As a British General Practitioner, it was with great interest I read this book. While the concepts under discussion are familiar to me, approaching these from a humanities point of view brought a fresh and positive perspective.

Wozniak begins by detailing the various factors under consideration when developing social policy for older adults. A global shift towards an older population and lower birth rate is well documented and is well summarised here. The escalating economic difficulty in funding social policy, as it currently stands, informs the urgency with which the author approaches the subject.

He goes on to detail normal biological changes associated with human ageing in general, while at the same time, emphasising the wide variation in functionality between individuals of the same chronological age. He correctly identifies that there can be a tendency to over-medicalise what is, in fact, a normal ageing process. He emphasises the importance of mental health, social interaction and proposes that identifying “isolators” - factors isolating individuals from their community - should form part of the assessment of an individual’s care needs. The author asserts that in doing so, we can empower an individual to access resources of all types around them. Developing this empowerment, contributing to maintaining an individual’s independence, is a key-factor in Wozniak’s new model.

In Chapter II of the three-chapter book, the author outlines some predictions of scenarios of the possible social consequences of population ageing. For example, considering technology, computers could be a positive connection to the outside world, contributing to a sense of community even for the housebound. For those without access to technology, however, an obvious opportunity gap arises. Also, a move toward a society of more inter-generational solidarity is postulated, widening the age ranges involved in the workforce, education and family life. Mentoring and resource exchange between generations could lead to a “society for all ages”, increasing the wellbeing of all.
These first two chapters form the basis for the author’s three-layer framework: A holistic view of social policy concerning the elderly, outlined in Chapter III.

The author correctly suggests that the current model of care is based on that of “solving problems” as they arise. Interventionist and emergency-based, we are simply lurching from event to adverse event, attempting to serve each individual, allocating increasingly squeezed resources only when a crisis occurs. Thus, he suggests that a move away from an emergency/interventionist model of care, towards greater expenditures on prevention, increasing awareness and sensitivity to the problems and needs of the ageing population.

Included in the book are detailed frameworks of the sectors involved and how each (for example, the labour market, housing, health, family and culture) might be inter-generationally structured to promote primary, secondary and tertiary prevention. He argues that the complexity of existing individuals points to the need for a complex and flexible set of structures on which to base care of the elderly promoting a society based on empowerment of both the elderly and younger generations, whilst allowing each to support the other. The principles are a move away from measuring policy by a single paramount outcome, such as “added years of life” for example, towards a broader process of developing a more robust intergenerational solidarity.

For example, employment and workplace policy must exist to adequately support family care of the elderly, in the same way that maternity and paternity employment rights have been developed to support employment and the care of young children. Similarly, policy which supports older adults’ contribution to childcare, mentoring and education contributes to the intergenerational exchange Wozniak is seeking to support.

Wozniak’s arguments confirm my fears that there are no easy answers to the “problem” of an ageing global population, though it is refreshing to read such positive writing on the subject. Though the aims here are lofty, he argues well, calling for a rise above the traditional solution of simply increasing funding to the current structures. The models described represent a well-grounded basis for a change in approach to the organization of the Welfare State.
The structure of the prose can be complex at times, for those, like me, outside the field of philosophy, but it may help readers to begin at the summary chapter. This gives a helpful overview, not detailed enough to negate the benefit of the main chapters, but making them easier to digest.

I would recommend this book to undergraduate medical students as a companion to medical sociology studies. For postgraduate medical and GP trainees, I would suggest that the positive discussion of care of the elderly is not like anything I have read elsewhere, perhaps because of its non-medical approach. Regardless, I hope this work serves to inform European policymakers of an alternative approach to the formation of future social policy.

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