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# Chapter 6

## Extended Working Lives: Feasible and Desirable for All?



David Lain, Mariska van der Horst, and Sarah Vickerstaff

### 6.1 Introduction

Governments across the OECD are seeking to promote extended working lives in response to population ageing (Lain & Vickerstaff, 2014; OECD, 2011). As the proportion of older people increases, it is argued that it is increasingly important for countries to ensure that the ratio between non-workers and workers does not become too imbalanced (OECD, 2011). There now seems to be a broad political consensus that people will have to work longer on average than was the case in the recent past (Phillipson, Vickerstaff, & Lain, 2016). Whilst this is often presented in terms of individual responsibility to work longer, the reality is more complicated. Extending working lives raises some serious ethical questions. To what extent is it the responsibility of *everyone* to continue working in older age, when significant numbers of older people have health conditions that severely limit their employment prospects (Lain, 2016)? To what extent should we expect people in physically demanding jobs, who often started working at a young age, to work as long as people who entered the labor market later because they spent longer in education and who had less physically taxing working lives? Is it always a successful outcome if individuals manage to remain in work, or are there circumstances when it would be preferable ethically to *not* expect them to be employed? This chapter explores the question

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of whether extended working lives in the UK and the USA is feasible and desirable for all. It starts by setting the policy context, then examines the issue through quantitative survey analysis and a qualitative study of UK hospitality workers.

## 6.2 Extended Working Lives in the UK and the USA: Setting the Policy Context

Clearly you can believe that people need to work longer *on average*, but accept that it is not *always* desirable to expect people in all circumstances to work for longer. If we make this assessment, we can then argue for policy to provide adequate financial support for those with limited employment prospects (for a discussion, see Lain, 2016). However, in countries such as the UK and the USA there has been insufficient attention paid to this issue by policymakers. State pension ages are rising in both countries, to 67 in the USA and 68-plus in the UK, and these countries continue to provide benefits to those below state pension age which are extremely meager by international standards (Lain, 2016). For example, in the UK, benefits for unemployment and ill health for those below state pension age are provided at half the level of the state pension, which is itself not generous in the first place (Lain, 2016). In the USA, unemployment benefits are time-limited and Social Security benefits taken for illness are actuarially reduced when taken before pension age. In this context, it is also noteworthy that salary-related defined benefit occupational pensions have become much less common in both countries. In their place are defined contribution pensions, which are typically less well funded and do not provide the security of defined benefit pensions (Hacker, 2006; Lain, 2016; Office for National Statistics, 2012).

In terms of access to a state pension, the financial pressures to work longer are even stronger in the UK than the USA. In the USA, the Old Age Social Security pension can be taken early, from age 62. Actuarial reductions for early receipt are increasing as “normal” pension ages rise, increasing financial pressures to continue working. However, in the UK the Cridland (2016) government report into state pension ages ruled out the possibility of even allowing people to take an early pension. UK state pension rises hit low earners the worst, as the state pension is a critical element of their retirement income; for those in the lowest income quartile, the state pension accounts for over 80% of their total pension income (Cridland, 2016). Single pensioners are particularly likely to be in this category of people who are dependent on their state pension; for them their state benefit income (including the state pension) makes up more than half of all income for “all but the top fifth of single pensioners” (Department for Work and Pensions, 2017, p. 8).

Despite the obvious financial constraints introduced by raising the state pension age, policymakers have attempted to present extended working lives as being a *choice* made by individuals. In this context, the UK government followed the US path in 2011 by abolishing mandatory retirement ages, theoretically enabling individuals to choose when to retire. In the USA, the government-appointed National

Commission on Fiscal Responsibility and Reform (2010) framed the issue of extended working lives as a choice to be made by people if they were given adequate information:

Working longer and saving more has significant positive implications for both individuals and society as a whole... we propose directing SSA [Social Security Administration] to provide better information to the public on the full implications of various retirement decisions, with an eye toward encouraging delayed retirement and enhanced levels of retirement savings. (p. 52)

In the UK, there has been an additional narrative of people having “fuller working lives” than in the past. For example, Ros Altmann, who was later to become UK Pensions Minister, said in 2015: “*This is not about forcing people to work on*, but supporting those who want to maintain a fuller working life.” (Altmann, 2015, p. 9, emphasis added). John Cridland (2016) in his review of state pension ages for the UK government justified proposed increases with reference to hypothesized positive improvements in employment in older age:

The nature of work and retirement is changing, as people move from the old model of a fixed retirement age leading to a defined period of retirement to a more flexible approach where people may wish to work part-time or change career in later life (Cridland, 2016, p. 11).

The evidence that such changes are occurring in the UK at least is debatable (van der Horst, Lain, Vickerstaff, Clark, & Baumberg Geiger, 2017), and there are limited policy initiatives to promote fuller working lives (Phillipson et al., 2016). This rhetoric of individuals having “fuller working lives” is therefore used to deflect attention from the fact that some individuals are being *forced* to work longer. As the following quote from former UK Pensions Minister Steve Webb implies, there is an attempt to side-line dissenting voices who question whether extended working lives are feasible and desirable for all:

It’s time to change the conversation about extending working life from one about working “until you drop,” to one about a fuller working life, that means working as long as is necessary to create the future you want (Department for Work and Pensions, 2014, p. 4).

In this context, academic research has responded by highlighting the fact that extended working lives are not *feasible* for all, given that health problems and other constraints on employment increase as people age (see Lain, 2016). This chapter builds on this research, by arguing that even when people are “successful” at managing to remain in employment, it may not always be reasonable to expect them to be there. It starts by presenting an overview of the factors known to influence employment in older age; this is complemented with an original analysis of the US Health and Retirement Study and the English Longitudinal Study of Ageing. Research reviewed tends to highlight the better employment prospects of relatively advantaged individuals. However, the analysis here and a careful reading of the literature shows that whilst employment might be unpredictable for individuals in disadvantaged circumstances, it is not uncommon for them to be in employment in older age as well. In order to examine the implications of this, the chapter then presents findings from qualitative research on older low-paid hospitality workers in England, many of whom struggle on in physically demanding jobs whilst their

health worsens. These workers cannot rely on being able to continue working into older age, but a lack of alternative sources of income means they have little choice but try to remain in employment under difficult circumstances. Clearly older people with health conditions should be given opportunities to work if they want them. However, the case of the hospitality workers examined provides an illustration of how it is not always desirable to expect workers to extend working lives. We discuss the policy implications of this in the conclusion.

### 6.3 Who Works “Late”?

In order to understand whether extended working lives are feasible and desirable for all, it is useful to examine who currently ends up working in older age. Generally, research tends to conceptualize working “late” in two ways. The first stream explores people working “post-retirement.” This conceptualization is not about age per se, but about *transitions* back into work after having self-identified as fully or partially retired, and is sometimes referred to in the literature as individuals “un-retiring” (e.g., Cahill, Giandrea, & Quinn, 2011; Giandrea, Cahill, & Quinn, 2010; Kannabar, 2012; Maestas, 2010; Platts et al., 2017; Pleau, 2010). Typically, studies follow people using longitudinal surveys after age 50 and identify the frequency with which they return to work after retiring. This means, in theory, somebody could retire at 52, return to work at 54, and retire again finally at age 57. Indeed, research suggests that “un-retirement” is actually most common among younger retirees (Maestas, 2010). Studies such as these suggest that in the USA, a significant minority of older people unretire (Cahill et al., Giandrea et al., 2010; Maestas, 2010; Pleau, 2010), with this phenomenon seeming to be less common in England than the USA (Kannabar, 2012, but see Platts et al., 2017). For example, according to Giandrea et al. (2010), around 15% of those (men and women) retiring from a career in the USA returned to work, compared with 5% of men in England doing the same according to Kannabar (2012). Studies such as these are useful in showing that late careers involve more complex labor market transitions than we might expect. However, they tell us less about prospects for extended working lives because they are not related to age per se (see Chap. 18).

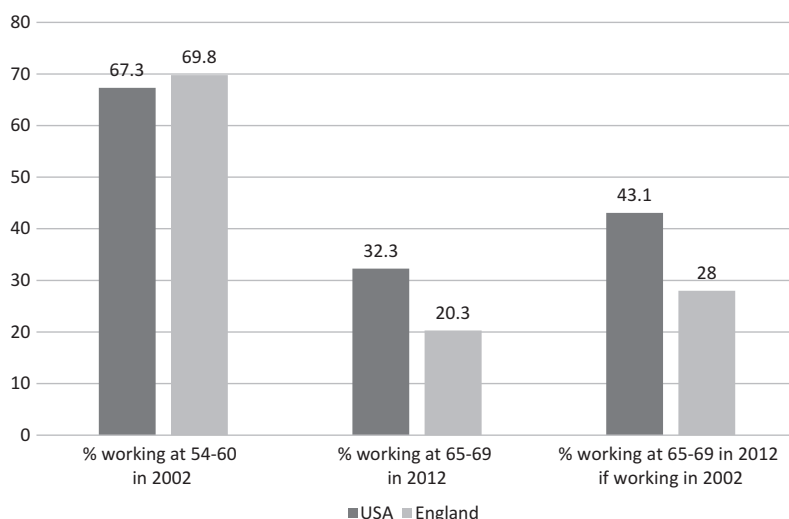
The second stream of research conceptualizes “late” retirement in relation to people working beyond an *age* of institutional significance—typically state pension age (examples of research focusing solely on the UK include Barnes, Parry, & Taylor, 2004; Clayton, 2008; Lain & Loretto, 2016; Parry & Taylor, 2007; Smeaton & McKay, 2003). “Late retirement” is not working “post-retirement” because an individual may never have actually retired. Whilst a significant body of research has explored unretirement as a *transition* in the USA, there has been less focus on the factors influencing employment beyond “pension age” (cf. Lain 2011, 2012, 2016). Nevertheless, from the studies that are available it might appear that post-retirement-age employment is associated with financially advantaged individuals, who presumably have the greatest ability to work as well as the most fulfilling jobs

(Lain, 2011). Haider and Loughran (2001), for example, examined the groups most likely to work in older age in the Health and Retirement Study, from which they concluded “[US] labour supply is concentrated among the most educated, wealthiest and healthiest elderly.” Likewise, analysis of the English Longitudinal Study of Ageing suggests a linear relationship between work and wealth after age 65, with increasing employment as you move up the wealth quintiles (Crawford & Tetlow, 2010; see also Lain, 2011).

Such findings might suggest that employment up to and beyond state pension age is associated with choice—those most likely to work appear to be those with the greatest means to retire. However, this picture of older worker advantage presents only a partial picture. Closer inspection of Haider and Loughran’s (2001) results suggest that whilst healthy, educated, and wealthy individuals were *most* likely to work, employment was in no way confined to this group; employment was not rare for any economic segment, and a significant proportion of those with modest wealth continued working. Likewise, Lain (2016) finds whilst the wealthiest segment was most likely to work between age 65 and 74 in the USA and England, debts and outstanding mortgages nevertheless increased the likelihood of working in both countries. Research from a range of other countries suggests that having good levels of health and education increase the likelihood of working in older age, as does the presence of a working partner in the household (e.g., Carr et al., 2018; for a discussion see Hasselhorn & Apt, 2015). However, by focusing attention on the groups *most* likely to work, we may create a blind spot for less advantaged individuals who do manage to remain in employment.

In order to illustrate this point, we present descriptive statistics on the percentages of advantaged and disadvantaged older individuals working in the USA and the largest country of the UK, England; these findings are based on analysis of the English Longitudinal Study of Ageing and the US Health and Retirement Study. The results for England should broadly reflect those of the UK as a whole because the vast majority of the UK population live in England (84% at the last census according to ONS (2012)). The analysis focuses on interviews conducted with people aged 65–69 in 2012 (and aged 54–60 in 2002). The general point to be made from this analysis is that it was not that uncommon for those in more disadvantaged circumstances to be working at 65–69, *if they were also working earlier at age 54–60*.

Figure 6.1 shows that in both countries just over two thirds of individuals were working at age 54–60. When we get to age 65–69 in 2012, around one third of Americans were still working, compared with one fifth in England. The fact that Americans were more likely to be in employment at this age is acknowledged in the literature, and is likely to be in part related to the fact that mandatory retirement ages were only abolished in England in 2011 (compared with 1986 in the USA; see Lain, 2016). One of the key findings from Fig. 6.1 is that in both countries, individuals in general had a *relatively* high likelihood of working *if they were employed at age 54–60 in 2002*. Employment continuity therefore seems to increase the likelihood that individuals will work in older age—if individuals are out of employment in their mid-50s they evidently (but not surprisingly) have a lower likelihood of



**Fig. 6.1** Percentages working in the USA and England

working at 65–69. Supplementary analysis not shown here indicates that in both countries, women were less likely than men to work at age 65–69. However, for both men and women being employed at age 54–60 increased the likelihood of working at 65–69.

Table 6.1 breaks down employment levels by wealth and education, in order to see how employment is influenced by (dis)advantage. Starting with wealth, in both countries we can see that at age 54–60 in 2002 the poorest wealth quintiles were less likely to be in employment than those above this. Such patterns are known to be associated with lower levels of health and education among the poorest, which arguably make it harder for them to compete in the labor market and remain in employment (Lain, 2016). At age 65–69 in 2012, we see highest employment among the richest and lowest employment among the poorest although differences in employment between wealth groups were statistically significant only in the USA. When the focus is only on those who were working at age 54–60, however, we see relatively high percentages of those in the poorest categories working at age 65–69 (37.8% in the USA and 29.1% in England), and no longer significant differences between wealth groups in either country. In other words, when people in the least wealthy categories managed to remain in work in their 50s, they also seem to be relatively likely to stay into their jobs at age 65–69.

The lower half of Table 6.1 shows the distribution by education. At age 54–60 in both countries, those with college and above education were much more likely to be working than those with less than a high school degree. At age 65–69 in the USA, individuals with college education and above were more than twice as likely to work compared to those with less than high school (45.7% vs. 18.6%). In England, we also see the same pattern of highly educated people being more likely to work although the differences are much smaller and not statistically significant. If we

**Table 6.1** Percentages working by wealth and education in the USA and England

Variable	At age 54–60 (2002)	At age 65–69 (2012)	At age 65–69 (2012) if working at 54–60
<b>Wealth</b>			
<i>USA</i>	( $p < .001$ )	( $p = .003$ )	( $p = .178$ )
Lowest wealth quartile	58.4%	25.2%	37.8%
2	73.1%	34.7%	43.9%
3	68.8%	33.1%	42.6%
Highest wealth quartile	68.7%	36.3%	47.2%
<i>England</i>	( $p < .001$ )	( $p = .168$ )	( $p = .289$ )
Lowest wealth quartile	56.6%	16.9%	29.1%
2	76.6%	18.0%	23.4%
3	77.6%	21.3%	27.0%
Highest wealth quartile	67.4%	24.3%	33.3%
Missing ( $n = 31/25$ )	80.7%	25.8%	28.0%
<b>Education</b>			
<i>USA</i>	( $p < .001$ )	( $p < .001$ )	( $p < .001$ )
Less than high school	46.0%	18.6%	33.3%
High school graduate	66.8%	28.4%	37.6%
Some college	67.5%	32.0%	43.3%
College and above	79.9%	45.7%	52.3%
<i>England</i>	( $p < .001$ )	( $p = .217$ )	( $p = .888$ )
Less than high school	59.8%	16.8%	28.1%
High school graduate	70.2%	19.4%	25.9%
Some college	74.6%	22.7%	28.8%
College and above	79.0%	24.4%	30.3%
Missing ( $n = 102/73$ )	71.2%	18.6%	25.4%

Source: Authors' analysis of the Health and Retirement Study and the English Longitudinal Study of Ageing

Note: All  $p$ -values from chi-square tests. USA  $N = 1690$  (wave 6 or wave 11 employed) or 1137 (wave 11 employed conditional on employed wave 6). England  $N = 1134$  (wave 1 or wave 6 employed) or 825 (wave 6 employed conditional on employed wave 1)

focus only on those who were previously working at age 54–60, we see a higher likelihood of working at 65–69 for all educational groups in both countries. It is particularly noticeable that around a third of those with less than high school qualifications were employed at age 65–69 in both countries if we focus only on those previously in employment at age 54–60.



**Table 6.2** Percentages Working by Health and Physical Demands of the Job in 2002 in the USA and England

Variable	At age 54–60 (2002)	At age 65–69 (2012)	At age 65–69 (2012) if working at 54–60
<b>Health</b>			
<i>USA</i>			
Self-reported health	( $p < .001$ )	( $p < .001$ )	( $p = .003$ )
Fair/poor	39.4%	16.0%	30.6%
Excellent/good/very good	73.5%	35.9%	44.6%
<i>England</i>			
Self-reported health	( $p < .001$ )	( $p = .001$ )	( $p = .393$ )
Fair/poor	48.9%	12.0%	24.5%
Excellent/good/very good	74.8%	22.2%	28.5%
<b>Physical demands of the job</b>			
<i>USA</i>			
Physically demanding job in 2002		( $p < .001$ )	( $p = .002$ )
None of the time	–	48.9%	48.9%
Some of the time	–	42.8%	42.8%
Most or all of the time	–	36.2%	36.2%
Not working	–	10.1%	–
<i>England</i>			
Physically demanding job in 2002		( $p < .001$ )	( $p = .142$ )
Sedentary	–	23.9%	24.2%
Standing	–	30.7%	30.9%
Physically demanding	–	29.7%	30.3%
Not working	–	2.4%	–

Source: Authors' analysis of the Health and Retirement Study and the English Longitudinal Study of Ageing

Note: all  $p$ -values from chi-square tests. USA  $N = 1690$  (wave 6 or wave 11 employed) or 1137 (wave 11 employed conditional on employed wave 6). England  $N = 1134$  (wave 1 or wave 6 employed) or 825 (wave 6 employed conditional on employed wave 1)

The top segment of Table 6.2 shows a similar pattern for the relationship between health and employment. Research in both the UK and the USA consistently shows that having good health increases the likelihood of working in older age (Lain & Vickerstaff, 2014). Consistent with this trend, in the USA people who rated their health as being “fair/poor” were significantly less likely to work at ages 54–60 and 65–69 than those with “excellent/good/very good” health. However, it is important to recognize that just under a third of people with fair/poor health that worked at age 54–60 in the USA also worked at age 65–69 (30.6%). In England, there was no significant employment difference at age 65–69 between those with differing health levels *once we focus only on those working at age 54–60*. In other words, in both

countries, significant minorities of those with less good health work at the age of 65–69 *when they are able to remain in work in their mid to late 50s*.

To some degree this pattern is likely to be the result of positive developments. Compared with the past, it has become more common for individuals to successfully manage a health condition whilst working (Vickerstaff, Phillipson, & Wilkie, 2011); we should not, therefore, automatically assume that everybody with “fair” or “poor” health is unable or unwilling to work. The problems are arguably most acute, however, when an individual *develops a work limiting* health condition that makes it difficult for them to continue performing the types of jobs they have done previously (which are most realistically available to them in the future). This may be a slightly different situation from younger people with long-standing health problems, who perhaps developed career paths that enabled them to combine employment with managing their condition. Work limiting health conditions are common among older people—a quarter of people aged between 50 and 69 in 2008–2009 in England had a work disability which limited the kind or amount of paid work they could do (Crawford & Tetlow, 2010). It therefore matters whether or not the health condition(s) they have limit(s) the type of work they do. Under UK law companies have to make “reasonable adjustments” to enable people with disabilities to work. In the case of physically demanding work it may, however, be difficult for an employer to make reasonable adjustments to enable somebody who has developed health problems to continue doing their job. In these circumstances, an individual in financial need with diminished health faces uncertain employment prospects.

Given the importance of job demands on continued employment, the bottom segment of Table 6.2 shows employment at age 65–69 by the extent to which work at age 54–60 was physically demanding. Physical job demands are measured differently in each country, so the results are not directly comparable, but they reveal some useful insights. It is logical to expect that having a physically demanding job in your 50s would decrease the likelihood of working in your 60s. In the USA, we can see that this is indeed the case. People who were in jobs that were physically demanding “none of the time” at age 54–60 were significantly more likely to be working at 65–69 than those in jobs that were physically demanding “most or all of the time.” However, this overall result can obscure the fact that 36.2% of people in physically demanding jobs nevertheless remained in employment in the USA.

The results for England are based on whether the job is “sedentary,” “standing,” or “physically demanding.” Interestingly, once we focus only on people with a job at 54–60, we see that there is no significant difference in employment between those with different levels of physical job demands at 54–60 (any real difference appears to be related to the category “not working”). This means that a significant proportion of those with physically demanding jobs 54–60, 31.1%, was still working at age 65–69. Other research has shown that few individuals move from physically demanding to non-physically demanding work in older age (Lain, 2016; Maestas, 2010). In the past, there may have been more opportunities to move into “light work” in older age (Phillipson, 1982), but since this time employers have become much more competitive and market orientated, leading to work intensification in the UK, the USA, and a range of other countries (Burchell, Ladipo, & Wilkinson, 2001;

Capelli, 1999; Green, 2006). In this context, opportunities for moving into less demanding work within the firm have probably declined significantly. For a significant proportion of older workers, it is therefore going to be a “choice” between physically demanding work or no work at all.

To summarize these results, low levels of health and education do appear to reduce the likelihood that individuals end up in employment in their mid to late 60s; as state pension ages rise, it is therefore essential that policy reflects this in terms of supporting older individuals who find themselves without a job. At the same time, however, it is not that uncommon for people with physically demanding jobs and/or low levels of wealth, education, and health in their mid-50s to continue working beyond their mid-60s. If we focus our attention on the advantaged groups most likely to work, we may ignore the question of whether it is *always* desirable when disadvantaged individuals *do* manage to remain in work in older age. Whether this is the case is probably due to combinations of health, education, and job demands. This is not easily examined using quantitative surveys, so we turn our attentions to qualitative evidence.

## 6.4 Case Study of Workers in Hospitality

### 6.4.1 *Characteristics of the Workers*

In order to understand the situation of less advantaged individuals in the labor market, we draw on qualitative interviews with 22 older hospitality workers employed in an educational establishment. As with many of the disadvantaged workers identified above, they had typically managed to remain in work by having a reasonable degree of employment continuity—they worked in an organization with relatively secure jobs and long job tenure. As we shall see, in their qualitative interviews these workers typically reported financial pressures, which made leaving employment difficult. At the same time, however, the jobs they did were mostly physically demanding and workers faced worsening health but few financial opportunities to stop working prior to (or in some cases after) state pension age.

The interviews were part of a larger project on extended working lives in five organizations (International Longevity Centre, 2017). The hospitality case involved employees and managers in an independent business unit within the larger educational establishment. The main areas of work were: cleaning bedrooms, offices, and public areas; reception work; and catering in a range of food outlets. The organization prides itself on low staff turnover compared to sector norms. The average number of years with the firm for older employees interviewed was 13 years, which is a long tenure compared with the hospitality sector as a whole (People 1st, 2016). As a result, there are many long-serving staff members and an increasingly ageing workforce, especially in housekeeping (in which women predominate); the catering staff has a younger profile and here turnover is a bit higher. Management does not

perceive the long service of many employees as a problem—indeed, staff loyalty is considered as a positive asset. Sickness absence is around 4%, which is also significantly lower than average for the hospitality sector, and the issue is being actively managed with the support of the educational establishment's occupational health team. In other words, the conditions of employment for these workers were arguably about as good as it gets for hospitality workers.

A case study approach was used in the project, with semi-structured interviews undertaken with the HR manager and occupational health professionals (three people), line managers of older workers (five people), and the 22 older employees mentioned above. Note that some of the 22 “older workers” had supervisory responsibilities but were being interviewed as “workers” rather than managers of older people. In addition to the interviews, the organization provided information on current policies and labor force statistics. The key selection criteria for the study was that employees had to be aged 50 years or above. The hospitality workers were aged 50–67. As the quantitative analysis showed, this was a critical age range for remaining in work beyond age 65. We used a maximum variation sampling strategy (Patton, 2002) for selecting older employees. This method involved asking gatekeepers to provide potential samples of older employees stratified on the basis of occupational class, gender, and ethnicity differences that were present in the workplace. This approach was taken in order to capture the experiences of informants from different backgrounds. The key criteria for selecting line managers were that they managed older workers and were likely to have recent experience managing retirement; this was explained to gatekeepers who purposively selected participants on these criteria. This process enabled the researchers to get a 360° view of how the organization was managing older workers, health and retirement issues from the perspectives of policymakers and managers, as well as those who were managed (see Marshall, 1999 for more on case study methodology). Although we focus primarily on the older workers themselves, our discussion is also informed by the other interviews.

Table 6.3 shows that most of the 22 older workers reported were “blue collar” rather than “white collar” or “managerial” employees, reflecting the physical nature of many of these jobs. Most of these workers reported that their health was “fair” or “poor” rather than “good.” It is important to note that the range of health-related answers included “excellent,” “very good,” “good,” “fair,” or “poor.” “Good” health here therefore combines three degrees of “good health.” Few older people rated their health as being “poor” in previous studies (e.g., Lain, 2016), likely because this is the worst option and they are comparing themselves against what they think is “normal” for their age. In this context, it is arguably reasonable to categorize “fair” health as being potentially problematic from the perspective of doing physically demanding work. Furthermore, younger sample members in their 50s who reported that their health was “good” nevertheless questioned whether their health would remain at the levels required for the job, based on their perceptions of working with older colleagues. In other words, health was a big concern for these workers in the context of pressures to work longer.

**Table 6.3** Characteristics of the Hospitality Older Worker Sample

		All ( <i>n</i> = 22)	Women ( <i>n</i> = 14)	Men ( <i>n</i> = 8)
Type of job role	Blue Collar	12	6	6
	White Collar	3	3	0
	Supervisors	5	4	1
	Managerial	2	1	1
Self-reported health status	Good	8	5	4
	Fair	9	6	3
	Poor	4	3	1
	Unknown	1	1	0
Age	50–59	14	8	6
	60–69	8	6	2
	Total <i>N</i>	22	14	8

Source: Authors' analysis

### 6.4.2 Findings

The organization did not have any explicit policies focused around the ageing workforce. Managers and employees alike felt that extending working lives whilst reasonable if people wanted to do it was generally not what most people wanted. Tighter commercial circumstances were felt to be reducing what had in the past been an informal practice of providing lighter duties or redeploying people toward the ends of their working careers or following major health events. There were concerns among the managers that people might stay on for financial reasons when they were no longer fit or able to do the jobs well and that this might increase the need to performance manage people out. One manager said the following when asked if the rising state ages presented any problems:

Yeah, I mean inevitably it's going to give rise to [create problems] for management of organisations dealing with issues of ageing workforces. Are they still performing at the level that the role requires? That's the concern. Because obviously with ageing comes ill health, perhaps dropping performance, mental abilities start to deteriorate, people forget things, whatever, that can happen. And then I suppose it's people facing up to the fact that really can they still do the job or should they admit to themselves that actually it's time they did stop working and allowed someone else to come, with a new energy and a new take on things, to take things forward in the organisations they're working for. (Male line manager)

Following the abolition of the mandatory retirement ages by the UK government in 2011, the only time that managers appeared to get involved in retirement discussions was when performance was effected and the situation had to be managed. Managers were worried about initiating conversations about retirement in case it appeared discriminatory, and as a result there was a lack of clarity for employees about the retirement process and little information or support.

The employee respondents were asked about their retirement aspirations, when they would like to retire, when they thought that they would retire, and whether they

had considered gradual or phased retirement. The vast majority expected to retire at state pension age or later. Many wanted to retire earlier but did not see it as financially viable. Among the women there was a sense of injustice about the rapid rise in women's state pension age as many had spent their working lives assuming that they would be able to get their state pension at 60. As one female employee remarked:

'Cause, 'cause the government, you know, it's all very well going, "Oh, you can't retire till you're 57," erm, 67, sorry, not 57. But my life is nearly over by then. Come on, I've worked since I was 15, give a little bit, you know. It's not funny, is it really? (Female, aged 57, married, poor health)

Whilst most interviewees found the idea of phased retirement attractive most of the cleaning and catering staff did not think it was affordable to reduce their hours. When one interviewee was asked whether phased retirement had any appeal to him, he replied:

No, not really, no, 'cause of finance at the end of the day. You know, you've got to live at the end of the day and to live costs money, so at the end of the day I don't think I'll be able to do anything like that. (Male, aged 54, married, poor health)

The majority of employees did not acquire an occupational or personal pension until very recently, when most were "auto-enrolled" into a workplace scheme following government legislation. This meant that they had very little in the way of pensions savings although some women would have had access to husbands' pensions. They typically did not therefore have a secure financial route to retirement. The rise in state pension age for this group was thus keenly felt and was pushing many to try to work for longer than they had expected.

The employees were also asked about their working conditions and the nature of their work. Two main themes emerged from these discussions: (1) that the work itself in cleaning and catering was hard physical work, and (2) that the pace of work had intensified in recent years. For example, when one interviewee was asked if she had "quite a physical job" she replied:

Oh yeah, yeah. I haven't got any knees anymore [laughs]. (Female, aged 60, married, health fair)

Another interviewee commented:

Many times we sit here and we joke now, especially some of us that have been here 12 years or maybe longer and we've seen changes, and the job sort of gets more and more demanding and physical.... I dread to think what we're going to be like if we've got to stay to 67, because I know I won't be able to run around like I do now. (Female, aged 50, divorced, health fair)

A majority of the employees in these jobs had worked in similar manual work for most of their working lives. Whilst there was some discontent about the nature of the work, especially at advancing age, there was a strong sense of realism about the prospects for alternative work. The following were fairly representative comments:

As you get older, it is a lot harder to find a job. So I think, whereas if I was in my twenties and I was unhappy, I would go and find something else, you know, at my age, not so easy. (Female, aged 61, divorced, health fair)

At the end of the day, you know, you need the money. It's a job. There's not much out there so, you know, at my age I'm not going to change now. The older you get, you think well, you know, you're not going to find anywhere. (Female, aged 60, co-habiting, health fair)

In the interviews with employees, two other themes emerged strongly on how people talked about their experiences of working in older age and their prospects for retirement: finances and health. These two pressures worked in opposing directions; finances meant that it was necessary to carry on working whilst health and especially worsening health meant that people would have liked to be able to give up work if they felt their health was being compromised. The following quotes captured the mood of older workers in the organization:

I think finances is the big thing for everybody. I think most of the people probably, from maybe 58 upwards, would go if they could, because I think they'd rather be out there, living their life and doing what they want to do, pottering around their allotment or whatever, rather than coming here every single day. But I do think it's finances that stop them all. (Female, aged 50, divorced, fair health)

I'd like to go pretty soon, actually, but I can't afford it. It basically comes down to money, really. I mean, you're not going to get much in the State Pension and, you know, they keep putting the age up and quite frankly, I can't see me physically and mentally being able to do this job, you know, at those ages they're talking about. I think it's 66 for me. (Female, aged 60, cohabiting, fair health)

For a number of divorced women in the group, financial pressures were especially stark:

It does worry me about what am I going to be living on, what the State Pension's going to be 'cause they keep reducing and reducing all the welfare. (Female, aged 53, divorced, good health)

The workforce had many of the ailments typical for this age group and especially for those who have been manual workers for much or all of their working lives: arthritis, especially knees and hands; diabetes; general aches and pains and diminished ability to bounce back after long shifts. As one male employee remarked:

No, no. I think health is the thing that, you know, will be the biggest problem for most people, you know, can you physically keep on doing the job? (Male, aged 59, married, health fair)

The following exchange between the interviewer and an interviewee reveals that serious health problems were being hidden from a line manager because of fears that it might lead to the loss of a job that was needed for financial reasons:

I am finding it very, very tough and some days I think oh, God, I don't know how I'm going to carry on doing this. 'Cause I've had my letter from the pension people, "You can't retire till you're 67." [Laughs] I probably won't even [be] here by the time I'm 67.

[Interviewer:] So have you talked to your line manager about your osteoporosis?



No. I've kept it to myself and I know that's a bad thing and I shouldn't do it, but I cannot afford at this present time to lose my job.... So really you just really have to hide the problems so that you can keep going. (Female, aged 57, married, poor health)

There were no noticeable differences between the responses from the younger 50–59 age group and the 60+ respondents regarding the concerns over finances and health. The relatively long job tenure was reflected in the fact that despite the issues outlined above the majority of participants spoke of having a high level of commitment to—and pride in—their work. The organization in this case was a good employer by sector standards, but still the workforce was experiencing a range of pressures around the prospect of extending their working lives. Even in conditions relatively favorable for the sector, workers raised serious doubts about the feasibility and desirability of extended working lives.

## 6.5 Conclusions

In the context of rising state pension ages, governments in the UK and the USA have paid insufficient attention to the situation of older people with uncertain employment prospects and those exited from work “early” (Lain, 2016; Moen, 2016). Within the policy discourse, the emphasis has been an individual choice and the assumption is made that extended working lives are feasible and desirable on an almost universal basis. The less healthy and less wealthy have therefore largely been ignored in policy and in the research literature (Moen, 2016). Some academic research has emphasized the fact that it is advantaged people who have best employment prospects in older age, calling into question whether working longer is feasible for many disadvantaged people (e.g., Carr et al., 2018; Lu et al., 2017; Phillipson, 2018). This focus, whilst welcome, has tended to obscure the circumstances under which less advantaged people *do* manage to remain in employment. In this chapter, we showed statistical evidence that in both the USA and England, a significant minority of workers in physically demanding jobs and those with less advantaged health and education do work past 65. Qualitative evidence from UK hospitality workers in the second half of the chapter explored this in more depth. These workers were aged 50–67, which the quantitative analysis showed was a critical age range for remaining in work beyond age 65. This analysis showed that these low-paid workers often struggled to continue in their physically demanding jobs as their health worsened. The case of these workers illustrated the fact that extended working lives were not realistically feasible in many cases. At the same time, they could not afford to retire, and in a number of cases it was undesirable to expect them to continue working given their circumstances and the likely effects on their health.

It is important to note that this chapter is not arguing that people in physically demanding work or with low levels of health/education should be denied support to continue working in older age if they want to. In the UK, employers are expected to make “reasonable adjustments” to enable people with disabilities to do their jobs. It



has become easier over time for people to combine working with managing a health condition (Vickerstaff, Phillipson, & Wilkie, 2011). It would be possible to make an argument for extending the reasonable adjustments requirement to older workers although this would likely be unpopular with employers. It is important to note that the situation of older people with health conditions is slightly different from that of their younger counterparts. The likelihood of having a health condition increases as people age, which means that the older hospitality workers interviewed here had long careers in physically demanding work *before* they developed health problems. In the past, older workers may have been moved onto “light” duties, which were more compatible with diminishing health levels (Phillipson, 1982). In the current context, there are more competitive pressures on employers, which make it harder for them to find lighter duties for the increasing number of older people in work. Relatively few people are therefore able to move from physically demanding to sedentary employment in older age (Lain, 2016). We would of course encourage employers to make reasonable adjustments to make it easier for people with health conditions of all ages to work. However, it is hard to envisage how sufficient reasonable adjustments could be made to a job such as cleaning to enable some of the older people interviewed here to carry on doing them. Furthermore, there is little prospect that these workers will find non-manual jobs, given their work histories.

For these hospitality workers, health and lack of wealth were in direct conflict for many people—their health was failing but they could not afford to give up work. It is noteworthy that none of the interviewees saw disability benefits as a feasible financial pathway out of work. It is therefore essential that policymakers think more creatively about how to promote continued employment, without expecting individuals to continue working into much older age under such undesirable circumstances. One option for the UK would be to allow people to take their state pension early at a reduced level, as is possible from age 62 in the USA. In the USA, it has been suggested that the early Social Security age should be raised to 64, and the “normal” age increased to 69+ (National Commission on Fiscal Responsibility Reform, 2010). Consistent with the arguments made in this chapter, however, Moen (2016) argues against such a move in the USA:

It would be a disaster... [for] those with family-care responsibilities, with chronic or acute health conditions of their own, working in stressful or physically demanding job environments, with high job insecurity, or who have been already laid off. (p. 206)

In the UK, the provision of a reduced early pension is arguably impractical because the “full” state pension is provided at such low levels (Lain, 2016). An alternative, therefore, would be to provide an earlier full pension for those starting work at a young age; this shift would benefit many of those in physically demanding manual jobs. Another option is to promote employment beyond age 65 but accept the financial consequences of providing the “full” state pension at age 65 (Lain, 2016). In any case, the issue of extended working lives raises the importance of providing decent health-related benefits *before* state pension age, thereby enabling people to live in dignity without requiring them to work when it is damaging to their health and well-being. Many of the hospitality workers interviewed were suffering from

health conditions that were arguably exacerbated by continuing to do this work. The rhetoric of work being good for you, which has been another aspect of the government pronouncements on extending working lives, has been qualified to a degree in recognition that *good* work is good for you (Business, Energy and Industrial Strategy, 2018) whereas poor work may further entrench health and income inequalities.

Obviously, the extent to which older individuals will be compelled to continue working for financial reasons will vary between countries, and a key area for future research will be to examine how the late careers of less advantaged individuals are experienced and managed in different countries. This would include examining the range of options older workers feel they have with regard to retiring or continuing in employment. In addition, future research should examine the interaction between the workplace and household circumstances of less advantaged individuals and how this relationship influences continued employment (see Lain, Airey, Loretto, & Vickerstaff, forthcoming). Divorce and changing family forms, for example, are likely to place additional pressures on less advantaged individuals to continue working and needs to be examined in more depth.

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