

PENNELL NETWORK NEWSLETTER September 2007

We established the Pennell Network earlier this year so those interested in helping to improve the work, health and well-being of women in mid-life have a forum to exchange views and raise awareness of key issues.

Date for the diary

Our second Pennell Network seminar will be held on 22 November. It will be chaired by Liz Barclay, presenter of the Radio 4 programme *You and Yours*. Amanda Griffiths, Professor of Occupational Health Psychology at the Institute of Work, Health and Organisations at the University of Nottingham, and Caroline Waters, Director, People & Policy for the BT Group, have kindly agreed to speak.

Amanda Griffiths will discuss her research on women's experience of ageing at work and the impact of the menopause. Caroline Waters will speak about the work of Employers for Carers and the approach employers such as BT are taking to help their employees manage their caring commitments, particularly now that the right to request flexible working has been extended to the carers of adults.

Their presentations will be followed by a discussion and a drinks reception. The afternoon event will be held at the King's Fund in Central London. We will be sending invitations and a detailed programme to Pennell Network members in due course.

Older men, health and work

Although the Pennell Network's focus is women in mid-life, we thought members might be interested to know that Help the Aged and TAEN have commissioned a literature review on older men, work and health to complement the report *Older Women, Work and Health* which we issued last November.

Dr Gillian Granville, Senior Research Fellow at the Centre for Research on Ageing at the University of Southampton, is the lead researcher for the review which we hope to publish early next year.

The commissioning of this research is particularly timely as the Men's Health Forum, which TAEN has recently joined, has chosen the theme of men and work for their 2008 National Men's Health Week.

Study on how people cope with incontinence at work

Incontinence is associated with stigma and thus a little discussed subject but failure to manage it can lead to embarrassment, exclusion and restricts employment opportunities.

Debra Evans, information and knowledge manager at PromoCon, a service of the charity Disabled Living which provides impartial advice and information about continence products and services, conducted a study to determine the impact of continence problems on a person's ability at work.

Although a number of medical conditions may result in bladder and bowel dysfunction, it is acknowledged that women sometimes expect a degree of incontinence following childbirth or during the menopause.

In a survey of 62 people aged between 16 and 65, the majority of whom (85%) were working, more than half (52%) said they had not disclosed their incontinence to anyone at work. Respondents were concerned they might not receive support, citing embarrassment, a lack of trust in their managers to keep the information confidential, worry they would be subject to ridicule or that they would be treated differently.

Surprisingly, in view of the higher prevalence of incontinence in women, more than 70% of the respondents were men, suggesting the work environment may make it more difficult for them to manage their continence problems.

Interestingly, most individuals who had consulted a GP were not asked how they coped at work. More than half of those who had seen a consultant said the issue had not been discussed while a third indicated that it had not even been raised by their continence adviser.

The respondents made a number of recommendations that could be put in place by employers without incurring significant costs. These included the provision of adequate toilet and disposal facilities with adequate supplies of toilet paper; regular comfort breaks and changes in company policy, where necessary, so that staff should not have to share hotel rooms when working away from home. They also suggested putting stickers in toilet cubicles directing staff with continence problems to healthcare professionals.

Debra Evans believes HR and occupational health professionals need to be made aware of incontinence issues so they can offer practical support and a sensitive approach. For further information please contact her: debra.evans@disabledliving.co.uk

Help the Aged research into incontinence and related issues

Qualitative research published by Help the Aged (HtA) in May this year uncovered a considerable link between incontinence and social isolation among older people. The research highlights how embarrassment of the condition prevents many older people from seeking help either from family or friends.

Pamela Holmes, healthy ageing policy manager at HtA, comments: "One in three of us will develop incontinence at some point in our lives. Although it is more common in older age, incontinence is not an inevitable part of ageing and we need more research into the causes, prevention and treatment of it.

"It violates human rights and denies dignity when councils are closing more and more public toilets, despite the fact there is less than one public toilet for every 10,000 people in the UK."

HtA has published the following:

- *Incontinence and Older people: is there a link to social isolation?*
- *Nowhere to Go: public toilet provision in the UK*
- *Taking Control of Incontinence: exploring the links with social isolation*

They are available on the Healthy Ageing section of HtA's policy website: <http://policy.helptheaged.org.uk>

Osteoporosis recommended for inclusion within performance measures for GPs

The Information Centre for Health and Social Care, the special health authority that collects, analyses and distributes national statistics on health and social care, commissioned earlier this year the first national evaluation of standards of care for osteoporosis and falls in primary care. The findings were published on 31 August.

The report says that including osteoporosis and falls within the Quality Outcomes Framework (QOF) in the new GP contract could rapidly improve both provision of care and recording of relevant information, as has been seen in other clinical areas.

The new study found that current achievement of best practice appears highest in prescribing appropriate drugs to people with diagnosed osteoporosis but for other aspects of care, current achievement appears low. For example, according to electronic medical records, only one in ten older women with a previous fragility fracture had been referred for a bone density scan and for older men the proportion was even lower, at one in 50. Fewer than one in 50 older people recorded as having a high risk of falling had a recorded referral to a falls service or exercise programme.

According to the National Osteoporosis Society, one in two women and one in five men over the age of 50 in the UK will break a bone mainly because of osteoporosis. Three million people are at risk of osteoporosis.

NICE appraisal of osteoporosis treatments

Help the Aged (HtA) is supporting the National Osteoporosis Society (NOS)

by calling on NICE to rethink its latest appraisal of osteoporosis treatments, which limits first line treatment to just one drug – alendronate – which is not suitable for all patients. This limitation on treatment will mean that up to one in four patients will potentially be denied treatment on the NHS and be put at risk of breaking bones unnecessarily.

More information and the NOS petition are on www.nos.org.uk. The petition can also be found on the Downing Street e-petition website on <http://petitions.pm.gov.uk/osteoporosis/>. The NOS and HtA are urging supporters to sign up and also email this link to as many of their friends and relatives as possible. The number of signatures really matters, on both petitions.

Health and Older Workers

TAEN and HtA co-hosted a seminar with Dame Carol Black, the National Director for Health and Work, on 4 September. The aim of the seminar, conducted under Chatham House Rules, was to bring together employers and occupational health professionals to discuss issues relating to the ageing workforce and the health and well-being of older workers.

We hope to develop recommendations arising from the discussion.

Member activities

Two Pennell Network members are running programmes that address mid-life issues, including health. The Springboard Consultancy's Fresh Steps programme focuses on individuals while Agewell Sandwell's *Midlife Future Planning* course is designed for both employers and employees.

Fresh Steps for older women

Following more than two years of research involving 14 diverse organisations, the Springboard Consultancy has identified a wide range of issues for older workers. Of the people interviewed in the research phase, 70% were older women. At the top of their list of worries for the future were health and money.

Often their concerns were generalised, with a vague sense of foreboding about the possibilities of deteriorating physical and mental health after the age of 50, but many of their concerns could easily be addressed by gaining information. Alzheimer's disease was frequently mentioned as being the illness most greatly feared, but when the women were more closely questioned, they usually had little knowledge about Alzheimer's and the word was being used as short-hand for everything they most dreaded.

In response to the issues raised by this research and by their employers, Springboard Consultancy designed and launched a new personal and work development programme for older workers, entitled 'Fresh Steps'. It enables participants to take a pragmatic and objective look at their lives and to take steps to tackle the issues most pertinent to them. Health issues are tackled head on – participants are helped to identify what's worrying them, and then to gather professional advice and information as part of a five-week information gathering project.

"People come back after the five weeks with a sparkle in their eyes and a spring in their step," says Liz Willis, Chief Executive of the Springboard Consultancy. "One woman refused to think about her future because she was convinced she was going to die in her early 50s. This was a reasonable assumption because all the female

members of her family had died young, due to a genetic abnormality. However, because she was on the Fresh Steps programme, she went to see her GP and discovered that, with advances in medical science, it was now treatable and a world of new possibilities opened up for her."

Dr Richard Westcott MA, FRC, GP, who contributed the medical content of the programme, comments: "In my professional experience, it's often fear (and the underlying ignorance) of a condition, that is the problem. If that fear can be brought out into the light of day, it can be confronted and positive action taken. Nearly always things can be done by that person herself which result in, at the very least, an improvement, and sometimes complete resolution. 'Fresh Steps' is particularly strong on creating an atmosphere of trust and support, which facilitates this. And by building a sense of self-help and autonomy, participants are helped to develop further their own confidence in themselves, their achievements and so to look forward to, and plan for, the future optimistically.

"Of course, this programme is not primarily about tackling health problems. But the holistic approach allows for health issues – and especially worries – to be seen and dealt with in the wider context of self development. Health related anxieties which hold back and inhibit positive thinking are too often ignored. The companionship and sharing of concerns which 'Fresh Steps' encourages provides an opportunity to appreciate how much we all worry about the same sort of things, and how irrational we can all be about all this, which tends to generate inertia. When in fact there's so much we can do, quite simply, by ourselves, to prevent problems, and then move onwards."

In addition to tackling health and financial matters, Fresh Steps also enables people to get a fresh perspective on their lives, reassess their priorities, clear out the things that are holding them back, put themselves across positively, turn their age and experience into an asset and give themselves a real boost!

'Fresh Steps' programmes are available through licensed trainers across the UK. For details on how to become a licensed trainer yourself, or how to enrol as a participant, contact Liz Willis on 01271-850828, email liz@springboardconsultancy.com or look on their website: www.springboardconsultancy.com

Agewell Sandwell

Midlife should not be a crisis

Agewell Sandwell was formed to promote the health and well-being of local older people and is funded by Sandwell Primary Care Trusts. Agewell's key principle is to involve older people in decision-making about matters that affect their lives. The aim is to challenge ageist stereotypes and promote a positive role in the community for older people.

Agewell has designed a training programme *Midlife Future Planning* for companies employing workers aged 50+. It is run by two Midlife Planning Co-ordinators, Monica David and Stuart Munger. Stuart Munger previously devised a pre-retirement programme for Wolverhampton PCT employees.

The *Midlife Future Planning* course, covers health, finance, leisure and relationships. It enables people to make lifestyle and work choices much earlier in order to promote a better quality of life whether their choice is to continue working or retire.

Midlife Future Planning was piloted amongst healthcare professionals as part of the NHS Improving Working Lives initiative. It is now part of a training programme for all Sandwell Primary Care staff aged over 50.

Agewell works with larger companies and with small and medium sized enterprises who have responded enthusiastically to the programme. Agewell works in association with Workwell (a health at work programme within Sandwell Primary Care Trusts) who have considerable experience of working with local businesses. Agewell and Workwell ran one of eight National Pre-retirement Pilot schemes in 2001-2003 managed by the Department of Health and overseen by the Health Development Agency (HDA).

Agewell surveyed employers and employees and held focus groups of recently retired people to help identify the needs of people coming up to retirement. The findings showed that people need a lot of time to plan ahead, and confirmed the HDA thesis that people in mid-life are receptive to making changes to their lifestyle.

Monica David states: "The manufacturing emphasis of many traditional Black Country workplaces is not seen as an attractive career option by younger people and so the retention of older workers is a key issue.

"The *Midlife Future Planning* programme helps both employers and employees. Some older people want or need to carry on working beyond pension age and the course helps them think ahead about the options open to them. Many employers in the area suffer from the 'loss of worker, loss of skill' syndrome and the course aims to help them consider how to address retraining and retention issues. Offering flexible working

options is one of several possible changes they can make. The UK has an ageing population and workforce and employers need to consider what they should do to take advantage of the knowledge and skills of older workers.”

For further information contact Monica David or Stuart Munger on 0121 525 7605 or email agewell@agewellinsandwell.org.uk

Natural Menopause Kit

Pennell Network member Diana Moran, well known for her television work on fitness and physical activity, has contributed to Dr Maryon Stewart’s Natural Menopause Kit. The Kit includes a DVD which features an easy-to-follow exercise session led by Diana and advice on physical activity.

Maryon Stewart’s menopause programme* involves going through the process ‘naturally’ without recourse to hormone replacement therapy. For further information see www.naturalmenopause.com

* The reference to this programme in this Newsletter does not imply an endorsement of the natural menopause programme by either Help the Aged or TAEN.

Newsletter contributions

We welcome contributions to the newsletter. Please contact Corinna Stowell at TAEN if you would like us to include a contribution or if you want to draw our attention to an event, an interesting news item, piece of work or research.

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