

Book Reviews

RE STORYING OUR LIVES:

PERSONAL GROWTH THROUGH AUTOBIOGRAPHICAL REFLECTION

Gary M. Kenyon and William L. Randall. Westport, CT: Praeger, 1997, 191 pp., price not stated.

Psychiatrists and psychologists spend much of their time listening to people tell their stories, regardless of how truthful or authentic they think a particular person's story might be. They are doing what Kenyon and Randall call "storylistening" (p. 12), in taking seriously people's constructions of meaning for the events of their lives. The central theme of this book is that stories are fundamental to the human experience, so that, they argue, "to be a person is to have a story" (p. 1), and that "what we call our life is a set of stories we tell ourselves about our past, our present and future" (p. 2). This constructivist viewpoint is not new, but the constructive and dialogical metaphor is turned into a comprehensive account of a different perspective on the personalized interpretation of experience. Given that the natural activity of storytelling can be used as a vehicle of self-understanding, the therapist, in turn, can consciously become the coauthor and agent of people's storying and restorying of their lives.

Numerous questions have arisen recently about the stories people tell, and the conditions under which what they tell may be trusted. People's stories are constantly being called into question in the courts, if not by the professionals who interpret them. For Kenyon and Randall, however, it is not simply the

case that people *tell* their stories, to themselves as well as to others, but that they *live* their stories. The book is an apologia for treating the story as an appropriate metaphor for the life, and using the story metaphor as a means of self-reflection and self-change.

Theoretically, Kenyon and Randall ground their account in narrative theory, drawing particularly on Jerome Bruner's developmentally oriented concept of life as narrative and meaning making. The two opening chapters provide an interesting review of psychological and philosophical accounts of the need for meaning in people's lives, and develop the story metaphor as a way of addressing the postmodern need for meaningful interpretation of personal experience. Gerontologists (among them, Kenyon) are aware of the significance of autobiographical memory for a person's current well-being, and Kenyon and Randall take up that idea and extend it to cover the life course.

Two major themes expand the story metaphor as "the stories of our lives" and "restorying." Although this may sound like a soap opera, Kenyon and Randall work carefully to build the case for their perspective. Stories that people construct to give meaning to their lives are multileveled and multifaceted, past or present, secret or shared, ordinary or

extraordinary, told or untold (but still told to oneself), focused or fuzzy. In short, people interpretively compose themselves in different ways at different times for varying purposes.

This does not imply that these authors see people as the sole determinants of their lives, although they do suggest that it is possible to change even events from one's childhood by adopting new perspectives, that is, by forming a different narrative. Others help the formation of a story, or distort the person's interpretation by their comments and attitudes, and it is here that Kenyon and Randall become less clear about the direction of their argument. From one viewpoint, the work could be read as a sophisticated self-help book, but there is a theoretical challenge to give a new legitimization to personal meaning making. Kenyon and Randall see a coauthoring role for the various institutions and contexts where people live, specifically, education, religion, and the arts. From this perspective, therapists are urged to be active in creating the type of dynamic context in which people are encouraged to read their existing personal stories and to transcend them to the point where they can reform them. This may sound like another way of talking about cognitive forms of therapy, and one use of the book may be to give people another way of understanding and managing their own thinking.

A useful aspect of this perspective is that "the life as story" metaphor provides insights for understanding how one's life course has developed and suggests strategies for changing aspects of one's life. The restorying that is natural can be manipulated consciously. The chapter on "the restorying of our lives"

explores the inside of personal change looking through storied lenses and gives a practical guide through the various stages involved in the restorying process (from telling ourselves to telling others and reading). It also provides useful strategies for storylistening aimed at anyone interested in assisting people towards positive change.

Although this book holds few surprises for those acquainted with the research on narrative, autobiographical memory, and biographical aging, it brings together some interesting ideas in a readily accessible form. The personal approach can be a little wearing. It is not always easy to know to which "we" the authors are referring, sometimes themselves, sometimes storytellers at large, sometimes therapists and counselors. Overall, though, this is a pleasantly written case for a new perspective on people's lives. It does not grasp hard the nettle of truthfulness and authenticity, although these issues, along with the ethical implications, are not overlooked. Their treatment, however, works from the assumption that the basic metaphor is adopted, and therefore its use can be negotiated. The guidelines for effective storylistening may be useful for those who have not considered this way of thinking about another person's contribution to a dialogue about his or her experience. In general, however, this book is far less about technique than about perspective.

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ETHNOGEROCOUNSELING:**COUNSELING ETHNIC ELDERS AND THEIR FAMILIES**

Virginia S. Burlingame. New York: Springer Publishing Company, 1999, 274 pp., \$US 39.95.

Despite the cumbersome title, Virginia Burlingame's book addresses a topic that is relevant to all clinicians, particularly those in the mental health field who work with elderly ethnic patients. Dr. Burlingame has a social work background and this is reflected in the family and social context perspective of this book.

The book is divided into five distinct sections. The first section describes counseling models for working with ethnic clients (the "Ethnic Lens") and the elderly (the "Gerocounseling Lens"). The author then integrates these into an "Ethnogerocounseling" model with brief descriptions of goals, modalities, useful interventions, and termination issues. This first part of the book, although not addressing any area in particular depth, gives an overview of pertinent issues that clinicians need to consider in counseling elderly people from cultural backgrounds other than their own.

The next four sections of the book describe the application of the Ethnogerocounseling model to each of the main minority cultural groups in North America—American Indian/Alaska Native elders, Hispanic-Latino American elders, African American elders, and Asian/Pacific Island elders. A one-page chronology of significant historical dates for the particular cultural group is provided at the beginning of each section. A number of case vignettes are then described that illustrate aging-related problems that may arise for older persons with that ethnic identity. The author then

attempts to identify ethnospecific issues to which the assessing clinician needs to be sensitive, and which may explain resistance encountered in response to well-meaning and helpful interventions.

Each section follows the same well-organized format; however, inevitably this leads to a degree of repetition that becomes tedious towards the end of the book. As similar counseling issues arise for each of the four cultural groups, these could have been addressed as general themes with ethnospecific factors highlighted within this broader context.

Overall, the style of Burlingame's book is very readable, and exercises at the end of each chapter facilitate the book's usefulness for teaching purposes. The main disadvantage for non-U.S. readers is that our aging populations derive from different cultural groups than those described in this book. Certainly, the principles and approaches to counseling are broadly applicable to other cultural groups and provide a practical framework for clinicians working with ethnic elderly in a case management setting. What I really need is a similar text focusing on the cultural groups that constitute the rising aging population in Australia.

REVIEWED BY

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**LIVING IN THE COMMUNITY WITH DISABILITY:
SERVICE NEEDS, USE, AND SYSTEMS**

Susan M. Allen and Vincent Mor (Eds.). New York: Springer Publishing Company, 1998, 401 pp., \$US 58.95.

Allen and Mor have compiled a comprehensive book that focuses on a broad spectrum of disabilities in relation to community and social health issues. In doing this, the book takes a realistic look at the process of deinstitutionalization occurring in America over the latter half of the 20th century, and attempts to address the current and projected needs of the growing disabled population. Throughout the book is recognition of the fluctuating state of healthcare policy and the obvious, yet often ignored need to systematically plan and coordinate community services for disabled people.

The book is divided into sections that outline specific disabled populations: frail older persons, chronic medical illness, physical disabilities, mental retardation, chronic mental illness, and children with special needs. Within each section, different authors have contributed chapters that attempt to identify and discuss the service needs of that population, the existing community services available, and their patterns of use. Unmet needs are also identified along with visions for future service systems that could more effectively respond to the needs of specific populations. A topic of discussion that filters through the book is the impact of government policy on the planning and provision of services for people living in the community with disability.

The strength of the book lies in its factual detail, yet by covering a diverse range of disabilities, it is able still to provide a "big picture" view of disability. It also provides sound suggestions for models of care and service delivery

that recognize the rights of disabled people in the context of tight financial government constraints.

Interspersed throughout the book is a significant amount of statistical data from American populations, which is not surprising because the editors and all chapter contributors are from American universities or health-related services. The exclusive North American focus of the book means that its relevance to other countries may be questionable, although the commonalities in western health systems make it useful for comparison.

At times I found the book somewhat complex. This could have been lessened with summaries for each chapter. For readers interested in psychogeriatric issues, there is no specific reference to this population in the book. One must therefore make do with the section covering the frail elderly and the other on chronic mental illness. Surprisingly, people with dementia hardly rate a mention. It could not be said that this is a riveting book that cannot be put down! I therefore suggest its purpose is rather as a reference tool for researchers, policymakers, and students in social health fields. It may not be as relevant to practicing clinicians, particularly those in the field of psychogeriatrics.

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EXERCISE, AGING AND HEALTH.**OVERCOMING BARRIERS TO AN ACTIVE OLD AGE**

Sandra O'Brien Cousins. Philadelphia: Taylor & Francis, 1998, 261 pp., \$US 64.90 (cloth), \$US 29.95 (paper).

What are the barriers, real or imagined, that prevent most older people from taking advantage of the considerable potential health benefits of a physically active lifestyle? How can older people be encouraged and enabled to overcome these barriers? Any book with clear answers to these questions would be a major breakthrough. How has Sandra O'Brien Cousins approached this challenge and how successful has she been?

The first half of the book summarizes the evidence for the health benefits of habitual physical activity. It is hard to bring a significantly new perspective to such a review; several good examples already exist. There is nothing conceptually or factually new in Cousins's contribution. Indeed, she can be criticized for being too ready to accept others' claims with little attempt to discuss whether cited studies were adequately controlled, randomized, or blinded.

The second half of *Exercise, Aging and Health* briefly outlines the various theoretical frameworks that have been used in attempts to understand how social, cognitive, biological, and contextual factors might influence an older person's likelihood of habitual participation in physical activity of sufficient intensity to be beneficial to health. It also includes Cousins's synthesis of these approaches into her own theoretical model, hypothesizing multiple, sequential stages of thinking (or "Self-Talk") that might lead to a change in exercise behavior.

Unfortunately, the book is almost exclusively North American in its outlook, with little reference to the rest of the developed world and none to the developing world. Within the North American context, the emphasis is on decision making by the individual older person but with surprisingly little reference to issues of ethnicity, race, poverty, transport, access, and marketing.

Cousins is at her best when musing about possible gender-related factors, when suggesting that risk expectancies and beliefs might be more limiting than poor health or advanced age, and when emphasizing the importance of the considerable heterogeneity of abilities, needs, and interests among (and within) older people. She makes a good point about the immobilizing effect of well-intentioned safety advice and the need for information that would permit individualized comparisons of potential risks and potential benefits. She argues that guidance to participants must recognize the full range of abilities from frail patients to elite competitors. She gives an instructive (although medically uninformed) account of exercise adoption by a disabled elderly woman and of the exercise practitioner's strategies to accommodate her day-to-day variability in motivation and in physical performance. Indeed, Cousins stresses that "the worst thing professionals can do is to prescribe the same program to all older participants." Nevertheless, she was unable to resist the temptation to include an illustrated

guide to two sets of exercises without offering any guidance on how to identify those for whom each might be beneficial or for whom each might be inappropriate or even unsafe.

It is claimed that this book will interest a wide range of academics, health professionals, exercise professionals, and students. I agree that each would get something of

value from it, but I fear that few would get sufficient to justify its purchase.

REVIEWED BY

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THE BUSINESS OF MEDICAL PRACTICE

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David Edward Marcinko, MBA, CFP, Editor

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—**Antonio Silva, MD, MBA**, Emory-Northlake Regional Medical Center
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