Book Review

Review of Hamblin, Kate, and Matthew Lariviere, eds. *Care Technologies for Ageing Societies: An International Comparison.* Bristol: Policy Press. 2023. pp. 150. Price: $60.5 (Hardcopy)

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In *Care Technologies for Ageing Societies: An International Comparison*, editors Kate Hamblin and Matthew Lariviere bring together contributions on care and aging that explore the integration of technology with care systems in different national contexts. The book is part of the *Sustainable Care* series, which leans on international and interdisciplinary scholarship to critically examine the sustainability of existing care arrangements. This edited volume mainly focuses on the variances in policy and practice between selected countries – England, Australia, Germany, Canada, and Japan – regarding the role of technology in the provision of care services. All these countries are experiencing increased longevity, declining fertility, and other socio-demographic shifts that increase the demand for elderly care. Despite different national policy legacies and frameworks, all these countries proffer technology as a potential answer to sustainability concerns of care provision. Additionally, there is an increased marketization of care provision across the countries as elderly care demands grow rapidly. Through an international comparative analysis of policy frameworks, national data, primary research, and secondary literature, this book examines the convergences and divergences in the role of care technologies within national policy and care services provision between countries facing similar demographic challenges.

In Chapter one, Hamblin and Lariviere define the key concepts that constitute the central focus of the book – care, technology, and sustainability. They adopt Mary Daly's (2021) definition of care as "a vital sphere of human engagement and welfare-related activity focused on practices oriented to meeting perceived need" (113). Daly reflects on academic traditions that conceptualize care as labor, ethics, morals, human relations, global processes, and welfare to produce a definition that encompasses care as "both policy and practice" while acknowledging "its centrality to human relations" (5). In this volume, technology refers to "devices, systems and associated services representing the 'application of scientific knowledge for practical purposes' (Stevenson 2010) that have been provided either directly or publicly funded for the provision of care" (5). Lastly, in line with the United Nation's Sustainable Development Goals, Hamblin and Lariviere cite the need for a "triple bottom line" (6) approach to sustainability that encompasses economic prosperity, environmental quality, and social justice (Elkington 2008, 49). The editors highlight that care policy globally has mainly focused on economic sustainability due to the rising cost of care in aging societies. However, other social factors like the long-term sustainability of care relations and the well-being of carers often remain unaddressed (6-7).

All the contributions in this edited volume include a review of the national-level policies for aged care in each of the highlighted countries. In all these countries, the primary aim of their national care policies is to support 'aging in place,' where older individuals live independently in their community for as long

as possible (Grimmer et al. 2015, 1804). Both public funding and the integration of technology in care are thus meant to facilitate and extend the sustainability of care at home. Adaptive home modifications, digital and non-digital assistive technologies, and remote and at-home care services are applied to achieve aging in place. Each country has different care policies and systems to support aging in place accordingly. For example, the responsibility for the provision of adult care in England lies with 152 local authorities (Wright and Hamblin, Chapter 2), while in Australia, the responsibility belongs to the national government (Lovarini, O'Loughlin, and Clemson, Chapter 3). Regarding public funding of care, Germany and Japan have Long-Term Care Insurance (LTCI) schemes (Hoff, and Pottharst, Chapter 4, and Wakui, Chapter 6, respectively). In contrast, eldercare is couched within Canada's overall healthcare system rather than through a system of its own (Astell, and Fast, Chapter 5).

Thus, care policy differs significantly between countries in terms of allocated responsibilities and funding of care, and the book discusses how these differences impact the availability and role of technology within care provision.

Each chapter delves into how technology is integrated with care and highlights the differences between policy guidelines and implementation in care practices. The volume addresses the entire spectrum of care technologies currently available across all the countries. Traditionally, care technologies or assistive technologies have referred to manual equipment like walking frames and hearing aids, and electronic appliances like alarms and tracking devices. Today, technological advances in care include digital health technologies like smart home technologies and virtual assistants, as well as the use of robotics for manual labor, care work, and social companionship (54). In England, where care provision is the responsibility of local authorities, care policies differ significantly between the different localities, and the implementation of newer technologies is unevenly distributed. Unlike England's top-down approach, Australia has a consumer-directed care (CDC) model where senior citizens are provided with personal budgets to spend on technologies per their care needs. Still, the Australian care system is bogged down by long waiting lists and a lack of funding. Public care and care technologies cannot meet the surging demand for elderly care globally. Therefore, there is still a heavy reliance on informal, unpaid carers, particularly women, from the family and the community. The German LTCI system is intended to only partially cover the costs of care for specific users, while traditional family caregiving arrangements are expected to persist where possible. However, increased women's workforce participation and declining fertility cast doubt on the sustainability of informal care arrangements. Aside from costs and systemic issues of public care, the adoption of technology, particularly AI and robotics, is also hindered by nationwide disparities in internet access and digital literacy across the countries. In 2020, only 54% of those over 75 in England had used the Internet in the previous three months (30; ONS 2020). In Australia, only 15% of adults over 65 use the Internet to access government services and health and medical information online (61; ACMA 2016, 10). Thus, while technology is promoted as a solution to the care crisis, it has not been fully integrated into aged care in these countries due to several barriers.

Care Technologies for Ageing Societies: An International Comparison offers a comprehensive account of the integration of technology with care, both in policy and in practice, in different national contexts. Published in 2023, the edited volume also sheds light on the impact of the COVID-19 pandemic on the accelerated adoption of technology in healthcare. The book is concise yet detailed, offering an accessible and informative read for experts and laypersons alike. Each chapter discusses how technology implementation in care systems can differ vastly from policy to practice. For instance, Canadian legislation allows means-tested elderly care recipients to access technology and digital services. However, family carers, who provide the most care, cannot currently access the necessary province-funded technologies to support them in everyday caregiving in most parts of Canada (104). In Japan, the government pushes the use of assistive devices and care robots through policy. However, these

technologies have not been well adopted in residential care settings due to challenges like high installation costs, the need for wide spaces, and malfunction concerns (131-132). Thus, there are significant gaps between national care policies and the implementation of care provision. The book contributes significantly to understanding these critical issues and gaps between care policy and practice and how they impact the utilization of care technologies in aging societies.

Despite its insightful vital contributions, the book also has some shortcomings. The comparative analysis was limited to the concluding chapter of the book, where the editors summarized key points and highlighted the convergences and divergences between the countries. A more critical analysis of the national care situation in each country could have been included in the different chapters. Furthermore, the editors state that including Japan, an East Asian country, in the book "enhances the cross-national comparison" (11). However, Japan does not represent all East Asia's social and demographic trends. The book also lacks perspectives from the Global South, from South America to Southeast Asia. It only demonstrates the state of care technologies in policy and practice in developed countries. Lastly, the book mentioned the environmental and social implications of integrating technology with care, but a greater exploration into these dimensions of sustainable care would have elevated the book further. The volume closely examined legislative frameworks across countries, and current national care policies do not adequately address non-economic forms of sustainability. These gaps in policy could have been highlighted and critiqued further in each chapter to enhance the discussion of the role of technology in sustainable care.

Hamblin and Lariviere conclude the book with recommendations on care technologies and the sustainability of aged care for policymakers, practitioners, and researchers. This book is a must-read for academics researching aging and care and an essential resource for policymakers and care providers in the aged care sector. The book not only discusses the potential for widespread use of technology to revolutionize care but also highlights key areas of concern where the government, private sector, and other actors can improve the sustainability of care within their social systems.

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