

to attack opposition-party presidents, and a platform for the ambitious politician to raise his/her profile on the national stage—none of which requires real constraints on bureaus. In other words, it is possible that congressional efforts to muzzle agency public relations are not really about bureaucratic autonomy at all, but rather are consequences of legislators' pursuit of policy and reelection.

Congress vs. the Bureaucracy advances our understanding of the Congress–bureaucracy relationship by documenting congressional responses to publicity campaigns by autonomy-forging bureaucrats. Students of bureaucratic politics will find in its pages detailed illustrations of agency publicity as lobbying mechanism, the limited capacity of Congress to resist agency publicity, and perhaps the empirical building blocks of a broader theory of the three-way relationship among Congress, the bureaucracy, and the citizens served by both institutions.

Aging Across the United States: Matching Needs to States' Differing Opportunities and Services. By Charles Lockhart and Jean Giles-Sims. University Park: The Pennsylvania State University Press, 2010. 224p. \$58.95 cloth, \$27.95 paper. doi:10.1017/S1537592713001709

— Frederick R. Lynch, *Claremont McKenna College*

Having coped with aging parents in various state and local settings, Charles Lockhart and Jean Giles-Sims learned through both personal experience and vigorous research which key economic, sociological, cultural, and policy variables should inform older Americans' decisions in choosing where to live during retirement and old age. In a well-written book that is useful to both the general public and scholars alike, Lockhart and Giles-Sims pose five basic issues that seniors must consider: 1) Where can retirees best find a life of companionship and active recreation? 2) Where can retirees best find a meaningful life and supportive communities? 3) Where can retirees best afford to live (and be safe)? (4) Where will retirees have the greatest opportunity for being healthy and finding the best medical care? And 5) where can retirees find accessible, affordable, high-quality long-term care?

The authors attempt to synthesize a massive amount of demographic data that address these questions. They understand that older Americans are a very diverse population and that the nation's 50 states often contain major internal variations (urban vs. rural areas, for example). Still, they produce several intriguing, recurring patterns of opportunities and services available by state. Much of this book is a plainly written description of a variety of factors (income inequality, cost of living, Robert Putnam's "social capital index," and several indices of political culture, health spending, and health outcomes) and how they produce differing types of "Senior State Friendliness" (SSF) as displayed on dozens of national maps. A concluding chapter is more complex, as the authors use

regression analyses to try to identify key variables that explain these interstate differences.

One reader-friendly heuristic device employed by the authors is profiles of hypothetical older couples (and a few singles) who make (or do not make) geographical moves at various stages in the aging cycle. Indeed, this is an important point of the book: Seniors (and their adult children, if any) must be aware of the progressive stages of aging. States that rank well on measures of interest to "active seniors" (recreation, climate, leisure activities) may not be well matched to the more intensive medical needs (availability of medical specialists, hospitals, and long-term-care services) and community support (and proximity of family members) required in late old age. Few states, the authors find, "have it all."

As Lockhart and Giles-Sims demographically map and analyze factors related to Senior State Friendliness, definite geopolitical and sociocultural patterns emerge. They eventually conclude that "with some exceptions, different southern regions lead the recreational lifestyle dimension of SSF. Various northern regions tend to lead on the meaningful contributions and supportive communities; the health and high quality medical care; and the accessible high quality long-term care dimensions. Northwestern/north-central and south-central southeastern regions provide greater affordability" (p. 124). Indeed, it is hard not to notice that the nation's poorest, often racially divided "Deep South" states (Louisiana, Mississippi, Alabama) fare worst on most indexes (except climate and affordability) and "hold a near monopoly on the bottom ranks of health and high quality medical care" (p. 124). Conversely, the more ethnically and economically homogeneous northern "heartland" states, from the Rockies (Idaho, Montana, Wyoming, Utah) into the Great Plains (North and South Dakota, Minnesota, Iowa), generally fare very well on Lockhart and Giles-Sims's five key senior questions—with the exception, of course, of long and cold winters, which negatively impact "recreation."

Why do some states have more SSF than others? In the concluding chapter, Lockhart and Giles-Sims calculate regression coefficients to explain variations in the five SSF issues as dependent variables using seven independent variables: state political culture, political (party) competition, state tax capacity, median income of seniors, proportion of seniors, proportion of minority seniors, and average senior property tax.

As might be expected, strong civic culture ("meaningful contributions and supportive communities") is correlated with a solid middle class (median senior income) and active, participatory politics (political culture and party competition). And the authors glumly acknowledge their replication of Robert Putnam's famously controversial correlation, that "greater ethnic diversity depresses supportive community feelings" (p. 136). They are also puzzled by a regression coefficient indicating that rising

proportions of minority seniors drives up the cost-of-living indexes (though this might have something to do with concentration of immigrant minority seniors in large cities).

Although climate and recreational factors might be largely beyond human control, Lockhart and Giles-Sims conclude that quality of life for aging Americans is largely dependent upon variables relating to culture, economic resources, politics, and public policy: “a cultural orientation towards using public policy to improve the lives of a large proportion of the population as possible coupled with the material capacity to support this inclination explain a good deal of the variation in SSF across the American states” (p. 139).

Of course, age differences are increasingly intertwined with other sociological factors, especially class and race. Indeed, the stark demographic differences among states presented throughout the book provide ample temptation to digress into these related factors. The regional differences in poverty, high inequality ratios, class, race/ethnicity, and public and private health insurance coverage (or lack thereof) fairly shout at social science readers familiar with health-care statistics and with demographic change. (The multivariate analyses of the prolific Brookings Institution demographer William Frey come to mind.) Lockhart and Giles-Sims might have paid a bit more attention to race/ethnicity and, perhaps, to gender: Women usually outlive men by several years, are more independent, and tend to have stronger social networks. But, by and large, the authors are to be commended for keeping a tight focus on the topic at hand: matching citizens’ needs at various stages of aging to the ways in which states provide services and opportunities appropriate to those stages.

The tidal wave of 78 million baby boomers is rolling into the choices and dilemmas outlined in *Aging Across the United States*. (Indeed, many boomers—like the authors—may already be grappling with these matters as they care for older parents.) Lockhart and Giles-Sims provide a sophisticated road map for the changing terrain of retirement and aging. Their book combines scholarship with very useful information for a general audience and deserves wide notice. The editors at Penn State Press have wisely recognized this and *Aging Across the United States* will shortly appear in a more reasonably priced paperback edition.

One Nation under AARP: The Fight over Medicare, Social Security, and America’s Future. By Frederick R.

Lynch. Berkeley: University of California Press, 2011. 288p. \$60.00 cloth, \$27.95 paper.

doi:10.1017/S1537592713001710

— Ted Marmor, *Yale University*

Frederick Lynch, self-described as a “politically incorrect sociologist,” has written an unusual and engaging account of the political role of the AARP (formerly the American

Association of Retired Persons). It is the work of an industrious, determined organizational analyst, scholarship that does not proceed from familiar models of interest-group behavior but builds instead on gerontological research about aging cohorts. The book is concerned most of all with whether the AARP, conceived initially as a politically restrained provider of services to comfortable older Americans, will become the political equivalent for defending Medicare and Social Security that the Chamber of Commerce has been for protecting business interests against regulatory expansionism.

Three issues dominate Lynch’s scholarly agenda. First, there is the question of concerning the difference that the aging of the so-called “baby boomers” will make for American politics generally. This inclusion has a contemporary and prospective focus: “Are aging boomers a sleeping political giant?” The second topic is the relationship between the “seventy-eight million aging boomers and the forty-million member AARP” (p. 3). (It is worth noting that half of AARP’s members are, as Lynch emphasizes, “*not* retired.”) What kind of political organization is it—one servicing very diverse subgroups of those over 50 or one leading seniors in the defense of Medicare and Social Security in the budget struggles so sharply illuminated in the deficit debates of 2012–13? Lastly, Lynch takes up the way that “aging boomers and AARP are negotiating” what he terms the “increasingly competitive, globalized ‘super-capitalism,’ major demographic changes, and the rise of a ‘Post-American World’” (pp. 4–5). What is of concern here is how Americans born in the middle of the twentieth century—and an AARP that emerged at that time—will cope with the very different socioeconomic and political environment of the twenty-first century.

This is a considerable agenda, and the book copes unevenly with the complexities raised by the issues. Lynch ably and extensively documents the realities of the diverse category of American seniors. He acknowledges, as the late Robert Binstock insisted, that those over 65 are a demographic category, not a unified political constituency. They share an interest in Medicare and Social Security, but carry into older age the divisions of class, culture, and experience. The book highlights this diversity and brings empirical grounding to the often loose discussion of aging in American political analysis.

The same cannot be said for the discussion of ways in which AARP and the aging of the American population will shape the current and projected struggles over Medicare and Social Security. Here, there is a substantial gulf between what political scientists and policy analyst would take for granted as necessary background and what Lynch’s approach provides. The book begins with the fiscal realities of what has come to be known as the “Great Recession.” How the fiscal policy of the early 2000s, combined with the deficit explosion post-2008, brought Medicare and Social Security to front-page prominence is the focus