Reviews

doi:10.1017/S0144686X06215216

Malcolm L. Johnson (ed.), *The Cambridge Handbook of Age and Ageing*, Cambridge University Press, Cambridge, 2005, 744 pp., hbk £65, ISBN 13 978 0 521 82632 7, pbk £29.99, ISBN 10 0 521 53370 8.

Malcolm Johnson and his co-editors, Vern Bengtson, Peter Coleman and Tom Kirkwood, are to be congratulated on producing *The Cambridge Handbook of Age and Ageing*. The objective is said to be to produce a state-of-the-art guide to the current body of knowledge, theory, policy and practice relevant for age researchers and gerontologists across the world' (Frontispiece). Gary Andrews, the past President of the International Association of Gerontology, says in his introduction: 'Any powerfully informed effort to marshal systematically and concisely the breadth and depth of our contemporary knowledge and understanding of the phenomena of human ageing must be applauded as timely and highly relevant' (p. xviii). This handbook certainly attempts to do this. The number of topics covered and the array of national and international authors is impressive, with most of the key players in the ageing world represented.

Divided into seven sections, the book flows from the ageing body and mind to policies. Starting with a general section, the introduction and overview usefully looks at theory, history, global ageing and psychological and biological aspects of the subject. It then moves on, in the second section, to examine in more detail the ageing body with the first three chapters concerned with epidemiology. Genetics, psychodynamic and cultural approaches are also featured, as is a chapter on promoting health and wellbeing in later life. It is curious though that the other two chapters in this section focus on two specific problems: sensory impairment and mobility and falls. Important as these are, other examples might have been equally relevant.

There are 10 chapters in the third section on the ageing mind. These cover all the main areas, although the chapter on dementia in an Asian context sits rather uneasily here. Section 4 is concerned with the ageing self and, with 15 chapters, is the longest of the book. The chapters examine many of the negative aspects of old age and cover such topics as elder abuse, ageism, and dementia (again), and there are three on death. Section 5 is concerned with ageing relationships and offers useful evidence about the changing patterns of family life across the lifecourse, with many examples effectively showing diversity around the world. Section 6 is concerned with the ageing of societies and its various topics include gender issues and migration as well as the political and moral economies of old age. The final section on policies and services for older people is perhaps the weakest: it was probably too ambitious to attempt to cover such a wide field in a few chapters. Those on long-term care, services to keep people at home and on new technologies do no more than introduce these topics, but those on work and

health are slightly more comprehensive. This section would have been strengthened too by the addition of chapters on the environment and housing.

Almost inevitably there is some overlap, as on dementia, but on such a topic this is not necessarily a disadvantage. The index is particularly useful. The volume is, as Gary Andrews comments in the introduction, a wide-ranging multi-disciplinary tome. It is weighty in all senses of the word and certainly not a book to carry around or to read from cover to cover. But, as a source of evidence on a variety of topics, it can be recommended to staff, students and professionals. At 744 pages and with a paperback price of £29.99, the book is excellent value.

King's College London, UK

ANTHEA TINKER

doi:10.1017/S0144686X06225212

Hyunsook Yoon and Jon Hendricks (eds), *Handbook of Asian Aging*, Baywood, Amityville, New York, 2006, 512 pp., cloth \$74.50, ISBN 0 89503 316 X.

The scope of this book is both broad and ambitious. Asia is the most populous continent in the world, with over one-half of the globe's population. Even with a number of young countries in the region, more than one-half of the world's *older* people live in Asia. Indeed, in just two countries, India and China – not generally thought of as being particularly aged – we find a similar total number of people aged 65 or more years as in North America and Europe combined. The broad scope is indicated by the title, but actually the book is more thematic and selective than is conventional for a handbook; neither the subjects covered nor the geographical range are as comprehensive as one might expect in a reference handbook. The authors acknowledge that not all Asian countries are included. Strictly speaking, the book principally covers the Asia-Pacific region, with one chapter on India and one on Australia, so the extensive areas of Western Asia and Southcentral Asia are not included.

These reservations aside, this is a very good book and often thought provoking. The contributing authors are almost without exception established researchers and many are based in Asian countries. They have together contributed to a useful and readable collection of chapters and with reasoned foci, as outlined below. The editors echo a current view that ageing in Asia, especially in the Asia-Pacific sub-region, is at a crossroads. Many of the countries are already demographically ageing and have started to put appropriate policies in place, with Japan at the forefront. Many countries in the sub-region have for some time been addressing social policy for older persons and their families, but others lag in policy development and are struggling to prioritise many competing socio-economic and political demands. Recent reviews of progress made by individual countries since the *Madrid International Plan of Action on Ageing* of 2002 are now being conducted by the United Nations Economic and Social Commission for Asia and the Pacific (ESCAP). Readers are encouraged to watch for these imminent reviews.

The book has five main parts after a Foreword and a valuable introduction by the editors. Part I, 'Asian aging in social context', is regionally focused, with

chapters on the demography of ageing, economic resources and implications for ageing policy in Asia, the politics of ageing, and Asian style and culture as the context for population ageing. The following four parts focus on individual countries within the remit of their themes. Part II, 'Economic status, work and retirement', has four chapters, each country-based, which cover economic status, work and retirement in China, Japanese family resources and older people, empowering older adults as key resources in the development in Malaysia, and economic status, work and retirement amongst older Koreans. Part III, 'Living arrangements, family caregiving and social support', also has four chapters, which cover living arrangements and social support in India, living arrangements and social interaction in Taiwan, and older Filipinos and inter-generational support and welfare policies and caring burdens in South Korea. Part IV, 'Health and long-term care', has just three chapters, on health insurance in South Korea, long-term care insurance in Japan, and health and long-term care financing in Singapore. Part V, 'Community social services', also has three chapters that focus on China, Australia and Japan.

The book is a worthy contribution to the growing literature on the region. The chapters are well written, although there is some confusion in the referencing of Asian family names in one chapter. Thinking in terms of its potential audience, my undergraduate students of social gerontology will find the handbook useful, but it would have been more helpful still if an explicit, cross-cultural discussion had been included of key issues such as productive ageing, active ageing (especially the WHO policy framework) and successful ageing, and how far these are being achieved in the various countries. Part I nevertheless provides very good regional overviews of ageing in the Asian context with a welcome discussion of culture as the context. Policy makers and applied researchers will find the book a valuable resource, but might be excused for seeking a review of key programmes or topics in ageing (as outlined in the Madrid International Plan of Action on Ageing). Whilst some chapters do address such matters, a systematic overview might be desirable and, at times, the collection has an eclectic feel. Also, as acknowledged, there is inevitably greater coverage of some countries than others (three chapters on Japan, three on South Korea, two chapters on China but only one each for India, Taiwan, the Philippines, Malaysia, Singapore and Australia). In conclusion, this book is a valuable addition to studies in the gerontology of Asia. It can be warmly recommended to students and researchers and it will also have relevance in specific areas for policy makers and practitioners.

Asia-Pacific Institute of Ageing Studies, Lingnan University, Hong Kong

DAVID R. PHILLIPS

doi:10.1017/S0144686X06235219

Mark Lymbery, Social Work with Older People: Context, Policy and Practice, Sage, London, 2005, 256 pp., cloth £60.00, ISBN 1 4129 0204 5, pbk £18.99, ISBN 1 4129 0205 3.

At least in the United Kingdom, engaging students' interest in work with older people is a challenge for professional educators in social and health care. The situations of older people are often seen as uninteresting or depressing, whilst work in old-age settings is regarded as offering little scope for imaginative interventions or for developing high-level skills. Given the opportunity to work with older people, students often discover that it is far more interesting than they had imagined, but may then note that other sectors are better resourced and that their negative assumptions about practice are confirmed.

The introduction since 2003 of a new UK social work degree and the expansion of student numbers has prompted a wave of textbooks for the new curriculum. This example is intended as 'an aid to understanding the position of contemporary social work with older people in both conceptual and theoretical terms' (p. ix). It is not a 'how to do it' guide to practice, although the author expects it will help students to engage with the requirements for training that underpin the new degree. The book has three parts. The first is about context, with chapters on older people and society and on the history of social work. The second focuses on policy, with chapters on community care, partnership and inter-professional working, and social work and health care. The final part, on practice, begins with an overview of the social-work role with older people followed by chapters on assessment, care management and intermediate care, each of which has a practice scenario.

Providing a coherent guide to the constantly shifting social- and health-care landscape is no easy task. Lymbery provides an honest account of the confusions in current British policy and practice that will resonate with the experiences of students and others. For those new to this area, however, the arguments may not be easy to follow and there are surprising gaps and inconsistencies. For example, direct-payments are only briefly considered, and individual budgets are not mentioned despite being central to government plans for adult care. The assessment chapter sensibly focuses on the complexities of the 'single assessment process' and on factors that may limit the scope for effective assessment, such as eligibility criteria and the financial penalties which have been imposed in England and Wales for delayed discharge from hospital. These limiting factors do not emerge in the accompanying scenario, which presents an unhurried and relatively straightforward assessment of a man living at home.

The key issue is whether this book will promote a more positive understanding of gerontological social work for students and experienced practitioners. Its central argument is that to provide a more adequate response to the complexity of older people's needs, practice should combine three complementary approaches. Besides the traditionally dominant *administrative* approach, which is concerned with liaison, co-ordination and resource allocation, it is argued that to mobilise community resources for problem solving, practitioners should also be capable of using *individualised therapeutic* and *collective* approaches. This is an appealing argument, but despite an effort to integrate the lauded approaches into the text and the practice scenarios, they remain marginal. The effect is to underline rather than challenge the current limited vision of social work practice with older people in the United Kingdom. The problem, I feel, is that the author's interest lies in the challenges facing practitioners in inter-professional and inter-agency working, *administrative* issues by his definition, rather than in the issues that older people face and how these might be addressed using the individualised therapeutic or

collective strategies. Readers wishing to explore the potential for developing these aspects of the social-work role will need to look elsewhere to learn about the range of therapeutic interventions with older people, such as counselling, life story and group work, and of community-based approaches to supporting older people and reducing their social exclusion.

Sadly, readers of this book may conclude that there is little contemporary research into old age that is relevant to social work. The opening chapter on older people and society relies on a few well-respected British texts from the early 1990s. More recent work is entirely absent, such as the Economic and Social Research Council's Growing Older research programme on quality of life in old age, and the expanding work on relationships and family and on death and dying in old age. It is particularly puzzling to find nothing about developments in the understanding of dementia, apart from a brief reference to Kitwood's work, or on other aspects of mental health in old age. And it was surprising to read that cognitive behaviour therapy and psychodynamic approaches are unlikely to be appropriate for older people (p. 137). The most startling omission, however, is the voices of older people themselves, whether recounting their experiences as service users or carers, or as participants in the many local and national initiatives concerned with shaping the development of services.

University of Reading, Reading, UK SALLY RICHARDS

doi:10.1017/S0144686X06245215

Christina Victor, *The Social Context of Ageing: A Textbook of Gerontology*, Routledge, Abingdon, Oxfordshire, 2005, 368 pp., hbk £70, ISBN o 415 22140 4.

Christina Victor's new book arrived on my desk at an extremely helpful time, as I was teaching, exceptionally this year and for the first time, a course on 'Ageing in Society' to our MSc students. I wanted a good up-to-date text that addressed both the cutting edge of sociological thinking as it applied to ageing and the empirical research base. Christina Victor's book does not entirely do this – she is not a sociologist – but it does address many of the issues that I wanted to look at, and others besides, as might be expected from a 'textbook in gerontology'. The book begins with a short chapter on the 'Social perspective in ageing', distinguishing biological ageing, psychological ageing (the subject of a later chapter), the 'social gerontological perspective' and concluding with definitions of 'old age'. Chapter 2 is a very useful and competent chapter on 'Theoretical perspectives on the study of ageing'. Chapter 3, which again reflects the author's strengths, covers 'Methodological aspects of the study of ageing'. Christina Victor is at her best when explaining the differences between age, cohort and period effects, illustrating different research methods (crosssectional and longitudinal research) and outlining major longitudinal studies of ageing.

The remainder of the book focuses on topics that are largely, but not exclusively, linked to health and social care: the demographic context, health and

illness, psychological health and wellbeing, family and social networks, material resources in later life, caring networks and services for older people. The book concludes with a short chapter on 'The future of old age'. Each chapter examines definitions, the evidence base and, in the case of family and social networks, material resources in later life and services for older people, and each includes useful historical background, which can be very helpful to students coming new to gerontology. The particularly well-covered topics are retirement, family and social networks and caring.

Arguably, this book raises some of the questions that make teaching ageing from a sociological perspective so difficult. Social policy intrudes, not as a topic for sociological analysis – although the author gives due attention to perspectives such as the 'political economy of ageing' - but there is no discussion, from a sociological perspective, of the care home as an organisation, or of the impact of bureaucracy on the delivery of services. There is less attention than might be expected to the body, and virtually none to issues of 'place', home, neighbourhood, urban and rural living, or to death and dying. And although gender and ethnicity are present, they are given little attention in their own right as key to life experience, and hence to ageing. I do not raise these points as criticisms of The Social Context of Ageing, but rather as comments. In preparing my course, I found that some of the mainstream topics in sociology (pace Giddens' standard textbook) like social stratification, religion, mass media, organisations and government and power, were not the equivalent mainstream topics in textbooks on social gerontology. There is a wide ranging list of references. Routledge can be praised for a thorough, and therefore valuable, index. My only reservation is that I would much prefer to have references at the end of each chapter to a full list at the end of the book. The Social Context of Ageing has the immense merits of being clearly and logically written without any pretensions. It can be warmly recommended to a wide audience.

Institute of Gerontology, King's College London, UK

CLAUDINE McCREADIE

doi:10.1017/S0144686X06255211

Judith Steinberg Turiel, Our Parents, Ourselves: How American Health Care Imperils Middle Age and Beyond, University of California Press, Berkeley, California, 2005, 306 pp., hbk \$55/£35.95, ISBN 0 520 23276 3, pbk \$21.95/£13.95, ISBN 0 520 24524 5.

This book is an exploration of the impact of health care in the United States upon its senior citizens and those who care for them. The author is a freelance medical writer with extensive knowledge and significant publications in the medical field. The book draws upon her personal experiences, especially in the last years of her parents' lives and those of a friend. Their stories are interwoven with detailed discussion of the ageing process and of specific aspects of health-care provision, such as health insurance, 'rationing' and pharmaceuticals.

For various reasons, I have found it very difficult to read this book and write the review. First, and probably most important, the tone of unremitting gloom is hard for a reader in her 76th year to bear. As T. S. Eliot remarked in *East Coker*, 'humankind cannot bear too much reality' and although at my age the negative aspects of ageing have to be faced, there were times when I felt 'enough is enough'. The task was not made easier by a torrent of detail that at times seemed prolix, and numbed the intellect even when the overall content was important. Essentially, this is a polemic, which does not mean that it is invalid or inaccurate. But the essence of the polemic is that it leaves no room for alternative views or perceptions. There is little to suggest that those working within the American health-care system ever show respect, compassion and understanding for their patients. Furthermore, the author offers only fleeting and qualified evidence of any happiness, contentment or 'good days' in the lives of these old people in decline. As a lifelong academic, trained to see both sides of questions, I feel a sense of unease about what I read. Am I and the author in different kinds of denial?

The assessment of the book is made harder by my relative ignorance of United States health-care provision, but the issues raised are salient and will be recognised by British readers. Many of the problems raised resonate all too strongly; for example, the pervasiveness of ageism, the 'compressed morbidity' of the last years, the especially painful periods of mental infirmity for many old people and their relatives and friends. We can all cite distressing examples of the failures of systems and of workers to respond in a timely and appropriate way. The financial problems of the British National Health Service are evidently exacerbated by increased longevity and the associated health problems, although there are profound differences between the UK and the USA in the structure and funding of health services.

In the concluding chapter, the author, writing as the 2000 presidential election approached, suggests that American health care is being commonly described as 'a system – or non system – in crisis, nearing collapse' (p. 227). She paints a graphic picture of financial instability, with trenchant criticism of the Bush administration. She refers to the work of John Rawls and puts the debate into the context of basic social values of justice and equality. In her view, the USA has massively failed to address the health rights and needs of older people. In the UK, we have to weigh up whether, despite a more principled and egalitarian framework, our National Health Service is moving towards a similar crisis - or is already in it? In sum, this book is painful to read and at times indigestible. Nonetheless, the passion and indignation of its author put a vitally important moral issue before us. Health care is a crucial component of the human rights agenda; indeed, the author quotes Martin Luther King: 'of all the forms of inequality, injustice in health care is the most shocking and inhumane' (p. 227). Economic arguments can be deployed for the improvement of health care for children, the future workers in society, and for preventative health care at all ages. But health care for old people who are in the later stages of illness is essentially a moral imperative.

Professor Emeritus of Social Work, University of Nottingham, UK OLIVE STEVENSON

doi:10.1017/S0144686X06265218

Julian C. Hughes, Stephen J. Louw and Steven R. Sabat (eds), *Dementia: Mind, Meaning and the Person*, Oxford University Press, Oxford, 2006, 310 pp., hbk £75.00, ISBN 019856614 X, pbk £29.95, ISBN 0198566158.

This book will appeal to a broad range of readers, including academics, ethicists, activists, health administrators, policy makers and practitioners of dementia care, interested in the philosophical issues and practical difficulties raised by cognitive impairment. The focus of the collection is a critical exploration of the nature of personhood, dementia and the troubling assumption that we cease to be persons when we lose our memory. The source of this assumed loss of personhood with advancing dementia becomes clear in McMillan's (Chapter 4), Radden and Fordyce's (Chapter 5), and Matthews' (Chapter 10) discussions of English empirical philosopher John Locke's conception of personal identity, central to which is the recollection of past actions, which secures the continuity of consciousness. The implication of Locke's conception of identity for persons with dementia is that if one's existence can no longer be sustained by recollection and consciousness, the person effectively ceases to exist.

The deep-seated philosophical roots of the assumed loss of personhood with cognitive impairment are brought to light and critically examined in this collection of essays, and alternatives to the 'hypercognitive' (Chapter 14) Lockean tradition are explored. Heidegger, Wittgenstein, Gadamer, Merleau-Ponty, Ricoeur, and Charles Taylor are among the philosophers whose work is drawn upon to elucidate alternative understandings of personhood. Many of the contributors situate their analyses in the hermeneutic-constructionist tradition and discuss the constitutive role of language and of interaction in the formation of the self. In varying ways and degrees the argument is made (in Chapters 5, 9, 11–16 and 18) that precisely because others play a key role in the construction of an individual's identity, they might also be instrumental in sustaining that identity where one's own capacity to do so erodes. Several of the contributors remind us that this is what Kitwood argued with his theory of the dialectical process of dementia. According to Kitwood, persons with dementia can be adversely affected at a neurological level by malignant social processes such as infantilisation and disempowerment, and equally enhanced by more person-centred and humanising interactions.

A view of personhood that hinges on social interconnectedness provides a crucial critique of what Post (Chapter 14) describes as the 'hypercognitive snobbery' found in philosophical traditions where consciousness and memory play a cardinal role in the constitution of personhood. Advocates of the hermeneutic-constructionist tradition, however, often miss the significance of the fact that the body is a fundamental source of personhood, particularly when higher cognitive faculties are severely impaired. Matthews's contribution (Chapter 10) is a corrective; his use of Merleau-Ponty's notion of 'body-subject' brings the body into a theoretical re-visioning of personhood. Matthews reminds us that the body is a fundamental means to communicate and, as such, the body is essential to the expression of personhood. Aquilina and Hughes (Chapter 9) devote a section of

their essay to the importance of 'situated agency', but it is not central to their analysis. Indeed a weakness of *Dementia: Mind, Meaning, and the Person* is the relative absence of philosophical and practice-based reflections on the role that the body plays in sustaining and manifesting personhood. Because discourses on personhood and dementia for the most part have failed to embrace the 'facticity' of our embodiment, one only wishes that this collection of essays had set a new precedent by granting the body greater emphasis.

Chapters 4, 9, 10–16 and 18 remind the reader that rethinking personhood is not merely a philosophical exercise but also has important practical implications. An assumed loss of personhood in advanced dementia can negatively influence the care provided to people with dementia, in that it can lead to their treatment as objects rather than as people worthy of dignity and respect. Thus the quest to broaden our understanding of personhood beyond the narrow confines of memory and consciousness is ultimately in the interest of humanising our interactions with persons with dementia, and their care. However, a consideration of how the philosophical insights proffered in this collection could enhance what is already advocated as person-centred dementia care, would have strengthened this book's contribution to the literature.

My criticisms are minor compared to the book's success in critically exposing the limitations of a hypercognitive culture and the need to move beyond consciousness as the defining pillar of personhood. It is clear from this collection that bodily intentionality, spiritual and religious faith, emotion and relational capacity must count as morally relevant features of the person whose self-consciousness and memory have faded. One hopes that *Dementia: Mind, Meaning, and the Person* will inspire further philosophical quests for a more exhaustive and inclusive understanding of personhood and the application of such insights to practice.

Toronto Rehabilitation Institute, Toronto, Canada

PIA KONTOS