This book was compiled with the support of the British Society of Gerontology to illustrate various questions, methods and data sources in present-day social gerontology in Britain, and to complement the well-known book edited by Sheila Peace (1990), Researching Social Gerontology. The editors state that they wish to respond to the expansive and innovative development that has taken place in theoretical and methodological work, and to the changes in the context within which research is undertaken. The result is a lively and impressive cavalcade of approaches, methods, results, experiences and recommendations.

The book has four parts. In the first of two chapters, Anne Jamieson introduces the reader to the discussions on theory, practice, strategies and methods. She emphasises that social gerontology is the study of ageing (not solely of old age or old people) and that it is a multi-disciplinary field of inquiry, and she discusses the different theoretical and methodological approaches which are reviewed later in the book. This part includes important information and interesting ideas and relies heavily on the material presented in the later chapters: in its attempt to incorporate elements from different authors it feels somewhat fragmentary.

Part II gives examples of existing data sources and various methods of analysis. Andrew Blaikie provides an interesting introduction to historical document archives and data sets in Britain and an insightful discussion on the analysis of historical pictures. Christina Victor focuses on the possibilities provided by secondary data analysis and different possible designs in applying them. Victor reminds us that it is the novelty of the research question and new insights, not the novelty of data sets, that defines originality in research. Dorothy Sheridan describes the Mass-Observation Archive at the University of Sussex, a unique collection of survey, observational and autobiographical data on everyday life during the 20th century and in the present day. The theme of Mike Hepworth’s chapter is the use of ‘cultural products’ in researching images of ageing. ‘Cultural products’ such as paintings or novels are available for understanding these images, not directly but through interpretation that is sensitive to the historical context. The approach is illustrated by the analysis of two crime novels.

The five chapters in Part III deal with creating and using new data. Michael Wadsworth describes different types of longitudinal designs, concentrating particularly in the 1946 birth cohort study. In the light of the new paradigms which emphasise the importance of foetal and early development to health in adult and later life, this is an exceptionally valuable data set. Joanna Bornat, in ‘Doing life history research’, deals with an emerging genre of research that is more and more popular, particularly among younger researchers. Her practical suggestions are
wise and down to earth; we are easily absorbed in conducting lengthy narrative interviews without noting that it takes between five to seven hours to transcribe an hour of recorded time.

At the present time, case studies are often neglected, but Peter Coleman convincingly and elegantly argues for their use. He stresses the distinction between a case study and a psycho-biography, and warns against confusing the latter with any particular theoretical viewpoint. In his two case studies he draws on and develops the theory of Erik H. Erikson. Bill Bytheway and Julia Johnson discuss diaries as a method of collecting data and describe their own study on how older people manage their medication. Ann Netten presents a very thoughtful and useful review on evaluation research and gives examples of two different projects.

The final part of the book deals with the roles and responsibilities of the researcher. Margaret Boneham discusses ageing in different cultures and ethnicity as an important perspective in ageing research. Mary Gilhooly writes an educated and practical article on ethical issues in researching later life. Her chapter shows deep understanding of the area, gives clear guidelines, and beautifully elaborates the dilemmas in which clear guidelines cannot be given. Sheila Peace takes up a theme of increasing relevance, the role of older people in social research. Mike Nolan and Jo Cooke discuss the use of gerontological research in policy and practice, elaborating both possibilities and challenges. The Appendix lists numerous web pages, ranging from professional associations to statistical sources, photographic collections and ethical codes.

As the book has 15 chapters in fewer than 300 pages, and as most of the chapters present first a review and then a case study, the danger of superficiality is apparent. Amazingly however, the authors manage the balance between big challenges and small space, although not all the chapters cover all the promises given by their title. The book is very British, from the data sources and web pages presented to the references, but the themes and discussions will be relevant to anyone interested in social gerontology. It is a demonstration of the wide scope, vitality, strength, and innovativeness of ageing research in Britain. I recommend!

Reference


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In this book, the author explores the identity work of homosexual elders and examines lesbian and gay constructions of identity within the context of
socio-historically located discourse and meanings of homosexuality. The core argument of the book is that older lesbian and gay identities are best understood in relation to ‘identity cohort membership’. Put briefly, Rosenfeld argues that older lesbian and gay identities can be conceptualised in terms of different types of identity careers, and more specifically in terms of identity cohorts composed of actors who identified as homosexual in specific historical periods with distinctive ideologies of (homosexual) self and other. Drawing on qualitative interviews with lesbians and gay men aged over 65 years, the author seeks to demonstrate how the participants in her study fell into one of two identity cohorts: a discreditable one, consisting of those who adopted a homosexual identity before the late 1960s and thus through the properties of a hegemonic stigmatising discourse, and the accreditable one, consisting of those who adopted a homosexual identity through the accrediting discourse that was rooted in the sexual liberation and identity movements of the late 1960s onwards.

Rosenfeld’s work follows an established tradition in lesbian and gay studies that is concerned with the formation and negotiation of non-heterosexual identities. In this context, the focus on lesbian and gay ‘elders’ is relatively distinctive and to be welcomed. The book provides insights into some of the important historical, political, and discursive influences on older lesbian and gay identities. It also provides a wealth of quotations from what are obviously rich data. As such it serves as an accessible introduction to the historical and discursive backgrounds in which non-heterosexual narratives and practices of identity need to be understood. The book will be of particular interest to scholars of non-heterosexual narratives and practices of identity. It will also provide a broader readership with insights into the day-to-day negotiations that marginalised sexual identities can necessitate, and the risks and possibilities that some older lesbians and gay men perceive to emerge from these.

Despite the book’s value in these terms, in several areas the analysis falls short of the promises made in the introduction and implied by the title. First, the book has relatively little to say about lesbian and gay ageing and old age. Ultimately, the author is concerned with sexual identity, and in analysis the personal accounts of older lesbians and gays are primarily employed to illustrate and support the argument about identity cohorts. Second, the analysis focuses on a few factors that shape and influence homosexual identities, and a fairly narrow view of what constitute identity practices is taken. Older lesbians and gay men are presented as individuals for whom sexual identities are the only identities that really count. Other identities, or aspects of identity, are presented as secondary or insignificant. Disappointingly, factors to do with social and cultural location (be it social class, ethnicity or even gender), and the influences of material resources, social supports and geographical location are ignored as significant factors at play in shaping the self and sexual identities of the research participants.

Many readers will be unconvinced by Rosenfeld’s discredited/accredited typology for understanding lesbian and gay identities. A wealth of theoretical and empirical work from the 1990s onwards has emphasised the complexity and fluidity of sexual identities in particular and of social and personal identities in general. While the author acknowledges that some of this work has important insights to provide into the complexity and diversity of identities in the context of
contemporary social change, the implications of this are not incorporated into the analysis. Rather, a narrow conceptualisation of identities and social change is taken (where the emphasis is primarily on developing discourses of sexuality) and a fairly limited analysis of both is presented.

As an ‘invisible’ population, older lesbians and gay men have tended to be ignored in the theory, literature and research on both ageing and sexualities. As such, books like *The Changing of the Guard* have an important contribution to make in sensitising theorists, researchers, policy makers, and advocates to the existence of this constituency. However, if the ‘reality’ of older lesbian and gay existences is to be recognised, it is also important that theorists and researchers go beyond sexuality to fully grasp the range of factors that influence these lives. It is important to explore the interaction of sexuality with ageing and other factors to acknowledge the diversity of older lesbian and gay experiences, identities and practices. Only then can we comprehend them more fully as products of social change.

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BRIAN HEAPHY

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As the authors point out, this report represents the first British study to follow up resettled homeless people of any age group for a full two years. Undertaking longitudinal work on homeless people is notoriously difficult, both because of the problems in securing adequate funding to track people over time, and of the logistics of staying in contact with a mobile population (Pickering *et al.* 2003). In this context, this publication is of considerable interest and importance in its field. The report presents data on 64 older homeless people (aged 50 or more years) who were resettled into supported housing (including sheltered and shared housing and residential care), or independent tenancies, by three organisations – St Mungo’s (London), St Martin-in-the-Fields Social Care Unit (London) and St Anne’s Shelter and Housing Action (Leeds and Sheffield). The researchers tracked homeless people intensively, interviewing them at home every three months until they had settled, and then every six months. They succeeded in staying in touch with 97 per cent of the sample, a major success even if the study involved a group of people perhaps less mobile than younger homeless people.

The report has three sections. Section 1 (Chapters 2–3) provides a descriptive profile of the study subjects followed by a chapter on the process of re-housing older homeless people. Concerns with accessing appropriate accommodation from the perspective of staff and older people are presented. Here, as with following chapters, it might have been useful for the reader if qualitative quotes
had been included to illustrate the key issues. Section 2 focuses on the experiences of older homeless people after resettlement. Chapter 4 examines the process of how people settled, or did not settle, into the accommodation highlighting the importance of the first month after moving in, problems associated with sharing accommodation, as well as reduced income in care homes. Chapter 5 examines how people coped with managing a home, interestingly revealing that few people experienced problems with daily household tasks, and that financial problems tended to decrease over time. The crucial links between levels of social contacts and tenancy sustainment are discussed in Chapter 6. Finally, Chapter 7 focuses on the formal help provided by the agencies, highlighting the need for careful assessments of support needs.

Section 3 (Chapters 8–10) makes a welcome shift from the descriptive to an analysis of resettlement outcomes. At 24 months and excluding those who had died, 69 per cent of the older and formerly homeless people were still housed. The tenancy failures tended to occur during the first three months or during months 16–24. Chapter 9 provides detailed analysis of the factors associated with tenancy failure or success. Three groups of factors influenced successful resettlement: the background of homeless people (those with stable backgrounds found it easier to resettle); the housing placement (including motivation to be resettled, appropriateness of accommodation and support received), and the ability to create a new life (such as participation in social networks).

The authors state that the report was only able to present the first stage of analysis of outcomes. This was slightly disappointing as it would have been interesting to have been presented with further analysis. Additionally, the report could usefully have incorporated a short methods appendix outlining the detailed sampling for the study and the power and limitations of the statistical analysis. In particular, it is important to understand the extent to which the sample was random as, without a random sample, the statistical associations reported are not applicable to a wider population of older homeless people.

Ultimately, the strength and limitation of the study lie in its focus on older homeless people. The findings will be of particular value to agencies concerned with resettling older homeless people, providing them with information from which they can better plan support for older homeless people, especially those at increased risk of repeat homelessness. A key limitation of the study however, is that we do not know the extent to which these findings may be replicated for homeless people of other ages. Other research (e.g. Dane 1998) suggests that similar factors are important, such as motivation to resettle and ability to overcome loneliness, but there remains a need for a long-term, longitudinal study of all homeless people. Nonetheless, within its own parameters, the report remains a valuable contribution to the literature on homelessness.

References


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These two reports have different foci but both tackle the topical and urgent issues of how community care services are offered and delivered to older people to enable them to live independently within their own homes. Understanding Home Care Providers, undertaken by the Social Policy Research Unit at York University, looks at the issue from the perspective of service providers, and reports the results of a small, in-depth survey of 23 home-care providers, half from local authority Social Services and half from the independent sector, across 12 localities in England. ‘It Pays Dividends’ : Direct Payments and Older People, funded by the Joseph Rowntree Foundation, is based on research with 41 older people receiving direct payments to pay for community care services, 12 care-management teams, five senior managers and three direct payments’ support services carried out in three English local authorities. Both studies, although relatively small, are set within the context of increasing demand for services, diminishing in-house home-care provision and a developing independent sector.

Both reports have important messages for care managers who are assessing people’s needs for services, and commissioners who are purchasing services, about the elements of community care services that older people value and the factors that affect the quality of care offered. Understanding Home Care Providers will also be of interest to home-care providers in the public and independent sectors who want to find out how others agencies are dealing with some of the current challenges they all face. It provides detailed insights into the similarities and differences between the public and independent sector on workforce and staffing issues, difficulties of recruitment and retention of staff, the organisation, management and supervision of staff, the relationship between all providers and the social service purchasers and the provider policies which affect the quality of service. Although the survey was undertaken before the introduction of the Domiciliary Care Standards in April 2003, some issues are highlighted which will prove challenging for some home-care providers, particularly in relation to the supervision of home-care staff.

One common and consistent difference between the two sectors was the independent sector’s less generous pay and conditions for its workers, in terms of
hourly rates, guaranteed hours of work and payment for travelling time. This had far-reaching consequences and meant that it was not always able to deliver a service which met quality standards with regard to reliability, consistent staffing or the timing of visits. One common frustration felt by the majority of providers was the degree of control that they felt care-managers commissioning the service had over how the service was delivered. There was a wide variety of working arrangements, based primarily on ‘time-centred’ working, where care-managers prescribed a fixed length of time for a visit, or ‘task-centred’ working, where they specified the tasks to be done, after which, staff would leave. Providers could see advantages and disadvantages of both systems but wanted to be able to respond to changes in people’s circumstances flexibly and promptly. Fundamentally, many of the problems perceived by the home-care providers stemmed from the inadequate funding which they received from local authority commissioners. To overcome some of the pressures, some independent agencies had negotiated with social services purchasers to pay for improved bonus payments to staff, and some in-house providers were given discretion to utilise limited extra time, but this model was not common in the independent sector.

It was to deal with the restrictions and inflexibility of home-care services that many older people interviewed in ‘*It Pays Dividends*: Direct Payments and Older People' turned to direct payments. Thirty-five white older people and six Black Somali older people were interviewed for the study. The majority had chosen direct payments in preference to directly-provided services in order to exert greater control and choice over their support arrangements or, in some cases, because it was the only way they felt they could get the support they needed. The older people reported consistently that having direct payments and employing a personal assistant (PA) or buying their own care from an agency had led to benefits for their physical and emotional health. Despite the reported benefits of direct payments in this study and others, the take-up by older people has been slow since the extension of direct payments schemes to older people in February 2000. The report identifies some of the barriers to increased take-up reported by both older people themselves, care-managers and support-service workers. These include finding out about direct payments, difficulties of recruiting PAs, concerns about becoming an employer, meeting audit and administrative demands, care-managers acting as ‘gate-keepers’, restrictions on purchasing health services, rigid eligibility criteria and difficulties accessing appropriate support schemes. In all the schemes the importance of timely and accessible help was critical in making direct payments work for the older people. In most cases this took the form of individual support and few of the older people reported that they were involved in user groups or policy advisory groups.

A concern that emerges from both these reports is the apparent inequalities between the services delivered to older people and those delivered to younger people (under the age of 65 years). In the study on home-care services, providers reported that some authorities would commission home-care time for older people only for maintaining basic survival, whereas younger people would be enabled to carry out activities with home-carers in order to enhance their quality of life. Similarly, care-managers and their team-managers interviewed in the direct payments study reported that eligibility criteria were defined more rigidly
for older people than younger adults. The older people themselves were rarely assessed as ‘needing’ time to pursue leisure activities but instead had to use their allocated hours imaginatively or supplement their direct payments with their own money to buy more time.

The question of age discrimination is being addressed in both the government’s National Service Framework for Older People (Department of Health, 2001) and Fair Access to Care Services (Department of Health, 2002). However, as both reports point out, whilst this could be a stimulus for local authorities to extend more holistic services to older people, it could also herald the advent of more restrictive eligibility criteria for younger disabled people. If the government is committed to extending control and choice over services to older people and increasing their uptake of direct payments, then the findings of these two reports suggest that the assessment of older people’s needs and the range of services offered to meet them must extend beyond the maintenance of basic survival.

References


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Literary gerontology has made a small stir within the confines of literary studies, but scholars such as Margaret Morganroth Gullette, Michael Hepworth, Constance Rooke, Kathleen Woodward and Anne Wyatt Brown have made bigger waves within the broader interdisciplinary study of ageing, named ‘age studies’ by Gullette. Julia Johnson’s edited collection Writing Old Age demonstrates the power of creative writing to reconfigure critical thought about ageing across the disciplines. The strength of the anthology comes in part from the groundwork laid by the scholars listed above. For North American age-studies scholars, this collection has the refreshing quality of situating itself for the most part in Britain and assuming the centrality of that context.

This thin but powerful compilation finds its focus in Andrew Blaikie’s question: ‘how might we better understand ageing through fiction and other forms of creative writing, and what tools for analysis does such literature furnish us with?’ (p. 3). Johnson, as editor, has gathered responses from a range of readers so that the report (Number 3 in the The Representation of Older People in Ageing Research series) demonstrates how creative writing can do critical work in disciplines beyond those traditionally associated with it. A Professor of Oral History in the School of
Health and Social Welfare at The Open University, Joanna Bornat investigates
the roots of the popular poem that appears with variant titles *Kate*, *Crabbit Old
Woman*, and *Open Your Eyes*. Her balanced reading of the poem and the poem’s
place in the understanding of residential care offers provocative notions of the
role of creative production, such as ‘imaginative empathy’. She leaves open the
question as to why the origins of the poem have been obscured. From a social
work perspective, Jill Manthorpe expands upon Bornat’s discussion in an explo-
ration of ambivalence as the critical framework for recent fiction that depicts
residential care. She prompts questions about the role of the reader in relation to
the writing on which this report focuses. While the works may ‘reflect’ social
concerns and do provide ‘a multidimensional view of women and ageing’, they
depend upon readers in order to do so effectively (p. 33).

Hannah Zeilig’s chapter ‘Imaginings of age in 1920s popular novels’ provides
a welcome historical essay. Her reasons for turning to fiction match those of
Simone de Beauvoir in *La Vieillesse* (which Gullette later references), in that she
looks to them for histories of ageing because they are not available in more typical
historical documents: ‘The paucity of social histories from either the period itself
or contemporaneously, examining anything other than the economic situation of
older people, is one of the reasons for looking to fiction for further insights’ (p. 39).
She concludes with an intriguing connection between ‘the beginning and the end
of the twentieth century’ book-ending a century obsessed with the greying of the
population (p. 45).

Mike Hepworth’s contribution builds on the idea of chance encounters and
taps into the social gerontological view (promoted by de Beauvoir) that age-
identity comes to us through others. His study of Stanley Middleton’s fiction
considers the novels to be ‘product[s] of the imagination’, as opposed to vessels of
historical insight as for Zeilig. In tracing age-based encounters within Middleton’s
oeuvre, Hepworth leaves no stone unturned. His essay considers class and gender
in relation to age through the imaginative production of this contemporary
popular novelist. In the final essay of this collection, Margaret Morganroth
Gullette takes readers to the ‘godmother’ of age studies, Simone de Beauvoir, and
does so with the skills of a literary critic combined with her immense prowess in
cultural studies (p. 76). Her discussion of *Adieux: A Farewell to Sartre* picks up on the
thread of encounter introduced by Hepworth. In her analysis of what she calls
‘auto/biography à deux’, Gullette draws on methods established within her re-
cently published book, *Aged by Culture*, to offer a satisfying reading of the troubling
and pessimistic late-life depictions that many attribute to Sartre (p. 65). Gullette’s
characteristically clear intervention into cultural understandings of age through
‘age autobiography’ is a major contribution to the fields of gerontology, cultural
studies and literary analysis.

In the conclusion, Johnson sums up much of the effect of this important report.
Each essay puts creative textual publication (popular and ‘literary’) into a
broader context, whether social, historical, cultural, formal and/or theoretical.
Most importantly, these essays work together to demonstrate the value of col-
laboration and a conversation across disciplines about the role of writing in the
rethinking of old age. Johnson’s choice not to organise the collection chrono-
logically reinforces the primary of ideas rather than progress towards an ideal
understanding of late life. She raises the important question of readership in her analysis of the accomplishments of this collection. Who reads what kinds of writing about old age?

Many readers will find this affordable, well-produced anthology of use in their thinking about late life as a fully embedded set of phenomena. Each author provides a well-conceived summary of the literary works they discuss, so that even those unfamiliar with the primary texts will find the arguments helpful. Students of gerontology and students interested in ageing, at both undergraduate and postgraduate levels, will engage with the many routes into thought offered here. Researchers interested both in ageing and in the possible role of literature in social change will also benefit from this publication. And the collection is so clearly written and contains such a broad range of material that the general reader who is interested in its content could find it an accessible entry into the questions age studies scholars like to ponder.

Reference


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This four-part book is an interesting, informative and essentially optimistic, contribution to our understanding of developments in the seemingly ever-changing world of health and social-care provision for older people in Britain. Its focus is the concept of intermediate care of older people. Part I explores the many competing definitions of this concept. The authors note that this range of definitions and models of intermediate care indicates the confusion about what intermediate care actually encompasses, and also reflects the priorities of different service providers. Lees (Chapter 2), in an analysis of the intermediate care literature, notes writers’ perceptions of the ‘in-between’ nature of this type of care. For instance, it has been variously described as being between primary and secondary care, between health and social care, between medical and nursing care, and between the support worker and carer role. In addition to the ambiguity and complexity engendered by this in-between nature, intermediate care, as Lees notes, also ‘spans a range of traditional service organizational boundaries’, that is, boundaries between primary, secondary and social care and also between the public, private, voluntary and informal sectors. The editor, Siân Wade, has written the majority of the chapters, with contributions by four others from diverse backgrounds. Between them, the authors have considerable experience in matters concerning the care of older people, and this collective experience is
usefully drawn upon, helping to ground the text in the complexity of the real world of health and social care. In many instances they are able to draw directly upon their own practical experiences, which is refreshing to see in academic writing.

Practice-related issues are explored in considerable depth. Central themes, particularly in Part IV, are that staff providing intermediate care of older people require considerable skills and expertise and that the preparation of staff requires careful consideration of their educational and developmental needs. In addition to older people having very specific needs, the authors note that staff working in intermediate care may be isolated and autonomous practitioners, hence knowledge and experience are crucial. Wade expresses concern over what she sees as the failure of professional education to address the care needs of older people or to convey the expertise required for their care. In the spirit of improving practitioner knowledge and expertise, Part II provides a useful overview of the ageing process and an exploration of some of the challenges faced by older people within society.

The practicalities of planning, developing and evaluating intermediate care are addressed in Part III, with the authors drawing again upon their own experiences and research in this area. Recent British initiatives such as ‘integrated care pathways’ and the Single Assessment Process (Department of Health (England) 2001) are usefully explored. In addition, challenging and interesting new roles to support services for older people – the intermediate care co-ordinator, the specialist gerontological nurse and the consultant nurse/therapist – are described, with the key priority of sound staff development and education reiterated in relation to these roles. Part III also elaborates another key theme, the importance of the involvement of older people in planning and evaluating services. In Chapter 7, Thewlis describes one model which provides opportunities for older people to be included in the planning, running and evaluation of services, whilst in Chapter 12, Begley provides a lay carer’s perspective on intermediate care.

This book is ‘student friendly’ with its use of case studies (including cautionary tales) and scenarios, its readable, plain English, and in the way it interweaves the health and social policy agenda underpinning intermediate care into the thematic chapters. There are also key points and summaries at the end of each chapter and a glossary of terms. This book is essential reading for both practising and student nurses, and I recommend it to all members of multi-disciplinary teams involved in providing health and social care for older people. Researchers will also find useful both the literature summary and the clear analysis of the concept of intermediate care. The overall message from this book is one of both optimism and challenge, arguing that intermediate care, if managed and developed well, could provide a very effective ‘Rolls-Royce’ service for older people.

Reference


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This small Joseph Rowntree Foundation publication covers a huge subject. The focus is to capture the ideas that older people have about whether money matters, why it matters and how it matters. Sources for the study were an expert panel, four focus groups and a literature review. Unfortunately, the three sources are not ingredients for a coherent whole. Quotes from members of the expert panel and from focus groups often sit oddly with a literature review which included studies of older people’s financial literacy, poor benefit take-up, the poverty trap, financial resources and direct payment schemes. An analysis of the focus group debates would have contributed to a greater understanding of how and why money matters. I was puzzled by the occasional inclusion of the view of a member of the expert panel. In my experience there are often as many different views as there are experts present. There was no sense of a debate and the odd quote seemed to be used when the literature was particularly thin.

Inevitably, as the subject matter is so huge and the size of the publication so small, key topics are omitted. One is how many older people there are whose wish to leave an inheritance affects their willingness to spend money on themselves. Studies of older people’s views against using their main asset, the family home, to meet care-home costs are not mentioned. Again, fuel poverty is scarcely mentioned although there is a substantial literature on hypothermia and on older people’s reluctance to spend money on heating their homes adequately in winter.

Given that the Joseph Rowntree Foundation funded the research, it is understandable that it focuses on low income and poverty, but the reality for a significant proportion of people now reaching retirement age is that they have greater income and assets than previous generations. Money can help them to enjoy a more satisfying lifestyle than was available to previous generations. A more realistic review would have explored the views of older people in a range of financial circumstances. In the end, this is a useful book to recommend to students as preliminary background reading.

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This is not a book for the faint-hearted. It describes in detail the work of a nursing home aide (a care-assistant in Britain) in the support of older people with high levels of disability and frailty. Words such as ‘personal care’ are clearly euphemisms for helping with bodily functions and the author does not pause to shield the reader from what it means to provide intimate care around toileting,
feeding and skin or teeth cleaning. If the book had an index, continence and incontinence would be major entries. Strangely enough, it is unusual to read about the basis of care work. In Britain, Julia Twigg (2000) is one of the few gerontologists who has engaged with the sociology of the body in reporting and analysing care providers’ experiences. Taboo issues of bodily touch and intimacy, combined with the stigma of working with ‘leaking’ bodies, make this a world where the detail of such activity is glossed over.

Thomas Gass’s personal account of working in a nursing home is compelling. He writes of the older residents and of the staff with sympathy and understanding. Much as he finds it helpful to consider the residents’ former selves and the continuities of their biographies, he also seeks to understand how care staff can sustain their involvement in such work. There are particularly relevant points for care systems outside the United States about the dangers of over-regulation and risk assessments. Despite, or perhaps because of, what he has witnessed when no-one else was observing staff, Gass is convinced that almost all are honest and kind. The systems they work under and the pressures upon them are severe and stressful nonetheless.

Two points about this book stood out. The first is that it offers a very singular perspective, in that few men work in such roles as a care assistant/nursing home aide. Intimate care has thus to manage general gendered boundaries. It is interesting to see how this is accomplished, and also how these boundaries are not insuperable. I had a sense that Thomas Gass’s ability to lift people, on and off the toilet for example, was extremely helpful for residents instead of mechanical devices or the decision to leave individuals in pads. The second point emerges from the nature of the account. Written as autobiography, the potential for detail and reflection is clear. As an ethnographic study, with Gass commenting on his reactions to the nursing home, the group, and individual behaviour together with the customs, rituals and practices of the organisation, this account illuminates worlds that are hidden and uncharted. Participant observation may not figure much in meta-analyses and randomised control trials but as a method of searching for meaning and outcomes it has few parallels.

This book would be a fine addition to the think-tanks’ deliberations and studies considering the future of long-term care. It may suggest that the care of staff is important if they are to care for others. It may suggest that the system is itself frail if it continues to rely on a workforce that is at high risk of burn out. It may wonder why so many care staff remain working in such difficult circumstances for so long, instead of lamenting the high turnover of staff. As Gass himself shows, the work, like the institution, may be a last resort and there is much to do to make the area more rewarding.

Reference


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