

Chapter 2

Gender, Transitions and Turning Points: The Life Course and Older Workers' Trajectories in Different US Occupations



Áine Ní Léime and Debra Street

Introduction

This chapter interrogates the view that issues of demographic ageing and increased pension costs can be addressed by a benevolent or at least an unproblematic set of policies to extend working lives. Instead, it problematises extending working life, given that gender and health implications vary widely for workers in different occupations and for women and men approaching retirement. Adopting a life course approach to analysis, this work draws on data from 37 intensive interviews with 17 men and 20 women in different occupations in the United States (conducted in 2015–16). Research participants worked either as teachers (ten men and ten women) or in more physically demanding paid care-giving (ten women) or janitorial (seven men) jobs. They gave accounts of their work-life histories, starting with their earliest employment, and discussed their current situation, future plans and their attitudes to working past the traditional retirement age of 65.

The earliest formulations of the guiding principles of extending working life (EWL) (see, for example OECD, 2006) were presented as a suite of benevolent policy measures that offered more choice, control, and flexibility to workers approaching retirement – giving older workers an option to work longer by removing mandatory retirement age. However recent studies that explore gender and occupational differences challenge whether EWL policies are benign or neutral. This chapter contributes to the debate by discussing evidence which highlights the influences of employment precarity, physically demanding work and the demands of gendered unpaid caregiving on workers' ability and need to work later. The life

Á. Ní Léime (✉)

Irish Centre for Social Gerontology, National University of Ireland, Galway, Ireland

e-mail: aine.nileime@nuigalway.ie

D. Street

State University of New York at Buffalo, Buffalo, NY, USA

© The Author(s) 2023

N. Burnay et al. (eds.), *Older Workers and Labour Market Exclusion Processes*,

Life Course Research and Social Policies 14,

https://doi.org/10.1007/978-3-031-11272-0_2

course approach used for the analysis highlights the intersections among these components of working life trajectories.

In fact, analysis of various strands of work-life trajectories – the interplay between work, family and health – reveals that individuals are nudged into particular kinds of employment from an early age and that the interplay between work, family and health foreclose some choices at later ages. Further, the initial advantage or disadvantage in occupational status accumulates across the life course (Dannefer, 2003). For example, previous research shows that physically demanding work adversely affects the health of workers earlier than sedentary work (Marmot & Bell, 2010; Edge et al., 2017). Gender norms related to the provision of care typically disrupts the careers of women more than men, lowering women’s pension entitlement and amplifying the financial pressure to work longer. Such non-random processes, combined with pension reforms and the increasingly precarious nature of some types of employment can lead to extremely disadvantaged financial and health outcomes for some workers, notably for women and for workers in physically demanding occupations. The implications of the findings for policy are discussed.

Policy Context in the United States

In the United States, 16.8% of the population was aged 65 and over in 2020 (CIA, 2020). Policies designed to extend working life (EWL) were introduced relatively early compared to many other countries. Mandatory retirement age for all but a few professions (such as firefighting, police, pilots) was abolished decades ago and the ‘normal retirement age’ for entitlement to Social Security benefits has gradually increased from 65, currently set at age 67 for those born after 1960. Workers can gain a sizeable increment to Social Security pensions by waiting until age 70 to claim benefits, despite the normal retirement age of 67 (Street & Tompkins, 2017). Privatisation of occupational pensions has been strongly promoted in the United States since the early 1980s (Russell, 2014). Workers are encouraged to contribute to individualized defined contribution retirement savings plans, such as 401(k) plans, named after the section in the U.S. tax code that specifies preferential tax benefits. Tax deductions for retirement savings plans are of greater value to more highly taxed workers. The combination of such public and private schemes links the value of pensions closely to lifetime wages, hours worked, and uninterrupted participation in full time paid work. That, in turn, systematically disadvantages women who more frequently than men have work interruptions to provide care to dependent family members and who often earn too little to have a surplus to contribute consistently to private pensions (Ginn et al., 2001; Ní Léime et al., 2020). Circumstances for women are further complicated by a persistent gender pay gap: women, on average, make only \$0.81 for every dollar a man earns in the United States in 2020, diminishing the size of women’s potential contributions to private pensions (Payscale, 2020). On average, the combination of shorter careers, fewer hours, and lower earnings creates an even larger gender pension gap, with U.S. women

pensioners receiving about 35% less, on average, than men (OECD, 2019). Pay gaps in employment are even more pronounced for African American men and women relative to white men (Payscale, 2020), due to minority workers' horizontal segregation in low-paid occupations and vertical segregation on the middle and lower part of organisational hierarchies. The United States also has some of the most stringent disability insurance qualifications in the world, making this route for older workers pre-retirement more difficult to attain (Vallas & Fremstad, 2015).

There is no statutory paid maternity or paternity leave in the United States, although some individual employers and states do provide maternity leave. The Family and Medical Leave Act provides for 12 weeks maternity leave nationwide for workers in large organisations, although the leave need not be paid. Although there are no pension credits for time spent caring for family in the US, by counting only 35 years contributions towards Social Security pension entitlement there is some allowance for time spent in unpaid caring (Street, 2020). Because of lower wages and lifetime earnings, more women than men in the U.S. are totally dependent on public Social Security pensions for their retirement income. Older African American women are even more likely than white women to be fully dependent on Social Security because of their lower earnings (Harrington Meyer, 2013; Payscale, 2020). Such existing patterns of work/life circumstances and pension arrangements mean that women, particularly those with caring responsibilities and low-paid jobs with few employee benefits are likely to be further disadvantaged by EWL policies (Ní Léime & Street, 2016, 2019). Like their low-paid women counterparts, low-paid men are also unlikely to earn enough to contribute to private pensions (401ks). So while women disproportionately experience part time work and shorter careers due to greater unpaid care responsibilities, older men in physically demanding jobs with low wages are also disadvantaged by the expectation to work longer. In order to explicate the particular risks of extended working life policies for women and men in different occupations, data from interviews with paid caregivers, janitors, and teachers are analysed.

Paid Caregivers

Home health aides and personal care aides are the paid caregivers considered in this research, part of a large and rapidly growing employment sector of 3.4 million workers. The paid caregiver occupational category is expanding at 34% annually. This occupational growth is due, in part to the relatively high growth rate of 4% in overall U.S. employment, but much of the growth is, due in part to the demands associated with population ageing. The median pay for such paid caregivers is \$14.15 per hour (\$29430 in 2021 per year) and typical entry level education is a high school diploma or equivalent and short-term, on-the-job training (Bureau of Labor Statistics, 2021a). State governments have promoted the expansion of less expensive community-based care that such paid caregivers provide (Folbre, 2012; Stacey, 2011). U.S. home health aides typically have low pay, and many have

short-term or no employment contracts (Folbre, 2012; Stacey, 2011; Stacey & Ayers, 2015). Paid caregiving is physically demanding and often involves lifting clients and moving them from a bed to transport or to a restroom, creating risks of musculoskeletal injuries (McCaughey et al., 2012; Stacey, 2011). Not only is the nature of the work itself demanding, but employers pay for only a minimum amount of time spent with clients. This makes it difficult for the paid caregivers to have time to complete their tasks or to spend time conversing with clients, something that most carers (and clients) consider to be a natural part of caring (Duffy et al., 2015; Stacey, 2011).

Janitors

Janitors and building cleaners held about 2.4 million jobs in the U.S. in 2019 and the employment growth rate of the sector is average. Janitors earn a median wage of \$14.31 per hour or \$29760 per year (Bureau of Labor Statistics, 2021b). Most janitors (67.6%) are male. There is no formal education requirement and usually only short on-the-job training. Janitors are employed across a range of institutional sites including schools, hotels, hospitals and industries. They carry out tasks that include cleaning walls and windows, mopping floors, removing rubbish and cleaning restrooms. Occupational injury is high among janitors – particularly elbow, knee and wrist injuries and cardiovascular conditions (Green et al., 2019). Janitors often have yearly contracts and many are unionized.

Teachers

There are approximately 2.7 million people teaching in U.S. elementary and high schools. Teaching is often unionised and it is usually well-paid, with a median wage of \$61,350 per year for elementary school teachers and \$61,820 per year for high school teachers. Teaching offers job security for most, especially those who work in public schools (Bureau of Labor Statistics, 2021c, d). Although teaching is not physically demanding in the same ways as for paid caregivers or janitors, it does require physical stamina, particularly when teaching young children. Moreover, it is widely recognized that teaching is psychologically demanding and stressful (Zhang et al., 2019; Hyun-Joo et al., 2021). The usual entry level qualification for teaching is a Bachelor's degree. Teachers in U.S. public schools typically belong to an occupational pension system. For the women and men interviewed for this research, the State Teachers Retirement System (STRS) incentivises teachers to retire after 30 years of service, which for most is at around age 55. The replacement rate of prior earnings for teachers' pensions was traditionally very high – up to 90% – although the replacement rates have declined somewhat in recent years. Public school teachers who stay long-term in a particular school district maximise pay and

benefits by working for a single employer. Teachers in private or charter schools do not have the same kind of long-term job security that tenure provides and have lower pensions than those employed in the public school system. With no mandatory retirement age in the United States, teachers may continue to work after age 65 if they wish to.

Individuals interviewed for this research worked in occupations with different key characteristics associated with the practicality and possibility of extending working life. Not only did rates of pay and employee benefits differ across employment sectors, but the relative security or precarity of jobs varied, too. Additionally, the physical demands of employment and the ability to continue working given different health statuses at older ages also differed among paid caregivers, janitors, and teachers.

Precarious Employment

Precarious employment is generally agreed to have the following characteristics: lack of job security, part-time or seasonal in nature; having a zero hours' contract, having few or no benefits (Standing, 2011; Vosko, 2008). Prior research demonstrates that many paid caregivers are in precarious employment and often have little control over their hours of work (Folbre, 2012; Zeytmoglu et al., 2009). Assignments may be episodic and part time, meaning many paid caregivers cannot rely on a regular income sufficient to meet current needs (Stacey, 2011), and by extension, may be unable to contribute to private pensions and need to rely more heavily on Social Security in retirement.

Older workers in precarious employment, and especially women, often find it difficult to find replacement employment if sufficient hours or jobs become unavailable, due to age-related discrimination in recruitment (Neumark et al., 2015). Difficulties finding employment can be exacerbated by work-related or other poor health. Some studies suggest that employment precarity contributes to a higher risk of poor mental/physical health (Burgard et al., 2007; László et al., 2010). The disadvantage of employment precarity happens in a broader context of insecurity. A recent article by Lain et al. (2019) highlights the risks of ontological precarity which links household precarity, family precarity and welfare state precarity, which are mutually reinforcing. This suggests that, on one hand, the capacity to extend working life for individuals confronted with multiple precarities is very problematic due to the intersecting challenges created by uncertainty and insecurity arising from family, employment, and policy circumstances. On the other hand, continued employment is financially necessary for those same workers, whose employment precarity means they cannot afford to save or pay into private pensions.

Physically Demanding Work

Workers engaged in physically demanding and repetitive physical work tend to develop certain chronic work-related illnesses earlier than workers in less physically demanding occupations, and they are also more likely to have to exit work through disability (Marmot & Bell, 2010; Edge et al., 2017). For example, janitors are more likely to develop musculoskeletal and vascular conditions (Green et al., 2019) associated with the demands of their jobs. Paid caregivers are also likely to develop repetitive strain injuries to hips, knees and backs, work-related injuries associated with lifting/moving clients to whom they provide care (Stacey, 2011).

As mentioned in the introduction, influencers often present extended working life as an unproblematic or benign approach to address the challenges posed by population ageing and increased pension costs. We argue that uncritical stance overlooks the realities imposed by the lived experiences of women and men in different employment situations and family caring norms. To assess the likely effects of extended working life policies on the real world experiences of older workers, a life course perspective provides a critical lens for analysis.

Life Course Perspective on Extended Working Life

A life course perspective offers a useful framework to analyse extended working life for men and women in different occupations by focusing on transitions and turning points in workers' lives. Transitions may include, for example, leaving school, starting work, assuming unpaid caring roles and transitioning to retirement. Turning points may include becoming parents, the onset of ill-health for workers or their family members, returning to education, policy changes, and major economic events such as recessions or financial crises. The approach taken in this chapter is to consider how workers negotiate such transitions and turning points and how this affects their financial and health outcomes as they approach retirement. The analysis draws on the approach of Giele and Elder (1998) who focus on the institutional context (including policy), location in time and place, social norms (including gendered social norms regarding responsibility for unpaid care) and workers' degree of agency (Giele & Elder, 1998). Cumulative disadvantage theory suggests that earlier life disadvantages or advantages tend to be exacerbated over the life course (Dannefer, 2003). In the case of working lives, for example, the initial dis/advantage may be educational or financial in nature, which over time becomes more entrenched. Those amplified dis/advantages persist and may become overlaid by other forms of advantage or disadvantage by the time workers approach the end of their working lives.

Family circumstances of economic distress may compel individuals to leave school with lower levels of education, leading into a succession of low-paid jobs. Such inauspicious starting points may be accompanied by gendered social norms of

caring and family formation that lead to further disadvantage for some. Having access to the narrated work-life history of the research participants provides us with an understanding of how such processes evolve in the lives of the workers. Focusing on paid caregivers provides insights into physically demanding and often precarious employment for women who typically also have to conform to strong norms that impel them to take on unpaid care for family members. The work-life histories of janitors highlight similarly disadvantaged earlier lives that lead to physically demanding and occasionally precarious work trajectories, but typically without the expectation of providing unpaid caring. Finally, most men and women teachers enter their working lives with relative advantage and we can trace through how this initial advantage is reinforced by further education, family formation patterns, pension schemes and unionisation. Using the life course perspective provides insights into the ways policies and practices ameliorate or exacerbate disadvantages in relation to extending working lives.

Methods

The data on which this chapter is based is drawn from interviews with 37 older workers in the United States, part of a larger comparative study of 120 workers in Ireland and the United States. This chapter focuses on the gender and health of older workers approaching retirement, draws on interviews with either teachers (ten men and ten women) or workers in physically demanding jobs such as paid caregivers for older people (ten women) and janitorial services (seven men). The study on which this chapter is based was designed to explore the varying impacts and experiences of extended working life for workers in strenuous and precarious employment, as compared to those in more sedentary and secure employment. Each older worker described their work-life history starting with their earliest employment and discussed their current situation, future plans for work and/or retirement and their thoughts on working past the traditional retirement age of 65. They were asked about their families and caring responsibilities. All interviews were fully transcribed and thematically coded in relation to health, gender and views on extended working life. Each interview was analysed in relation to life course transitions and trajectories.

Profile

Table 2.1 provides a profile of the workers. In general, the paid women caregivers are the most disadvantaged group, having lower education, poorer health, lower incomes and being most likely to need to depend on Social Security for all of their retirement income. The caregivers are the lowest paid of all groups, followed by the janitors having slightly higher levels of pay. The lowest paid teachers (\$60–80k

Table 2.1 Paid caregivers, janitors and teachers

	Paid caregivers (women)	Janitors (men)	Teachers (women)	Teachers (men)
	10	7	10	10
Education	HSD ^a : 7	HSD: 6	B Ed ^b : 1	B. Ed + PGM ^c : 9
(Highest level)	HSD + comm college (3)	HSD + 2 years CC: 1	B Ed + PGM ^a : 9	Undergraduate degree: 1
Married	4	1	8	7
Single	4	2	2	1
Divorced	2	4	0	2
Annual income	<\$20k: 5	\$0–20k: 4	\$60–80k: 3	\$60–80: 4
Bracket	\$20–40k: 4	\$20–40k: 3	\$80–100k: 6	\$80–100: 6
	\$40–60k: 1		\$100–120k: 1	
Pensions	SS only: 7	SS only: 7	STRS: 7	STRS: 6
	SS+ Small private pension: 3		STRS+SS: 3	SS + Private: 4
Health	Back/hip/knee: 6	Knee/back: 2	Knees/shoulder: 2	Knees/shoulder: 2
	Generally healthy: 4	Heart: 1 Diabetes: 1 Generally healthy: 3	Generally healthy: 8	Generally healthy: 8
Home ownership	Own: 5 Rent: 5	Rent: 7	Own: 9 Rent: 1	Own: 8 Rent: 2
Ethnicity	AA ^d : 9 Other: 1	AA ^d : 7	WA ^e : 9 AA ^d : 1	WA ^e : 9 AA ^d : 1

^aHigh School Diploma; ^bBachelor of Education; ^cPost Graduate Masters; ^dAA: African American; ^eWA: White American

per annum have higher pay than the highest paid caregivers (\$40–60k). Over half of the caregivers and the janitors are single or divorced, while most of the teachers are married, reinforcing the concept of ontological precarity. Most of the teachers own their homes, while half of paid caregivers and most janitors rent their homes. Most of the janitors and paid caregivers will be totally dependent on Social Security for their retirement income, with only a few having small occupational or private pensions. In contrast, most of the teachers, both male and female, expect to have pensions from the State Teachers Retirement System (a relatively generous occupational pension) in retirement in addition to Social Security benefits, underscoring the accumulation of advantage. Most of the paid caregivers and janitors are African American, while most of the teachers are white. Teachers work in similar environments, although those working in private schools have less generous pensions than public school teachers. Finally, most of the paid caregivers have chronic musculo-skeletal injuries, followed by relatively fewer of the janitors having chronic health complaints, compared to most teachers, who report being healthy.

Transitions and Turning Points: Legacies of Early Adulthood

There were marked differences across the occupational groups in the career aspirations their families had for them at school-leaving stage. Most of the janitors, all of whom were African American, completed high school but were not encouraged to pursue a college education. The highest aspiration for most was to complete high school and get a job to earn money, as recalled by Billy:

I do remember having an ultimatum: “You either gonna go to school or you gon’ go to work, or you’re gonna have to get your own place” (Billy, janitor).

Typically, the young men who became janitors were not encouraged to pursue any particular occupational path:

They didn’t encourage me at all. Just for me to be working and not being in jail or anything, like so many other African–American folks, you know (Chris, janitor).

The quote from Chris reflects challenges faced by many African-American men, in that they entered the labour market without direction. Some of the men in the sample had moved many times during their childhoods, interrupting the continuity of their elementary and high school education, and creating low expectations at the onset of adulthood about education and residential stability.

Neither were most of the paid women caregivers encouraged to pursue higher or further education by their families. Additionally, some of the women left high school early because they became pregnant, resulting in lower educational qualifications. As Andrea explains:

...when I found that I was pregnant, they didn’t allow me to go back to school. You couldn’t in those days, you couldn’t go to school pregnant and if you had a child, you could not go back to school (Andrea, Home Health Aide).

It was difficult for those who became mothers during high school to complete their education. For example, Andrea, who later completed her high school education, was unable to complete a nursing degree (which was her aspiration) due to the difficulty of combining work with childcare as a single parent. Two of the home health aides had nurses in their families who served as role models, but their own education was interrupted when they were required to provide care to family members.

In contrast, most of the teachers, whether men or women, were strongly encouraged/pushed by parents to pursue a college education. For many, parents who had not had the opportunity to go to college themselves wanted that for their children. The quote here from Oliver is typical:

My Dad was a high school dropout, Depression baby ... for all of his kids, he wanted to see them get college diplomas (Oliver, male teacher).

For others, attaining a college education was not merely a personal aspiration, it was a family imperative:

... my parents, neither one of them had ever gone to college. My dad worked in a factory. My mom was a secretary, but that was the thing. They wanted us to go to college and so that was kind of never a question. We were gonna go to college (Drew, male teacher).

Some others noted that a strong tradition of teaching in the family meant that teaching as a career was strongly encouraged – almost a normative activity:

I had my grandfather on my mom's side was a Superintendent of Schools. My grandmother was a teacher. On my Dad's side, I have like a second cousin who was the Superintendent of Schools ... There were teachers left and right, so we were always kind of in a family of where education, that was always a viable option (Edel, U.S. teacher).

However, there were gender differences in at least some of the family's career expectations among the young adults who became teachers. Some women teachers' parents expected them to work for only for a short time before getting married.

In their mind, it really didn't matter what career I had, because I was gonna grow up and be married and then be supported by the husband (Belinda, female teacher).

While some traditional families may have held a strong normative assumption that their young women would teach only until they started their own families, that is not how things turned out since all of the women teachers interviewed were at least in their 50s. Nonetheless, none of the men who became teachers mentioned that their families expected them to work for only a short period until marriage.

Work-Life Trajectories

Janitors

Several janitors reported that they were encouraged to finish high school and then find a job to earn money at school-leaving stage. The highest level of education for most janitors was a High School Diploma, with only one having a few years of college. Four men started their working lives in a series of low paid precarious jobs including kitchen prepping, security work and self-employment in pest control. Another worked in a steel factory that closed down in the late 1970s, leaving him redundant; others who enlisted in the military as young men faced a difficult employment environment on discharge in the early 1980s. For most of the men, their early work years were followed by periods of working either in low-paid work or in better-paid but hazardous work, for example, spot welding or working with toxins in heat treatment plants. Chris described his work life trajectory:

I got to looking at it and the money was great, but you were dealing with all kinds of toxic chemicals and toxic fumes and stuff and I had noticed that some of the guys that would do about 20 to 30 years in that industry, they wouldn't live that long after they retired, so I had to think about that also. It was a very, very dirty job (Chris, Janitor).

For some janitors, earlier periods of work were punctuated by spells of unemployment. Most of the janitors remarked that they were ultimately relieved to find relatively safe and stable, albeit low-paid, janitorial work by their 40s and 50s, with many having at least one-year employment contracts. However, their work trajectories and relatively low pay meant that they could only afford to live in rented accommodation and were unable to contribute to private 401(k) pensions. Many janitors

said they would be faced with having to continue working after age 65 for financial reasons, partly because they came upon stable employment only later in life. Most of the janitors had been in their current jobs for an average of only 5 years. Two of the janitors were exceptions and had been in the same jobs for 20 years and 37 years respectively; their jobs were more secure and relatively well-paid employment compared to most of the other janitors. One who worked in an educational institution had an occupational pension, but most had no access to pension plans through work.

Paid Caregivers

The work-life trajectories of the women caregivers also began with relatively low levels of education and similar to the janitors, many lacked parental encouragement to further or even complete their high school education. Three of the women left high school before graduation. One of these early school leavers, Andrea, later completed her General Education Diploma (GED) and started training to become a nurse. Ultimately, she found it too difficult to juggle nurse training simultaneously with earning a living and raising three children as a single parent:

You know, but me having three kids, working full time and being to school by eight o'clock every morning, I burned out. And for me to say it, that's the saddest thing that I didn't go back (Andrea, U.S. paid caregiver).

The paid caregivers' initial educational disadvantage was often compounded by strong gendered expectations that the women would act as the main unpaid carers for members of their (often extended) families – children and older family members – who needed care. For several of the women, this led to work-life trajectories that involved moving in and out of employment and unpaid care work in the home. For example, Emma had started to study at nursing school, but left to care first for her grandmother and then for her aunt. Providing family care meant she missed out on 4 years of paid work, and more importantly to her prospects of a well-paid career, the chance to acquire qualifications to have the best start of her working life:

My grandmother, but you can say she's my Mom, 'cause she raised me and I took care of her. By the time I decided to go back to college, my aunt fell and broke her hip, which was her sister, so I decided not to go back to school. She was in a nursing home. I went to visit her and she says my name and she says 'Please take me out of here and take care of me'. Well, she helped take care of me, along with my Mom, so I did that until she was 90-some years old (Emma, Paid caregiver).

Several paid caregivers spent years out of employment or in part time or limited hours work due to providing care for their own children, in addition to older family members. The women who worked as paid caregivers had more children and were more likely to be single or divorced than the women who were teachers. Another family/gender related issue that affected one healthcare worker was that she was subject to domestic violence by her partner, who didn't allow her to work for a period of 10 years.

Every time I would get a job, he would get me fired. He stalked me (Flora, Paid caregiver).

As was the case for janitors, the disadvantaged transition to early career employment led most of the current paid caregivers into a series of precarious, low-paid jobs over their working lives – including, for example cleaning, food preparation or other jobs in the service economy. For many of the women who eventually became paid caregivers, both their earlier and their current work was typically even lower-paid and more precarious than that of the janitors. Many caregivers were being paid by the hour, lacked yearly contracts, and did not have guaranteed working hours from week to week.

The level of precarity for caregivers depended on their place of employment. Home help agencies offered the least security, lowest pay and the risk of irregular hours. Those working in nursing homes/hospitals were typically better paid and more secure, with some having paid vacation time. Perhaps the biggest trade-off between the two caregiving sites was the intensity and physicality of the work. Differences in pay and security were linked to other risks. Nursing homes had multiple clients with very high levels of need for assistance that made greater physical demands on the caregivers working in institutions, with higher risks of burnout and injury balanced out against more security and slightly higher pay.

Teachers: Stable Work-Life Trajectories and Secure Employment

By contrast, the trajectories of both women and men teachers were generally characterized by stability, with most teachers having worked for long periods in the same job. The men teachers in the sample had worked in their current job for approximately 20 years on average, while women teachers had spent on average 22 years in their current job. Cynthia is an example of the security of teaching jobs:

This is my 40th year teaching here. I've been at <X middle school> my entire career, and so we only live a mile and a half from here (Cynthia, teacher).

Teachers were more likely to be married than either janitors or healthcare workers and most of the teachers were home owners (see Table 2.1). All of the public school teachers were in the State Teachers Retirement System (STRS), had generous occupational pension plans and employee benefits, and were union members. Most had very secure employment once they were granted tenure in their school district:

Having my father have been a teacher, I know there's more financial security if you have tenure, and that actually worked out very well because only a year after I got my tenure, we had a huge financial crisis in the District and they were laying off a good number of teachers, but because I had been tenured, I actually jumped above teachers who had been hired before me who had never gotten their Master's Degree (Hope, U.S. teacher).

One teacher was temporarily laid off because of a lack of money in his school district, but he has since attained tenure and his experience was exceptional among public school teachers. Teachers in private schools had somewhat less job security as their public counterparts, and were mostly employed on one-year contracts.

Some of the women teachers had either started teaching later or job shared or taken time out of teaching to care for their children. For most, their jobs were secure and they were able to return to the same job. Some women did have fewer years of pension built up compared to men of the same age due to taking time out for child-rearing, but because the teachers' pension scheme paid out in full after 35 years in total, some women were able to work to later ages to compensate for that.

Health

There were major health differences between those engaged in work that is very physically demanding (caregivers and janitors) compared to the teachers whose work is far less physically demanding.

Over half of the male janitors reported work-related injuries. For example, a janitor who acknowledged the toll of long hours of physically demanding work stated:

Working the long hours, plus partying, you know the body turned around, was like 'Okay, guess what? Can't take this no more' (Danny, janitor).

His poor health led to heart surgery at age 46 – and to his being unable to work for 2 years as he recuperated.

Chris's account is more typical of the kind of wear and tear experienced by janitors

You know I haul around a lot of equipment and stuff, push around a lot of stuff, you know, and that just wears on you. You know sometimes I feel it in my hip on occasion and on my leg (Chris, janitor).

Such wear and tear lead some of the janitors to question whether they will be able to continue working until they would reach the higher Social Security retirement age.

No, because everybody can't work 'til they're 67. Like as you get older, sometimes your body breaks down and some people can't go to 67, 70 years old. Some people, sometimes, if their body breaks down, like their back or their knees or whatever, they gotta retire early (Isaac, janitor).

Six caregivers explained that the nature of their work led them to have work-related injuries. For example, one participant, Emma states that lifting and moving patients from bed to bathroom to wheelchair has caused her to have a hernia:

I don't do lifting and stuff. I did that two or three years ago in a job because I was with a client and she was moving and I tried to help do that ... and I ended up having an emergency surgery. Like I said, I was out for three or four months and I didn't even get compensated for that. Nothing... (Emma: Paid caregiver).

Others, such as Jenny, had developed chronic work-related back injuries from lifting clients:

My back hurts. My legs hurt. Sometimes it's hard for me to bend over just to pick up something off the floor and I'm 53. And it's just because I have a bad back. I have a pinched nerve... (Jenny, Paid caregiver).

Compared to the caregivers who provide home health support, the physical demands among those working as Certified Nursing Aides in nursing homes are even more difficult, partly because of the volume of patients, and partly because they need to lift at least some of those patients on a daily basis. For example, Flora who works in a care facility, describes the impact of this work on her:

You're exhausted. It's a wear and tear on the body, 'cause you have to turn them, picking them up and doing this and that, but just like the other day, I was soaking in some Epsom Salts and green alcohol in the tub, as hot as it could be because it does wear and tear on your body and you have to take care of your body. You'll break it down (Flora, Paid caregiver).

In contrast to the work-related health problems experienced by janitors and paid caregivers, most of the teachers were in good health and none reported having accrued any work-related injuries or chronic conditions. Heloise's description is typical:

I mean both my husband and I are really pretty healthy, so but I guess if that changed, that might influence [the timing of retirement]. I do not want to be one of those people who works 'til they die and walks in the parking lot and either works themselves to death or has some sort of health condition that they manage (Heloise, teacher).

However, some of the teachers emphasized that teaching is stressful and mentally and emotionally demanding and requires a good deal of energy:

I think the stress and the amount of mental and emotional energy that you have to keep putting out every day wears on you a little bit more. I think your energy level diminishes...every teacher I've ever known, by the end of their career... they're going, 'I'm just tired. I'm just tired (Jocelyn, teacher).

Most teachers said that they want to leave work in their late 50s or early 60s to enjoy some healthy years in retirement. For those who were members of the State Teachers Retirement System, having a good occupational pension and no work-related disabilities would afford them the opportunity to do that. However, even with the relative luxury of being able to retire at younger ages with adequate income, there are a few exceptions among the teachers in their desire to stop working relatively early. One woman said she would like to continue teaching until she is 80, reflecting the potential for extended work life policies to make it possible for people who want to work to choose to continue. However, as the sentiments of most teachers, janitors, and paid caregivers indicated, the prospect of extended working life was not something to look forward to in a positive way.

Current Working Conditions, Earnings and Pension Prospects

Paid caregivers have the least favourable working conditions and are the lowest paid of the occupational groups in the study. Hourly pay for the caregivers interviewed ranges from U.S. \$8 to \$12 per hour, with most earning less than \$40,000 per annum for full-time work. One woman was earning over \$40,000 per year, but only by working four different jobs (Home Health Aide for an Agency, driving a bus, private home-care clients, cleaning) for over 60 hours per week to earn that much.

Compared to the janitors (whose conditions of work were more secure) caregivers who worked in private agencies providing home care usually had no health benefits, were paid by the hour and had no paid time off. As Jane, a home health aide described it:

They offer no health insurance. You don't have personal days. You don't get compensated for vacation days. If you don't go to work, you don't get paid. It's no fairness in that field (Jane, Home Health Aide).

Most paid caregivers were not unionized and most reported that their working conditions had actually become worse in recent years. For example, some had previously had paid time off or pension plans through work, but no longer.

We used to have PTO [paid time off] here. They took it [away] last year (Bella, U.S. paid caregiver).

Caregivers with jobs in hospitals or care homes as certified nursing assistants, tended to have somewhat higher pay rates than the home health aides; Some had more predictable hours of work and yearly contracts, while one even belonged to a union. However, institutionally based paid caregivers were more likely to get injured from lifting clients in those jobs. After suffering injuries, some changed their jobs to work as less well-paid home health aides to avoid further injury. Another risk that some home health aides reported was working in dangerous environmental conditions when they had clients in neighbourhoods where drug-dealing or crime was a problem.

The lower pay and higher level of precarity of health care workers makes it extremely difficult to put aside money for private pensions or savings, or to anticipate any income other than Social Security in retirement. Some health-care workers were so under-employed, they were not earning enough money to meet current needs, never mind future retirement income needs:

I wouldn't mind getting more hours, working more maybe would help me buy a car and pay a lot of bills I need to pay.....when people get sick and go to hospital, your case ends there and it doesn't pick up until they come from the hospital and call back to get ... the service back (Debby, Paid caregiver).

Others were subject to sudden lay-offs when home health agencies closed down suddenly.

Either they [Home Health Agency] closed down or I would work, go get my check, go take it to cash it and they had insufficient funds. So after that happened say two or three times, I had to let the job go because I'm working for nothing (Ellie, Paid caregiver).

Other caregivers reported that their hours could change from week to week when patients became ill and hospitalized or died, and it might take a long time for them to get replacement hours for another person needing care at home. Nor did they get paid if they needed to take time off for their own or their family's ill-health, as the following quote exemplifies:

Where I'm at, I have no benefits. If I get sick or my children or someone in my family gets sick or if somebody dies, like they did about two or three months ago, taking time off when they're close, immediate family, you still don't get paid for that.....So it's just you're at a loss, you know, and if you're banking on that check every two weeks, then you get a check for like \$120, you're really in the hole. (Ellie, Paid caregiver).

Most caregivers had been in their current jobs for a relatively short time, partly due to the precarious nature of home health agencies which sometimes shut down without warning.

The janitors tended to have somewhat better employment conditions than the paid caregivers – most janitors belonged to a union and had at least yearly contracts, so their employment was somewhat less precarious. Some janitors (those who were unionized) also had employment-based benefits, like optical and dental benefits and hospitalization cover. They had somewhat better pay and more regular hours than the paid caregivers; most janitors have 40 hour shifts with the possibility of overtime at weekends.

By contrast, teachers in the public school system had excellent conditions of employment, particularly once they had attained tenure, with extensive health benefits and long paid vacations. All teachers in the public school system are unionized.

Teachers in both private and public schools had relatively high earnings compared to the janitors and healthcare workers. Most teachers felt they were well paid, although a minority felt that they were not especially well paid compared to other professionals and observed that there was not potential for many increments in pay after a certain point in their career.

Some teachers working in private schools had somewhat less job security than public school teachers, with one-year contracts and health insurance dependent on their remaining employed. For example, one teacher noted that one of his colleagues had recently not had his yearly contract renewed, leaving him without medical insurance in his early 60s.

We don't have tenure and we don't have a union. A couple of teachers have been let go and it was just wrong...he could get Social Security but it wasn't going to be as much and he couldn't get Medicare and trying to get medical coverage on your own is terribly expensive (Drew, teacher in private school).

This left his colleague in a vulnerable position and Drew was worried that his own job security was dependent on the good will of the private school management.

Pensions

Paid caregivers did not generally have occupational pensions. The only exception is one worker who was employed by a nursing home for over 40 years and was vested in the pension many years ago. Most paid caregivers earn too little to contribute to private pensions like 401(k)s. Emma summarises the situation: most would like to build a pension, but simply cannot afford to do so, because of their low and often inconsistent pay:

And I'm worried about retirement and I just don't know what to do to start to try to put a little chunk away for then, you know because when I get paid, I mean my check goes. It goes for living every day. I pay for gas, light you know, just all of it (Ellie, Home Health Aide).

All but two of the home health aides reported that they will be totally dependent on Social Security for their retirement income. Some who are married may share in their husband's/partners future retirement income, but most of the paid caregivers are single or divorced. All of the janitors will also depend heavily on Social Security for their retirement income and, like the healthcare workers, six out of ten are either single or divorced and so will not have access to a share in a partner's pension.

By contrast, most of the teachers, regardless of gender, in the public school system expect to have excellent occupational pensions, the State Teachers Retirement System (STRS). Currently the replacement rate is 78% of final salary after 35 years. For example, teachers earning a \$70,000 annual salary could retire on an STRS pension of \$54,600 in their late 50s. Most teachers are in workplaces with strong unions that inform them of their pension rights.

A few of the women teachers had either spent years out of employment or job-shared to care for their children – some because they moved to facilitate their husband's careers (so-called 'trailing spouses') or who had not started to work until after spending years caring for their children full-time for a number of years. For such women, they did not have full pension benefits at the time of the interview, but choosing to remain in work to later ages might provide the opportunity to qualify for a full pension based on 35 years of service.

A subgroup of teachers with less advantageous pensions are those who work in private or charter schools. In private schools, the pensions are much less generous than the STRS, although their private school teachers' pay is higher, so some could afford to pay into 401(k)s. Private school teachers will partially depend on Social Security to supplement their private pensions and are more likely than public school teachers to be affected by the increase in Social Security retirement age to 67.

Views on Extended Working Life

Most of the paid caregivers felt that their jobs were too physically demanding to be continued past the age of 65, and disagreed with raising the full Social Security retirement age to 67. For example, Debby said:

Okay now this, I don't mind doing this, but at 65, I don't think that this is what I want to do. I would want to be doing something less physical, and if I am doing something then less physical, I wouldn't mind (Debby, Paid caregiver).

Many caregivers felt that working past the age of 65 should be optional, not something that workers were compelled to do:

No. No. I think it should stay the way it's been, 65, and if you're able to keep working, that's a choice you should be able to make, not... standard (Holly, Paid caregiver).

There was one exception – one caregiver interviewed, who was still working at age 70, felt others should have to work past age 65, too. She was one of the minority of paid caregivers who were healthy in the study, and felt that others should be able to continue working

They need to be still out there working. It ain't gon' kill them. It didn't kill me, so let's keep them active (Gemma, Paid caregiver).

Not surprisingly, given the physical demands of the job and the poor working conditions, many of the paid care workers said they wanted to retire as soon as possible. However, for many, their financial survival depends on them continuing to work:

I don't know. I might have to just retire probably when my health fails, and that's sad to say (Emma, Paid caregiver).

Isobel a caregiver has observed many caregivers who need to continue working at older ages and find it very difficult to do so:

Yeah. Many of them, but in the workplace, you have some very old people that's still working.....Some of them can barely make it, but because of the conditions, they have to be doing it. They need it [the money]. Yeah (Isobel, Paid caregiver).

Janitors also shared the view that workers should be able to retire at 65 rather than having to wait until age 67. Henry, having observed that for many colleagues and friends, their health began to deteriorate in their mid-60s, paints a bleak picture for those having to continue working past age 65:

I mean 67, you know, how much living do you have, the average individual? I would think you should be able to retire at an early age and be able to have some life, some vitality to be able to enjoy your retirement and not sit at home and wait on the check and barely make your financial obligations or back and forth to the doctor (Henry, janitor).

Even most of the teachers whose good occupational pensions supported retirement at younger ages (and who would not be personally affected much by the change in Social Security retirement age) felt that age 67 was too old for people to have to wait to retire. Most teachers felt that workers in all kinds of jobs should be able to enjoy

some healthy time in retirement: One teacher was strongly opposed to extending working life:

I think it's bullshit.... You know they say people are living longer or whatever, but I think you know....people should be able to retire – Between 60, 63, 64 – early 60's, you should be able to retire (Gordon teacher).

Another expressed the view that people should have time to enjoy doing things in retirement that they didn't have time for when working:

I really think that people should have the opportunity to enjoy some things that they weren't able to when they were working. Grandkids, hopefully for me someday, to travel, do some things, see some things that you may not have been able to see 'cause you didn't have the time because you were working (Colin, teacher).

Commenting on working longer in general for other people, one teacher worried about the negative effects of delayed retirement.

I think it's probably gonna negatively affect financially a lot of people that maybe are experiencing you know disease or illness or things like that (Ivor, teacher).

Other teachers noted that health status should be taken into consideration in determining whether a person should have to work past age 65. Henry, whose father developed cancer in his late 60s and had to keep working until age 74 to pay his medical bills said:

People with health issues, if they crop up at that age. So you're making people work in a situation where it might really be agonizing for them to work (Herbie, teacher).

However, at least one teacher appeared to have internalised claims that population aging and pension costs made EWL unavoidable to sustain pension systems:

Well I think that it's economically sound to do that, because you've got the baby boomer generation coming, and this is going to be the largest number of people who have ever retired in the history of the United States (Darina, teacher).

A few teachers expressed mixed views, feeling that increasing the age for full Social Security is on balance might be a good thing, but not for everyone, all the time. The perspective was that people with poor health need to be protected and that working later should be a choice for people who wanted to, rather than a compulsion for those who preferred to stop.

So part of me is looking at the greater good of you know things of Social Security going broke and those kinds of things..... I think in some respects, I think it needs to be up to the person as to what they want to do (Ellie, teacher).

The paid caregivers and janitors were quite unequivocal in their disagreement that American workers should wait until age 67 to retire. For the most part, even teachers whose pensions permitted them to retire early, and who were least affected by expectations associated with EWL, felt that making people work longer was potentially unfair.

Discussion

Considering the extended work from a life course perspective emphasizes that policies to extend working life – particularly the increase to the age of 67 for receipt of full Social Security pensions – has different implications for workers in the different occupational groups and for men and women.

By focusing on transitions such as leaving high-school education and parental influences, it is clear that economic conditions, family expectations and public policies combined in various ways to channel workers into either stable career trajectories with good pay and conditions or, alternatively, into a series of relatively undesirable jobs most typically characterized with poor pay and working conditions.

Teachers were strongly encouraged by parents or other family members to engage in further education after high school and/or they had several family members in the profession who acted as role models. Thus, they had both the encouragement and the family resources to train to be teachers, starting them on a long and stable career trajectory. The relatively high pay, job stability and their generous occupational pension meant that most were home owners who would have adequate retirement income. In fact, they anticipated being able to retire relatively early and still be financially stable in retirement. Policies to extend working life, especially because of the value of their occupational pensions, would have little impact on their future employment trajectories. Teachers had the additional advantage of being unlikely to have developed any work-related chronic health conditions, although some did say that they experienced stress.

By contrast, the janitors were typically not encouraged by anyone to pursue further education or (in some cases) to complete their high school education. This led to few qualifications and then to a series of jobs in manufacturing, the military, or the service sector in early adulthood. Some were made redundant from relatively well-paid and apparently secure jobs in manufacturing when the steel industry collapsed. One tried to pursue a community college degree later, but had to discontinue due to difficulties in financing the degree. Janitors had limited occupational choices due to their lack of qualifications and limited opportunities for advancement, and few had private or occupational pensions. Most expected to be totally dependent on Social Security in retirement and half reported that they already had chronic health conditions.

Similarly, most of the paid caregivers were not encouraged to pursue higher education. Sometimes, this lack of encouragement was compounded when some of the healthcare workers became pregnant in high school, abruptly terminating their education. When healthcare workers tried to study later to upgrade their professional qualifications to nursing, the difficulty of combining single parenting, working full-time and studying made it impossible to do so. Family responsibilities, limited opportunities for education, and having to leave the labour market periodically to provide unpaid care for family members confined these women to a limited number of poorly paid jobs. As they approach retirement, most expect to be entirely

dependent on Social Security and most have job-related injuries or chronic health conditions.

The lack of family friendly policies in the United States, such as paid maternity leave made it more difficult for women, whether paid caregivers or teachers, to combine caring for children with paid employment. However, teachers had higher salaries, predictable and more flexible patterns of work, and could better afford to pay for childcare.

Taking only their own circumstances into account, it might appear likely that teachers would be in favour of extended working life policies, especially since such policies would apply mainly to people in other occupational groups. However, most teachers were strongly opposed to the general idea of working until the Social Security entitlement age of 67. They felt that working for 35–40 years was ‘long enough’ for teachers...and other workers, too. Many felt that teaching was stressful, and required a considerable amount of energy. Several teachers considered circumstances beyond the teaching profession, and felt that people in physically demanding work or those who developed health problems would struggle to be able to continue to work past the age of 65. Like the other workers who were interviewed in this research and resonating with previous research, teachers felt that people deserved to have some healthy years in retirement (Pond et al., 2010). Some teachers did feel that working to later ages might be necessary “for the greater good”, but even they felt that there should be protection for older workers in poor health.

For both janitors and paid caregivers, having to work until age 67 is a difficult prospect. Many worried that they may be physically unable to continue working this long. Similar to the sentiments of the teachers, the janitors wanted to have some healthy time in retirement. Unlike the teachers, the janitors feared that they would have to keep working in their physically more difficult jobs due to financial necessity in the face of the increase in Social Security age, whether they were healthy or not. Some paid caregivers had already tried to adjust to working longer by moving from highly physically demanding nursing homes to somewhat less onerous home health aide work. However, this meant a lower income, possible exposure to dangerous working conditions, and a more inconsistent income which made it impossible to contribute to private pensions (Stacey, 2011) or sometimes, to pay current bills. Introducing policies to extend working life is extremely disadvantageous for such workers because of their low incomes and compromised health. They are further disadvantaged by the fact that access to Social Security disability benefits have been made even more restrictive in recent years.

Of all the research participants, the women who provided paid caregiving are the most disadvantaged through the combination of their low pay, precarious conditions which frequently leave them under-employed and inconsistently, paid and being engaged in physically and emotionally demanding work. The janitors, while they are low-paid and their work has physical demands, fare slightly better, given somewhat better employment security and more consistent pay. The paid caregivers’ accounts show how the disadvantaging factors associated with their employment, together with heavy unpaid care responsibilities for women, combine to result in an inability to either contribute to private pensions or to maximize their own Social

Security contributions (Ginn et al., 2001; Street, 2020). If the Social Security retirement age keeps increasing – or put another way, if all workers must anticipate extended working life – some paid caregivers fear that they will have to continue working indefinitely regardless of their compromised health statuses. The narratives of all the workers, regardless of occupation, communicate a shared sense that they have worked hard for many years and deserve to have adequate pensions and a right to retire at traditional retirement age of 65. Extending working life is an unpopular possibility for advantaged and disadvantaged workers alike. The increased Social Security retirement age disrupts hopes and plans to retire in dignity, with some healthfulness remaining after long years of work.

Policy Implications

The data analysed in this chapter were collected in the waning days of the Obama presidency, and represent the perspectives of workers in different occupational categories status quo ante. That is, the data were collected during “normal” times – both before the Trump Administration’s four-year assault on American workers’ health and labour rights (Madland et al., 2018; Woolhandler et al., 2021) and prior to the global COVID-19 pandemic. Clearly, policies designed to extend working life had disproportionately affected some groups of workers in this research, namely the janitors and the health care workers. The teachers in the public school system were protected from EWL by their occupational pension scheme. Teachers in private schools were possibly more directly affected by EWL, but were better paid with good working conditions, and so could more afford to contribute to private pensions, 401(k)s and better manage their preferred exit trajectory from paid work.

In fairness, policies to extend working life were inadequate and disadvantageous for precarious workers when the data were collected, and had been for decades under both Democrat and Republican administrations. The situation has only deteriorated since. The narratives of these older workers indicated that the one-size-fits-all policies intended to extend working life disproportionately affected workers in low-paid, physically demanding jobs (janitors) and were even more punitive for workers in simultaneously precarious and physically demanding jobs (paid caregivers). Workers in all categories felt that individuals in such jobs should be able to leave work at younger ages than those in better paid, secure and sedentary jobs.

Entering the second year of the global pandemic, the quality of the jobs featured in this research have changed, although widespread media accounts have indicated that the relative advantages of secure employment have not. Most teachers were able to weather the early part of the epidemic in secure, relatively well-remunerated employment, despite changes in their conditions of work arising from the need for online teaching. In that time, teachers could pursue their careers from the safety of their own homes, with no loss of income or benefits. For care workers and janitors, however, precarity and risk were amplified either by the dangers of frontline working in the early days of the pandemic, or losing jobs and income when in-home care

or custodial work dried up as people socially isolated. What the “next normal” will become in terms of labour market conditions is uncertain as the pandemic enters its second year. While there may be some hope for progressive social policies under the Biden Administration, including ones that would better meet the needs of older workers, the bitter partisanship and narrow legislative margins in the U.S. Congress that could evaporate as soon as 2022 mean that even the smallest policy improvements may be difficult to achieve (Street & Ní Léime, 2021).

Still, in the current more pro-worker-oriented Biden administration, progressive policymakers could improve EWL policies by recognizing and accommodating the importance of earlier life circumstances on later life trajectories. Paid maternity leave and paternity leave and childcare for those who wish to gain qualifications for better employment prospects (such as nursing for the paid caregivers in this study) could help address some of the gender disadvantage experienced by women workers. The level of Social Security benefits, especially for individuals who lack occupational pensions or the means to save for their own retirement, could be maintained or increased, because so many workers in low-paid jobs are dependent on it for their entire retirement income. Funding to improve pensions for chronically disadvantaged but essential workers could be provided by removing the current cap on earnings subject to contributions for Social Security. The question of low pay for caregiving and cleaning – and for many other essential jobs – also needs to be addressed. The often overlooked disadvantages experienced by the workers in this study were laid bare by the pandemic, and that new awareness may provide a political opportunity to improve workers’ pay and rights as the economy recovers. Employer or state policies to offer re-deployment to workers in physically demanding jobs would also help alleviate some of the physical and financial burdens such workers face in the latter part of their working lives.

Acknowledgements Á.N.L. gratefully acknowledges the generosity of the women and men who agreed to be interviewed for this project, and those who helped her recruit individual research participants. The research on which this paper is based was supported by a Marie Curie International Outgoing Fellowship within the 7th European Community Framework Programme. This article is also based on work from COST Action IS1409, supported by COST (European Cooperation in Science and Technology). Funding from the State University of New York College of Arts and Sciences enabled the authors to collaborate on the paper.

References

- Bureau of Labor Statistics. (2021a). Home health aides and personal care aides. In *Occupational outlook handbook*. U.S. Department of Labor. <https://www.bls.gov/ooh/healthcare/home-health-aides-and-personal-care-aides.htm>. Accessed 27 Jan 2021.
- Bureau of Labor Statistics. (2021b). Janitors and building cleaners. In *Occupational outlook handbook*. U.S. Department of Labor. <https://www.bls.gov/ooh/building-and-grounds-cleaning/janitors-and-building-cleaners.htm>. Accessed 27 Jan 2021.

- Bureau of Labor Statistics. (2021c). High school teachers. In *Occupational outlook handbook*. U.S. Department of Labor. <https://www.bls.gov/ooh/education-training-and-library/high-school-teachers.htm>. Accessed 27 Jan 2021.
- Bureau of Labor Statistics. (2021d). Kindergarten and elementary school teachers. In *Occupational outlook handbook*. US Department of Labor. <https://www.bls.gov/ooh/education-training-and-library/kindergarten-and-elementary-school-teachers.htm>. Accessed 27 Jan 2021.
- Burgard, S., Brand, J., & House, J. (2007). Toward a better estimation of the effect of job loss on health. *Journal of Health and Social Behavior*, 48, 369–384.
- CIA. (2020). *World factbook*. Central Intelligence Agency. <https://www.cia.gov/the-world-factbook/countries/united-states/#people-and-society>. Accessed February 3, 2021.
- Dannefer, D. (2003). Cumulative advantage/disadvantage and the life course: Cross-fertilizing age and social science theory. *Journals of Gerontology: Psychological Sciences and Social Sciences*, 58B(6), S327–S337.
- Duffy, M., Armenia, A., & Stacey, C. (2015). *Caring on the clock. The complexities and contradictions of paid care work*. Rutgers University Press.
- Edge, C. E., Cooper, A. M., & Coffey, M. (2017). Barriers and facilitators to extended working lives in Europe: A gender focus. *Public Health Reviews* 38(2). <https://doi.org/10.1186/s40985-017-0053-8>. Accessed 9 Mar 2021.
- Folbre, N. (2012). *For love and money: Care provision in the United States*. Russell Sage Foundation.
- Giele, J., & Elder, G. (1998). Life course research: Development of a field. In J. Giele & G. Elder (Eds.), *Methods of life course research: Qualitative and quantitative approaches* (pp. 5–27). Sage.
- Ginn, J., Street, D., & Arber, S. (2001). *Women, work and pensions: International issues and prospects*. Open University Press.
- Green, D., Gerberich, S., Kim, H., Ryan, A., McGovern, P., Church, T., Schwartz, A., & Arauz, R. (2019). Occupational injury among janitors. Injury incidence, severity, and associated risk factors. *Journal of Occupational and Environmental Medicine*, 61(2), 153–161. <https://doi.org/10.1097/JOM.00000000000001505>
- Harrington Meyer, M. (2013). Changing social security in the US: Rising insecurity? *Social Policy and Society*, 12, 135–146.
- Hyun-Joo, J., Diamond, L., McCartney, C., & Kyong-Ah Kwon, K. (2021). Early childhood special education teachers' job burnout and psychological stress. *Early Education and Development*, 1–19. <https://doi.org/10.1080/10409289.2021.1965395>
- Lain, D., Airey, L., Loretto, W., & Vickerstaff, S. (2019). Understanding older worker precarity: The intersecting domains of jobs, households and the welfare state. *Ageing and Society*, 39(10), 2219–2241. <https://doi.org/10.1017/S0144686X18001253>
- László, K. D., Pikhart, H., Kopp, M. S., Bobak, M., Pajak, A., Malyutina, S., Salavec, G., & Marmot, M. (2010). Job insecurity and health: A study of 16 European countries. *Social Science & Medicine*, 70, 867–874.
- Madland, D., Walter, K., Rowell, A., Willingham, Z., & Malkie, W. M. (2018, January 6). *President Trump's policies are hurting American workers*. Center for American Progress. <https://www.americanprogressaction.org/issues/economy/reports/2018/01/26/168366/president-trumps-policies-hurting-american-workers/>. Accessed 10 June 2021.
- Marmot, M., & Bell, R. (2010). Challenging health inequalities – Implications for the workplace. *Occupational Medicine*, 60, 162–166.
- McCaughey, D., McGhan, G., Kim, J., Brannon, D., Leroy, H., & Jablonski, R. (2012). Workforce implications of injury among home health workers: Evidence from the National Home Health Aide Survey. *Gerontologist*, 52, 493–505.
- Neumark, D., Burn, I., & Button, P. (2015). *Is it harder for older workers to find jobs? New and improved evidence from a field experiment* (NBER Working Paper 21669). National Bureau of Economic Research.

- Ní Léime, Á., & Street, D. (2016). Gender and age implications of extended working life policies in the US and Ireland. *Critical Social Policy*, 37, 464–483.
- Ní Léime, Á., & Street, D. (2019). Extended working life in Ireland and the U.S.: Gender implications for precarious and secure workers. *Ageing & Society*, 39(10), 2194–2218. <https://doi.org/10.1017/SO144686X18000508>
- Ní Léime, Á., Ogg, J., Street, D., Rasticova, M., Krekula, C., Madero Cabib, I., & Bediova, M. (Eds.). (2020). *Extended working life: International gender and health perspectives*. Springer. <https://link.springer.com/content/pdf/10.1007%2F978-3-030-40985-2.pdf>. Accessed 23 Mar 2021.
- OECD. (2006). *Live longer, work longer*. OECD.
- OECD. (2019). *Pension markets in focus*. www.oecd.org/daf/fin/private-pensions/pensionmarket-sinfocus.htm. Accessed 5 Mar 2021.
- Pay Scale. (2020). *The state of the gender pay gap*. <https://www.payscale.com/data/gender-pay-gap#:~:text=IN%202020%2C%20WOMEN%20EARN%2081,job%20type%20or%20worker%20seniority>. Accessed 4 Feb 2020.
- Pond, R., Stephens, C., & Alpass, F. (2010). How health affects retirement decisions: Three pathways taken by middle-older aged New Zealanders. *Ageing & Society*, 30, 527–545.
- Russell, J. (2014). *Social insecurity, 401(k)s and the retirement crisis*. Beacon Press.
- Stacey, C. L. (2011). *The caring self: The work experience of home care aides*. ILR Press.
- Stacey, C., & Ayers, L. (2015). Caught between love and money: The experiences of paid family caregivers. In M. Duffy, A. Armenia, & C. Stacey (Eds.), *Caring on the clock. The complexities and contradictions of paid care work* (pp. 201–212). Rutgers University Press.
- Standing, G. (2011). *The precariat: The new dangerous class*. Bloomsbury Academic Press.
- Street, D. (2020). United States. In Á. Ní Léime, J. Ogg, D. Street, M. Rasticova, C. Krekula, I. Madero Cabib, & M. Bediova (Eds.), *Extended working life: International gender and health perspectives*. Springer. <https://link.springer.com/content/pdf/10.1007%2F978-3-030-40985-2.pdf>. Accessed 6 Mar 2021.
- Street, D., & Ní Léime, Á. (2021). Employment policy for older workers. In J. Wilmoth & A. London (Eds.), *Life-course implications of U.S. public policies* (pp. 124–134). Routledge.
- Street, D., & Tompkins, J. (2017). Is 70 the new 60? Extending American women's and men's working lives. In A. Ní Léime, D. Street, S. Vickerstaff, C. Krekula, & W. Loretto (Eds.), *Gender, ageing and extended working lives: International analysis from a critical perspective* (pp. 195–217). Policy Press.
- Vallas, R., & Fremstad, S. (2015). *Social security disability insurance: A bedrock of security for American workers*. Center for American Progress. <https://www.americanprogress.org/issues/poverty/reports/2015/06/16/115195/social-security-disability-insurance-a-bedrock-of-security-for-american-workers/>. Accessed 5 Mar 2021.
- Vosko, L. F. (2008). Temporary work in transnational labour regulation: SER-centrism and the risk of exacerbating gendered precariousness. *Social Indicators Research*, 88, 131–145.
- Woolhandler, S., Himmelstein, D. U., Ahmed, S., Bailey, Z., Bassett, M. T., Bird, M., Bor, J., Bor, D., Carrasquillo, O., Chowkwanyun, M., Dickman, S. L., Fisher, S., Gaffney, A., Galea, S., Gottfried, R., Grumbach, K., Guyatt, G., Hansen, H., Landrigan, P. J., et al. (2021, February 11). The lancet commissions: Public policy and health in the trump era. *Lancet*, 397, 705–753. [https://doi.org/10.1016/S0140-6736\(20\)32545-9](https://doi.org/10.1016/S0140-6736(20)32545-9)
- Zeytmoglu, I. U., Denton, M., Davies, S., & Plenderleith, J. M. (2009). Casualized employment and turnover intention: Home care workers in Ontario, Canada. *Health Policy*, 91, 258–268.
- Zhang, Y., Zhang, S., Hua, W., Chen, J., & King, R. (2019). The impact of psychological capital and occupational stress on teacher burnout: Mediating role of coping styles. *The Asia-Pacific Education Researcher*, 28(4), 339–349.

Áine Ní Léime is Deputy Director of the Irish Centre for Social Gerontology at the National University of Ireland, Galway. She was Chair of COST Action IS1409, an international research network on Gender, Health and Extended Working Life (2015–2019). Her current research focuses on older workers, gender and extended working life. She is currently Principal Investigator for Ireland on a NORFACE funded project comparing experiences of older workers in Ireland, the Czech Republic, Sweden, Switzerland and the UK. She is editor of *Gender, Ageing and Extended Working Life: Cross-National Perspectives* (2017), a Special Issue of *Ageing & Society* and several journal articles on these topics.

Debra Street is Professor of Sociology at the State University of New York at Buffalo, United States of America. Author of 80+ articles, chapters, and working papers; a monograph; and co-editor of three books, Street researches the challenges of aging societies, particularly health and income security over the life course. She is a Fellow of the Gerontological Society of America, an elected member of the National Academy of Social Insurance and recipient of the UB Gender Institute Janice L. Moritz Distinguished Lecturer and the CISP Outstanding Contributions to International Education awards. Street's research has been funded by the National Science Foundation, the National Institute on Aging, the International Council for Canadian Studies, and the Robert Wood Johnson Foundation.

Open Access This chapter is licensed under the terms of the Creative Commons Attribution 4.0 International License (<http://creativecommons.org/licenses/by/4.0/>), which permits use, sharing, adaptation, distribution and reproduction in any medium or format, as long as you give appropriate credit to the original author(s) and the source, provide a link to the Creative Commons license and indicate if changes were made.

The images or other third party material in this chapter are included in the chapter's Creative Commons license, unless indicated otherwise in a credit line to the material. If material is not included in the chapter's Creative Commons license and your intended use is not permitted by statutory regulation or exceeds the permitted use, you will need to obtain permission directly from the copyright holder.

