

Reviews

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Helen Lavretsky, *Resilience and Aging: Research and Practice*, Johns Hopkins University Press, Baltimore, Massachusetts, 2014, 272 pp., hbk US \$44.95, ISBN 13: 978 1 4214 1498 0.

This book is about the increasingly important concept of resilience. Written by a Professor of Psychiatry at the University of California, Los Angeles, it is a meticulously referenced account of resilience. The impressive blurbs on the cover of the book are both written by medical practitioners but the book has much to offer not only to clinicians but to social scientists, to policy makers and to the general public.

The aim of the book is stated clearly in the Preface. It summarises what is already known about the concept as well as about existing and possible future interventions. Designed to enhance understanding, it states that it ‘brings together (1) a wide variety of clinical issues, (2) the latest neuroscientific discoveries and (3) the issues most relevant for policy makers to understand in pursuing resilience-building interventions for aging adults’ (p. x).

The author suggests that resilience is a pattern of positive adaptation resulting from past or present risk that has posed a substantial threat to good adaptation. Summarising this, the author states that ‘Resilience refers to the ability to maintain biological and psychological homeostasis under stress. The adaptations required to achieve resilience may vary according to context, time, age, gender and cultural origin’ (p. 2). Older people themselves, although this is not referred to, may talk about ‘bouncing back’. The scientific study of resilience began in the 1970s when developmental researchers noticed the relationship between exposure to risk and adversity and both positive and negative outcomes for children.

There are 14 chapters which start with definitions and origins of resilience followed by those on psychological, emotional and cognitive resilience, and how these are linked to wellbeing. An interesting chapter links resilience with longevity and notes the need for caution about generalising about centenarians. There are then three more specific biological/medical chapters including common stressors of older age. The latter includes sections on resilience in bereavement, in death and dying, and in care-giver stress and depression. Then there is section on optimism as a protective factor in later life.

The bridging chapter between these topics and possible interventions is interestingly on spirituality and ageing. This is by far the longest chapter and distinguishes between spirituality and religiosity. It discusses the evidence for some spiritual interventions such as prayer and religious rituals, meditation and mindfulness mediations. It concludes,

Interest in spirituality, and aging has been on the increase since at late the 1990s; however, proper assessment of spirituality in clinical practice and research faces multiple barriers including the lack of professional training for healthcare professionals, shortage of time, and discomfort of patients and healthcare professionals in discussing spiritual issues and needs. (p. 117)

The rest of the book considers interventions. This includes (Chapter 8) social models of the value of interventions such as volunteering. Cultural and ethical issues are then considered although this is very much for an American audience. Chapter 11 contains a very useful account of lifestyle issues such as calorie restriction, nutrition, exercise and complementary medicine, all of which seem to have a positive effect. A wider perspective is taken in Chapter 12 which is about building resilient communities. This includes measures to encourage older workers. Most of these are well known although I confess that I had never heard of ‘Laughing clubs’. These started in Japan and people gather to laugh in a park before work. Laughter increases breath and circulation, releases endorphins, protects the immune system and tones muscles.

In Chapter 13, evidence is given of the value of interventions to prevent or mitigate chronic diseases in later life. There is evidence that creative engagement, as an expression of resilience, may have a neuro-protective effect among older people, contributing to retention of cognitive capacity. Interspersed in the chapters is one on how to measure resilience, such as inflammatory markers. An excellent final chapter summarises the evidence and concludes that:

we are learning the remarkable fact that human beings can adapt to nearly all life and death situations very successfully. Surprisingly and encouragingly, we are finding that there is no one place, one definition, one right or wrong situation, or one chronological age that can prevent even life’s most daunting challenges from being seen as – and converted to – valuable and growth-inducing lessons. (p. 245)

Six of the chapters conclude with case studies conducted by the author. There is no reference to ethical approval which I assume was given. However, they are so detailed that I wonder if these people can be identified. My only other criticism relates to the use of the words ‘the elderly’ rather than older people. But this is a well-written book with some of the best and largest number of references I have seen in a book.

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Sarah Harper and Kate Hamblin (eds), *International Handbook on Ageing and Public Policy*, Edward Elgar Publishing, Cheltenham, UK, 2014, 528 pp., hbk £150.00, ISBN 13: 978 0 85793 390 4.

The *International Handbook on Ageing and Public Policy* is an encyclopaedic read, and is without a doubt the most comprehensive and engaging