Ageing & Society 22, 2002, 383–396. © 2002 Cambridge University Press Printed in the United Kingdom

Reviews

DOI: 10.1017/S0144686X02218930

Caroline Cantley, A Handbook of Dementia Care, Open University Press, Buckingham, 2001, 386 pp., pbk £22.50, ISBN 0 335 20383 3.

A Handbook of Dementia Care is a timely and comprehensive book for all who care for and about people with dementia. The book is edited by Caroline Cantley, Professor of Dementia Care at the University of Northumbria and Director of Dementia North, part of the Network of Dementia Service Development Centres. The contributors represent a range of disciplines, predominantly social work, psychology and nursing. The Handbook is intended as a resource for practitioners and professionals keen to develop their service the better to meet the needs of people with dementia and their families. As such, the book comprises an ideal core text for undergraduate and postgraduate programmes not only in dementia studies but also in gerontology, nursing, psychology and social work.

The book comprises 20 chapters divided into three sections, each addressing one question. Section One seeks to answer, What is the nature of dementia and how can we better understand it? Chapters in this section explore dementia from biomedical and clinical (McKeith and Fairbairn), psychological (Maciejewski), sociological (Bond), philosophical and spiritual (Coleman) and user (Gilliard) perspectives. Section Two seeks to answer the question, What do we know about what constitutes good practice in dementia care? Chapters in this section explore practice development (Clarke), assessment and care planning (Stanley and Cantley), living at home (Parsons), communication and personhood (Innes and Capstick), therapeutic activity (Brooker), working with family carers (Nolan and Keady), care settings and environment (Marshall) and ethical ideals and practice (Manthorpe). Section Three, the largest section, seeks to answer the question, How does the policy, organisational, and research context of dementia care affect service development? Chapters in this section explore the policy context (Cantley), people in organisations (Cantley), developing service organisations (Good), developing quality in services (Cox), involving people with dementia and their carers in developing services (Killeen) and research, policy and practice in dementia care (Cantley and Smith).

The book directly confronts the multiplicity of understandings of the nature of dementia and, by inference, the attributions made as to what causes the difficulties of living with dementia. In so doing it provides a forum for us to consider whether the 'suffering' and 'burden' so commonly associated with living with dementia are inevitable consequences of neurological changes or are more externally derived from society's attitudes and response to people with cognitive impairments. Such attitudes are reflected both in social policy and the types and organisation of service supports offered.

Throughout the text there is an emphasis on the need for a dynamic, individualised, person- and family-centred response to meet the needs of people with dementia. The text emphasises person-centred and family-centred assessment and care practices, multidisciplinary and partnership working, service development and organisational change and the need to link research and practice.

The *Handbook* challenges us to design and develop systems that allow for a proactive, timely, holistic, multi-disciplinary, multi-professional response which works in partnership with people with dementia and their families across different organisational boundaries and service settings. The *Handbook* rightly stresses that such a dynamic, person-centred approach requires that we work not only with our own theoretical perspective but also learn the language of, and develop a facility for, communication with key players who come from different theoretical positions.

This is a timely and much needed text. The strength of the *Handbook* is its ability to put the lived experience of dementia within a theoretical, organisational and policy context. In so doing it is the first text which brings together the range of perspectives and concerns in the field of dementia. As Cantley rightly points out in her introduction, it is only when such complexity and heterogeneity is fully grasped and worked with that we can begin to address the real needs of people with dementia and their families.

The book is clearly structured with useful summary bullet points at the beginning of each chapter and concise conclusions. Amongst the book's few weaknesses is the inevitable overlap between some chapters and the lack of depth of coverage of some key issues such as primary care and end-of-life care. Furthermore, the book could be viewed as being narrowly focused, for all the contributors work in Britain and much of the material refers to the British context. My own view is that such a concentrated perspective is timely.

Bradford Dementia Group, School of Health Studies, University of Bradford MURNA DOWNS

DOI: 10.1017/S0144686X02228937

Mike Nolan, Sue Davies and Gordon Grant (eds), Working with Older People and their Families: Key Issues in Policy and Practice, Open University Press, Buckingham, UK, 2001, 228 pp., hbk £55.00, ISBN 0 335 20561 5, pbk £17.99, ISBN 0 335 205607.

This timely book explores some of the tensions between the identification of, and response to, the needs and wants of older people and fiscal imperatives and associated challenges. The recently-launched National Service Framework for Older People stipulates that there has to be a dialogue between the professionals and the receivers of care services. Nolan *et al.* argue that advancing such a dialogue is the primary intent of their book. As such, it offers insights into the contemporary challenges of moving beyond the rhetoric of 'person-centred care' to the reality of practice-based understanding. Evident throughout this thought provoking book is the imperative to establish conceptual clarity about the meaning of person centredness, not least to avoid policy spin.

The book is the product of the first phase of the AGEIN (Advancing Gerontological Education in Nursing) Project, a three-and-a-half year longitudinal study funded by the English National Board for Nursing, Midwifery and Health. This project and a number of contemporary key policy and research reports highlight the growing concerns about older people's negative experiences of care. The project's ultimate aim is to identify an epistemology of practice which seeks to unite the providers of care services for older people. A shortcoming, given this explicit intent, is the predominance of nurse contributors. There are nine chapters which, amongst others, seek to explore quality of life, relationships, the care needs of users, and carers and mental health.

This book is a highly significant contribution to the literature on developing person-centred services and practice. It traces and places inconsistencies and contradictions in the development of both health care policy and professional and care worker education policy. It calls for a reconsideration of the basis of person-centred care and argues that such care cannot be divorced from an analysis of the meaning and practice of care itself.

Achieving improvements in older people's experiences of care will, the authors argue, require an intense focus on the meaning of humanistic practice. Expert gerontological nurses will be delighted to have such support for their practice at a time when the drive is for reductionist, task-focused, technically-competent care, as evinced by the current policy debates on health and social care assessments for older people. I welcome the firm way in which this book places humanistic care legitimately back onto the agenda. It draws together evidence which challenges much of the rhetoric influencing policy, learning, practice and research.

A consistent theme is the fundamental challenge of combining proficient technical care, considerate fundamental care and good interpersonal care – care which draws on knowledge, skills and expertise, and applies these to the nature of the relationship. This book offers nurses and professionals the basis for supporting the principles of humanistic care. In the world of technological advance and financial imperatives, many of us are desperately trying to hold onto the principles which make central the concept of therapeutic care. This book will inspire, motivate and give confidence to many, but whether it will make a difference to the investment of resources to services for older people and result in humanistic values being held as central by the British government remains to be seen.

Gerontological Nursing Programme, Royal College of Nursing, London PAULINE FORD

DOI: 10.1017/S0144686X02238933

Mark Priestley (ed.), *Disability and the Life Course: Global Perspectives*, Cambridge University Press: Cambridge, 2001, 252 pp., hbk £40.00, ISBN 0521 79340 8, pbk £14.95 7934 9.

As a lecturer in social work and social gerontology, with a teaching interest in both ageing and disability and a research interest in the lifecourse, I am keenly aware of the paucity of publications which engage with a lifecourse perspective on disability through the lived experience of disabled people. Although there are exceptions (see for example: Trausdottir and Johnson 2000), it is even rarer to find a publication which also encompasses a crosscultural and global perspective. Mark Priestley's edited book is therefore a welcome addition to the field.

The aim of this collection is set out in the introductory chapter 'to challenge the concept of "normal" life course progression in the modern world' (p. 11). This is in much the same way that social gerontologists have increasingly challenged the notion of 'normal' ageing. It is now generally acknowledged that both the 'subjective' and the 'objective' experiences of ageing are dependent on the way in which 'age' interacts with generation, place, class, gender, sexuality and ethnicity over the lifecourse, and that this takes place within the context and constraints of social policy (local, national and global), fiscal resources and a dominant socio-cultural construction of 'age'. Similar issues are addressed in this book in relation to 'disability'. According to the editor, 'The various chapters demonstrate how the diversity of life experiences and life style in a globalising world sit uncomfortably alongside policies and practices intended to police the boundaries of normal life course progression. The increasing claims of disabled people for self-determination, choice and control over their lives highlight the significance of this paradox' (p. 11).

The contributors to the chapters come from a wide variety of backgrounds, and certainly reflect the diversity of experience and lifestyle which the book claims to represent. The chapters present a range of lifecourse experiences from 13 different countries across five continents, across different generations and from personal, political and theoretical perspectives. Issues relevant to people with physical, sensory and cognitive impairment are addressed although, as the editor notes, there is no chapter written directly by anyone claiming the label of learning difficulties. The experiences of childhood, adulthood and old age are all represented in some way.

The book comprises 20 chapters which are organised in three parts. In Part 1: 'Concepts', there are five chapters in which we are introduced to a number of theoretical concepts which seek to develop the readers' understanding of disability and the lifecourse. Anita Ghai's chapter, 'Marginalisation and disability: experiences form the Third World' is a particularly useful, albeit rather brief, contribution which challenges the notion of 'commonalities' and points instead to the importance of locality and dominant cultural ethos in understanding disability over the lifecourse. Part 11: 'Methods and stories' consists of seven chapters in which we are introduced to various narratives of disability. These serve to illustrate the importance of recognising the interaction of disability, culture and place, religion, gender, life events, ethnicity and class over the lifecourse, and the differential importance of each

of these for individuals, if we are truly to understand the subjective experience of disabled people. Finally, Part 111: 'The politics of transition' comprises eight chapters which explore specific transitions in the lifecourse: childhood, adulthood and old age. Two of these chapters are of particular interest to social gerontologists. Chapter 18: 'Ageing with a disability in Japan', by Miho Iwakuma, provides an account of the way in which disabled adults construe their identity as they age and the biographical assets which accompany them into old age. Chapter 19: 'Ageing with intellectual disabilities: discovering disability with old age: same or different?' by Nancy Breitenbach is an exploration of the commonalities and differences (and associated myths) of ageing with, or without, a learning disability, and ends by suggesting that old age may be a 'golden opportunity' (p. 218) for adults with learning difficulties.

This book clearly has a lot to offer in developing an understanding of disability and the lifecourse in a global context, and, for social gerontologists, highlights the place of age and generation within that discussion. Like many edited collections, however, it does have its problems. In trying to redress the obvious lack of published material in this area, and by trying to include a wide representation of voices and perspective, Mark Priestley has brought together a rather fragmented collection, which as a result suffers from a lack of coherence. Individual chapters are relatively short, and would have benefited from elaboration, and the links between them are rather tenuous. Priestley's attempts to bring some coherence to the collection in the introduction and an epilogue, and the separation of the chapters into 'parts' are welcome but nonetheless the reader is left with a rather uneasy journey. As a 'Reader' which can be dipped into, the book is excellent.

Reference

Trausdottir, R. and Johnson, K. 2000. Women with Intellectual Disabilities: Finding a Place in the World. Jessica Kingsley, London.

Centre for Social Gerontology, University of Keele PAT CHAMBERS

DOI: 10.1017/S0144686X0224893X

David O. Moberg (ed.), Aging and Spirituality: Spiritual Dimensions of Aging Theory, Research, Practice, and Policy. Haworth Pastoral Press, Binghamton, New York, 250 pp., £17.20, ISBN 0-7890-0939-0.

Elizabeth MacKinlay, *The Spiritual Dimensions of Ageing*. Jessica Kingsley, London, 2001, 272 pp., pbk £14.95, ISBN 1-84310-008-8.

Spirituality is no longer the preserve of religion. In fact some feel that institutionalised religion is an obstruction to spiritual development. One statement from a NHS Trust sought to explain it in non-religious terms, 'It is the striving for inspiration, reverence, awe, meaning and purpose in people, even among those who do not believe in an objective God. The spiritual dimension

of our lives tries to be in harmony with the universe and strives for answers about the infinite' (Jewell 1998: 10).

Some find it useful to explain spirituality in terms of our innate desire to link our lives with our predecessors and descendants. The spiritual aspects of our being seek to bring continuity to our lives and help us make sense of our existence as humans. Some will define their lives in theocratic terms, measuring their lives in terms of their relationship with an objective God, the Alpha and Omega, the beginning and the end. Others will find political or other ideological frameworks more satisfactory as explanations to their lives.

The spiritual lives of older people are now coming under increasing scrutiny and David Moberg is one of the most influential analysts. He is a Sociology Professor Emeritus at Coquette University and has been described as America's premier gerontologist. He has certainly been one of the prime movers behind the White House conferences on ageing for many years.

The latest collection of essays brought together by David Moberg claims to be the 'best there is in theory and practice on ageing and spirituality'. It is certainly comprehensive and will provide a valuable resource for both academics and practitioners for many years to come.

Moberg and his collaborators maintain that older people expend a significant amount of energy engaging in the search for meaning, trying to make sense of their lives, and building a philosophical framework in which to understand their purpose for being. It is, they claim, an innate part of human existence, a claim substantiated in recent work undertaken by David Hay and Kate Hunt (2000). However, it is only recently that gerontologists have begun to recognise its significance in the lives of older people. It is now acknowledged that there are experiences common to later life which trigger a spiritual review: these include the change in time and space which arises from retirement from full-time work, the opportunity for reminiscence and reflection, the changing understanding of what is valuable, the sifting of relationships, increasing dependency, and the nearness of death.

Harry R. Moody, one time Executive Director of the Brookdale Centre on Aging, New York, writing about the most recent theories of life-span transitions, acknowledges that they provide psychology professionals and social scientists with highly useful tools but says, 'What they have omitted, I realise, is an element of the human condition that has always been at the heart and soul of every human culture from primordial times ... the spiritual element' (Moody and Carroll 1997: 8). Moberg and the contributors to his book address this omission and explore the interaction between the experiences of later life and spirituality. They give fresh and engaging definitions and interpretations of spirituality, consider spirituality in relation to common gerontological theories and (acknowledging that religion and spirituality have all but been ignored in the theories of ageing) review the latest research. They list a range of researchable questions on how and why the spiritual search increases in the later stages of life.

I particularly valued the chapter on spiritual life reviews and autobiographies, and agree that they should be seen as more than just providing a personal historical record, although that in itself is valuable. They are a means of helping people find meaning and value in their lives from a holistic perspective, a means by which they can measure their lives in the context of their histories and their contribution to the future. Telling the story of one's life is like weaving a tapestry with symbolic ribbons of family, faith, health, hope, joy, death and love, and in weaving it we create significance for ourselves. The chapter contains a useful outline of how to prepare a spiritual life review, and gives a framework to help people find the meaning of life's experiences for themselves within their own spiritual understanding.

Throughout the book there is an attempt to link theory with practice and policy development, and amongst the most valuable chapters are those which look at spiritual care by social workers, healthcare workers, chaplains and counsellors. There is an extensive reading list and the book is adequately cross referenced (*i.e.* chapter to chapter), always a good thing in a collection of essays.

Whilst Moberg's influence is felt on every page, the contributions do differ in approach and effectiveness. There is inevitably some overlap, disagreements author to author, and occasional contradictions. Some may also find that whilst there are frequent references to the fact that spirituality does not necessarily mean religious belief, almost all the contributors approach their subject from a faith background, and this could be off-putting.

For anyone who wants to begin to understand the spiritual search that some undertake in later life and its implications for practice and policy making, I can recommend the book. It will no doubt be the seminal work for many years to come. It is set in the American political, economic and social context, but hopefully it will open doors for further explorations here.

Elizabeth MacKinley lectures in gerontology at Canberra University and is an Anglican priest. She sets out to inform and enhance the pastoral care of nurses and clergy. Again, she believes their task is broader than the psychological care of their patients and, in advocating a holistic approach, stresses the need to give attention to the spiritual dimension of older people's lives.

Her book is based on a doctrinal project that tested the theory that spiritual health in ageing can be encouraged if older people are sensitised to their spiritual journey and if social workers, healthcare professionals and chaplains are able to help them articulate their searching questions. The work is based on 'snapshot' interviews rather than on a longitudinal study and, as such, its findings are for me inconclusive.

The book contains some useful chapters based on the comments of her sample groups. The words of people speaking about the need for intimacy in later life make it clear that old age does not mean we stop thinking when we get older. The discussions about life after death make fascinating reading for those who, like me, are actively involved in providing pastoral care within the context of a faith community, especially as many of those interviewed are quite happy to describe their spirituality in non-religious terms.

MacKinley's conclusions, however, raise a big question for me. A high proportion of her sample, as many as half, had no interest in discussing meaning and purpose, beyond the immediate reference to their family and friends. MacKinley, assuming this group to be not in touch with their spiritual dimension, feels that unless other aspects of their spiritual natures are sensitised, then they must be living unfulfilled lives; for me this is an assumption too far.

Acknowledging that spirituality is innate is one thing, even accepting that

as children and growing adults we are discouraged from giving attention to our spiritual development (see The Spirit of the Child, by David Hay and Rebecca Nye; Harper and Collins 1998), but can we assume those who don't talk in terms of meaning and purpose are simply burying their heads in the sand? Some are perfectly happy to live their lives in the here and now, with little reference to the 'bigger picture' or without any need to explore ways of explaining why they are here. My own experience has shown me that, whilst there are many older people who crave the opportunity to talk about the value of their lives and the context in which their lives are set, and that whilst there are many who want to search and explore whether the traditional faith communities can offer them an adequate explanation and give direction and purpose (as in the Philosophers' Café discussion groups in Vancouver, which attract large numbers of older people), many are quite content to let life wash around them, with no concern for why or what. That is quite simply their choice, and I would prefer to assume that they are happy and fulfilled in making it.

Spirituality is a growing and important topic for both gerontology and the faith communities: it is also important for policy makers, as it is now accepted as an innate part of our human make up, and for practitioners, as they will need to take it into consideration if they are to work holistically. These books provide valuable additions to the resource literature, although if I had to choose between them I would certainly prefer the Moberg volume. It may not be the last word, but it provides a good commentary on the subject and an excellent beginning for anyone wanting to explore the latest research and thinking.

References

Jewell, A. (ed.) 1998, Spirituality and Ageing. Jessica Kingsley, London.

Hay, D. and Nye, R. 1998. The Spirit of the Child. Harper and Collins, New York.

Hay, D. and Hunt, K. 2000. Understanding the Spirituality of People Who Don't go to Church.

Final Research Report, Centre for the Study of Human Relations, University of Nottingham, Nottingham.

Moody, H. R. and Carroll, D. 1997. *The Five Stages of the Soul*. Random House Publishing Group, New York.

Anglican Priest and Rector of Newcastle-under-Lyme, Staffordshire ARTHUR F. CREBER

DOI: 10.1017/S0144686X02258936

Gail Wilson, Understanding Old Age: Critical and Global Perspectives, Sage, London, 2000, 208 pp., pbk £15.99, ISBN 0-7619-6012-0.

The main virtue of this book is its brevity. The author packs into some 200 pages an overview of contemporary issues confronting ageing individuals in a globalised and post-modern world. The author's aim in this book was to provide a critical analysis of dominant themes in policy debates about old age

in a cross-cultural context and to raise issues rather than provide a comprehensive overview. This is attempted in 12 short chapters. Chapter 1 sets out the author's stall. The dominant vision of ageing portrays older people as an ever-growing burden that will destroy health care and social security systems, and overwhelm families and community networks. Institutionalised ageism and sexism are examined as important aspects of this social construction of old age. A brief review of gerontological theory is summarised as a journey from the personal and the individual, through structured dependency to identity and beyond. Globalisation and the agents of globalisation – The World Bank, the World Trade Organisation and the International Monetary Fund, however, pose the key threat to self-identity and social cohesion in later life.

Subsequent chapters fill in details of this argument. Chapter 2 examines attitudes to ageing in different cultures, in particular boundaries between old age and other age groups in society and perspectives on individualism and the role of the family in social policy. In Chapter 3 the rapidly changing age structure across the world is uncontested, but the chapter critically examines conventional demographic wisdom and shows that the consequences of demographic predictions for policy are social constructions. The potential implications of the changing age structure for political action is the focus of Chapter 4. It leaves unresolved the key question as to how current and future cohorts of elderly citizens will use their political voice. Chapter 5 examines globalisation and its impact on current and future cohorts of older people. A particular characteristic of globalisation examined in Chapter 6 is the role of lifestyle migration and the impact on elderly migration. Material resources in later life are discussed in Chapter 7. The cross-cultural perspective highlights the different contexts of work and retirement in different parts of the world. Pensions are rare outside Europe and North America, and work remains essential for survival. Individualisation threatens collective action towards the material support of older people in the future.

In Chapter 8 the author rehearses old debates about health and illness in later life, challenging the normative assumptions that the rising costs of health care are unsustainable. The key point here is that material and emotional resources across the lifecourse, and particularly in later life, are strongly linked. The next three chapters focus on dependency and inter-dependency in later life. Chapter 9 examines informal care cross-culturally and recognises the challenges of caregiving. The positive role of older people in achieving family and social support, however, is emphasised. Older people are an important resource in a world where paid work and poor pension provision is the norm. The focus of Chapters 10 and 11 is on the traditional European and North American patterns of service support in the community and that provided by institutional care. Much of the world lacks such provision and the challenge remains for those countries with advanced welfare states, which continue to marginalise vulnerable users, lacking the ability to manage high quality services for their consumers.

The final chapter attempts to put ageing in context, summarising the key issues of this analysis: ageism, inter-generational equity and the so-called burden of ageing, and the lack of positive future policies for an ageing world.

These remain important issues and ones which social gerontology has been facing, perhaps unsuccessfully, over the last two decades. Laudably, this book attempts to avoid the ethnocentric focus of traditional social gerontology. Overall, however, I found this a disappointing and unconvincing book. The critique of current perspectives on ageing adds little to current gerontological theories. A more substantive discourse on globalisation and its impact on older people would have been easier for the reader to follow. Whole areas of gerontological knowledge are dismissed in short paragraphs and their relevance to the argument lost. Indeed, at times I could not always follow the path of the argument and had to use my own constructions of the world in order to make sense of ageing in a globalised world. Brevity is a virtue but sometimes leads to obscurity.

Institute for Ageing and Health, University of Newcastle upon Tyne JOHN BOND

DOI: 10.1017/S0144686X02268932

Chris Phillipson, Miriam Bernard, Judith Phillips and Jim Ogg, *The Family and Community Life of Older People: Social Networks and Social Support in Three Urban Areas*, Routledge, London and New York, 2000, 304 pp., hbk £50.00, ISBN 0 415 20530 1, pbk £15.99, ISBN 0 415 20531 X.

This important book revisits three areas which were the subject of classic studies of family and community life in England in the late 1940s and 1950s (Bethnal Green in London, Wolverhampton in the Midlands, and Woodford in Essex), and explores the nature and extent of changes to the family and community lives of older people over this 50-year interval. The book is divided into three parts, with Part 1 exploring the background to the research, in terms of methodology and the nature of the localities in which people were interviewed. Part 2 presents the empirical research findings with respect to family life, neighbouring and social support. Part 3 combines an analysis of quantitative and qualitative data to examine changes in household composition and social networks, the extent and type of help provided by family members across generations, contact and relationships with neighbours, relationships with friends, involvement in social and leisure activities, and the experiences of minority ethnic groups.

These issues are explored through a unique set of data collected in two main phases. The first phase was a questionnaire survey of 627 older people, based on a random sample of people of pensionable age in the three urban locations. The second phase consisted of qualitative in-depth interviews with 62 of these people who were over the age of 75 years; 18 interviews with 23 Bangladeshi and Punjabi households in Bethnal Green and Wolverhampton; and two group interviews, one with a Bangladeshi carers' group in Bethnal Green and one with a group of Asian interpreters and social workers in Wolverhampton. Census data are also used throughout, to provide the broader context of social change in each of these communities. This book is therefore exceptionally rich in its comparative perspective. There is historical comparison of change over time in the communities made famous in the studies of Peter Willmott, Michael Young and Peter Townsend, among others. There are comparisons of three communities responding to various forms of population change: the ageing of the population, divergent patterns of in- and out-migration, the impact of unemployment and poverty versus relative prosperity, and fragmentation and social division, sometimes associated with the emergence of significant ethnic minority populations. Readers interested in family ties and ageing will find insightful comparisons of the dynamics of family life and social networks, provided by members of different generations of the same family, varying in their gender, socioeconomic status and household composition. The book also provides important insight into the family and community lives of older people living in ethnic minority groups, and of the ways in which ethno-cultural change in communities impacts on those both inside and outside the ethnic community.

A key finding of the book is that over the past 50 years British society has moved from an old age experienced within the context of the family group to one shaped by personal communities in which friends may feature as significantly as immediate kin and relatives. The 'dominant Mum' so characteristic in studies of postwar family and later life in England has been replaced by more equal relationships between children and parents, more companionate marriages between older members of a couple. The book's complex interweave of the more macro level analysis of societal and community change and dynamics with the more micro level analysis of individual, familial, and social network change and dynamics is extremely well executed. The use of examples to illustrate some of the variations among pensioner households and of verbatim accounts of the older respondents and their family members greatly facilitates the transition between these complex levels of analysis, always grounding the reader in an awareness of how these broader social and community patterns are reflected in the day-to-day lived experiences of older people in these localities. The phrasing of research questions in each chapter helps to focus the discussion on the particular issues at hand.

Another strength of the book lies in the way in which the authors anchor the analysis in terms of wider issues of relevance to social scientists and policy analysts. The empirical findings are examined in the context of current debates concerning social relationships in old age and the impact of population changes since the baseline studies; about relationships in old age as products of different kinds of 'social networks'; about the changing nature of community and locality, especially in the context of globalisation; and the ways in which ideas about community are being reassessed within contemporary sociology. The analysis of the empirical findings contributes to our understanding of numerous concepts that lie at the heart of community and family studies: issues of individual commitments versus fixed obligations; reciprocity within and across generations; variations in respect to gender; independence and interdependence; the impact of the lengthening of the generational ties over the lifecourse; the importance of cultural traditions; the implications of geographical proximity; sources of meaning in retirement in

later life; the value of 'home'; and the relative importance of kinship and the significance of ties beyond the family. Although the policy relevance of findings is addressed throughout the book, the final chapter is particularly strong in emphasising the relationship between community diversity and service delivery, stating that 'a social policy for old age must address issues about where people live and the pressures they experience in these environments'.

This book is a major contribution to the sociology of families, of ageing, and of urban life, and to the intersection of social policy and societal ageing.

University of British Columbia, Vancouver, Canada ANNE MARTIN-MATTHEWS

DOI: 10.1017/S0144686X02278939

Lis Cordingley, Jane Hughes and David Challis, Unmet Need and Older People: Towards a Synthesis of User and Provider Views, York Publishing Services, York, 2001, 48 pp., pbk £6.00, ISBN 1 84263 014 8.

This report supported by the Joseph Rowntree Foundation focuses on two areas – unmet needs identified by older people, and the response of formal sectors to these needs. The introductory chapter explores various approaches to defining unmet need, demonstrating that the concept is not value free and that how need is defined depends on the position and motives of those making judgments. Some of the different approaches discussed include needs that are defined as: (1) an ideal standard, (2) a minimum level of care required to meet basic requirements, (3) judgments based on between group comparisons which reveal unmet needs, (4) whether care is sufficient to meet basic requirements, (5) care that puts an undue strain on caregivers, and/or (6) a kind of shortfall between accepted and desired states.

The authors then summarise the variables related to unmet needs that have been identified by older people in various studies. These include needs that are often overlooked and which arise from one or more of short-term illness; older people as carers; older females who have never been married and who may lack family carers; lack of same-sex carers; differences in ethnicity; long-term disability care; assistance with depression; and problems related to illness prevention and chronic disease management in primary care. The weak consensus between users' and providers' views is confounded by the lack of standard assessment instruments. Even when they are used to assess the health and social services needs of older individuals, shortcomings are often found. One major weakness of standardised instruments is that they are insufficiently sensitive to change. For example, older individuals may reduce normal activities in order to cope with pain or illness. Thus, when an individual reports that health does not interfere with their activities, the reason may be that illness no longer interfered because they ceased to engage in those activities that they could no longer tolerate. Additionally, tools for assessing informal support are criticised for equating social contact with help.

Given the shortcomings of available assessment tools, practitioners should view data on health and social support as indicators rather than measures.

Another impediment to the accurate assessment of needs is that older people themselves may resist having needs met. This resistance to help or support may arise for several reasons, including previous negative experiences with receiving assistance, a need to maintain self-esteem and feelings of selfreliance, and the fact that many older people fear overburdening relatives and friends. Moreover, older people may be aware of the limitations of existing social services and are, thus, reluctant to ask for additional help. As a result, simply asking older persons whether or not they need additional help may not result in a true indication of unmet needs.

The authors then turn to a consideration of the response of the formal sector to unmet needs among older persons. The primary focus in this section is on the factors that influence the response, especially in regard to the initial access to services and to the identification and specification of need. They stress that variations in providers' definition of needs may arise in part because of differences in the specified eligibility criteria. Based on a study of eligibility criteria for services for older people conducted by the Personal Social Services Research Unit at the University of Manchester, it was found that criteria varied widely between local authorities. Moreover, assessment approaches vary across authorities and are not always responsive to certain problems of older people, such as the need for assistance with depression.

Finally, the book offers suggestions about how to promote greater convergence between user and provider views, and addresses ways in which variability among providers might be reduced. These include approaches that link user and provider perspectives so that, for example, quality of life considerations or individual priorities would be taken into account concerning decisions about care. Assessment of needs could also take into account attitudes and beliefs of elderly people regarding care, so that support services do not undermine important relationships or diminish the self-esteem of those receiving care. Improved classifications of older people's support networks would also be helpful in assessing and predicting needs. Lessons from other countries also suggest that more explicit definitions and greater consistency or standardisation in eligibility criteria would be helpful in enhancing both equity and comprehensibility. Within the National Health Service there has been an emerging trend toward use of indicative care packages, which are clusters of services offered to individuals with a particular level of dependency or potential. Additionally, criteria for assessing shortfall between required and received services based on levels or domains of need would be helpful. For example, Issacs and Neville (1976) have described three such levels of need as those for critical interval needs (e.g. toileting), short interval needs (e.g. meal preparation), and long interval needs (such as shopping).

In summary, this report has accomplished its goal of identifying issues associated with the definition and application of unmet need. It has also provided guidance for resolving these issues in order to provide a better synthesis of user and provider views. As such it should be a useful resource for those concerned with the care of older people, including researchers, service providers and consumer groups.

Reference

Issacs, B. and Neville, Y. 1976. *The Measurement of Need in Old People*. Scottish Health Service Studies, No. 34. Scottish Home and Health Department, Edinburgh.

University of Kentucky, Lexington, Kentucky, USA

GERRY GAIROLA