Book Review

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The biggest problem in social gerontology is the lack of a theoretical foundation. With great naivety, I found this statement to be very controversial. The last time I made such a statement, another gerontologist lost his temper. However, each edition of *The Handbook of Theories of Aging* begins with the assertion that social gerontology is theoretically barren. In the most recent edition, the authors suggest that editors of social gerontology journals dismiss theory in favor of number crunching. Like it or not, in social science, number crunching is envisioned as “science” while qualitative methods are employed by those who lack the intellectual ability to employ inferential statistics. NOW, you will not find a single author of any research methods textbook who supports this position! Nevertheless, this position is an accurate portrayal of the reality within the social science community.

In our study of research methods, we are taught that qualitative methods are the primary avenue to construct concepts that are operationalized to enable “real” social scientists to test hypotheses. It has been only recently that gerontologists are jumping into qualitative analysis for the purpose of theory construction. Morrissey’s *Suffering Narratives of Older Adults: A Phenomenological Approach to Serious Illness, Chronic Pain, Recovery and Maternal Care* is an excellent example of employing qualitative methods to advance the study of social gerontology. Although her intended audience includes practitioners (social workers and psychologists), I see a greater contribution in the academic arena of teaching theory construction. Through the use of phenomenology, Morrissey does a masterful job in taking concepts that emerged from her interviews and moving toward a sound theoretical foundation. The content of Morrissey’s work is very similar to Komesaroff’s book *Experiments in Love and Death: Medicine, Postmodernism, Microethics and the Body* (a review can be found at http://www.jswearchives.com/content/view/116/68/). In both of these books I found myself reading with two different minds. The first is an emotional one. I had to conduct my reading in short bursts of time. The subject matter is a reminder of our own mortality and the pain we may experience toward the end of our lives. Reading this book is a sure-fire path to depression. The second mind is that of an intellectual. The author brings forth fresh ideas and concepts that lead us to a better understanding of end-of-life suffering.

Two important points can be made about this work: One is a strength while the other is a weakness. First, the strength of this work is Morrissey’s skillful employment of qualitative methods. As noted earlier, quantitative methods are held in high esteem. However, although many gerontologists are reluctant to admit it, many aspects of human inquiry are not amenable to number crunching. *Suffering Narratives of Older Adults* is an excellent example of the strength of qualitative analysis where a quantitative inquiry
would lead to a dead end. One particular feature of Morrissey’s findings is quite remarkable. She contends that she uncovered no pattern, no commonality, and no shared strategy in addressing suffering among her sample. Quantitative methods uncover patterns, while qualitative methods offer us depth. For years, I have been reading criticisms of Kübler-Ross’ work *On Death and Dying*, in which critics would question Kübler-Ross’ typology. Most of the critics were not taken seriously. Frankly, their arguments were weak. The major strength of Morrissey’s work is that she provides very strong evidence to propel scholars to rethink Kübler-Ross’ work *On Death and Dying*.

For a conceptual framework to conduct the interviews and interpret meaning from the interview data, Morrissey turns to the tradition of phenomenology. I have always envisioned phenomenology as having an unnecessary use of obscure and esoteric language. Here lies the weakness of Morrissey—her jargon. Simply stated, Morrissey has a tendency to use 50 cent words when nickel words would work just as well. For example, I was perplexed with Morrissey’s discussion of a “paradox” on pages 45–46. I had to read and reread it and failed to identify the “paradox.” As a result, I contacted a friend who has a strong background in phenomenology. We discussed this particular passage for about 20 minutes. He agreed with my assessment of the writing style. Academicians are likely to find this reading thoughtful and filled with theoretical insight; however, practitioners will be frustrated with phenomenology as the conceptual framework.

Reading the book is an unnecessarily cumbersome task.

Morrissey’s work is an important contribution not only to her intended audience, but also to students of theory construction. It is an excellent example of the contribution that qualitative methods can make in the advancement of theory in gerontology. I highly recommend this book for gerontologists who focus on end-of-life issues, students of theory construction, and those who are seeking good examples of sound qualitative methodologies. All academic libraries should adopt this book.