



## Widows and Divorcees in Later Life: On Their Own Again

Carol L. Jenkins (ed)  
New York: Haworth Press Inc.,  
2003, \$24.95 pb, 202 pp.  
ISBN: 0-7890-2192-7

This book is a *Journal of Women and Ageing* monographic 'separate', which means it has been published simultaneously as a journal double-issue and a 'separate' book. It aims to shed new light on the lives of older widows and divorcees and the problems they face in making the transition to life without a partner, 'on their own again'.

Whilst a monographic separate might be a quick way of producing a book, I found it makes a dissatisfying and uncomfortable read. It feels like reading a series of papers, broadly linked – yes, but not moulded into a coherent whole, and interrupted by footnotes and notes; regrettably, presentation distracts from content.

Setting these reservations aside, what did I learn from the book?

I learned about the different family structures and living arrangements of older women in a variety of communities within the Philippines and Fiji, in Africa – South of the Sahara and in different ethnic groups in the USA. Even the question of who is a widow (or widower) is fraught with complexities in some societies. Polygamy is still widespread in some parts of Africa, and means that a man can lose his wife and still remain married. A further complication is that in some African cultures widows 'remarry' in widow inheritance 'marriages' (where a woman becomes the 'property' of the lineage so that when her husband dies he is succeeded by one of his male relatives). Are they then wives or widows?

I learned also about the social circumstances, economic situation and physical health of some of these women. The only British paper examines transitions to supported environments (including both supported private households and institutions) among widowed and divorced older women in England and Wales. It reports that although the overall rate of transitions was the same in the two decades between 1971 and 1991, the balance shifted towards institutional care settings in the second decade.

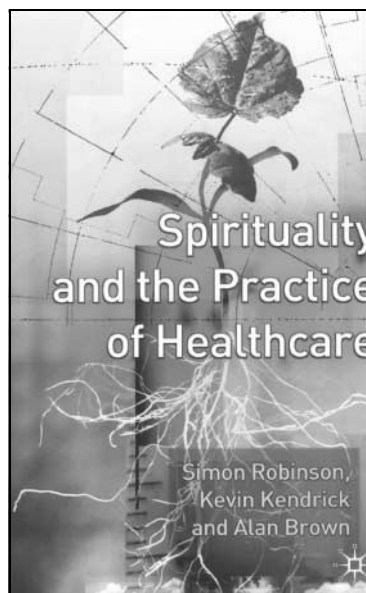
The book raises many questions. While these women have lost their partner, they still have a wide range of supports, including help from family and friends, religious beliefs and supportive social policies. The editor concludes (despite the title) that the majority of older widows

and divorcees are not truly on their own again.

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## Spirituality and the Practice of Healthcare

Robinson, S., Kendrick, K.,  
Brown A. Basingstoke: Palgrave  
Macmillan, 2003, £17.99 pb,  
251 pp., ISBN: 0-333-77797-2



Have the taboos around spirituality begun to fall away? Certainly there appears to be a lot of interest in this subject at the moment. For example, the Royal College of Psychiatrists has a special interest group on spirituality and psychiatry ([www.rcpsych.ac.uk/spirit](http://www.rcpsych.ac.uk/spirit)), and there is a special project of the National Institute for Mental Health in England on spirituality. The authors also point out that a concern for spiritual care is embodied in a number of professional codes and is reinforced by the revised *Patient's Charter*, although scant attention is paid to the realities of 'how to'. The much-used phrase of 'whole person care' supports the idea that we are mind, body and spirit – but when do we discuss the spiritual aspects of ourselves in healthcare? Leave that to the chaplains you may say, but this book clearly describes how we all have opportunities to explore and support our patients'

spirituality and that it probably is a powerful influence (for good or bad) on how they perceive and deal with illness. It is surprising how little curiosity we generally have for how it affects our patients, or us for that matter. In an increasingly multicultural society there are not enough multi-faith chaplains to attend to all those needs and I welcome this book's attempt to bring us into the arena.

The authors are two hospital chaplains and a nursing tutor, and the book is geared towards a nursing audience, but don't let that put you off as it is relevant to all health professionals. They are clear that spirituality is not a 'bolt-on' but a central part of how we provide health-care – particularly the aspects of relationship and meaning.

The chapters are wide-ranging and all include case material. They begin with the historical basis of spirituality and health-care and how it has broken free of the simple identification with religion. The authors have used a working definition of spirituality that they feel all parties can recognise and accept with integrity. The book continues with: spirituality and health; illness and suffering; assessment and practice; from the cradle to the grave; mental health; learning disability and the professions. The chapter on mental health is a good introduction and quotes heavily from John Swinton's excellent book *Spirituality and Mental Health Care* (2001).

Each chapter is well-referenced with clear boxes and tables containing essential information, a summary and suggested questions and exercises at the end. This encourages the reader to take a reflective stance and apply in practice the themes of the book.

*Spirituality and the Practice of Healthcare* ends with a quote,

'The aim of professionalism is to maintain the social contract, in a brutal world, by demonstrating the possibility of restoring the stranger to the community, through the discovery and recovery of the human worth of society's casualties and rejects.'

Such spirituality, the book maintains, is at the heart of healthcare in general, and contributes to the spiritual meaning of the wider community. My guess is that this book heralds something we are going to hear more of in the future, and it does so in a scholarly, practical and humane way. Highly recommended.

SWINTON, J. (2001) *Spirituality and Mental Health Care*. London: Jessica Kingsley.

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