



**Beyond the “9 to 5”
Dismantling Barriers and Building Economic Resilience for Older Workers**

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Written Testimony

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Introduction

Good morning, Senator and Chair Casey, Senator Braun and members of the Senate's Special Committee on Aging.

Thank you, Senators Casey and Braun, for inviting me to testify today. It is an honor to be before this Committee, particularly Senator Gillibrand from my adopted home state of New York, and Senator Braun, representing my loving in-laws from the great state of Indiana. Senators, all of your efforts on the issues affecting the health and economic wellbeing of our aging population is vital to not just for older adults and their families, but for our entire society.

My research is focused on productive aging, equity, discrimination, intergenerational scholarship, and social policy. The National Institutes of Health, Social Security Administration, and private foundations have funded my research. I've served as subject matter expert for the National Academies of Sciences, National Science Foundation, and have reviewed grant proposals for the National Institute on Aging, federal agencies abroad, and national foundations. My research has been published in leading scientific journals and I serve on several editorial boards, such as *The Gerontologist*; *Journals of Gerontology: Social Sciences*; *Work, Aging, and Retirement Journal*; and the *Journal of Gerontological Social Work*.

My early life experiences growing up in El Paso, Texas with my loving mother (who is in the audience), maternal grandparents, and uncles, inspired me to study social policies and programs that maximize the chances to live a long, healthy, and meaningful life in a peaceful society. I am currently the James Weldon Johnson Professor of Social Work at New York University. I am also the Director of both the Masters of Social Work Program and the [Center for Health and Aging Innovation](#). Additionally, I work closely with a number of not-for-profit organizations, including [Generations United](#) and [Cogenerate](#), and co-lead [Grand Challenges with the American Academy of Social Work & Social Welfare](#).

Brief Overview of Aging Workforce and Productive Aging

We are living longer than we have ever in the history of humankind. Prior to COVID-19, it was predicted that half of children born in western societies will live to be 100 years of age (Christensen, et al., 2009), and the other half are expected to live to their upper 80s and 90s. Even as we emerge from the pandemic, epidemiologists are in general agreement that life expectancy will rebound, similar to the global pandemic in the 20th century, and we will continue to live longer. Extended longevity is one of the greatest scientific achievements in modern times.

The question before us all is: *How do we not just live a long life, but a long healthy life with a solid economic foundation; with strong social bonds with family, friends, and community; and in a diverse, loving, and peaceful society?*

It is an honor to testify today and share with you the latest research to answer aspects of that question.

The concept of “productive aging” takes the fundamental view that the capacity of older adults must be better developed and utilized in activities that make economic contributions to society – employment, volunteering, caregiving, and education (Morrow-Howell, et al., 2001; Gonzales, Matz, & Morrow-Howell, 2015).

Population aging is a reality that puts pressure on social insurance programs, labor markets, civic sectors, and families. Society needs a greater proportion of older adults to be productively engaged as paid workers, volunteers, and caregivers.

Older adults play a critical role in society.

Older workers make up 35% of the U.S. population, yet they contribute approximately 40% of the national economic output ([Joint Economic Committee Democrats, 2022](#)). Globally, people aged 50 and older account for a quarter (24%) of the world population in 2020, yet they contribute a third (34%) of global GDP ([AARP, 2022](#)). This translates to \$45 trillion US dollars and the trend is expected to continue, reaching \$118 trillion by 2050.

Older adults are more than just workers. They are volunteers and caregivers, knitting the social fabric of society, one job, one civic duty, and caring for one person at a time.

Older adults volunteer as tutors, and assist in other ways at schools, places of worship, libraries, hospitals, and non-profit organizations. Altogether, these civic contributions by older adults are valued at approximately \$77 billion US dollars, annually ([Gonzales, et al., 2015](#); [AmeriCorps, 2016](#)).

Older adults are grandparents -- many of whom are raising their grandchildren, thereby saving US taxpayers \$4 billion dollars each year by keeping those children out of the foster care system. ([Generations United, 2017](#), [Pew, 2016](#)). Older adults are also extensively involved in unpaid caregiving, which is valued at \$522 billion annually ([Johnson & Schaner, 2005](#), [White, DeAntonio, Ryan, & Colyar, 2021](#), [Chari, Endberg, Ray & Mehrotra, 2015](#)).

The benefits are not just in dollars.

Under optimal conditions ([Gonzales, 2022](#); [2015](#); *see also additional readings*), employment and civic engagement are associated with fewer depressive symptoms ([Carolan et al., 2020](#); Morrow-Howell, 2010), lower risk of mortality (Glass et al. 1999; Musick, Herzog, & House, 1999), lower risk of hypertension (Kim, Halvorsen, & Han, *in press*), improved cognitive functioning ([Gonzales, et al., 2022](#); [Lee, et al., 2022](#); Hinterlong & Williamson, 2007), and increased economic security ([National Academies of Sciences, 2022](#)). Paid work and volunteering enable older individuals to develop and reinforce new knowledge, new skills and renewed purpose-in-life

(Gonzales, et al., 2015, 2022; Hinterlong and Williamson, 2007). Other studies have demonstrated a reduction in social isolation among more vulnerable community members, which may prevent or delay the need for individuals to receive formal, paid services (Barker, 2002; Hinterlong, 2002; Jang, et al., 2018). Contrary to conventional wisdom, research shows that informal caregiving can lead to living longer and in good physical and mental health ([Fredman, 2016](#), Fredman, et al., 2009; [Fredman et al., 2008](#)).

Productive aging can delay the onset and severity of disease and disability under optimal conditions (Morrow-Howell et al., 2001; Carolan, et. 2020; Gonzales et al., 2022; Halvorsen, 2020; Matz, Sabbath & James, 2020).

Barriers and Opportunities to Employment in Later Life

Yet, cultural norms and social structures limit older adults' full participation in these important productive roles. A recent report by the [National Academies of Sciences](#) clearly articulated the challenges to working longer (National Academies of Sciences, Engineering, and Medicine, 2022). Given limited time, I want to bring your attention to age discrimination.

Ageism is expensive: it costs the US \$850 billion in GDP each year due to the untapped resources of producing goods and services by older workers ([Terrell, 2020](#)). By 2050, the costs due to age discrimination could climb to \$3.9 trillion US dollars. Ageism is also linked to \$63 billion in health care costs (WHO, 2021).

Age discrimination at work is complex – at times quite evident and other times subtle, a constant reality for some, episodic for others (National Academies of Sciences, 2022). Yet research has clearly demonstrated older workers experience age discrimination at nearly every phase of employment: hiring, promotion, performance evaluation, workplace opportunity and climate, and transition into/out of retirement. Audit studies reveal older applicants are less likely to be interviewed and hired when compared to younger applicants (National Academies of Sciences, 2022; Newmark et al., 2019; Farber et al., 2017; Lahey, 2008; Lahey and Oxley, 2021).

Age discrimination undermines health and is associated with early retirement and turnover. A longitudinal study funded by The U.S. Social Security Administration that I conducted with a representative sample of older adults in the Health and Retirement Study data (“HRS,” 2006-2014, n=2,028) revealed older Whites, Blacks, and Hispanics reported high rates of chronic discrimination at work ([Gonzales, Lee & Marchiondo, 2021](#)). Nearly, three quarters (74%) of Whites reported work discrimination, compared with 68% of Blacks and 64% of Hispanics on an annual basis. Chronic discrimination within the workplace was associated with depression and earlier retirement. These findings are similar to my other studies which reveal targets of age discrimination at work is associated with depression, job dissatisfaction, and higher intentions to leave their employer and retire if they are eligible (Gonzales, Lee & Marchiondo, 2021; Marchiondo, et al., 2015).

Proving age discrimination at work is difficult and characterizing it as a decisive factor required by current law is nearly impossible. For example, the Everyday Discrimination Scale asks about targets' experiences with slurs, jokes, indignities, and incivility in their everyday lives. These events can occur within workplaces, restaurants, neighborhoods, etc. Again, the Health and Retirement Study, a representative sample of older adults, reveals that eight out of 10 Whites (81%) experienced everyday discrimination in the past year, compared with Blacks (78%, $p < .05$) and Hispanics (67%, $p < .05$). Unlike other measures, the Everyday Discrimination Scale queries respondents about attribution (i.e., main reason for these experiences). Among the entire HRS sample, respondents attributed discrimination to age (28%), gender (16%), weight (12%), race (8%), physical appearance (7%), ancestry (5%), physical disability (4%), and sexual orientation (1%). When stratified by race and ethnicity, the ranking of attribution shifts among minorities. Blacks overwhelmingly reported discrimination due to race (46%), age (14%), gender (11%), and ancestry (11%). Hispanics reported discrimination due to their age (22%), race (18%), ancestry (15%), physical appearance (14%), and gender (12%). It is important to note that nearly half of respondents in the HRS study reported everyday discrimination but were unable to rank attribution (why they were discriminated). Often, when queried through qualitative research, respondents believe they are discriminated for a variety of reasons (e.g., age, race, gender), which is corroborated with quantitative studies. It is difficult to rank attribution in order of priority, weight, or magnitude. This reflects the complexity of discrimination in and out of the workplace. Targets of discrimination are due for a confluence of bias based on sociodemographics (Laster Pirtle & Wright, 2021; Smith-Tran, 2022; Steward, Carson, Dunbar, Trujillo, Zhu, Nicotera & Hasche, 2023).

Legislation requiring targets to demonstrate age as a decisive factor in a discrimination case does not reflect the complexity of the phenomenon and is misaligned with age discrimination often co-occurring with other forms of bias at work (e.g., sexism, racism, etc.; Bendick et al., 1999; Bendick et al., 1997; Burn et al., 2020; National Academies of Sciences, 2022; Newmark et al., 2019; Farber et al., 2017; Lahey, 2008; Lahey and Oxley, 2021; Riach & Rich, 2010, 2006).

In sum, this form of bias limits older adults' participation in the labor force.

We must end ageism and other forms of bias. And it is possible.

Interventions are needed across the macro to micro continuum:

- We need to pass proposed legislation, specifically Protecting Older Workers Against Discrimination Act (POWADA), which will send a clear cultural and institutional message that ageism in the workplace is not tolerated. Importantly, it will reinstate Congress' original intent with the Age Discrimination in Employment Act (ADEA) that age is a factor, not the deciding factor, in an age discrimination case. This legislation will likely be effective in shaping minds and opportunities to remain at work, return to work, both for older adults today and young people in the future.

- We also need interventions within organizational settings. All too often ageism is viewed as acceptable and harmless. Multigenerational workplaces are naturally occurring given longevity. The challenge now is to maximize the strengths and talents of each generation ([Advisory Board, 2023](#), [Encore.org, 2022](#); Morrow-Howell et al., *in prep*), rather than pitting them against each other. With more employees working remotely in many organizations, retention of experienced workers is a critically important element in providing training and transmission of effective and efficient workplace practices to newer employees.
- We need to develop intra- and interpersonal interventions outside of the workplace to end ageism. National demonstration projects, such as Vital Visionaries funded by the National Institute on Aging for which I evaluated, offer compelling evidence that brief interventions (2 hours, 6 sessions creating art together) are powerful to end ageist assumptions between young and old ([Gonzales, Morrow-Howell, & Gilbert, 2010](#); Rubin, Gendron, Wren, Ogbonna, Gonzales, & Peron, 2015, [please view a YouTube video here](#)). Funding multigenerational civic activities, similar to those done by Senator Casey during the reauthorization of the Older Americans Act in 2006, needs to be continued.

Ending ageism will maximize the capacity to work longer, and yield greater economic and health outcomes for individuals, families, and society. Passing POWADA is an important first step. Other solutions need to be developed, implemented, evaluated, and scaled.

Civic Engagement

Volunteering is a hidden jewel – many studies reveal high intensity volunteering yields economic and health benefits for individuals and society (Morrow-Howell, 2010; Gonzales & Nowell, 2015). Social policies that encourage more civic engagement are poised to optimize economic, health, and social outcomes for both older adults and younger generations.

Volunteering often serves as the catalyst for retirees to return to paid-work. Research shows it improves health and increases weak social contacts that can lead to employment referrals among retirees ([Gonzales & Nowell, 2015](#)). High-intensity volunteers, that is, older volunteers who commit more than 200 hours per year, have higher odds of returning to work after retirement than non-volunteers and low-intensity volunteers (Gonzales & Nowell, 2015).

Volunteering a minimum of 200 hours per year in later life has tremendous cognitive, physical, socioemotional health benefits (Carlson, et al., 2009; Kim, Halvorsen, & Han, *in press*; Konrath, et al., 2012; Morrow-Howell, 2010; Morrow-Howell, Lee, et al., 2014). This is especially true for volunteer roles that are complex, novel, and with sufficient organizational supports to ensure these outcomes (Morrow-Howell, 2010).

Moreover, when social policies bring older and younger generations together, there are often win-win outcomes ([Generations United, 2021](#)). The good news is that younger and older

generations want to work together on critical issues, such as education achievement, mental health, environment and climate change, and housing ([Encore.org, 2022](#)). There is a strong knowledge base to inform intergenerational interventions with theory and evaluation (Jarrott & Lee, 2022; Jarrott et al., 2021; Jarrott, Scrivano, Park, & Mendoza, 2021; Jarrott, Turner, et al., 2021).

To give an example, [AARP Experience Corps](#) is a national tutoring and mentoring program. Older adults, many of whom are racial and ethnic minorities, undergo training to tutor 2nd and 3rd graders on reading and math. These children are at risk of not gaining these essential academic skills, often living in under-resourced neighborhoods, and subsequently less likely to graduate from high school and attend college. [Rigorous evaluations](#) revealed children's academic performance and socioemotional health improved. And older tutors experienced cognitive plasticity; reduction in falls, social isolation and depression; and increase purpose-in-life. Stipends offset the costs associated with volunteering (e.g., travel, meals) and yielded greater health benefits among low-income older volunteers (McBride et al., 2010). Further, tutors took their training home, tutoring their grandchildren and grandchildren's friends in the neighborhood.

Implications for social policy are clear: Investments in civic engagement opportunities for older adults with younger generations is a triple win: 1) older volunteers' health and social wellbeing are improved, 2) younger generations benefit as well, and 3) volunteering builds the capacity for older adults to return to the paid workforce.

We must expand AmeriCorps National and AmeriCorps Seniors' intergenerational programming. To expand opportunities for older and younger people to serve side by side, maximize benefits for older adults and younger generations, and provide clear pathways for older adults to volunteer and gain employment. Generations working together on critical issues will likely be far more successful than when generations work alone ([Coons, 2022](#); [Weissbourd & Murphy, 2023](#)) and national demonstration projects are necessary, such as Generations Serving Together. We must also increase opportunities for older veterans and low-income older adults via Title V of the Older Americans Act and the Senior Community Service Employment Program, respectively.

Informal Caregiving

Older adults are often providing care to a spouse/partner, adult child, and/or grandchildren and sometimes great grandchildren. Grandfamilies, families where children reside with and are being raised by grandparents, other relatives or close family friends, are becoming more common and will likely continue to grow in size and diversity ([Generations United, May 2022](#); [Johfre, 2022](#)).

From my research with the Health and Retirement Study, a nationally representative sample of older adults 50+ in the United States, I discovered that older adults who provide care to an adult child and/or grandchild (or great grandchild) are likely to return to work after a period of retirement ([Gonzales, 2023](#)). U.S. Census Bureau (American Community Survey) shows that 56% of grandparents responsible for grandchildren are in the workforce ([Generations United, 2022, p. 28](#)).

In some cases, caregivers in grandfamilies who were working before the children came into their care have to quit work to care for the children because they cannot find child care and/or the children have significant medical or mental or behavioral health challenges due to trauma experienced before entering their care. In other cases, grandfamily caregivers have to go back to work because they do not have adequate income to provide for children they were not expecting to care for.

Providing care to a spouse/partner who has difficulty with activities of daily living (ADLs, e.g., bathing, dressing, eating, moving from bed to chair, going to the toilet) and/or instrumental activities of daily living (IADLs, e.g., preparing meals, shopping for groceries, making telephone calls, assisting with medications) poses a significant barrier to returning to work after retirement (Gonzales, Lee, & Brown, 2015). Others have come to similar findings (Bradley et al., 2023).

More longitudinal research is needed in this area to disentangle variation by gender, race, ethnicity, age cohort, and socioeconomic status. However, it is likely that flexible work arrangements, child care, and access to Employee Assistance Programs, can provide support to unpaid caregivers which will bolster their opportunity to stay employed longer, retire later, and/or return to work after retirement.

Conclusion

Policies that support productive activities in later life are a logical response to the demands of an aging population and will likely promote economic well-being for individuals, their families, and society. Barriers, such as age discrimination, should be squarely confronted with POWADA, and innovations are needed in the private and civic sectors to end ageism across the micro to macro continuum. Volunteering, especially when designed to promote the inclusion of multiple generations, can promote health, social, and economic well-being. Finally, informal caregiving can sometimes trigger people to work longer or, conversely, take early retirement and remain out of the labor force. Flexible work options, remuneration for caregiving, and leveraging formal care services will likely enable caregivers to work longer.

Living a long, healthy, and meaningful life with a solid economic foundation and strong social bonds with family, friends, and society, requires us to reimagine social policies within a context of living 100 years (*please see* another report by [National Academies of Sciences, 2022, entitled “Global Roadmap for Healthy Longevity”](#)). Because of our own ageist mindsets, we often envision the aging process with words that start with D: dependency, decline, disability, dementia, and national deficits. We should be critical of our assumptions about aging and adopt a strength-based perspective.

Seeing *longevity as an asset* has the potential to change everything, beginning with how we think about life stages. The 20th century human capital model, where the first two and three decades of life are dedicated for education, followed by many decades of work, and then decades for a

retirement, is outdated. This “education-work-retirement model” clearly excludes important roles such as caregiving, civic duty, and leisure throughout life. It closes options for later-life education, retraining and employment. And it feeds ageist notions. We must reimagine a life-model that balances education, work, retirement, caregiving, civic engagement, and leisure fluidly across 100 years of life.

A cautionary note: Productive activities can result in deleterious health outcomes when the demands of work, volunteering, and caregiving overwhelm the capacity of the individual – which explains the importance of social policies and organizational facilitators (e.g., training, supervision, mentorship, acknowledgement, stipends when appropriate) to bolster resilience (Carolan et al., 2020; Gonzales et al., 2019; Morrow-Howell, et al., 2001). A ‘person-in-environment perspective’ is one global framework to inform social policies and practices that create capacity and resilience within the individual and organizations (National Academies of Sciences, 2022). Forcing individuals to be productively engaged in later life can result in worse health and economic outcomes. Guiding principles should include choice (v. constraints), inclusion (v. elitism), anti-ageism/anti-racism/anti-sexism (v. oppressive norms), intergenerational cohesion (v. intergenerational conflict), and opportunity (v. obligation); Morrow-Howell et al., 2001; Gonzales et al., 2023).

We need more research that examines the diversity of individuals within the United States to ensure everyone has opportunities to build resources to be productively engaged. The research on productive aging and health, economic, and social outcomes has grown in volume, rigor, and scope. However, most of the data have been based on socially and economically advantaged workers, because they are more likely to work longer (National Academies of Sciences, 2022). Even when data exists to examine heterogeneity by race, ethnicity, nativity, gender, socioeconomic status, and sexual and gender identification, few research teams unpack this diversity (Gonzales, Whetung, & Kruchten, 2022, National Academies of Sciences, 2022). As a result, we have limited knowledge to inform interventions within workplaces and civic enterprises. For example, some believe that complex work environments can bolster cognitive reserve and delay the onset and severity of dementia. But the extant research is quite mixed: some research supports this hypothesis among white men, but not women, nor racial and ethnic minorities (Gonzales, Whetung, & Kruchten, 2022). Clearly more research is necessary to ensure complex work environments benefit everyone. We need more research that examines the diversity of individuals within the United States to ensure everyone has opportunities and choices to be productively engaged.

The 21st century is challenging us to ensure everyone has opportunities for economic well-being, health, and meaningful social connections. Continued work and volunteering often result in these outcomes but we must design social policies and programs that are inclusive and strike a balance between work, volunteering, caregiving, education, and leisure. We must also end ageism and all forms of bias. A multi-pronged approach, spanning the macro to micro continuum, offers ideas on how to do so.

Passing POWADA is an important first step. Thank you for the opportunity to provide oral and written testimony. I welcome further conversations with you and Senate staff members.

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