Book Review


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What will I do when I get older? Where will I live? How will I live? Will I have family and friends around? Will I have support services? How much will I have to pay and can I afford it? These are the questions Beth Baker addresses for those of us getting older and those who study and/or work with older people. We, Baker suggests, can live in retirement communities, co-housing, with our children (and grandchildren), among affinity groups, with strangers who become friends, and in-place. Her central contention, however, is that we need social life and activities, appropriate supports and funding, accommodations that help us adjust to changing circumstances, and, particularly for Americans, a government that recognizes the needs of older people in terms of values, policy, and funding.

Baker strongly argues that we should take charge of the decisions and circumstances that affect our later lives: "...aging in community doesn't begin when we turn a particular age...It begins right now, whatever our age, forming relationships, lending a hand, sharing a laugh, knowing you're there for each other" (218). These decisions can require re-evaluation and change, as for example, when a person who has lived in place or in a retirement community must go to a higher level of care and/or be closer to family. We need to be prepared for all these choices and see them as part of our life story.

As noted, above, our options have become increasingly varied. Baker goes through in significant detail the pluses and minus of these choices. The Village, for example, "...an organized way where neighbors can help each other remain in their homes..." (29), has a combination of paid and volunteer staff. It can work well--and it can fail because, as she quotes one member, "...because of marketing, or your business plan is not as solid as you'd hoped, or you don't have the technical know-how to make it all work" (36). Co-housing, where people buy a house or unit and share common facilities, requires members to participate extensively in decision-making processes. Eventually, for some people, that can "damage commitment" (46).

Baker goes through all the alternatives--family, friends, residence sharing, communities without walls, affinity groups, such as gay housing, and artist communities. For many, economics determines the choices. For others, physical and/or mental limitations constraint choice. She notes that Americans have fewer choices compared to Europeans, because their governments provide much more planning, funding and consideration of their aging populations. She suggests future policy directions for the United States in these areas, including changes in zoning laws that make it easier and financially possible to build a variety of housing formats for older people. These include new concepts in "granny units" and units which are
more practical for older people, such as single floor facilities--bathrooms, laundry, and kitchens. Baker further suggests ways in which government policy must encourage providers to address the needs of people who are aging. She notes: "...we need a concerted effort to entice more professionals to the geriatric field, or it will be impossible for many people to stay in their own communities as they wish." (178. See also Cumbler, et al, 2008).

This book is an invaluable resource for several reasons. It covers these alternatives in clear, welcoming, and supportive language. (Baker is a popular writer with a long list of publications geared to the lay public.) It provides contact information for those wishing to study more of these options and/or plan for their future. It complements Baker’s earlier work on reforming nursing homes to make them places in which we would want to live, instead of feeling warehoused (see Baker, 2007).

A few comments to add about this book. As noted, above, future researchers can see opportunity to look at these evolving alternatives. It would be fruitful to have these studies integrate with other studies in anthropology that focus on the nature of work for older people, such as Caitrin Lynch’s study of Vita Needle, a factory which employs workers who are over 65 (2012.) A personal note as well: I am a psychologist as well as an anthropologist. I would like to see future studies address the alternatives, needs, and social lives of certain populations, such as people with Asperger’s Syndrome, because they generally have less social interaction. There are also other psychiatric and medical conditions which should also be studied, such as people with visual impairment (cf. http://www.ne.nfb.org/node/579). Moreover, people with co-occurring conditions should be included in terms of studies and alternatives as well. One example is people who are bipolar who, in addition, have hearing difficulties.

Bibliography

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