

For Whom the Pandemic Tolls: A Person-Centric Analysis of Older Workers

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ABSTRACT

We offer a worker-centric perspective on the impact of the COVID-19 pandemic for the aging workforce. We briefly describe 3 broad characteristics of pandemics—mortality salience, isolation from the workplace, and rising unemployment—in terms of their associated pathways of influence on older workers, and recommendations for future research.

Pandemics refer to the spread of a physical disease that adversely affects an exceptionally high proportion of the world's population. Over the past half year, the COVID-19 virus has killed over half a million people around the world ([Johns Hopkins Coronavirus Resource Center, 2020](#)). In the absence of a treatment or vaccine, governments have implemented a variety of policies and procedures to slow the spread of the disease. In the United States, these policies led to a business shutdown during Spring, 2020, during which over 40 million workers or nearly 20% of the active labor force applied for unemployment benefits due to layoff or furloughs. According to the U.S. Bureau of Labor Statistics ([Bureau of Labor Statistics 2019](#)), approximately 1 in 5 adults aged 65 or older participated in the labor force prior to the pandemic, with nearly 75% of these individuals working at jobs where teleworking was not an option ([Gould 2020](#)). Given that the chance of infection, complications, and death from COVID-19 rise sharply after age 65 ([CDC COVID-19 Response Team 2020](#)), many older workers have faced or will face a difficult personal decision—lose their job or continue work and risk their health. Although the reopening of businesses in the United States is now underway, the pandemic will undoubtedly impose powerful economic, political, and even sociocultural consequences affecting organizations and workers for years to come.

This commentary offers a person-centered perspective on the putative processes and mechanisms by which a pandemic or other ubiquitous health event may impact older workers and the length of working lives. We also highlight current research gaps deserving of further empirical study. Our analysis and recommendations are broadly organized around three key features of the COVID-19 pandemic, namely its life-threatening nature, the mass exodus from communal workplaces, and the surge in unemployment (and subsequent rise in early retirement) associated with business disruption.

A CAVEAT REGARDING SOCIOECONOMIC STATUS AND DIFFERENTIAL RISK

The effects of any pandemic on working life must be understood in the context of an individual's life circumstances, beyond that of chronological age. A growing body of evidence shows that race, gender, education, and social capital contribute cumulatively across the lifespan to affect work and healthcare opportunities, and to increasing inequality in the United States. For example, in the United States, Blacks and underrepresented groups are overrepresented in occupations that pay low wages, often demand higher levels of physical labor, do not provide healthcare benefits, and/or provide insufficient pay for living in communities that support healthy behaviors (e.g., nutrition, social distancing) ([Berchick, Hood, & Barnett, 2018](#); [U.S. Bureau of Labor Statistics, 2018](#); [Collins, Asante-Muhammed, Hoxie, & Terry, 2018](#)). Compared to workers in professional, scientific, and managerial jobs, those in low-wage jobs typically have lower levels of education, do not possess the technical skills in high marketplace demand, and typically have fewer financial assets. For low-wage workers, job insecurity is often high and unemployment results in greater adversity in terms of meeting basic living needs than for higher-wage workers.

At the same time, low-wage workers are often employed in jobs that have been deemed “essential” despite the higher health risk associated with job performance ([McNicholas & Poydock, 2020](#)). As a consequence, both the overall health risk and financial risk for older workers engaged in low-wage work is substantially higher than for high-wage workers. The impacts of these differential risks, in turn, affect the physical and psychological pathways by which pandemics have their effects on workforce participation and well-being among older adults. In short, the physical and psychological risks of the COVID-19 pandemic for older workers are not uniform; they depend in large part on

the socioeconomic context surrounding each individual. This context should be taken into account when considering the three research gaps highlighted in this commentary, as well as when conducting related work in the future.

PANDEMICS AND MORTALITY SALIENCE

Pandemics put one's mortality into sharp relief. In this pandemic, where mortality rates are highest among people over age 65, older adults are likely to experience greater death anxiety than younger adults. Although we know that a worker's health is an important determinant of workforce exit (Shultz & Wang, 2011), it is not clear how public health recommendations that repeatedly use chronological age to identify people with high illness *susceptibility* (e.g., describing people over age 65 as "high risk") increases older workers' awareness of their relative vulnerability and affects their decisions about whether, when, and how to continue working. Some may return to work as usual, while others may use the pandemic as an opportunity for occupational self-reflection that leads to the pursuit of more meaningful or purposive jobs. Still, others may transition to retirement.

Consistent with findings by Yaakobi (2015), workers high in work centrality may increase their commitment to working as a means of reaffirming their cultural worldview, whereas employees who derive more meaning from other life spheres (e.g., family) may be less inclined to continue working. Indeed, a recent study has found that many of the recently unemployed individuals in the United States are not currently looking for work and that the percentage of individuals who claim to be retired has already risen substantially (Coibion, Gorodnichenko, & Weber, 2020). We propose that the pandemic has brought human mortality to the forefront of national discussions and that this could have a profound impact on the ways in which older workers navigate exit decisions. Many older workers who previously considered themselves to be in relatively good health must now consider potentially life-threatening consequences of returning to the workplace.

Given the current circumstances, future research might consider the influence of mortality salience on decision-making, specifically in older populations. While previous findings suggest that traditional mortality salience manipulations may not impact older adults to the same extent as younger adults (e.g., Maxfield et al., 2007), it is plausible that a global health crisis—in this case, one in which older people may be especially vulnerable—has a more powerful influence on retirement intentions than any experimental manipulation. More work is needed to explore how mortality salience and even autobiographical memories aroused during the pandemic influence retirement decisions. K-12 teachers and nurses are occupations that involve high levels of exposure to potential illness from others (Baker, Peckham, & Seixas, 2020; Gratz & Claffey, 1996; Nichol et al., 2008). In contrast, other occupations (e.g., managers and analysts) may be more malleable with respect to the extent to which the work demands social exposure. For example, among programmers working from home, a pandemic's effects on mortality salience may be limited to those people the worker knows who have become ill. In contrast, we expect that mortality salience will be stronger among older health care providers working in hospital emergency rooms that deal with COVID-19 patients daily. Research investigating the impact of mortality salience and work exit

decisions among older workers in these society-critical positions may prove particularly fruitful, as well as practically useful.

PANDEMICS, REMOTE WORK, AND LEARNING

As a result of the pandemic, the number of people working from home swelled to approximately 49% of the U.S. workforce by April 2020 (Brynjolfsson et al., 2020). Although there is a substantial literature on telework and other forms of remote work (Daniels, Lamond, & Standen, 2001; Greer & Payne, 2014; Morgeson, Major, Oborn, Verive, & Heelan, 2010), the transition to working from home to avoid illness warrants additional examination. In the United States, the workplace exodus of non-essential workers was driven largely by government order and occurred over a relatively short time (weeks). Many workers established a new workspace in their home and continued communicating with coworkers, clients, and supervisors over the internet or telephone.

At first glance, working from home during a pandemic would seem advantageous to older employees who desire greater autonomy and flexibility in the completion of job tasks. However, anecdotal reports suggest that working exclusively from home may have drawbacks for older workers who prize workplace sociality. We suspect that the transition to working from home during the pandemic has greatly reduced opportunities for informal social interactions with colleagues and supervisors that importantly contribute to the satisfaction of belongingness motives (Kooij et al., 2011). Frustration related to these motives can, in turn, stimulate a negative spiral in which an older worker's decline in work engagement and organizational/team identity results in increased ageism by his/her team and a further sense of alienation (Stamov-Roßnagel & Hertel, 2010).

Another potential drawback of the working from home arrangement pertains to the difficulty in modifying long-standing attitudes and routines related to work/non-work boundaries. For example, individuals may be distinguished by whether they prefer to "segment" or "integrate" work and family time and activities (Nippert-Eng, 1996). Among older "segmenter" workers with a decades-long history of working away from home (e.g., in the office), working from home requires a resetting of the physical and psychological boundaries around work time that may increase stress, family conflict, and the sense that one is fast approaching retirement. Identifying individual differences in preferences for managing work/non-work boundaries can be expected to further improve our understanding of successful work transitions in later adulthood. Although we could find no studies investigating age-related differences in work/non-work boundary preferences, further attention is recommended to examining the influence of age-related changes related to care-taking demands (e.g., parental care) and physical capacities (e.g., shorter work periods) on boundary preferences and the desirability of remote work.

The transition to working from home during this pandemic also underscores the critical role that agility and learning play in determining employability during later adulthood. During this pandemic, many employees were required to learn how to use new information and communication technology platforms (e.g., Zoom). Older adults with strong self-directed learning strategies and skills for learning new technologies were likely to have greater success and less stress in making the transition. For older adults, the motivation and capacity to develop new work skills may serve as a powerful predictor

of survival in the post-pandemic workforce. Although most scholars agree that new skill learning is fast becoming an integral feature of workability (Beier, Teachout, & Cox, 2012), there is surprisingly little empirical work on the strategies that adults use to learn new skills and procedures, and the potential moderating role of age in strategy use during skill learning (Ackerman & Kanfer, 2020).

PANDEMICS, UNEMPLOYMENT, JOB SEARCH, AND WORK EXIT

Pandemics disrupt economic activity and increase unemployment. Most job losses in the current pandemic occurred as a consequence of non-essential business shutdowns or through employee inability to continue working (e.g., illness, need to provide caregiving). Among older workers engaged in “essential work” or employed in jobs that cannot be performed remotely, attendance often reflects a “wealth versus health” decision. Research to better understand how older adults in these contexts arrive at these decisions, the stability of such decisions, and the impact of these decisions on subsequent physical and mental health is urgently needed for the ultimate development of programs to help older, low resource workers safely navigate a pathway to longer working lives and higher levels of worker well-being.

In contrast to unemployment during a recession, unemployment during an infectious disease outbreak is widespread and less industry-specific, amplifying competition for available positions. But arguably, the most important concern pertains to the fact that the COVID-19 pandemic is occurring in the midst of a technology and automation revolution. Although the pandemic served as the proximal determinant in layoff decisions, rehiring patterns may be importantly affected by the extent to which companies anticipate that they can do away with or automate routine job tasks and so reduce labor costs going forward. At the same time, new jobs (e.g., COVID testers; computer user support specialists) are likely to emerge for older adults who are able and motivated to engage in lifelong learning.

Nonetheless, in this environment, job insecurity among retained older employees is likely to be high and successful job search expectations among unemployed, older job seekers low (Wanberg et al., 2016). Further, job layoffs and prolonged job search can be expected to facilitate the development of a shorter occupational time perspective that promotes an “unplanned, reluctant retirement” decision, despite both a desire and ability to work. For example, individuals may decide to retire as a result of the negative affect that accompanies unsuccessful job search (Wanberg, Zhu, Kanfer, & Zhang, 2012) and/or the perceived health risks for continued employment. Previous work has examined perceptions of involuntary retirement (due to disability, caregiving responsibilities, etc.) in older workers (e.g., Szinovacz & Davey, 2005). However, past work has been in the context of individual workers’ circumstances rather than an omnipresent life-threatening risk to older individuals in general. Coupled with the trend toward age-management policies designed that may exacerbate ageism, COVID-19 may represent a type of black-swan event that exerts lasting negative psychological impact on older workers’ expectations about their work future and its sequelae.

For older adults who do not exit the workforce, research is also needed to identify the key contextual and person determinants and processes that govern job search activities, new skill learning, and work withdrawal as the pandemic wanes. A recent meta-analysis found that older workers face unique challenges in employing effective job search

strategies as well as greater obstacles to reemployment (Wanberg et al., 2016). Consistent with recommendations made by van Hooft et al. (in press), we suggest that successful job search and reemployment for older workers in the wake of COVID-19 should require greater attention to the individual’s job search skills and the socioeconomic, psychological, and technical capital available and used by the individual to identify job prospects. In addition to the considerations for future research suggested in previous sections (e.g., differential risk, mortality salience, and skill learning), practitioners should take these factors into consideration when designing reemployment interventions targeted at older workers.

SUMMARY

In the modern world, good health and sufficient resources to support one’s physical and psychological needs arguably represent the two overarching life goals for most adults. For many older adults, infectious disease outbreaks such as COVID-19 directly threaten the first goal and exert selective, indirect effects on the second goal. Research is needed to fill large gaps in our knowledge about how pandemics affect older adult need profiles, including how increased mortality salience changes attitudes and behaviors, how changes in one’s workplace affect feelings of social isolation and work motivation, and who chooses unplanned, forced retirement. COVID-19 is the fifth pandemic to affect the United States over the past century and is likely not the last. In the context of an aging workforce, we believe that research conducted now to better understand how such events affect personal and employment dynamics among older workers is an excellent investment for the future.

REFERENCES

- Ackerman, P. L., & Kanfer, R. (2020). Work in the 21st century: New directions for aging and adult development. *American Psychologist*, 75(4), 486–498. doi:10.1037/amp0000615
- Baker, M. G., Peckham, T. K., & Seixas, N. S. (2020). Estimating the burden of United States workers exposed to infection or disease: a key factor in containing risk of COVID-19 infection. *PLoS One*, 15(4), e0232452.
- Beier, M. E., Teachout, M. S., & Cox, C. B. (2012). The training and development of an aging workforce. In J. W. Hedge & W. C. Borman (Eds.), *The Oxford handbook of work and aging* (pp. 436–453). London, UK: Oxford University Press.
- Berchick, E. R., Hood, E., & Barnett, J. C. (2018). *Health insurance coverage in the United States: 2017. Current population reports*, P60–264. Washington, DC: U.S. Government Printing Office. <https://www.census.gov/content/dam/Census/library/publications/2018/demo/p60-264.pdf>
- Bureau of Labor Statistics (2019). *Employment status of the civilian noninstitutional population by age, sex, and race (Table 3)*. Labor Force Statistics from the Current Population Survey. Retrieved from https://www.bls.gov/cps/cpsaat03.htm#TB_inline?height=200&width=325&inlineId=cps_program_links
- Brynjolfsson, E., Horton, J., Ozimek, A., Rock, D., Sharma, G., & TuYe, H. (2020). *COVID-19 and remote work: An early look at US data* (NBER Working Paper No. 27344). Retrieved from National Bureau of Economic Research. <https://www.nber.org/papers/w27344>

- CDC COVID-19 Response Team. (2020). Severe outcomes among patients with coronavirus disease 2019 (COVID-19)—United States, February 12–March 16, 2020. *MMWR Morbidity and Mortality Weekly Report*, 69(12), 343–346. doi:10.15585/mmwr.mm6912e2
- Coibion, O., Gorodnichenko, Y., & Weber, M. (2020). *Does policy communication during COVID work?* (NBER Working Paper No. 27384). Retrieved from National Bureau of Economic Research. <https://www.nber.org/papers/w27384>
- Collins, C., Asante-Muhammed, D., Hoxie, J., & Terry, S. (2018). *Dreams deferred: How enriching the 1% widens the racial wealth divide*. Washington, DC: Institute for Policy Studies. https://ips-dc.org/wp-content/uploads/2019/01/IPS_RWD-Report_FINAL-1.15,19
- Collins, J. P., & Shane, A. L. (2018). Infections associated with group childcare. *Principles and Practice of Pediatric Infectious Diseases*, 24, 25–32. doi:10.1016/B978-0-323-40181-4.00003-7
- Daniels, K., Lamond, D., & Standen, P. (2001). Teleworking: Frameworks for organizational research. *Journal of Management Studies*, 38(8), 1151–1185. doi:10.1111/1467-6486.00276
- Gould, E. (2020). *Older workers can't work from home and are at higher risk for COVID-19*. Washington, D.C.: Economic Policy Institute: Working Economics Blog.
- Gratz, R. R., & Claffey, A. (1996). Adult health in childcare: Health status, behaviors, and concerns of teachers, directors, and family childcare providers. *Early Childhood Research Quarterly*, 11, 243–267. doi:10.1016/S0885-2006(96)90008-3
- Greer, T. W., & Payne, S. C. (2014). Overcoming telework challenges: Outcomes of successful telework strategies. *The Psychologist-Manager Journal*, 17(2), 87. doi:10.1037/mgr0000014
- van Hooff, E. A. J., Kammeyer-Mueller, J. D., Wanberg, C. R., Kanfer, R., & Basbug, G. (in press). Job search and employment success: A quantitative review and future research agenda. *Journal of Applied Psychology*.
- Johns Hopkins Coronavirus Resource Center (2020). *Global Deaths*. <https://coronavirus.jhu.edu/>
- Johnson, R. W., & Wang, C. X. (2017). *What are the top jobs for older workers?* Washington, D.C.: Urban Institute.
- Kooij, D. T. A. M., DeLang, A. H., Jansen, P. G. W., Kanfer, R., & Dijkers, J. S. E. (2011). Age and work-related motives: Results of a meta-analysis. *Journal of Organizational Behavior*, 32, 197–225. doi:10.1002/job.665
- Maxfield, M., Pyszczynski, T., Kluck, B., Cox, C. R., Greenberg, J., Solomon, S., & Weise, D. (2007). Age-related differences in responses to thoughts of one's own death: Mortality salience and judgments of moral transgressions. *Psychology and Aging*, 22(2), 341–353. doi:10.1037/0882-7974.22.2.341
- McNicholas, C., & Poydock, M. (2020). *Who are essential workers? A comprehensive look at their wages, demographics, and unionization rates*. Washington, D.C.: Economic Policy Institute: Working Economics Blog.
- Morganson, V. J., Major, D. A., Oborn, K. L., Verive, J. M., & Heelan, M. P. (2010). Comparing telework locations and traditional work arrangements. *Journal of Managerial Psychology*, 25(6), 578–595.
- Nichol, K., Bigelow, P., O'Brien-Pallas, L., McGeer, A., Manno, M., & Holness, D. L. (2008). The individual, environmental, and organizational factors that influence nurses' use of facial protection to prevent occupational transmission of communicable respiratory illness in acute care hospitals. *American Journal of Infection Control*, 36(7), 481–487. doi:10.1016/j.ajic.2007.12.004
- Nippert-Eng, C. E. (1996). *Home and work: negotiating boundaries through everyday life*. Chicago, IL: University of Chicago Press.
- Shultz, K. S., & Wang, M. (2011). Psychological perspectives on the changing nature of retirement. *American Psychologist*, 66(3), 170–179. doi:10.1037/a0022411
- Stamov-Roßnagel, C. & Hertel, G. (2010). Older workers' motivation: Against the myth of general decline. *Management Decision*, 48(6), 894–906. doi:10.1108/00251741011053451
- Szinovacz, M. E., & Davey, A. (2005). Predictors of perceptions of involuntary retirement. *The Gerontologist*, 45(1), 36–47. doi:10.1093/geront/45.1.36
- U.S. Bureau of Labor Statistics (2018). *Median usual weekly earnings of full-time wage and salary workers by gender, race, and Hispanic or Latino ethnicity, 1979-2018 annual averages (Table 16)*. Labor Force Characteristics by Race and Ethnicity, 2018. Retrieved from <https://www.bls.gov/opub/reports/race-and-ethnicity/2018/home.htm>
- U.S. Bureau of Labor Statistics (2019a). Labor force characteristics by race and ethnicity, 2018. BLS Reports, Report 1082. <https://www.bls.gov/opub/reports/race-and-ethnicity/2018/home.htm>
- U.S. Bureau of Labor Statistics (2019b). Table 1. Workers who could work at home, did work at home, and were paid for work at home, by selected characteristics, averages for the period 2017–2018. Economic News Release. <https://www.bls.gov/news.release/flex2.t01.htm>
- Wanberg, C. R., Kanfer, R., Hamann, D. J., & Zhang, Z. (2016). Age and reemployment success after job loss: An integrative model and meta-analysis. *Psychological Bulletin*, 142(4), 400–426. doi:10.1037/bul0000019
- Wanberg, C. R., Zhu, J., Kanfer, R., & Zhang, Z. (2012). After the pink slip: Applying dynamic motivation frameworks to the job search experience. *Academy of Management Journal*, 55(2), 261–284. doi:10.5465/amj.2010.0157
- Yaakobi, E. (2015). Desire to work as a death anxiety buffer mechanism. *Experimental Psychology*, 62, 110–122. doi:10.1027/1618-3169/a000278