As the Workforce Ages: Costs, Benefits and Policy Challenges

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What happens as the workforce ages? Do older workers have different needs than younger ones? Do they have different expectations in terms of salary and benefits? Are they treated differently by their employers? As indicated in the subtitle, this series of essays purports to consider the “Costs, Benefits, and Policy Challenges” of an aging workforce.

The volume originated with a 1991 conference on the topic, sponsored by Cornell University's School of Industrial and Labor Relations. Participants included experts from government, business, labor, and the social sciences. The collection is less diverse, since nine of the authors, as well as the editor, are economists. A demographer and a human resources expert contribute the remaining two chapters.

The book's three sections focus on international comparisons; possible job opportunities for an aging workforce; and the “policy challenges” of an older workforce. Two papers (Chaps. Two and Three) present a valuable look at the pitfalls of workforce predictions, given the difficulty of foretelling personal decisions regarding fertility, labor force activity, etc.

Some previously ignored issues receive attention. Chapter Ten explores the interrelation between worker disability and age related retirement, particularly for those disabled who lack job skills (pp. 211–214). The description of postcareer job placement for retired Japanese workers is fascinating, though it is questionable whether this approach would be acceptable in the American setting (p. 105).

On the other hand, some critical issues are ignored. Data on Social Security and pensions pertain primarily to males (Chaps. Eight and Nine), though the demographic data predict a considerable increase in women's labor force participation (p. 47). Also missing is an analysis of the problems of lost pensions, as companies are sold and pension rights disappear.

A major problem of the book is the uneven quality of its editing. The introduction, for example, includes the rather confusing suggestion that “... postretirement schemes ... offer reemployment opportunities for older workers who have the potential to become popular in the United States ...” (p. 9, ital. added). Is it the older workers who will become popular? Or is the author referring to reemployment opportunities which may become popular? At another point, the
strange word “3available” appears (p. 197). One wonders whether there may be similar inaccuracies in the tabular data, where the errors are not only more critical but also more difficult to detect.

An irritating feature for noneconomists is the use of economic jargon in the essays. Economists may understand that “OECD” is the “Organization for Economic Cooperation and Development” (Chap. Six), or that “LFPR” refers to “labor force participation rate” (Chap. Three), but others will find themselves constantly referring back to earlier pages to check their meanings.

What is the value of this book for a clinical sociologist?

The reader looking for social policy recommendations will be disappointed, as these are sparse. The essays focus on economic data; social or psychological data are largely ignored. The economic data and perspectives may prove useful for our own consulting efforts, however. Finally, the essays could be a useful tool for teaching students to use economic data in the development of policy recommendations.


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In 1982, Timothy Diamond, Ph.D., went to work for minimum wage as a nurses’ aide in a Chicago nursing home. He gave showers, made beds, cleaned feces from soiled linens, and fed elderly, incapacitated individuals who could not feed themselves. While performing these various tasks, Diamond learned about the structural components of the institutional system and the forces that prohibit normal quality of life for nursing home residents. Ten years later, Diamond accurately depicted the daily reality within America’s long-term care system in his book, Making Gray Gold.

Making Gray Gold is not merely another sociological ethnography, but rather a powerful outcry for reform of the American health care system. When Diamond began the project, he had been studying health care organizations as a sociologist for more than ten years and was teaching medical sociology at a local university. His motivation to learn more about nursing homes resulted from a number of factors, including the realization that very little was known about what actually goes on inside nursing homes, and the influence of feminist theory. Diamond was