

## Reviews

DOI: 10.1017/S0144686X03211570

John Killick and Kate Allan, *Communication and the Care of People with Dementia*, Open University Press, Buckingham, 2001, 338 pp., pbk £19.99, ISBN 0 335 20774 X.

For those of us who have worked in, commented upon and observed the dementia care field for some time, it is rewarding to see the condition being opened up on several fronts and inclusivity becoming a dominant paradigm. Over the last few years, people with dementia have themselves been advocating change (Friedell and Bryden 2002; Sterin 2002). They have moved into the field of policy and service consultation to challenge the passive and negative stereotype of dementia as ‘a living death’ rather than a life being lived (Woods 1989). Movements such as *Dementia Advocacy and Support Network International* ([www.dasninternational.org](http://www.dasninternational.org)) continue to give the agenda for change momentum, and it is being taken forward in England by the *National Service Framework for Older People*, for its Standard 2 commits to ‘person-centred care’ (Department of Health 2001). Moreover, this recognition of the value of the person has coincided with the new drugs for dementia that offer hope if not cure for some with an early diagnosis of Alzheimer’s disease.

Whilst the world around us may be altering its perceptions about what it is to be a person with dementia, there are some constants in care approaches. Communication is one of those constants. In this book, John Killick and Kate Allan understand this and have produced an engaging text that takes the reader on a journey through the lived experience of dementia. The text is a product of communication and a sense of partnership between the authors. As Kate Allan states in the Introduction, John Killick endured ‘a lot of cross-questioning in the course of our collaboration’ (p. 2) and this dynamic most probably influenced the author’s own methods and motivations in the production of the book. For example, illustrations and reflections on what worked in communication, what didn’t and how we can learn from our experiences are provided at the turn of each page. Indeed, the authors’ attachment to people with dementia, their families and care staff informs the text and the underpinning narrative. Both authors have a deep-seated commitment to be with people with dementia, to engage in their lives and to understand the lived experience through the eyes, emotions and experiences of those who know it best. Put simply, you need to want to be with the person with dementia if communication is going to be effective; without this basic desire, there can be little reward or meaning to an encounter.

As the authors readily admit, they do not set out to describe a theory of communication and dementia. They have divided their book into five parts. Part 1, ‘Basics’, has six chapters which introduce key issues such as personhood, non-verbal communication, language and memory. As elsewhere, personal experiences are provided as concept illustrations and I was particularly touched by the

following words uttered by a person with dementia: 'It's the memory that's really defeating us, and I actually am not in this world at all' (p. 100). Talk about throwing down a challenge to help make sense of a shifting reality. Part 2, 'Practicalities', comprises four supporting chapters that provide practical advice to the reader on the process of starting, developing and ending interactions, a process that is also in the gift of people with dementia. Importantly, the text also supports the value of silence. Tips are provided on the use of writing with people with dementia as a creative outlet and as a means of validating the person and their experience. Part 3, 'Themes', has three supporting chapters covering the ground of narrative, relationships and awareness. The penultimate section of the book, 'Implications', has two supporting chapters and addresses 'implications for care' and 'ethics'. It was especially pleasing to see a chapter on ethics as it would have been all too easy to avoid tackling sensitive issues. For instance, it is important (for practitioners) to reflect upon whether or not their approach to communication has been helpful to the person, and to consider the limits of their abilities. The final section of the book has one four-page chapter. It shares the narrative of Jane Arnell, a person with dementia who lives in a care-home, and documents her thoughts on her life experience. These few pages should be essential reading on courses and programmes of study that involve the training of care staff who wish to work with people with dementia, because the words teach us the importance of listening and the need to see people in a biographical context. As importantly, it shares the philosophy of communication as a product of a relationship.

It is no surprise to find that both authors have an affiliation to the Dementia Services Development Centre at the University of Stirling, as it has been the source of many important and creative developments in the field of dementia care since the late 1980s. At its heart this book is about making a difference, seeing what is possible and what resources we can draw on (personal, spiritual, physical, creative) to make such possibilities real and tangible. It is an excellent text and thoroughly recommended.

## References

- Department of Health 2001. *National Service Framework for Older People: Modern Standards and Service Models*. Department of Health, London.
- Friedell, M. and Bryden, B. C. 2002. A word from two turtles. *Dementia: The International Journal of Social Research and Practice*, 1, 2, 131–3.
- Sterin, G. J. 2002. Essay on a word: a lived experience of Alzheimer's disease. *Dementia: The International Journal of Social Research and Practice*, 1, 1, 7–10.
- Woods, R. T. 1989. *Alzheimer's Disease: Coping with a Living Death*. Souvenir, London.

School of Nursing, Midwifery and Health,  
University of Wales, Bangor

JOHN KEADY

DOI: 10.1017/S0144686X03221577

S. D. Gokhale, N. Pandit and M. Gonsalves (eds), *Ageing in Search of its Identity*, Aameya, Pune, India, 2002, 332 pp., US\$ 10.00, ISBN 81 86172 75 0.

Frederick L. Ahearn (ed.), *Issues in Global Aging*, Haworth, New York, 2001, 165 pp., hbk US\$ 44.95, ISBN 0 7890 1439 4, pbk US\$ 24.95, ISBN 0 7890 1440 8.

One of these edited collections is sponsored by the *International Federation on Ageing* (IFA) and its national secretariat in India, and the other is a set of short essays in commemoration of Daniel Thurz (it has been simultaneously published as part 3/4 of volume 20 of *Social Thought*). *Ageing in Search of its Identity* presents a comprehensive view of ageing from the point of view of office holders in international governmental and non-governmental organisations (NGOs). The contributors read like a roll call of the international great and good in ageing, and they have written their short chapters clearly. This is, therefore, an ideal book for anyone wishing an overview of the exhortation, bureaucratic endeavour and voluntary action that comprises global policy on ageing. It was written before the *Second World Assembly on Ageing* in April 2002 in Madrid, but offers a solid foundation in global policy thinking and action. It can be quickly updated from the Internet (<http://www.un.org/ageing/>). The appendices usefully list two foundation documents: the United Nations *Principles for Older Persons* (1991), and the International Federation on Ageing *Declaration on the Rights and Responsibilities of Older Persons*.

The first section offers a short but comprehensive history of the formation of international policy on ageing. The second discusses the UN Principles on Ageing in greater depth with chapters by Charlotte Nusberg and Helen Hamlin. The third section is headed 'Approaches to ageing' and covers pension reform, extended working lives and the ageing labour force, active-ageing, and economic security. The emphasis is on the contributions of NGOs in generating international policies. The final section concentrates on the participation of older people and their pressure groups. While the emphasis is on India and Asia, Nana Apt gives an overview of Africa and there is a useful discussion of ageing and family life in Argentina from Oddone. Teachers of gerontology looking to add an international dimension to their courses will find this a very useful addition to reading lists. It also seems likely that copyright would not be withheld if individual chapters were to be placed on web-based reading lists, given the public nature of the issues covered and the international sponsors.

The contributors to *Issues in Global Aging* provide a useful overview of the topic of an ageing and mainly American world, balancing the need to hype an upcoming crisis against the more measured view that older people are not a homogenous rising tide bringing disaster. As the editor rightly states, 'all societies are enriched by their older citizens who are repositories of values, tradition, culture and knowledge'. It is easy to forget this obvious truth amid the unremitting stream of popular and scientific discourse that sees older people as an almost unbearable burden.

The first section, 'Global dimensions', covers demography, social security and pensions, care-giving and, more unusually, a chapter by Grace Clark on the

Islamic *zakat* system of charitable giving which has been harnessed by some governments as a welfare tool. She examines this system in Pakistan and concludes that three per cent of older people receive some income from *zakat* but that payments are very low. It remains to be seen whether the system will spread and can be transformed into a viable means of support for older people in Islamic countries. The second section takes a welcome look at 'Religion, spirituality and ageing'. The emphasis is on Catholicism, Judaism and social work, as one might expect from Daniel Thurz. The contributors are very positive about the spiritual possibilities of ageing but seem stronger on how things should be for older men and women, rather than on evidence from religious elders themselves.

Department of Social Policy,  
London School of Economics and Political Science

GAIL WILSON

DOI: 10.1017/S0144686X03231573

Keith Sumner (ed.), *Our Homes, Our Lives: Choice in Later Life Living Arrangements*, Centre for Policy on Ageing and the Housing Corporation, London, 2002, 208 pp., pbk £15.00, ISBN 1 901097 85 4.

*Our Homes, Our Lives* has been written by academics, researchers, and housing and social care professionals and managers from care-provider organisations. With such diverse contributors, the book achieves its aim of providing a comprehensive summary of the main historical and contemporary issues in British housing provision for older people. Chapter 1 provides an overview of the housing options available to older people in Britain today and outlines the two main principles that should inform housing provision: choice and diversity, each with the full and active involvement of older people in planning and decision making. Chapter 2 sets the scene with a useful analysis of the changing profile of older people and the implications of this change for housing policy and practice. There is also a description of the deficiencies of residential care in the light of the existence of a variety of needs and views and consequently the importance of real choice and diversity. Chapter 3 describes the institutional-domestic distinction that continues to dominate housing policy and which has led to the limited current accommodation options for older people in terms of housing type and location, internal layout, social configurations and systems of help and support. In Chapter 4 we are offered an examination of the trends in living arrangements for older people, such as changes in proximity between older people and their children, and the possible implications of present and future demographic changes.

An analysis of the relationship between current housing policies and what older people appear to want in terms of accommodation styles and locations is given in Chapter 5. This highlights the difficulty of matching the concept of choice with availability due to resource limitations and the emphasis on avoiding hospital, for largely financial reasons. Chapter 6 examines co-housing, an alternative model of housing provision for older people that is popular in parts of Europe and North America. Such initiatives challenge the prevailing stereotypes of older people by enabling service user control of the whole housing process, from input into the design of accommodation through to choosing who the tenants are.

Chapter 7 provides an architectural view of housing. This examines how architects can shape future living arrangements for older people, and we are given an interesting description of the history of 'special needs' housing and how this model of isolated, self contained and inward looking communal housing continues to dominate today in the form of sheltered housing. The author describes how housing design standards contribute to the low quality of housing provision for older people by specifying lower space standards and stereotyped designs, and argues for an end to the distinction between 'special needs' and mainstream housing, proposing instead better design of all housing according to the principles of 'lifetime' homes that can meet the changing needs of people as they grow older.

The underlying argument presented in this book is that current United Kingdom policy on housing for older people is based on unfounded assumptions. The stereotypical progressive path from independent living to being cared for is shown to be too simplistic and to lead to the illusion of choice in housing for older people, while the assumption that all older people want to stay in mainstream housing for as long as possible is contradicted by the views of older people themselves. The arguments are convincingly made and well backed up by research and statistics. Each chapter finishes with one or two commentaries, in which various experts follow up in more detail some of the themes raised. This technique leads to a certain amount of duplication but in general successfully broadens the scope and interest of the book. Overall, the varied, though-provoking and accessible writing provided by this book should make it valuable to students, practitioners and policy makers alike.

Faculty of Health and Social Care,  
University of the West of England, Bristol

SIMON EVANS

DOI: 10.1017/S0144686X0324157X

Mary Lee Hummert and Jon F. Nussbaum (eds), *Aging, Communication and Health: Linking Research and Practice for Successful Aging*, Lawrence Erlbaum Associates, Mahwah, New Jersey, 2001, 317 pp., hbk £42.95, ISBN 0 8058 3379 X.

Although this book 'grew' from research presented at the Third International Conference on 'Communication, Aging and Health' in 1996 in Kansas City, it is much more than a collection of conference presentations. The editors had the twin goals of reflecting the highest levels of scholarship and intellectual rigour and of offering practical guidance to 'readers dealing with these issues in their own lives'. Given that the intended readership encompasses older people, family members and practitioners, as well as policy makers and academics, this was no easy task. Each contributor was asked to end their chapter with suggestions as to how readers could apply the research in their own interactions, but inevitably the extent to which older people and practitioners could use each chapter is extremely variable. This brave attempt has however led to a more accessible volume than many in its field.

The diverse contributors have been drawn from various disciplines and from several countries. Their topics range from tele-medicine to family care-giving, and from inter-generational communication to physician–patient relationships. An epilogue by Ryan and Norris seeks to draw together the various contributions. This is built around the negative feedback ‘communication predicament model’, and an intervention model which aims to reverse this process, ‘the communication enhancement model’. Essentially they argue that communication between older people and health care providers is often distorted and rendered ineffective because of the stereotypical expectations of the health-care provider, which often serve to elicit age-stereotyped behaviour from the older person with health problems. They argue for an individualised, empowering approach to the older person.

A good example of such an approach is provided by Astrid Norberg in her insightful account of communication with people with severe dementia. She describes the suffering of the person in severe dementia as akin to a feeling of homelessness, as well as one of disintegration. Added to these aspects of suffering are the impacts of poor environments and of being degraded. Norberg describes consoling care, to promote an experience of ‘being at home’, and integrity, a sense of communion between patients and carers, and explores communication through the language of emotion.

Several chapters focus on communication within families and family care-giving. Hummert and Morgan provide insights into family decision-making processes, in relation to issues of dependency, and provide by way of illustration detailed interview material. Garstka, McCallion and Toseland provide a useful overview of the use of support groups with care-givers, and offer several practical suggestions for those involved in such groups. In contrast to most accounts of care-giving relationships that focus on the well-being of the care-giver, Edwards presents data showing the impact on the care-receiver. She makes the point that care-giver and care-receiver well-being and behaviour have a circular relationship, rather than being uni-directional as is often implied in discussions of care-giver stress. She concludes that different factors pertain to spousal as opposed to filial relationships, with conflict being less important in the latter.

Of the chapters dealing with professional–patient interactions, Justine and Nikolas Coupland’s detailed analysis of interviews between geriatricians and older patients with a third-party (typically the patient’s son or daughter) present, provides a great deal of food for thought. They show clearly that the older person is often sidelined, even in a clinic with a strong commitment to anti-ageist practice, because the third-party engages with the doctor and the patient becomes the subject of third-person reference. This is a book that has much to offer to many health-care professionals. When the existence of age discrimination is being acknowledged and challenged in health-care settings, it serves above all to demonstrate how stereotyping attitudes reveal themselves and are shaped through communication at a micro-level. The book would be a useful reader for a course in gerontology related to health-care provision.

Centre for Social Policy Research and Development,  
University of Wales, Bangor

BOB WOODS

DOI: 10.1017/S0144686X03251576

V. L. Bengtson, T. J. Biblarz and R. E. L. Roberts, *How Families Still Matter: A Longitudinal Study of Youth in Two Generations*, Cambridge University Press, Cambridge, 2001, 238 pp., pbk £15.25, ISBN 0 521 00954 5.

Social theorists like Ulrich Beck argue that, as the long arm of tradition has lifted, the onus is on individuals to construct their own lives and create 'families of choice'. In short the growth of individualism and the 'detraditionalisation' of society are said to fracture family ties and turn us into atomised individuals. With increased longevity in the population, however, families increasingly have three generations of kin alive simultaneously. By the age of 50 years, three-fifths of the British population still have a living parent and just over a third are grandparents (Grundy, Murphy and Shelton 1999). There is also a rise in four generation families, with one-third of those aged 80 and more years being a member, as are one-fifth of those aged 20–29 and 50–59 years, and a quarter of those in their thirties. There is a case to be made that, with the weakening of horizontal household ties through divorce, vertical inter-generational transfers and transmissions are becoming more not less important. *How Families Still Matter* provides evidence in support of this case.

Currently there is no inter-generational study in Britain to match this local United States study. Nor can we hope to catch up now. In this study, people from three generations of over 500 American families were recruited in 1971 through the records of a large Health Maintenance Organisation and followed at regular intervals until the 1990s. Grandparents, their parents and their grandchildren were followed up five times, and members of the succeeding generation were added as they were born. Unlike some European inter-generational studies, however, the sample was not national, but restricted to southern California. Moreover the first wave of these families was largely white and working class. Sadly, the type of data collected is such that it only lends itself to quantitative analysis and to an 'outcome approach'. The study is also rather limited theoretically; there is little on the *processes* of inter-generational transmission.

Family generations are compared on values (family values such as feelings of closeness), achievement and aspirations (educational and occupational), and self-esteem. The quantitative analysis is organised around comparisons of particular variables over time with respect to different family generations. An opportunity to examine the transfer of material assets, such as financial transfers, and cash sums and services, such as childcare, was not created. Thus public policy makers seeking support for 'asset-based welfare' and self-provision, a central strand of American (and increasingly British) public policy, in which a minimalist state seeks to encourage its citizens to build up their own assets for themselves and their children, will be rather disappointed by this study.

Having made these caveats, there are nonetheless many interesting findings. These refute several myths, as about family decline, and the effects of divorce and maternal employment. For example, contrary to 'the family is in decline' thesis, the authors conclude that families remain key sites for guidance and support, and that fathers have a positive role to play. Divorce appears to have fewer negative

effects than other studies suggest, while the effects of maternal employment on child well-being are found to be 'negligible'.

To give some sense of past generations and associated popular myths, two very different cohorts are compared, referred to as the 'Baby Boomers' (born in the 1960s) and 'Generation X' (born in the 1970s). Far from emerging as a generation of individualistic, under-achieving slackers with low self esteem, people in Generation X are found to hold less individualistic values than their Baby Boomer parents at the same age (26 years before), and have higher educational occupational aspirations and higher levels of self-esteem. Thus it is argued that the high divorce rates and high levels of maternal employment experienced by this generation, which were prevalent during their parents' lives, has not had the predicted adverse effects. Some clues to this outcome are suggested in the reported feelings of solidarity and closeness that this generation has towards its parents, mothers in particular. The authors demonstrate moreover that, despite the very different social context, children continue to 'model' themselves upon their parents but only when they are *close* to them. The authors conclude that where family 'resources' may be obviously lacking, as in post-divorce families, there may be 'compensatory processes' at work which draw upon parent-like figures, notably grandparents. This contention (not explored in the study) supports the idea that inter-generational ties may be becoming more rather than less important and is a topic for further research.

On the other hand, Bengtson and his co-authors found that non-divorced two parent families are more successful in their children's socialisation compared with yesterday's two parent families. They attribute this to the growth of equalitarianism through women's higher educational achievement, which may have enhanced the self-esteem and values of their children. In short, this book presents a very optimistic picture and provides some evidence that increased longevity and active life expectancy may be interacting with changing family patterns to facilitate new kinds of extended families.

## Reference

Grundy, E., Murphy, M. and Shelton, N. 1999. Looking beyond the household: inter-generational perspectives on living kin and contacts with kin in Great Britain. *Population Trends*, 97, 19–27.

Thomas Coram Research Unit,  
Institute of Education, London

JULIA BRANNEN



DOI: 10.1017/S0144686X03261572

Jenny Hockey and Allison James, *Social Identities Across The Life Course*, Palgrave Macmillan, Basingstoke, Hampshire, 2002, 244 pp., pbk £16.99, ISBN 0 333 91284 5.

Readers of *Ageing & Society* will have no problem with the question with which this book opens, 'How do we come to know we are ageing?' (p. 3). The core issue in the three sections and eleven chapters comprising this volume is the dilemma which confronts us when we attempt to make sense of the experience of growing older. More specifically, the problem we face is the elusive nature of biological ageing. Although the body is inevitably and inescapably a 'material entity' (p. 8) and ageing is 'bodily-based' (p. 15), our lived experience of this process is hard to define and consequently not easily explained. As the authors put it in a memorable phrase, ageing 'takes place behind our backs, creeps up on us and is not, therefore, easily amenable to self-articulation' (p. 34). For this reason, we can only make sense of biological ageing in the context of social relationships and through the medium of the cultural resources (verbal and visual images) that we draw on to give shape and substance to the changes associated with growing older. In the authors' view, ageing is best understood as a process of 'embodied movement' (p. 53) from one age-based social identity to another. Whilst the phrase indicates that there may be no escape from the body, the fact of movement reflects our awareness that the body/identity/self relationship is not eternally fixed and that life, as the use of the term 'life course' implies, is a fluid series of events during which we adopt various age-based identities in interaction with other people.

It is here that the authors' critical engagement with the conventional categories into which the western life course is divided is the most helpful. The life course, in common with all human forms of social organisation and categorisation, is described as a series of living actions and experiences brought into being during the course of everyday social interaction. What the authors wish to emphasise is the tension between socially prescribed age-related identities such as childhood, middle age and old age, and the variety of subjective experiences of these so-called 'structures'. In this view, identity is not 'unitary' in its relation to selfhood but 'a negotiated, unstable assemblage of ideas and perceptions' (p. 4). If we accept this assessment, then ageing becomes, potentially at least, much more unpredictable and open to individual innovation than is presupposed in the more traditional model of life as organised into a series of 'ages and stages of life' which are metaphorically derived from the biological cycles of the natural world.

How then does biological age contribute to the experience of social identity? The authors argue persuasively that the ageing process is one of 'becoming'; of moving from one identity to another as the lifespan unfolds. And yet the subtleties of these processes require much more careful investigation than is sometimes supposed. If the key to understanding ageing is to be found in the painstaking analysis of the ways in which individuals negotiate their identities as they make age-related transitions into later life, then the chances are that we shall gather much more empirical evidence in support of the currently over-theorised 'social construction' of ageing. Through a series of anthropological and sociological

'case studies', the authors show how in non-western and western societies biological ageing is marked upon the body through ritual and transitional practices with which individuals identify in a variety of ways.

Awareness of the essential condition of fluidity and change takes us, of course, into the overheated debate about the transformation of the future of ageing by the forces associated with post-modernity. The authors offer a balanced assessment and conclude that contemporary western society is characterised by the continuing influence of traditional models of ageing, qualified and modified at various points by evidence of post-modern fragmentation and innovation. Ten years after the publication of *Growing Up and Growing Old* (1993), this book is a welcome sequel and will feature as a key text in undergraduate reading lists in social gerontology and the sociology of ageing and the life course, and be essential reading for anyone who wishes to be informed about contemporary thinking about the processes of ageing into old age. Their concluding sentence offers a timely summary of the situation confronting us all: 'Thus, though as middle-aged women we are supposedly completing this book within a post-modern context which has seen a withering away of age-based identities, the transcendence of age, as we know from our own experience, requires constant vigilance over bodies which nonetheless persist in ageing' (p. 214).

## Reference

Hockey, J. 1993. *Growing Up and Growing Old: Ageing and Dependency in the Life Course*. Sage, London.

Department of Sociology,  
University of Aberdeen

MIKE HEPWORTH

DOI: 10.1017/S0144686X03271579

Jenny Hockey and David Clark (eds), *Palliative Care for Older People in Care Homes*, Open University Press, Buckingham, 2002, 186 pp., hbk £65.00, ISBN 0 335 210619, pbk £19.99, ISBN 0 335 210600.

In recent years, interest in the circumstances in which older people die has grown and comparisons have been drawn between palliative care, most commonly associated with deaths from cancer, and care for older people who are dying, often with more complex health problems. Since increasing numbers of older people die in care-homes, a book that emphasises good practice development is, as Ian Philp remarks in his introduction, timely. This is an edited collection from members of the University of Sheffield team which has produced a range of key texts on palliative care. It is likely to be of greatest interest to those working or studying in the field of health and social care for older people, but should also have a broader appeal to gerontologists and those with an interest in developing palliative care.

The book has ten chapters which, together with the introduction and conclusion, provide the reader with a solid overview of key themes and issues. These

include questions about the prolongation of treatment, autonomy and the capacity to consent to treatment, and openness about older people's physical health and proximity to death. Research evidence underpins the discussions and there are useful comparisons from The Netherlands (Baar and van der Kloot Meijburg) and Australia (Parker and McLeod), where practice is more advanced in many ways than in the United Kingdom. For example, in The Netherlands nursing homes have developed considerable expertise and are engaged in training and education beyond the care-home sector.

As Davies and Seymour point out in their scene-setting chapter, contemporary trends indicate a shift away from deaths in hospital towards deaths in care-homes. Deaths at home are not likely to increase given contemporary trends in living arrangements. This means that the need to develop good practice in care-homes is pressing. Vallis and Boyd argue, however, that contemporary provision for older people raises serious questions about justice. As they point out, 'providing "good deaths" demands resources, including adequate staffing, facilities, equipment and access to specialist back-up' (p. 132). Unless these requirements are recognised, the aim of improving practice within care-homes is likely to be seriously impeded.

Current trends amount to a *de facto* privatisation of health care for older people. When we consider that, at any age, demands on the health service are greater in the time immediately preceding death than at any other point in the life course, it is clear that the current allocation of resources for end-of-life care amounts to age-based discrimination. This book, however, focuses more on the internal functioning of care-homes and ways of improving practice. Implications for practice arising out of discussions are summarised by the authors at the end of each chapter.

In their chapter on 'Loss and change', Reed and co-authors point out that care-homes have been negatively associated with institutionalisation and a rational economic approach to service provision that privileges efficiency over care concerns. They argue, however, that practice can be improved through more creative ways of working. Some contributors focus on particular aspects of care. Orchard, for example, draws on research in the Trent region of the English Midlands to discuss spiritual care (a basic tenet of the palliative care approach), how it is understood and incorporated into care regimes and how it might be developed. Komaromy considers how actual deaths are managed in care-homes, how the living and the dying are frequently separated, and how communication between residents and families is conducted.

Cox and Cook focus on end-of-life care for people with dementia and highlight the overlap that exists between the principles of person-centred dementia care and palliative care. Their contribution is a particularly constructive approach because it looks at the strengths of existing good practice in care-homes rather than looking to palliative care to offer ideas for development in care-home practice from the 'outside'. Taking the discussion a stage further in the last two chapters, Froggatt examines training and practice development issues, and Hockey and colleagues the organisational structures necessary for the promotion of good practice. These two chapters provide a constructive debate about what is needed, what is possible and what is evident from research. Hockey argues that

knowledge from palliative care cannot be transferred to care-homes without thought being given to context. She provides the foundation for a philosophy of end-of-life care and its implementation through the organisational mechanisms of standards setting, quality audits, integrated care-pathways and the implementation of action research programmes. This returns the discussion to the policy context and the questions raised by Vallis and Boyd. If the ideas and aspirations of this book are to be realised, there will have to be a fundamental shift of emphasis at the level of policy-making and resource allocation. British organisations of and for older people have taken up end-of-life-care as a campaign issue. This book shows us what the outcome of those campaigns might be.

School for Policy Studies,  
University of Bristol

LIZ LLOYD

DOI: 10.1017/S0144686X03281575

Judith Phillips, Miriam Bernard and Minda Chittenden, *Juggling Work and Care: The Experiences of Working Carers of Older Adults*, Policy, Bristol, 2002, 48 pp., pbk £10.95, ISBN 1 86134 443 0.

Working and caring for an older adult is a very common experience in Britain today. Recent estimates suggest that around four million people currently combine work and care (Carers National Association 2002). Indeed, as the authors of *Juggling Work and Care* make clear in their excellent introduction, there are increasing pressures on both women and men to combine caring responsibilities with paid work. These pressures arise, the authors argue, largely from the ageing of Britain's population and the shrinking of the pool of people who have traditionally provided care, that is, women between the ages of 45 and 60 years.

*Juggling Work and Care* is, therefore, a very timely report. It comes as government policy is placing increasing emphasis on family-friendly policies to support informal carers in the workplace. As the authors point out, however, the emphasis on 'work-life balance' has focused primarily on working parents of young children, rather than employees who care for older adults. There is, therefore, a need to understand what works for other kinds of carers. This provides the rationale for the report, which investigates the use, relevance and effectiveness of workplace arrangements to support working carers of older adults.

The study examines two public sector organisations in England, a National Health Service Trust and a local authority Social Services Department. The focus on the public sector is important. Public sector organisations are more likely than other employers to provide family-friendly arrangements and, therefore, to offer examples of good practice. Equally important, the workforce in public sector organisations is overwhelmingly female, and it is women who are most likely to provide informal care. The study employs a rich methodology. It provides profiles of the two organisations, including information on family-friendly policies; a screening questionnaire survey of employees, which revealed that at least one-in-ten employees care for an adult over the age of 60 years; a lengthier postal survey of a sub-sample of working carers; and in-depth interviews with selected carers and managers.

One of the most important findings is that, despite the availability of a wide-range of family-friendly policies, in practice very few are used by working carers. In the authors' words, 'in times of crisis, and for regular caring responsibilities, people tend to make use of what is most familiar to them and what is easiest to access: annual leave and TOIL [Time Off In Lieu] being clear examples' (p. 28). Policies intended for the use of carers, such as carers' leave and dependants' leave, are in fact rarely used. The low take-up of policies for carers arises because they are difficult to access and label employees as in need of help.

Indeed, the main mechanism by which working carers juggle work and care seems to be to provide relatively few hours of care. The majority of working carers in the study provided less than ten hours a week. In spite of the range of carer-friendly policies on offer, carers who provided more substantial amounts of care were in effect excluded from the workforce. Part of the problem is that few working carers use formal services. The authors found that 'surprisingly, only minorities of carers make use of services provided by their own organisations', and observe that, 'the overriding lack of use of services may also reflect the fact that ... on the whole, our carers are not engaged in "heavy" caring for older people' (p. 7).

The over-riding message from this study is that, at present people combine caring and working with very little assistance either from their workplaces or from formal services, but can only do so because they provide relatively small amounts of care. If the exclusion from the workforce of heavy duty carers is to be addressed, then it is important that links are made between carer-friendly employment policies, on the one hand, and service provision to carers on the other. Public sector organisations, which both employ a largely feminine workforce *and* provide health and social care to older people, seem ideally suited to make these links. This study makes these points admirably in its conclusions, which contain policy and practical recommendations. The study is an important contribution to several academic disciplines including gender studies. It advances the understanding of the gendered nature of part-time and flexible working in public sector organisations, which has recently been addressed elsewhere (Coyle 2003). In conclusion, this is an important study, which makes a valuable contribution to the literature on working and caring, and which has particular relevance for women.

## References

- Carers National Association 2002. *Redressing the Balance: Inclusion, Competitiveness and Choice: A Report on the Barriers and Bridges for Carers in Employment*, Carers National Association, London.
- Coyle, A. 2003. *Women and Flexible Working in the NHS*, Equal Opportunities Commission, Manchester.

Personal Social Services Research Unit,  
LSE Health and Social Care,  
London School of Economics and Political Science

LINDA PICKARD

DOI: 10.1017/S0144686X03291571

Richard Bonnie and Robert Wallace, *Elder Mistreatment: Abuse, Neglect and Exploitation in an Aging America*, National Academies Press, Washington DC, 2003, 552 pp., hbk £39.95, ISBN 0 309 08434 2.

The abuse of elderly people has been known about and acknowledged as a problem for years, but in general terms still does not receive enough attention, and is not really an issue of open discussion for either professionals or the general public. Although the phenomenon was initially recognised in Britain during the mid 1970s, most work has been undertaken in the United States. The book is a report from the National Research Council to the National Academies for Science, Medicine and Engineering by a group of eminent and expert advisors who were commissioned to complete a review of elder abuse and neglect. Their remit was to concentrate on specific areas of prevalence and risk. By far the majority of the panel are academics, but there is representation from the legal profession (American Bar) and from service provision. Unfortunately, the panel did not include any older people or their representatives through voluntary organisations or NGOs for older people. Indeed, throughout the volume there is little indication of older people as active participants in debates about elder abuse: either in defining what constitutes abuse or in the development of appropriate responses.

Written from the perspective of expertise, the book therefore seems to start from the view that much is fairly apparent. Thus for those people with some knowledge of the subject, the report provides a good summary of the topic from an American standpoint. It includes an historical overview and a glimpse of how the field may develop in the future. The analysis of the initial recognition of elder abuse and its development as a concept is interesting, particularly in relation to the linkage with care-giving, although other perspectives are neglected, *e.g.* relating to the 'elder abuse enterprise' (Manthorpe 1993).

The book includes the main report of the panel, which is followed by several appendices and then some background papers as separate chapters. The main report covers definitions, theoretical models relating to abuse, the occurrence and extent of abuse, risk factors, screening and evaluation of interventions. Two further chapters cover issues of ethics within elder abuse research and future directions. There are appendices on measures of abuse, a study of the existing state legislature concerning abuse, and a transcript of the presentation to the panel made by Dr Rosalie Wolf. Whilst the book will be of interest and use to researchers and practitioners alike, obviously accommodation of the American focus has to be made and juxtaposed with how the situation has evolved and may develop in Britain.

In the six background papers, there is coverage of epidemiology and assessment, forensic approaches, financial abuse, institutional abuse and ethical issues. Of these, the papers on financial abuse and abuse in institutional settings may be of most interest and value to British readers. Financial abuse often causes much concern for health and social care professionals, so specific attention to this area, even if from the standpoint of another country is helpful, to begin to focus attention on this type of abuse and its consequences. There is also an interesting

and thought provoking paper by Wolfe on the links between elder abuse and other forms of family violence.

The focus in both the panel report and one of the background papers on face ethical issues is timely and beneficial to those who are working in the field, who face ethical dilemmas regularly. Issues about the potential vulnerabilities of the target population (older people) and the possible negative legal, social or financial consequences of divulging information for research purposes are intrinsic to much research concerning older people, perhaps nowhere more than in this field. Attention to the topic from slightly different perspectives is therefore useful. All these papers provide clear and accessible accounts of the various topics albeit with a United States focus. They provide welcome food for thought concerning the manifest gaps in current knowledge.

Generally, the report recommends much more attention to research. Somewhat surprisingly for those who are impressed by the volume of research in America, the authors complain about the paucity of knowledge and information about elder abuse. Although the original aim of the panel was to determine the future research agenda, the report laments that to do so now would be premature, and therefore confines itself to setting out the foundations for future priority setting. The emphasised topics are the determinants of abuse, the development of screening tools and measures, and the effectiveness of interventions. The absence of the inclusion of and engagement with older people, or of a full consideration of structural factors such as ageism, is to be regretted.

## Reference

Manthorpe, J. 1993. Major publications reviewed: elder abuse – concepts, theories and interventions, *Action on Elder Abuse Bulletin*. Age Concern England, London.

School of Nursing,  
University of Hull, Yorkshire

BRIDGET PENHALE

DOI: 10.1017/S0144686X03301576

Beverly A. Beisgen and Marilyn Crouch Kraitichman, *Senior Centers: Opportunities for Successful Aging*, Springer Publishing Company, New York, 2003, 391 pp., hbk \$46.95, ISBN 0 8261 1704 X.

Most of the chapters in this book start with the particular and then broaden the horizons to recent writing and further reading. The particular is the Vintage Senior Center, founded in Pittsburgh, Philadelphia in 1973, at which both of the authors worked for several years. Beisgen was Assistant Executive Director, and Kraitichman Director of Centre Services. Senior centres provide a wide range of activities and services to individuals in the third and fourth age groups. The formula for the book, which succeeds remarkably well, is to start each chapter with brief pen-portraits of individuals who have, in one way or another, been associated with the centre and an area of its work, and then to

expand the chapter into: first, a discussion of the subject under review, with practical hints for individuals involved, then to a bibliography and, finally, to a list of addresses, telephone numbers and web-sites of relevant organisations. The discussions are full, useful and topical; the practical hints can be implemented and the bibliographies vary in length but are mostly up-to-date. The book is American and so almost without exception are the references.

The book covers 22 topics and has a brief concluding chapter. The chapters are arranged in six sections: introduction (senior centres and successful ageing); demographic backgrounds (a profile of older adults and their wants, needs and interests); positive ageing (volunteerism, recreation, lifelong learning and creativity); activities (arts, computers, health, horticulture, humanities, inter-generational and travel); special needs (referral programmes, grand-parenting, disabilities, impairments, mental health, care-giving and spirituality); and conclusion (a culture of philanthropy and looking ahead). Finally, there is an index of 18 pages. Despite this extensive menu, neither financial concerns nor death and dying are well discussed.

The book contains a vast amount of information and, although it is written from a United States perspective, many of the points discussed have a much wider relevance. It is a practical handbook and a work of reference, and is both well written and very interesting. It is a book for every library of any educational and research institution concerned with any aspect of gerontology, and should be read by individuals involved both professionally or otherwise in the practical care of senior citizens – from students to social workers, clergy and medical doctors.

University of Surrey

PETER JARVIS

DOI: 10.1017/S0144686X03311572

Steven H. Zarit, Leonard I. Pearlin and K. Warner Schaie (eds),  
*Personal Control in Social and Life Course Contexts*, Springer Publishing  
Company, New York, 2003, 316 pp., hbk \$54.80, ISBN 0 8261 2402 X.

*Personal Control in Social and Life Course Contexts* is the edited proceedings of a conference held in October 2000 at Pennsylvania State University, where two of the co-editors (Schaie and Zarit) are Director and Assistant Director of the Gerontology Centre. It is the fourteenth volume in a series on the broad topic of the societal impact of ageing. The book comes therefore with impeccable academic credentials and, indeed, reading it is like eavesdropping on a scholarly research conference that you were unable to attend. This is accentuated by the book's structure, which conveys a sense of debate and discussion. In each of the six main chapters, one or two established specialists review a topic related to the theoretical framework, the cultural and social sources, and the function of mastery and control as it applies to the study of ageing. Each chapter is then followed by two (or occasionally one) commentaries. Whilst the commentaries do not include a few accolades boarding on the sycophantic, the commentators do not shy away from taking issue (very politely) with points made in the chapter. The commentaries frequently take the discussion in new and interesting directions. As 'an antidote



against the perpetuation of parochial orthodoxies [and to ensure that] questions are raised with respect to the validity of iconoclastic departures in new directions' (p. x), these commentaries come from beyond as well as within the discipline of the chapter's author. These quotes perhaps indicate that the book is not for the faint-hearted. It is a scholarly and academic book written by – and perhaps primarily for – people steeped in the topic of personal control. Technical terminology and definitions abound.

This does not mean, however, that there is nothing in this book for the reader with a general rather than a specialist interest in the area. The opening chapter, by Pearlin and Pioli, begins with an overview of the concept of personal control as 'a generic construct under whose wings are several related but distinguishable concepts' (p. 3), including self-efficacy, locus of control, mastery, fatalism, learned helplessness and empowerment. This undoubtedly encourages readers to think carefully about exactly what is meant by the term 'personal control'. The sense that it is important to do this is however undermined when Avison and Cairney, the authors of a later chapter, choose to 'use the terms *mastery* and *sense of control* interchangeably [on the grounds that] terms such as locus of control, fatalism, mastery, self-efficacy, and sense of powerlessness are all labels for essentially the same construct' (p. 159). Whilst they acknowledge that there are distinctions between these terms, the implication is that they are unimportant, which is probably a minority view.

To counter the terminological and conceptual confusion that besets the literature on personal control, most of the authors in this volume painstakingly tease out that particular aspect with which they are concerned. Topics include the inherently social nature of our personal control beliefs (Krause), cultural variations in the meaning of control (Skaff and Gardiner), and the relationship between social structure, stress and the exercise of personal control (Avison and Cairney). Whilst all of these chapters and the commentaries that follow them include consideration of the role or impact of age and ageing, it is in the chapters on 'planful competence' (Shanahan, Hofer and Miech) and the life span theory of control (Schulz, Wrosch and Heckhausen) that bring life course issues to the fore. The issue of personal control is identified as a theme running through the whole of the life span, offering what two of the commentators (Löckenhoff and Carstensen) describe as a coherent rather than a stage-based view of the life course.

This is not always an easy book to read. Just as the concepts under discussion and the relationship among them begin to be clear, they are confused by caveats and alternative perspectives. But this is the reality: personal control is a complex construct and its precise definition and measurement are elusive. As several chapters emphasise, the assumption and exercise of personal control is embedded in social processes and contexts, which perhaps calls for ecological as well as construct and psychometric validity. This is more a book for researchers and academics than for practitioners. It does however contain many implications for practice, and Zarit and Leitsch's 'Afterword' not only offers a clear and concise overview, but also considers how the conclusions might be applied in the design and evaluation of interventions. They see personal control as an important target for both treatment and preventive interventions at the individual, social and

structural levels. Undoubtedly the concept of personal control can help practitioners both clarify the purpose and design of an intervention, and also evaluate and understand its effectiveness.

St Martins' College,  
Lancaster, Lancashire

LEONIE SUGARMAN