Research Update: Older People

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Resettling Older Homeless People

Both the Sheffield Institute for Studies on Ageing at the University of Sheffield and the School for Policy Studies at the University of Bristol have recently completed research into housing and homelessness issues for older people. The research completed in Sheffield is a long-term study looking at the resettlement of older homeless people in London, Leeds and Sheffield. The study interviewed 64 people aged 50 years or over who were sleeping rough or living in hostels, and who had been re-housed in independent or supported accommodation. The clients were drawn from St Mungo's and St-Martin-in-the-Fields Social Care Unit in London, and St Anne's Shelter and Housing Action in Leeds and Sheffield. Participants involved in the study were monitored for two years after re-housing. Interviews were conducted every three months until they had experienced no problems for six months, with contact continuing every six months for the first 24 months of re-housing. The results look at the background and resettlement preparation of the older people who were re-housed; resettlement outcomes; and makes recommendations for improved resettlement practice. The full report, *Resettling older homeless people* by Maureen Crane and Anthony M. Warnes, is available from Sheffield Institute for Studies on Ageing, University of Sheffield. A fuller account of Crane's work in this field can be found in her book, reviewed in this issue. Details of this project, and other research on homelessness from the Sheffield Institute for Studies on Ageing, are also available on the website http://www.shef.ac.uk/sisa/ Research_Field_5.shtml. An additional briefing paper, outlining the results of the project in relation to resettlement services provided by St Mungo's, is also available at http://www.mungos.org/news. shtml.

Older People in the Private Rented Sector

Research funded by Help the Aged, conducted jointly by the School for Policy Studies at University of Bristol http://www.bristol.ac.uk/ Depts/SPS/index.html and the Faculty of Health and Social Care at the University of the West of England http://www.uwe.ac.uk/hsc/ looks at the housing histories of older private tenants and the issues they face. Qualitative research methods were used to explore the experiences of older people in the private rented sector, and their relationship with private landlords. Data were collected in 2001 from six areas in England using semi-structured interviews with 38 older private tenants, and 36 key people including local authority tenancy-relations officers, housing benefit officers, service providers in voluntary agencies, and private landlords. Results found that some of the tenants interviewed had experienced varying types and degrees of abuse by their landlords. Examples of landlords not carrying out necessary repairs; financial abuse; lack of privacy for tenants; and perceived or actual insecurity of tenure were all identified in the study. The research also found that these abuses were likely to cause tenants stress, ill health and sometimes loss of their home. The study also examined the wider impact of legislation, housing policy and the housing market, and how it may influence the behaviour of landlords towards older tenants. The full report, *The Harassment and Abuse of Older People in the Private Rented Sector* by Carlton et al was published by the Policy Press in 2003. Details of the research can also be found in a recent article by Izuhara and Heywood (2003) 'A life-time of inequality: a structural analysis of housing careers and issues facing older private tenants', *Ageing and Society*, 23(2): 207-224.

Care-Home Residents' Experiences of Relocation

Work carried out by from the Centre for Care of Older People http://online.northumbria.ac.uk/ faculties/hswe/research/ccop/ccop.htm, University of Northumbria, Newcastle upon Tyne also discusses the challenges of obtaining the participation of older people in research. The study aimed to identify patterns of relocation across care homes, describe strategies used by care-home staff to manage moves, and to explore older people's experiences of relocation. The researchers had to ensure that residents of the nursing and care-homes were able to understand and make decisions about their participation in the research. To tackle this problem, researchers discussed the project in detail with care staff, and care staff identified eligible participants. The residents identified were then given basic information about the study by care

staff and were also encouraged to discuss the study with friends, relatives and staff. Only when the residents were happy to be involved further did the researcher meet with them to discuss the project in detail. Consent was then obtained from those who agreed to take part in the project. However, the researchers acknowledged that this strategy relied on the good will and ability of the staff to identify potential participants, and may have created a bias towards residents with positive views. The project collected data from a sample of care homes in two local authorities, using a sampling strategy to include care homes located in diverse areas and covering residential, nursing and dual-registered homes. The study used a multiple method research design, with quantitative methods to define and analyse the incidence of resident relocations, and qualitative methods to describe the movers' experiences from both user and provider perspectives. Questionnaires to managers and case note audit were used to examine the frequency and nature of relocations into and between the care homes; focus groups and individual interviews with care home staff were arranged to examine the strategies developed to accommodate changes in a resident's needs; and two residents from each home were invited for interview to capture their experiences of relocation. The main themes and key practice issues arising from the interviews were identified using content analysis. Results found the extent to which residents' views were considered and their involvement in relocation decisions varied considerably. Factors identified which encouraged residents' involvement in decision making included residents being aware of their rights and choices; residents being able to communicate and debate choices with others; and residents having access relevant information - including information leaflets, visits to homes and talking to staff and residents - to enable them to make informed choices. Full details of the study can be found in: Cook et al (2001) *Moving In and Moving On: Transition of Older People Between and Within Care Homes. Centre for Care of Older People*, Newcastle upon Tyne: University of Northumbria. A recent related article focusing on older people's experiences of relocations is also available in: Cook et al (2003) 'Making a move: care-home residents experiences of relocation', *Ageing and Society*, 23(2): 225-241.

Older People's Participation in Mental Health Research

An American project recently reported in *The Gerontologist,* focuses specifically on methods of recruiting older people from ethnic minorities in mental health research and compares the effectiveness of traditional and consumer-centred models of recruitment and retention. The project was carried out by researchers from the University of California at San Francisco Over-60 Program; the Institute for Health and Aging, University of California; and the Lewin Group, Falls Church, VA. The research compares data from two mental health research studies. The first, a randomised trial examining the effectiveness of psychosocial interventions for treating depression in older low-income medical patients (PEPUP), used traditional methods to recruit to the research. Recruitment methods used were referral by primary care providers and self-referral in response to adverts in local newspapers, magazines, TV and radio. Research participants were encouraged to remain in the study by providing transportation to and from the research site; carrying out assessment interviews in the patient's home; providing monetary incentives for continued participation; and assigning the same research assistant to follow participants over time. The second study, Patient Access to Social Services (PASS), a randomised trial to evaluate the effectiveness of a social service model of care delivered in a community geriatric medicine clinic, used a consumer-centred model of recruitment. Through discussions with community leaders, relevant groups and providers, appropriate methods of recruitment for the target population were identified. In addition to referral from the primary care provider, participants were also recruited through targeted mailings and face-to-face recruitment within the neighbourhood primary care clinic. The researchers also attended weekly meetings at the clinic to work with physicians around recruitment issues. Additional methods used to encourage retention to the study included remaining in contact with participants between assessment periods and pre-scheduling interviews. The results of the comparison found that although both studies were successful in recruiting a largely minority, low-income, and frail population of older adults, consumer-centred methods were able to

retain substantially more minorities throughout the project. The researchers discuss factors contributing to recruitment and retention of participants in research including consultation with the target community, anticipating any difficulties involvement may cause the participant, and the feedback of research progress and results. The limitations of the findings are also acknowledged, as recruitment rates were compared across two different studies. Further details of the study can be found in: Arean et al (2003) 'Recruitment and retention of older minorities in mental health services research'. *The Gerontologist,* 43(1): 36-44.

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