

Julia Twigg (2006). *The Body in Health and Social Care*.
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During the last two decades, the body as a subject and research field has become the object for a massive theorising and exploration in scientific writing. Julia Twigg has for some years now made important contributions on the body in social care and social policy. With her new textbook, *The Body in Health and Social Care*, Julia Twigg further adds to this area. From a quick glance at the table of content it becomes clear that Julia Twigg, in her ambition to map the field of health and social care, has an intention to grasp and embrace various subjects within this territory that goes beyond body and ageing, disability and the body, the body in medicine and health care, and home care, to name a few. Headings such as 'Diet, Health and the Body: Obesity and Eating Disorder' and 'The Body in Public Space: Breastfeeding and Toilets' reveal her ambition to also include topics such as food, diet, and the divide between public and private space which are highly relevant, but less analysed and theoretically connected with social policy and health and social care. However, to a large extent this book emanates from her earlier work, such as the book *Bathing: Body and Community Care* (2000).

In her first chapters, Julia Twigg gives an introduction to the extensive but also elusive work on the body and an overview over some of the most influential currents of theories and debates about the body: e.g. the early work of Bryan Turner, various feminist influences, and the work of Foucault. She puts great emphasis on the benefits of using these cultural analyses in the field of health and social care, but also calls attention to their limitations. Moreover, she explores the significance of a number of dimensions of differences such as gender, race, class, age, and

sexuality and how they operate on the understanding of body in the territory of health and social care.

Over several chapters, Julia Twigg deals with issues such as ageing, old age, disability and care, which for me personally are of central interest. Here, she brings to the fore a number of questions of immediate significance. For example, she discusses ageism as a bodily form of oppression. Rooted in a fear of illness, decline and death, ageism operates at different levels, in the care system, in culture, in social and public policy, in care work and so on, but most importantly “it operates on and through the body”, Twigg argues. In this regard, scientific work that encompasses cultural analysis can bring new insights **into** how ageing and old age is socially and culturally constructed and how this in turn determines the very circumstances and experiences of older people, not least at a bodily level.

Additionally, Julia Twigg calls attention to the fourth age and the difficulties in addressing body in “deep old age”. In this respect she elucidates issues of vital importance: this life phase, possibly more than anything else, draws our attention to the limitation of analyses rooted in social constructionism. Pain, illness, disability, dying and death are realities obstructing such analysis. But for that same reason it is necessary to encounter cultural approaches into this – hitherto neglected – territory. As Twigg points out, there is a need for studies that address the subjective experiences of body and of becoming old in the fourth age. Moreover, one of the major challenges – theoretically – consists of combining the poststructuralist theorising and post-modern themes of identity, subjectivity, and power with themes of a more concrete embodiment illustrated by dependency, decline, frailty and death. This is necessary if we want to move towards a more coherent comprehension of the body in old age.

This debate has its parallels in the area of disability. Within disability theorising, which is very much dominated by the social model, the body has been connected with the medical account and other oppressive discourses. Thus, the body has for a long time been an unspeakable topic. Twigg presents a number of areas of critique that recently have been directed towards the social model: for example, its failure to address diversity and the very range of conditions and impairments, and its

failure to acknowledge the lived experiences of disabled people and of their bodies. Julia Twigg argues that culturally informed analysis enables us to refocus the body within the disability field without being reduced to the medical model.

Where her book possibly gains in breadth, it lacks in depth. This however is easy to be lenient with, since the book is first and foremost for students of sociology, nursing, social work, and social policy. As a textbook it serves a useful purpose as an introduction not only to the quite obscure research field on the body and embodiment, but also to the vague field of health and social care. By encapsulating issues of body and embodiment within the field of health and social care Julia Twigg raises key questions which have huge implications for research as well as for practice. In that way the book is a source of great stimulation.