldwide (Furstenberg, 2020). In the context of the limited formal childcare services and the changing population policies, grandparenting is common in Chinese families, especially for children under three years old. Grandparents in 77.7 percent of urban families in China are involved in taking care of children under three years old according to the National Health Commission of the People's Republic of China (2019) as quoted by Wang et al. (2021). Yan (2021) argues that the core of contemporary intergenerational dynamics is grandparenting where multiple generations are all involved. This highlights the saliency of understanding grandparenting in Chinese families. Exploring the involvement of grandparents in childcare arrangement will help researchers and policymakers better understand the complex Chinese life in terms of grandparenting.

The research presented here is based on a qualitative study of grandparenting in Chinese families. The research questions were raised from two perspectives, multigenerational and intergenerational perspectives. The two perspectives could be helpful drawing a wider picture of what the grandparenting is like in contemporary Chinese families. 30 participants were recruited from a city located in the northeast of China. In each family, two one-on-one semi-structured interviews were conducted with one grandparent and one parent. Thematic analysis identified four key themes: childcare arrangements; perceptions of childcare; perceptions of grandparent childcare; intergenerational interactions. The theoretical underpinnings comprise mosaic familism, intergenerationality, ecological framework of human development and family support.

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GALLERY OF SPIRITUALITIES: REFLECTING ON SPIRITUALITY IN RESIDENTIAL CARE FOR OLDER PEOPLE

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Abstract:

The needs of older people with a 'diverse' cultural or faith background are not well represented in social care research in general, and particularly in care homes where an estimated 70% of residents are living with dementia. Furthermore, the spiritual needs of older people are often overlooked or misunderstood by care workers, resulting in a double lack of recognition. It is common for care workers to relate spirituality primarily to religion. Religion can be part of spiritual needs, but it does not have to be. Spirituality often reflects (the need for) a purpose and meaning in life.

To get more insight into what spirituality means for care home residents, a multi-sited ethnographic study in four care homes with different spiritual and cultural backgrounds was carried out. Care home residents were asked to bring an artefact to their interview. The artefacts could be an object, a song, a person, or anything that represented a sense of peace, safety, or wellbeing to them. The artefacts help telling stories and function as a conversation starter about a potentially sensitive and often intangible topic. The artefacts were then photographed and collected in a 'Gallery of Spiritualities'. This collection aims to inform people involved in care and reflect upon the diverse spiritual needs that care home residents have. Furthermore, it informs care home managements, care home staff, nursing students and policy makers on how to improve spiritual care for older people in residential care.

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THE RESIST STUDY: DO TNF INHIBITORS PROTECT AGAINST COGNITIVE DECLINE IN RHEUMATOID ARTHRITIS PATIENTS WITH MILD COGNITIVE IMPAIRMENT?

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Abstract:

Rheumatoid arthritis (RA) is an autoimmune disease characterised by chronic inflammation in the joint synovium. Considering growing research interest into the role that systemic inflammation might play in the pathogenesis of Alzheimer's disease (AD), studying cognitive decline in RA patients can provide important insights into the potential effects of inflammation on cognitive health. Furthermore, evidence suggests that biological drugs used to treat RA, specifically TNF inhibitors (TNFi), may protect against AD progression by reducing systemic inflammation. The rheumatoid arthritis medication and memory study (RESIST) is a multicentre longitudinal observational study which aims to compare rates of cognitive decline in adults with both RA and mild cognitive impairment (MCI) who are on either a conventional synthetic disease modifying anti-rheumatic drug (csDMARD) or a TNFi. 251 participants were enrolled on the longitudinal phase of the study (160 on csDMARDs, 91 on TNFis). Participants completed assessments at six-month intervals for eighteen months. The primary outcome was performance on the Free and Cued Selective Reminding Test (FCSRT). It was hypothesised that the rate of decline in FCSRT score would be lower among participants taking TNFis. Results showed that FCSRT performance improved on average over the 18 month follow-up period in both groups, and that there was no significant difference between groups in the rate of change observed. A major limitation of the study was attrition due to the COVID-19 pandemic, which may have influenced results. However, these findings raise the possibility that both csDMARDs and TNFis may protect against cognitive decline in RA patients.

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LONELINESS IN THE COMMUNITY OR COMMUNITY LONELINESS? LIVED EXPERIENCES OF COMMUNITY-DWELLING OLDER ADULTS'

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Abstract:

I am currently in the final five months of my PhD, having carried out the majority of research during the height of the COVID-19 pandemic in collaboration with a day centre in the Northeast of England. As a participatory action research project with older clients, their carers, staff and volunteers, the research sought to understand experiences of loneliness and the role(s) of the day centre. While older adults are not the loneliest age group, loneliness experienced by older people is inherently more complex because of its association with and exasperation of age-related problems. It was this reality, along with the unforeseen closure of the day centre, that led us to develop the term 'Community Loneliness', an experience which is comprised of three separate components of i) the failed promise of the good life- as (mis)conceptions of the third age created social pressure and increased distrust of the state, amounting to a sense of being failed by society ii) a lack of understanding-encompassing a yearning to be seen as more than 'just' an older person and iii) destructively risk-averse behaviour- a tendency to reduce relationships in old age to issues of risks management. Each of these aspects are bound together by an overall sense of disconnect and speak to the need for a contextualised understanding of loneliness, that critically considers and appreciates ageing and connection in a post-COVID world.

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THE HARMONISED COGNITIVE ASSESSMENT PROTOCOL (HCAP)

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Abstract:

This project involves use of use the Harmonized Cognitive Assessment Protocol (HCAP), developed by the Health and Retirement Study (HRS) USA in a cohort of 1000 participants age >65 years who are participants in the Northern Ireland Cohort Longitudinal Study of Ageing (NICOLA). HCAP, includes approximately one hour of cognitive testing and an additional twenty minutes of structured interview with a knowledgeable informant, as a separate in-home interview to randomly selected participants aged ≥ 65 years in NICOLA. The aim of the project is to construct an estimate of dementia prevalence for the national population of Northern Ireland.

This paper will provide background to the HCAP study and detail the project design. Study progress will be discussed as well as challenges encountered during project set up and in the field.

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'WHAT'S THEATRE GOT TO DO WITH IT?': THE CARE AESTHETICS RESEARCH EXPLORATION (CARE) PROJECT AND ITS INTERDISCIPLINARY CHALLENGES

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Abstract:

The quality of touch, the tone of voice, the way of holding another's gaze, the pause to wait for another to speak. How do we care? Are there additional elements to caring that go beyond what is usually seen, heard, felt, noticed, recognised?

Postdoctoral researchers Réka Polonyi and Kate Maguire-Rosier will present the interdisciplinary AHRC-funded CARE Project, a three-year study at the University of Manchester in partnership with the NHS and Birkbeck, University of London. Led by a team of researchers and practitioners in health and theatre, the team is collaborating with care professionals across Greater Manchester and London, as well as theatre artists working in care homes. The project explores how care professionals working with elderly people are 'artful', and how artists working in care homes are 'careful' in their everyday work. The research identifies moments of care that reflect embodied, sensory skills –ones that often become invisible in instances of 'just doing' care work. Our aim is to elevate care so it is valued as a creative practice. In the caring relationship, is there a broader repertoire at play beyond the expected to-do lists of a carer, and the feedback of people cared for? Are there aspects of care that might be beautiful or artistic? Can care be ugly?

This presentation will focus on some challenges in working across disparate disciplines (the arts and healthcare) including different methodological framing and approaches, as well as different data gathering and analysis strategies. Our aim is to learn from fellow participants and senior scholars about how we might reconcile ways of knowing and doing interdisciplinary research in the context of ageing communities.

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GESTATING SUSTAINABLE GERIATRIC SOCIAL PROTECTION SYSTEM IN ZIMBABWE: ISSUES, CHALLENGES AND PROSPECTS

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Abstract:

This desktop study analyzed the key issues associated with the poor performance of geriatric social protection in Zimbabwe towards developing suited interventions. The inquiry was predicated on the concern of an ever growing proportion of vulnerable elderly people in Zimbabwe amid pervasive and enduring trends of rapid population aging. A total of nine (9) structural, systemic and institutional weaknesses derailing efforts of sustainable geriatric social protection were established through the review of literature. This paper argues that Zimbabwe's challenges in providing sustainable geriatric social protection services to its senior's lie in the poor coordination of the geriatric welfare sector, lack of an integrative policy framework, and an ill-informed blanket approach which attempt to integrate social protection needs of seniors with those of the general poor in society. Notwithstanding its shortcomings, the current geriatric social protection regime in Zimbabwe demonstrates high levels of socio-political will power and committal by the government and this can be harnessed and used as a resource for gestating more robust interventions. The key starting point to this end is the admission by authorities that the current crop of geriatric social protection instruments are inefficient, fragmented and lack the desired clarity. This admission can provide the requisite socioeconomic, cultural and academic incubator within which a suited geriatric social protection system can be gestated.

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REFRAMING SOCIAL SCIENCES EPISTEMOLOGIES AND METHODS USING A FRAME- WORK TO DISSOLVE “WICKED PROBLEMS”

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Abstract:

In present times, unpredictability emerges as one of the most stable properties of some social systems. From the outset, is a complex set of intertwined phenomena that can appear complicated, if not impossible, to track and handle because the root cause might not be clear nor grounded in any specific context. This predicament has revealed the pressing need for new research tools that enable more detailed and flexible forms of engagement and action at both micro and macro levels. To address this critical need I developed the Ripple Framework (RF), a design framework suitable for interdisciplinary and collaborative teams to structure discussions about potential strategies aiming to overcome “wicked problems” surrounding the care sector. The RF consists of 30 playful co-design methods and management tools to facilitate engagement with the targeted audience. It can help a team to develop, organise, categorise, and prioritise ideas and tailor innovative solutions for and in specific circumstances. Every tool (e.g., methods cards) was constructed using a language accessibly to all actors and easy to translate across disciplinary boundaries, with the potential to allow collaborative teams to build an everyday imaginary world. This bespoke design framework was applied in all co-design stages with a pole of care workers, care homes managers, entrepreneurs and investors seeking a ‘wicked solution’ for their pressing constraints. The framework offers significant benefit to enable a shift from unilateral to multidirectional directives, whilst placing the target audience (care workers) at its core, who play the role of co-designers.

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A SOCIO-LEGAL INVESTIGATION INTO MAKING PLANS FOR DYING, PERSPECTIVES OF PEOPLE WITH DEMENTIA

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Abstract:

This paper will draw from my PhD research investigating how people with dementia are affected by mental capacity law in England and Wales. I use thematic discourse analysis of 20 interviews with people with dementia and their informal carers to show how interviewees plan for the future, including end-of-life plans.

The first theme, 'relational futures', examines how legal plans (and formalised/palliative care plans) are excluded from the care planning construct. Interviewees used and understood LPS's, wills, and other life planning tools in a limited way due to social and legal landscape is indicative of ageism, death culture, laws concept of individualistic personhood and agency, resulting in the limited impact of legal future planning tools.

In theme two, 'desired rights and control,' my analysis shows how interviewees desire to control, sometimes extending to assisted suicide or euthanasia. Interviewees are knowledgeable about the difficulties of choosing when to die and resist this unpredictability. This could be mitigated by; a better understanding of rights enabled by LPA's and the inclusion of people with dementia in debates of assisted suicide.

These data contribute to the arguments that there must be a more nuanced understanding of rights, ageism, death and dementia. The discursive exploration can help us understand societal views of death and dementia and propose legal improvements to assist people with dementia to plan care and die with desired control.

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AGEING MASCULINITY IN AMERICAN NOVELS SINCE THE 1970S

YAQIAN XU¹U2061569@live.warwick.ac.uk**Abstract:**

This paper considers the troubling of masculine identity in later life as a result of the ageing of the male body as represented in American novels. The literary texts it draws on include *Rabbit at Rest* by John Updike, *Middle Age: A Romance* by Joyce Carol Oates and *Olive Kitteridge* by Elizabeth Strout. Drawing on texts written after the 1970s, the decade when anti-ageing medicine and products start to gain popularity in social discourse, it will examine the influence of medical and consumerist discourses upon the individual interpretation of the relationship between the ageing body, masculinity, and self-identity. It will concentrate on the clash between the socially constructed standards for masculinity and changes in the ageing male body, such as illness, debilitation of sexual performance and ageing bodily appearance. More importantly, it will consider the individual negotiation of the confining discourses and the threat to masculinity in later life. It will argue that the resort to temporary pleasure against medical advice and consumerist discourse of healthy lifestyle, their enjoyment of sexual performance that is neither penetrative nor male-centered and their appreciation of ageing bodily features are indications of their acceptance of the ageing body and the positive aspects of a waning masculinity. In this way, it will indicate the diverse possibilities for ageing male individuals in later life. It will also compare the difference between the male and female authors in representing the individual negotiation of these changes in the experience of gender in later life.

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