The chapter which gave me the most food for thought, 'Duplex planet: the art of conversation', describes an approach which I had not tried in my own group work. It shares the work of Greenberger, an activities director in a nursing home. His approach takes a sharp turn from the oral history approach, in that he is more interested in fragments than whole stories. He asks original and unconventional questions to provoke responses, such as 'What's better, coffee or meat?', 'How close can you get to a penguin?' and 'Who is Frankenstein?' The great strength of this approach is that there is no right or wrong answer, no particular demands on memory and a strong emphasis on inviting opinion and insights in the here and now. In all the described arts initiatives, there is a strong connecting theme of giving time and creative space for people who have dementia to express themselves through words, music, movement or images. For those of us interested in developing these approaches for a wider audience, I think there is more work to be done to explore the particular qualities that practitioners leading this work require. The chapter on 'song writing' gives an example of a musician, being trained by Friedman, who had his apprenticeship stopped because he proposed to include in his own songs a line offered him by a person with dementia. There is a need for those working in this field to be without too much ego and dominance in order to put the person with dementia 'centre stage'. There is a need for good facilitators more than performers, good listeners more than talkers, and the essential qualities of observation, attention and absolute respect for each individual.

As Davis Basting reminds us in the conclusion, ultimately memory is not just an individual entity but has a strong social dimension: 'To forget that is to ignore one of the best "cures" for memory loss – creating a net of social memory around a person whose individual control of memory is compromised' (p. 161). Arts therapies undoubtedly hold a vital key for enabling relationships to be restored and for people with dementia to find a voice though many different media. *Forget Memory* is a welcome and scholarly contribution to keeping the arts and dementia high on the agenda.

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Esme Moniz-Cook and Jill Manthorpe (eds), *Early Psychosocial Interventions in Dementia: Evidence-based Practice*, Jessica Kingsley Publishers, London, 2009, 240 pp., pbk £19.99, ISBN 13: 978 1 84310 683 8.

Anthea Innes, *Dementia Studies: A Social Science Perspective*, Sage, London, 2009, 208 pp., pbk £20.99, ISBN 13: 978 1 4129 2164 0.

Political support for people with dementia in the United Kingdom (UK) peaked in February 2009 with the publication by the Department of Health of *Living Well with Dementia: A National Dementia Strategy*. More widely, throughout the European Union, in July 2009 the European Commission adopted a Communication and Recommendation on Alzheimer's disease and other neurodegenerative diseases that included giving priority to sharing best practice in care and ensuring the rights and dignity of people with dementia and their carers. These developments are to be applauded, but now comes the challenge of implementation.

Thankfully Moniz-Cook and Manthorpe in *Early Psychosocial Interventions in Dementia* provide commissioners and practitioners with a goldmine of evidence-based practice with which to change, develop and deliver a range of psycho-social dementia services and interventions. It is a pleasure to read in the opening pages a clear rationale for the book and how it can address gaps in knowledge and practice. The language, editing and structure of the work make it particularly accessible. Contributors include familiar UK experts such as Bob Woods, Linda Clare and Georgina Charlesworth, but I found it exciting and refreshing to discover many other European contributors. What distinguishes this book is that the interventions it puts forward are set in the evaluative tradition of dementia care and its aspiration is to listen to the voices of people with dementia and of their carers. Each chapter also provides a conceptual basis for the intervention described, a summary of outcomes and a case illustration of how the intervention might be carried out in practice.

Many of the interventions have emerged from randomised trials, and the outcome measures applied in evaluation can also be used by practitioners to measure outcomes in routine practice. The book describes three broad categories of early and timely psycho-social interventions that can be applied in practice: support at the time of diagnosis (Chapters 2 and 3), such as conveying the diagnosis; interventions to enhance cognition and memory (Chapters 4–8), such as cognitive stimulation and memory groups for people with early dementia; and interventions to enhance psychological and social adjustment (Chapters 9–13), such as group psychotherapy and art therapy. The final section on developing evidence-based psycho-social support services provides useful examples from different settings such as primary care and voluntary-sector settings. Readers will also appreciate the stepped care framework and the guidelines for selecting interventions; both will readily assist practitioners' decision making. This book undoubtedly makes the case that knowledge and practice from local and national settings *are* transferable, and that the opportunities to learn from practitioners across Europe must be seized now.

Dementia Studies by Anthea Innes merits serious attention. It is a provocative and stimulating work that will be used by academics and advanced students of dementia, sociology and social gerontology for some time. It begins by considering dementia and dementia care from three broad theoretical perspectives: bio-medical, social-psychological and social gerontological. It concludes with a disarmingly simple four-point model for the study of dementia based on theory, policy ideas, care practices and research. As the book moves on, we are introduced to the contradictions, paradoxes and multiple interpretations surrounding dementia and dementia care. Reassessments of the icons of progressive dementia care are made, for example: 'Thus an ideology (person-centred care) that is widely accepted and promoted has yet to be tested in reality and … it has not yet been possible to prove or refute Kitwood's hypotheses' (p. 16). Likewise, evidence is produced to support the claim that 'the medical approach has its place but [with its] emphasis on future treatment and care there is a regrettable shift away from responding to the care needs of people with dementia in the here and now' (p. 25). This sentiment has recently been powerfully endorsed by Richard Taylor (2007), a retired American psychologist who was diagnosed with early-onset Alzheimer's disease, in his book *Alzheimer's from the Inside Out*.

Chapter 2 deals with the political, economic and social issues surrounding dementia and we are reminded that, by 2050, 70 per cent of people with dementia will be living in developing countries. The difficulties of estimating the true cost of dementia are acknowledged in various studies, but opportunities for savings through more effective services are not. Chapter 3 considers whether caring for people with dementia is founded ultimately on utopian ideals and provides a comprehensive review of expectations against the realities of practice. Innes then examines dementia studies in their locational, cultural and social contexts with attention to family relationships and ethnicity. She reviews issues around stigma and stresses the importance of understanding the ethno-cultural values of communities as a starting point for developing carer-support groups. This chapter is important in helping us to understand why person-centred care is so difficult to implement. The complexities of ethnicity, stigma and subcultures in the workplace present major challenges. Chapter 5 has much to offer in terms of policy, practice and approaches to research. It demonstrates how the voices of people with dementia are only now beginning to be heard, but recognises that people with dementia are not just passive research participants but can be, and are, enabled to become active in deciding the direction of dementia research, for example by sitting on panels that make decisions about research funding. This synthesis of dementia studies from a social science perspective is a valuable academic resource. In particular, it highlights the need for future dementia studies to examine not only the micro level of the experiences of people with dementia but also the social systems and processes that continue to shape their lives.

References

Department of Health 2009. *Living Well with Dementia: A National Dementia Strategy*. Department of Health, London.

European Commission 2009. *Commission Steps Up Action on Alzheimer's Disease and Other Neurodegenerative Conditions*. Press release IP/09/1171, Brussels, 22 July, European Commissions, Brussels. Available online at http://europa.eu/rapid/pressReleasesAction.do?reference=IP/09/1171& [Accessed 16 January 2010].

Taylor, R. 2007. *Alzheimer's from the Inside Out*. Health Professions Press, London.

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Ailsa Cook, *Dementia and Well-being: Possibilities and Challenges*, Dunedin Academic Press, Edinburgh, 2008, 90 pp., pbk £13.50, ISBN 13: 978 1 903765 76 0.

This is a terrific, timely and scholarly little book. It provides an accessible, succinct and sophisticated account of the potential for wellbeing in dementia and deserves more paper than it takes, for within its pages lies compelling evidence of