Reviews

Francis G. Caro and Robert Morris (eds), *Devolution and Aging Policy*, Haworth, New York, 2002, 274 pp., hbk $49.95, ISBN 0 7890 2080 7, pbk $34.95, ISBN 0 7890 2081 5.

This book serves as a timely reminder that the term 'devolution' has various meanings. The editors of the book (which has been published simultaneously as the *Journal of Aging & Social Policy*, **14**, 3–4, 2002) make this clear in the introduction. They refer to a 'widespread pattern … in many countries of the shifting of responsibilities away from national governments to regional and local governments and the shifting of responsibilities from the public sector to the private sector' (p. 2). They also mention devolution in Spain and in Britain, with a passing reference to the setting up of new devolved administrations in Scotland and Wales.

But it should be made clear to the reader that this is not a book that discusses the progress of devolved governmental policies that affect older people in various countries. After the introduction, with one exception (see below), all the chapters are devoted entirely to examples of 'devolution' in the United States. There are two main themes in the book: the changing relations between federal and other levels of government in the United States, and relations between these different layers of government and private sector and voluntary organisations; and particularly the push of decision-making downwards as much as possible. So, the book's use of the term 'devolution' might more readily be understood by readers outside the United States as 'decentralisation', or even the debate about the impact of privatisation of the services used by older people.

For both American and non-American readers, the book covers an impressive range of topics. There are chapters on the States' discretion in funding long-term care through *Medicaid*; the 'devolution' of employment policies for older workers; the development of the long-term care ombudsman policy; innovative collaboration between states and private insurers to deal with the growing problem of funding long-term care needs; an analysis of the progress of various decentralised policies to put resources directly into the hands of older 'consumers' of services; and an evaluation of decentralised schemes to improve services for people with Alzheimer's disease. Then there are four chapters on local policy initiatives, including an interesting Massachusetts scheme that enables older people to 'work off' some of their property tax. The other three 'change' chapters discuss the long-term care needs of 'baby boomers', with reference to policies in Maryland, the impact of declining federal funding of housing schemes for older people, and several questions that arise from the growth of information technology and its impact on older people. Finally, there are three chapters focusing on initiatives in the independent sector. One of these discusses a community association in Japan, while another evaluates the expansion of a Health Maintenance Organization

(HMO) into the provision of home- and community-based services for its disabled members. The last chapter discusses the success of a private firm that employs an integrated model of care and has a track record in helping older people with chronic health problems to avoid institutional care.

My general impression of this book is that it has been well edited and well structured. The last three chapters strain a little to echo the devolution theme, although they do offer interesting 'one-off' examples of service innovation. But all the other chapters pay more than lip service to themes of devolution and decentralisation, and in their respective fields succeed in building a fascinating overview of a decade of change in policies on ageing in the United States. The book focuses on the USA, and American readers – whether academics, policy-makers or practitioners – will find topics of interest in most of the chapters. Non-American readers will be less likely to find the whole collection relevant to their immediate concerns, although specific chapters might be of considerable interest. For instance, those concerned with the merits of policies for 'direct payments' to older people (for example Dix 2003) might find the chapter in this book on 'consumer-directed programs' by Simon-Rusinowitz and others particularly useful.

Beyond our immediate concerns, this kind of publication has a wider comparative value. Some readers might struggle with the terminology of welfare and health insurance used in the book (and one wishes for a glossary of terms to help readers outside the United States). But despite this, *Devolution and Aging Policy* can be commended as a comprehensive review of innovations in policy and services for older people. The lessons of what has been tried in another state or another country are never directly or easily applicable elsewhere, but the sheer variety of 'devolved' policies and practices at local and state level in the USA poses stimulating questions, both to observers in other American states and to policy-makers, practitioners and academics elsewhere.

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Donald E. Gelfand, *Aging and Ethnicity*, Springer Publishing Company, New York, 2002, 232 pp., hbk $46.80, ISBN 0 8261 7421 3.

The significance of ethnicity is an important theme in modern society as seen in the playing out of events in Iraq and Indonesia. This book focuses on the ways in which ethnicity affects the service needs of older people from diverse backgrounds who live in the United States. In this second edition, Gelfand brings the subject up to date by drawing on data from the 2000 US population census and by giving

greater attention to the effects of immigration. The author also presents a model suitable for health and welfare providers working with older people from different ethnic backgrounds. The book begins with a review of concepts of ageing, such as 'disengagement' and 'activity theory', and a consideration of the term 'ethnicity'. There is useful discussion and a summary chart to indicate the ways in which a distinct ethnic identity might be an asset or a disadvantage to an older person. The difficulties of research in this field are outlined, such as the problems of language differences and access to respondents, which are common to similar research in the UK.

The next three chapters review the effects of immigration, a key element in the growth of the American population and a major factor in the present age distribution of minority ethnic elders in the USA. The following chapter deals in some detail with the characteristics of older people from specific ethnic groups, such as African-American, Latino, Native-American and Asian. Whilst some general features apply, such as the predominance of poverty and discrimination, other aspects of socio-economic and health circumstances are specific to different communities. Among the most worrying presented data are the higher cancer mortality rates among African-Americans than among White older people, and the tendency to liver disease and death by suicide amongst Native-Americans. Further important aspects of social and physical support are considered in Chapter 5, such as the nature of environments which lead to a sense of security, and the role of family, religious organisations and religion itself in the lives of older ethnic minority people.

Up to this point the findings may be said to be of most interest to a US readership or to those scholars wishing to discover more about ageing and ethnicity in a non-European setting. In the last three chapters, however, some general themes emerge which have valuable implications for providers elsewhere. The author highlights the major issues affecting service delivery for different ethnic groups: availability, awareness, acceptability and accessibility. There is a particularly useful evaluation of the potential barriers to service utilisation, such as the predominance of stereotypes and the need for effective outreach with minority elders to employ 'significant others' (including hairdressers and denominational priests where appropriate) in communicating health promotion messages (pp. 141–52).

Chapter 7 explores ethnicity as a factor in service delivery programmes for older people at all levels, from meals provision through community centres, home care and nursing homes to mental health services. Whilst segregated ethnic provision is neither always possible nor feasible, a greater sensitivity to cultural beliefs has been shown to enhance the experience of elders from minority groups. In the final chapter, certain common assumptions about ethnicity and ageing are vigorously challenged, by emphasising the need to highlight variations within ethnic categories, to go beyond static cultural models and to appreciate the differentiation of family structures as well as the dynamic nature of ethnicity. A table brings together the factors that are involved in providing services to 'ethnic aged' people and is a useful summary not a sophisticated model. The conclusion includes a prospective view and has remarks on inter-marriage and the pressing need to eradicate poverty and ageist discrimination through government legislation.

I wonder if 'racism' is deliberately omitted as being too contentious, and whether it is better subsumed under the cloak of ethnicity? The fact that white older people also have an ethnic background has not been acknowledged. Despite these gaps, this is a well structured, informative and comprehensive book on ageing and ethnicity in the United States, where arguably research is ahead of that in Britain. It will be a resource for academics and students of the subject in the UK, with the last three sections being of particular value to welfare practitioners.

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Richard A. Settersten Jr (ed.), *Invitation to the Life Course: Toward New Understandings of Later Life*, Baywood, Amityville, New York, 2003, 355 pp., hbk $54.95, ISBN 0 89503 269 4.

Running through the whole of gerontology there is a tension between the study of old age and the study of ageing. Regardless of how old age is defined and operationalised, its study is limited to some kind of 'last stage' of life. In contrast, ageing relates to the whole of life and implies no presumptions about stages or categories. This tension reflects the wider gap between research that 'solves problems' and makes old age and the care of dependent people more 'manageable', and research that is intended to illuminate the realities of growing older. With this and his earlier book, Richard Settersten (1999) has embarked on a major initiative that is intended to shift the focus of gerontology from the former to the latter, from old age to ageing. He invited eight 'life-course scholars' to address a symposium at the 1998 meeting of the *Gerontological Society of America* on the question: 'if gerontologists were to take life-course concepts, principles and methods more seriously, how might this change, and even revolutionize, scholarship on aging and later life?' (p. vii). In their various ways, the contributors to this book all address this question.

The first eight chapters provide a solid, arguably too solid, basis for the anticipated revolution. By my estimation they provide 750 references, ideal for postgraduate lifecourse students, but tough for gerontology revolutionaries. Despite this, gerontologists should not be discouraged. Following the introduction, the first chapter (by Settersten) is a valuable review of propositions and controversies in life-course and human development studies. There follow five chapters on the study of ageing and later life. Glen Elder and Monica Johnson's discussion of the general issues and principles includes constructive critiques of some of the early and continuing longitudinal studies in American psychology.

John Henretta organises a review of work and retirement around the work-centric tripartite division of the lifecourse, but in doing so raises interesting questions about the interface between institutional contexts and individual life-courses. Jon Hendricks and Steven Cutler then revisit issues connected with leisure. Much American leisure research is driven by the leisure industry; it might have been more useful if their review had focused on the broader concept

of personal agency. Gunhild Hagestad's chapter on relationships provides a welcome contrast to concerns arising from the stereotypical American male life-course. In particular, she refers to other countries 'for which the last decades of the 20th century brought profound shake-ups of the social order and the basic conditions of life' (p. 154). She recognises the importance of empirical research in the middle ground between societal and ego-centric perspectives, and identifies various forms of linked lives and chains of relationships, the histories of which often determine individual lifecourses. Linda George then turns the reader's attention to health and, in particular, 'the stress process'. Her primary concern is to identify the potential of lifecourse research to reveal the antecedents of illness. The following chapter by Settersten addresses the implications of the life course perspective for American social policy. A primary objective is to reduce or elim-inate problems and to promote successful personal development. The next cha-pter by Eva and Boaz Kahana covers the implications of the lifecourse approach for research into successful ageing. Echoing George's focus on stress, they argue that preventive and corrective adaptations mitigate the impact of stressors in achieving high quality-of-life outcomes.

Settersten notes that although there is 'much talk' about lifecourse theory and research, 'few scholars actually *do* it' (p. 9). Chapter 9 is a short but stimulating example of how it can be done. Drawing upon the research of journalists into the lives of child labourers in Pakistan, 'homeboys', members of street gangs in Los Angeles, and the elder Shamans of the north Amazon rain forests, Dannefer discusses how the lived experience of these three contrasting lifecourses reveals change in 'the late modern world'. He notes that a new market is emerging in North America for the Shamans' knowledge of healing, and he contrasts the rising global demand for cheap child labour and for the wisdom of age. 'Can the future of the life course', he asks, 'include consideration of these grotesque but globally linked discrepancies in the life-course patterns and opportunities afforded by the institutional structures of a globalizing world?' (p. 267). There follows another stimulating if less exotic chapter by Christine Fry on 'the life course as a cultural construct'. Arguably this is the most original contribution since she focuses attention on the cultural significance of time. In particular, I value her comments on chronological age: 'Interestingly this supposedly empty vari-able is an essential criterion in rationalising the enormous populations of con-temporary industrial capitalist states. Age in years is a simple and impartial standard to define the rights and responsibilities of citizenship. The ability to know one's age is the result of an incredible multicultural effort to measure time' (p. 274).

Some might query the 'impartiality' of this standard, but it recognises the extraordinary neglect of chronological age by gerontology. In her conclusion, Fry points to the need for a cultural construct that is equivalent to gender, for a gerontological term that will focus attention on cultural elaboration and diversity. Surprisingly she dismisses 'life course', seemingly on the grounds that it is rooted in the cultures of industrial-capitalist nations. In its place she proposes 'age/time', a term intended to indicate that age is one kind of time. In my view she has identified an important gap in the gerontologist's vocabulary, but 'age/time' does not slip easily off the tongue. I argue strongly for the 'life course', for there is no

obvious reason why cultures such as those of child labourers and Shamans should not include its conceptualisation.

The final chapter by Leonard Cain is an autobiographical contribution and directly, but also indirectly, reveals much about the relevance of the lifecourse perspective for gerontology. He identifies himself with the 1916–25 birth cohort, and is able to locate his own biography in the context of his sharecropper parents, the Townsend movement of the Great Depression ('Youth for work: age for leisure'), and his presence on the invasion beaches of Normandy in 1944. Elegant couplets are coined: 'An 18 year old in uniform? / ''Preposterous'', Americans once said. / But times have changed, and here we are. / And many of us lie dead'. Some 59 years later, has only the location changed? In 1959, Cain reviewed the launch of the 'Gerontology movement'; in 1976 he advised the *Federal Council on the Aging* (when he was reprimanded by students for distinguishing between 'the frisky', 'the frail' and 'the fragile' stages of old age), and during the 1980s he engaged with the American legal system on enforced retirement, equitable treatment and 'counting backward from projected death'.

Settersten associates his work with that by Giele and Elder (1999): there can be little doubt that both constitute a solid basis for the further development of lifecourse research. Effectively, in this book, he and his collaborators are challenging (rather than inviting) gerontologists to adopt a lifecourse perspective. For many years, I and others have argued that British gerontology, in supporting the development of improved services for 'the elderly', was neglecting the lived experience of growing older in contemporary Britain (see, for example, Bender 1997) and therefore welcome Settersten's initiative. Arguably, the book should have included fewer reviews and more exemplars of lifecourse research, but it is packed with invaluable references and useful guidance, and I am happy to recommend it to all gerontologists inclined to take up the invitation.

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Alison J. Carr, Irene J. Higginson and Peter G. Robinson (eds), *Quality of Life*, BMJ Publishing, London, 2003, 120 pp., hbk £25.00, ISBN 0 7279 1544 4.

Written largely for a clinical and health services research audience, this book provides a useful overview of many of the key debates in the complex area of

quality-of-life measurement. There are eleven concise chapters. The first is an excellent introduction to the 'current state of the art' in the measurement of quality-of-life in health services research and a review of current trends. Subsequent chapters are concerned with various specific methodological and practical issues (with some overlap). Chapter 2 considers a model of quality-of-life that takes account of the interaction between expectations and experience, and explores how the variations in expectations of health that exist between groups and individuals will affect the measurement of quality-of-life. Chapter 3 asks if quality-of-life measures are 'patient-centred'? It explores the individual and subjective nature of quality-of-life and discusses whether standardised measures accurately quantify this aspect. Chapters 4 and 5 focus on the specific challenges for measuring quality-of-life for particular groups: care-givers and children respectively. Chapter 6 returns to the issue of who should measure quality-of-life, and considers the advantages and disadvantages of proxy reports, including how and why proxy views may differ from those of the patient. Chapter 7 reviews the challenges of using quality-of-life measures in clinical practice, including the selection of appropriate measures, analysis of quality-of-life data, feedback and interpretation of results in practice and the role for quality-of-life measures in clinical decision-making. Chapter 8 explores how rehabilitation professionals have used and adapted a variety of quality-of-life instruments to assess specific assistive technologies. Chapter 9 covers how to choose a quality-of-life measure, while Chapter 10 tackles the complexity of analysing longitudinal quality-of-life data. The final chapter raises important ethical and moral issues for quality-of-life measurement in situations where lives are judged as having no quality.

Several chapters highlight methodological limitations or suggest future directions for quality-of-life research: a summary chapter would usefully have drawn these together. Overall, the text is uncritical of current standard, structured approaches to quality-of-life measurement and largely assumes that concepts such as 'health-related quality-of-life' are accepted when indeed they are widely contested. However, the book is highly readable and a considerable amount of information on this complex topic is presented in a clear and easily digestible form. It will be a valuable resource for clinicians and researchers interested in the assessment of quality-of-life in health care settings.

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    John Grimley Evans, T. Franklyn Williams, Lynn Beattie, Jean-Pierre Michel and Gordon Wilcock (eds), *Oxford Textbook of Geriatric Medicine*, Oxford University Press, Oxford and New York, 2003, 1264 pp., pbk £75.00, ISBN 0 19 852809 4.

Geriatric medicine is a vast subject. In the United Kingdom in its early days, it was concerned with the care of chronically ill and disabled people in long-term hospitals. The field has now expanded so that all aspects of conditions occurring

in later life can legitimately be included. One wonders whether the founding mothers and fathers of the specialty half a century ago would have predicted that subjects such as 'intensive-care units' and 'sexual health' should be in a geriatric medicine textbook. The editors, themselves from four countries, have assembled an international galaxy of authors, many of them the acknowledged leaders in their field. I counted 175, and they have written 125 chapters that occupy more than 1,100 pages!

The bulk of the book is a systematic description of the physical diseases that affect the various body systems and which occur in later life. It follows standard medical textbook conventions, with descriptions of epidemiology, aetiology, clinical features and treatment, accompanied by references for each section. Numerous summary tables, graphs and pictures accompany the text. There is a relatively small section on mental illness, but readers wanting more information should note that the same publishing stable has produced the standard British text on this subject which is almost 1,000 pages long (Jacoby and Oppenheimer 2002).

Of course geriatric medicine is not practised in a vacuum but is part of each country's system or systems of health care, underpinned by distinctive cultures. Tackling the description of the organisation of special services for older people in a textbook intended for an international audience is clearly problematic, as the immediate relevance of what is described could be very limited. Much of the evaluative literature on service outcomes may be difficult to generalise, and there is a natural tendency to focus on one's own experience. However, the editors have tackled this aspect well. The chapters on institutional care, day hospitals, stroke units, memory clinics and home-care provide good introductory overviews of the key issues in each service and draw on research findings from various countries. The potential of primary care for improving the health of older people disappointingly is not separately discussed, although there is a chapter on health promotion. National government policies towards the health of older people are also outside the scope of the book. Although the book was published before the *National Service Framework for Older Peoples' Services* was published, it would have been interesting to read how UK health policy compared with that in other developed countries. Perhaps such a chapter could be included in the next edition.

This hardback edition of the book was published in 2000 and the literature cited obviously predates publication. This means that information on the latest clinical trials and investigative techniques is not included. Some obsolescence is found in any text book, and a warning to check drugs and their dosage is prominently displayed inside the front cover. This will detract a little from the value of the book, but not to a great degree for the medical profession, which can be rather conservative when it comes to innovation. Changes in practice usually evolve rather than erupt suddenly, for implementation depends on the accumulation of studies rather than a single clinical trial. As an example, Friedland and Wilcock are rather guarded in their comments about the value of cholinesterase inhibitors, because the results of the first trials were just emerging when they wrote their article. These drugs are now being widely prescribed but debate about their real value continues. It will be interesting to see what will be written about them in five and 10 years' time. Similarly, the now growing use of beta-blockers in heart failure was foreshadowed in the chapter on heart failure.

The final section of the book covers what are described as special problems – frailty, immobility, failure to thrive and elder mistreatment. I trust that placing the 'geriatric giants' at the end of the book does not represent the editors' view that these are just a postscript. The inclusion of a chapter on car driving in this section may appear a little odd but might in the next edition be one of several new types of 'special problems', such as the effects of travel on health, recreational drugs and sports injuries in later life. All in all, this is a good and comprehensive guide to the medical problems of older people, and it is both well written and well produced. The medical profession for whom the book is written will enjoy it, but others with a more critical eye on doctors may well decry its lack of emphasis on health beliefs and behaviours, other psychological aspects of health and care, and the absence of sections on complementary therapies which we know older people use plentifully.

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Ann Orbach, *Counselling Older Clients*, Sage, London, 2003, 133 pp., pbk £16.99, ISBN 0 7619 6406 1.

Ann Orbach's interest in older people began as a result of a request to provide counselling for an older woman. At that time she held the view that clients over 60 years of age would be unable to make use of counselling, a view which she suggests is common and results from institutionalised ageism which has 'in the past, written off the over-sixties as unsuitable clients, and [which still results in] generalisations that … work against accepting them as still developing individuals with specific problems' (p. 2). Having overcome her initial apprehension, Orbach came to find deep satisfaction in working with older clients. This led her to specialise in the field, and to write this book that aims to address a perceived lack of knowledge, understanding and interest in the emotional and psychological wellbeing of older people.

Counselling Older Clients is a handbook for practitioners, trainers and student counsellors who are interested in the experience of ageing and old age. The author suggests that it would also be of interest to formal and informal carers of older people. The book begins with a chapter on age-affirmative practice which provides some background on the institutionalisation of ageist attitudes and practices; following this are three chapters that consider the theory of counselling practice as applied to this client group. These chapters reflect Orbach's experience as a counselling tutor and her own theoretical orientation towards analytical

psychotherapy. Although she is clear that today she works within a broader field that includes humanistic and integrative approaches, this original orientation still affects the interpretation and practices that are described. This theoretical focus is continued in the next three chapters which consider the use of narrative and reminiscence, 'obstacles to change' and 'working with difference'. Throughout the book, examples are provided in the form of detailed case studies. Orbach faces the possibility of failure squarely, and this is helpful, but the examples and case studies do tend to concentrate on unsuccessful counselling episodes. This has a value as a teaching tool in that the author can then provide a critique and suggestions for alternative approaches, but nonetheless the cumulative effect is somewhat disheartening.

In the introduction, Orbach notes that the prevailing problems encountered during the ageing process are those of transition and loss; these themes, and the concept of adjustment, are discussed in chapters on relationships, loss and death. In the chapter on death and at several earlier points, Orbach refers to Erikson's stage theory of development and to Kubler-Ross on grief and death. The former seems to be accepted fairly uncritically, while the latter is criticised, although it is also employed in one of the case studies. A final section provides a brief methodology for the evaluation of counselling interventions, and a chapter on practical exercises to use in a training context or with clients. This last is useful but doesn't contain anything novel and might have been better placed as an appendix.

The book provides a good introduction to the field and the theoretical sections on counselling approaches are well explained. After each chapter there are questions for 'reflection and review' which contribute to the instructive tone of the book and suggest that its greatest value might be as an adjunct to training. The sections on the social theory of ageing and evaluation methodology are less strong (but nevertheless establish a useful basis for further study) and the chapter on working with difference has some areas of weakness. For instance, the sections on black and minority ethnic groups contain a number of cultural assumptions about collective values, family-support networks and historical backgrounds. This chapter also deals with sexual orientation and uses as an example the life of a retired cleric who is almost a caricature of a repressed gay man.

The author does emphasise the importance of "openness to our clients' other-ness" (p. 66) but perhaps fails to recognise our own otherness, and assumes the ethnicity and sexual orientation of the reader to be that of the majority culture. Even though in an early chapter Orbach warns against treating older people as children (p. 8), there are tendencies throughout to speak of 'us' and 'them' and to infantalise. In several passages, child-like patterns of behaviour are linked to the experiences of ageing, which sends a contradictory message to readers who may not pick out the subtleties of Orbach's meaning. Overall this book offers a good beginning and a functional training tool for practitioners new to the field. It would be a useful addition to general, as well as specialist, counselling courses.

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Janice E. Nichols, David C. Speer, Betty J. Watson, Mary R. Watson, Tiffany L. Vergon, Colette M. Vallee and Joan M. Meah, *Aging with HIV: Psychological, Social and Health Issues*, Academic, San Diego, California, 2002, 334 pp., hbk £41.50, ISBN 0 12 518051 9.

Approximately 13 per cent of AIDS diagnoses and seven per cent of HIV diagnoses in the United States have been of people aged 50 or more years (Centers for Disease Control and Prevention 2001). As the authors of *Aging with HIV* recognise, however, awareness of this older patient cohort is low. Indeed, as sexual health research typically excludes people aged in the fifties (or even forties) and above, very little is known about the experiences of older people living with HIV. The increasing prevalence of HIV in this age group, coupled with practitioner concern about high levels of unmet care needs, led the authors of this book to conduct one of the first comprehensive surveys of these issues to date. The survey included 172 people over 45 years of age living with HIV in west Florida. The book presents not only the key findings from this research, but also discusses at length their implications for service delivery and health promotion.

Given the research gap in this area, the reported findings are certainly of interest. They include: high levels of education in this cohort in combination with dramatically low current income levels and high rates of poverty; a high prevalence of historical risk events (for example sexual abuse) and behaviours; and high rates of psychological morbidity (the sample was nearly 15 times more likely to be experiencing severe depression than the general population). Moreover, the particular stigma of being diagnosed with HIV as an older person also emerged as an interesting and important finding. They cite 'Tony', newly diagnosed with HIV at the age of 70 years, as reporting that 'HIV diminished me … it kind of made me feel almost like a sub-species … It was quite shattering. I just felt that, all of a sudden, I became inferior. I might have felt quite similar to that if I had been diagnosed with something else that would be considered terminal … but I think the social implications of HIV came into it quite a bit' (p. 75).

A particular strength of this book is that it represents one of the first attempts to draw together issues specific to ageing and to HIV. For example, drawing on the empirical findings, the ways in which older people perceive an HIV diagnosis are discussed. Similarly, clinical issues around managing the needs of an older patient group who are likely to experience non-HIV related health and social care needs are also addressed. The study design, however, has limited the engagement of the research findings with 'ageing' because of both the very wide definition of 'older people' (over 45 years of age) and the absence of analysis by age group, presumably because the sample was very heavily weighted to the younger ages.

Although the survey and related discussions are situated within the United States context, they have wider applicability and would certainly be of interest to practitioners and researchers in other countries. Indeed, many of the recommendations for service improvements are relevant outside the USA. In the UK, for example, approximately seven per cent of HIV diagnoses and 11 per cent of AIDS diagnoses have been among people over the age of 50 years (Health Protection Agency and the Scottish Centre for Infection and Environmental

Health 2003). Recent research has shown that general practitioners do not take sexual histories or discuss sexual risk-taking with older people (Gott, Hinchliff and Galena 2004). The chapter on health promotion, which includes good practical guidelines on taking a sexual history from older people, therefore should be recommended reading for practitioners in Britain as well as America.

The one slightly disappointing chapter is on general sexuality issues relating to older people, for it has little recognition of recent shifts in societal perceptions of sexuality and ageing to the point that the maintenance of sexual function is seen as 'a primary component of achieving successful ageing' (Katz and Marshall 2003: 12). This shift is certainly important to address in the context of HIV, as it has significant implications for the future prevalence of this and other sexually-transmitted infections among older people. However, this criticism is not specific to the current book and could be made of most of the published literature in the field of sexuality and ageing. Overall, the book is written in a highly accessible and jargon-free style, and is relevant to researchers interested in issues relating to sexuality and ageing, as well as practitioners working with older people with HIV. It will also be of interest to older people living with HIV and to their friends and families.

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Simon Biggs, Ariela Lowenstein and Jon Hendricks (eds), *The Need for Theory: Critical Approaches to Social Gerontology*, Baywood, Amityville, New York, 2003, 262 pp., hbk $45.00, ISBN 0 89503 277 5.

During the 1940s and 1950s, sociologist Herbert Blumer published a series of essays dealing with the place of theory in social research (see Chapters 7–9 of *Symbolic Interactionism*). It was a time when theory with a capital T was rampant in American sociology, notably the brand championed by Talcott Parsons, who advocated a value-centred, systems approach. In sharp contrast to Parsons and in tune with the grounded empiricism of the Chicago School, Blumer argued that

theory that couldn't be put to work to understand our inner lives and social worlds wasn't much use to social researchers. He was partial to concepts and analytic frameworks that 'sensitised' us to the complexities of everyday life. During the same period, C. Wright Mills (1959) echoed the sentiment, but from a distinctly critical perspective. His call for 'sociological imagination' simultaneously challenged the data-dredging of 'abstract empiricism' and Parsonian grand theorising.

A half century later, *The Need for Theory* echoes these sentiments but with particular reference to social gerontology. The contributors call for empirical work informed by theoretical frameworks, concepts and methods that go beyond barebones hypothesis-testing, enabling social researchers to link psychological and interactional data with broader social issues and societal organisation. Theory that doesn't help us to understand both the immediate and more socially distant contexts of ageing is descriptively limited and not critically alert to the vast and complex linkages of experience. Ethereal frameworks such as disengagement and activity theory are too lean and value-laden to present reflexively what it means to grow old in today's world, which interestingly enough, implicates social gerontology itself as an experientially constructive enterprise. What is needed is critical understanding, reflexively aimed at the many threads running from everyday life to the social forces of globalisation and back.

The Need for Theory is divided into three sections that bear on these concerns. Following a brief introduction that highlights the need for theory, Section 1 presents various views of what it means to theorise gerontology. Significant is the reflexive tenor of the chapters; critical approaches not only promote societally pertinent understandings of the ageing experience, but also cast light on the social bearings and relevance of those understandings. Stephen Katz's chapter on critical gerontological theory takes the lead, arguing for the need to bring to the fore theory's linkages with social and political preferences. Ruth Ray's chapter calls for theory that provides 'emancipatory pedagogy', by which she means theory that learns from its own constructive intentions. Hans-Joachim von Kondratowitz discusses different forms of social constructionism that have influenced gerontology, and then presents guidelines for critical reflection that include 'counter-readings' which, he explains, 'provide an opportunity to systematically mobilise opposing evaluations from which to derive quite different research and practical consequences' (p. 60). Jon Hendricks's chapter completes the section by critically examining the concept of successful ageing and advocating interpretations that take into account the surrounding inequalities of success.

Section 2 turns to micro relations, the space where ageing bodies and everyday life intersect. Emmanuelle Tulle opens with a discussion of our lived relationship to ageing bodies, which moves well beyond the usual medicalised view of the issues. Centred on the important concept of the body as 'physical capital', she shifts our vision through a discussion of running as something older people can do with the bodies they own, not merely how they respond to decline. Ariela Lowenstein's chapter links life transitions, and family identity in particular, to a broader societal level of analysis, and presents the reader with the 'we' (not just the 'I') element of identity. Gerben Westerhof, Freya Dittmann-Kohli and Christina Bode examine ageing as a key element of meaning in later life, and

refrain from too negative or too positive a view. Finally, Simon Biggs relates identity, especially its 'deeper' elements, to the post-modern debate, resisting the excessively fluid contours of a post-modern reading of ageing.

Section 3 takes us to macro relations, to a world of ageing that increasingly crosses national borders, culturally and economically. Chris Phillipson offers a compelling case for the need to think of ageing in terms of globalisation, which, he argues, is rapidly reconstructing old age in terms hardly visible in personal accounts. Merril Silverstein, Vern Bengtson and Eugene Litwak offer a perspective on family systems in later life as they relate to processes of modernisation. Toni Calasanti also takes up the concept of successful ageing, this time placing it in the context of gender and intersecting power relations. Carroll Estes rounds out the section with a proposal for a critical theoretical perspective on old age policy. In the conclusion, the editors raise the question of where theory is heading in social gerontology. They present the need for critical awareness, yet theory that doesn't borrow so heavily from other disciplines as to eclipse the distinct issues of ageing, and the need for a commitment to novel views. The book is itself a critical ride from beginning to end. It would be useful reading for any and all who aim for broad and insightful theoretical understanding.

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Chris Phillipson, Nilufar Ahmed and Joanna Latimer, *Women in Transition: A Study of the Experiences of Bangladeshi Women Living in Tower Hamlets*, Policy, Bristol, 2003, 107 pp., pbk £14.99, ISBN 1 86134 510 0.

Women in Transition explores migrant Bangladeshi women's family lives in Tower Hamlets, an inner London Borough. There are five chapters, beginning with introductory and methodology accounts, and then moving directly to migration and the family life of Bangladeshi women as well as 'community and financial resources'. The last empirical chapter, 'Trans-national migration: costs and benefits', locates the findings in broader terms, and the final chapter comprises a 'conclusion and policy recommendations'. There are in addition photographs, a bibliography of key works, and appendices which include a study leaflet, the questionnaire administered to the 100 women, and reflections on working with ethnic minority communities. The introductory chapter locates the research in the general context of wider debates surrounding trans-national migration, and the particular context of the Bangladeshi community and current research on Bangladeshi women. The Bangladeshi community is described as amongst the poorest in Britain, living in poor housing with a higher than average household size.

The authors are keen to highlight the ways in which migration influences women's work in the household and wider community. They do this by exploring processes of change and continuity in women's activities of care, their social identities (including religion), and in relation to their aspirations for the next generation. Significantly, most of the women were drawn from what the authors describe as the 'middle generation' (aged 35–55 years), although younger women (aged 16–18 years), along with local leaders and practitioners were also interviewed.

Writing about the lifecourse in northern India, Vatuk (1995) described 'middle age' as a time when women's relationship to the household altered as they were cared for by sons and daughters-in-law and had grandchildren. At the same time, although women continue to control household resources, Vatuk noted that in the sub-continent 'middle-aged' women tended to be less involved in irksome household chores (*ibid.* 296–8). This is not however the experience of Bangladeshi migrant women living in Tower Hamlets.

The authors draw attention to the specificity of migration as it affects women's lives. They start with the process of 'family reunification', which occurred later for this community, at a time when many women felt isolated – having left significant kin back in Bangladesh. More recently, and in spite of sharing houses with an average of 6.6 members, it would seem that women's lives have become harder as they continue to be the primary carers for household members and with responsibility for the performance of domestic tasks. This draws attention to competing demands placed upon women: activities like learning English or working outside the house (desired by 47 per cent of the women) are subordinated to the care of household members. Like Gardner's (2002) exploration, this publication further draws attention to the expectations upon Bangladeshi women to care for household members and ailing husbands.

Whilst the authors have focused on Bangladeshi women in the domestic sphere, they have also presented the ways in which women's caring work can and does stretch across national boundaries. Refreshingly, the authors acknowledge that the maintenance of trans-national links by British-based Bangladeshi households can result in conflicts between household members. At the same time, they note ways in which migration is experienced at an emotional level in losses and gains. Nonetheless, an overwhelming image presented by this publication is that, for Bangladeshi women living in Britain, the migration experience has largely been a struggle. However, the ways in which women think of their future lives reveals that, like their Indian counterparts, Bangladeshi women stress the significance of their children.

Space could have been given to comparisons of the experiences of women based in Britain and those in Bangladesh. Although the publication includes the voices of women through extensive quotations, the text fails to provide a framework by which to understand their expressions. The text would have been greatly enhanced by fuller accounts of listening to Bangladeshi women and to their ways of telling experiences as part of the narrative styles in which they are embedded. This is particularly relevant to issues of generation and gender identity (Gardner 2002). A focus on migrants in relation to gender and the lifecourse is an important and growing field, and I liked the way the authors looked at women's lives

according to their stage in the lifecourse and also in relation to different marital states. This text will be very useful to students and policy makers as well as those who are interested in contemporary British society.

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Gill Hubbard, Ailsa Cook, Susan Tester and Murna Downs, *Sexual Expression in Institutional Care Settings for Older People: An Interactive Multi-Media CDRom*, 2003, Department of Film and Media Studies, University of Stirling, Stirling, Scotland, no price, no ISBN.

This research is presented unusually in CD-Rom format and is based on two *Economic and Social Research Council* (ESRC) funded studies: one conducted as part of the *Growing Older* research programme and one a doctoral study. Both focus on people with cognitive and physical impairments and adopt an ethnographic approach that integrates field notes and video to present qualitative observations of sexual expressions. The topic has been neglected but is vital to the quality of life. To address this neglect, the authors avoid defining sexuality but instead explore the ways in which the older people constructed and interpreted sexuality. After a general outline of social relationships with an emphasis on those with peers, the report moves on to discuss the effects of the social isolation that may be encountered in residential settings as well as indicating instances of 'rich and vibrant social engagement'. The importance of sexual relationships is then introduced and, whilst emphasising the dearth of information, an outline of available materials is provided. Both text and video clips illustrate several 'routine sexual scripts' that the research projects identified, such as flirtation, sexual innuendo and banter.

My initial reaction to the report is that the audience will be limited – the findings will only be available to those with the appropriate equipment and software: a compact disc cannot be freely picked up and put down as a book or written report. Once the equipment problem is overcome, however, the ease with which the material can be accessed and scanned to-and-fro, as well as the clarity of presentation, makes viewing worthwhile. On loading the CD Rom, the viewer is presented with a blue title screen, with the authors' names and instructions for

reading further. Navigation through the site is easy and everything is clearly signposted. The layout of the contents page is very clear with impressively simple but effective graphics, and the information needed can easily be found. Leafing through the pages of a book or report can be time consuming, but here the layout is ideal for speed and ease of access. Each section of the presentation – introduction, methods, findings and discussion – appears clearly on the contents screen with a both a clickable heading and list of contents.

Alongside these positive aspects of the report there are minor reservations about both the content and the presentation. On the content, I felt that there was much more that I needed to know – for instance, how did the researchers decide which information to include? Did they choose these particular sexual scripts because they had suitable video clips for illustration? Reference is made to other aspects of sexuality which have not been addressed, such as sexual harassment and homosexuality. It is relevant to highlight the need for similar studies in non-residential settings and with people who are not physically or cognitively impaired.

Though the abstract appears on the CD Rom insert, its reproduction placed before the contents page would lead the viewer into the report more clearly. Another minor criticism relates to the small size of the font. For instance, the title is not particularly striking in its present format and I strained to read the text throughout. I was left feeling unsure as to whether this was a report of academic findings or an experiment in presenting data in a new way: indeed, this point is addressed to some extent in a 'Production' section, where the authors highlight the need to find new ways to disseminate research findings that will appeal to the widest possible audience. Clearly, the format provides restricted scope for the presentation of the depth of material required for a full understanding of the topic. Nonetheless, its overall clarity and accessibility makes this a good introduction to the research area for various audiences – an explicit aim of the presentation. If this is intended to be a 'taster' of what may follow from the ESRC *Growing Older* projects, then it has certainly whetted my appetite for more.

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Joanna Mellor and Joann Ivry (eds), *Advancing Gerontological Social Work Education*, Haworth, New York, 2002, 261 pp., hbk $59.95, ISBN 0 7890 2064 5, pbk $39.95, ISBN 0 7890 265 3.

Barbara Berkman and Linda Harootyan (eds), *Social Work and Health Care in an Aging Society*, Springer Publishing Company, New York, 2003, 395 pp., hbk $52.95, ISBN 0 8261 1543 8.

In their introduction, Mellor and Ivry comment that 'gerontological social work continues to be an overlooked field of practice … and has a poor track record in attracting students' (p. 4). The relative paucity of social work students interested

in gerontological social work, the need to 'gerontologise' social work education to improve the knowledge base of all social work students and practitioners, and strategies to develop academic presence with gerontological expertise in social work faculties are priorities that both of these books set out to address. The case for gerontological social work is already clearly articulated in the United States of America. It is the purpose of Mellor and Ivry's book to report on research and practice-based initiatives which seek to improve and develop gerontological social work education, practice and scholarship. The book is divided into three main sections. Section 1 has four foundation chapters. The growth of gerontological social work education is examined and an argument made for infusing gerontological competence throughout the foundation modules of social work training as well as providing advanced gerontological teaching for those students wishing to specialise. Rosen and her colleagues mount a convincing argument for gerontologising generic modules on the premise that generalist social work students need to have an understanding of basic practice and theoretical issues relating to older people. Damron-Rodriguez and Saltz-Corley argue the importance of inter-disciplinary gerontological social work education for subsequent practice. Most importantly, the knowledge, skill and values required of gerontological social work are articulated, together with the specific and unique contribution of social work to inter- and multi-disciplinary teams.

The second and third sections of the book examine initiatives developed to promote scholarship and skilled practice in gerontological social work. All of the projects reviewed in the second section were recipients of grants from the John A. Hartford Geriatric Social Work initiative, which aims to 'improve the capacity of social work educators to train practitioners who would work in geriatric health care to improve the lives of older adults and their families' (p. 7). In their chapter, Robbins and Rieder discuss the detail of those initiatives. Lawrence and her colleagues explored student motivations to engage with gerontological social work training and subsequent practice. Their findings suggested that the development of interest in gerontological social work could be identified retrospectively as a result of positive earlier experiences with older people. This section of the book also explores different types of practice placement and their contribution to gerontological expertise. For example, field placements were arranged where students worked for one year in two agencies which were paired to ensure complementary and contrasting field experiences.

The third section of the book examines educational practice with a particular emphasis on integration. Olson, for example, reports on the development of a short gerontological module delivered to generalist social work students. Pre- and post-test evaluation of this infusion approach indicated that the module successfully increased knowledge and challenged student myths and stereotypes regarding older age. The integration of theory and practice was explored through initiatives to develop experiential learning opportunities. Gleason-Wynn, for example, reported on students undertaking comprehensive assessments of need in a supported housing project immediately after classroom sessions on assessment theory.

This book is a serious attempt to review practice, policy and academic initiatives to improve gerontological education in social work courses and to turn

out social workers with appropriate knowledge, skills and value bases. Although the case for a gerontological social work is assumed, almost every chapter starts with a demographic overview of the ageing population in the United States of America and its 'inevitable' demands on social work. This is repetitive and, as a result, somewhat overstated. The book successfully highlights the potential importance of a specific gerontological knowledge and skill base and discusses added value in respect of the contribution of an informed gerontological social work practitioner. I emphasise 'potential', given the reported dearth of practitioners trained in gerontology. The book also makes the case for infusing or 'gerontologising' generalist social work modules. This is often overlooked in generic social work courses and there is a risk of failing to illuminate for students the importance of, for example, developing lifecourse perspectives and the likelihood of encountering older persons in inter- and multi-generational contexts.

The collection edited by Berkman and Harootyan is the culmination of work produced by scholars funded by the Hartford Geriatric Social Work Faculty Scholars Program. This aims to increase the number of faculty members in schools of social work who are leaders and scholars in gerontological social work and health care. The introductory chapter by the editors sets the context and includes an overview of the changing political, social and cultural context of gerontological health care. The role of social work in health care settings is introduced as an underpinning theme in the subsequent chapters. The chapters report on a wide range of topics including, for example, research on depression in nursing home residents, case management, health promotion, grandparents raising grandchildren, and older African-American women.

The chapter authors, as well as reporting on their own research, seek to identify the *specific* knowledge, skills and values that gerontological social work brings to practice. In addition, they identify the implications for curriculum development, policy and further research. For example, in 'Grandparents raising grandchildren', Kropf and Wallis consider the role of social work at the micro, mezzo and macro levels and identify the need for improvements in the current practice evidence-base. Poindexter and Bayer, writing about grandparents caring for HIV-infected grandchildren, raise important practice issues at the intersection of HIV, ageing and child care (such as disclosure decisions). Similarly, McCallion and Kulumer highlight social work practice issues in the context of family systems and inter-generational work with older people who have developmental disabilities, and with their care-givers.

The final chapter by Gardner and Zodikoff draws together the book's various strands. They highlight the importance of an integrated biopsychosocial approach that takes into account older persons' health, wellbeing, coping capacities and social support resources (p. 338). Importantly, the authors highlight the role of an 'ethical practice' which includes the challenge of responding fully to the needs of older people against a background of resource scarcity, fragmented services and increasingly complex eligibility criteria. A continued push to develop an evidence-base, not only to enhance the role of social work but also to assist in the development of an ethical practice, is argued.

I enjoyed both books and found aspects of each informative. The Mellor and Ivry text resonates strongly with my own concern about the marginalisation of

gerontological issues in social work education and practice in Britain (Ray and Phillips 2005) and provides much food for thought. The Berkman and Harootyan book reminds us of the potential diversity of the social work role which goes beyond community care procedures. Both books discuss, engage with and attempt to articulate what a gerontological social worker might look like in terms of knowledge, skill and values. This represents a debate and discussion that is largely absent in a British context.

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David Cheal (ed.), *Aging and Demographic Change in Canadian Context*, University of Toronto Press, Toronto, 2002, 288 pp., pbk £15.00, ISBN 0 8020 8505 9.

In Canada, rapid levels of demographic ageing are expected in the next 40 years as a result of the passage of the 'baby boom' generation into 'old age'. Specifically, the proportion of the Canadian population aged 65 years or over is projected to increase from 12.3 per cent in 1998 to 19.0 per cent in 2020, and to 22.6 per cent in 2041. Increasingly, there are concerns about the implications of rapid population ageing for a wide variety of public issues, including the delivery of social, economic and health-care programmes to older people, the 'burden' of frail and sick older people on providers of informal supports, and the productive capacity of the economy as the workforce ages. The broad aim of this book is to examine demographic ageing in Canada and the challenges that this process poses to Canadian policy makers in the future. The book is one of a series sponsored by the Trends Project, a new Federal Government initiative intended to feed the policy development process through the collaboration of academics and government.

The book has seven chapters written by 10 contributors who are specialists in gerontology and demography. In the introductory chapter, David Cheal stresses that each of the contributors attempts to offer alternative perspectives to the 'alarmist stance' concerning an ageing society, while collectively 'they question whether an aging society necessarily presents greater problems than those facing society in the recent past' (p. 5). Cheal argues that demographic concerns can only be meaningfully addressed by contextualising an ageing society in a complex system of action predicated on relationships between different groups and different factors. Such a 'multi-dimensional approach' is adopted in Chapter 2 by Susan McDaniel, who introduces the new term 'inter-generational inter-linkages' (IGILs) to encapsulate the multiple types of connections and interactions between

generations. A conceptual typology based on five dimensions is developed as an organisational framework for discussing policy issues placed in three categories of IGILs: public transfers, family, and work.

In Chapter 3, Douglas Thorpe's exploration of the cultural constructions of old age is informed by diverse historical and literary sources. Thorpe concludes his essay by pleading for policies and educational programmes that would 'resist an easy demarcation of the stages of life … such as mandatory retirement' (p. 101). Ingrid Connidis's essay in Chapter 4 evaluates the impact of demographic and social trends on the provision of informal support for older persons. The need to assess potential extended familial support in terms of multiple age groups is stressed with particular emphasis on the role of gender and siblings. In Chapter 5, Prager reviews North American studies of the relationship between ageing and productivity. While concluding that thus far there is little convincing evidence to support the proposition that an ageing workforce is associated with significant reductions in productivity, he acknowledges the need for more rigorous examinations. With reference to time-use data, Marty Thomas and Rosemary Venne (Chapter 6) examine the current state of knowledge concerning the balance of work and leisure participation throughout the lifecourse. They recommend more flexible workplace policies (*e.g.* transitional retirement, alternative working time arrangements, and leave programmes) to accommodate the leisure needs of mid-life baby boomers. In Chapter 7, Joseph Tindale, Joan Norris and Krista Abbott investigate reciprocity and diversity in inter-generational relations. They argue that concerns about 'care-giver burden' are exaggerated and that patterns of interaction within Canadian families would be better understood by using conceptual frameworks that highlight the influence of different cultural norms.

Overall, this book has penetrating insights into key Canadian population ageing trends and policies. The relatively optimistic perspectives on the implications of an ageing society are generally well argued and fairly convincing. The problems typically associated with an edited collection of essays (*e.g.* overlap, unevenness in quality, and poor integration of the material) are minimal in this book thanks to some vigilant editorial work. For instance, integration is enhanced throughout by the recurrent use of various conceptual approaches, particularly lifecourse perspectives and multi-dimensional demography. The occasional cross-referencing of chapters is also helpful, while each chapter includes a useful concluding section that offers an overview of the policy implications of the content. It is unfortunate that the book does not include an index, although an extensive bibliography is provided. In Canada, this book will be of particular value to researchers in social gerontology and policy makers concerned with issues relating to older people. The book may also find a wider audience among international scholars interested in the policy context of population ageing.

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Tim G. Parkin, *Old Age in the Roman World: A Cultural and Social History*, Johns Hopkins University Press, Baltimore, 2003, 520 pp., hbk £40.50, ISBN 0 8018 7128 X.

This is a remarkable and highly-readable reconstruction of what can and cannot be learned from the scant surviving sources about old age in the distant past. The culture and politics of ancient Rome, as Parkin describes them, were dominated by 'prime age' male warriors. Consequently accounts of the lives of marginal people, such as anyone past 'prime age' (which was around 50 years), all women, slaves and poor people – that is, most people living in the ancient Roman Empire – survive hardly at all. A most valuable feature of this book is its frankness about these absences. Still more valuable is the story Parkin has retrieved from intensive, careful scholarly gleaning of an impressive range of sources. The story has a strong theme: to reject the 'long-standing myth that in past centuries older people enjoyed a life of prestige, comfort and respect', and to establish 'That some did is certain. That most did not should be recognised' (p. 226). It is a myth that no serious historian of old age, of any period or country subscribes to, but it is widely held as an implied criticism of our treatment of older people today – which actually is greatly superior to most past times. The cultural function of this myth is to remind us of our duty towards older people. It is most effective in ensuring that we do not forget it.

Parkin begins with numbers. It is easy to assume that in the distant past few people lived to old age. In Europe until the early 20th century, many people died in infancy. But if they did not, they had a good chance of living at least until their sixties. Parkin estimates that six to eight per cent of the population was aged above 60 years, rather higher than the percentage in the British population 100 years ago. The next question is whether old age was defined in the same way in the past as in the present. It is easy to assume that in 'the past' people were old at earlier ages than now. Parkin points out that the need for even the elite to walk rather than to take easy modern forms of transport, and in many cases healthier diets, makes this highly questionable. Perceptions of 'old age' in the Roman world were often highly subjective, and dependent less upon chronological age and more upon appearance and capacity for physical activity – but so are they now in everyday discourse. Some people might be defined as 'old' at 40 years of age, but more common was any age between 60 and 70. Interestingly, Parkin finds that the age of menopause, when women were assumed to pass the barrier to old age, was placed anywhere between 35 and 60 years, but more commonly at 40–55 years just as now. Another important theme of the book is Parkin's insistence, which again has contemporary resonance, on the great variety of experiences of ageing, which the Romans recognised at least as clearly as ouselves.

Modern Europeans are more constrained than the Romans by official definitions of old age, by pension and retirement ages, though these are currently being relaxed. Nevertheless in the Roman Empire there were official ages at which certain obligations were relaxed: military service at 50 years; public office around 70 years – again pretty much the age limits we still observe for such activities.

Parkin seeks to reconstruct attitudes to, and where possible the attitudes of, older people, though a problem is the near silence of older people in the sources. He is convincingly sceptical about the existence of dominant attitudes to old age in this (or any) time period. Again he stresses variety and subjectivity. He uses mainly legal and literary sources, since these are the most plentiful though even they survive patchily and neither unproblematically expresses 'reality'. The law tells us what was expected to happen rather than what did, while literature records selective and incoherent impressions. Philosophical writings come closest to recording the views of actual though privileged old men such as Cicero and Seneca. They tend to express a positive view of old age and scepticism of the view, prevalent even then, that old people were less esteemed than they 'used to be'. Comedy, satire and popular literature negatively stereotyped older people, especially women, but it was in the business of ridiculing all age groups.

In this account, power in the Roman Empire lay mostly with men aged in the forties and fifties. Some older men exerted authority because they merited it, but old age in itself did not grant automatic influence – much like now. It certainly did not grant automatic support from state or society or guard older people from marginalisation and degradation. Families were expected to give emotional and material support to older people who needed it. But children did not always live to their parents' old age, or the children of poor people might themselves be too poor to help. As Parkin describes it, there is a chilling silence about the fate of poor old people without families once they were unable to work for their own support. Certainly there was nothing of the safety net of state or voluntary welfare we can now take for granted, whatever its inadequacies. This fascinating study points to important long-run continuities as well as changes in the experience of old age, and convincingly de-romanticises the history of old age. It reminds us that Cicero's long-ago injunction has not lost its urgency: 'Old age will only be respected if it fights for itself, maintains its own rights, avoids dependence on anyone and asserts control over its own to the last breath'.

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