

### **Social Integration in the Second Half of Life**

(Johns Hopkins University Press, 2000, 318 pages)

Edited by Karl Pillemer, Phyllis Moen, Elaine Wethington, and Nina Glasgow



Reviewed by M. Jocelyn Armstrong<sup>1</sup>

The benefits of social integration for healthy aging are now well established, with evidence from studies among a diversity of populations by scholars representing a range of disciplines and approaches.

The concept of “successful aging” developed by Rowe and Kahn (1998) from results of the multidisciplinary MacArthur Foundation Study of Aging in America features three interrelated components; avoidance of disease and disability, maintenance of cognitive and physical function, and sustained engagement with life. *Social Integration in the Second Half of Life* contributes a volume of theory, research and applications that focuses on Rowe and Kahn’s engagement with life as a key component. The volume explores two main questions: What leads to social integration in the second half of life? What are the consequences for physical and psychological health and well being? The questions are approached using a life course perspective to give particular attention to the transitions, such as retirement and widowhood, that can impact integration. Social contexts, such as gender and geographical location, are featured as important influences for variation. The volume is a product of the Cornell Gerontology Research Institute (CGRI), one of five Edward R. Roybal Centers on Applied Gerontology funded by the US National Institute for Aging. All 19 contributors have worked together at the Institute and all the original data reported in the book were collected as part of one of the Institute’s projects.

The book’s 12 chapters are organized into three parts. Part One: Overview of Major Issues and Approaches comprises two background chapters (1 and 2). Chapter 1 gives an overview of social integration in the context of contemporary social gerontology. Chapter 2 is a review of theory and methods.

---

<sup>1</sup> Department of Community Health, University of Illinois. E-Mail: [jocelyn@uiuc.edu](mailto:jocelyn@uiuc.edu)

The authors include discussion of the conundrum of social selection in relating social integration to health and well being (that is, healthy people are more integrated precisely because they are healthy) and present a model designed to resolve this issue.

The six chapters (3-8) in Part Two: Social Integration in Major Domains of Life bring the life course approach and social context considerations to analyses of integration of older people in the domains of retirement, transportation, family support, housing, neighbouring, and residential relocation.

Chapter 4 on social integration and family support presents an innovative application of the life course approach to research and understanding of family caregiving to persons with dementia. Family caregiver is treated as a social status and becoming the caregiver to a family member as a status transition similar to other life transitions. Findings of two Cornell studies which examined the social support networks of caregivers illustrate the important role of similar others in social integration. Having others with dementia caregiving experience in one's network associated positively with maintenance of social support and integration, and larger numbers of such peer supporters associated positively with better psychological health and well being. The influence of gender was indicated: peer supporters were important for both men and women caregivers but more important for women. The chapter on neighbouring (Chapter 7) addresses an aspect of social support and integration about which there is little current research. Two recent CGRI studies which examined the association of neighboring and health found a significant association with physical health but the relationship to psychological health was not significant. Further the decision to seek neighbor support was found to be heavily dependent on contextual factors such as personality characteristic, pre-existing levels of health, and physical characteristics of the neighbourhood.

Part Three of the volume: Interventions to Promote Social Integration in Later Life (Chapters 9, 10, 11) describes and comments on model interventions in three of the domains covered in Part Two: transportation, retirement, and peer support for caregivers. Chapter 10 describes an innovative program designed to promote volunteering as a way to sustain integration following retirement. Implications for policy, research, and practice are discussed, for example, how to make better use of retired older Americans for volunteer activity in their communities. The peer support for dementia caregivers program described in Chapter 11 applies the theory and research presented in Part Two's Chapter 5 on the role of similar others in the social integration and well being of persons experiencing the life transition to dementia caregiver. A mix of outcomes is reported: researcher measures of

beneficial outcomes were limited; caregiver assessments were very high. Additional research across different caregiver types is recommended. The closing chapter (12) reflects on common social integration themes that pervade the book and suggests implications for future intervention research, policy, and practice. Stressed is the familiar but critical theme of variability in the experience of integration and its benefits for healthy aging. Interventions that target at risk groups (women, rural residents, etc.) and attend to different levels of intervention (individual to national) are recommended.

*Social Integration in the Second Half of Life* merits a wide audience of researchers and practitioners in the fields of social and psychological aging. The topic is one of worldwide relevance and, while the focus on American experiences and applications gives the book a primary appeal to American readers, there is theory, methods, case material and practice information of general interest. All 12 chapters are well written, most are well documented for English language references through 1999 and there are both name and subject indexes. The cover text presents the book as a "handbook" on social integration in later life and recommends it as required reading for graduate level social aging classes. If selected for this purpose, students will benefit from a level of cohesion not often found in edited volumes. In large part this is due to the book being the product of one research institute with all of the contributors committed to the same larger research agenda and common approaches. However, the editors are to be acknowledged for achieving other aspects of cohesion such as generally uniform styles and standards of writing and chapter to chapter referencing.

Careful editing is also evident in the book's organization. The chapters are similar in scope and depth of treatment. The book moves smoothly from an informative introduction and background chapters through topic specific research chapters to connected practice applications and a conclusion that features reflections and future directions. Each of the chapters in the main body of the book stands alone but they also read well in order of presentation. Readers tempted to begin with a chapter or chapters of primary personal interest might well consider a cover to cover read as rewarding. Use of a life course perspective on social support and integration and attention to social context align the book with leading developments in social gerontological theory and research and the treatment of applications includes new ground.

If one were looking for gaps or limitations, among life transitions not treated, grandparenthood stands out, being both a common experience and, for current cohorts of older people, one that is assuming new meanings of interest and concern. Among forms of support and integration, friendship gets only passing mention but it is well documented as important for older women. One of the subgroups the book recognizes as at risk for lack of integration, and

recent studies suggest a newly significant role for current cohorts of older men too. Among social contexts, gender and geographical location receive the bulk of attention. Ethnicity is conspicuous by its absence, given that after gender it is widely agreed to be the most influential context for social aging generally. All in all, however, the book offers a solid and interesting to read “handbook” on social integration as a key component of “successful aging.” It provides valuable analyses of the situation for Americans in the 1990s and represents a significant resource for continued research and intervention.