

Policy Recommendations for Meeting the Grand Challenge to Advance Long, Healthy, and Productive Lives

We are living longer than we have ever lived in the history of humankind. Although the coronavirus has impacted life expectancy, scientists predict continued increases in life expectancy throughout the 21st century (Prevent Epidemics, 2020). Older adults possess an incredible amount of experience, skills, and strong desires to make significant contributions to society often through work, caregiving, and volunteering. Yet barriers such as ageism and age discrimination, a lack of support for those who provide care, and limited access to volunteer opportunities all suppress the ability to be meaningfully engaged in society. We review these issues below and offer some policy recommendations to support older adults who work, care, and volunteer.

Recommendation 1

End Ageism and Age Discrimination

Ageism and age discrimination reduces opportunities to work and thrive within the workplace; compromises mental, physical, and overall health; and increases the risk for economic insecurity (Chang et al., 2020; Gonzales, Lee, & Marchiondo, 2019; Marchiondo et al., 2015; North & Fiske, 2013). Age discrimination in the workplace is costly. One study estimates the loss of productivity, forced retirement, and longer periods of unemployment among older adults to cost the U.S. approximately \$850 billion (AARP, 2020a). Ageism is estimated to cost another \$63 billion due to complications with health (Levy et al., 2020). Older adults with lower levels of education, as well as older racial and ethnic minorities, women, and sexual and gender minorities, experience higher rates of ageism and age discrimination in the world of work (Chang et al., 2020). Nearly all individuals experience age discrimination within the workplace (Marchiondo et al., 2015): Emerging and young adults, ages 18 to 30, as well as older adults (50+ years of age) reported similar rates of hostility and incivility within the workplace because of their age.

To counter these economic and health outcomes, we encourage the adoption of bipartisan bills in Congress, as well as the expansion of the Age Discrimination in Employment Act (ADEA) to all individuals, regardless of age. Specifically:

Policy Recommendation: Pass POWADA. The Protecting Older Workers Against Discrimination Act will reinstate Congress's original intent for age to be a factor in an age discrimination claim, as opposed to the primary factor. It can significantly bolster legal protection from age discrimination within the workplace and it currently has bipartisan support.

Policy Recommendation: Expand ADEA. A few states protect individuals of all ages from age discrimination in employment. Emerging evidence suggests it is important to expand Age Discrimination in Employment Act (ADEA) to protect all workers—including those under the age of 40.

Policy Recommendation: Pass Inclusive Policies. The Fair Employment Protection Act aims to protect individuals from hostile work environments. The evidence reviewed above offers compelling reasons for legislators to cosponsor this legislation because it will protect individuals on multiple sociodemographic characteristics, including but not limited to age, race, ethnicity, gender, gender and sexual identities, and disability from covert and subtle discrimination.

Recommendation 2

Strengthen Job Training Programs for Low-Income Older Adults through Rigorous Research and Outcomes Assessments

Individuals with low levels of education and income, who have chronic health conditions, Veterans and their partners, homeless or individuals at risk of being homeless, and rural residents are at great risk for unemployment and forced retirement. The Senior Community Service Employment Program (SCSEP) is a longstanding federal program administered by the Department of Labor and authorized by the Older Americans Act that is specifically designed to improve the employability of low-income older adults with a special emphasis on these populations. Participants encounter a number of barriers at the individual, social, and structural levels (Carolan et al., 2018; Halvorsen et al., 2020).

Although there are ongoing debates about SCSEP's effectiveness relating to job outcomes, participants report improvements in cognitive performance, mental and emotional health, physical health, and overall health (Carolan et al., 2018; Gonzales, 2019; Mikelson, 2017;

National Council on Aging, 2001). They also report learning about and gaining access to other important social safety net benefits, such as Supplemental Nutrition Assistance Program (SNAP) and housing benefits (Gonzales, Lee, & Harootyan, 2019; Halvorsen et al., 2020, Halvorsen & Yulikova, 2020). A cost-benefit analysis suggests it is cost effective (Mikelson, 2017). Yet, the Trump Administration classified the program as ineffective. To date, much of the evaluation data are cross-sectional convenience samples with basic statistical and qualitative methods. And the efficacy and efficiency of this program are in question.

Policy Recommendation: Invest in Rigorous Research to Guide Policy and Practice. Longitudinal research is needed to discern causal effects between individual, social, and structural level barriers on re-employment and effects on physical and mental health. Research that specifically identifies which components of the intervention maximize efficacy and efficiency are most desirable. Results can then help inform which aspects of the program maximizes the Department of Labor performance measures as well as participant's personal and professional goals.

Policy Recommendation: Expand performance measures to include health and well-being outcomes. It is important to understand how SCSEP influences the health and well-being of its older participants. Performance measures used by the Department of Labor are focused on job outcomes, including mean hourly earnings and the percentage of participants who secure unsubsidized employment after exiting the program. Yet this program trains older adults who face multiple barriers to employment, including health barriers. Data should track health and mental health, social engagement, housing and nutrition, and poverty outcomes. Results will give a broader picture of SCSEP's influence on participant well-being.

Recommendation 3

Provide Financial Support to Caregivers

The United States is the only developed country without paid sick and family leave for all workers. Although family caregiving is the backbone of this country's long-term care system and saves our nation billions of dollars annually (e.g., the estimated economic value of informal caregiving was \$470 billion in 2017; AARP, 2020b), it imposes health and economic costs on informal caregivers and families. Older caregivers, especially women, jeopardize their own economic security by missing employment opportunities and incurring out-of-pocket expenses. Currently, the Family

and Medical Leave Act provides unpaid leave and excludes many from access to leave. In particular, many working women, low-wage workers, and employees with low levels of education are not covered by the act (Chen et al., 2016). Caregivers are further penalized when they need to withdraw from the workforce to fulfill caregiving duties. Social Security calculations are based on history of employment income and employment history records include zero income for these caregiving years. Participant-directed care, represented by the Cash and Counseling program, enables Medicaid clients to pay caregivers of their choice, and family members (excluding spouses) are eligible for this employment. However, the current reach of participant-directed care programs is minimal (Mahoney et al. 2014). Overall, current policies perpetuate health and economic inequities, particularly for women, racial and ethnic minorities, and people with low levels of education (Gonzales, Lee & Brown, 2015; Feinberg, 2014).

Several policy changes follow from this recommendation:

Policy Recommendation: Expand family and medical leave so that it is paid and accessible to all employees. Passage of the <u>FAMILY Act of 2020</u> could achieve these goals. Similarly, municipal policymakers can replicate the San Francisco Paid Sick Leave Ordinance in their own cities (San Francisco Admin. Code, 2006).

Policy Recommendation: Pass the Social Security
Caregiver Credit Act. This law would enable caregivers to count their caregiving toward their employment history and not be penalized for being out of the formal workforce. A specific formula would be used to assign a paid wage to Social Security work history records during each month in which a caregiver provided at least 80 hours of assistance without financial compensation. This initiative would ensure that caregivers do not jeopardize their future Social Security income if they are not in the formal workforce due to family caregiving responsibilities.

Policy Recommendation: Expand the Cash and Counseling Program to cover all low-income caregivers. The expansion could reduce the financial stress of caregiving.

Recommendation 4

Expand the Corporation for National and Community Service's Support for Engaging Older Adults

Volunteering yields many health and economic benefits to older adults as well as to the communities and organizations they serve. Unfortunately, the rate at which older adults volunteer is lower than the rate for any other age group. Volunteering rates are also lower among older racial or ethnic minorities, older people with less education, and older adults in poor health (Morrow-Howell & Greenfield, 2016; Tan, et al., 2016).

Many policies and programs facilitate volunteering by older adults. For example, the Corporation for National and Community Service supports volunteering in later life through AmeriCorps Senior programs. The Retired and Senior Volunteer Program, or RSVP, supports local communities in providing clearinghouse functions to match older adults with volunteer opportunities. Via Foster Grandparents and Senior Companion, lowincome older adults can receive a stipend and commit time to serving children or older adults who need assistance. The Serve America Act of 2009 charged AmeriCorps with expanding the number of older AmeriCorps members and allows the transfer of education stipends from older members to younger individuals in the same family.

Several possibilities follow from this recommendation:

Policy Recommendation: Support Rigorous Research.

Experimental or quasi-experimental research can document how these programs affect the health, social, and economic conditions of older adults as well as the people served by those programs. Such research can underscore for policymakers and funders the importance of older adults in society.

Policy Recommendation: Expand Eligibility for Stipends.

All of these programs can be expanded and promoted as the number of older adults grows. By raising the income limits that restrict access to stipends and by expanding flexibility in contractual arrangements, policymakers could increase participation.

Policy Recommendation: Promote a Culture of Intergenerational Civic Engagement. National service could be normalized as a natural step in the retirement process—an "encore" year of service (Sagawa & Bridgeland, 2016). This could be facilitated by the development of formal arrangements that guide the transition from employment to participation in these programs between work and retirement. Intergenerational service, which engages both older and younger people in national and community service, can also forge new bonds between generations.

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