parents' cohabiting and LAT partners in their family lives. Bildtgård and Öberg also uncover the significance of new intimate ties in older age to fostering a sense of autonomy for both generations. Older persons tend to define autonomy in terms of not relying on children, other family members, or friends; relying on a partner however does not threaten feelings of independence. In turn, the intimate ties of parents enhance the autonomy of adult children who feel less responsible for supporting their parents now that a partner can do so.

As well as encouraging more attention to intimate ties that emerge later in life, the authors' observations suggest other important research topics; for example, very long-term marriage. Bildtgård and Oberg document the staggering increase in the number of old people who celebrate their Golden Anniversary largely as a consequence of living longer, healthier lives. In Canada in 2016, among those 65 years of age and over, 75 percent of men and 49 percent of women were married (Connidis & Barnett, 2019), mostly to a long-term spouse. I believe that we should explore the continuing common experience of staying married into old age and what it means to stay married that long for the relationship and for the individuals in it. What enhances marriage for those who stay married in today's social and cultural milieu, one quite different from that of cohorts studied in earlier research on long-term marriage and from the times when today's old couples married?

Elsewhere I have urged social scientists to present our research as "good stories," accessible to a broader audience. Bildtgård and Öberg have told us an inspiring story about the changing realities of intimacy in later life, of older persons as key change makers, and of children as love coaches to their older parents—unless marriage is in the works. Maintaining a good story line sometimes requires having to simplify. Discussions of the third age and consumerism generally risk focusing

on the experience of older persons with resources. Although the authors note this weakness and periodically insert the significance of inequality among older persons, this is a part of the story that could be extended. At the same time, Bildtgård and Öberg make excellent links between the macro and micro levels, for example, in raising the significance of state support for individual choices and in highlighting secular and welfare state variations among societies that create different trends in intimate ties.

The authors end by asking whether today's Swedish experience is an anomaly or a harbinger of what is to come in other countries. I concur with their conclusion that Sweden provides a glimpse into the future of other Western societies. Although more commonplace in Sweden, we already see changes such as more cohabiting and LAT relationships in other countries, including Canada, especially Québec. Do I agree with every point that the authors make? No. Do I think that this is a thoughtful and engaging book with good ideas and data that move our understanding of intimate ties in later life forward? Absolutely. I highly recommend this book to anyone interested in the changing landscape of intimacy in old age, particularly to those teaching and doing research in the area. Indeed, I highly recommend this book to anyone interested in the various family and personal ties of older persons, because core ideas are transferable to other relationships. Bildtgård and Öberg demonstrate the value of hearing the voices of old people and working beyond stereotypes of what is possible later in life using a clear and refreshing writing style. Finally a shout-out to Polity Press for continuing to publish research monographs as well as textbooks. This book shows us why it matters.

Reference

Connidis, I. A., & Barnett, A. E. (2019). Family ties & aging (3rd ed.). Thousand Oaks, CA: Sage.

Keith A. Anderson, Holly I. Dabelko-Schoeny, and Noelle L. Fields. *Home- and Community-Based Services for Older Adults: Aging in Context*

Reviewed by Alethea Lacas, MD CCFP (COE), Dalhousie University doi:10.1017/S0714980819000060

Home- and community-based care is frequently touted as a key solution to the many ills of the current health care system as it serves, or doesn't serve, our elderly patients and citizens. Lack of access to timely and appropriate home- and community-based care is often identified as a key bottleneck in many health care settings, contributing to overcrowding in the emergency

departments and bed shortages in hospitals. Risks associated with institutionalized care such as pressure ulcers, falls, polypharmacy, and even a decreased quality of life that can come from depersonalized care and lack of purpose are increasingly viewed as troublesome. The proffered solution to this situation is often personcentred services in a home- or community-based setting.

From a budgetary standpoint, home- or community-based care is also put forward as an antidote to expensive institutional care and long hospital stays. Innovative ways to deliver care to older adults that allow them to remain in their own homes or communities at a maximum level of independence are held up as solutions to these complex system problems. Home- and community-based services that maximize independence and autonomy are also cited as opportunities to provide dignified, person-first care that is argued to be cost-effective. This book aims to look at what services exist to serve the growing care needs of older adults outside the institutional long-term care and hospital-based settings.

Home- and community-based services (HCBS) are defined here as "health care and support services delivered to the residence and neighborhoods where older adults and their family caregivers live". The intended audience is "students in the health professions, such as nursing, social work, and allied health services. ... [as well as] students in public health and health care management fields." The audience could also be broadened to include not just students in those fields, but also administrators and medical providers who care for patients who are, or should be, receiving care in a homeor community-based setting. The book is written from an American perspective with a focus on American government policies and funding models; however, the concepts and models of care that are presented can be of interest to readers from other countries.

The book is arranged so that the first four chapters provide a foundation to understand the different models of care that are reviewed in the remaining chapters. After the introductory chapter that provides a foundation for understanding the demographic characteristics of the older adult population in the United States, the authors dedicate two chapters to outline the American policies that affect HCBS and summarize the impact of

the Older Americans Act. Neither chapter is particularly relevant to the Canadian reader, but they do lay important foundations for understanding the American context. After a review of the multidisciplinary and interdisciplinary skills across HCBS settings in chapter 4, the next seven chapters each focus on one model or facet of HCBS. The models that are reviewed include family caregiving, home health care services, the village concept and naturally occurring retirement communities, home-based primary care, assisted living and housing with services, adult day services, and hospice in community settings. The book concludes with a chapter considering the international perspectives on HCBS and an intriguing chapter about technology in HCBS.

The book is well researched with ample references for each model. The chapters are arranged so that there are clearly stated objectives, true and false questions, a chapter summary, and questions for further discussion. Chapters also include brief interviews that are "perspectives from the field". At times having so many different sections within each chapter can detract from key points, but the summary at the end of each chapter is helpful.

This book provides a comprehensive review of many of the service models that exist in North America for older adults aging in place. Although no one model will fit all needs or personal preferences, this book helps readers to understand some of the strengths and limitations of each model of care. Perhaps most helpful is the book's articulating what the authors view as the future challenges and opportunities for each model of care. All of us who work with or advocate for older adults, and for a more person-centred approach to care, need to understand what models of care currently exist. If nothing else, this understanding can help us to innovate newer models in the future. This book provides important background information and, as such, is relevant and timely.