

Christianity . . . but she had to pretend to believe in public because she was afraid of disappointing and losing her good friends' (p. 161). In other words, the underlying motivations are social and not necessarily spiritual or religious, which echoes the findings of gerontological studies in the West that discuss the role of religion in old age.

In Chapter 7, Xu ties together the informants' experiences of poverty and their own understandings of old age. The main argument here is that poverty alone cannot define these people's lives. The fact that this generation of older informants grew up subject to hardship and famine explains why most of them constructed a narrative of satisfaction regarding their current material life. Still, in the emotional domain, some of these older people ascribe to feelings of inferiority and discrimination. However, Xu claims that despite their limitations these people are actively engaged in a process of meaning construction such as seeking personal pleasure, remaining useful or enacting their spirituality.

The final chapter offers a summary; a further theoretical discussion of the main findings; an overview of the limitations of the research; and directions for future studies. As in previous chapters, Xu highlights the relevance of a culturally sensitive approach to the study of poor older people's agency that considers their individual socio-historical and familial locations as structural forces shaping their ageing experience. Drawing on the informants' lived experiences, the author goes on to propose three specific intervention programmes to address older people's poverty: (a) intergenerational integration programme (*e.g.* training services, family therapy and workshops aimed at promoting older people's rights); (b) elder-friendly re-employment programme; and (c) elderly people's mutual help associations programme.

In terms of form and style, I appreciated the chapter summaries. However there are also section summaries every so often that make the text a little repetitive. Overall, the study does achieve its aim of stepping out of the negative construction of old age and revealing how older people themselves perceived and challenged their limited material and emotional resources in order to 'achieve what they conceived of as happiness' (p. 194). This book will be most appealing to cross-cultural gerontologists who have a particular interest in China's ageing society and to researchers interested in a fresh insight into the interplay of poverty and old age.

University of Nottingham, UK

MEIKO MAKITA

doi:10.1017/S0144686X1300038X

Naomi Feil and Vicki de Klerk-Rubin, *The Validation Breakthrough: Simple Techniques for Communicating with People with Alzheimer's and Other Dementias*, third edition, Health Professions Press, Baltimore, Maryland, 2012, 304 pp., pbk \$34.95, ISBN 13: 978 1 932529 93 7.

This is the third edition of a book first published in 1993 intended to deliver techniques for communicating with people with Alzheimer's disease and

other dementias. It is aimed at practitioners working with people with dementia in all settings, but particularly in settings where people who are frail, confused and disoriented live.

While it is clear that the authors intend to promote an approach to communication and interaction with people with dementia that offers dignity and respect, to my mind there are several weaknesses to the book that undermine its goals. First, While there are some theoretical foundations put forward for the Validation technique (Maslow's hierarchy of needs; Erickson's Eight ages of man), these are under-developed and under-referenced and it is unclear how such different theories contribute to this approach, or where the authors' own theoretical positions are derived from.

Second, there is scant empirical evidence for many of the statements and claims made, making it difficult to evaluate them or draw one's own conclusions. For example, there is no supporting evidence for the list of fundamental humanistic principles that underpin the validation approach, nor is there a convincing theoretical basis for the four phases of Resolution, which appear to be the basis for using the approach. Of the 35 references cited, 15 are the first author's. The lack of supporting evidence base, along with a weak theoretical base, means that concepts such as Malorientation, Time Confused, Repetitive Motion and Vegetation are insufficiently defined: this makes linking these concepts to the case studies and drawing logical conclusions from them a difficult and uncertain process.

Third, the use of labelling language such as 'the blamer' (p. 45), 'the pounder' (p. 77), the claim that 'blamers are mean old men and women' (p. 132) or description of objectifying practices such as 'toileted' (p. 87) do little to promote respectful practice, instead they perpetuate the negative stereotype of people with dementia. There also appears to be an unquestioned assumption that the levels of aggression expressed by some of the people with dementia in the book are attributed to their dementia rather than a result of the difficult social and physical environments they find themselves in – a more critical stance, supported by reference to relevant literature, would very much have strengthened this aspect of the book.

Fourth, there are, at times, unquestioned descriptions of deficiencies in basic practice that may have contributed to a person's behaviour (*see e.g.* on p. 78, a description of a member of staff stating she will have to wait a couple of hours to get help to change an obviously very wet and distressed male resident, along with sweeping assumptions of his lack of awareness of his plight that might have been incorrect). It would seem that respectfully attending to his physical and psycho-social needs as they arise rather than prescribing validation for the resident for three minutes four times a day, might be a more appropriate and meaningful approach. There are also some disturbing descriptions of lack of attention to possible pain experienced by residents and lack of compassion shown to residents by care staff – these are issues that are fundamental to good practice and highlight the need for basic staff training. Addressing these basic deficiencies in practice might be a first step towards respectful, dignifying care.

A strength of this book lies in its descriptions of the plight of people with dementia in settings where there is little understanding of their perspectives, unique needs or attempts to communicate with others. These descriptions contribute to the ever-increasing body of evidence of poor practice, insufficient staff training and understanding of dementia, insufficient leadership and mentoring of staff that characterises many care settings for people with dementia. A validation approach that is integrated with everyday practice should be included in the repertoire of skills held by care staff and, as such, this book, used critically, will contribute to this set of skills.

University of Stirling, UK

FIONA KELLY

doi:10.1017/S0144686X13000391

Ian Stuart-Hamilton, *The Psychology of Ageing: An Introduction*, fifth edition, Jessica Kingsley Publishers, London and Philadelphia, 2012, 464 pp., pbk £29.99/\$45.00, ISBN 13: 978 1 84905 245 0.

In 1991 the first edition of this book was published, and this completely revised, expanded and updated fifth edition appears six years after the previous one. Stuart-Hamilton is a developmental psychologist: developmental psychology is frequently thought to concern only babies and children, and it is refreshing to find the concept carried through to its logical conclusions, with a chapter on bereavement and death (new in this edition).

Chapter 1 discusses what ageing is, in demographic and biological terms, including reviewing theories of how the body, and the senses, age. The next chapter comprehensively reviews the measurement of intellectual change in later life, including intelligence, reaction times, sensory changes and attention. Memory is covered in Chapter 3, language in Chapter 4, and the author is scrupulous in pointing out where results in these areas are confounded by factors such as intelligence, how declines in test performance are only relative, and how individuals naturally differ considerably. Chapter 5 deals with personality and lifestyle, discussing, for example, how certain traits appear to stay constant throughout life, while others change; and some of the 'Big Five' personality variables (Costa and McCrae 1980) correlate with other measures relating to age, such as mild cognitive impairments and overall life expectancy. It covers attitudes to ageing held by various population groups, including some relevant to older people such as doctors and nurses; and it also mentions cultural and ethnic group influences on such attitudes. In Chapter 6 mental health in later life is covered, including dementia, depression, anxiety and substance (ab)use. It further shows how stereotypes of older people can hinder the proper diagnosis of mental health problems.

For me, the most important chapter in the book is Chapter 7, 'Problems in Measuring the Psychological Status of Older People'. This is a critical essay pointing out the extreme difficulty of assessing the effects of ageing on psychological variables, confounded as they are by aspects of lifetime experience, intelligence and other factors. Throughout the book, the author carefully identifies the doubts that surround many research findings due to