

Meeting the Grand Challenge to **Advance Long and Productive Lives**

Policy Recommendations

- End ageism and age discrimination.
- Strengthen job training programs for low-income older adults through rigorous research and outcomes assessments.
- Provide financial support to caregivers.
- Expand AmeriCorps' programs that engage older adults in national and community service.

Issue

Older adults possess a vast amount of experience, skills, and strong desires to make significant contributions to society 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 living a long healthy life, with a solid economic foundation and within communities.

Policy Recommendations

1. End ageism and age discrimination.

Ageism and age discrimination reduce opportunities to work; compromise mental, physical, and overall health; and increase the risk for economic insecurity (Chang et al., 2020; Gonzales, Lee, & Marchiondo, 2021; Marchiondo et al., 2015; Morrow-Howell & Gonzales, 2023). Age discrimination in the workplace is costly. One study estimates the loss of productivity, forced retirement, and longer periods of unemployment among older adults cost the U.S. approximately \$850 billion annually (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 workplace (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 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 Recommendations:

- *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 being the primary factor. This change can significantly bolster legal protection from age discrimination within the workplace, and it currently has bipartisan support.
- *Expand ADEA.* A few states protect individuals of all ages from age discrimination in employment. Emerging evidence suggests it is important to expand the federal Age Discrimination in Employment Act (ADEA) to protect all workers—including those under the age of 40.
- *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 co-sponsor 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.

2. Strengthen job training programs for low-income older adults through rigorous research and outcomes assessments.

Older 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., 2023).

SCSEP has been described by participants as a “lifeline” (Gonzales, Lee, & Harootyan, 2020). Participants self-report improvements in cognitive performance, mental and emotional health, physical health, and overall health (Carolan et al., 2018; Gonzales,

2020; Mikelson, 2017; National Council on Aging, 2001). They also report learning about and gaining access to other important financial, social, and educational supports, such as Supplemental Nutrition Assistance Program (SNAP) and housing benefits (Gonzales, Lee, & Harootyan, 2019; Halvorsen et al., 2023, Halvorsen & Yulikova, 2020); they share these benefits with family, friends, and acquaintances, extending the program's impact into their communities (Halvorsen et al., 2023). A cost-benefit analysis suggests that the program is cost effective (Mikelson, 2017).

To date, much of the evaluation data are cross-sectional convenience samples with basic statistical and qualitative methods, which brings the efficacy and efficiency of this program into question. More rigorous research is needed to determine causal associations between work and health.

Policy Recommendations:

- *Invest in rigorous research to guide policy and practice.* The Department of Labor, the National Institute for Occupational Safety and Health, and the National Institute on Aging, along with foundations, should invest in longitudinal research to discern causal effects between individual, social, and structural level barriers to re-employment and their effects on financial, physical, and mental health. Research that specifically identifies which components of the SCSEP training maximize efficacy and efficiency are most desirable. Results can help inform which aspects of SCSEP maximize the Department of Labor performance measures as well as participant's personal and professional goals.
- *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 disability, limited English proficiency, and risk of homelessness. SCSEP should track and make readily available to researchers health and mental health, social engagement, housing and nutrition, and poverty outcomes as part of its assessment of programming. Results will give a broader picture of SCSEP's influence on participant well-being.

3. Provide financial support to family or informal caregivers.

The United States is the only developed country without paid medical 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 only federal policy focused on job-protected leave for caregivers is the Family and the Medical Leave Act, which mandates provision of unpaid leave and excludes many from access to that 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). In recent years, momentum toward a federal paid leave benefit has been building; as of January 2024, 13 states and the District of Columbia now mandate paid leave for most workers, and most of these paid leave programs cover leave for caregiving (Bipartisan Policy Center, 2024). However, there are significant differences in these programs, including in what types of relationships are covered, with some programs restricting access to those who are caring for a parent or spouse, while others define caregiving relationships more broadly (A Better Balance, 2024). Even with the recent expansion in the number of states with paid leave programs, a significant number of caregivers across the U.S. still lack access to the income stability and job protections offered by these programs (Greenfield & Cole, 2019).

When paid leave is not available, or when the intensity of caregiving responsibilities means that 12 weeks of leave is inadequate, caregivers may need to take time away from the workforce to fulfill caregiving duties, and this choice often comes with significant financial penalties (Greenfield, Hasche, Bell, & Johnson, 2018). Social Security calculations are based on history of employment income and employment history records include zero income for these caregiving years.

Self-directed care, particularly through Cash and Counseling programs, enables Medicaid clients to pay caregivers of their choice; family members are eligible for this employment, though most states exclude spouses (American Council on Aging, 2024). There is also wide variation in how much the family member can be paid for their caregiving services, and with wage minimums ranging from \$9-\$15 across the programs, many caregivers are still unable to earn a living wage for this work (National Governors Association, 2022). Overall, current policies perpetuate health and economic inequities, particularly for women, racial and ethnic minorities, and people with low levels of education (Greenfield, Hasche, Bell, & Johnson, 2018; Gonzales, Lee & Brown, 2015; Feinberg, 2014).

Recognizing the persistent and pervasive economic challenges faced by family caregivers, Congress initiated two study processes to identify specific areas for policy intervention, culminating in a 2022 report, the 2022 National Strategy to Support Family Caregivers (Administration for Community Living, 2022).

Several specific policy changes are needed urgently to address these financial realities for families:

- *Expand Access to Paid Leave.* Expand family and medical leave so that it is paid, job-protected, and accessible to all employees in all states. Passage of the federal [FAMILY Act](#) could achieve these goals while also ensuring that benefits are uniform across employers and jurisdictions (Shabo, 2023). Short of federal action, states and municipal jurisdictions can continue to build on recent gains by adopting the types of nearly universal programs implemented recently in states such as [Colorado](#) and [Oregon](#), and cities such as [Chicago](#).
- *Pass the Social Security Caregiver Act.* The [Social Security Caregiver Credit Act](#) 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.
- *Expand Access to Cash and Counseling.* Expand the Cash and Counseling Program to cover all low- and middle-income caregivers, not just caregivers for people who receive home- and community-based services through Medicaid. A majority of older adults in need of informal care are insured through Medicare and not Medicaid, and those who need to reduce work hours or leave the workforce face significant financial insecurity as a result. The expansion of Cash and Counseling could help reduce the economic shocks associated with caregiving.
- *Support Rigorous Research.* Fund research to better understand whether current paid leave programs in the U.S. meet the needs of caregivers for older adults. Current research on paid leave focuses largely on benefits for new parents, with less evidence available about whether paid leave adequately addresses the economic impacts of caregiving for adults with chronic or long-term illnesses. While Social Security caregiver credits and expanded Cash and Counseling programs may help, a stronger evidence base is needed to understand how policies can bolster

economic security and retirement preparation among caregivers.

4. Expand AmeriCorps' programs that engage older adults in national and community service.

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, low- income 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.

The following recommendations could enhance volunteer opportunities for older adults :

- *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.
- *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.
- *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. We suggest that age-segregation undergirds our

national service programs in the very way the programs are conceived and funded (Nichols & Freedman, 2024). It is time to fundamentally revamp these programs to move toward age-integration.

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About the Grand Challenges for Social Work

The Grand Challenges for Social Work was launched by the American Academy of Social Work & Social Welfare in 2016 to harness the ingenuity, expertise, dedication, and creativity of individuals and organizations within the field of social work and beyond to champion “social progress powered by science.” Additional information on the Grand Challenges may be found at GrandChallengesforSocialWork.org.

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