Connor, Stephen R. (2009). *Hospice and palliative care: The essential guide* (2nd Edition). Routledge, New York. <a href="http://www.routledge.com/books/Hospice-and-Palliative-Care-isbn9780415993562">http://www.routledge.com/books/Hospice-and-Palliative-Care-isbn9780415993562</a>

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Stephan R. Connor, Ph.D., is a clinical psychologist who has been active in hospice and palliative care since 1976. He is currently Senior Research Consultant to the National Hospice and Palliative Care Organization and executive to the Worldwide Palliative Care Alliance. He has been a major force in the development of hospice and palliative care. Dr. Connor has published extensively in the areas of hospice and pain management.

Hospice and palliative care: The essential guide (2nd Edition) is an excellent and very dense book. The major theme of the book is that hospice and palliative care can be effective in helping people maintain dignity and independence at the end of life. The author provides an excellent history of the development of hospice and palliative care, which summarizes well the reasons for their development and their strengths and weaknesses. The book begins with a summary of what hospice and palliative care are. It then works through: "The interdisciplinary team," "Symptom management and physical care," "Psychosocial and spiritual care," "Grief and bereavement,"

"Community and public engagement," Managing hospice and palliative care," "Society and denial," "A right to die," How palliative care is unique in the health care system," "How good are hospice and palliative care," "Hospice and palliative care around the world," and "The future of hospice and palliative care." Each chapter, though brief, presents a thorough discussion of the major issues involved and the current controversies in the area. For example, on page 82, the author states, "Most theorists believe that emotional expression is needed for grief to be resolved. Wortman and Silver {1989 #1934} questioned this need and claimed that some can resolve their grief without 'feeling the pain." This is typical of the approach throughout the book. The book addresses many of the technical issues involved, but throughout, it stresses the importance of client self-determination and a caring philosophy. "Any individual has the right to determine how to be treated when facing a life-threatening illness" (p. 9).

Despite its brevity, the book contains several excellent case examples. In the chapter on quality of hospice and palliative care, the author discusses the completeness of records and then

states, "This usually pleases state surveyors from licensure and certification, although it does little to improve care" (p. 193). I find this balanced approach refreshing and helpful.

Every chapter could be expanded into a book in its own right. The author supplies thorough references with each chapter to allow the reader to find additional information about the topic. Clearly, one of the strengths of the book is the link to additional literature. The index provides a comprehensive list of organizations concerned with and engaged in hospice and palliative care.

The book takes an approach that is clearly compatible with social work values. It is compassionate and encourages looking at strengths. It stresses the importance of letting the client have an active voice in treatment and honoring client decisions. I would think it would be valuable in MSW programs that teach gerontology and end of life care. It would also be useful in an undergraduate human behavior course as a supplemental text. I recommend that every social work faculty member have a copy as a reference. I would think that social workers engaged in gerontology and end of life practice would find this book very helpful. In short, I found this a useful and informative book.