Book reviews


Demographic Methods is a remarkably clear, to the point and well-organized introduction to formal demographic methods for students. Intended as a text, with exercises at the end of each chapter and accompanying data available on the internet, it also provides an introduction to the topics and methods that the non-specialist, interested in demographic analysis, whether scholar or advanced student, is likely to encounter.

Coverage is centred on the standard demographic topics of mortality, fertility and population dynamics. For mortality, specific methods include basic measurement of mortality rates, the life table, as well as the slightly more advanced multiple decrement life tables and survival analysis. For fertility, topics include basic measurement of marriage, fertility rates, parity progression ratios, determinants of fertility and birth interval analysis. For population dynamics there are chapters on growth, stable age distribution, migration and population projection. An introductory chapter covers basic concepts, such as rates, transition between events, and the sources of demographic data.

The exercises at the end of each chapter are accompanied by solutions at the back of the book, a very useful feature for the instructor. More importantly, the data sets are available online at the publisher’s website, which cuts down on student frustration associated with tedious calculations, freeing up time to interpret their results.

All of this is conveyed with a minimum of extraneous examples or unnecessary derivation of formulae. As the author points out in the preface, this is intended as a textbook in demographic methods, not population studies, a purpose in which he succeeds admirably. The book’s clarity should endear it to scholars who want to learn demographic methods, but may make it less than captivating for students who have not grasped the significance of demographic analyses in the first place. Hence, in teaching advanced undergraduates or graduate students I would recommend using the book in conjunction with a text that provides an extended example of the application of the techniques to substantive questions, such as Livi-Bacci’s A Concise History of the World’s Population. As an anthropologist, I would match it with ethnographic examples such as Nancy Howell’s Demography of the Dobe! Kung, Hill and Hurtado’s Ache Life History or Pennington and Harpending’s The Structure of an African Pastoralist Community that use demographic methods to address population questions. All describe cultural and ecological contexts different enough from our own experience to force the student to consider the implications of precise quantification of demographic processes.

Ben Campbell
Department of Anthropology,
Boston University
During the 1970s a popular strand of science fiction literature consisted of dystopian fantasies based on the premise of massive global overpopulation, concerns shared by a growing green lobby. The threat of overpopulation still grabs the popular imagination. Surprisingly little attention has been paid to what now seems to be the looming challenge facing human society in the 21st century: global underpopulation. In many countries the birth rate is falling towards replacement level, and in the most developed countries it is already below that level. One manifestation of this is in the rapidly growing number of childless adults, both couples and individuals. There has been little research on the childless, and less on childless men, a pariah group if ever there was one. Commentary has generally been restricted to those men who have children but leave them rather than those who decide never to have them, men who Patricia Lunneborg has made the subject of her book.

Lunneborg draws on qualitative interviews with 30 American and British childless men. They discuss how they arrived at their decision not to have children, and the meaning that being childfree has for them. Many report a sense of disdain from friends and colleagues. Social networks divide couples with children from those without. Parents organize their lives around school and childcare: not to be a parent means exclusion from many social circles. Every reader who is childless must have felt some empathy with the man who said that his friends had, on becoming parents, suddenly lost all interest in other activities and were no longer able to converse about anything other than their children.

Despite appearances, the decision to remain childless is not necessarily the result of rampant individualism. We have come far from the Middle Ages, when parents often did not bother giving children different names, as most of them would not survive for more than a year. Children meant little then: now they mean everything. Having a child is the most expensive decision an adult will take, and not merely in financial terms. Credential inflation means that we live in a world in which middle-class parents are ever more pushy about getting the right school for their children. The pressure on both children and parents is considerable. Parents in the West can expect to keep supporting a child well into its twenties. With state and society ever more intrusive into family life, having a child is an increasingly risky decision. Given this, there is an extent to which being childfree is as much constraint as choice. It is a disappointment that Lunneborg only obliquely articulates this aspect of being childfree, and it is not a subject she pursues with the tenacity it merits.

Disappointingly, the research conducted is too thin, too poorly presented and under-analysed to allow firm conclusions about childless men to be drawn. Lunneborg’s methodology is flawed. The small number of interview subjects was drawn from a highly selective sample. The majority were members of American Childless by Choice, Zero Population Growth or the British Organisation of Non-Parents: what might be called the militantly childless. They are not representative of childless men. There is very little analysis, instead mostly overlong quotes from a limited set of interviews. The dearth of analysis means that this book says very little, and indeed makes it quite dull. She makes her research subjects read like the most
mediocre group of men. Their analyses of their own decisions seem far too clean and neat, and too self-congratulatory, to be real. Lunneborg doesn’t really give us much insight into the decision-making process. The nearest she gets is when she intimates that several of the men remain childless because they had uninvolved and remote fathers. I find this unlikely: if a significant proportion of men with emotionally distant fathers stayed childless the human race would have died out long ago.

Angus Bancroft
Department of Community Health Sciences,
University of Edinburgh


Haemophilia is not a high profile disease and with an estimated incidence of 1 in 7500 live male births and affecting about 15,000 to 20,000 Americans, according to the author of Blood Saga, it is not that common. However, there are two aspects of the condition that make it of topical interest: its links with the twentieth century disease AIDS, another condition associated with considerable emotional as well as physical issues; and, being an hereditary, sex-linked bleeding disorder, ongoing developments in gene therapy may provide a cure in the not too distant future. Other aspects of the disease that make it an interesting case study are the considerable changes that have taken place in knowledge, attitude, management and treatment over the last fifty years. These changes have been charted very clearly and explicitly by the author of this book using both her experience as education director of an education project designed for patients and their families at the National Haemophilia Foundation and subsequent research for a doctoral dissertation.

The book offers an interesting, thoughtful read for several groups of professionals as well as for anybody else with an interest in haemophilia using clear and simple language and structure. It covers, very comprehensively, historical, anthropological, medical and patient-centred issues surrounding the condition of haemophilia and captures personal emotions such as excitement and despair, as well as bureaucratic intransigence.

For the social historian the book provides a fascinating chronological overview of the condition in terms of the developing knowledge base and behaviour changes over time in the patient with the disease, their carers and the health care professionals involved in their care. It also provides an illustration of the creation, growth and development of an organization and illustrates the issues organizations face in attempting to maintain contact with, and be representative of, their grassroots members, but also maintaining a professional profile and managing change, as and where necessary, and public opinion.

For the health care professional, whilst the historical development may be interesting the important medical issues relate to the evolving medical care for haemophilia. The text clearly illustrates the changing role of health care in the management of this condition, and the benefits achieved by the patient and the health
care professional through a change in care from a secondary to a primary/community setting. Without being overtly emphasized, there has been considerable variation in the medical care delivered, some of which was conflicting and not all of which was of benefit. The recent emphasis on the need to provide evidence-based care and the implications of a lack of an evidence base are clearly illustrated in this text, as is the issue of research: how it should be funded and where and when it should be carried out. The latter is obviously not a problem specific to haemophilia. The other feature of medical care comprehensively illustrated in this text is the doctor–patient relationship and the development, and sometimes erosion, of trust as local and national environments changed from positive, with the introduction of managed self care, to negative, with the initial ignorance of everyone about AIDS.

Finally, and often forgotten, the patient is a key component when dealing with any health condition. The haemophilia population includes people from every social, economic and ethnic group. The author presents the issues associated with inheriting haemophilia, from the patient’s, and often from the parent’s viewpoint with clarity and empathy. The book maps their empowerment and illustrates how this has contributed to the successful management of their condition and their ability to live a near-to-normal lifestyle. This story might have had a happy ending at this point without the appearance of the AIDS virus and its transmission to the haemophiliac patients through contaminated blood products. However, the author also reports the metamorphosis of both the patients and organizations associated with the condition in response to this initially overwhelming problem.

To sum up, this book charts the issues and changes associated with the condition of haemophilia over the last fifty years in terms of society, health and disease in a language and style appropriate for the majority of readers.

Jean Peters

School of Health and Related Research,
University of Sheffield